

healthy
AND READY TO
learn



**Children's
Health Fund**

ZERO TO FOUR GUIDEBOOK

Understanding the effects of health issues during child development

CONTROLLED ASTHMA

OVERVIEW

Asthma is a lung disease that makes it hard to breathe. The small tubes that allow air to travel to the lungs are called **airways**. With asthma, the airways become narrow because they get swollen and muscles around them tighten. This makes it harder to get air in and out of the lungs. The lungs of people with asthma also make more mucus, which can block the airways. Asthma is a chronic disease, which means that it does not go away. However, asthma is not the same for every child. Some children have symptoms every day, while others only have symptoms a few times a year. Some symptoms may come and go depending on the weather or a child's age.

Diagnosing and treating asthma in children under 4 years old can be hard. In babies and young children, the main symptoms of asthma are wheezing and coughing. Wheezing is a high pitched sound that may happen when your child breathes out. Other illnesses can also cause wheezing and coughing though, so sometimes it is hard to know if your child has asthma. Also, tests to measure how well someone is breathing are harder to use on young children. If you think your child might have asthma, it is important to discuss it with a doctor.

SYMPTOMS

Most children with asthma have their first symptoms before they are five years old. Anyone can have asthma, but it is common in children who have a family history of asthma. Asthma is also common in children who have allergies and children who have are around cigarette smoke a lot.

Signs of asthma in young children could include:

- Coughing
- Wheezing
- Trouble breathing
- A tight, uncomfortable feeling in the chest (sometimes children cannot explain this feeling)

Symptoms of asthma are different for each child. Some children have symptoms every day. Other children may have symptoms only a few times a year. Symptoms may be worse at night. Coughing is the most noticeable symptom in children.

An **asthma attack** is when the child has severe symptoms and trouble breathing. They may need to go to the emergency room or the hospital. It is important to always have your child's asthma medicines with you. You won't always know when an asthma attack will happen.

Certain events or triggers may cause asthma symptoms. An asthma **trigger** is something that makes asthma symptoms start up or get worse. Some triggers are:

- Being sick with a colds or other lung infections
- Things that cause allergies like dust, pets or pollen
- Cigarette smoke
- Strong emotional reactions, like crying or laughing
- Gastrointestinal reflux

Exercise or activity can also be an asthma trigger. With the right medicines, kids with asthma can live healthy, active lives. It is still important for children to be active even if they have asthma. Talk to your child's doctor so that they can find the right medicines for your child.

Not all young children who have wheezing have asthma. But it is important for a doctor to see your child if they do have wheezing, to make sure they can breathe well. Doctors will also work with you to make a plan for when your child starts wheezing in the future. They will make sure you have the right medicines for your child.

PARENTS

It is important to keep track of your child's symptoms and know their triggers. This will help your child's doctor make a treatment plan. You can help your child live with asthma by following the asthma treatment plan.

There may be long breaks between asthma symptoms in your child. Your child may have symptoms one day and not again for a few days, weeks, or months. You should keep track of your child's symptoms and tell your child's doctor. This will help the doctor make a treatment plan.

If your child is having symptoms every day or even a couple times per week that is too much. A treatment plan will help control your child's asthma.

VISITING THE DOCTOR

If your child has wheezing, or coughs a lot, take them to see their doctor. The doctor may ask a lot of questions. Some questions the doctor might ask are:

- *Does anyone in your family have asthma?*
- *How often does your child have symptoms of asthma?*
- *Does coughing wake your child up at night?*
- *Has your child been sick with a cold recently?*
- *How often does he or she have trouble breathing?*
- *If your child has trouble breathing, how long does it last?*

- *Has your child ever needed to go to the emergency room because they had trouble breathing?*
- *Does your child have any pollen, dust, pet or food allergies?*
- *Is your child exposed to cigarette smoke?*

If your child's doctor thinks that your child has asthma, he or she may suggest a treatment. There are two kinds of medicine to treat asthma: Relievers and Controllers.

Relievers: These medicines work to relax tight muscles around the airways. These are taken for quick relief of asthma symptoms. Children with asthma should always have their rescue medicines close by. Everyone who takes care of a child with asthma needs to know how to use these medicines. This includes babysitters and teachers.

Controllers: These medicines are for children who have symptoms more than a few times a month. They work to decrease irritation, swelling, and mucus that blocks airways. This medicine takes several weeks to work and will not help your child immediately.

For controllers to work, you must use them every day. Over several weeks you will start to see your child get better. If your child continues to take them every day, they will have less cough, wheezing, and asthma attacks. Your child may need to use relievers less often if they use controllers correctly. Controllers help prevent asthma symptoms.

Talk to your child's doctor to make sure they have the right medicines. Make sure that you know how and when to use each medicine.

WARNING SIGNS

Severe, or really bad, asthma attacks can be dangerous. Sometimes it can require emergency treatment. If your child is experiencing an asthma attack, please call your doctor right away. If your child is struggling to breathe, call 911 for an ambulance. The following signs and symptoms can help you know if your child is having an asthma attack:

- Using belly muscles to breathe
- Gasping for air
- Breathing in so hard that the belly is sucked under the ribs
- Trouble talking because of heaving breathing

THE GOAL IS CONTROL!

Asthma can be a scary disease, especially when it is your baby or young child. When you visit your child's doctor, bring a list of questions. Ask the doctor about anything that is making you worry. As many times as you need. You can even repeat the directions to your doctor to make sure you understand them. It is very important to make sure your baby or child has the right medicines if they have asthma. With the right medicines, your baby can be healthy and active, just like other kids. Asthma does not go away, but it **CAN** be controlled. Ask your doctor for help, and together you can make the best plan for your child.

HEALTHY VISION

OVERVIEW

Just like learning to walk and talk, infants develop sight slowly over 6 to 8 months. Infants are not born with the ability to focus their eyes, move them correctly and use them together as a team.

