

FAMILY DEVELOPMENT —
A CAREGIVER'S GUIDE

Pinwheels for Prevention® 2012



Pinwheels for
PREVENTION



INSIDE FRONT COVER

INSIDE BACK COVER



Dear Parent or caregiver:

Like their bodies, children's brains still have a lot of growing to do after they are born. What children learn through their early interactions with parents and caregivers becomes the foundation for all future development. Research shows that nurturing relationships and safe, secure environments improve brain development and child well-being.

Parents and caregivers who have a social network and concrete support in times of need are better able to provide safe environments and nurturing experiences for their children. All families need a helping hand at some point, so we want to be sure you know that help is available when you need it.

This book provides information about:

- Child development from birth through the teen years
- Tips for creating the stimulating and nurturing environments children need
- Tips for managing the challenges of family life
- Contact information for valuable community resources

Remember, it is also important for you to take good care of yourself physically, mentally and emotionally. When you are feeling good, it is easier to be a positive, loving parent and do all you need to do to care for your child.

The **Parent Helpline** is also an excellent source of additional information. Their friendly staff can answer questions about parenting and child development and can connect you to service providers in your local community. You can call the Parent Helpline by dialing **1-800-FLA-LOVE (1-800-352-5683)**. The call is free and confidential.

We hope you use the resources in the following pages as a guide for what you can expect as your child develops. We also encourage you to talk to your child's doctor or other professionals if you have any questions or concerns about your child.



Pinwheels for
PREVENTION[®]



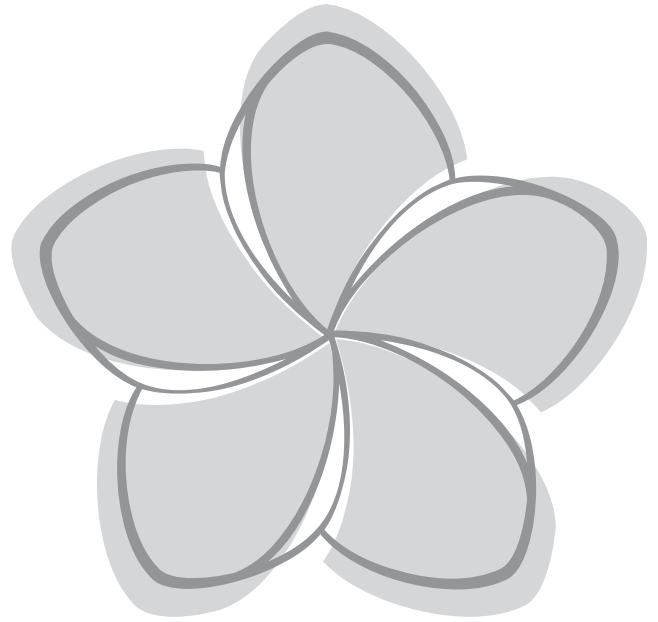



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WHY THE EARLY YEARS ARE SO IMPORTANT



While children's brains will continue to develop throughout their lives, the most active period of brain development begins during the last trimester of pregnancy and lasts until 18 months of age. During this period, how well a child's physical, social and emotional needs are met affects how the child's brain will grow and develop. Understanding how children grow and learn will help you know what to expect and what you can do to help your child develop all of his or her abilities.

The four main areas of child development are **physical, social, emotional and cognitive**.

Physical Development is the growth of the human body including: height, weight, muscles and the five senses (sight, hearing, taste, touch and smell). Coordination of large and small muscle movements is also part of physical development.

Social Development is the ability to connect with others, understand rules and develop values, and cooperate as member of a family, peer group and society.

Emotional Development is the ability to understand and express feelings and control emotions.

Cognitive Development is the ability to learn and to use logic and reason to solve problems.

Development in each of the four areas is tightly connected. For example, learning to talk requires hearing (physical), the ability to understand different sounds (cognitive), the ability to pay attention (social) and the ability to interact with others (emotional). Failing to progress in one area affects the ability to progress in all other areas.

Development in each of these areas happens in stages and each child will develop at his or her own rate. Developmental guidelines simply show what a child of that age could do—if not right now, then soon. If your child was premature, keep in mind that babies born early usually need a bit more time to meet their milestones. Professionals like doctors, nurses, early learning providers and home visitors can help you track your child's development, identify possible concerns and make referrals for help when needed. Discovering and treating health issues or developmental delays early can help prevent more serious problems later in life.

A Word about Discipline and Safety

As children grow and develop, their needs for discipline and safety will change. Discipline, which means "to teach," is not something infants or toddlers can understand. They also do not understand danger. Babies are curious and will play with just about anything. The only way to discipline an infant is to make sure they are safe in their surroundings so they can explore and learn about the world. For example, if you do not want your baby to stick his finger in the electrical outlet, then you need to cover the outlet with safety caps. More examples of how to meet your child's needs for discipline and safety at each stage of development are included in the following pages of this booklet.

WORTH NOTING

CHILDPROOFING alone will not keep your child safe. Childproofing increases the amount of time it takes for your child to get into a dangerous situation, but it does not replace ADULT SUPERVISION.



YOUR CHILD AT BIRTH



The moment you've been dreaming of has finally come! You are now the proud parent of a tiny little bundle of joy. Feeling anxious? Overwhelmed? Exhausted? Then it's official, you are a new parent! You may be surprised by all of the new emotions, new experiences and new worries that come along with your new baby. As you begin to adjust to your new life, try to remember that getting as much information and support as you can now will help you make the best decisions for your family in the days ahead.

Crying The average newborn cries two to three hours a day, and sometimes more. Babies this age may cry for no reason and a parent may not be able to stop the baby from crying. For tips on Coping with Crying, turn to page 9.

Sleep Newborns may sleep up to 20 hours a day, but will not have any sort of sleep pattern for the first two months. It can take up to six weeks

for babies to learn to be awake during the day and asleep at night. Let babies form their own schedule by feeding them when they are hungry and putting them to bed when they seem tired.

Nutrition Newborns need to be fed every two to four hours. The American Academy of Pediatrics and many other worldwide organizations strongly support breastfeeding. Baby formula is a popular alternative to breastfeeding for infants less than one year of age. To meet your baby's nutritional needs, baby formula must be prepared exactly as described on the container.

Physical Development Many babies lose a little weight (5–7% of birth weight) during the first few days of life. They will usually return to their birth weight within two weeks as they begin to eat more during feedings. After the first two weeks, newborns typically gain around one ounce per day for the first two months.

- Has almost fully developed senses of taste and smell
- Sees objects best when they are 30 to 40 inches away from face; eyes cannot yet fully focus at close range
- Tries to lift head and look around

Social and Emotional Development

- Recognizes voices of mom and dad
- Recognizes familiar caregivers
- Looks at parents when they talk
- Quiets when a voice is heard

Cognitive Development Babies respond purely through reflexes at birth. Some common reflexes are:

- *Grasp reflex:* baby will tightly grasp objects placed in hand
- *Sucking reflex:* baby begins sucking when mouth area is touched
- *Startle reflex:* baby pulls arms and legs inward after hearing a loud noise
- *Step reflex:* baby makes stepping motions when sole of foot touches a hard surface





Your Newborn's Safety

Safe Infant Sleep According to the American Academy of Pediatrics, babies are safest when sleeping alone, on their backs in a crib near their parents' bed for the first six months of life. The American Academy of Pediatrics also recommends the following:

- The crib mattress should fit tightly in its frame and have a snug fitted sheet
- The crib should be undamaged and meet current Consumer Product Safety guidelines (www.cpsc.gov)
- If a blanket is needed, babies should be placed near the foot of the crib and a thin blanket should be tucked around the sides and bottom of the mattress to avoid covering the baby's head
- No other objects should be placed in the crib
- The crib should always be placed in a room that is smoke free
- Offering a pacifier has also been linked to a decreased risk of Sudden Infant Death Syndrome (SIDS)

For more information on infant sleep, see pages 5–6.

Other Safety Tips for Newborns A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

Most INFANT FALLS are from furniture. Help prevent falls by:

- Never leaving your baby unsupervised on any surface above the floor
- Always using the safety belts on changing tables, bouncy seats and swings

Most BURNS IN CHILDREN UNDER FIVE are caused by scalding liquids. Help prevent burns by:

- Setting your hot water heater to 120 degrees Fahrenheit or below
- Never carrying hot liquids while carrying your infant
- Never warming baby bottles in the microwave—microwaves heat unevenly and your baby may be burned by hot spots

DROWNING can happen quickly and silently. Help prevent drowning by:

- Always staying with your baby during bath time
- Never leaving an older child to watch your baby near the water

Many everyday items can cause CHOKING OR SUFFOCATION in infants. Help prevent choking and suffocation by:

- Removing small objects and plastic bags from your baby's environment
- Keeping balloons, blind cords and strings away from your baby

You can keep your infant safe and help prevent MOTOR VEHICLE INJURIES by:

- Always placing your newborn in a rear facing infant car seat whenever you travel in a vehicle
- Never leaving your infant alone in the car—even in mild weather, the temperature inside a car can reach dangerous levels in minutes



Positive Parenting Activities that Promote Nurturing and Attachment

- Breastfeeding
- Responding promptly to your baby's cries
- Rocking, singing and comforting your baby
- Maintaining loving relationships with other caregivers
- Keeping primary caregivers consistent over time so attachments can form

HERE'S HELP

Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



Safe Sleep for Your Baby



Consider these facts before you decide where your baby will sleep:

- Suffocation and strangulation in an adult bed is the leading cause of injury-related death for infants under one year of age in the state of Florida.
- The risk of sleeping-related infant death is 40 times higher for babies who sleep in adult beds compared to babies who sleep in their own cribs.

“The safest place for an infant to sleep is alone in a crib, in the parents’ room for the first six months of life.”

— *The American Academy of Pediatrics*

To lower the risk of sleep-related infant death and keep your baby safe while he or she sleeps, it is important to:

- Place babies on their backs (face up), every time they sleep. Sleeping on the stomach or side increases the risk of suffocation. Once an infant can roll from back to stomach and stomach to back, the infant can remain in the sleeping position they choose.
- Make sure your baby’s crib is in good condition and meets current Consumer Products Safety Commission standards (www.cpsc.gov).
- Use a firm crib mattress that fits tightly in the crib’s frame and cover it with only a tightly fitted sheet.
- Keep soft objects and loose bedding (pillows, quilts, comforters, sheepskins, toys, etc) out of your baby’s crib.
- Place your baby’s crib close to your bed until your baby is six months old. Infants may be brought into the bed for feeding or comforting, but should be returned to their own crib or bassinet when the parent or caregiver is ready to return to sleep.
- Keep all loose strings (i.e. blind cords, electrical cords and clothing) away from your baby’s crib.
- Keep the room temperature of your baby’s sleeping area comfortable for a lightly clothed adult. This will help keep your baby from getting too hot or overheated.
- Use infant sleep clothing designed to keep your baby warm without the possible hazard of head covering or entrapment; but over-bundling should be avoided due to the possibility of overheating. Infants are typically comfortable with one layer more than an adult would wear to be comfortable in the same environment.
- Offer your baby a pacifier*, but never a bottle, at naptime and bedtime. If your baby doesn’t want the pacifier, don’t force it. If breastfeeding, wait until breastfeeding is well established before offering a pacifier.
- Avoid exposing your baby to smoke both during pregnancy and after birth, as exposure to smoke is a major risk factor for SIDS.
- If your baby’s crib has a mobile, make sure it is out of your baby’s reach. Once your baby can sit up, remove the mobile.
- To keep your baby from falling out of the crib, lower the mattress when your baby learns to sit, and again when he learns to stand.
- Respond to your baby’s cries during the night.

HERE’S HELP

Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.

*IMPORTANT NEW INFORMATION!

Research shows that using a pacifier may decrease SIDS. The American Academy of Pediatrics recommends pacifier use throughout the first year of life. Here are some tips for pacifier use:

- The pacifier should be used when placing the infant down for sleep. It is okay if they baby spits it out during sleep.
- If the infant refuses the pacifier, he or she should not be forced to take it.
- Pacifiers should not be coated in any sweet solution.
- Pacifiers should be cleaned often and replaced regularly.



Better Sleep for You and Your Baby

AS WITH EVERY NEW SKILL YOUR BABY LEARNS, falling asleep in a crib may take practice. Your baby may cry when first put in the crib. This is normal and should be expected. There are a lot of things you can do to help your baby settle down for bed and feel more comfortable sleeping in a crib. Every baby is unique, so you may need to try a few times before you figure out exactly what your baby likes best.



IMPORTANT INFORMATION!

Sleeping with your baby is dangerous.

Even if your baby is breastfed and you don't smoke, drink alcohol or use drugs or other medications, **sleeping with your baby still increases your baby's risk of suffocation or strangulation while sleeping.** The only way to protect your baby from higher risk is to have your baby sleep alone in a crib.



10 tips to help your baby sleep at night

1. Make sure your baby has active playtime, such as “tummy time,” during the day.
2. Respond to your baby's needs quickly during the day to reduce your baby's stress.
3. Allow for skin-to-skin contact during the day.
4. Keep a consistent schedule for meals, naps and bedtime.
5. Use a bedtime routine of three or four relaxing activities to help your baby wind down (giving your baby a bath, gently massaging muscles, and then spending a short period of quiet time together). Research has shown that babies who have a bed time routine fall asleep 30% faster, wake up 50% less often, and sleep for longer stretches of time.
6. Talk or sing softly to your baby before bed. Just the sound of your voice is very soothing to your baby.
7. Put your baby in the crib when he or she begins to look tired, but is still awake. Putting babies to bed while they are tired, but still awake, helps them learn to fall asleep on their own.
8. If your baby seems restless at bed time, put your baby to bed 30 minutes earlier. When babies become overtired, they sometimes become energetic and fight off sleep.
9. Play soft music, turn on a fan or put a ticking clock near your baby's crib. Listening to repetitive sounds lulls babies off to sleep. Continuing normal household activities while babies sleep helps them learn to sleep without silence.
10. Place a warm towel down on your baby's sheet and remove it just before you place your baby down.

If you have tried all of these suggestions and your baby is still not sleeping well, talk to your baby's nurse or doctor. There may be a medical reason for your baby's restless nights.

**For more information on safe infant sleep,
visit www.ounce.org/safe-sleep.html**



YOUR CHILD AT TWO MONTHS



Your baby is growing very quickly and learning a lot. Your baby's brain is developing through a series of back and forth interactions. Babies and young children naturally reach out for interaction by babbling and making facial expressions. By consistently responding to these efforts in a warm and loving way, you are creating a nurturing environment. At this age, it's important to spend a lot of time cuddling, playing, reading and talking with your baby. Over time, these interactions help infants form strong attachments with their parents. These early attachments create patterns for the way the child connects with people later in life.

Sleep Although your baby is sleeping for longer stretches of time (4–6 hours), it is still too early to have a set sleep schedule. There are some activities that may help your baby learn to be more active during the day and encourage nighttime sleep. For more information, turn to *Better Sleep for You and Your Baby* on page 6.

Nutrition At this age, your child only needs breast milk or formula. Your baby is not ready for cereal or any solid food at this age. Babies usually need 4 to 5 ounces of breast milk or formula per feeding, or 20 to 25 ounces per day.

Physical Development

- Wiggles and uses body language to tell you how he feels
- Uses muscles in arms and legs to grab or kick at toys or people
- Holds his head up on his own, but still needs your careful support when being held

Social and Emotional Development

- Smiles at you when he wants to play
- Frowns or cries to show sadness
- Responds with pleasure when primary caregiver arrives
- Copies your movements and facial expressions
- Likes to be around other children

Cognitive Development

- Uses taste, touch, smell, sight, and sound to learn about the environment
- Cries when hungry, needs to be changed, or wants attention
- Makes cooing sounds to get your attention, and will coo even more when you respond
- Makes different sounds to tell you if he is hungry, wet, tired, or wants a change of position
- Recognizes mother or primary caregiver
- Follows moving objects with eyes



Additional Safety Tips for Your Baby at Two Months

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Help prevent fires by keeping nightlights at least three feet away from the crib, bedding and draperies
- Help prevent poisoning by removing poisonous plants from in and around the home
- Help prevent burns from hot car seat surfaces by using window shades or coving your baby's car seat with a light blanket when the car is parked



Positive Parenting Activities that Promote Nurturing and Attachment

- Always respond to your baby's cries and try to figure out what your baby is trying to say to you
- When you hear your baby cooing, coo, sing or talk in return
- Hold and touch your baby as much as possible
- Look into your baby's eyes and talk to your baby during feedings and diaper changes
- Practice being patient. Having patience is very important for your child's overall development. Babies are just learning what is in the world; it will take time before they know how to behave in it!



When to be Concerned

While each baby develops at his or her own pace, you should be aware of certain milestones your child should be reaching. Failure to reach certain milestones may be a sign of medical or developmental problems requiring special attention. You should let your baby's doctor know if your child:

- Doesn't seem to respond to loud sounds
- Doesn't notice hands by two months
- Doesn't smile at the sound of your voice by two months
- Doesn't follow moving objects with eyes by three months
- Doesn't grasp and hold objects by three months
- Doesn't smile at people by three months
- Cannot support head well at three months
- Doesn't reach for and grasp toys by four months
- Doesn't babble by four months

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



Coping with Crying

TAKING CARE OF A BABY CAN BE FUN AND REWARDING. But when your baby won't stop crying, it can be upsetting for you and other caregivers. It is normal for your baby to cry. The average newborn cries two to three hours a day, and sometimes more. Sometimes it may seem like your baby never stops crying; and non-stop crying is hard for all parents to cope with.

- Crying happens most often in the evenings
- Crying may start or stop without any clear reason
- Crying may not stop no matter what you do
- Your baby's crying will not harm him or her



It may seem like your baby cries more than others, but **ALL babies cry a lot**. You can try the following things to help soothe your baby:

- Check your baby's basic needs: feed, burp or change baby's diaper if needed
- Make sure your baby's clothing is not too tight, too hot, too cold, etc.
- Offer your baby a pacifier, but never force it

All babies cry, often without any known cause. If your baby is warm, dry and well-fed but still won't stop crying; try these tips for **soothing babies**:

- Gently rock your baby in a rocking chair or in your arms
- Softly pat your baby on the back
- Sing or talk softly to your baby
- Play soft music
- Take your baby for a walk in the stroller
- Give your baby a warm bath

Ways to **handle your frustration** when your baby is crying:

- First, put your baby in a crib, make sure the baby is safe, and close the door; check on the baby every 5–10 minutes
- Take a bath or shower, exercise or play music
- Call a trusted friend, relative, or neighbor and ask them to come over to watch the baby and give you a break
- Sit down, close your eyes and take 20 deep breaths
- Think about how much you love your baby
- Call 1-800-FLA-LOVE (1-800-352-5683)

Dealing with a crying baby can be very stressful, but **NEVER SHAKE YOUR BABY!** Shaking a baby can cause blindness, brain damage or even death. If you are feeling overwhelmed, it is important to reach out for support. Ask a family member or trusted friend to watch the baby and give you a break, or call Florida's Parent Helpline. Allowing yourself to take a break to nurture yourself will help you cope with the demands of nurturing your baby.



Soothe, Don't Shake Your Baby

Everyone that cares for your child should know about Shaken Baby Syndrome. Shaken Baby Syndrome (SBS) is one of the most common injuries causing death by physical abuse to infants in Florida. SBS occurs when a frustrated parent or other caregiver loses control and shakes a young child, causing permanent brain damage or death. Crying is the most common reason someone shakes a baby. The outcomes for survivors typically include cerebral palsy, blindness, deafness, seizures and learning/behavioral difficulties. Young males who care for a baby alone are most at risk to shake a baby. Everyone who watches your baby needs to know they should never shake your baby.

Common signs and indicators that a baby has been shaken violently and may be suffering Shaken Baby Syndrome include:

- Unable to turn head
- Extreme irritability, often misdiagnosed as colic
- Feeding problems or decreased appetite
- Inability to suck or swallow
- Vomiting
- Lethargy or poor muscle tone
- Inability to follow movements with eyes
- No smiling or vocalization (cooing, gurgling, etc.)
- Rigidity
- Seizures or convulsions; rolling of eyes upward into head
- Pale or bluish skin
- Coma or loss of consciousness
- Difficulty breathing
- Dilated pupils
- Blood spots/pooling of blood in eyes
- Bruises on shoulders, neck, ribs, upper arms, arms, wrists



The most important thing you can do to prevent Shaken Baby Syndrome is to understand your baby and how to cope with him when he cries or is irritable.

The Florida Department of Health contributed to the content of this tip sheet. For more information, visit their Web site at www.doh.state.fl.us.

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.

YOUR CHILD AT FOUR TO SIX MONTHS



This is an exciting period of development because your baby will begin to show his or her unique personality. Babies this age also begin to establish regular eating and sleeping patterns. Continue cuddling, playing, reading and talking with your baby as much as you can because every interaction will continue to stimulate brain development. Your baby needs an interested audience and a chance to use his or her social skills!

