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## The newborn

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### **Fetal position**

During his first few weeks of life, your baby will often take up the same position he did in your belly. We call this the fetal position.

## Size and weight

Babies born from 37 to 42 weeks of pregnancy are said to be full-term. They usually measure 45 to 55 centimetres (18 to 21 inches) and weigh 2,500 to 4,300 grams (5.5 to 9.5 lb.).

It's normal for a baby to lose up to 10% of his weight in the first few days of life. He eliminates his meconium and first stools. He also loses water because he was immersed in liquid throughout the pregnancy. And he's only drinking a little milk at a time. If born at term and in good health, he will be back up to his birth weight 10 to 14 days after birth.

## Skin

A newborn's skin colour varies from child to child. His hands and feet are sometimes paler and may stay blueish for up to 48 hours. The skin may also be mottled. This is due to cold – your baby is still learning to control his own temperature. In most cases, the mottling disappears once your baby is in a warm place.

The skin is usually smooth, soft and transparent in places. It may wrinkle and peel, especially on the hands and feet. It is sensitive to heat and cold.

At birth, babies can be covered in *vernix caseosa*, a white paste that protected their skin in the amniotic fluid. The whitish coating will be absorbed in a few hours or days. Some babies, even premature ones, can also have skin covered with a fine down, which goes away after a few weeks.

#### Eyes

The eyes of white-skinned newborns are blue-grey or slate blue. Darker-skinned babies often have dark eyes at birth. The eyes usually adopt their permanent colour at about 3 months old but may change up to 1 year. Newborns usually cry without tears, which appear at 1 or 2 months.

## Head

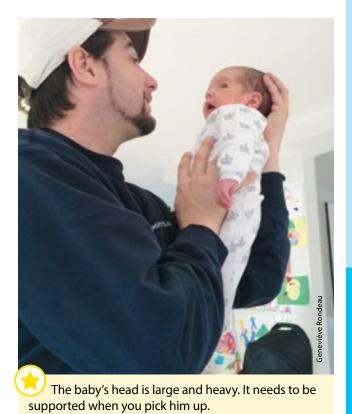
Your baby has a delicate neck, but should be able to turn it sideways easily. If he has trouble moving it and it seems to hurt, he may have a stiff neck. If the stiffness persists, get advice from a health professional.

Pressure during labour and delivery sometimes deforms your baby's head. It will regain its round shape in a few weeks. The bones of the skull are not yet knitted. They are attached by a diamond-shaped membrane, the anterior fontanel.

Baby The newborn

Located on top of the head, the anterior fontanel is supple to the touch and forms a small depression when your child is sitting. You can sometimes see it beating with the heart. A smaller triangular fontanel is located on the back of the head. Fontanels are the most fragile areas of the head, but you can safely wash them and touch them gently. The bones of the skull will knit between 9 and 18 months, and the fontanels disappear.

A bump or swelling containing blood and/or other liquid may be visible beneath the scalp. It will cause the brain no harm and disappear without a trace, usually in a few days.



#### Swollen breasts

Both boy and girl babies may have swollen breasts, which may even produce a little milk. Do not try to release any milk. Everything will take care of itself in a few days.

### Genitals

In **girls** the labia minora are swollen for 2 or 3 days after birth. There may be a whitish deposit between the lips of the vulva. Don't clean it off – it is excellent protection against bacteria.

During the first week, a few drops of blood may drip from the vagina. Don't worry; this mini-menstruation is caused by extra hormones coming from the mother before birth. In full-term **boys**, the testicles have usually descended into the scrotum, which is purplish red. If they haven't, tell the doctor.

The foreskin is the skin covering the head of the penis. Don't try to force this skin to move. It would be painful and might injure your child. Leave it to nature – in 90% of boys it will dilate and descend naturally at about 3 years old. In only a few cases, this won't happen until adolescence.

Circumcision is an operation in which all or part of the foreskin is removed. It is not recommended because it serves no purpose. Some parents call for circumcision for religious or cultural reasons.

#### **Spots**

The newborn may have small red spots between the eyes, on the eyelids or along the back edge of the scalp. They turn white when touched under slight pressure, and become more visible when your baby cries. They will disappear during the first year. Babies sometimes have bluish spots on the buttocks or back, which should be gone by the age of 3. Other marks are permanent.

## Sneezing

It's normal for your baby to sneeze often. Because the hair inside his nose hasn't grown enough, he may sneeze up to 12 times a day to eliminate secretions that interfere with his breathing. It's not because he has a cold.

#### **Hiccups**

Your baby may also get the hiccups, especially after feeding. This isn't serious. It won't hurt him and the hiccups stop by themselves in a few minutes. Putting him back on the breast may also end his hiccups.

#### The need for warmth

Newborns need warmth but not too much. They shouldn't perspire. If the room temperature is comfortable for you, it is for him too. A temperature between  $20^{\circ}C$  ( $68^{\circ}F$ ) and  $22^{\circ}C$  ( $72^{\circ}F$ ) is appropriate. Use light blankets; add and remove them according to the temperature. Don't wrap him up too much.

#### Urine

A baby who is drinking enough will urinate regularly (see Is your baby drinking enough milk?, page 370). His urine is pale yellow and has no detectable smell. During the first week of life, he will urinate more and more often. By day 5, he will be wetting at least 6 diapers a day.

During the first couple of days, you may notice orange spots (urate crystals) in your baby's diaper. These crystals are normal and not dangerous. But if they are still present two days after birth, it may be a sign that your baby is not drinking enough. If you are still seeing orange spots in your baby's diaper after a week, consult a doctor.

Is your baby urinating less often than usual? Does his urine look darker and have a distinct smell? It may be because he's very hot or overdressed and is a little dehydrated.



- Remove a layer or two of clothing.
- If he is breastfeeding, increase the number of feedings.
- If you're using a commercial baby formula, make sure it is prepared correctly, because a mistake during mixing (dilution error) can result in dehydration (see Handling commercial infant formula, page 402). Make sure he is drinking enough milk. You can then give him a little water in between feedings.

If the situation persists, call Info-Santé (8-1-1) or consult a health professional.

A baby with a fever may also have darker urine that has a smell. You may need to check his temperature (see Fever, page 643).

#### **Stools**

During the first 2 or 3 days, your baby will eliminate the residue remaining in his intestines from before he was born. The stools will be very dark and sticky: this is meconium.

Afterwards, the stools will be yellowish, greenish or brownish.

If your baby is drinking enough (see Is your baby drinking enough milk?, page 370), his stools will be liquid or very soft.