From birth, children see the world through their eyes. As the brain grows, an infant learns how to use the information the eyes take in. Even before they learn to reach and grab with their hands and sit-up, the eyes provide information to the brain that is important for development.

Eye and vision problems in infants can cause delays in:

- Gross motor skills, like rolling over and crawling
- Fine motor skills, like moving fingers and picking up small items
- Speech skills
- Language skills

Knowing the milestones of your infant's vision development will help make sure your child is seeing properly.

DEVELOPMENT

Birth to four months:

- At birth, infants experience a lot of new sights and sounds. Their main focus is on objects 8 to 10 inches from their face. Infants are sensitive to bright light. Their pupils remain constricted, or narrow, to limit the light coming into the eyes.
- During the first months of life, an infant's eyes are not well coordinated and may appear to wander or to be crossed.
- Infants are first drawn toward high contrast images, like black and white pictures, bull's eyes or very simple face shapes. At one month, an infant will look longer at bold colors and contrasting patterns.
- By eight weeks, infants begin to focus their eyes on the faces of a parent or other individuals close to them. The human face is an infant's favorite image. As their vision increases, an infant will be able to see the face more clearly and will become responsive to facial expressions.
- By three months of age, an infant should begin to follow moving objects with their eyes and reach for things around them. As an infant begins to look and reach for objects, the eyes start working together and vision quickly improves. During this time, infants are learning to use their eyes and hands together. This is called eye-hand coordination.

Five to eight months

- An infant's control of eye movements and eye-body coordination skills get better.
- By five months, an infant begins to develop depth perception. Depth perception is being able to judge if something is close or far away. A baby is not born with depth perception.
- Crawling helps with the development of eye-body coordination. Early walkers who did minimal crawling may not learn to use their eyes together as well as babies who crawl a lot.

Nine to twelve months

- At nine months, an infant may begin to pull themselves up to a standing position, as well as grasping objects with a thumb and forefinger.
- At twelve months, most infants will begin crawling and trying to walk. Crawling is important because it helps develop better eye-hand coordination.
- During this time, infants can judge distances. They can throw objects the right direction and distance.

One to two years old

- At one to two years, children are interested in exploring everything that surrounds them. They like looking and listening. They recognize familiar images in books and can scribble with a crayon or pencil.
- By two years, a child's eye-hand coordination and depth perception should be well developed.

PARENTS

Parents play a critical role in helping to assure their child's eye and vision can develop properly. Good vision is developed through a learned process of looking, touching, and exploring.

Birth to Four Months

- Change the crib's position and change your child's position in it
- Keep reach and touch toys within your baby's focus (about 8 to 12 inches)
- Talk to your child as you walk around the room
- Alternate right and left sides with each feeding
- Have toys with different textures, sizes, weights and forms

Five to Eight Months

- Hang a mobile toy across the crib for your child to grab, pull and kick
- Give your child plenty of time to play and explore on the floor
- Provide plastic or wooden blocks that can be held in both hands
- Play “patty cake” or “peek-a-boo” and move the baby’s hands through the motions while singing
- Use simple words and sentences about clothing, food, toys and baby

Nine to Eleven Months

- Play hide and seek games with toys
- Name objects when talking, encourage crawling
- Place objects on a highchair tray that can be pushed off and dropped to the floor
- Read books and tell stories to your child

Twelve to Eighteen Months

- Roll ball back and forth to help a child track objects with the eyes
- Give your child building blocks and balls of all shapes and sizes to play with
- Read books and tell stories to your child
- Pretend play with telephones, stuffed animals and dolls

Nineteen to Twenty-Four Months

- Build towers and structures
- Play with toys that can be put together or taken apart
- Encourage imagination and storytelling
- Play with four-wheeled toys that can be moved

Two to Three Years

- Encourage running, tumbling and climbing
- Provide your child with lots of time to create and draw
- Play make-believe games, dolls, dress-up clothes or stories
- Talk about objects, colors and shapes
- Allow child to play with other children the same age

Three to Four Years

- Allow time for drawing, coloring, and activities with clay and play dough
- Read books with your child
- Challenge child to dodge, throw, stop/go, turn sharp corners
- Set up times to encourage play in small groups
- Tell stories and encourage conversation

EYE EXAMS

It is important for a doctor to check a child's vision as they grow. Vision screenings can help parents and doctors find eye problems in a child. If problems are found early, it is more likely that they can be treated.

Vision screenings can be performed by a pediatrician, family doctor, or other trained health care provider. It can also be offered at schools, community health centers, or community events.

It is recommended that a doctor examine a newborn infant's eyes. If a baby is premature or born early, is at high risk for medical problems or has other health problems, an eye doctor should do a screening.

It is recommended that a second vision screening be done when a child is between six months and one year old. This can be done at a child's well child exam.

At age three or before or during preschool, a child's vision and eye alignment should be screened by an eye doctor or pediatrician.

WARNING SIGNS

Although a doctor examines your child's eyes at birth, it is important to pay attention to changes in your child's eyes as they develop. Keep an eye out for the following signs of concern:

- Your child does not follow an object with both eyes
- Your child has trouble moving either or both eyes in all directions
- Your child's eyes jiggle and cannot hold still
- Your child's eyes are crossed most of the time, or one or both of the eyes turns in or out
- One of your child's pupils appear white, particularly in photographs
- Your child's eyes seem sensitive to light

If your infant was born premature, they are at greater risk for developing certain eye problems, including astigmatism (blurred vision), myopia (nearsightedness), retinopathy of prematurity (abnormal blood vessel growth that can lead to blindness), and strabismus (eye misalignment). Contact your infant's doctor for more information.