Sleep At this age, babies sleep about 15 hours per day. Your baby may be taking two or three daytime naps and may be waking twice per night for feedings. Although babies can now roll over on their own, you should still place your baby to sleep on his or her back. It's fine if babies roll over on their own during sleep. Now is a good time to lower the crib mattress to its lowest level to prevent falls. Remember, it is still not safe to put toys, pillows or blankets in the crib with your baby.

Nutrition Discuss your baby's nutritional needs with your medical provider during your baby's four-month well visit. Breast milk and formula are still the main sources of nutrition.

Physical Development

- Rolls over from back to stomach and stomach to back
- Tries to grab objects with hands
- Opens and closes hands and brings hands to mouth
- Wiggles arms and kicks legs
- Sits with support
- Drools a lot
- Begins to cut teeth

Social/Emotional Development

- Enjoys social play and will become more active in getting your attention
- Responds differently to an unfamiliar voice than to the voice of a familiar person
- Shows interest in mirror images and begins to smile at mirrors
- Responds to other people's expressions of emotion and often appears joyful
- Cries when upset, afraid or scared

Cognitive Development

- Uses eyes and hands together
- Uses verbal and non-verbal cues to signal needs
- Explores objects with mouth
- Begins to reach for objects such as rattles, caregiver's face and mobiles



Additional Safety Tips for Your Baby at Four to Six Months

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Prevent strangulation by removing or shortening any cords that your child can reach
- Prevent electrocution by installing protective covers on all electrical outlets
- Prevent poisoning by moving all poisonous liquids, such as cleaning supplies, to upper cabinets and shelves
- Prevent falls by keeping babies away from open windows and installing window guards on all upper level windows



Positive Parenting Activities that Promote Nurturing and Attachment

- Singing while interacting with your baby, such as patty-cake and peek-a-boo
- Rocking your baby while singing lullabies



When to be Concerned

While each baby develops at his or her own pace, you should be aware of certain milestones your child should be reaching. Failure to reach certain milestones may be a sign of medical or developmental problems requiring special attention. You should let your baby's doctor know if at four months your child:

- Doesn't bring objects to mouth
- Begins babbling, but doesn't try to imitate any of your sounds
- Doesn't push down with legs when feet are placed on a firm surface
- Has trouble moving one or both eyes in all directions
- Crosses eyes most of the time (occasional crossing of the eyes is normal in these first months)
- Doesn't pay attention to new faces, or seems very frightened by new faces or surroundings

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



YOUR CHILD AT SIX TO NINE MONTHS



Stimulating your older baby requires new activities that will help improve their development in all areas. At this age, babies are very social and interact with others by smiling, waving, babbling and entertaining anyone they are familiar with. Babies this age are increasing skills like grasping, rolling over, sitting up, and possibly even crawling. Set up a safe environment for your baby to explore; mobility will improve every day and your baby will try to reach any objects that look interesting.

Sleep At this stage, your baby still needs two or possibly three naps a day. Put your baby down to sleep for the night between 6 and 8 pm, and expect 11 to 13 hours of sleep. However, some babies, especially those who are breastfed, may still wake for a night feeding.

Nutrition The American Academy of Pediatrics recommends waiting to introduce solid foods until six months of age. Some basic ways for starting solids are:

- Mix single ingredient solids like rice cereal with equal amounts of breast milk or formula.
- Start with one feeding of solids a day. Add a second feeding when your baby can eat two to three tablespoons per feeding.
- It is important to begin with vegetables, then fruit and finally protein. When your baby becomes used to spoon feedings, add single ingredient smooth or pureed foods, like carrots, peas or apples, or “stage one” baby foods in the jar.
- To make sure your baby is not allergic to a specific food, be sure to wait at least two to three days before starting another new food.

Physical Development

- Develops hand-eye coordination
- Sits with, and eventually without, being supported
- Reaches for a bottle or spoon when being fed
- Transfers objects from one hand to the other
- Begins to crawl (some infants never crawl; however, by 9 months, many babies will)
- Starts to stand (this developmental stage varies for each child; however, some infants are able to pull themselves up and hold onto furniture by 9 months)

Social and Emotional Development

- Talks or babbles while looking in a mirror
- Becomes upset if a toy is taken away
- Responds to own name and recognizes family members’ names
- Shows mild to severe anxiety when parents leave (separation anxiety)

Cognitive Development

- Develops a better awareness of the world around them
- Begins to look for and find partially hidden objects, watches a ball rolled out of sight
- Tries to get objects that are out of reach
- Makes noises to show displeasure or satisfaction
- Explores with hands and mouth





Additional Safety Tips for Your Baby at Six to Nine Months

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Prevent injuries by repairing wobbly furniture or putting it in a room your baby does not enter, by using toy chests without lids or with supports that hold a lid open in any position, and by making sure televisions and other heavy objects are secure
- Prevent choking by keeping potential hazards like keys, coins, rings, loose buttons, and other small items out of baby's reach
- Prevent falls by using child safety gates at the top and bottom of all staircases
- Prevent poisoning and other injuries by keeping purses and wallets out of baby's reach



Positive Parenting Activities that Promote Nurturing and Attachment

Help your baby cope with separation anxiety by:

- Explaining that you are going to leave, but that you'll return
- Always saying goodbye when you leave your baby to help teach your baby that you will come back
- Providing a comfort object that will help your baby feel close to you while you are away



When to be Concerned

While each baby develops at his or her own pace, you should be aware of certain milestones your child should be reaching. Failure to reach certain milestones may be a sign of medical or developmental problems requiring special attention. You should let your baby's doctor know if at six months your child:

- Seems very stiff, with tight muscles
- Seems very floppy, like a rag doll
- Refuses to cuddle
- Cannot sit with help
- Consistently turns one or both eyes in or out
- Doesn't seem to enjoy being around people
- Doesn't laugh or squeal
- Doesn't actively reach for objects

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



YOUR CHILD AT NINE TO TWELVE MONTHS



By the end of the first year of life, your baby's body weight will have tripled and body length will have doubled. Babies this age are very good at expressing their feelings with their gestures, sounds and facial expressions. They can engage in "conversation," for example, handing things back and forth or imitating sounds and actions. They also understand "cause and effect"—and that they can make something happen: "If I drop this food from my highchair, it will fall on the floor," or "If I cry, mom or dad will come get me." Following a consistent routine helps babies know what to expect and how to behave.

Sleep The sleep habits of older babies differ. Some may sleep all night and take one or no naps during the day. Others may wake up in the night but take several naps during the day. By nine months, your baby may be sleeping up to 12 hours at night. Some babies skip a morning nap altogether and start taking one long nap later in the day.

During this stage of development, it is normal for babies to cry at bedtime because they feel scared when a parent leaves the room.

Establishing a bed time routine that includes quiet activities together will help lessen fear and stress. When putting babies to bed, give them some time to fall asleep on their own. If crying continues, check in on your baby, but do not pick your baby up. Instead, rub your baby's tummy and talk softly to help your baby relax and fall asleep. For more nighttime tips, turn to *Better Sleep for You and Your Baby* on page 6.

Nutrition By the time babies are around 9 months old, they usually have the ability to pick up foods and feed themselves. They can also begin to learn to drink from a sippy cup. By their first birthday (or soon after) they can be weaned from the bottle. They should be eating three meals a day while still receiving breast milk or formula. If you haven't already, have your baby join the rest of the family at meals.

Serve foods that offer new tastes and textures; but be sure they are soft, easily gummed and digestible. Examples include Cheerios® with small pieces of bananas; pieces of cheese and well-cooked pasta; steamed vegetables such as zucchini, peas and carrots. Cut foods into safe, bite-sized pieces and avoid any foods that need to be chewed. It is very important to supervise your child constantly during feeding times.

Some babies have food allergies. Signs of an allergic reaction include rashes, hay fever-like symptoms or breathing difficulties (sometimes severe). If your baby shows these or any other symptoms, call your doctor or 9-1-1 immediately. Foods to avoid until after your baby's first birthday include:

- Eggs
- Peanuts or peanut butter
- Shellfish
- Chocolate
- Citrus fruits such as oranges, grapefruit, lemon and lime
- Wheat
- Corn

Physical Development

- Crawls forward on belly
- Sits up without assistance
- Pulls self up to stand
- Walks two or three steps without support
- Walks holding onto furniture
- Takes objects out of containers
- Pokes with index finger





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on pages 79–82 to learn about a variety of family support services available in your community.

Social and Emotional Development

- Offers toys or objects to others but wants them back
- Pushes away toys or foods when not wanted
- Becomes attached to a favorite toy or blanket
- Cries when mom or dad leaves

Cognitive Development

- Responds to “no”
- Babbles with inflections: changes in tones
- Makes sounds like “mama” and “dada”
- Finds hidden toys and other objects
- Begins to use things correctly: drinks from cups, listens in a phone
- Explores items in different ways: banging, shaking, throwing, etc.



Additional Safety Tips for Your Baby at Nine to Twelve Months

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Prevent cuts by keeping sharp objects out of reach (for example: cooking knives and other tools, scissors, razors, plastic wrap boxes, glass bottles or drinking glasses, knitting needles)
- Prevent injuries by keeping children away from lawn mowers and power saws
- Prevent electrocution by putting stereos, VCRs, computers, and other electrical equipment out of reach and making sure that children cannot get to the back of television sets
- Prevent poisoning by storing medications where children cannot get them



Positive Parenting Activities that Promote Nurturing and Attachment

- Playing games like hide-and-seek and peek-a-boo helps your baby learn to cope with separation and feel secure that you always come back
- Respond to your baby's cries at night, but avoid picking your baby up to rock him or her back to sleep—falling asleep in your arms makes it more difficult for your baby to learn how to get back to sleep on his or her own
- When saying “goodbye,” tell her you will miss her, but that you will return
- When your baby does something you don't like or that may be dangerous, distract him or her from the activity by quickly providing something else to do. For example, as your child reaches for a lamp, you quickly pick your child up and say, “Let's go read this book.”
- Redirect unwanted behavior by showing and teaching your child the right way to use something. For example, if your child is drawing on books, take the books away and say, “Books are not for drawing on.” At the same time, give the child paper saying, “If you want to draw on something, draw on this paper.” If your child is throwing blocks, you can take away the blocks and give him a soft ball to throw.



When to be Concerned

While each baby develops at his or her own pace, you should be aware of certain milestones your child should be reaching. Failure to reach certain milestones may be a sign of medical or developmental problems requiring special attention. You should let your baby's doctor know if at nine months your child:

- Doesn't babble
- Drags one side of body while crawling (for over a month)
- Doesn't point to objects or pictures
- Doesn't search for objects that are hidden while he or she watches
- Shows no interest in games like peek-a-boo
- Shows no affection for primary caregiver
- Doesn't seem to enjoy being around people



YOUR CHILD AT 12 TO 18 MONTHS



At 12 to 18 months, your child is still growing quickly, but not as noticeably as during the first year. This developmental stage will be filled with firsts. Some baby's will learn to say their first words or take their first steps, while just about all toddlers will begin to make their first efforts at independence. As children begin to walk, run and climb, they will gain confidence and a greater sense of independence. Children this age are also curious about the nature of people and things. Your child needs encouragement and freedom to explore, as well as clear boundaries and limits to feel safe.

The developmental milestones typically reached at this age allow children to start placing things, people and actions in categories. For example, when you say you're going to the store, your toddler is beginning to create a mental picture of the supermarket, and of you in it.

Sleep At this age, your child needs about 14 hours of sleep in a 24-hour period. Most children will start giving up their morning nap and instead take one longer afternoon nap per day. As children adjust to less napping, they may be ready for bed a little earlier—anytime between 6 and 8 pm.

Nutrition

EATING: At 12 months, babies should eat a balanced diet of healthy foods such as: squash (vegetable), bananas (fruit), cheese (dairy), and chicken (protein). All foods should be cut into small pieces so children can feed themselves without the risk of choking. Foods you should still **AVOID** include:

- Raw carrots
- Popcorn
- Nuts
- Hot dogs
- Hard candy
- Whole grapes

Babies are still exploring most foods and probably won't eat a lot at a single sitting. Try to provide five or six small meals a day instead of three larger ones and avoid eating meals or snacks while watching TV.

DRINKING: By 12 months, your baby is ready to stop drinking formula and begin drinking up to 24 ounces of whole milk a day. Give your baby milk from a cup rather than a bottle. Don't forget to offer water throughout the day.

KEEP IN MIND: Now that your child has teeth, you should brush them daily with a baby toothbrush and water.

Physical Development

- Walks without help
- Enjoys holding objects while walking—often one in each hand
- Holds a crayon and scribbles (but with little control)
- Gestures or points to indicate wants
- Turns pages in a book
- Likes to push, pull and dump things

Social and Emotional Development

- Enjoys being held and read to
- Imitates sounds and facial expressions
- Plays alone with toys



Cognitive Development

- Understands and follows simple, one-step directions
- Says about 8 to 20 words, including “hi” and “bye”
- Identifies objects in a book when asked
- Pays attention to conversations



Additional Safety Tips for Your Baby at 12 to 18 Months

Your child can move quickly and is able to get into many dangerous situations. Pay attention to your child’s surroundings and always provide adult supervision. A Home Safety Checklist should be completed at each stage of your child’s development. A sample checklist is provided for you on page 57.

- Most toddler falls are from windows and balconies. Help prevent falls by moving furniture away from windows, installing window guards and securing balcony doors with child-resistant latches.
- Prevent motor vehicle injuries by placing your baby in an appropriate car seat. Children who are at least 12 months old AND weigh at least 20 pounds can ride in a forward facing car seat in the backseat of the car.
- Prevent burns by blocking the kitchen with gates and keeping hot liquids out of reach
- Prevent drowning by installing safety latches on toilets, emptying buckets and keeping pet water bowls out of your child’s reach
- Prevent poisoning by installing latches on drawers, cabinets and anyplace where medications or cleaning materials are kept; call Poison Control immediately if you think your child has swallowed something poisonous: 1-800-222-1222.



Positive Parenting Activities that Promote Nurturing and Attachment

Your child’s growing sense of independence will push him or her to test the limits of acceptable behavior. This is the right time to set a few limits that your child can understand and that you can consistently enforce. Children’s first rules should help protect their safety. You can also try these age-appropriate discipline techniques:

- Stay one step ahead. Distract or redirect your child from unsafe objects or activities.
- Save “no” primarily for safety issues. If children hear “no” too often, they start to tune it out.
- Use non-verbal communication. Give a stern or firm look for minor incidents.
- Allow time for your child to play alone. Independent play allows him or her to choose and direct the activity, and helps build confidence.
- Never use spanking or any other physical punishment. Spanking is never an effective form of discipline.



When to be Concerned

According to the American Academy of Pediatrics, you should let your doctor know if at 12 months your baby:

- Does not crawl
- Drags one side of body while crawling for over one month
- Cannot stand while supported
- Doesn’t search for objects that are hidden while he watches
- Says no single words
- Does not point to objects or pictures
- Does not use gestures such as waving or shaking head

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



Teaching Your Child to Use the Potty

POTTY LEARNING IS SOMETHING YOU DO WITH YOUR CHILD. You are helping your child learn a very important skill. Teaching your child to use the toilet takes time, understanding and patience. You should not rush your child into using the toilet.

Are YOU ready for potty learning? A few things you should think about include:

- Do you have enough time to help your child with this difficult job?
- Are you already under a lot of stress? For example, a new home, job or relationship. If so, you may need to wait for a better time to begin potty learning.
- Consistency during potty learning is very important. Is your child's caregiver willing to help with potty learning?

Is your child showing signs that he or she is ready to learn how to use the toilet? When your child is ready, you'll see the following signals:

- Child has bowel movements at regular times each day.
- Child's diaper stays dry for 2 hours or more.
- Child can follow simple instructions such as, "Pick up your truck and put it in the toy box."
- Child shows an interest in using the potty or asks to be changed when diaper is soiled or wet.
- Through words, facial expressions or a change in activity, your child shows you that he or she knows when a bowel movement is coming.

Most children reach this stage sometime between 18 and 36 months, but it's also normal for it to occur a little later. Early learning is possible, but not always best. It may be stressful for a child who does not have good bowel or bladder control, or the ability to take clothes off quickly to use the toilet. If your child is not ready, you can still teach him or her what a potty chair is and how it works.

When you and your child begin potty learning, praise him or her for trying. Do not be upset when "accidents" happen. Punishing a child for having an "accident" will only make the child feel bad, and training will take longer.

The best way to teach your child about using the toilet is to let him or her watch other family members of the same sex (watching people of the opposite sex may be confusing). Boys usually learn to empty their bladders in the sitting position but slowly transfer to standing after watching the "older boys" do it that way.

FIRST STEPS

Put a potty chair in your child's room or in the bathroom. (Both girls and boys may be able to use adult toilets outfitted with training seats.) Then do the following:

1. For the first few weeks, let your child sit on the potty with clothes on while you explain what the toilet is and when to use it.
2. Once your child is used to sitting on the potty, try it with the diaper off. Make the potty part of the daily routine, slowly increasing from one time to several times each day.
3. Try changing your child's diaper while he or she is seated on the potty. Dropping the contents of the dirty diaper into the potty helps your child understand what the potty is for.
4. Let your child play near the potty without a diaper and remind him or her to use the potty as needed. Children may forget or miss at first, but don't get angry. Wait until he or she goes correctly and reward and praise your child.

Like most children, your own toddler probably will take a little longer to complete nap and nighttime control. The best approach is to have your toddler use the potty right before going to bed and as soon as he or she wakes up. Using training pants instead of diapers at nap time and bedtime may help. There will be a few accidents, but a plastic sheet between the mattress and the bedding will keep the mattress dry. All children have these accidents. Praise your child whenever he or she makes it through the nap or night without wetting. Tell your child to call for you if he or she wakes up in the middle of the night and needs help to use the toilet.



YOUR CHILD AT 18 TO 24 MONTHS



Imitation and independence are big themes when it comes to the end of your child's second year. At 18 to 24 months, children are more aware of themselves as individuals. Their sense of independence grows as they start to walk, run and climb more easily. Your young child is developing thinking skills and has an increased curiosity about the nature of people and things. You may notice your child's problem-solving and memory skills improve. He or she may also be finding it easier to understand and respond to simple requests.

At this age, children will identify with their toys and will not want to share them. They may begin to show frustration when they cannot do what they want, but can usually be redirected to other interesting alternatives. It can help to offer choices rather than having to always say "no."

Sleep Most toddlers sleep about 14 hours a day. They often take one nap a day, usually from about 1 to 3 pm, and go to bed between 6 and 8 pm. It is still important to sleep during the day. If children are well rested, they fall asleep easier and sleep longer during the night.

Nutrition By 18 months, toddlers should eat most table foods cut into small pieces, drink from a sippy cup and be fully weaned from a bottle. Because toddlers may not be interested in sitting still for meals, you can make sure your toddler gets enough food by:

- Giving five to six small meals per day
- Offering finger foods toddlers can feed themselves
- Making meals fun by serving foods with a variety of colors, textures and tastes

Physical Development

- Walks well and runs, though may not always stop and turn well
- Tosses or rolls balls
- Enjoys moving on small-wheeled riding toys
- Feeds self with a spoon
- Begins to gain some control of bowels and bladder

Social and Emotional Development

- Imitates actions
- Gets angry and may have temper tantrums
- Acts shy around strangers
- Has trouble sharing
- Shows signs of independence, like saying "no" and trying to do many things on his or her own

Cognitive Development

- Refers to self by name and uses the words "me" and "mine"
- Says 30 to 50 words
- Copies single words spoken by someone else and uses the words "please" and "thank you" if asked
- Chooses between two objects
- Enjoys humming or trying to sing familiar songs
- Uses two to three word sentences



Additional Safety Tips for Your Baby at 18 to 24 Months

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Prevent climbing accidents by using "L" brackets to secure large objects and furniture and installing window guards to prevent your child from falling out
- Reduce the risk of injuries from falls by seeking out playgrounds with soft surfaces like sand, woodchips or rubber
- Prevent poisoning by never referring to vitamins or medicine as candy
- Prevent burns by keeping matches and lighters out of children's reach and avoiding use of portable heaters in rooms where children play or sleep



Positive Parenting Activities that Promote Nurturing and Attachment

- Praise good behavior
- Ignore small incidents and accidents, such as spilled milk
- Give your child the opportunity to correct misbehavior by giving a second chance
- Never use spanking or other physical punishment and limit your use of the word "no"
- Model good behavior
- Talk and read to your child every day to encourage language development
- When you leave, give your child an object that will soothe him and make him feel close to you
- To encourage good behavior from your child, you should try to be patient as well as clear and consistent with your rules and consequences



When to be Concerned

According to the American Academy of Pediatrics, you should let your doctor know if at 18 months your child:

- Cannot walk
- Fails to develop a mature heel-toe walking pattern after several months of walking, or walks exclusively on toes
- Does not speak at least 15 words
- Does not seem to know the function of common household objects (brush, telephone, fork, and spoon)

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



YOUR CHILD AT 24 TO 36 MONTHS



Two year olds are learning so much about the world around them. They begin to ask lots of questions, and they love to imitate adults. They are learning to share and take turns. Sometimes they want to play with others, and sometimes they want to be alone. Toddlers this age like to make choices and do more things on their own.