During the first 4 to 6 weeks, your baby may have 3 to 10 bowel movements per day. If your baby doesn't have at least one bowel movement per day, he might not be drinking enough. After 4 to 6 weeks, some babies fed with breast milk will have fewer bowel movements even if they are drinking enough (e.g., one bowel movement every 3 to 7 days). If your baby is defecating infrequently but the stools remain soft, it is not a problem.

During the first year, the frequency, consistency, and colour of the stools will vary depending on what your baby is fed. You will gradually learn to recognize your child's normal stools.

If your baby's stools suddenly become more liquid than usual, it may be a sign of a transient trouble (see Diarrhea, page 662). If your baby is healthy, continue to feed him normally. If you think he is sick, call Info-Santé (8-1-1) or consult a health professional.

See your doctor if your baby's stools are red or black because this may indicate blood. If the baby's stool is discoloured (white, grey, or beige), consult a physician promptly because it could be a sign of a serious liver problem.

## Talking with your baby



She cries, moans, babbles, wriggles and sometimes sucks intensely. By paying attention to all this, you are communicating with your baby. You can also talk to her with loving words; tell her what you are doing as you take care of her. She will feel safe and secure just at the sound of your calming words.

Your baby starts "talking" to you from birth onward.

Your baby will listen more than talk during her first two years of life. This is normal because her brain is still developing. She is absorbing what she hears. She will learn to talk by repeating the sounds and words that she hears.



## Crying

Babies can't communicate with words, so they use crying as one way of expressing themselves.

All babies cry and it's normal. Some cry more than others.

Crying tends to increase starting in the second week of life. It reaches a peak around the sixth week and usually decreases by the third or fourth month.

It can be hard to understand why a newborn is crying. By spending time with her, you will learn to recognize what her different cries mean. For example, you'll know if she is hungry or tired, needs to burp, needs affection, wants your attention, or has a dirty diaper. You will also learn how to soothe your baby's crying. Her reactions will help you understand what makes her feel better and what she doesn't like.

Sometimes, despite your efforts, you won't understand why your baby is crying. When that happens, stay with her and try to remain calm. This will teach her that she can trust you.

During her first nine months, your baby doesn't have any sense of time. She needs you to respond quickly when she cries. Comforting a baby when she cries will not spoil her. It teaches her that you are attentive to her needs. She will feel loved.

That said, even if your baby cries, she can be put down in a safe place if you need a bit of time to yourself.

#### **Excessive crying (colic)**

All babies can cry heavily at times, whether they are full-term or premature, breastfed or bottle-fed, or boy or girl.

Some babies cry for more than three hours a day, especially at the end of the day, and seem inconsolable. During a crying spell, your baby may appear to be in pain: her face is red, her fists are clenched, and her legs are curled up on her tight belly. She may have gas because when babies cry, they swallow air.

These episodes of excessive crying, often called colic, are completely normal. They are rarely associated with a health problem and have no long-term consequences for the baby.



Make sure your baby's needs are being met and that she isn't exhibiting any other concerning signs (see the red box, page 285).

You can try different techniques to help soothe your baby:

- Find a calm area and turn down the lights.
- Put on soft music, some background noise, or speak softly to her.
- Massage, caress, or touch her, for example by placing her on your stomach with her skin against yours, in a warm place.
- Offer your breast. Many babies calm down while sucking at the breast: it can satisfy their hunger and be a source of comfort.
- Move her around, rock her, take her for a walk in a stroller or baby carrier, or take her for a car ride.
- Give her a bath. Some babies find water soothing.
- Place your baby face down on your forearm with her back against your belly, her head in the crook of your elbow, and your hand between her legs. Often babies find this position soothing.



This is a soothing position for your baby.

Keep in mind that if the method you use to soothe your baby works once, it may not work the next time.

If you've tried these various techniques for several days and nothing is working, or if you have any concerns, do not hesitate to consult a health professional. He or she can reassure you about your baby's health and suggest other options if necessary.

Medication and natural health products for "colic" are usually not recommended.

In general, excessive crying is only something to be concerned about if it is accompanied by other signs. For example, you should see a health care professional if, in addition to being inconsolable, your baby

- Behaves differently
- Won't eat or sleep
- Has a fever (see Fever, page 643)
- Is vomiting or has abnormal stools (see Stools, page 279)
- May have been injured
- Is showing other signs that worry you

#### If your baby is inconsolable

Bouts of excessive crying is hard on the whole family. It's normal to feel perplexed, helpless, irritated, or even frustrated.

When you are feeling tired or impatient, it's good to have someone you can trust who can give you a hand. You can ask someone to look after the baby for you so you can rest. When you come back, you will be able to pass along your sense of calm. Are you feeling overwhelmed and have no one to replace you? Put your baby in a safe place, like her crib, close the door and leave the room for a few minutes. It's normal to need a break. Check on your baby every ten minutes to make sure she is still safe, but don't pick her up again until you have calmed down.

Don't be afraid to seek help from a babysitter, relative, doctor, CLSC, or volunteer centre.

Never shake an infant or young child: shaking can cause permanent brain damage or even death. Put her down and get help.

#### **Breath-holding spells**

Starting at 6 months of age, some babies may cry until they stop breathing for several seconds and briefly lose consciousness. They may turn blue or pale. An episode like this is called a breath-holding spell. Babies do this unintentionally when they are experiencing something unpleasant.

It's normal to be worried if this happens, but don't worry: your child's health is not in danger. Remain calm, stay with your baby, and reassure her. She will quickly start breathing again on her own. However, if a breath-holding spell occurs before the age of 6 months or lasts for more than one minute, it's a good idea to talk to her doctor.



#### The need to suck

All newborns have the reflex to suck. Sucking the breast is natural and ideal for your baby. It is more satisfying than any replacement.

Not all newborns need a pacifier (soother). Many are content with the breast.

If your baby sucks her thumb or fingers, encourage her to change this habit as soon as possible: try a pacifier because it's easier to control. Your baby may occasionally need her pacifier for comfort but she should not have it in her mouth all the time. Gently remove the pacifier when it's no longer needed, to avoid creating a habit.

A pacifier can act as a gag. Don't be too quick to use it to calm your baby. She is trying to tell you something through her cries. Be attentive to find out what she really needs. Sucking her thumb, fingers or pacifier can sometimes change the position of her teeth. Around the age of 2 or 3, help her gradually give up this habit. It's important she stop before her first adult teeth come in. The dentist or dental hygienist can give you advice. Sucking a pacifier can sometimes affect your child's pronunciation. A child who talks with a pacifier in her mouth is hard to understand and she will not learn to express herself properly.

To attach a pacifier to clothing, use the clips designed for this purpose.

Never use a string to attach the pacifier to the crib or around your baby's neck or wrist. The string could strangle your baby. Don't use a safety pin to attach the pacifier to your baby's clothing as she could injure herself.