DENTAL HEALTH

OVERVIEW

Healthy teeth are important to your child's health. They help with healthy eating and overall health. Even though they will eventually lose them, it is important to keep baby teeth strong and healthy. Baby teeth with cavities or infections can be painful. Good oral health also helps a child's speech development. From the time your child is born, there are things you can do to promote healthy teeth and prevent tooth decay. Tooth decay is the most common childhood disease in the United States. Tooth decay is damage from germs in your mouth that eat away at the tooth. Over time, these germs can cause a hole in the tooth, called a cavity. Tooth decay and cavities can be painful and can affect a child's learning and focus in school.

DEVELOPMENT

Teeth vary in size, shape and location in the mouth. By the time a baby is born, their 20 baby teeth have usually formed in the gums. Teeth will start to break through the gums when a baby is 4-6 months old. This can vary from child to child and some baby's won't develop any teeth at all until they are closer to one year old. When teeth are ready, they will come out pairs. The lower teeth come in first. There is normally a space or gap between each baby tooth. This leaves room for a child's adult teeth. If teeth do not come in a year after they are supposed to, take your child to a dentist to make sure they are developing properly. By the time a child is 2 to 3 years old, all their teeth should have come out.

Before birth:

- Teeth begin to develop before the baby is born, around 4 - 6 weeks into the pregnancy.
- Around 3 months into the pregnancy, the hard tissue that surrounds the teeth form.

Six to Twelve months:

- The bottom front teeth are the first to erupt, around 4-7 months.
- The upper middle teeth come in next, between 8- 12 months.

Thirteen to Eighteen months:

- Your child's first lower molar will come in. Soon after that the upper molar will come in.
- After the first molars have come in, the teeth next to the bottom front teeth will come in.

Twenty-four months and Up:

- Usually, after your child reaches two years old, the four-second molars (the last of the baby teeth) appear.

TEETHING

When your child's teeth break through the gums, it may be uncomfortable and painful. This time of discomfort for your baby is called **teething**. Teething usually begins around 4-6 months of age. Some babies are fussier than usual when they are teething. This may be because of soreness and swelling in the gums before a tooth comes in. These symptoms usually begin 3-5 days before the tooth shows, and they disappear as soon as the tooth breaks through. Some signs of teething are:

- Biting their fingers or toys
- Not wanting to eat and drink because their mouths hurt
- Drooling
- Sensitive or swollen gums
- Problems sleeping
- A low fever

Parents can help their baby feel better while teething by:

- Using a clean finger to gently rub your baby's gum for 2 minutes at a time.
- Give baby safe objects to chew on, such as teething rings.
- If needed, talk to your baby's doctor about using pain medication

Pain relievers and medications that you can rub on babies gums can be harmful if too much is used. Do not use teething tablets or gels that contain the ingredients belladonna or benzocaine. These ingredients may cause side effects and people are encouraged *not* to use them. If your child has a fever and is fussy, it may not be due to teething and you should talk to your child's doctor.

PARENTS

It is important for parents to help children develop good oral health. Fluoride is a mineral that helps stop cavities in children and adults. Baby toothpaste does not have fluoride in it. Since babies cannot spit, this is safer. In many places, the amount of fluoride in drinking water is enough to help your baby's teeth grow in strong. If you do not give your baby tap water or if there is not fluoride in the water where you live, or you are not sure, talk to your baby's doctor.

Here is a list of ways that you can care for your baby's teeth:

- As soon as baby teeth appear, brush your child's teeth using a baby-size toothbrush and a small drop of baby toothpaste.
- Brush your child's teeth twice a day. Once in the morning and once right before bedtime.
- At 6 months of age, talk to your child's doctor about using a fluoride supplement.
- When your baby is 2 years old, increase the amount of toothpaste to the size of a pea. At this age, start using toothpaste that does contain fluoride, as they can spit most of it out instead of swallowing it all. This will help your child's teeth to grow in stronger.
- Do not put your baby to sleep with a bottle. When the baby falls asleep, the milk will stay in their mouth and can lead to tooth decay and cavities.
- Transition your child from a bottle to a cup, as soon as they are ready to hold it on their own.
- Do not give your baby a spoon or pacifier that has been put in your mouth first. Bacteria can be passed to your baby.
- Provide healthy foods and limit snacks and drinks that have a lot of sugar.

VISITING THE DOCTOR

As soon as your child's first tooth appears, it is time to schedule a dentist appointment. It is recommended that your child visit no later than their first birthday. The first visit is mainly for the dentist to examine your child's mouth and to check growth and development. Going to the dentist at a young age helps your child feel comfortable and safe during visits.

During this visit, the dentist will likely do the following things:

- Check for oral injuries, cavities or other problems.
- Let you know if your child is at risk of developing tooth decay.
- Clean your child's teeth and provide tips for daily care.
- Discuss teething, pacifier use, or thumb sucking habits.
- Discuss treatment, if needed, and schedule the next check-up.

HEALTHY HEARING

OVERVIEW

In the first few years of life, hearing is an important part of a child's social, emotional, and brain development. Hearing loss can happen when a part of the ear is not working the right way. This includes parts like the outer ear, middle ear, inner ear and nerves. Hearing loss can be in one or both ears. Hearing loss may cause a child to have problems with how they talk, and have trouble learning. It can also cause problems with their social skills and behavior.

Hearing is tested when a baby is born. It is important that a young child get hearing screened early and checked regularly. It is always better to find a hearing problem early so you can work with a doctor to treat it.

DEVELOPMENT

Birth to 3 Months:

At birth, all newborns have a hearing screening before leaving the hospital. This can help identify children born with hearing loss. Sometimes hearing loss is caused by things like infection, trauma, or listening to a lot of loud noises. During the first few weeks of life, infants should react to loud sounds, recognize a parent's voice and calm down if crying, "coo" and makes pleasure sounds.