Sleep For many children this age, it's time to leave the crib and move on to a bed.

- Make the transition exciting by talking about the big bed and the items that might go in it, such as new bedding or a favorite stuffed animal
- Stick to the same bedtime (between 6 and 8 pm) and continue with your normal bedtime routines like reading, singing and bathing
- Explain to children that once they have been kissed good night and tucked in, they are not to get out of bed. If your child gets out of bed, quietly and calmly take him or her back to bed until he or she learns to stay there.

Nutrition At this age, children often become picky eaters and lose interest in food. You may find that some days, your child might not be interested in food at all, and other days, he might only want to eat a certain type of food. Be assured, when you child is hungry, he will want to eat—it is your job to ensure you are providing healthy options by offering a variety of healthy foods.

- Avoid the use of food as a reward
- Avoid withholding food as a punishment

Physical Development

- Runs, jumps and climbs
- Walks on tiptoes
- Throws and kicks balls
- Learns to zip and unzip
- Drinks from a small cup without spilling (in the beginning, a cup with a sippy top)
- Undresses self
- Dresses with help
- Uses a fork and spoon correctly
- Helps to put things away

Social and Emotional Development

- Likes having familiar stories read to them
- Begins to enjoy playing alone
- Initiates own play activities
- Doesn't like changes in routines
- Watches other children at play and joins in
- Has a hard time sharing things
- Shows independence and wants to do things alone
- Follows simple rules such as taking turns

Cognitive Development

- Calls self by own name
- Speaks 900 or more words
- Points and names own body parts when asked
- Uses phrases and three to five word sentences
- Repeats simple rhymes and songs
- Begins to develop a longer attention span
- Carries out simple one, two, or three-step requests





Additional Safety Tips for Your Child at 24 to 36 Months

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Prevent choking by choosing toys that do not have small parts
- Prevent burns by keeping hot foods in the middle of the table and testing the temperature of foods before giving them to your child



Positive Parenting Activities that Promote Nurturing and Attachment

- Try to remain patient and keep your cool during temper tantrums.
- Rather than using physical punishment, create consequences that relate to the behavior. For example, if your child colors on the wall, take away all the crayons and explain that he can try again later to play with crayons.
- Stay in control and do not give in to unreasonable requests. For example, when it is time to eat or go to bed, take away toys.
- When children are upset about being disciplined, allow time for both you and them to calm down before trying to talk to them about their behavior. Let them know you understand how they feel, but that certain behavior is not acceptable.
- Avoid problem situations. If your child is likely to become unreasonable when he's hungry, remember to carry snacks with you.



When to be Concerned

According to the American Academy of Pediatrics, you should let your doctor know if at 24 months your child:

- Cannot push a wheeled toy
- Doesn't follow simple directions
- Doesn't imitate actions or words
- Fails to develop a heel-toe walking pattern after several months of walking or walks exclusively on toes
- Doesn't speak at least 15 words
- Doesn't use two word sentences

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.

YOUR CHILD AT THREE YEARS OLD



With your child's third birthday, the "terrible twos" are officially over and the "magic years" of three and four begin—a time when your child's world will be dominated by fantasy and vivid imagination. During the next two years, your child will mature in many areas.

Sleep Goodbye naptime, hello bedtime struggles. Between the ages of three and four, children commonly give up their afternoon naps. Your child should sleep anywhere from 9 to 13 hours each day. As a way of gaining control of their world, children sometimes try to resist bedtime. You can help make bedtime easier by:

- Sticking with the bedtime routine
- Allowing your child to make some choices, like picking out pajamas or books to read
- Providing a sense of security with night lights, security blankets or stuffed animals

Nutrition At this age, your child's eating habits should be similar to yours. He or she should eat the same foods at the same times as you,

and use child-size utensils. Choking is still a hazard because your child has not yet mastered chewing and swallowing. Avoid foods such as hard candies and cherries with pits and make portion sizes small, especially when serving:

- Grapes (cut them in half)
- Hot dogs (slice in half across and lengthwise)
- Raw vegetables, such as carrots and celery
- Peanut butter (avoid spoonfuls)

Physical Development

- Throws and kicks balls
- Draws circles and squares
- Begins to copy capital letters
- Dresses and undresses

Social and Emotional Development

- Cooperates with other children
- Engages in fantasy play
- Understands there are ways to solve problems

Cognitive Development

- Identifies "same" and "different" objects
- Talks in short sentences others can understand
- Tells and remembers parts of stories



Additional Safety Tips for Your Three Year Old

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

When children reach the top weight or height allowed for their car seats, their shoulders are above the top harness slots, or their ears have reached the top of the seat, they are ready for a booster seat. Always use a lap/shoulder belt with a booster seat. Now is also a good time to teach your child about playground safety behaviors such as not running in front of swinging children.



Positive Parenting Activities that Promote Nurturing and Attachment

Set a good example for your child. If you want children to be nice to each other or have good eating habits, show them how these things are done. Tell your child why you do things a certain way. Children may not understand everything you say, but they will begin to understand that you have reasons for doing things a certain way.

Provide children with simple explanations for your rules or limits and offer alternatives.

- It is 8:00 and time for bed; you may play with the markers again tomorrow.
- You may not have popcorn now because it is dinnertime, you may have some Jell-O for dessert after you are finished with your dinner.



When to be Concerned

According to the American Academy of Pediatrics, you should let your doctor know if at three years old your child:

- Cannot throw a ball overhand
- Cannot jump in place
- Cannot ride a tricycle
- Cannot grasp a crayon between thumb and fingers
- Has difficulty scribbling
- Cannot stack four blocks

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



YOUR CHILD AT FOUR YEARS OLD



Four year olds may not be growing physically as fast as they did as an infant, but they are making leaps and bounds both socially and emotionally. Your child can be easily frustrated, but is learning to gain self control. You can help by providing encouragement and support while maintaining patience during those frustrating moments.

Sleep Four year olds need at least 12 hours of sleep a day. They may or may not be napping; it all depends on the child. It is common for four year olds to get out of bed at night with many excuses not to go to sleep. The best thing to do is stick to the bedtime routine and when your little ones need a drink for the sixth time, be calm but firm with them and let them know it is bedtime and that you will see them in the morning.

Nutrition Proper nutrition includes:

- Three meals a day, plus two nutritious snacks
- Limiting high sugar and high fat foods
- Eating fruits, vegetables, lean meats and low fat dairy products

Physical Development

- Walks backwards
- Jumps forwards many times
- Walks up and down stairs
- Somersaults
- Uses safety scissors
- Cuts on line continuously
- Copies squares and crosses
- Prints a few capital letters
- Draws a person

Social and Emotional Development

- Enjoys playing with other children
- Takes turns and shares (most of the time); may still be rather bossy
- Seeks out adult approval
- Understands and obeys simple rules (most of the time)
- Likes to talk and carries on detailed conversations
- Understands jealousy
- Fears the dark and monsters
- Begins to understand danger
- Has difficulty separating make-believe from reality
- Feels anger and frustration and may still throw tantrums
- Enjoys pretending, often with imaginary playmates
- Has a vivid imagination and sometimes imaginary playmates

Cognitive Development

- Groups and matches objects
- Organizes materials
- Asks “why” and “how”
- Tells their own name and age
- Pays attention for longer periods of time
- Learns by watching and listening
- Shows awareness of past and present
- Follows a series of two to four directions
- Uses words out of context



- Points to and names colors
- Understands order and process
- Counts to five
- Knows the names of their street and town



Additional Safety Tips for Your Child at Four Years Old

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

- Always supervise while your child is in and around water—both in and outside of the home
- Teach pedestrian behavior such as crossing streets and using sidewalks and cross walks
- If you must have a gun in the house, keep it separate from the bullets in a different locked place



Positive Parenting Activities that Promote Nurturing and Attachment

Your child is quickly leaving behind baby behaviors. There are new skills your children must learn and behaviors they are learning to control. They are beginning to solve problems and learning to follow rules. How are they processing all this new information? They are imitating the adults around them as they begin to understand many different functions in their world.

- Give your child a specific chore in the house that needs to be done each day; like feeding the fish, helping set the table, cleaning up toys, or checking the mail.
- Teach them to always say please and thank you when asking for something.
- Teach the importance of not interrupting others when they are speaking unless it is something important.

Children this age need to learn healthy ways to deal with anger and the importance of self-control. Children may feel very angry and not understand how to let it out. Help them label their emotions and explain that it is ok to feel that way, but that we must still follow all the rules.



When to be Concerned

According to the American Academy of Pediatrics, you should let your doctor know if at four years old your child:

- Still clings or cries whenever his parents leave him
- Shows no interest in interactive games
- Ignores other children
- Doesn't respond to people outside the family
- Doesn't engage in fantasy play
- Resists dressing, sleeping, or using the toilet
- Lashes out without any self-control when angry or upset
- Cannot copy a circle
- Doesn't use sentences of more than three words
- Doesn't use "me" and "you" appropriately
- Can't tell the difference between fantasy and reality
- Cannot understand two-part commands using prepositions ("Put the cup on the table"; "Get the ball under the couch.")
- Can't correctly give first and last name

HERE'S HELP

Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



YOUR CHILD AT FIVE YEARS OLD



Five-year-olds want to know more about how the world works and are usually excited about going to school. They ask more complex questions and offer creative ideas for how to solve problems. They are also more social and prefer active games that involve other children.

Sleep Five year olds still need lots of sleep and many will still take a nap. A good bedtime for your five year old is 8:00 p.m. during the school year.

Nutrition The best nutrition advice is to set a good example! Keeping your children healthy includes encouraging them to:

- Eat a variety of foods
- Balance the food you eat with physical activity
- Choose a diet with plenty of grain products, vegetables and fruits; moderate amounts of sugar and salt and little fat, saturated fat, and cholesterol
- Choose a diet that provides enough calcium and iron to meet their growing body's requirements

Physical Development

- Assists in making own bed
- Colors within the lines
- Ties own shoes
- Jumps rope

Social and Emotional Development

- Is aware of gender
- Separates fantasy from reality
- Is sometimes demanding, sometimes eagerly cooperative
- Comforts friends and others when they are sad
- Understands there are rules when playing games
- Expresses feelings
- Wants to please friends
- Wants to be like friends
- Agrees to rules
- Likes to sing, dance and act
- Shows more independence

Cognitive Development

- Uses past, present and future tenses correctly
- Groups similar objects together
- Understands the idea of today, tomorrow and yesterday
- Identifies most letters and numbers
- Retells a story from a picture book



Additional Safety Tips for Your Five Year Old

A Home Safety Checklist should be completed at each stage of your child's development. A sample checklist is provided for you on page 57.

Practice water safety by teaching your child to swim. Do not let your child play around any water (lake, pool, ocean, etc.) without adult supervision (even if he is a good swimmer). Always wear a life preserver or safety vest when on a boat and childproof the pool by enclosing it in a fence with a self-closing, self-latching door.

- Teach your child how to dial 911 (if available in your area)
- Set a good example for your child by always using a seat belt, helmet, etc.



Positive Parenting Activities that Promote Nurturing and Attachment

Expressing appreciation for kind and thoughtful behavior is another way to set a good example for children. By reinforcing children's kind behavior, you are helping them to understand that their kindness makes a positive difference. For example, "Emily, I'm really glad that you shared your toy with Ryan. See how much he likes playing with it?" Children need to know that the adults in their lives care about them and about others. Children who experience respect and appreciation from adults are more likely to demonstrate caring toward others.

Research says that harsh physical punishment can weaken children's trust in adults. Physical punishment does not help children learn self-control. When adults use physical discipline, children feel angry at adults and ashamed of themselves. When young children experience consistent and positive guidance, they are more likely to act kindly toward others.



When to be Concerned

According to the American Academy of Pediatrics, you should let your doctor know if at five years old your child:

- Has trouble eating, sleeping, dressing or using the toilet
- Is extremely fearful or timid
- Is extremely aggressive
- Is unable to separate from parents without major protest
- Is easily distracted and unable to concentrate on any single activity for more than five minutes
- Shows little interest in playing with other children
- Refuses to respond to people in general, or responds only superficially
- Rarely uses fantasy or imitation in play
- Seems unhappy or sad much of the time
- Doesn't engage in a variety of activities
- Avoids or seems distant with other children and adults
- Doesn't express a wide range of emotions
- Cannot build a tower of six to eight blocks

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



Positive Parenting Tips that Promote Good Behavior in Early Childhood

Keep a Schedule

Young children need a regular schedule. They behave better when they know what to expect. Try to have them eat, nap and play at the same times each day. When planning their daily schedule, include active time and quiet time; time playing together and time for children to play by themselves.

Offer Encouragement

Encouraging words help your child build confidence. The key to encouraging your child is to be a coach more than a cheerleader. A cheerleader says: "What a great job!" or "What a beautiful picture!" A coach uses specific praise. For example, when your child sets the table, you might say, "You did such a good job setting the table! You put the spoons and forks in the right place and remembered the napkins!" When you look at a child's painting, you might say, "This painting just glows with color. You used blue, green, red, yellow and orange. Tell me how you did this!" Specific praise means a lot more to a child than a brief, "You are great."

Additional tips:

- Tell your child what they can DO instead of telling them DON'T
- Provide children with simple explanations for your rules or limits and offer alternatives
- Parents should work together so that children get a set of consistent limits. Whether parents are living together or apart, having the same rules is important to avoid confusing children



FAST FIX



Change Your Approach

Instead of: "Don't leave your toy there."

Try: "Take your toy back to your room."

Instead of: "Don't touch anything."

Try: "We are just looking at these things."

Instead of: "Don't kick her."

Try: "Kicking hurts, use your words to tell her you are upset."

Use Simple Explanations and Alternatives

"It is 8:00 and time for bed; you may play with the markers tomorrow."

"You may not have popcorn now because it is dinnertime. You may have some Jell-O for dessert after you are finished with your dinner."

Practice Giving Choices*

Ask your children if they would like a banana or applesauce for their snack.

Would they like to play with blocks or books?

*Avoid asking if your child is **ready** to go to bed, or if they would **like** to put on their jacket before going outside because it is cold. These activities are not optional.

Supporting Your Child's Social Development

TEACHING CHILDREN HOW TO INTERACT WITH OTHERS IN HEALTHY WAYS will benefit them not only at school, but also throughout their lives. It will also help them recognize inappropriate behaviors such as bullying. Bullying is behavior that makes another person feel hurt, degraded, threatened or humiliated. Some examples of bullying include name calling, pushing, leaving others out of an activity and vandalizing personal possessions. Cyber bullying occurs when these activities take place through computer communications and the Internet. It is important to help your child understand what bullying is and what they can do if they are bullied or see others being bullied.



You can help promote healthy social development and prevent bullying by:

- Talking with your child about what bullying is, why bullying is wrong and what they can do if they witness their peers being bullied
- Providing a safe and healthy atmosphere at home
- Keeping the lines of communication open between family members
- Teaching your child the difference between appropriate and inappropriate behavior
- Teaching your child what qualities to look for in a friend, such as someone that makes them feel comfortable and likes them for who they are
- Encouraging your child to get involved in social activities like school and community groups (parents' involvement in groups with their children may increase children's willingness to participate)
- Encouraging participation in out of school activities with a different peer group
- Encouraging children to make friends and play with others during times when bullying can occur (they are less likely to be the victim of bullying if they are not alone)
- Teaching children not to participate in teasing or hurting other children
- Teaching children that reporting bullying is different from tattling on someone- bullying hurts someone and can be stopped
- Encouraging children to seek help from teachers or other adults if they see someone being bullied (If they are scared to tell by themselves, they should seek help with a friend or even an older sibling)

Children react to bullying in different ways. Some signs that a child is being bullied may include:

- Shy, insecure, suffers from low self-esteem
- Torn articles of clothing or missing belongings
- Unexplainable bruises, cuts or scrapes
- Fear of going to school or participating in organized activities
- Anxious or depressed when returning home from school
- Quiet or seems withdrawn
- Complains of illness such as stomachaches
- Changes in eating or sleeping habits
- Has trouble sleeping or often has bad dreams

Here are some tips to help your child if he or she is being bullied:

- Listen to what your child says
- Support your child by talking about how to solve the problem
- Avoid blaming your child for provoking the situation; this can make the child feel further victimized and may close the lines of communication
- Ask specific questions about what, who, where, and how long the bullying has been happening
- Encourage your child to continue being themselves—changing their ways for others is not the right solution to end bullying
- Teach your child how to step away from the bullying situations instead of fighting back, which may make matters worse
- Contact the school, principal or teacher immediately



Children who bully other children may have some of the following characteristics:

- Easily frustrated
- Impulsive or dominant
- Has difficulty following rules
- Views violence in a positive way
- Shows no signs of empathy

What should you do if your child is the bully?

Finding out your child is a bully may come as a shock. As a parent, you may feel disappointed or angry. Feelings of denial are also common. It is important to remember children act differently in different social settings. Guiding children and teaching them appropriate behavior is a big responsibility. Here are some useful tips to help STOP your child from bullying others:

- Tell your child that it is unkind to make others feel unhappy
- Tell your child that bullying is inappropriate and explain how you expect their behavior to change (making expectations clear helps children recognize desired behavior)
- Help them recognize appropriate social skills and learn the kind of behavior that is appreciated and accepted by praising them for kind acts offered to other children
- Spend more time with your child and monitor his or her behavior
- Surround your child with positive role models
- Teach your child other ways to make and keep friends
- Seek help from school counselors

Cyber Bullying

Using the Internet, cell phones, or other electronic means to send or post text or images intended to hurt or embarrass another person is called cyber bullying. Cyber bullying affects almost half of all American teens, but most victims say they have never told a parent or other adult about their negative online experiences.

Like other forms of bullying, teens may engage in cyber bullying because they think that it is harmless or funny, or because the behavior is encouraged by their friends. Teens who might not engage in other forms of bullying may engage in cyber bullying because they believe that their online behavior cannot be tracked or because they are unaware of the serious consequences of their actions.

Talk to your teens and be sure they know they can talk to you about cyber bullying.

If your child is being cyber bullied:

- Save all evidence of the bullying
- Report the problem to the website moderator or your Internet or cell phone service provider
- If bullying continues, report the problem to school officials or a law enforcement officer

For more information on *Keeping Kids Safe Online*, see page 41.

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



Keeping Kids Drug Free

PARENTS CAN MAKE A BIG DIFFERENCE IN THE CHOICES THEIR CHILDREN MAKE. When children know their parents disapprove of using tobacco, alcohol or drugs, they are much less likely to experiment. Do your children know how you feel about these issues?

Most parents find it difficult to talk to their kids about smoking, drinking and taking drugs, but substance abuse education should begin at home long before children enter a classroom. Open communication with your children is key to keeping them drug free. It is important to start talking with your children early and to continue emphasizing strong values throughout their teenage years. Here are some tips to help you address substance abuse with your children from an early age.

Ages 5 – 8

Children of this age need rules to guide their behavior and information to make good choices. They are eager to please and still look to parents for their opinions. Let your children know how you feel about drugs.

As kids spend more time out in the world, at school and with their friends, they begin to gather messages from lots of new places. They are also more aware of what they hear and read in advertisements, on television and in the movies. Children will need your help as they try to make sense of all that new information.

- Model good listening skills by paying attention, allowing your child to speak without being interrupted and repeating back to your children what they said to be sure you understood.
- Practice ways to say “no” with your children by describing situations that may make them uncomfortable, such as someone inviting them to ride their bikes in an area you have set as off-limits or someone asking them for help to cheat on a test.



Ages 9 – 11

As children enter the preteen years, they become very interested in factual information and how things work. They value their friends’ opinions much more and they need to feel accepted by peers. Children need a clear no-use message, factual information and strong motivation to resist peer pressure.

Children will copy the behavior of their parents. It is hard for children to listen to their parents tell them not to drink or smoke when they see their parents doing it. While children can understand and accept that there are differences between what adults may legally do and what is appropriate and legal for children, do not let your children be involved in your drinking by mixing you a cocktail or bringing you a beer. Never allow your child to have sips of your alcoholic drink.

- Teach your kids what to say if they are offered drugs or alcohol by someone. “No thanks, I’m not into that.”
- Prepare yourself with the facts so you are able to answer questions about alcohol, tobacco and drugs.