#### **Choosing a pacifier**

If your baby needs a pacifier, choose one for her age. There are several silicone and latex models.

If your baby uses her pacifier for chewing, give her a teething ring instead. The pacifier disk must remain outside her mouth. If the baby chews it, it could break and she could swallow the pieces and choke.

#### **Cleaning the pacifier**

Before using a new pacifier, disinfect it according to the manufacturer's recommendations. Each time your baby asks for it, wash it in hot, soapy water and rinse it. Do not put it in your mouth; you may give her cavity causing bacteria. Pull on the disk to make sure it is properly attached to the nipple. This safety precaution is important, especially when your baby has teeth. Check the condition of the nipple regularly. It must be very flexible. If it has changed colour or shape, is sticky or cracked, throw it out immediately.



Health Canada suggests you replace pacifiers after two months of use, no matter their condition.

## Touch

Touch is the first sense a baby develops while in the uterus, from rubbing against the walls of the uterus or from feeling you stroke your belly to make contact. For newborns, feeding time is a comforting, reassuring, and special time you spend together.

Touch fulfills a need that is as important as drinking and eating.



Massaging an infant is easy and relaxes her. It helps her body work properly and promotes her growth.

Touch is a form of communication newborns seek. Holding her against your chest or your shoulder, and the way you rock her is comforting. Your caresses help her feel well, and calm her fears. Your kisses encourage her awareness of life. Through touch, you are showing your love.

Your baby will be thrilled if you like giving her massages! And it's not hard to do.

You can begin the massage on your baby's temples or the soles of her feet. Repeat the movements that she seems to like and follow your intuition. There are good books available about baby massage, or you can contact your CLSC. Baby massage workshops are also available.

Use bath time if there isn't a better routine time for the massage. Wash your baby with your hands rather than a cloth. Take the time to rub her body with cream. She'll appreciate this contact and the time you spend with her.

#### How to give a baby massage

- Choose a time when your baby is awake and receptive, preferably not too close to a feeding.
- Make sure the room is warm, comfortable and cozy.
- It's best to sit on the floor.
- Use a firm but gentle touch with your entire hand to avoid tickling her.
- Use a small quantity of vegetable oil (such as sunflower) warmed in your hands for pleasant contact. Try the oil on a small part of the body first to make sure there's no allergic reaction.
- Stay relaxed and be attentive to your baby's preferences.

#### Taste and smell

Newborns already have a sense of taste and smell. Very early on, they are able to recognize their mother by her smell.

The scent of milk draws your baby to the nipple to satisfy her hunger. Sucking gives her an intense feeling of well-being. The taste of breast milk can vary depending on the mother's diet.

When the father takes her in his arms for the first time, the newborn will also recognize her father's scent. It is good for father and child to share skin contact in the first few hours after birth.

## Hearing

Your baby can hear at birth, and even before she is born. She is especially sensitive to the voices of her mother and father, possibly because she has often heard them while she was in the womb. She may turn her head toward your voices. Familiar sounds reassure your baby. Calling her in a soft voice can often calm her. Loud or sudden noises, however, will make her jump and may upset her.

Most babies born in Québec have normal hearing. At birth, about six babies in 1,000 may have hearing problems. However, it's difficult for even the most attentive parents to evaluate a baby's hearing during the first few months of life. Your child should react to the sound of voices and noises without seeing what is making the noise; for example, the sound of a dog barking behind her head or the doorbell ringing. Normally around the age of 6 to 9 months, she will turn towards the sound of the noise. If this doesn't happen, it's a good idea to talk to your doctor who can direct you to resource people that can help (audiologist, ORL or ear, nose and throat doctor).

The ears of newborns can stick out somewhat. Nothing can be done to correct it at this age. You can talk to your doctor about it before your child starts school.

After your baby is born, you will be offered a hearing screening (see Neonatal screening, page 244).

## Eyesight

From birth onward, an infant can see faces, shapes and colours, and prefers faces and geometric shapes. Sight is an important way for your baby to communicate.

At the age of 1 month, she will look for and at light that is not too bright. At 2 months, she can start seeing the difference between colours and can use her eyes to follow a person or object that moves slowly. Her field of vision increases to that of an adult's at about 1 year. For more information, Eye problems, page 632.



Sight is an important way for your baby to communicate.

## Sleep

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# Baby Sleep

## **Sleeping safely**

Starting from birth, your baby should sleep on her back. Once she begins turning over on her own, you can let her sleep in the position she prefers without any danger.

Your baby should always sleep on a firm mattress and in a crib, cradle, or bassinet that meets Canadian government safety standards (see Crib, cradle, and bassinet, page 684). Aside from a tight fitted sheet, there should be nothing on the bed (e.g., comforters, pillows, bumper pads). If you think your child needs to be covered, use a light blanket or a sleep sack suitable for the child's height. Make sure your baby isn't too hot.

#### Sharing your room



The Canadian Paediatric Society and Health Canada recommend that babies sleep in their own beds in their parents'

bedrooms for the first six months of their lives. It is the safest place for a baby to sleep.



If you are unable to sleep well when you're in the same room as your baby, you could have her sleep in a secure crib in another room (see Crib, cradle, and bassinet, page 684). The quality of your sleep is very important.

#### Do you sleep with your baby?

Every year there are reports of deaths of babies who were sharing a sleep surface with their parents.

To avoid an accident, never sleep with your baby

- on a couch or similar furniture (eg., upholstered chair)
- if you have been drinking, taking medication that makes you drowsy or using drugs
- if you are extremely tired (more than usual)

In these cases, it is much safer for your baby to be in your room, but in her crib.

To safely share your bed, make sure that you

- Always lay your baby on her back
- Use a firm mattress (no soft surfaces or water beds)
- Remove soft bedding and other items (e.g., pillows, comforters, stuffed toys)
- Leave enough distance between the mattress and wall that your baby can't get stuck
- Never let your baby sleep alone in an adult bed

#### **Sleeping away from home**

Your baby must sleep in a safe place, even when you are away from home. Never, under any circumstances, put your baby to bed alone in an adult bed and don't use pillows. If you don't have a crib, a blanket placed directly on the floor can act as a temporary safe bed for a baby who is less than 6 months old. Using a mattress placed on the ground or a playpen are two other potential solutions for putting your baby to bed when you are travelling. If using a playpen, do not add mattresses or padding. A car seat should be used only for transporting your baby in the car. Car seats and baby seats should not be used in place of a crib as they are not a safe place for sleeping.