Four to Six Months:

By around 4 months, an infant should be able to:

- follow sounds with his or her eyes
- respond to changes in the tone of voice
- notice toys that make sounds
- pay attention to music
- laugh
- babble when excited or unhappy
- make gurgling sounds when alone or playing

Seven Months to One Year:

- By around 7 months, an infant should be able to:
- enjoy playing peek-a-boo and pat-a-cake
- turn and look in the direction of sounds
- listen when spoken to
- understand words for common items such as “cup”, “shoe” or “juice”
- babble to get attention
- practice different speech sounds
- communicate using gestures such as waving or holding up arms
- By a child’s first birthday, they should have one or two words (“hi”, “dog”, “dada”, “mama”).

One to Two Years:

By around 1 year, a toddler should be able to:

- know parts of the body and point when asked
- follow simple commands and understand simple questions
- enjoy simple songs
- stories and rhymes
- point to pictures in books
- acquire new words
- use one or two word questions
- put two or more words together
- use words that start with many different letters

Two to Three Years:

By around 2 years, a toddler should be able to:

- use two or three word phrases to talk about and ask for things
- speak in a way that is understood by family members and friends
- name objects

Three to Four Years:

By around 3 years, a toddler should be able to:

- hear you when you call from another room
- hear the television or radio at the same sound level as other family members
- answer simple questions such as “who?” “what?” “where?” and “why?”
- talk about activities at daycare, preschool or friends’ homes
- use sentences with four or more words
- speak easily without having to repeat syllables or words

PARENTS

Parents are often the first to sense that their child has a hearing problem. It is important to recognize the signs of hearing loss as early as possible. Parents can do this by observing your child's development. Early signs of problems include: no reaction to loud noises and/or no response to your voice. If you suspect a problem, do not wait in getting your child's hearing tested.

Make sure your baby passed their hearing screen after they were born. If your child was not born in a hospital or was not born in the United States, they might not have had this test. If they did not have a newborn hearing test, or if they did not pass it when it was done, be sure to follow up with your doctor to have your baby’s hearing checked. Any additional testing they recommend will be very important to have done.

VISITING THE DOCTOR

A **hearing screening** can show if your child might have hearing loss. A hearing screening is easy and is not painful. There are different types of screenings depending on how your child’s age, development, and health status. A hearing screening can be conducted by your child’s doctor, or by a special hearing professional, called an audiologist. Usually the screening includes soft sounds played into headphones. An audiologist may know an infant or toddler is responding by his or her eye movements or head turns.

A **full hearing test** is a complete test that takes place at a hearing clinic. This test will help determine if the hearing loss will go away, or will stay. It will also help decide what kind of treatment is best to help your child’s hearing loss.

WARNING SIGNS

The signs and symptoms of hearing loss are different for each child. Your child may have hearing loss if he/she:

- Was late to begin speaking as a toddler
- Does not speak clearly
- Does not follow directions (you may think they are not paying attention or just ignoring you)
- Often says, "Huh?"
- Turns the TV volume up too high
- Has no reaction to loud noises
- Shows no response to your voice
- Complains of earaches, ear pain or head noises

HEALTHY NUTRITION

OVERVIEW

Eating well gives your child the energy to grow, learn, and play. Eating well means eating the right amount of nutrients. Everything that your child eats and drinks has nutrients. Your child's body uses nutrients to work the way it should. Nutrients include carbohydrates, proteins, fats, vitamins, and minerals. Some foods are healthier than others, so choices are important.

Poor nutrition can cause health problems. This can mean being underweight or overweight. But children can have poor nutrition and still be a normal weight for their age. Your doctor can help teach you which foods are important for your child to eat, if you are not sure. Many health problems from poor nutrition can be very serious. Your child's brain, bones, and whole body needs good nutrition to grow.

DEVELOPMENT

Birth to Six Months

Breastmilk or formula will provide all of the nutrition needed during a child's first six months of life. During the first month, infants will feed during that day and at night. As infants grow, feeding will change.

After the first few weeks, babies will start to feed less often and sleep for longer periods of time. Infants who drink formula digest the milk more slowly. This may mean that the infant has fewer feedings than an infant that drinks breast milk.

Six Months to One Year

Between four to six months old, most babies are ready to start eating solid foods. How can you tell if baby is ready for solid foods? Here are a few hints:

- Your baby's tongue thrust reflex is gone. This means they stop sticking their tongues out to help them suck.
- Your baby can support his or her own head
- Your baby is interested in food

When your baby is ready, introduce one new food at a time. Babies like cereals with a lot of iron, strained fruits and vegetables, and pureed meats. At this age, solid foods are only a supplement. Breastmilk and formula will still meet your baby's basic nutritional needs. Do not feed your baby honey or cow's milk.

By nine months, babies are able to hold food in their fingers and may try feeding themselves. Babies can also begin trying foods with different textures and tastes.

One to Two Years

Toddlers between one to two years old have little tummies, so serving foods that are packed with nutrients is important to their growth. Toddlers will continue to feed themselves, first with their fingers and then with forks and spoons.

It is up to parents to decide what type of foods to offer at mealtime, but it is up to your toddler to decide which of these foods to eat and how much. Avoid feeding your toddler foods that they could choke on, such as popcorn, hot dogs, hard fruits, whole grapes, raisins or nuts.

Some toddlers drink a lot of cow's milk. But, milk can fill up a child and doesn't have all the nutrients that other food can give them. Cow's milk doesn't have iron which is really important for children and their learning skills.

Two to Four Years

It is important that children between two to four years eat a variety of healthy foods. When children eat many different kinds of foods, they get a balance of the vitamins they need to grow. At this age, child can also begin to be involved in meal preparation. For example, they can tear lettuce for a salad or help set the table. Having family meals and setting a daily meal routine is important for young children.