Ages 12 – 14

Since fitting in with peers matters now more than ever, kids are easily influenced by what their friends feel is suitable behavior and are exposed more and more to drugs and drug use. Talking to your child about the direct unpleasant consequences of tobacco and marijuana use, such as bad breath, smelly hair or clothes or yellow teeth, will be more valuable than discussing the long-term consequences. Kids in this age group are more likely to see older kids doing drugs without seeing immediate consequences, so they are less likely to believe a “black-and-white” statement that drugs are bad.

Kids this age are establishing their own sense of identity; counteract peer influence with parent influence and let them know:

- Alcohol and drugs can cause them to make poor decisions that can prevent them from being accepted into college, being accepted by the military or being hired for certain jobs.



- Alcohol and drugs harm judgment and coordination—give real examples, such as consequences from having unprotected sex or being involved in a car accident that causes permanent injury.

What Parents Need to Know

Staying informed about commonly used drugs can help parents talk to their children about staying safe and drug-free.

Alcohol Alcohol affects the central nervous system and brain. It can make users loosen up, relax, and feel more comfortable, or it can make them more aggressive. Unfortunately, it also lowers their inhibitions, which can set them up for embarrassing or dangerous behavior. In fact, each year approximately 5,000 young people under the age of 21 die as a result of underage drinking.

Tobacco and Nicotine Nicotine, the main drug in tobacco, is one of the most heavily used addictive drugs in the United States. Nicotine is highly addictive and acts as both a stimulant and a sedative to the central nervous system. Exposure to these harmful drugs has been known to cause lung cancer, bronchial disease, emphysema, cardiovascular disease, respiratory problems and sudden infant death. Research also shows that youth who smoke cigarettes are fourteen times more likely to try marijuana as those who don't.

Marijuana The marijuana of today is stronger than ever before. More teens are in treatment with a primary diagnosis of marijuana dependence than for all other illegal drugs combined. Smoking marijuana leads to changes in the brain that are similar to those caused by cocaine, heroin, or alcohol. It affects alertness, concentration, perception, coordination and reaction time, many of the skills required for safe driving and other tasks. Marijuana can also lead to bad grades, broken friendships, family problems, trouble with the law, etc.

Cocaine The major ways of taking cocaine are sniffing or snorting, injecting and smoking. Health risks exist regardless of whether cocaine is inhaled, injected or smoked. These risks include: the collapse of the nasal septum, paranoia, aggression, anxiety, seizures and cardiac arrest. When combined with alcohol, there is an increased risk of sudden death.

Heroin Today's heroin is so pure, users can inject it, smoke it or snort it, causing more kids under 18 to use it. No matter which way it is used, heroin causes severe effects on the human body. Heroin abuse is associated with serious health conditions that include: fatal overdose, spontaneous abortion, liver disease, collapsed veins, HIV/AIDS and hepatitis.

Inhalants and Huffing Inhalants are common products found right in the home and are among the most popular and deadly substances kids abuse. Inhalant abuse can result in death from the very first use. According to the annual Monitoring the Future national poll, approximately one in six children will use inhalants by eighth grade. The same report notes that inhalants are most popular with younger teens. Teens use inhalants by sniffing or “snorting” fumes from containers; spraying aerosols directly into the mouth or nose; bagging, by inhaling a substance inside a paper or plastic bag; huffing from an inhalant-soaked rag; or inhaling from balloons filled with nitrous oxide. Hazards associated with huffing include: hearing loss, brain damage, blood oxygen depletion, limb spasms and depression.

Club Drugs Club drugs are being used by young adults at all-night dance parties such as “raves” or “trances,” dance clubs, and bars. MDMA (Ecstasy), GHB, Rohypnol, ketamine, methamphetamine, and LSD are known to be some of the club or party drugs. It is likely that club drug use can cause a variety of behavioral and cognitive consequences as well as impair memory. Some of the physical effects include dilated pupils, higher body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth and tremors.

Painkillers Painkillers are drugs commonly prescribed for pain and are only legally available by prescription. Brand names include: Vicodin, Tylenol with Codeine, OxyContin, and Percocet. Painkiller abuse can be dangerous, even deadly with too high a dose or when taken with other drugs, like alcohol. Short-term effects of painkiller abuse may include drowsiness, inability to concentrate, apathy, lack of energy, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and most significantly, respiratory depression. If a teen abuses painkillers for a period of time, he can become addicted to the drug and experience withdrawal symptoms when he stops taking the drug. Associated with addiction is tolerance, which means more and more of the drug, or a combination of drugs, is needed to produce the same high or euphoric feeling, possibly leading to overdose.



What Is a Painkiller Overdose? Physical signs of painkiller overdose include pinpoint pupils, cold and clammy skin, confusion, convulsions, severe drowsiness, and slow or troubled breathing

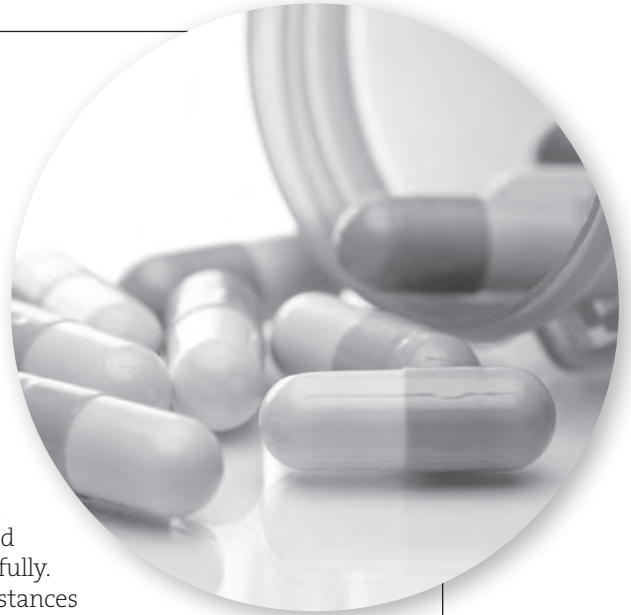
Are Teens Abusing Painkillers? Painkillers like OxyContin and Vicodin are the prescription drugs most commonly abused by teens. In fact, within the past year nearly one in 10 high school seniors has abused Vicodin and more than five percent of seniors have abused OxyContin. Painkillers are also the most abused type of prescription drugs by 16- to 17-year-olds, followed by stimulants, tranquilizers, and sedatives. Almost two out of five teens report having friends that abuse prescription painkillers and nearly three out of ten report having friends that abuse prescription stimulants.

Preventing Prescription Drug Abuse

Think about your home. What prescription and over-the-counter (OTC) drugs do you have? Where are they kept? Would you know if some were missing? The good news is that you can take steps immediately to limit access to these drugs and help keep your teen drug-free:

- 1. Safeguard all drugs at home.** Monitor quantities and control access. Take note of how many pills are in a bottle or pill packet, and keep track of refills. This goes for your own medication, as well as for your teen and other members of your household. If your teen has been prescribed a drug, be sure you control the medication and monitor dosages and refills.
- 2. Set clear rules for teens about all drug use, including not sharing medicine and always following the medical provider's advice and dosages.** Make sure your teen uses prescription drugs only as directed by a medical provider and follows instructions for OTC products carefully. This includes taking the proper dosage and not using with other substances without a medical provider's approval. If you have any questions about how to take a drug, call your family physician or pharmacist.
- 3. Be a good role model by following these same rules with your own medicines.** Examine your own behavior to ensure you set a good example. If you misuse your prescription drugs, such as share them with your kids, or abuse them, your teen will notice. Avoid sharing your drugs and always follow your medical provider's instructions.
- 4. Properly conceal and dispose of old or unneeded medicines in the trash.** Unneeded prescription drugs should be hidden and thrown away in the trash. To discourage teens or others from taking them out of the trash, you can mix them with an undesirable substance (like used coffee grounds or kitty litter) and put the mixture in an empty can or bag. Unless the directions say otherwise, do NOT flush medications down the drain or toilet because the chemicals can pollute the water supply. Also, remove any personal, identifiable information from prescription bottles or pill packages before you throw them away.
- 5. Ask friends and family to safeguard their prescription drugs as well.** Make sure your friends and relatives, especially grandparents, know about the risks too. Encourage them to regularly monitor their own medicine cabinets. If there are other households your teen has access to, talk to those families as well about the importance of safeguarding medications. If you don't know the parents of your child's friends, then make an effort to get to know them, and get on the same page about rules and expectations for use of all drugs, including alcohol and illicit drugs. Follow up with your teen's school administration to find out what they are doing to address the issue of prescription and over-the-counter drug abuse in schools.

Talk to your teen about the dangers of abusing prescription and over-the-counter drugs. These are powerful drugs that, when abused, can be just as dangerous as street drugs. Tell your teen the risks far outweigh any "benefits."



Additional Tips

- Eat dinner together on a regular basis to stay connected with your kids and communicate your family values. Among teenagers who eat dinner with their parents six or seven times a week, 93 percent have not smoked a cigarette in the last month and have not attended drinking parties in the last six months.
- Let your children know that you do not approve of them trying drugs, alcohol or tobacco. Set clear expectations and be consistent in enforcing consequences.
- Educate yourself on the names of drugs and the effects they have on a person so you can give your children the facts. Giving them misleading information will only discredit you as a source of information on these topics.
- If your children come home from school with information about Keeping Kids Drug Free, ask them about it and reinforce the message at home. More importantly, listen to what your children have to say.
- Promote positive decision-making. Letting your children make age-appropriate decisions will help them feel good about themselves and the choices they make. This will help your children develop self-confidence, which will help them reject peer pressure.
- Be involved in your children's lives. Get to know their friends, their friend's parents, who they hang out with and what they talk about. Work with the parents of your children's friends to set up rules about curfews, un-chaperoned parties and other social activities.

For more information and tips, visit www.theantidrug.com.

*Information gathered from: Parents. The Anti-Drug.
Sponsored by the National Youth Anti-Drug Media Campaign.*

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



YOUR SCHOOL-AGE CHILD (6-12 YEARS OLD)



Although school-age children seem so grown up, their social skills are not yet well developed. They may argue and fight a great deal with friends. School-agers need a lot of help learning social skills like how to make friends, trust others, work in a team and resolve conflicts. Children also need to be taught how to use good manners, ask for help and negotiate with others. Often they have to be reminded to carry out homework responsibilities or household chores. Learning self-discipline is an ongoing process that improves each year.

Children this age have not had much experience in setting and achieving goals or in measuring their own strengths and weaknesses. They need adults to provide experiences that are challenging, yet achievable.

Physical Development

- Needs vision, dental, and hearing to be checked starting in the first grade
- Grows very slowly, so there is a huge range of weight and height
- Needs parents to provide a healthy diet as obesity sometimes becomes a problem during middle childhood; fast food should be limited
- Develops coarser skin; freckles and moles may begin to appear
- Begins to lose baby teeth
- Coordinates many motor skills (jumping, skipping and running)
- Begins to focus on “competition” rather than “cooperation”

Social/Emotional Development

- Develops a greater understanding of themselves and their role in the family, at school and in the community
- Gains greater control of their emotions and becomes less fearful
- Learns to value themselves and develop an overall sense of self-worth
- Has opportunities for socializing outside of the family
- Begins to worry about making mistakes, being ridiculed or failing in school
- Interacts in a give-and-take fashion when playing with peers
- Prefers other children who are outgoing and supportive
- Interacts more effectively when parents have been affectionate, warm and accepting with them, and less effectively when there is stress in the family

Cognitive Development

- Needs clear, concrete and specific directions (there are still limitations in their thinking and parents need keep that in mind)
- Uses visual cues and objects to help them solve problems
- Uses reason in logical steps in order to solve problems
- Has improved memory
- Understands cause and effect
- Understands what is real and what is not real

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.

Positive Parenting Tips that Promote Good Behavior in Middle Childhood

Natural and Logical Consequences

Natural and logical consequences are effective in helping children see the connection between their actions and the results of their behavior. Natural consequences include the results of a child's actions without any adult interference. For example, the natural consequence of refusing to eat is hunger. Playing in rain puddles will result in wet socks and shoes.

Natural consequences are sometimes dangerous or impractical. For example, it would be dangerous for a child to experience the natural consequence of running into the street because the child might be hit by a car.

When natural consequences are unsafe for a child, you can use logical consequences to help the child correct behavior. Logical consequences require adult intervention. A logical consequence for an 8-year-old not studying for a test because he/she was talking on the phone with friends could be losing the privilege of talking to friends on the phone until grades improve.

The following examples also illustrate the use of logical consequences:

- Not cleaning up toys may result in the toys being taken away for a short period.
- Not being able to get up for school in the morning may result in an earlier bed time.
- Lying or other unacceptable behavior may result in a child writing an essay for the parent.

Additional tips:

- Since middle childhood brings about a better understanding of reasoning, parents may have to give more detailed explanations for expected behaviors.
- Have your child help out with setting limits and consequences.
- Parental listening skills and nurturing continue to be important.
- Children in middle childhood need to feel they have done a job well to build healthy self-confidence.
- Helping out at home gives school-age children a sense of belonging, mastery and confidence.
- Monitor and guide children from a distance as they move into new activities on their own.
- Interact with all children in a warm, accepting, yet firm manner at all times.
- Structure the home environment so that children can meet school responsibilities.
- Become involved with and support your children in activities outside of the home (i.e. school, sports teams and organized activities).
- Help your children deal with social problems such as social isolation, aggression and bullying by talking openly with them.
- Monitor the amount and content of television watching.



HERE'S HELP

Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.





Keeping Kids Safe Online

THE INTERNET IS VALUABLE FOR INFORMATION, ENTERTAINMENT AND COMMUNICATION. While much of the information found online is accurate and helpful, some information may be misleading, offensive or even dangerous. Education and parent involvement allow kids to benefit from technology while protecting them from danger. Here are some ideas you can use to help your child stay safe online, followed by a few Web sites you can visit for more ideas and information.

- 1. Set Ground Rules.** Agree on what is reasonable for each child, from the amount of time they can spend online each week, to which sites they can visit without permission. If kids are searching for information, it is a good idea to assist them during the search process and then let them navigate the sites once you are sure they are safe.
- 2. Explain Safety Rules.** When children know what you expect of them and have clear, consistent consequences for not following rules, they are more likely to follow rules and avoid dangerous situations.

 - **Personal Information** Let your children know that it is dangerous to reveal any personal information about themselves to someone they meet online. This includes their names, where they live, their ages, the school they attend or where their parents work. Tell them to let you know if someone is asking for this information while they are online. Be sure to praise them when they follow through with this rule. Also, tell your children it is never a good idea to share user names, logins or passwords with friends or people they chat with online. This is personal information and should not be shared.
 - **Pictures** Do not allow your children to send any pictures of themselves to someone online without your permission.
 - **Meeting in Real Life** Tell your children never to get together with someone they meet online without your permission. If your children make a friend online they wish to meet in person, go with them to a public place to meet the person.
 - **Cyber Bullying** Have your child agree never to post anything that is mean toward another person online. If someone sends your children a nasty message, tell them to let you know so that you can report it to the Web site.
- 3. Keep the Computer in a Common Room.** When everyone in the house can see the screen, there is a better chance kids will follow the rules of online safety. Children who have computers with Internet access in their bedrooms are more likely to come across inappropriate content online.
- 4. Supervise.** Just as we want to know where our children are physically, who they are with and what they are doing, we need to know where they are going on the Internet and whom they are meeting there. When kids are first learning about the Internet, use the Internet with them.
- 5. Respectfully Monitor Online Activity.** Online activities are unrestricted and open for your review. Checking up on children online for their safety is very different from looking through their rooms for their private diaries. What is available about your children online could place them at risk, while personal thoughts they journal and keep to themselves allow for healthy self-expression and reflection.

 - **Online Profiles** If you want to see if your children have online profiles, such as MySpace or Facebook, you can search the Internet by inserting your children's names, or their friend's names, into a search engine like Google. If your children have online profiles, let them know you need to see them, perhaps tomorrow. Give them a chance to look at their profiles and think about the content.
 - **Web site History** Check your computer's history. This will tell you what Web sites were viewed recently. However, many children and adolescents know how to clear a browser history or delete records of certain web sites. Fewer children will clear cookie files. If the history is consistently empty, your computer may be



set to automatically delete the history each time you exit out of the Internet. This is a feature that you can easily disable. For instructions on how to check history visit: www.webwisekids.org/how-to-check-your-computer-history.pdf

- **Filtering and Monitoring Software** Check with your Internet service provider to see what free filtering and monitoring options are available. Software can track how much time kids spend online, allow them to access the Internet during only certain times of day when you know you will be home, and filter content so children aren't accidentally exposed to inappropriate content while doing a search on the Internet. Software programs can be a big help, but there is no substitute for adult supervision.

6. Talk to Your Children. Music, television, magazines, and the Internet are all sending messages to your children. Balance these messages with what YOU want them to know about different issues. If your children tell you about something they found online that is a concern, DO NOT OVERREACT. Talk to your child about what you know and believe about the issue. Remember to praise your child for coming to you with this information!

By establishing clear expectations with your children, and supervising and monitoring their online activity, you are being a responsible parent. If you feel your children are hiding their online activities from you, or you believe they might be in danger, it is up to you to find out what is going on. Please call 1-800-FLA-LOVE (1-800-352-5683) for referrals to local community resources.

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.

Web sites with additional information about keeping kids safe online:



Web Safety Guides

www.getnetwise.org
www.webwisekids.org
www.ikeepSAFE.org
www.cybertipline.com

Safe Sites for Kids & Tools for Adults

www.annesdiary.com
www.netmom.com
www.seniornet.org

Supervision Tools

www.netlingo.com
www.teenchatdecoder.com
www.mymobilewatchdog.com
<http://kids.getnetwise.org/>



YOUR TEENAGER



Many parents that have raised teenagers say the two hardest times in life came when they were a teenager and when they raised a teenager. Adolescence is a time of energy, passion and emerging identity. Parents often struggle with how to deal with their adolescent. Although your child seems to want little to do with you right now, teenagers still need nurturing, support and guidance to become independent adults.

Physical Development

- **Begins puberty:** Girls have body growth along with the growth of breasts, pubic hair, and underarm hair and may also start menstruating. Boys will have body growth along with the growth of testes, penis, underarm/facial hair, and will have a change in their voice.
- Faces health concerns such as eating disorders, substance abuse, sexuality, pregnancy, depression and suicide
- Requires more sleep now that they are growing rapidly

Social/Emotional Development

- Feels greater pressure to develop social relations with peers, and when these social relations happen, teens move further away from their parents, which can create conflict and tension at home
- Struggles with self-doubt such as “What am I good at?”

Cognitive Development

- Thinks more flexibly
- Thinks through several solutions to a problem
- Suspends judgment until receiving all information
- Knows how to seek information
- Anticipates the probable consequences of alternative actions before choosing them
- Has a tendency to misinterpret other people’s behaviors and motives
- Tends to exaggerate or oversimplify matters
- Engages in argumentative and rebellious behavior
- Has trouble with indecisiveness
- Finds fault with authority figures

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.

Positive Parenting Tips that Promote Good Behavior during the Teen Years

- It is important that parents are aware of and sensitive to all of the developmental changes that are taking place.
- Parents should monitor the actions and behaviors of their teenager.
- It is key that parents are aware/supportive of their teenager's need to be independent and allow the teen to make small decisions.
- Parents need to be consistent with consequences that they set for their teenager.
- Parents should ensure their teenager gets physicals and visits the dentist to prevent any health problems.
- Parents should also be aware of the risk-taking behavior that teenagers might engage in and make sure that they have open communication with them about the dangers of risky behavior.
- Teens will get upset and yell—it is important that parents don't take it personally.



HERE'S HELP



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HELPING KIDS COPE WITH STRESS

YES, EVEN CHILDREN EXPERIENCE STRESS. Stress can be caused from schoolwork, changes at home such as divorce, moving to a new school or town, dealing with a traumatic event such as a hurricane, or being exposed to tragic events through the media. Toxic stress can have a negative effect on children's brain development.

All individuals react differently to situations and children react within their developmental stage. What one person may find extremely stressful may not be stressful to someone else; and how one child reacts to stress may be entirely different from another child. It is important to help your children learn to identify what causes them stress and learn healthy ways to cope.

Learning healthy ways to deal with stress at a young age will help them cope with difficulties they will experience throughout their lives. Before you can help your children, it is important to first recognize your children are dealing with stress.