If you use a stroller when you go for walks, your baby will be safest and most comfortable sleeping on her back. The back of the stroller should fold down flat or almost flat, and your baby should be properly strapped in. Some parents prefer using a secure baby carrier for walks (see Baby carriers, page 763).

Be careful; your infant is not safe in her baby carrier if you are sleeping or lying down while wearing the carrier.



When you go for walks, your baby will be safest and most comfortable sleeping on her back in a stroller.

## Sudden infant death syndrome (SIDS)

The sudden death of an infant under the age of one occurs while the baby is sleeping. We still do not know the cause of sudden infant death syndrome (crib death).

The main risk factors for sudden infant death syndrome (SIDS) are:

- Exposure to maternal tobacco use or other sources of tobacco smoke during pregnancy and after birth (see Tobacco and electronic cigarette, page 64).
- Sleeping on the stomach
- Blankets or bedding that can end up completely covering a child's face

Babies who are breastfed and properly vaccinated have a lower risk of SIDS.

Here are the recommendations to reduce the risk of sudden infant death syndrome:

- Make sure your baby sleeps safely (see Sleeping safely, page 295 and The nursery, page 683).
- Eliminate smoking as much as possible during pregnancy and make sure no one smokes near your baby.
- Put your baby to sleep on her back. Tell anyone who looks after your baby to do the same. Babies who usually sleep on their backs and are then put to sleep on their stomachs are at greater risk for SIDS.
- Make sure your baby is neither too warm nor too cold when sleeping (e.g., light clothing, room at a comfortable temperature).

Using a baby monitor does not mean you can disregard these safety precautions. They must be followed even when using a monitor.

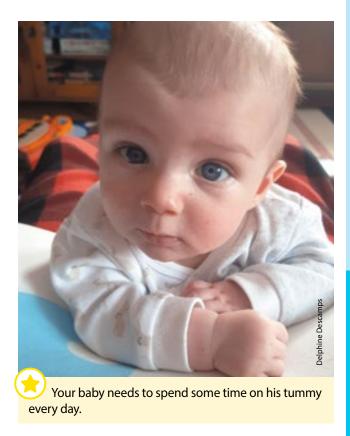
#### Preventing a flat head

When babies sleep, they should be on their back (see Sleeping safely, page 295). But if your baby always lies on the same spot on her head, she may end up having a "flat head." It's because the bones of her skull are still soft. The medical term for this phenomenon is "positional plagiocephaly."

Therefore, it's important that your baby not always lie on the same spot on her head to avoid creating a flat area.

A slight flattening of the head may improve on its own. A more pronounced flatness may be permanent, but it will not harm your baby's brain development.

By varying your baby's position throughout the day (e.g., sitting in her little chair, in your arms, on the floor on her stomach and back, in the baby carrier [see Taking baby for a walk, page 762]), you avoid having her head always resting on the same spot.





Many babies love this position. It's soothing and counts as tummy time.

Babies focus their gaze on what interests them (e.g., your face, the window). When you change your baby's position, she may turn her head to continue watching you or the object she's interested in. That way, her head won't stay resting on the same spot.

When they're awake and under supervision, it's important for babies to spend time on their stomach. From her very first days of life, lay your baby on her tummy. You can lay her on a flat surface, on your stomach, or on your arm. Start with a few minutes, several times a day, for as long as she feels comfortable. Do this until she's spending at least 60 minutes total per day on her tummy.

Some tips to help prevent or reduce a flat head are shown in the box next page.

If you notice that your child has a flat head, turns her head to one side more than the other, or you have questions, talk to your healthcare provider.

#### Some tips to help prevent or reduce a flat head

- Make sure your baby can turn her head equally in both directions.
- Change your baby's position in her crib every day (e.g., one day, place your baby's head at the foot of her crib, then at the head of her crib the next day).
- Regularly move your baby's rocker, bouncer, or other chair to vary the directions she looks towards.
- Switch sides each time you give her a bottle.
- Regularly place your baby on her tummy.
- Limit the amount of time she spends with her head resting on a hard surface (e.g., on a play mat or in her car seat).

#### Sleep in the first weeks

Your baby will sleep and wake according to her needs and feelings. Some babies wake almost only to nurse. Others are awake longer from their first days out of the womb. The amount of time they stay awake will be longer as the weeks pass.

As with adults, newborn babies go through different sleep cycles: drowsiness (light wakefulness), calm sleep and agitated sleep. When your baby is in her agitated sleep cycle, she may make sucking movements, frown, cry, smile, jump, tremble, groan, breathe hard or move. This is normal. No need to wake and comfort her. However, you may want to wake her if she needs to be encouraged to feed.

#### Sleep at around 4 months

At 4 months, the average amount of time a baby sleeps is 14 to 15 hours per day. Babies will start to sleep longer through the night.

At about 4 months, babies usually have a more regular and predictable daily routine. Because you've paid close attention to your baby from the time of birth, she will feel safer and more secure. She will be able to wait a bit longer for things. She learns to comfort herself by putting her hand in her mouth. Little by little she learns to fall asleep on her own. Beginning at between 4 and 6 months, some babies won't need to feed during the night anymore. Others will still need to – possibly even more so than during the weeks before. Gradually you will recognize more and more of your baby's signs of fatigue.

#### **Bedtime routine**

It's a good idea to make bedtime a relaxed, happy time. Repeating the same actions every night will create a bedtime routine that makes going to sleep easier. Turn on a night light in the hall and leave the bedroom door partly open.

If you stick fairly close to your routine each day, your baby will start to understand when it's bedtime. For example, develop a routine of a warm bath, quiet game, a story, soft music or a song.

Sleep

A lot of parents enjoy this time of the day with their baby, and take the time to rock her to sleep. Others prefer that the baby learns to fall asleep on her own.

If you want, once the routine and quiet time are finished, put your baby in her crib even if she isn't fully asleep. When your baby learns to go to sleep on her own it means she can go back to sleep on her own in the middle of the night if she wakes up during a period of light sleep.

There's no right or wrong way in your bedtime routine. The important thing is for you to feel comfortable with the routine you choose.



Baby

#### Sleeping through the night

Sleeping through the night is what adults do; babies have different sleep patterns. A baby's sleep schedule can in fact vary quite a bit from one baby to the next. "Sleeping through the night" generally means five or six hours of sleep between 11 p.m. and 8 a.m. About 70% of 3-month-old babies sleep five hours at night; 85% do at 6 months, and 90% at 10 months.

Follow your baby's rhythm and needs. When feeding at night, you can keep things calm and quiet so she learns the difference between night and day. For example, keep the lights very dim and resist the very natural urge to speak to her.

#### Sleep after 6 months

Most babies between the ages of 6 and 12 months sleep 8 to 10 hours a night for a total of about 15 hours a day.