PARENTS

Parents help shape a child's eating choices. You can help your child by following the tips below:

- **Offer different types of healthy foods.** This includes fresh fruits and vegetables, low fat dairy products (milk, yogurt, cheese), protein (beans, chicken, turkey, fish, hamburger, tofu, eggs), and whole grain cereals and bread.
- **Let your child choose the portion.** Encourage your children to choose their own serving size by using small plates, bowls, and cups. Young children may not eat everything that is on their plate, and that is okay. At this age, children should learn to know when they are full. It is important that parents encourage their children to try new foods.
- **Have regular mealtimes with the family.** When it is meal or snack time, turn off the TV, and eat together at the table.
- **Limit sugary drinks.** Young children should not be drinking too many sugary drinks. This includes soda, juice drinks, lemonade, sweet tea, and sports drinks. These can lead to cavities and unhealthy weight gain. The best drinks are water and milk.
- **Teach table manners.** Young children are ready to learn basic table manners. Parents can help by teaching them how to hold a utensil correctly and how to use a knife. Children can also learn to not talk with a full mouth, or how to ask for food across the table.

VISITING THE DOCTOR

Children should regularly go to the doctor to make sure that they are healthy. A doctor can check your child's weight and growth. Your child's doctor will tell you if your child needs to make any changes to their diet. A doctor can direct you to the right services about how to find, choose, and cook healthy foods for you and your child.

LEAD-FREE CHILDREN

OVERVIEW

Lead is a harmful metal that can be dangerous to young children. Lead was used in wall paints and water pipes in old homes. Sometimes lead is found in soil and in toys made outside the United States. It can also be in some pottery paint and herbal medicines made outside of the United States. Lead can be inhaled, swallowed, or absorbed through the skin. Dust from lead paint is the number one source of lead poisoning in children.

Lead is harmful to everyone, but babies and young children are at greatest risk for health problems from lead poisoning. There is no safe level of exposure to lead. Lead poisoning can cause serious health problems including anemia, kidney damage, and brain damage. The effects of lead exposure cannot be corrected. Protecting children from lead exposure is important for lifelong good health.

The best way to do this is by making sure your home is lead-free.

DEVELOPMENT

Children ages 6 months to 3 years are most likely to be exposed to lead. Children of this age spend a lot of time on the floor and try to put things in their mouths. This raises their chances of swallowing lead dust or paint chips. During this time, a child's body is quickly growing. Lead can have damaging effects on a child's growth, behavior and ability to learn. Only a small amount of lead is needed to harm a young child.

PARENTS

There are many ways that parents can reduce a child's exposure to lead *before* they are harmed. Here are several tips on how to protect your child:

- **Test your home for lead.** Ask the landlord about lead before you sign a lease. If the apartment or home was built before 1978, try and get it tested for lead.
- **Keep your house lead-dust free.** When old paint cracks and peels, it makes lead dust. Lead dust is so small you cannot see it. Children can get the dust on hands and toys when playing on the floor. Use damp paper towels to clean up lead dust around windows, play areas and floors.
- Anytime you see paint that is peeling or cracking, **talk to your landlord about repainting** it. Until the flaking paint has been covered or removed, do not let your children play near it. Areas around windows are common places where newer paint is worn away. This can uncover old layers of lead paint. As windows are opened and closed, this paint becomes dust. Be sure your child does not play here or get this dust on their hands.

- **Wash hands.** Wash your child's hands with soap and water after play to get rid of lead dust, especially before eating. Try to also wash your children's toys on a regular basis, especially toys that they put in their mouths.
- **Give your child healthy foods.** Feed your child healthy foods with calcium, iron and vitamin C. These foods can help keep lead out of the body.
- **Clean up dirt.** Soil surrounding your home can contain lead. Plant grass over bare soil or use mulch or wood chips.
- **Test your tap water.** Ask your landlord to do this for you. You can also find kits to do it yourself at most drug stores. Lead can be found in old pipes. Use only cold water from the tap for drinking and cooking—hot water is more likely to have higher amounts of lead.
- **Don't use herbal remedies that may contain lead.** [You can visit this link to learn more about remedies that may have lead in them.](#)
- Don't use glazed pottery for cooking or serving food

VISITING THE DOCTOR

The most important thing you can do is make sure you don't have lead in your home.

But it is also important to have your child checked by their doctor. Your child's doctor can help determine if your child has lead poisoning. A **lead test** will help doctors know the amount of lead in your child's blood. The doctor will draw blood from the finger or a vein. In infants, the blood may be taken from the heel. The blood sample will be processed by a machine, and the results will be ready in a few days.

If your child has high levels of lead in their blood, the doctor will assign a treatment plan. This treatment may include diet changes, getting rid of environmental sources of lead and possibly medication. Your child will be retested often to make sure their lead levels are going down.

WARNING SIGNS

It can be hard to know if your child has lead poisoning. Children usually do not look or feel sick. The only sure way to know is to get a lead test. Possible symptoms in young children include:

- Being overly tired or hyper
- Irritability
- Aggressive behavior
- Poor attention span
- Developmental delay
- Trouble sleeping
- Loss of appetite
- Vomiting
- Headache
- Anemia

SOCIAL AND EMOTIONAL HEALTH

OVERVIEW

The way your child acts, especially around other people, is called behavior. Your child will start to develop relationships with people from the moment they are born. But, the process of talking with, sharing and interacting with others can take many years. The area of development that involves learning to interact with other people and control emotions is called **social and emotional development**.

It is important to help a young child learn to control their emotions and behavior. A child's first relationships help shape who they are, who they become, how they understand the world. Social and emotional development is important to a child's sense of well-being. Children who are emotionally healthy have good relationships with adults and peers.

DEVELOPMENT

Birth to Three Months

From the moment a baby is born, they spend time watching and listening to the people around them. In the first month, your baby will begin to make eye contact, cry for help, and respond to a parent's smile or voice.

At two months, your baby will study faces, gurgle and "coo" in response to sounds, prefer to look at people rather than objects and develop a smile.

By three months, your baby will start a conversation by smiling and gurgling, smile back when you smile at him and imitate some movements and facial expressions.