SYMPTOMS YOUR CHILD IS DEALING WITH STRESS:

Changes in sleeping pattern

- Fear of sleeping alone
- Nightmares
- Sudden onset of bedwetting

Mood swings

- Irritable or withdrawn
- Overwhelming feelings of sadness
- Overreacting to minor problems
- Throwing tantrums

Complaining of physical pain

- Headaches
- Stomachaches

Teasing/bullying others



As a parent, you can offer the following support:

- Offer an opportunity for children to talk about how they are feeling and why
- While listening to your child, label out loud the names of the emotions he might be feeling (For example: You must have felt it was unfair/disappointing)
- Create problem solving solutions together
- Be a positive role model
- Keep kids on a regular schedule
- Encourage healthy eating and proper rest
- Help kids plan and prioritize school assignments—time management skills help decrease feelings of stress
- Provide play experiences and exercise where children are able to release built up tension such as playing a sport, taking a walk or riding a bike
- Tell or read stories about other children in similar stressful situations
- Give hugs and back rubs—physical attention is always comforting

WHEN GOING THROUGH A DIVORCE, separation or other family changing situation:

- Let the child know they are not to blame
- Do not involve children in adult disputes and try to handle conflicts when children are not present
- Work with the other parent to provide a consistent routine for the child
- Let the child ask questions and remember to do what is in the child's best interest



WHEN MOVING to a new school or town:

- Prepare your child for the move to the new surrounding and allow them to express feelings of sadness for leaving their old school
- Take a tour of the new school and allow them to be familiar with places such as the bathrooms, libraries, and principal's office before their first day
- Keep kids on their regular schedule, especially meals and bedtimes
- Help your child make new friends by introducing them to different social settings with kids their own age
- Make sure to keep the lines of communication open and check-in daily with how your child is adjusting
- Be a role model and think positively

WHEN DEALING WITH A TRAUMATIC EVENT:

- Allow your child to mourn; give them time to heal
- Let them ask questions and answer honestly
- Limit your child's exposure to the tragic event—children may feel the event is still happening and many pictures from the media may be too graphic for children, especially when they are young
- Kids want to know everything will be okay, take the opportunity to tell them about the kindness and support others offer those affected by the event

HERE'S HELP

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available in your community.



DEALING WITH DEPLOYMENT



Understanding the Impact of Deployment on Children

The deployment of a family member can be a very emotional and stressful time for families. Children's reactions to deployment will vary depending on their age, gender, developmental stage and personality type. Children who are sensitive, or who have had previous social or emotional problems, are at increased risk for more serious reactions to the stress of deployment.

Age of Child

Typical Symptoms of Stress

Infants (*birth to 1 year*)

May have decreased appetite and increased irritability.

Toddlers and Preschoolers (*1–6 years*)

May appear more gloomy or tearful, have trouble sleeping, throw more frequent temper tantrums, return to behaviors they had outgrown such as bed wetting and thumb sucking, experience separation anxiety and engage in war-related play.

School Age Children (*6–12 years*)

May be more irritable, aggressive, whiny, fearful or withdrawn; have changes in eating, sleeping and activity patterns; show unusual fascination with war, death and weapons; complain of frequent stomach-aches or headaches or have more trouble at school.

Teenagers (*13–18*)

May be rebellious, irritable and more easily frustrated, want to spend more time with friends, suffer from low self-esteem, loose interest in sports and other hobbies, or engage in risky behavior like sex, drugs, or juvenile crime.

NOTE: *If children show signs of extreme stress, or if any symptoms last for more than six weeks, seek professional help from school, community or military service providers.*

Tips for Helping Children Deal with Deployment in Healthy Ways

Pre-Deployment

LEARN all you can about the deployment and what options are available for children to communicate with the deployed family member (mail, email, phone calls, video chats, etc.)

SHARE factual information with children in a calm and reassuring manner. Use terms they can understand.

INVOLVE preschoolers and school-age children in the preparation process. When children understand their new roles and can take part in making changes, they feel more in control of the situation and less stressed.

REASSURE children that the deployed family members are trained to do the important job they are going away to do and that they look forward to returning home after their mission. Let them know they are loved and that someone will always be there to take care of them. >>



LISTEN to children's questions and allow them to share their feelings, needs and fears. Young children see the world in very simple ways. Your answers to their questions about war should also be simple.

ESTABLISH a support system for yourself where you can express adult concerns and worries related to deployment and get the support you need to care for your family. Children are not equipped to provide the support parents and caregivers need.

INFORM teachers, coaches and other caregivers of the deployment so they can be on the lookout for changes in children's behavior that may indicate the need for additional help.

=====
Activities that Help Kids Cope:
=====

- Take pictures of the deploying family member doing everyday things and create a scrapbook the children can look at whenever they want.
- Record the deploying family member reading a chapter book so children can listen to his or her voice every day.
- Display the family member's picture in each child's bedroom so they feel close.

During Deployment

MAINTAIN the daily routine and normal rules of the home to provide consistency for children.

LIMIT children's exposure to the news and to adult conversations about frightening details.

EXPECT some temporary slow down or disruption in doing chores and homework. Patience, understanding and extra help may be needed during this time.

UNDERSTAND that feelings of loss, anger, grief or guilt are normal reactions to separation. Some children may act out or express themselves inappropriately at times as a way of coping with overwhelming feelings of fear, anxiety and confusion.

ENCOURAGE younger children to talk about how they are feeling or express their emotions by painting or drawing. Older children and teenagers may prefer to express their thoughts and feelings in a private diary or journal.

SET personal goals for the deployment period or take up a new hobby or activity; these are some healthy ways to manage stress and cope with feelings of anxiety and fear.

=====
Activities that Help Kids Cope:
=====

- Create a scrapbook of daily happenings to share with the deployed family members upon their return home.
- Send children's paintings or drawings, cards and letters to deployed family members.
- Read letters and emails from deployed family members aloud around the dinner table.



HERE'S HELP

Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.

Post Deployment

GIVE yourself and your family time to adjust and reconnect. It usually takes four to six weeks to adapt after a family member returns from deployment.

UNDERSTAND that things have changed. Family members have grown physically, emotionally and socially during deployment.

OBSERVE your family's new schedule and routines and try things the new way before suggesting changes.

DISCUSS your feelings, thoughts and concerns, but try not to criticize.

SET aside some time to spend with each child, one-on-one, doing activities that are special to them. This makes children feel special and appreciated for their individuality and allows family members to reconnect with each child in a way that is most comfortable for that particular child.

TAKE it easy with the children in terms of discipline. For a while, stick with the rules established during your absence.

MANAGE post-deployment stress with exercise, counseling and other healthy outlets to ensure you don't take your frustrations out on your family members.

SEEK help to deal with post-traumatic stress, traumatic brain injury, depression, or other serious concerns including personal financial crisis, substance abuse or marital problems.

=====

Tips for Reconnecting with Children:

=====

As with deployment, children will respond to reunions differently depending on their age, gender, developmental stage and personality type. The following techniques will help you reconnect with children at each developmental stage.

Infants

- STAY nearby while your family members feed, dress and play with infants so they get used to having you around.
- SPEAK to infants softly and often so they can get used to your voice.
- TAKE an active role in caring for infants as soon as possible.

Preschoolers

- SIT or kneel at their level.
- ASK about their new interests.
- LISTEN to what they tell you.

School Age Children

- ALLOW them to brag about you.
- REVIEW their school work, pictures, scrapbooks, etc.
- PRAISE them for their accomplishments during your deployment.

Teenagers

- LISTEN with undivided attention.
- RESPECT their privacy and friends.
- ENCOURAGE them to share what has happened during deployment.



This tip sheet was developed with information from the following online resources:

*www.uswestaap.org/Parent_Guide_Deployment.pdf; www.usuhs.mil/psy/pdf/CTChildrenCopeDuringDeployment.pdf;
www.MilitaryOneSource.com; www.realwarriors.net/family/children/reconnecting.php*



UNDERSTANDING HEALTHY SEXUAL DEVELOPMENT:

What to Expect as Your Child Grows and Matures

SEXUAL DEVELOPMENT IS AN IMPORTANT PART OF HEALTHY HUMAN DEVELOPMENT. Having an understanding of normal sexual development helps parents and caregivers understand and nurture children as they grow and move through different developmental stages. Children who are nurtured and understand healthy sexual development are less likely to become victims of sexual abuse.

You can nurture healthy sexual development by:

- Meeting emotions with understanding, acceptance and respect
- Fostering a positive view of the human body
- Reinforcing children's strengths and abilities
- Promoting a positive self-image and respect for others
- Responding honestly and accurately to children's questions
- Providing information about bodies and sexuality
- Promoting clear and open communication

Ages Birth to 2 years Infants and toddlers will:

- Learn about sexuality through being held and caressed and by exploring their own bodies, including their genitals
- Learn about love and trust through loving relationships with parents and their caregivers
- Explore their bodies in general and touch their genitals as a form of self-soothing—touching their genitals is just as common as when they pull on their ears, suck on their fingers or touch their toes
- Notice differences between the bodies of boys and girls, children and adults
- Develop either a positive or negative body image

Ages 3 to 5 Preschoolers will:

- Learn to name body parts—teach children the actual terms for the parts of their body, especially their genitals—penis and vulva, etc.
- Become more aware of the genital area through toilet training and develop positive and/or negative attitudes toward elimination and urination depending on toilet learning (for more information, see Teaching Your Child to Use the Potty on page 21)
- Establish a firm certainty about being male or female
- Sometimes get pleasure from touching their genitals and may begin to masturbate
 - **It is important to know** that children do not have the same feelings adults have when masturbating during this age. Parents and caregivers can set limits as to when and where it is appropriate to engage in this activity. For example, "It is ok to touch your penis in your bedroom, but not in the grocery store." It is also important not to instill too many rules, because it may result in children feeling ashamed of their bodies.
- Show an interest in the differences of boys and girls while urinating
- Be curious about the physical differences between the genders and make comments or ask questions about these differences
- Enjoy nudity
- Be interested in privacy for themselves, yet be very interested in the bathroom activities of others
- Be curious and aware of their navels
- Sometimes grab their genitals when under stress or when they need to urinate



- Have fun with bathroom humor and like to use toilet language (bathroom talk) like, “You’re a yucky poo-poo.” Or “Poopy-head.”
- Be curious about where they came from
 - **Teach children correct information** instead of letting them believe misinformation. How much information and how specific varies depending on the person teaching and the need to know. It is perfectly appropriate to tell children at this age that babies come from mommies and daddies. That may be just enough for them before they are interested in another topic.
- Learn what is socially appropriate, about respecting the personal boundaries of others, and about public and private behaviors
- Be interested in babies—usually more about how a baby is born than how one is conceived
- Show curiosity about pregnancy and nursing
- Likely to play house, or doctor or other forms of body exploration or “sex play” with friends
 - **These games are universal** and help children understand gender differences.
 - **This can be a good opportunity** to say to your child, “I know you are wondering about each others’ bodies. Let’s talk about what you want to know.”
 - **It is also a good opportunity to say,** “Your body belongs to you. You can tell someone, ‘No’ if you don’t want to be touched.”
 - **You also need to be aware of safety issues.** Children may insert pencils, sticks or other objects in body openings and cause injury.
 - **Although it is normal** for children of the same ages to engage in this exploratory play, there is cause for concern if one of the children is older.
- May learn words related to sex and try using them.
- May imitate adult sexual roles, for example, your preschoolers may talk about having a boyfriend or girlfriend or who they are going to marry when they grow up. These conversations are normal fantasies for preschoolers.

Ages 6 to 8 It is important to be open and honest during this stage of development and to have home be the first source of sexual information given to children. You want to be a credible source of information to keep the lines of communication open between you and your child. Always remember, it is OK to say, “I don’t know, but we can find out together.” This is a better approach than making an answer up and having your child find out later it wasn’t true. Children ages 6 – 8 will:

- Need to learn to set personal boundaries
- Need to understand actual terms for body parts and be able to talk about all body parts without a sense of naughtiness
- Need to be able to ask trusted adults questions about sexuality, and know that sexuality has private aspects
- Need to be able to identify differences between sexes and learn how babies “get in” and “get out” in general terms if they are curious
- Begin to insist on increased privacy for getting dressed and using the bathroom
- Sometimes use sexual and obscene language to test adults’ reactions
- Become more sensitive to gender differences—same sex friendships tend to be more dominant and development of male/female roles becomes stronger
- May continue masturbation and sex play

Ages 9 to 12 Sexual development is very active during this age, with rapid physical, emotional and behavioral changes in children. Children begin looking more grown up, but it is important to remember they are still children. Children ages 9 – 12 are about to experience many changes to their body that may make them feel self-conscious, embarrassed or awkward. It is important to talk with your child about sexual development and assure them that these changes are normal and that they will be experiencing many changes in their bodies over the next several years. Children at this age can gain a clearer understanding of sexuality through education. By the end of this stage children should be aware of the following: the life cycle and sexual development at all ages, anatomically accurate terms to talk about body parts for both sexes, non-stereotyped gender roles, and the basic facts about personal hygiene. Children ages 9 – 12 will:

- Experience changes in voice and the penis and testicles mature (boys)
- Begin having periods and develop breasts (girls)
- Experience increased sweating requiring the use of deodorant
- Notice changes in skin complexion, including getting pimples
- Begin to grow pubic hair
- Sometimes masturbate to orgasm



- Sometimes engage in some mutual, same gender exploration and sex play, but less than earlier
- Begin to have an interest in the details of their own organs and functions and seek out pictures in books
- Feel uncomfortable undressing in front of others, even a same-sex parent
- Continue to value same sex friendships—may share information about sexuality with friends of the same gender
- Enjoy being like their peers and dressing and speaking the same, which can make them feel less different in times of rapid change
- Sometimes experiment with peeping, sexual jokes, name calling and teasing
- Often engage in swearing and conversations with sexual content—may also use sexual terms to insult each other
- Experience increased sexual feelings and fantasies
- Develop crushes on friends, older teens, teachers, rock stars, etc—romantic feelings may be directed toward the same sex and/or the opposite sex
- Have to face decisions about sex and drugs

Children ages 13 to 18 will:

- Complete the changes of puberty
- Menstruation occurs in almost all girls by age 16 and ovulation is established in girls 18 – 24 months after menarche, the first menstrual period or bleeding
- Value independence and rely less on parents as the sexual authority figures
- Experience increased sexual feelings and desire physical closeness with a partner
- Begin to face peer pressure to be sexually active whether or not they feel ready
- Likely masturbate and engage in sexual fantasies more often
- Favor romantic relationships over close friendships
- Be faced with choices which may lead to pregnancy or sexually transmitted diseases—set expectations and limits about sexual behavior with your child

Additional Tips

Let your children know they can come to you with questions. Starting early with sexual development education can help you communicate with your child now and during the teen years. Some guidelines to help you keep the lines of communication open include:

- Letting your child know he or she can come to you for information
- Always being honest with your child
- Being willing to repeat information until your child understands
- Checking out what your child already knows by asking what he or she thinks
- Keeping your answers simple and thinking about what your child can and can't understand
- Realizing it's OK to say, "I don't know, but I will find out!"

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HERE'S HELP



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on pages 79–82 to learn about
a variety of family support services
available in your community.



STIMULATING DEVELOPMENT IN A DISABLED CHILD



THIS INFORMATION IS NOT A SUBSTITUTE FOR MEDICAL ATTENTION for a developmentally delayed child. Please talk to your family doctor if your child is not meeting his or her developmental milestones.

NO TWO CHILDREN ARE EXACTLY ALIKE. Children with disabilities—even those who have the same type of disability—have unique needs. In this section, we will look at different types of disabilities and how parents can help children with special needs to learn new skills.

The Role of Parents

Provide love and support. The primary need of any child is the love and support of parents. Sometimes parents of children with special needs become so concerned about stimulating their child to compensate for a disability that they forget the most important task is to love and take pleasure in their child as a human being. When children see that their parents enjoy being with them, their sense of self-worth is nourished. That growing sense of self-worth is an important measure of a parent's success in raising a child.

Foster independence. All parents must teach their children independence and help them develop a sense of self-worth and personal fulfillment. Through therapy and play, special needs children learn to deal with their disabilities while realizing their full potential. How much independence your child achieves depends, to a great degree, not only on your child's disability but also on how much you encourage your child to do on his or her own at each stage of development.

Focus on short-term goals. All children reach plateaus in their development—times when they seem to stop moving forward, or when they may even take a step back. This can be a difficult time for parents. Parents of children with disabilities must learn to measure the progress of their youngsters in inches rather than yards.

When your child reaches a plateau, it is helpful to look back and focus on how far he or she has progressed. This may also be a good time to focus on short-term rather than long-term goals—finger-feeding, getting dressed, repeating the first intelligible word or phrase, or finally mastering toilet training. When parents focus all their energy on a single, short-term goal, a child with a disability may begin to move forward again. Stopping to observe how your child copes with challenges and how he or she adapts to new and greater demands will help you develop realistic expectations for your child.

Children progress best when their parents function as advocates for them, choosing the most appropriate educational settings, setting reasonable goals, and providing a warm and nurturing environment. Parents should view themselves as partners with professionals in planning the care of their children with disabilities.

Stimulating Developmental Potential

From the moment they are born, children begin learning about the world around them. They learn through their movements and through their senses of taste, touch, smell, sight and hearing. When one or more of these senses are impaired, the child's view of the world may be different and how they learn from it changes. Yet, with advances in medicine, technology, and our understanding of how babies grow and learn, we can frequently expect far greater physical and mental development from children with disabilities than was possible even a decade ago. How much development depends upon the extent of the disability, how soon it is correctly diagnosed and how quickly the child is placed in an appropriately stimulating environment. Children with mental disabilities, for instance, need frequent and consistent stimulation because they often have difficulty focusing their attention and remembering.



They may also have perceptual difficulties that make it hard for them to understand what is happening around them and why it is happening.

Focus on the impaired sense. In many cases, a child's abilities can be improved by stimulating the impaired sense. Children with muscular dystrophy, Down syndrome and cerebral palsy often can benefit from a physical therapy program that exercises all their muscles. Exercising the legs and feet of children with severe cases of spina bifida prepares them for walking with braces and crutches. Children with hearing impairments can learn to use their residual hearing with the help of high-power hearing aids and auditory training that increases and expands their listening ability. Children with severe visual impairments can sharpen their other senses to help compensate for their lack of sight while they learn about their world. Children with Down syndrome and cerebral palsy may also benefit from vision, speech and occupational therapies.



Work with a therapist. Stimulation programs geared for children from birth to age three have demonstrated that even children with severe disabilities can learn, grow and participate in the world around them. Parents can lead many of the exercises in such programs themselves, but they usually benefit from the supervision of a trained therapist. Your local health department, public school, or state department of disabilities may have an appropriate infant stimulation program. If not, they may be able to recommend a trained therapist who can visit your home regularly to help your child and teach you appropriate exercises and play. University teaching hospitals and private agencies that serve children with disabilities may also be good sources of information.

Use play to explore. Play is an important way of learning for all children. Children with disabilities who can't move around to explore on their own can still learn about their neighborhoods through trips with the family. Within the home, children can be carried or guided from room to room to touch, feel, see, smell or hear various objects. Children with impaired vision can use their hands, faces, feet and other parts of their bodies to explore and learn. Children with impaired hearing need constant language stimulation and, like all children, need to hear explanations for what is happening around them. Pictures in books and magazines are another way of exposing children with disabilities to places, people, animals and ways of life outside their immediate experience.

For more information on helping your child succeed with a disability, talk to your family doctor.

Gathered from the following website: <http://health.howstuffworks.com/hsw-contact.htm>

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.

Home Safety Checklist

Today's Date: _____

Check the time you are conducting the home safety check based on your child's age:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Prenatal or less than 3 months old | <input type="checkbox"/> 3-years-old |
| <input type="checkbox"/> 4 to 6-months-old: Getting ready to crawl | <input type="checkbox"/> 4-years-old |
| <input type="checkbox"/> 9 to 12-months-old: Getting ready to walk | <input type="checkbox"/> New home |
| <input type="checkbox"/> 2-years-old | <input type="checkbox"/> Other: _____ |

Check "yes," "no" or "N/A" (for not applicable), based on what you see.

HOME SAFETY

Walk around to check the safety of the home (bathroom, kitchen, bedroom, etc.) by answering the questions below.