Sometimes, 6- to 12-month-old babies start waking up again in the night. This is the normal period for separation anxiety. You might also notice during the day that your baby reacts more strongly when you leave her, when you go to another room or when you put her to bed. When she wakes up crying at night, you can reassure her simply by being there and talking softly to her. Often, just your voice and touch will make her feel better. Remember that it's normal for babies to have wakeful periods. Your baby can learn gradually to go to sleep by herself.



Remember that whatever your baby needs to go to sleep is the same as what she will need to go back to sleep when she wakes in the middle of the night. If she needs to be breast- or bottle-fed or to be rocked to go to sleep, she will probably need you to help her go back to sleep when she wakes in the middle of the night.

If you want her to learn to go back to sleep on her own, you need to teach her first to go to sleep on her own in the evening. If she does need you there, you can try teaching her to go to sleep on her own by gradually decreasing the amount of time you stay with her each evening.

If your baby cries a lot at night, you should check to make sure she's not sick. Take her temperature. If it happens often, talk to your doctor. He or she can reassure you about your baby's physical well-being and support you during the difficult period.

If your baby doesn't have any health problems, think about your bedtime routine and see if it can be improved to encourage sleep.

# Sleep between 1 and 2 years old

A 1- or 2-year-old child sleeps 8 to 12 hours per night. Generally, up to 18 months, your child needs two naps per day, one in the morning and the other in the afternoon. Beginning at about 18 months to 2 years, she may need only one nap. Sometimes she will be in a bad mood when she wakes up. Be patient and wait a bit before getting back to regular activities. Remember that each baby's sleep needs are different, and they decrease as she grows.

#### **Sleep problems**

A lot of children aged 1 or 2 cry at bedtime. They are going through a normal period of separation anxiety, which can last to 18 months or more. Their fears make it harder for them to be without you at bedtime. Keep your bedtime routine with a gentle firmness. This will help reassure your child.

#### Nightmares and night terrors

Beginning at age 1, many children have night terrors. The child may scream and cry, yet seems to be sleeping deeply. You don't need to wake her or do anything in particular, unless you think she might hurt herself. If you can't console her, don't worry, she will calm down soon.

If she wakes up in a panic and seems very awake, she probably had a nightmare. Being there to reassure her will help her fall back to sleep calmly.

And don't worry, night terrors and nightmare problems generally go away as your child grows. Several books offer tips on how to teach older children to deal with the problem.

#### **Disturbed sleep**

If your child wakes up at night, try the bedtime routine we suggested previously for children over the age of 6 months. If you have trouble creating a bedtime routine, or if your child keeps waking up at night despite your routine and you're concerned, talk to a health professional.

Your child's sleep is disturbed if

- She wakes often during the night (more than two times)
- She wakes for a long period during the night (more than 20 minutes)
- She needs you when she wakes at night
- She wakes more then four or five nights out of seven
- She's woken up during the night for at least three months

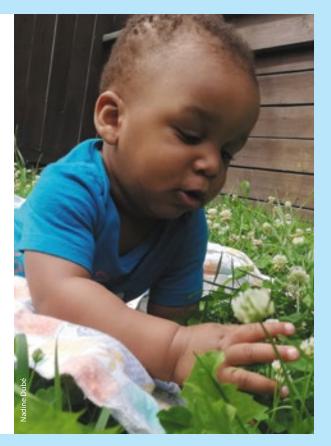
In these cases, getting help is a good idea. Reading about the problem or talking to a professional can be useful.



Geneviève Trude

# Your child's development

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Your child's development Baby

Children grow and develop step by step. All children go through the same stages, but each at her own pace.

As your child develops, so do her abilities. For the first two years of her life, she'll learn to better understand the world around her with your help. She will also start communicating and regulating her emotions. She will learn to get around, first by crawling, then on all fours and, eventually, by walking. There will be a lot of change in just two years!

To grow and develop, your child needs simple but essential elements. She needs to eat, sleep, be kept clean and dry, and feel safe. She also needs nurturing care from her parents and others around her.

The relationship you have with your child is very important to her development. Each person who spends time with her also contributes to her growth and development.



Your child needs you in order to grow and develop. Your caring words and actions are essential.

# Temperament

Your child's development Baby A newborn baby already has a way of being and reacting. That's his temperament. It's what makes him unique.

For example, babies can have differences regarding:

- How long they cry
- How active they are
- How readily they embrace new things
- How sensitive they are to noise, light, and movement

There is no good or bad temperament. However, depending on his temperament, you might find your baby more demanding than other children around you. It's still important to be warm and loving towards him and attentive to his needs. He'll learn to self-soothe and feel safe and confident with you.

Every baby is unique. By getting to know your baby, you can adjust to his temperament.

# The parent-child relationship

From birth, your baby is trying to connect with you. Her five senses (hearing, eyesight, touch, taste, and smell) enable her to perceive the world around her. For example, she likes to hear your voice and look at your face (see Talking with your baby, page 280).

Your baby expresses her needs with signals like crying and moving her arms or legs. For example, her crying may mean she's hungry or uncomfortable (see Crying, page 282). She calms down when you hold her and attend to her needs. When you feed, bathe, or talk to your child gently while looking at her, you're building your relationship with her. Little by little, you're discovering the enjoyment of being together.

Your baby develops through her relationship with you and the others who care for her. For example, she learns to self-soothe and communicate.

#### Attachment

When you respond to your child's needs consistently and with nurturing care, a trusting relationship develops between you. This bond is also known as attachment.

Take the time to observe your baby and get to know her. For example, try to tell the difference between when she is hungry or tired. You will learn to understand her better through trial and error. When you try to meet her needs, she'll see that you're there for her and that she can count on you. She'll develop a feeling of trust and safety with you.

A newborn mostly expresses her needs by crying (see Crying, page 282). You won't risk spoiling her by comforting her promptly. That helps her feel confident and secure.

Newborns do not have the ability to wait for their needs to be met. Starting at 4 months, she gradually becomes able to wait a few seconds, then a few minute. If you're unable to respond to your baby's need promptly, you can try to distract her. Continue talking to her or offer her a toy: "Mommy's on the toilet right now. I'll look after you soon." When she's older, she will understand better what you are saying to her.

If your child feels confident and safe with you, she will also feel more confident exploring the world around her. She will know he can go back to you when she needs to. Encourage her to explore at her own pace, in line with her abilities. She needs to explore her environment to develop.

#### **Separation anxiety**

From 8 or 9 months onwards, your child may have difficulty being separated from you. This is called separation anxiety. This anxiety is normal: your baby feels safe when you're there and she wants to stay with you. This reaction will gradually fade until around 18 months, when she will have experienced a number of positive reunions with you.