Many parents worry about spoiling their children during this phase. It's good to understand that the way you care for your child at an early age can affect how they grow up. The most important thing to teach your newborn and young child is that they are growing up in a safe, supportive environment. This means responding to their frequent cries, identifying their needs, and comforting them whenever they need it. Putting the time in at this early age will make them less likely to have behavioral problems when they're older.

Four to Six Months

Between this time, your baby may experience a dramatic change in personality. As they learn to sit up, use their hands, and move about, babies become more interested in the outside world. Your baby will reach out and touch everything they see.

Around 4 and 5 months, your baby will laugh when tickled, be interested by other children, and begin to tell the difference between family members.

By 6 months, babies will begin to know their own name, “coo” when happy, and make grunting and squealing noises. This kind of exploration is important and very normal. Sometimes it can feel strange for your child to explore your face or reach for your possessions, but it’s not because they are “being greedy” or trying to take things from you. This is a normal developmental stage.

Seven to Twelve Months

During these months, your child may begin to have anxiety when left with strangers, babysitters or even other family members. Your baby is more likely to have separation anxiety when tired, hungry or sick. Also, during this time, your baby will begin to develop self-awareness by looking in mirrors and reflections.

At 10 months, your baby will begin to develop self-esteem, and will respond to positive sounds such as clapping. Babies around this time also show moods such as sad, happy or angry.

By 12 months, your baby may have temper tantrums, develop a sense of humor or cling to one parent over the other.

One Year

Your baby will spend their first year going between wanting to be independent and clinging to parents. Now that your baby can walk and do things on their own, they have the power to move away from mom and dad and test new skills. But at the same time, your baby is not entirely comfortable alone. You may find your baby coming to you for comfort, especially when tired, sick or scared. During this time, your baby will begin to talk using words and sounds, recognize familiar people, and interact with others.

Two Years

Your child will begin to experience ups and downs during their second year. Although they want to be independent and adventurous, your baby still lacks many of the skills required to do all that he would like. When your baby oversteps a limit and is pulled back, he may react with anger and frustration. By two years, your child is engaging more with those around them—they will begin to socialize and show interest in others.

Three Years

During this time your child may soon be starting preschool. Although they do not understand how to share or take turns, your child will begin to look for other kids to play with. At this age, young children will also start to use their imagination by playing dress up, pretend play, or other activities. Your child will also start to show understanding by offering hugs or kisses.

Four Years

By age 4, your child will show interest in being part of a group, learn to share and cooperate more with others, and be physically affectionate by giving hugs and kisses. Instead of being shy, your child will be more friendly, talkative, and curious. Also, your child will start to be more independent, especially in dressing, feeding, and putting away toys.

PARENTS

It is important for you to develop a close emotional bond with your child. In the early months, you can do this by quickly responding to your baby's needs. As your child gets older, you can grow close to them by playing, comforting, and engaging with them.

Reading with your child is a great way to interact. Talk to them while you are together, describing what you are doing, and pointing out things that you see. Hearing more words causes your baby's brain to develop, so it is important to talk with them, even before they can understand what the words mean. It is also important to smile at them, play with them, and look them in the eye. This is how they learn to engage and about other people's emotions.

The more confident and secure your child feels, the more independent and well behaved they will be. By giving your child praise when they show a good behavior, they are encouraged to repeat that behavior. As you continue to do this, your child will start to feel good about their accomplishments and about themselves.

VISITING THE DOCTOR

Your child's doctor can help you if there are problems with your child's social and emotional development. The doctor may be able to teach you ways to help your child at home. For certain problems, they may give your child medicine. The doctor can also connect you to other health services in your community. You should not be embarrassed. All children are different. Helping your child makes you a good parent.

However, it can be hard for your child's doctor to know if there are problems just by looking at them. It is important for you to describe what you and your baby are doing each day so that the doctor can better understand your child's personality.

WARNING SIGNS

If you notice some of the following things you may want to talk to your child's doctor. A health professional can help you understand your child's social and emotional development.

By Nine Months:

- Your child is not responding to sounds
- Your child is not smiling
- Your child avoids close contact or cuddling
- Your child cannot self-soothe or calm himself
- Your child has no interest in games like peek-a-boo

By One Year:

- Your child is not showing interest in other children his age
- Your child cannot wait for something he wants
- Your child is very rigid about routine, food items, clothing, etc.
- Your child has limited or fleeting eye contact with others
- Your child does not imitate any of your actions
- Your child does not respond when you call her name
- Your child does not follow your point when you try to show something, or bring attention to something
- Your child doesn't take turns in a simple turn-taking game like chase or peek-a-boo

By Two Years:

- Your child doesn't imitate other people
- Your child constantly moves from one activity to another and is not able to stay at an activity for brief periods
- Your child requires constant attention to stay at an activity
- Your child doesn't show any interest in other children
- Your child doesn't "show" things to other people
- Your child is extremely "rigid" about routines, becoming extremely upset when they are changed
- Your child is passive, and doesn't want to try things other children his or her age are doing
- Your child has extreme difficulty waiting for items he or she wants

By Three Years:

- Your child is not interested in pretend play
- Your child has extreme difficulty separating from you
- Your child is not starting or responding to simple interactions with other children
- Your child is showing abnormal aggression
- Your child shows extreme fears that interfere with daily activities
- Your child is extremely "rigid" about routines

By Four Years

- Your child is not able to initiate or join in play with other children
- Your child is not able to share at all with other children
- Your child wants to be dependent on caregivers for everything
- Your child becomes extremely upset when things are changed
- Your child has extreme difficulty separating from you
- Your child is fearful, and does not want to try things other children his age are doing
- Your child has extreme fears that get in the way of daily activities

TRAUMA AND STRESS AT HOME

OVERVIEW

Trauma is a single or group of scary events that change how a person reacts to stress. These types of events make people feel afraid or in danger. Trauma can happen from events like being in a flood, fire, or car accident. Trauma can be when a person is abused by another person, in a physical, mental, or emotional way. Trauma can also happen from seeing something scary happen to someone else. Other examples of an event that may cause trauma are death of a family member, or divorce.