- | | | |
|-----|---|---|
| 1. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are electrical cords intact and away from the reach of children? |
| 2. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are electrical appliances away from a filled tub, sink or running water? |
| 3. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are painted surfaces (including walls and furniture) free from chalking, flaking and peeling, which could indicate the presence of lead-based paint? |
| 4. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are all exterior doors, including pet doors if applicable, childproofed (latches, high locks or alarms, etc.)? |
| 5. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are all stairways and floor space for walking clear from obstruction and in a non-slippery condition? |
| 6. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Is there railing protecting all stairways and elevated landings (top and bottom of stairs)? |
| 7. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | If there are railing slats greater than 2-3/8 inches apart, are they covered with a piece of wood or hard plastic? |
| 8. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Is there a safe place for the child to sleep? |
| 9. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | If there is a crib, are the gaps between the slats on the crib 2-3/8 inches or less? |
| 10. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | If there is a child under 1 year of age, is the sleeping area free of soft bedding (including bumper pads), pillows, blankets and stuffed animals? |
| 11. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | If there is a crib, does the crib sheet and mattress fit tightly to avoid entrapment and suffocation? |
| 12. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Are all houseplants out of the reach of children? |
| 13. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Are all ashtrays out of the reach of children? |
| 14. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Are emergency numbers readily accessible? (See list of phone numbers) |
| 15. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are knives and other sharp objects out of the reach of children or in a childproofed drawer? |
| 16. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are plastic bags out of the reach of children? |
| 17. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are sharp edges and corners covered (i.e., fireplace, tables, etc.)? |
| 18. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are there safety plugs in <u>all</u> unused electrical outlets? |
| 19. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Are hair dryers and curling irons out of the reach of children? |
| 20. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | Are the iron and ironing board out of the reach of children? |
| 21. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are all chemicals and cleaning supplies stored in original containers? (Some examples of dangerous products include paint thinner, antifreeze, gasoline, turpentine, bleach, insect spray, fertilizer, poison.) |
| 22. | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are all chemicals and cleaning supplies stored out of the reach of children or in a childproofed cabinet? >> |



23. Yes No Are all vitamins, over-the-counter and prescription medication stored out of the reach of children or in a childproofed drawer/cabinet?
24. Yes No N/A Are all alcoholic beverages stored out of the reach of children or in a childproofed cabinet?
25. Yes No N/A Are cosmetics stored out of the reach of children or in a childproofed drawer/cabinet?
26. Yes No N/A Are curtain and blind cords kept out of the reach of children?
27. Yes No N/A If residence is not on the ground floor, is furniture that a child could climb on away from windows, or are there window guards installed?

FIRE SAFETY

28. Yes No Are smoke alarm(s) in working order and located on every floor?
29. Yes No N/A Are space heaters in good repair and are they at least 4 feet from clothing, curtains/drapes or any flammable material?
30. Yes No Are there two unrestricted exits (windows or doors) that can be used in case of fire?

WATER SAFETY

Look at all outdoor areas with water (pool, hot tub, retention pond and/or fountain). Measurements are based on current Florida Building Code 424.2.17.

31. Yes No N/A If there is an in-ground pool, is there at least a 4-foot barrier with gaps of no more than 4 inches?
32. Yes No N/A If there is an in-ground pool, is there two inches or less between the ground and the bottom of the pool barrier?
33. Yes No N/A If there is a door from the house that leads into an area with water, is there an exit alarm or a lock located at least 54 inches above the floor?
34. Yes No N/A If there is a barrier around the pool, are large objects outside of the barrier (such as tables, chairs or ladders) far enough away from the barrier to prevent children from using them to climb over the barrier and into the pool area?
35. Yes No N/A If there is a gate into the area with water, is there a latch on the gate that closes automatically? Is the latch located on the side with the water? Is the latch located at least 54 inches above the bottom of the gate?
36. Yes No N/A If there is a window that is accessible to the area with water, is there an exit alarm and/or is the base of the window at least 48 inches from the interior floor (can be 42 inches if there is a cabinet beneath a screened or protected pass-through window)?
37. Yes No N/A Are toys and objects that may attract children kept out of the water when not in use?
38. Yes No N/A Are there life saving devices near the pool such as a hook, pole or flotation device?
39. Yes No N/A Are pool chemicals kept away from heat sources and out of the reach of children?
40. Yes No Is the property free from containers of water or other fluid left uncovered or accessible to a child (i.e., inflatable “kiddie pool”, buckets, etc.)?

This Home Safety Checklist was developed by Healthy Families Florida

HERE'S HELP

Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



CHOOSING CHILD CARE



When choosing child care, plan as far in advance as possible. Choosing the right child care and finding help with child care expenses can take some time. Call your local Child Care Resource and Referral agency for help, or call **Child Care Aware at 1-800-424-2246** to be referred to local providers.

You may also want to ask your employer, family members, friends, church or school for recommendations. Consider all your child care options. After you find a few child care programs that meet your family's budget, schedule and special needs, call to arrange an appointment to visit the child care centers or family homes you have selected.

At the same time you set up your regular child care, look at your options for back-up care. Consider which of your relatives, friends or neighbors might be available to help you out on an emergency basis. Talk to them about when it might be okay for you to call on them. It is best to identify more than one back-up arrangement if possible.

An overview of the types of child care typically available and a checklist of things to look for in quality child care providers is

provided on the following pages. For additional tips on quality child care settings and programs, please visit the Florida Children's Forum at www.thechildrensforum.com. For additional information on child care standards and licensing requirements, visit www.myflorida.com/childcare.

Types of Child Care

In-home Care Providers

In Florida, when one adult cares for one family's children other than their own, there are no state guidelines or inspections.

Relative Care

Parents may choose a relative caregiver because...

- Their children are comfortable with the relative.
- Parents trust the relative.
- Relative caregivers may be more flexible and willing to work around their schedule, especially for parents who work non-traditional hours.

Relative child care may raise unexpected and sensitive issues...

- **Discipline:** Clearly outline your ideas about discipline with your relative, including rules you want them to use to guide your child.
- **Daily routines:** Discuss your feelings about television, reading, friends and chores.
- **Child safety:** Use a safety checklist to assess the safety of your relative's home and educate relative caregivers on the dangers of shaking babies and children.

Signed agreements that cover when and how payment will be provided and how sick days and vacations will be handled will help eliminate misunderstandings.

Nannies and Au-pairs

Parents may choose these in-home care providers because they believe their children will be safer and more secure in their own home. They believe that if they employ the caregiver to work in their home, they have more control over the kind of care their children will receive. Some parents find in-home care is a more convenient arrangement for the family and may provide more flexibility. If there are several children involved, they may find that in-home care is not significantly more expensive than other forms of care.



Family Child Care Providers

Family child care is regulated care that takes place in a caregiver's home. (Florida law also recognizes large family child care homes with two adults providing care. All large family child care homes must be licensed.) The age of children in care often varies, although some caregiver's service only a specific age group, such as infants, toddlers, preschoolers or school-agers.

Parents may choose family child care because they want to keep their children in a home-like environment, they prefer to relate to a single caregiver, or they believe that children are healthier, happier and more secure in smaller groups.

Some parents like having all their children in the same group. Parents may also find family child care is closer to home, less expensive or more flexible than other care options.

Registered Homes

Registered child care homes must meet state statute requirements, and must:

- Register annually
- Provide proof of substitute care
- Administer screening/background checks of all adults in household
- Keep current immunization records of children on file
- Complete a 30-hour family child care course

Licensed Homes

Licensed child care homes must meet all requirements for registration and must pass an initial state inspection to ensure that all standards required by statute have been met. In addition, they must:

- Follow health, safety and nutrition guidelines
- Maintain admissions and record keeping
- Maintain current certification of a CPR and first aid course
- Receive an initial inspection prior to receiving a license
- Comply with two routine inspections per year
- Allow access to children in care
- Adhere to all other standards in statute

Child Care Centers

Parents may choose child care centers because they believe that larger groups, multiple caregivers, and state inspections make programs safer for their children and make the arrangement more dependable; or because they respect the reputation of the child care program or the institution sponsoring the program. Many parents believe that more staff, space, equipment, toys and organized activities provide a better learning environment for their children.



Key Ingredients

No matter which options you are considering for your child, you should always visit a home or center more than once before deciding to place your child there. Important features to look for in any child care program include:

- **Supervision:** Children should be supervised at all times, even when sleeping.
- **Sanitation:** Caregivers should wash their hands often, especially after diapering and before handling food. Children should also wash hands before eating.
- **Discipline:** Discipline should be positive, clear, consistent and fair. Florida law prohibits any form of discipline that is severe, humiliating, frightening, or associated with food, rest or toileting. Spanking or any other form of physical punishment is prohibited by all child care personnel.
- **Safety:** Toxic substances and medications should be clearly labeled and stored out of child's reach. Caregivers should know first aid and CPR. The child care location should be free of radon, lead and asbestos. Indoor and outdoor play areas should be inspected regularly for safety hazards.
- **Responsiveness of the caregiver:** Caring staff should adapt their approach to meet your child's needs.
- **Appropriateness of the learning activities:** Activities should be appropriate to your child's age and stage of development.
- **Ratio of children to adults:** Good staff-to-child ratios allow for individual attention and help build strong relationships with caring, consistent adults.
- **Qualifications of teachers and caregivers:** Ask about the background and experience of all staff. Is the program accredited? Accreditation means the home or center voluntarily measures up to national standards of quality beyond the minimum licensing requirements. Caregivers in accredited programs take part in ongoing child development training and are more likely to provide positive guidance for children.
- **Turnover rate for staff and families:** Why do families leave? How does the program help children adjust to staff turnover?
- **Transportation:** Appropriate child restraints and seat belts must be used when transporting children and a log must be kept of children being transported to ensure all children have arrived safely at the destination and have exited the vehicle. Logs are required to be maintained for four months.

Child-to-Staff Ratios

Florida Statutes require child care providers not exceed the following staff-to-child ratios (Note: Some counties may have more restrictive ratios than those required by the state.)

For licensed child care facilities:

Children under 12 months:	1 to 4
Children age 12 to 23 months:	1 to 6
Children age 24 to 35 months:	1 to 11
Children age 36 to 47 months:	1 to 15
Children age 48 months to 59 months:	1 to 20
Children age 60 months (5 years old) or older:	1 to 25



A family child care provider may care for one of the following groups of children:

1 to 4:	from birth to 12 months of age
1 to 6:	if no more than three are under 12 months
1 to 10:	as long as at least five children are school-age and no more than two are under 12 months of age
2 to 8:	if more than 4 children under 24 months old
2 to 12:	if no more than 4 children are under 24 months old

After you have placed your child in care, continue to visit your child care provider unannounced from time to time.

The following checklist will help you measure the quality of a child care home or center:

- Do the children look happy and appear well cared for?
- Are the children involved in age-appropriate activities?
- Are there plenty of clean, safe toys within reach of children?
- Is the program in a safe and clean environment?
- Is the space decorated in an inviting way?
- Is there a fenced-in outdoor play area?
- Are nutritious snacks or meals provided?
- Do children get a chance to make choices about their activities, allowing them as much independence as they're ready for?
- What is the typical daily schedule?
- How often do children play outdoors?
- How do caregivers resolve conflicts between children?
- What is the discipline policy?
- Do caregivers listen and talk to children individually?
- Do caregivers play with children?
- Do children receive individual attention?
- Are there opportunities for parents to help with the program, and are parents encouraged to drop in at any time?
- How long has each caregiver worked there?
- Are reference and background checks performed on all staff?
- Is the program licensed or accredited?
- What are the rates?
- Are there any additional fees?
 - Is there any financial assistance available?

HERE'S HELP



Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



Special Concerns for Infants and Toddlers

- Are infants and toddlers toys washed and disinfected regularly?
- Are all infants put to sleep on their backs?
- Are daily progress reports provided to parents?
- Will the caregiver make accommodations to support you if you wish to continue breastfeeding?

What is VPK?

VPK stands for the Voluntary Prekindergarten Education Program. If you live in Florida and your child turns 4 four years of age by September 1, your child is eligible to participate in Florida's FREE Voluntary Prekindergarten education program. Parents have the option of choosing from a wide range of participating providers that meet their family's needs including private and faith-based child care centers, private and public schools and licensed family child care homes. Parents can enroll their children in either the school-year program, which provides a total of 540 instructional hours, or the summer program, which provides 300 instructional hours. Instructor ratios for VPK are 1 instructor to 10 children with class size not exceed 18 children in the school-year program or 10 children for the summer program. To learn more about the VPK program, visit www.fldoe.org/earlyLearning.



CHOOSING AFTER-SCHOOL CARE



Children are likely to spend as many hours in their after-school program as they do in school. Children in quality after-school programs tend to do better in school and have fewer problems with criminal behavior, alcohol and drugs.

Ask family members, friends and school personnel for recommendations. Call the programs and ask about availability, hours and fees. Visit the programs and interview staff.

After-school care should be different from school and different from a childcare program for younger children. Look for these features in a quality after-school program:

- Develops personal and interpersonal social skills and promotes respect for cultural diversity. For adolescents, fosters an appropriate sense of independence based on their level of maturity.
- Provides help with homework, tutoring, and other learning activities.
- Provides new, developmentally-appropriate enrichment activities to add to students' learning at school, help them develop thinking and problem-solving skills, and spark their curiosity and love of learning.
- Provides recreational and physical activities to develop physical skills and constructively channel children's pent up energy after a day sitting in a classroom.
- Provides resources, such as a library and sports equipment.
- Provides varied activities for children, with enough art, craft and reading materials to keep children interested
- Activities are adapted to suit children of different ages.

Also ask:

- Can children come before school and on holidays as well as in the afternoon? Is there an extra fee for that? Is there a late fee if you must pick up your children after the program is over?
- Can children attend only a few times a week instead of every day—to accommodate parents' schedules, to save on costs, or to allow for partial sibling care?
- What are the costs? Are there extra fees for trips, personal tutoring and lessons?

Your children can help you evaluate their after-school care. Remember to talk with your child about the program and each day's activities.

HERE'S HELP



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WHEN TO LEAVE YOUR KIDS HOME ALONE



Eventually every parent is faced with the question of whether his or her child is old enough to begin staying home alone. When older children are placed in situations of independence that they can handle, it can help them learn responsibility. However, asking too much too soon is dangerous and holds consequences for the child and the parent.

Children left unsupervised or in the care of young siblings are at increased risk for accidental injury and behavioral and academic problems. Florida law does not have a hard and fast rule about when children can be left home alone, but instead expects parents to take all of the circumstances into account when deciding what level of supervision is needed.

Because children mature at different rates, there is no single, pre-set age at which children are considered “old enough” to stay home by themselves for short periods. Parents must evaluate their child’s individual development and physical capabilities.

The National SAFE KIDSCampaign recommends that children not be left alone before the age of 12. Many other children will not be ready until later than that. Also, experts caution that older siblings are generally not ready for the responsibility of supervising younger children until the age of 15 or older.

The following are some questions families should answer before making this important decision:

- Is my child comfortable, confident and willing to stay home alone?
- Does my child consistently follow my rules and guidelines?
- Has my child demonstrated good independent judgment and problem-solving skills in the past?
- Is my child able to stay calm and not panic when confronted with unexpected events?
- Have I brainstormed with my child about what unexpected situations could possibly come up while he or she is alone, and how to handle them?
- Is my child consistently truthful with me? Does he or she readily come to me with problems and concerns?
- Does my child understand the importance of safety and know basic safety procedures?
- Will my child make decisions to stay safe, even at the risk of seeming rude or overly cautious to other children or adults?
- Does my child have the ability to calmly provide his/her name, address, phone number and directions to our home in an emergency?
- Can my child lock and unlock the doors and windows of our home?
- Can my child tell time?
- Is my child able to work independently on homework?
- Have my child and I established a clearly structured routine for when he or she is home alone, with defined responsibilities and privileges?
- If I have more than one child staying home, have the children demonstrated the ability to get along well and solve conflicts without physical fighting or adult intervention?
- Have my child and I had some “dry runs” to allow him or her to practice self-care skills while I am at home, but purposefully “not available”?
- Is our neighborhood safe?
- Do we have neighbors that my child and I know and trust?

After reviewing this list of questions, you’ll have a better idea of how ready your child is to stay home alone. These are only general guidelines. Parents and other caregivers must also consider other factors specific to their individual child and family circumstances in order to make the best decision.



Parents and caregivers should begin leaving children home alone progressively—for only a short time, at first, and stay relatively close to home.

To help ensure a child's safety when staying at home alone, follow these safety tips:

- Place all emergency numbers (doctor, hospital, police department, fire department, poison control center, emergency medical services) and the phone number of a friend or neighbor in a visible place near all phones.
- Make sure your child knows your fire escape plans. Remind your child to get out of the house immediately if the smoke alarm sounds and to call the fire department from a neighbor's house.
- Show your child where the first-aid kit is and how to use the items in it.
- Prepare a snack or meal for your child in advance, preferably one that does not need to be heated.
- Tell the child where you will be, how you can be reached, and when you will return home.
- If possible, leave your beeper or cellular phone number. Knowing your child can reach you in an instant will help you, and your child, feel more at ease.
- If your child arrives home to an empty house, have him or her call you to check-in.
- Set ground rules for:
 - leaving the house
 - having friends over
 - cooking
 - answering the phone/door
 - using the Internet

If self-care is not appropriate for your child at this time, you may want to consider your child care options. Read the Choosing Child Care section of this booklet for information on how to select child care that best meets the needs of your family.

HERE'S HELP



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COACHING YOUR KIDS FROM THE SIDELINES

Participating in sports helps children develop a number of qualities that will have lifelong benefits. Studies suggest that participation in sports can help children learn responsible social behavior and gain an appreciation of personal health and fitness. Regular physical activity also helps the body manage stress, which can result in better school performance and improve your child's ability to respond appropriately to daily challenges. In addition to these benefits, team sports give children a sense of belonging. Below are some tips to help parents build confidence and good character in their children through sporting activities.

Setting an Example for Your Child

- **Teach good sportsmanship.** Be a role model to your child and other parents. Offer words of encouragement to your child, his or her teammates and their opponents.
- **Be respectful of everyone.** Show respect for the other team, the coaches and the officials. Avoid criticizing a child's athletic ability, a coach's decision or an official's call on a play. Keep this in mind when attending athletic events and watching sports on TV with your child as well. If you have a concern about a coach's particular style of coaching, politely bring your concern to the coach's attention after the game. You may want to volunteer to help the coach during the next practice.

Building your Child's Confidence and Motivation

- **Focus on effort, not results.** The message to "win at all costs" can put a lot of pressure on a child. Regardless of the final score, your child should feel proud that he or she played their best. Let children know when they had the right idea or made the right decision in the game even if it didn't result in a score. Let your children know they are always winners in your eyes.
- **Accept mistakes.** Children are still learning to master the skills of the sport and making mistakes is a valuable part of the learning process. Focusing on what they learned or what they can do the next time will help them make progress, which is what making mistakes is all about! To help your child stay motivated, point out areas in which you have noticed personal or team improvement since the last practice. This helps children keep mistakes in perspective.
- **Extra practice.** If the coach brings up an area your child needs to work on, help them practice at home and offer lots of specific encouragement. Occasionally plan to stay after practice for an extra 10 or 15 minutes so your child can get a little extra time with their teammates. This encourages social development and team building.
- **Encourage the team.** Cheer for the team, in addition to the individual players. This can help put the focus on the importance of all players working together.
- **Teach your child to honor their commitments.** When a child commits to play a sport, they should take the commitment seriously. Sometimes a child will have a bad experience during a game or practice, and they will not feel like playing anymore. Few children will be the star athlete on every team. The benefits of setting goals and following through greatly outweigh any MVP status. Explain to your children that their coach and teammates are counting on them. If they are not able to actively participate, it is usually a good idea to have them dress in uniform and sit on the sidelines to show support for their teammates.

- **Accept your child's decision to play or not to play.** Once your child has completed the season, he or she may decide to try a different sport, or discontinue organized sports altogether. Sporting activities can be stressful and are not a good fit for every child. As a parent, you can support your child's decision by finding out about other extracurricular activities that encourage social development and teamwork. Many children thrive in scouting programs or clubs that fit their specific interests (photography, books, chess or other board games, stamp or coin collecting, music, drama, chorus, arts and crafts, etc.).

Supporting Your Child's Coach

- **Evaluate a coach before placing your child on a team.** Practices can make or break a child's interest in sports. Find a coach who runs a fun and engaging practice. A simple test is to examine the faces of the athletes to see if they are having fun.
- **Make early, positive contact with the coach.** Introduce yourself, and be sure to keep positive lines of communication between yourself, your child and the coach open throughout the season. If a problem or concern does come up, it will be much easier to talk to the coach about it.
- **Recognize the commitment the coach has made.** Coaches invest many hours outside of practices and games; being a coach shows their commitment to the sport and to your child.
- **Help the coach.** During the season, don't hesitate to volunteer. The coach may need help calling parents about a schedule change, bringing a cooler of drinks to the game, or collecting equipment after the game. Your effort will show your child you also have an interest in creating a positive experience.
- **Fill the coach's emotional tank.** When coaches do something you like, let them know about it. Coaching is a difficult job and most coaches only hear from parents when they have a concern about something. A sincere compliment goes a long way and will help the coach continue to give his all to the team.

For more information on parenting kids in sports, visit: www.youthsportspsychology.com

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.





JUST FOR DADS

Dads play an equal role in the development of their children from conception throughout the child's life. Boys' relationships with their dads help them identify who they are and where they come from. Girls' relationships with their dads help them feel safe and learn about being respected. Below are tips just for dads from the National Fatherhood Initiative.

1. Respect Your Children's Mother

One of the best things a father can do for his children is to respect their mother. If you are married, keep your marriage strong and vital. If you're not married, it is still important to respect and support the mother of your children. A father and mother who respect each other, and let their children know it, provide a secure environment for them. When children see their parents respecting each other, they are more likely to feel that they are also accepted and respected.