When you leave, reassure your baby and say you'll be coming back, even if she doesn't understand well yet. It is best to leave without drawing out your goodbye. Your child may react when you leave. That doesn't mean you should go back to her. The important thing is that she feels that you are confident and that you're not worried about leaving her with someone else. While you're away, you can leave your child with a piece of clothing or blanket with your scent.

When you arrange for a babysitter, you can spend some time with your child and the babysitter. This gives your child time to get used to the babysitter and see that you trust that person.



From 8 or 9 months onwards, your child may have difficulty being separated from you.



#### Communication

Your baby started hearing you talk before she was even born. From her earliest days, she's interested in your voice and loves the varied and playful changes it makes when you talk to her. She also observes your face and guesses your emotions. She understands words months before she's able to say them.

At first, your baby expresses herself through crying, mimicking, gesturing, moving her arms and legs, grimacing, and making sounds. Start by observing her to try to understand her. To respond, talk to her. Give her time to react to your words, then speak to her again. Communication is like a tennis game where each person takes turns hitting the ball back and forth. It's important that your child has a place in the exchange, whether she expresses herself by crying, or with sounds or words.

#### Making communication easier

To help your child communicate with you, you can:

- Position yourself at her height, facing her, so she can look at and listen to you.
- Get her attention and avoid getting distracted yourself, whenever possible.
- Encourage her often with a gentle word, a smile, etc.

When talking to your child, you can:

- Name the things that attract her attention (e.g., "Ah! That's the light," "Oh! That's a dog").
- Describe what you're doing and what she's doing (e.g., "I'm going to give you some milk," "You're taking your bath").
- Name how she's feeling, even if she doesn't understand yet (e.g., "You're angry about waiting. You're hungry").
- Repeat often to help her learn.

It's recommended that you use the correct words (e.g., "cow" instead of "moo-moo"), because those are the words she will use later on.



It's best to be at the same height as your baby when you talk to her. It's easier for her to look at you when you're face to face.

#### **First words**

Your child will gradually transition from making sounds to using words. Each child progresses at her own pace. It's important not to put pressure on her, for example by asking her to say a word. Rather, celebrate her effort and be interested in what she is communicating, no matter how she's doing it. Encourage her attempts to communicate, whether it's by pointing, making sounds, or saying words.

It's normal that you and those around you don't always understand what your child says. She's not yet able to pronounce words like an adult. You can try to guess what she means and name it. Say the word again correctly, but don't ask her to repeat it. Your child will improve over time.

If you have any questions or concerns about your child's language development, don't hesitate to see a healthcare professional.

# Structure

The structure you provide for your child includes creating a routine and setting limits. Every child needs structure. Create a routine and set limits that you feel are appropriate for his age and needs.

Your daily efforts to provide consistent structure will help your child in the years to come.

It's best if different family members provide structure in a similar way.



#### Setting up a routine

A routine is a set of habits or actions that are regularly repeated in a child's daily life. It's established gradually. It's different for each family.

Your child likes it when things are repeated in more or less the same order (e.g., snack time, bath time, story time, bedtime). You can also follow a morning routine (e.g., opening the blinds, hugging your child, then feeding him). He also likes actions or activities to be similar from one day to the next. You can sing the same song or tell the same story before bedtime.

A routine is calming and reassuring for your child.

Children need a stable routine to help them understand what's happening and what's going to happen. A routine reassures and calms your child. Then he's more open to connecting with you and developing himself.

It's normal for the steps of your routine not to happen at exactly the same time each day. It's also normal not to follow your routine when there are special occasions or unexpected events.

#### **Setting limits**

Although it can be difficult to set limits, your child needs them. As a parent, you're preparing your child for life outside the home (e.g., daycare, extended family), where there are other limits and rules.

#### The purpose of limits

Your child needs limits to feel secure and confident, even if they make him angry.

The limits you set are necessary to prevent him from hurting herself. For example, when your child first starts walking and gets close to a staircase, he has to hold your hand. Limits also help your child gradually learn to respect other people and his environment. For example, once your child is able to use crayons, he is not allowed to draw on everything in the house.

Uimits help children feel secure and confident. They also help children understand what's expected of them.

#### How should I set limits?

At first, you set limits by making the environment safe (e.g., you set up a barrier at the top of the stairs; see Babyproofing, page 683). Gradually, your child will also understand your instructions. At about age 1, he begins understanding very simple rules (e.g., "Stay here").

The sentences you say to your child should be short and concrete (e.g., "Give me your hand"). Your instructions and expectations will change as your child gets older and more independent.

If your child doesn't seem to understand, you can use gestures (e.g., motioning with your hand to say "come on") or show him the behaviour you want (e.g., petting a cat without hitting it). Sometimes, even if your child understands your instructions, he won't follow them. He can't control his impulses yet. He also needs to test the limits he's in the process of learning. To help him, repeat the same instruction often in different contexts (e.g., he shouldn't hit his parents or other people). Also, try to respond the same way to the same behaviours (e.g., tell him to speak quietly every time he yells).

When you set limits consistently, it makes it easier for your child to respect them. He will gradually learn to follow the rules with your help and by observing how others behave around him.

Parents don't set all limits in the same way. The most important thing is to respect your child.

#### What should I do when my child doesn't respect limits?

A good way to help your child when he doesn't follow your instructions is to direct him to another action or activity. For example, if he's trying to rip off a plant's leaves, you can calmly say "no" and direct him to a game he likes.

When your child reacts strongly to a limit, you can name his emotions, showing him that you understand how he feels. Tell him that what he wants is not possible right now. You help your child by demonstrating and encouraging the expected behaviours, rather than punishing her. If your child throws his spoon while eating, he will learn better if you tell him to "keep your spoon" than if you punish him by taking his snack away. Punishment doesn't show your child what you expect of him.

If you have any questions or concerns about providing structure or about the intensity of your child's reactions, don't hesitate to contact a healthcare professional.

Physical punishment (e.g., spanking, slapping, hitting) and behaviours that humiliate a child (e.g., insults, putdowns) are detrimental to the child's health, safety, and well-being. These practices must not be used and are governed by Québec law. For help, please see the Resources for parents section.

#### What should I do when I'm angry?

Most parents find it challenging to set and maintain limits when their child isn't respecting them. If you feel your anger building up, you can calmly let your child know (e.g., "I'm starting to lose my patience" or "I need to calm down"), even if he doesn't understand yet.

You can ask someone else to look after him or make sure he's safe (e.g., in bed) and leave the room for a few minutes. By doing so, you prevent impulsive, hurtful, or violent behaviour. A parent's yelling and angry gestures are stressful for a child. He won't learn as well what you expect of him if he's stressed. By staying calm, you'll manage the situation better, and your child will maintain his confidence in you and himself. He'll see that he's still loved, even if you don't agree with what he's done.