Trauma can happen before a child is born (inside the womb) or as children are growing up. It is important to recognize that some events may be traumatic for children. Although you may not be able to prevent some of traumatic events, there are ways to support children who have experienced trauma.

Effects of trauma can be very different for different people. Two children in the same family may have very different effects of a trauma they both experienced.

When a child experiences trauma they may have trouble dealing with some events or situations for the rest of their life. Trauma can change a child's behavior, how they relate to other people, and the way they react to everyday events. It also can make children miss school more often and fall behind in the classroom. It could have lasting effects on their overall success in school. A child who has experienced trauma may have other health problems as they become an adult.

Recovery from trauma may be a long process in some cases. But children can control their behavior better if they receive help and support from adults in their life to work on issues with them--the earlier the better!

DEVELOPMENT

When babies or young children have gone through trauma, they show it in many different ways. As children grow, they reach certain milestones, or learning of new skills. For example, a baby learns to crawl. A school age child learns to make friends. A teenager learns to become more independent. Children who have gone through trauma may not be able to master these skills or it could be delayed.

Babies

Babies learn to sit up, crawl, grab, walk, sleep and toilet train. In babies who have gone through trauma, parents will notice that their child has trouble sleeping, trouble eating, and difficulty being soothed and are easily frightened.

In babies, it is important that they develop a good attachment with their parents or caregivers. This means that the baby develops trust and security with an adult. Though many babies go through stages where they don't sleep well, don't want to be alone, and want to be held all the time, babies who have gone through trauma can show more extreme general fearfulness, which can look like they are afraid of being alone, going to sleep. Older babies go through stages where they are afraid of strangers, but babies that have experienced trauma may show a greater distrust of others or show no interest in caregivers. Slower achievement of developmental milestones could turn into developmental delays.

Young Children

Most young children experience separation anxiety when they are around 1 to 2 years old. In young children who have trauma, this separation anxiety may not go away, and the child may be especially fearful that a parent may not return. Children might also have temper tantrums that are more frequent and extreme than normal. Sometimes, young children may go back to younger behaviors, such as baby talk or bed wetting. As young children start to go to school, teachers may notice that your child has an overreaction to loud noises, physical contact or sudden movements. A child might also develop new fears during this time.

PARENTS

As you can see from reading above- sometimes it is very hard to know if a baby's behavior is part of normal development, or a reaction to more severe stress. Talk to your doctor whenever you have questions or concerns, as your level of worry and stress is also important.

Most children are able to overcome traumatic experiences. One of the best ways that children are able to heal is with constant support from their parents or caregivers to make them feel safe, secure, and protected. The amount of support a child receives is the most important factor in how well a child can recover after a traumatic event.

There are specific things that a parent can do to help:

- Give your child a safe place to go to when they feel overwhelmed
- Create a routine with structure and stability for your child
- Have a support system so that your child feels safe (include teachers, family members, neighbors, etc.)
- Recognize "triggers"— the events/reminders/cues that cause your child to become upset
- Remain calm and listen to your child

Caring for a child with trauma can be stressful and tiring. It is important that parents practice healthy self-care during this time. This can be done by: eating regularly, getting enough sleep, exercising, spending time with people you trust, and/or talking with a counselor.

VISITING THE DOCTOR

You should talk to your doctor if you are worried about your child in any way. The more you explain what has happened to your child, the more they will be able to help. They can do a medical check at their office to understand what your child needs. You and your doctor can create a plan for your child. The doctor can also connect your family to people in your neighborhood that can help.

WARNING SIGNS

Trauma signs and symptoms in young children can look like many different things. If you are worried that your child has experienced a traumatic event, visit your child's doctor as soon as possible. Common signs might be:

- Trouble eating
- Trouble sleeping
- Clingy or trouble separating from parents
- Irritable and difficulty soothing
- Limited play and exploration
- Trouble speaking
- Easily frightened
- Aggressive behavior
- Loss of recent developmental achievement

WORKS CITED

Controlled Asthma

Asthma in Children. (n.d.). Retrieved January 23, 2017, from <https://medlineplus.gov/asthmainchildren.html#summary>

Asthma in children younger than 12 years: Initial evaluation and diagnosis. (2016, November 29). Retrieved January 23, 2017, from http://www.uptodate.com/contents/asthma-in-children-younger-than-12-years-initial-evaluation-and-diagnosis?source=search_result&search=Asthma%2Byoung%2Bchildren&selectedTitle=6~150#H29

Childhood Asthma. (n.d.). Retrieved January 23, 2017, from <http://www.aaaai.org/conditions-and-treatments/library/at-a-glance/childhood-asthma>

Treating asthma in children under 5. (2016, September 20). Retrieved January 23, 2017, from <http://www.mayoclinic.org/diseases-conditions/childhood-asthma/in-depth/asthma-in-children/ART-20044376?p=1>

Healthy Vision

Child Development Timeline. (n.d.). College of Optometrists in Vision Development. Retrieved January 9, 2017, from http://www.covd.org/?page=child_timeline

Infant Vision: Birth to 24 Months of Age. (n.d.). American Optometric Association. Retrieved January 9, 2017, from <http://www.aoa.org/patients-and-public/good-vision-throughout-life/childrens-vision/infant-vision-birth-to-24-months-of-age?sso=y>

Normal Vision Development in Babies and Children. (2014, July 25). American Academy of Ophthalmology. Retrieved from <https://www.aoa.org/eye-health/tips-prevention/children-vision-development>

Child Development Timeline. (n.d.). College of Optometrists in Vision Development. Retrieved January 9, 2017, from http://www.covd.org/?page=child_timeline

Infant Vision: Birth to 24 Months of Age. (n.d.). American Optometric Association. Retrieved January 9, 2017, from <http://www.aoa.org/patients-and-public/good-vision-throughout-life/childrens-vision/infant-vision-birth-to-24-months-of-age?sso=y>