2. Spend Time with Your Children

How a father spends his time tells his children what's important to him. If you always seem too busy for your children, they will feel neglected no matter what you say. Treasuring children often means sacrificing other things, but it is essential to spend time with your children. Kids grow up quickly. Missed opportunities are forever lost.

3. Earn the Right to Be Heard

All too often the only time a father speaks to his children is when they have done something wrong. That's why so many children cringe when their mother says, "Your father wants to talk with you." Begin talking with your kids when they are very young so that difficult subjects will be easier to handle as they get older. Take time and listen to their ideas and problems.

4. Discipline with Love

All children need guidance and discipline, not as punishment, but to set reasonable limits. Remind your children of the consequences of their actions and provide meaningful rewards for good behavior. Fathers who discipline in a calm and fair manner show love for their children.

5. Be a Role Model

Fathers are role models to their kids whether they realize it or not. A girl who spends time with a loving father grows up knowing she deserves to be treated with respect by boys, and what to look for in a husband. Fathers can teach sons what is important in life by demonstrating honesty, humility and responsibility. "All the world's a stage..." and a father plays one of the most vital roles.

6. Be a Teacher

Too many fathers think teaching is something others do. But a father who teaches his children about right and wrong, and encourages them to do their best, will see his children make good choices. Involved fathers use everyday examples to help their children learn the basic lessons of life.

7. Eat Together as a Family

Sharing a meal together (breakfast, lunch or dinner) can be an important part of healthy family life. In addition to providing some structure in a busy day, it gives kids the chance to talk about what they are doing and what they want to do. It is also a good time for fathers to listen and offer advice. Most importantly, it is a time for families to be together each day.



8. Read to Your Children

In a world where television often dominates the lives of children, it is important that fathers make the effort to read to their children. Children learn best by doing and reading, as well as seeing and hearing. Begin reading to your children when they are very young. When they are older, encourage them to read on their own. Teaching your children the joys of reading is one of the best ways to ensure they will have a lifetime of personal and career growth.

9. Show Affection

Children need the security that comes from knowing they are wanted, accepted and loved by their family. Parents, especially fathers, need to feel both comfortable and willing to hug their children. Showing affection everyday is the best way to let your children know that you love them.

10. Realize that a Father's Job Is Never Done

Even after children are grown and ready to leave home, they will still look to their fathers for wisdom and advice. Whether it's continued schooling, a new job or a wedding, fathers continue to play an essential part in the lives of their children as they grow and, perhaps, marry and build their own families.

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.

Resources for Dads:



www.fatherhood.org/fathers

www.fathers.com/

www.childwelfare.gov/preventing/promoting/fatherhood.cfm

www.dadsmakeadifference.org/

fatherhood.hhs.gov/

changingfatherhood.com/resources.shtml



CO-PARENTING: LEARNING TO WORK TOGETHER

Children need and deserve the love, care and support of both their parents. When parents separate, it is difficult for everyone involved, but it is especially hard for children. This tip sheet provides information for parents who live apart, but will need to work together to care for their children in positive and healthy environments.

What is Co-Parenting?

Co-parenting is when two parents work together to raise their children—even after their marriage or romantic relationship is over. Successful co-parenting may mean learning new skills, since co-parenting skills are not usually taught. Though it may be difficult at first, co-parenting is necessary for healthy child development and for helping children cope with many changes in their family life. It can be helpful to begin thinking of your relationship with your ex as a completely new one—one that is entirely about the well being of your children, and not about either of you.

The following co-parenting tips may not work the same for every family, but parents can change them to fit their unique needs and circumstances.



Communicating With Your Child about the Break-up

When deciding to split up, both parents should talk to their children about the situation. Be honest about what is happening without sharing the details of your relationship's downfall. Continuously tell your children they **did not** cause the split. Stress how much you love them and that your love for them will not change. Let them know you are there for them during this difficult time. For some children, this may be enough comfort, while other children may benefit from professional counseling.

Communicating With the Other Parent

Communication with the other parent is a big part of your role as a co-parent. No matter what, communication with your ex is going to be a tough task. Remember that it isn't necessary to meet in person—speaking over the phone or exchanging emails is fine for the majority of conversations. The goal is conflict-free communication, so see which type of contact works best for you. Whether email, phone or in person, the following tips can help you and your ex to communicate in a positive and effective way for the sake of your children:

- **Set a business-like tone.** Approach the relationship with your ex as a business partnership where your “business” is your children’s healthy adjustment and well-being. Speak or write to your ex as you would a coworker—be polite, respectful and neutral.
- **Make requests.** Instead of making statements, which can sound like demands, try making requests. Requests can begin with “Would you be willing to...?” or “Can we try...?”
- **Listen.** Communicating with maturity starts with listening. Even if you end up disagreeing with the other parent, you should at least be able to convey to him or her that you’ve understood his or her point of view. Listening alone does not signify approval, so you won’t lose anything by allowing your ex to voice his or her opinions.
- **Show restraint.** Keep in mind that communicating with one another is going to be necessary for the length of your children’s entire childhood—if not longer. You can train yourself to not overreact to your ex, and over time you can learn to ignore the buttons he or she tries to push.
- **Commit to meeting/talking consistently.** Frequent communication with your ex will convey the message to your children that you and their other parent are a united front. This may be extremely difficult in the early stages of your divorce or separation.



- **Keep conversations kid-focused.** Remember, your child is part mom and part dad, so anything hurtful that is said to one another can affect your child's sense of their identity. Keep conversations focused on your child's activities, milestones, challenges and successes. Discussing these topics will help each parent take an active role in their child's life and let children know they are meaningful to each parent. Communicating with each other also helps parents double check what their children are saying. Some children in this situation tend to say things that are not true (i.e. "Dad says curse words are o.k" or "Mom thinks homework is a waste of time"). In these sticky situations, communication can help you uncover the truth.

Visiting the Other Parent

In the beginning, it is normal for children to feel frustrated, anxious, or unsure about visiting their other parent. Children feel better about the situation when they see their parents working together. Here are some tips to make these transitions as smooth as possible:

- **Help children feel good about visitation.** Children need to hear from both parents that spending time with the other parent is good for them. They need to know that it is alright to love each parent.
- **Help children anticipate change.** Make sure your children know the schedule of when they will be spending time with each parent. Consistency is the key to making this work.
- **Always drop off – never pick up.** It's a good idea to avoid "taking" your child from the other parent. Always dropping your child off at the other parent's house is less stressful for everyone. Avoid sending new girlfriends, boyfriends, or spouses to transport the children, or having them babysit for long periods of time. Children need and look forward this time with their parents.
- **Avoid using children as messengers.** Asking your children to transport bills, notes, or anything else can make them feel they are in the middle of their parent's relationship.
- **Aim for consistency.** It's healthy for children to be exposed to different perspectives and to learn to be flexible, but they also need to know they're living under the same basic set of expectations at each home. Aiming for consistency between your home and your ex's avoids confusion for your children. These tips can help:

CREATE A PARENTING PLAN. This is a document that outlines certain parenting issues like: religion and church attendance, extracurricular activities and payment for these activities, medical treatment for the child, cell phones, internet access and restrictions, college saving, etc. More information concerning Parenting Plans can be found at: www.flcourts.org/gen_public/family/forms_rules/995a.pdf

AGREE ON THE RULES. Rules don't have to be exactly the same between two households, but if you and your ex establish generally consistent guidelines, your kids won't have to bounce back and forth between two radically different disciplinary environments. Try to follow similar types of consequences for broken rules, even if the misbehavior didn't happen under your roof. So, if your kids have lost TV privileges while at your ex's house, follow through with the restriction. The same can be done for rewarding good behavior.

- **Keep your issues to yourself.** Always avoid saying negative things about your ex in front of your children, or making them feel they have to choose between the two of you. Also avoid asking your children for information about their visit, or for information about the other parent. This can make their visit less enjoyable, and puts them in the middle of your adult relationship.

HERE'S HELP

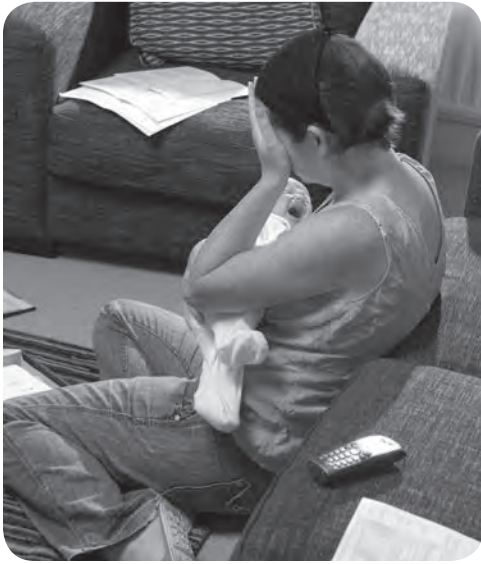


Use the **Family Resource Guide**

on pages 79–82 to learn about a variety of family support services available in your community.



MANAGING STRESS



Reducing stress is important, for your sake as well as for your children. Reducing your stress gives you time and energy to be the best parent you can be.

Recognizing the signs of stress

- Feeling tired most of the time
- Snapping at family and friends
- Not being able to make decisions
- Changes in sleeping habits—either sleeping a lot or not sleeping enough
- Not wanting to eat, or overeating
- Headaches/stomachaches
- Muscle tension leading to pain in the neck, shoulders or back
- Not being able to concentrate

Although some stressful tasks can't be avoided, changing the way we do them can help reduce stress. Try to plan your day the night before using a to-do list, and schedule the most important or unpleasant tasks first.

Making Errands Less Stressful

Running errands with a child can be stressful, but these simple tips can make time out of the house more enjoyable for both of you:

- Plan to run errands right after breakfast, when children are not tired or hungry.
- Be prepared to meet your child's needs. Pack a bag with a few diapers, wet wipes, diaper ointment, a change of clothes, a zip lock bag for soiled clothes, a pacifier and a small toy.
- If you are not breastfeeding, bring along a bottle with powdered formula and a bottle of water so you can mix it when needed.
- For older children, bring a healthy snack. Granola bars, raisins, Cheerio's, Gold Fish crackers or other favorites will hold them over until you can all get some lunch.
- A removable sunshade for the vehicle's side windows will protect your baby's skin and eyes from the sun and make the ride more pleasant.
- Limit the number of errands you try to accomplish in a day. Babies can be over stimulated by too many sights and sounds and may become fussy, while toddlers get bored having to sit still for long periods of time.
- Be flexible! Take care of the most urgent matters first, so if children get tired or fussy, you can head home and leave the remaining errands for another time.
- If you have several children to keep up with, ask a friend or family member to come along for your outing and help with the children.



25 Ways to Reduce Everyday Stress

Do...

- Get up 15 minutes earlier
- Keep things in perspective and accept what you cannot change (the other line always moves faster, etc.)
- Learn to say NO to extra activities
- Join a parent support group
- Spend time with friends—have a potluck supper to make it easier on yourself
- Set realistic goals
- Prioritize tasks, putting your energy into things that bring the most benefit
- Simplify meal times by making out your shopping list with easy meals in mind, and cooking enough one day for leftovers the following day
- Ask friends or family for help with errands, cleaning or child care
- Eat well-balanced meals and drink plenty of water every day
- Get enough sleep
- Exercise because regular exercise relieves stress, lowers the risk of depression and anxiety, boosts your immune system, increases energy, and sets a good example for your children
- Attend worship services
- Break big jobs into sections and focus on one section at a time
- Combine activities when possible. For example, walk the dog with the children and talk to them about their day while you walk.
- Choose a hairstyle that is easy to maintain and clothes that don't need special care
- Have a desk, table or other place where all bills and important papers can be organized and addressed at a regular time
- Follow a set schedule. When children know what to expect, mealtimes, bedtimes, chores and homework are less stressful for the whole family
- Keep a small calendar with you at all times to keep up with appointments
- Make duplicate keys for home and car
- Remember, your children need your unconditional love

Don't...

- Self-medicate
- Try to be perfect
- Try to "fix" other people
- Feel guilty for asking for help

HERE'S HELP

Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



When your children grow up, they will not remember the perfectly clean house or elaborate meals, but the time spent together sharing love and laughter.

FAST FIX

Managing and Controlling Anger

Experiencing anger is not good for your health. It causes your adrenaline and blood pressure to rise above normal levels. Even worse, you could end up hurting someone or doing something that you will regret later on. Below are some tips to help you calm down and control your anger, especially when you are with your children. Remember, children imitate ways to solve problems.

- 1. Relax and Breathe.** Calm yourself down. Take a deep breath. As you exhale, imagine your anger leaving you with your breath. Release it and be free. Repeat this step over and over until you feel peace inside.
- 2. Release your anger through safe outlets.** Exercise regularly, call a friend and vent, clean your house or water your plants. Just make sure you know what your safe outlets are.
- 3. Forgive and forget.** Learn to forgive those that have caused you pain and suffering. This doesn't mean you have to contact them and make a big deal over it, this is meant to give yourself inner peace by releasing emotional pain.
- 4. Exercise.** Engaging in exercise increases your endorphins. Your angry mood can change to a happy one if you get involved in exercises that you enjoy doing.
- 5. Listen to soothing music.** This helps calm your soul. Take 20 minutes to relax and listen to music while you take some deep breaths.

If you find these tips do not work and you are having trouble controlling your anger, please talk to your nurse or doctor about other ways to deal with anger.



FINDING BALANCE BETWEEN HOME AND WORK



The need for work-life balance is growing as Americans are working harder and trying to do more than ever before. We need to balance both work and home, without sacrificing one for the other. Once you find balance, you will feel better about yourself and be more productive on the job and at home with family and friends.

Changing jobs is always stressful, but sometimes necessary. You may need to look for a job that has flexible hours for times when you must be with your children. When your employer understands that you may need to leave to care for a sick child or meet with a teacher, you will have less work-related stress.

Here are some tips to help you find balance between your spouse, children, work and your personal commitments.

Spouse

- 1. Make time for just the two of you.** Easier said than done? Not with the help of your friends with children of their own. Designate a date night for each couple and swap babysitting services. This will work out for mom and dad and keep the kids happy playing with their friends for a night. Also, consider one day during the week where you and your spouse have a lunch date at the park, a bookstore or even at home.
- 2. Use each other for support.** Share domestic duties and caring for the children so that tasks don't fall on one person. While one person is cleaning up after dinner, have the other bathe kids and get them ready for bed. Switch duties around to avoid burn out.
- 3. Show appreciation for each other.** Although it is understood, going out of your way to thank your spouse for something they did is a great way to boost confidence and happiness. Compliment each other on how great of a parent and partner they are. Make an unexpected phone call or email just to say thanks and I love you.

Children

- 1. Assign chores on a weekly or monthly basis.** Chores teach children responsibility and give them a sense of belonging. While young children are limited in what they can do on their own, every little bit helps. Even toddlers can learn to pick up their toys before snack time. Older children may like playing their favorite music while they complete their chores. Always remember to praise children for completing their chores.
- 2. Encourage a structured daily routine.** This helps to keep the family feeling organized. Inconsistent routines are likely to leave you feeling overwhelmed. Setting a bedtime for children is a way for you to know that you have an hour or two a night to spend as you need.
- 3. Limit media interaction.** Today many young children are absorbed in television, video games and computer use. Unfortunately, much of what is in the media is not appropriate for healthy child development. Be aware of what your kids watch and how much time they spend watching. Too much exposure to technology can increase your child's stress level and affect their temper, which will affect you as the parent.
- 4. Plan family activities for the weekend.** This gives the children and you something to look forward to while at school and work during the week. Plan an activity at home such as gardening, crafts or cooking. You can also go to parks or check online or in your newspaper for local events to keep costs to a minimum.



Work

- 1. Keep ONE calendar for all work and home events.** This way you can plan for the office staff meeting and also your child's soccer game or ballet recital. A single calendar will help you keep up with your whole schedule, help you prioritize your day and reduce confusion and stress.
- 2. Negotiate flexible hours.** Flexibility allows employees to integrate their work and home responsibilities and perform better at both. Traditional flextime is available to 44 percent of employed parents, meaning they are allowed to select starting and quitting hours but must stick to them. *Daily flextime* allows for the employee to change starting and quitting times whenever they choose as long as a required number of hours is met each week. Currently, 29 percent of full time or salary workers have this option, but many are not taking advantage of it.
- 3. Advocate for family-friendly workplace policies.** Often seen as a privilege, on-site childcare is becoming more common. Depending on the number of employees who will use the service and whether it fits the budget, suggest on-site childcare and explain how it will be beneficial to the organization as a whole, not just the parent employees. Other family-friendly policies include telecommuting, educational opportunities, and a variety of paid and unpaid leave options.

Self

- 1. Prioritize.** Determine what tasks you need to complete, and then rank them in order of importance. Consider your own needs, as well as those of loved ones. If you must work on a Saturday, for example, you might plan a recreational activity with your family or friends for Sunday.
- 2. Incorporate exercise into your life.** It can seem like a hassle but the benefits definitely outweigh the costs. Being physically healthy is important not only for yourself, but also your spouse, children and employer. Today, many companies offer gyms on their premises or include gym memberships in employee benefits. Staying active improves health, which keeps you productive and motivated at work and energized to keep up with your kids.
- 3. Nurture yourself.** Providing for your family is a given, but don't forget to give yourself a break. Try yoga, meditation or other relaxation techniques. Enjoy a quiet afternoon with a good book, spend some time with friends or schedule a day of rest. In order to nurture your family, you must first nurture yourself.



HERE'S HELP

Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



TIPS FOR a HEALTHY RELATIONSHIP

We build many different kinds of relationships throughout our lives. Even though every relationship is unique, all healthy relationships follow the same basic recipe. Understanding the key ingredients of healthy relationships can help you build or improve your own relationships and recognize and avoid unhealthy relationships.

The key ingredients of healthy relationships are:

Equality

If one partner controls every aspect of the relationship, the relationship is unequal and probably unhealthy. Equality in a relationship means that both partners:

- **Make important decisions together.** Equal partners share their opinions about important choices, like how to spend money or raise children, and work together to reach an agreement before making any decisions.
- **Respect one another's boundaries.** Couples in a healthy relationship allow each other to have time alone, other friendships, interests or hobbies.
- **Work as a team.** Partners in a healthy relationship do not compete with each other; they encourage each other and work together. They respect each other's way of doing things, cooperate to complete daily tasks, and are supportive of each other's goals.

Mutual Respect

Mutual respect means valuing each other's opinions, showing consideration and appreciation for each other. Individuals in a healthy relationship avoid making negative comments or taking hurtful actions that would damage their partner's self-esteem.

Forgiveness

Individuals in healthy relationships recognize that no one is perfect. They are willing to accept that both they and their partners will make mistakes. Partners in a healthy relationship don't hold grudges or try to "get even".

Intimacy

In healthy relationships, partners are so comfortable with each other that they can share their personal fears, hopes, goals and life experiences. Intimate partners enjoy being close physically and emotionally, so they make spending time together a priority.

Empathy

Partners who empathize can "put themselves in the other person's shoes." This skill allows each individual to feel what their partner is going through and put their partner's needs ahead of their own.

Shared Responsibilities

Important household tasks, such as cleaning, running errands, and paying bills, are either divided equally, or shared equally.



Trust and Support

Each partner should feel as though their relationship is a “safe place.” Even when times are tough, partners in a healthy relationship support one another and can depend on one another.

Honest and Positive Communication

Good communication involves both talking and listening. In a healthy relationship, each partner feels comfortable expressing thoughts, feelings and emotions. Each partner also actively listens to the other. Partners in a healthy relationship do not blame, judge, withhold information or verbally attack each other. Instead, they make time to talk every day, give their full attention while listening, and do not interrupt.

Effort, Commitment and Fidelity

In a healthy relationship, both partners are equally committed to keeping their relationship strong. They work together to make the relationship a success and do not share intimate physical or emotional closeness with anyone but their partner.

*Remember, in a healthy relationship, both people are **emotionally healthy** and **physically safe**.

Adapted from: Channing L. Bete Co., Inc. “Are you in a healthy relationship?” 1999.

HERE'S HELP



Use the **Family Resource Guide** on pages 79–82 to learn about a variety of family support services available in your community.



FAMILY RESOURCE GUIDE

Toll Free Help Lines by Topic

Support Services for Parents and Caregivers

Florida 2-1-1 Association

Provides free, confidential information and referral services 24 hours a day, 7 days a week! Trained professionals provide crisis counseling and help callers identify and connect with health and human service programs that can meet a variety of needs including food, housing, employment, health care, and more. Services are available statewide through any cell phone provider as well as through landlines in 58 of Florida's 67 counties. Additional information is also available online at www.211florida.org.

2-1-1

Florida's Parent Support HelpLine

Offers free, confidential assistance to parents and other primary caregivers in Florida who are feeling overwhelmed or have specific questions about their children's needs or behaviors. Available 7 a.m. – 11 p.m. 7 days a week. Closed on holidays.