If you lose your temper, you can apologize to your child, even if he doesn't understand yet. That way, you're setting a good example for him.

#### **Encouraging your child**

Your child is learning. He needs you to be supportive and patient. Give your child more positive attention than negative, with lots of praise and encouragement. It's better to highlight his efforts and celebrate his progress, rather than focusing on his struggles and undesirable behaviours.

Your encouragement lets him know what your expectations are and reassures him about his abilities and skills. Through his day-to-day experiences, your child will build his self-esteem and a positive sense of self-worth. Encouraging your child with a smile or a kind word is beneficial from his very first months.

It's normal for you to be more encouraging and patient on some days and less so on others. Being a parent is challenging. You're learning, too.



Encouraging your child with a smile or a kind word is beneficial from the very first months.



Your child needs to explore through play.

## Play

Play is crucial to your child's development. By playing, she discovers her abilities and the world around her. Playing also allows her to take initiative and become more independent. You can integrate play into your daily routine. For example, when you make peekaboo sounds while changing your baby's diaper, you're playing with her.

As a parent, make sure your child's play environment doesn't have anything in it that could cause serious injury (see Babyproofing, page 683). When your baby is in a safe environment, let her explore it and test her abilities. Your child needs to explore in order to develop. That's how she learns to overcome challenges on her own.

Playing allows your child to take initiative and become more independent.

Your child's development Baby

Toys are not always necessary for play. Sharing experiences with you will always be worth more than any toy. Tickling, dancing to music and splashing in the bathtub are examples of games to play together. Going on outings also creates opportunities for play (e.g., going to the library, park, or pool).

When your child does play with toys, they should be age appropriate. They must also be safe for her (see Choosing toys, page 691). Toys can have different functions depending on a child's age. At first, your child explores them by putting them in her mouth or handling them. Then she discovers what can be done with them (e.g., stacking, interlocking).

The best toys are not the most expensive ones. Toddlers can play with a variety of household items, including pots, spoons, bowls, and cardboard boxes that can become a house, tunnel, car, hat, etc.





You can introduce books to your baby within his very first months and leave some within his reach.

# Books

You can introduce books to your baby within his very first months. Looking at a book together is a great way to connect and spend time with him. Your child will enjoy being near you and listening to you speak.

At first, a book is a toy for him, and he'll put it in his mouth, throw it, and hit it. Let him explore. You can turn the pages, point, and name what you see. You can also change your voice and make noises like different animals and vehicles.

Gradually, your child will better understand what you're saying as you turn the pages. He'll also be able to pay attention for longer. Looking at a book with you helps your child develop his language skills and interest in reading. Reading will be an important part of his life when he goes to school. Some children develop an interest in reading less easily or more slowly. You can continue to leave books within your child's reach, even if he doesn't seem interested. He may become curious later. You can also go to the library to encourage his interest.

When looking at a book with your child, the most important thing is to have fun and enjoy the time spent together.

Many libraries offer the free welcome kit *Books for Baby*. For more information, visit the website: unenaissanceunlivre. ca/en/.



Little by little, your child will better understand what you're saying to her and will be able to pay attention for longer.



It is recommended that screens be turned off during playtime.

### **Screens**



Children younger than age 2 should not spend time in front of screens. It is also recommended to turn off all screens (TV,

phone, tablet, etc.) when spending time together as a family, even if they're simply left on nearby.

These recommendations are being made because we're increasingly discovering the negative effects of screens on children. For example, young children who are often exposed to screens have a higher risk of developing language difficulties.

Children are attracted by the light, sounds, and colours on screens. They can easily handle mobile phones and tablets. That doesn't mean it's good for them. Despite their name, so-called educational apps and videos do not help children develop either. Young children learn by interacting and developing relationships with others. Talking to your child, singing him a song, looking at a book with him, and playing with him are the best ways to help her develop. When you have things to do, instead of putting your child in front of a screen, you can leave toys and books within her reach. For some tasks, you can also keep your child in a baby carrier (see Baby carriers, page 763).

When you're away from your child for a long time, you can still use a screen to talk to him. You can also use a screen to help your child stay connected with loved ones who live far away. During the chat, an adult should help your child interact with the person on the screen by repeating and explaining what's being said. Young children learn best when you're not distracted by a screen (e.g., phone, TV). Your child needs your attention and your gaze. As much as possible, avoid using a screen when you're with him. When your child sees you looking at a screen, he may want to use it, too. Later, he may mimic your use of screens.

It's recommended that children under age 2 not be exposed to screens. There is more and more evidence about the negative effects of screens on children.

# Stages of growth

Here are a few tips to help guide you on the great adventure of being a parent. They offer guidelines on your child's growth and give you some ideas for ways to have fun with him.

Remember that the ages we use are only approximate. Children grow at their own individual pace and may learn new skills sooner or later. The following pages offer information about different levels of growth at each age:

- Motor skills
- Communication and language
- Understanding (cognitive growth)
- Relationships (socio-affective growth)

#### For premature babies (born before the 37<sup>th</sup> week of pregnancy)

Babies born early must make up the weeks they lost in their mother's womb. This doesn't happen magically when they're born but takes place slowly over the first 2 years. Use your baby's corrected age when looking at progress on growth charts and comparing with other children. If not, you may expect too much. To correct the age of a baby born before term, count from the birth date that was expected. For example, if the expected birth date was March 1<sup>st</sup> but your baby was born on January 1<sup>st</sup>, he is two months early. In this case, when you calculate your baby's corrected age, subtract the two months from his actual age. On April 1<sup>st</sup>, his real age will be 3 months, but his corrected age is 1 month.

We encourage you to consult the Association des parents d'enfants prématurés – Préma-Québec (see Associations, agencies and support groups, page 784).

#### **Birth to 2 months**

#### Fine motor skills

During his first few weeks, your baby moves but has little control over his movements. His senses are awakening. If you touch the inside of his hand, he'll try to grasp your finger. He will look at a mobile over his crib. Around 1 month of age, his eyes will follow a moving object. Shake a rattle near him and he will react to the sound.

The baby's fine **motor skills** are poorly organized and his movements are not voluntary. This is normal. This is the reflexive stage, which will disappear as the brain matures. Moro's reflex means that your baby will jump when he hears a loud noise or is moved quickly. This is not a sign that your baby is nervous.

The sucking reflex is well developed. This allows your baby to feed himself or to calm down by putting his hand in his mouth.