Normal Vision Development in Babies and Children. (2014, July 25). American Academy of Ophthalmology. Retrieved from <https://www.aoa.org/eye-health/tips-prevention/children-vision-development>



Dental Health

Anatomy and Development of the Mouth and Teeth. (n.d.). Retrieved February 13, 2017, from <http://www.stanfordchildrens.org/en/topic/default%3Fid%3DAnatomy-and-development-of-the-mouth-and-teeth-90-P01872&rct>

Babies and Kids: Healthy Habits- American Dental Association. (n.d.). Retrieved February 13, 2017, from <http://www.mouthhealthy.org/en/babies-and-kids/healthy-habits>

FAQs for Parents- American Academy of Pediatric Dentistry. (n.d.). Retrieved February 13, 2017, from <http://www.mychildrensteeth.org/education/faq/>

Teething: 4 to 7 Months. (2016, October 6). Retrieved February 13, 2017, from <https://www.healthychildren.org/English/ages-stages/baby/teething-tooth-care/Pages/Teething-4-to-7-Months.aspx>

Healthy Hearing

Hearing Evaluation in Children. (2016, March 1). Retrieved February 13, 2017, from <http://kidshealth.org/en/parents/hear.html#>

Hearing Loss. (2015, October 23). Retrieved February 13, 2017, from <https://www.cdc.gov/ncbddd/hearingloss/facts.html>

Purpose of Newborn Hearing Screening. (2015, November 21). Retrieved February 13, 2017, from <https://www.healthychildren.org/English/ages-stages/baby/Pages/Purpose-of-Newborn-Hearing-Screening.aspx>

Your Baby's Hearing and Communicative Development Checklist. (2015, June 15). Retrieved February 13, 2017, from <https://www.nidcd.nih.gov/health/your-babys-hearing-and-communicative-development-checklist>



Healthy Nutrition

Childhood Nutrition. (2016, March 3). Retrieved March 6, 2017, from <https://www.healthychildren.org/English/healthy-living/nutrition/Pages/Childhood-Nutrition.aspx>

Feeding Your 1 to 3 Month Old. (2014, September 1). Retrieved March 6, 2017, from <http://kidshealth.org/en/parents/feed13m.html?WT.ac=ctg#>

Feeding Your 4 to 7 Month Old. (2017, January 1). Retrieved March 6, 2017, from <http://kidshealth.org/en/parents/feed47m.html?WT.ac=p-ra#>

Feeding Your 8 to 12 Month Old. (2014, September 1). Retrieved March 6, 2017, from <http://kidshealth.org/en/parents/feed812m.html?WT.ac=p-ra#>

Feeding Your 1 to 2 Year Old. (2014, September 1). Retrieved March 6, 2017, from <http://kidshealth.org/en/parents/feed12yr.html?WT.ac=ctg#>

Feeding Your Preschooler. (2014, November 1). Retrieved March 6, 2017, from <http://kidshealth.org/en/parents/feed-preschooler.html#>

LOUIS A. KAZAL, JR., M.D., Navajo Health Foundation/Sage Memorial Hospital, Ganado, Arizona Am Fam Physician. 2002 Oct 1;66(7):1217-1225.

Lead-Free Children

Lead Poisoning. (2015, February 1). Retrieved on February 13, 2017, from <http://kidshealth.org/en/parents/lead-poisoning.html#>.

Blood Lead Levels in Children: What Parents Need to Know. (2016, March 7). Retrieved on February 13, 2017, from <https://www.healthychildren.org/English/safety-prevention/all-around/Pages/Blood-Lead-Levels-in-Children-What-Parents-Need-to-Know.aspx>.

Lead Poisoning is a Danger for Every Baby and Child: Here's What You Should Know. (2012, July 1). Retrieved on February 13, 2017, from <https://www.health.ny.gov/publications/2594/>.

Social Emotional Learning

Emotional and Social Development: Birth to 3 Months. (2009, August 1). Retrieved February 27, 2017, from <https://www.healthychildren.org/English/ages-stages/baby/Pages/Emotional-and-Social-Development-Birth-to-3-Months.aspx>

Emotional and Social Development: 4 to 7 Months. (2009, August 1). Retrieved February 27, 2017, from <https://www.healthychildren.org/English/ages-stages/baby/Pages/Emotional-and-Social-Development-4-7-Months.aspx>

Emotional and Social Development: 8 to 12 Months. (2009, August 1). Retrieved February 27, 2017, from <https://www.healthychildren.org/English/ages-stages/baby/Pages/Emotional-and-Social-Development-8-12-Months.aspx>

Emotional Development: 1 Year Olds. (2015, November 21). Retrieved February 27, 2017 from <https://www.healthychildren.org/English/ages-stages/toddler/Pages/Emotional-Development-1-Year-Olds.aspx>

Emotional Development: 2 Year Olds. (2015, November 21). Retrieved February 27, 2017, from <https://www.healthychildren.org/English/ages-stages/toddler/Pages/Emotional-Development-2-Year-Olds.aspx>

Emotional Development in Preschoolers. (2015, November 21). Retrieved February 27, 2017, from <https://www.healthychildren.org/English/ages-stages/preschool/Pages/Emotional-Development-in-Preschoolers.aspx>

Social Development in Preschoolers. (2015, November 21). Retrieved February 27, 2017, from <https://www.healthychildren.org/English/ages-stages/preschool/Pages/Social-Development-in-Preschoolers.aspx>

Trauma

Bassuk, E.L., Konnath, K.K., Volk, K.T. (2006). Understanding Traumatic Stress in Children. *The National Center on Family Homelessness*. Retrieved on March 6, 2017, from http://www.brighthorizonsfoundation.org/wp-content/uploads/Understanding_Traumatic_Stress_in_Children_0.pdf.