1-800-FLA-LOVE (1-800-352-5683)

Abuse Registry

Florida hotline determines if the information presented complies with the mandates in law and assists all callers with information and referral to enhance the safety and well-being of children and vulnerable adults. Available 24 hours a day, 7 days a week.

1-800-96-ABUSE (1-800-962-2873)

Child Help USA

The hotline offers crisis intervention, information, literature, and referrals to thousands of emergency, social service, and support resources. Professional crisis counselors can provide assistance to callers in 170 languages. All calls are anonymous and confidential. Available 24 hours a day, 7 days a week.

1-800-4-A-CHILD (1-800-422-4453)

Prevent Child Abuse America

PCA America provides education to everyone involved in the effort to prevent the abuse and neglect of our nation's children. Working with our chapters, we provide leadership to promote and implement prevention efforts at both the national and local levels. Additional information is also available online at www.preventchildabuse.org.

1-800-children (1-800-244-5373)

Parents Without Partners

Provides single parents and their children with an opportunity for enhancing personal growth, self-confidence and sensitivity towards others by offering real help in the way of discussions, professional speakers, study groups, publications and social activities for families and adults. Available by phone 8:30am to 5:00pm, Monday through Friday. Additional information is also available online at www.parentswithoutpartners.org.

1-800-637-7974

AARP Foundation Grandparent Information Center

A resource for grandparents raising grandchildren, professionals, support groups, researchers and policy makers. Additional information is also available online at www.aarp.org or www.aarp.org/states/fl.

1-888-OUR-AARP (1-888-687-2277)

Boys Town

Provides children with a safe, caring, loving environment where they gain confidence to get better and learn skills to become productive citizens. Available 24 hours a day, 7 days a week. Additional information is also available online at www.boystown.org.

1-800-448-3000

Support Services for Military Families

Military One Source

Offers free, confidential telephone, online and in-person counseling options to active-duty, Guard, and Reserve members and their families. Services are designed to help with short-term, non-medical issues such as adjustment to situational stressors, stress management, decision making, communication, grief, blended-family issues, and parenting. Consultants are available 24 hours a day. Additional information also available online at www.MilitaryOneSource.com.

1-800-342-9647

U.S. Department of Veterans Affairs

Provides free readjustment counseling services to service members, veterans, and their families. Services include individual counseling; group counseling; marital and family counseling; medical referrals; help with applying for VA benefits; employment counseling; and alcohol and drug assessments, information, and referral to community resources. Counseling is provided at 300 community-based Vet Centers in the U.S. and surrounding territories by counselors who, as veterans themselves, have "been there and done that" and understand what the veteran is going through. Vet Center staff is available toll free during normal business hours. Additional information also available online at www.vetcenter.va.gov.

1-800-905-4675 (Eastern) 1-866-496-8838 (Pacific)



Veterans Crisis Line

Connects veterans in crisis and their families and friends with qualified, caring Department of Veterans Affairs responders through a confidential, toll-free hotline, online chat, or text. Veterans and their loved ones can call a counselor at 1-800-273-8255 (then press 1); chat online at <http://veteranscrisisline.net>, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week. Additional information also available online at <http://veteranscrisisline.net>.
1-800-273-8255 and Press 1

Health and Nutrition Services

ACCESS Florida

Toll-free number to apply for food stamps, Medicaid, and temporary cash assistance. Additional information also available online at www.dcf.state.fl.us/programs/access/index.shtml
1-866-76ACCESS (1-866-762-2237)

Florida KidCare

Provides free to low-cost comprehensive health coverage for children from birth through age 18. Florida KidCare covers everything from basic check-ups all the way through hospitalizations, in addition to vision, dental and prescriptions. Most families pay \$15 - \$20 a month in premiums to cover all of their children. Many pay nothing at all. Additional information is also available online at www.floridakidcare.org.
1-888-540-KIDS (1-888-540-5437)
TTY Line: 1-877-316-8748

Family Health Line of Florida

Assists pregnant women in accessing prenatal care and substance abuse treatment during pregnancy and provides information on helpful community resources. All calls are confidential and are answered by trained counselors who are available: 8:00am-11:00pm, Monday through Friday, and 10:30am to 6:30pm weekends. Closed on holidays.
1-800-451-2229

La Leche League

24 hour toll-free breastfeeding helpline provides telephone counseling, referral and extensive information on breastfeeding. Additional information available online at www.lalecheleague.org.
1-877-4-LALECHE (1-877-452-5324)

American Pregnancy Association

A crisis pregnancy line available 24 hours a day, 7 days a week. The APA is a national health organization committed to promoting reproductive and pregnancy wellness through education, research, advocacy and community awareness. Additional information available online at www.americanpregnancy.org.
1-800-672-2296

Women, Infants and Children (WIC)

WIC provides the following at no cost: healthy foods, nutrition education and counseling, breastfeeding support, and referrals for health care. Available 8:00am to 5:00pm, Monday through Friday. Additional information is also available online at www.doh.state.fl.us/family/WIC.
1-800-342-3556

Child Care Resource and Referral Services

Child Care Aware

A nonprofit initiative committed to helping parents find the best information on locating quality child care and child care resources in their community by connecting parents with local agencies best equipped to serve their needs. Additional information is also available online at www.childcareaware.org.
1-800-424-2246 TDY: 866-278-9428

Florida's Childcare Resource and Referral Network

The Agency for Workforce Innovation's Office of Early Learning State Child Care Resource and Referral Network is dedicated to helping families find answers to their questions regarding how to identify quality child care and early education programs and how to locate a provider that meets their family's needs. Additional information is also available online at <https://spe.schoolreadiness.org>.
1-866-357-3239

National Resource Center for Health and Safety in Child Care and Early Education

Provides referrals to local agencies for child care information. Available 7:30am to 4:30pm Mountain Time, Monday through Friday. Additional information is also available online at www.nrckids.org.
1-800-598-KIDS (1-800-598-5437)

Services for Adolescents and Runaways

Teen Help Adolescent Resources

Assist parents, child care professionals and others in locating appropriate resources for the treatment of adolescents struggling with making the best choices in their lives. Available 9:00am to 11:00pm, Monday through Friday, 9:00am - 9:00pm on weekends. Additional information also available online at www.specialtyboardingschools.com.
1-800-637-0701 or 1-800-559-0044

Thursday's Child National Call Center for Endangered Youth

Provides counseling, crisis intervention, case advocacy, referrals and messages between parents and runaway youth. Areas of assistance are child abuse, child exploitation, eating disorders (including Anorexia and Bulimia), depression, teen suicide, missing children, runaways, sexual safety, substance abuse, teen pregnancy and teen parenting. Available 24 hours a day, 7 days a week.
1-800-USA-KIDS (1-800-872-5437)



The Covenant House Nineline

Provides food, shelter, clothing, crisis care, health care, education, vocational training, drug abuse treatment and prevention programs, legal services, recreation, mother/child programs, transitional living programs, street outreach and aftercare. Available 24 hours a day, 7 days a week. Additional information also available online at www.covenanthouse.org.

1-800-999-9999

National Runaway Switchboard

Provides non-judgmental, confidential crisis intervention and referrals. Available 24 hours a day, 7 days a week. Additional information also available online at www.nrscrisisline.org.

1-800-RUNAWAY (1-800-786-2929)

*Services for Children with Disabilities***Florida Diagnostic and Learning Resources System (FDLRS)**

FDLRS provides diagnostic, instructional, and technology support services to school district exceptional education programs and families of students with disabilities. Additional information also available online at www.fdlrs.org

1-800-654-4440

CHADD

A national non-profit organization providing education, advocacy and support for individuals with ADD/ADHD. Automated phone service. Additional information also available online at www.chadd.org and www.help4adhd.org.

1-800-233-4050

Family Network on Disabilities

Provides family-driven support, education, information, and advocacy. Available 8:30am to 4:30pm, Monday through Friday. Additional information also available online at www.fndfl.org

1-800-825-5736

*Services for Families Dealing with Domestic Violence***Florida Coalition Against Domestic Violence**

Links callers to the nearest domestic violence center and provides translation assistance when needed. Maintains a resource library of books, periodicals, videos and other resources regarding domestic violence issues. Available 24 hours a day, 7 days a week. Additional information also available online at www.fcadv.org.

1-800-500-1119 TTY: 1-800-621-4202

*Services for Families Dealing with Addiction***Narconon Arrowhead**

A support group for people recovering from drug addiction. Membership is open to any drug addict, regardless of the particular drug or combination of drugs used. Non-conventional residential treatment center. Available 7:00am to 11:30pm, 7 days a week.

1-800-468-6933

National Clearinghouse for Alcohol and Drug Information

An information resource equipped to respond to the public's alcohol, tobacco, and drug inquiries and distribute free or low-cost culturally-diverse prevention, intervention and treatment resources tailored for use by parents, teachers, youth, communities and prevention/treatment professionals. Available 24 hours a day, 7 days a week. Additional information also available online at www.samhsa.gov

1-800-662-HELP (1-800-662-4357)

TDD: 1-800-487-4889

Español: 1-877-767-8432

*Services for Missing and Exploited Children***National Center for Missing and Exploited Children**

Provides assistance to parents, children, law enforcement, schools, and the community in recovering missing children and raising public awareness about ways to help prevent child abduction, molestation, and sexual exploitation.

Available 24 hours a day, 7 days a week. Additional information is also available online at www.missingkids.com

1-800-THE-LOST (1-800-843-5678)

Child Find of America Hotline

Locates missing children through active investigation, prevents child abduction through education, and resolves incidents of parental abduction through mediation. Available 9:00am to 5:00pm, Monday through Friday; voicemail during evenings and weekends. Additional information is also available online at www.childfindofamerica.org.

1-800-I-AM-LOST (1-800-426-5678)

CAPSS Hotline

The CAPSS toll-free helpline, connects families impacted by child custody crisis, parental abduction and denied visitation to a wide array of services including prevention action, conflict resolution and mediation, co-parenting planning, legal advocacy, comprehensive case management, educational resources and more. On-staff professional mediators have extensive experience in divorce, custodial and family mediation on a national and international level.

1-800-A-WAY-OUT (1-800-292-9688)

*Sexual Violence Prevention and Intervention Services***Rape Abuse and Incest National Network (RAINN)**

Instantaneously connects callers to the nearest rape crisis center, providing counseling and support. Additional information is also available online at www.rainn.org

1-800-656-HOPE (1-800-656-4673)

Florida Council Against Sexual Violence

The mission of the FCASV is to lead, educate, serve and network on behalf of all individuals impacted by sexual violence. FCASV is a statewide non-profit agency that serves as a coalition of the state's rape crisis programs. Additional information is also available online at www.fcasv.org.

1-888-956-RAPE (1-888-956-7273)



Suicide Prevention Services

National Suicide Hotline

Trained volunteers and professional counselors are there to listen if you - or someone you know - are having thoughts about suicide. Calls are connected to a certified crisis center nearest the caller's location. Services are available 24 hours a day, seven days a week. For online counseling, visit www.1malive.org. Additional information is also available online at www.hopeline.com.

1-800-SUICIDE (1-800-784-2433)

Teen Hotline: 1-877-YOUTHLINE (1-877-968-8454)

ADDITIONAL RESOURCES

(long distance charges may apply)

American Academy of Pediatrics

Parents may visit new website for families at HealthyChildren.org offering trustworthy, up-to-the-minute health care information and guidance for parents/caregivers along with interactive tools and personalized content. Additional information is also available online at www.aap.org.

847-434-4000

Parents Anonymous

Self-help groups serving abused children and parents under stress. Available 11:00am to 8:00pm, Monday through Friday. Additional information is also available online at www.parentsanonymous.org.

909-621-6184

Big Brothers/Big Sisters of America

Volunteers support families under stress and single parents by working with children in need of additional attention and friendship. Available 24 hours a day, 7 days a week. Additional information is also available online at www.bbbsa.org.

215-567-7000

National Center for Victims of Crime

Working with local, state, and federal partners, the National Center for Victims of Crime provides direct services and resources to victims of crime across the country; Advocates for laws and public policies that secure rights, resources, and protections for crime victims; Delivers training and technical assistance to victim service organizations, counselors, attorneys, criminal justice agencies, and allied professionals serving victims of crime; and fosters cutting-edge thinking about the impact of crime and the ways in which each of us can help victims of crime rebuild their lives. Available 8:30am to 8:30pm (ET), Monday through Friday. Additional information is also available online at www.ncvc.org.

202-467-8700

Safe Start Partnership Center

A program whose mission is to prevent and reduce the impact of exposure to violence on young children ages birth through 6 years. Provides information and education on children's exposure to violence, referrals to community resources, consultation services and training in addition to providing direct services to children and families where violence has occurred to families living in Pinellas County. Services are private, confidential and free of charge. Additional information is also available online at www.helpachild.org/safestart.html.

727-327-7656

Florida Circle of Parents

Circle of Parents® is a mutual support and self-help program for parents based on a framework of shared leadership, mutual respect, shared ownership and inclusiveness. Additional information also available online at www.ounce.org/circlegroups.html.

850-921-4494 ext. 107

Children's Home Society

Redirects a teen's troubled life onto a new path of hope, provides a safe harbor for a child suffering from abuse and reverses crisis situations so lives are changed for the better. Available by phone 8:30am to 5:00pm, Monday through Friday. Additional information also available online at www.chsfl.org.

850-921-0772





EASY PHONE REFERENCE LIST

FOR PARENTS AND CAREGIVERS



Fill in your local and personal information. Post in easy-to-find places around your home. You can also give copies to your family, caregiver and others who spend time with your child.

CONTACT

NUMBER

Parent HelpLine

1-800-FLA-LOVE (1-800-352-5683)

Access to parenting tips and information on support available to parents in your community.

Florida Family Health Line

1-800-451-2229

Assists pregnant women in accessing prenatal care and provides related health information. Available M–F, 8 am – 11 pm and Sat–Sun, 10:30 am – 6:30 pm.. Calls are confidential.

Poison Control 24 hours a day, 7 days a week

1-800-222-1222

Local American Red Cross Chapter:

1-800-REDCROSS

For emergency shelter or evacuation information

Pediatrician or family doctor

Name:

Fire (non-emergency):

Police (non-emergency):

Electric Company (loss of service):

Mom's work:

Mom's cell:

Dad's work:

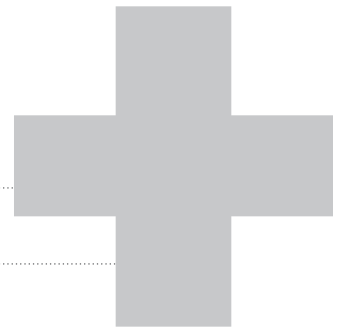
Dad's cell:

Children's daycare or school:

Neighbors or friends to contact in case of emergency:



BABYSITTER'S EMERGENCY CHECKLIST



Local Emergency Phone Number:

Family Name:

Home Phone Number:

Street Address:

Nearest intersection/cross street:

Child's Name	Date of Birth	Medications	Allergies	Other Information

Insurance:

Policy #:

First aid kit is:

Fire extinguishers are:

House keys are:

Car keys are:

Garage remote is:

I authorize any licensed physician, dentist or hospital to provide necessary emergency medical service to my child at the request of the person bearing this form. Please take note of the allergies, medications and other information listed above.

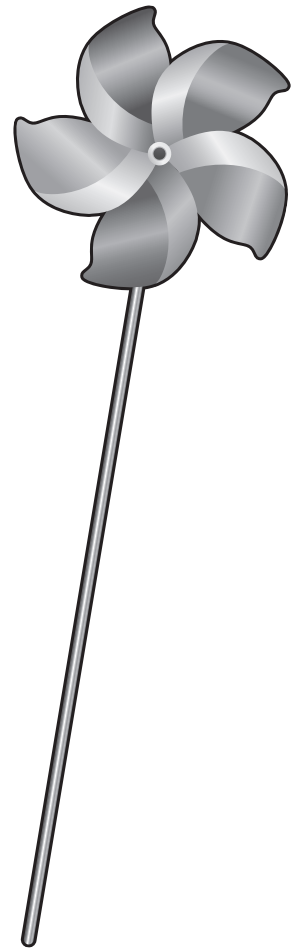
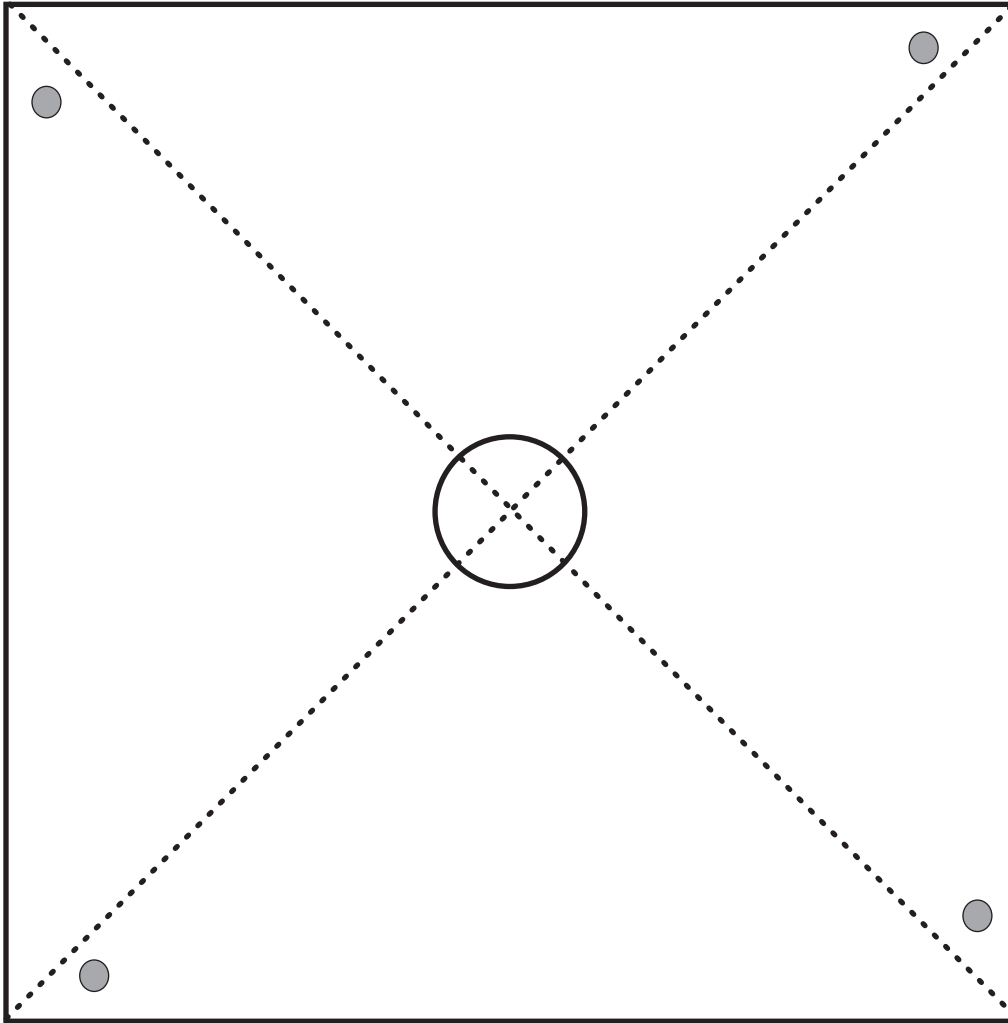
Parent/Guardian Signature:

Date:

Turn Over for Emergency Contact Numbers



MAKE YOUR OWN PINWHEEL!



What you'll need:

- ▶ A pencil with eraser
- ▶ 8 ½ x 11 sheet of construction paper
- ▶ Scissors
- ▶ Colored pencils or markers
- ▶ Paper fastener
- ▶ Plastic drinking straw

How to make a pinwheel:

1. Print the pinwheel pattern. You can reproduce this pattern on white construction paper with a copy machine. Be sure to cut the construction paper to 8½ in. by 11 in.
2. Cut-out the pinwheel on the solid lines only.
3. Decorate both sides of the construction paper pinwheel.
4. Cut the dotted lines from the four corners to the center circle. Try not to cut into the center circle.
5. Use the sharpened pencil to poke a hole through the four tiny dark circles. The pencil point also works well to poke a hole into the straw. Carefully push the pencil point through the straw about ½ inch from the top.
6. Make the tiny holes on the four points meet at the center circle.
7. Push the ends of the paper fastener through the holes on the pinwheel, then push the fastener through the center circle.
8. Place the straw on the back side of your pinwheel and push the ends of the fastener through the hole in the straw. Open-up the fastener by flattening the ends in opposite directions.

*Now you are ready to try-out your beautiful pinwheel.
All you will need is a little bit of wind to make your pinwheel spin round and round. Have fun!*



FUN COLORING PAGES



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