An offshoot of the orientation reflex will make your baby turn his head if you tickle his cheek or arm. It helps your baby look for the breast.

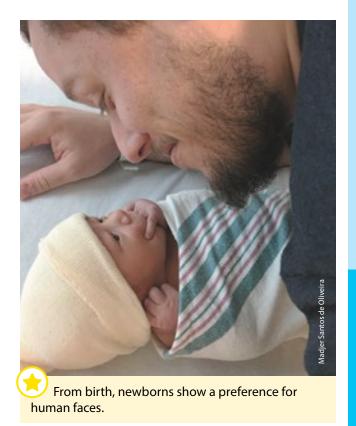
The automatic stepping reflex appears when babies are held standing. He will try to walk on the examination table (the doctor can show you this). Your baby can't support his own weight yet, nor will stimulating this reflex help him walk sooner.

#### Understanding

Watch your baby and you will see he is born with some extraordinary abilities. He does exciting new things every day. He is not too small to play, and can imitate some gestures like sticking out his tongue and opening his mouth. He can tell the difference between black and white and bright colours.

#### **Relationships**

Newborns show a preference for human faces. Their memory is growing. They look for your face, and can find it. Their emotions are intense and hard to control; they need your help in doing so. Their emotions are expressed through everything from crying to cooing and babbling.



# Your child's development Baby

#### Language

Crying is your baby's first way of communicating. At first, babies cry as a reflex, not by choice, usually when something is bothering them. They have different ways of crying to tell you about different needs, such as food or sleep.

They coo from the earliest months. They don't understand the meaning of words but can sense emotions such as joy, anger and tenderness in your tone of voice. They react to loud noises. Your baby recognizes your voice and likes to hear it. In his own way, he is already communicating!

#### **Activities**

**Talk with him** – Talk softly. Tell him a story or sing him a song. Imitate the sounds he makes and watch for his reaction. By doing this, you will be helping him to pronounce sounds and learn tones and rhythms. He will want to join in the conversation.

Say his name often; soon he will recognize it. Move around while calling him; he will move his head in the direction of your voice. Do this often. It is important for learning speech.

Baby

#### From 2 to 4 months

#### **Fine motor skills**

Your child is beginning to control his head movements and hold his head up better and better.

He is becoming more active. When lying face down, he raises his head and pushes up bit by bit using his arms. He moves his legs and explores his hands and feet. He loves to be touched and kissed and nuzzled, and for you to move his feet like pedals and to play with his hands. He will grab a rattle and try to suck on it. Don't be surprised; for quite a while he will try to put everything in his mouth. This is how he learns. You'll see him playing with his tongue and saliva and making bubbles.

#### Language

Your child will make different sounds depending on what he needs. He's moving toward babble ("dada, mama, baba"). He reacts to familiar voices and the sound of his toys. He will also smile in reaction to your stimulations.

He doesn't understand words yet, but likes it when you hum or sing to him because he recognizes your voice and feels safe. He pays attention to the tune and your gestures. If he cries, talk softly, he may calm down. He may pay attention to music.

#### Relationships

The first social smile usually appears in the second month. The human face interests the baby, who answers a smile with a smile. At 2 months, he starts becoming interested in other babies and may become excited when he sees one. At 3 months, he is becoming more and more aware of other members of the family.



#### Understanding

Your baby repeats pleasant actions he has learned by accident, such as sucking his thumb and putting toys in his mouth.

#### Activities

**Touring the home** – Give the baby a detailed tour of your home. Show him and tell him what's in it. He will try to grab things, practicing his hand-eye coordination.

**Tickling** – At bath time or while playing, help your child discover textures. Tickle him with paper tissue, teddy bear, dry washcloth, etc.

Introduce your child to new textures.

#### From 4 to 6 months

#### **Fine motor skills**

Your baby is stronger now and holds himself better. Lying on his back, he raises his head, pedals and puts his feet in his mouth. If you pull on his hands, he rises and his head follows the movement. His back is straight but he still needs to be supported. Lying on his front, he rolls over onto his back with pleasure.

He looks at his hands, puts them in his mouth, grabs things easily, holds them well but sometimes drops them. He will follow objects with his eyes but may sometimes squint. His vision is very good and he can distinguish small details.

#### Understanding

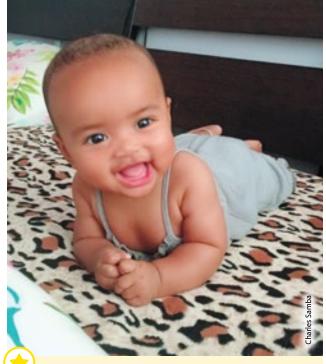
He likes fairly big, coloured objects hanging within reach. He enjoys looking at them, touching them and turning them around. He knows that if he moves the rattle, it will make a noise. He also knows that if he babbles, you'll pay attention for a longer time. When he drops something, he doesn't look for it.

#### Language

He expresses his needs by yelling, crying and babbling. He is improving the babble with sounds that respond to yours. He roars with laughter and sometimes shouts for fun. Exploring his voice, he tries sounds, repeats them and tries to imitate others. He watches people talking to him and looks for the source of a noise. When he is babbling, answer him. He will find out he can affect the world around him and learn to take turns speaking. Talk to him often.

#### Relationships

Now that your baby is more aware, he will be more active in seeking your attention. He may cry because he's bored and hopes you will come and move him around and babble with him. He may even interrupt feeding to look at mom and dad. It's a good idea to keep him in the same room you are in and talk to him. You can pick him up as often as you want, even if he's not crying.



Lying face down, your baby will learn to coordinate his movements. At this age, the child is interested in the people around him. He looks for the sources of noise. He also recognizes family and friends. Take advantage of this to check

- If he reacts when you smile at him
- If he stops crying when you talk to him
- If he turns toward you when you say his name
- If he follows your movements without constantly squinting

If he shows little reaction and you are worried, don't hesitate to talk to the doctor about it.

#### Activities

**Lying face down** – Place your child on his belly and put some safe and interesting objects in front of him. He will want to reach out, grab them and handle them.

Rattle - Your child will want to shake a rattle to make noise.

#### From 6 to 9 months

#### **Fine motor skills**

He is starting to move around on his belly. He rolls over. He's learning to crawl, backwards first, becoming more skilled and moving faster. Lying face down, he holds himself up with his arms. You can get him to move forward by offering him a teddy bear or a small ball. He can grab smaller and smaller objects and move them from hand to hand.

He holds the breast with two hands while feeding. He may even turn around while suckling to watch what's going on around him. His teeth sharpen and he will probably learn the joy of biting.

He is beginning to eat food. To be safe while eating, he must be close to you and fully secure in the highchair. He likes to play with his bowls and food. At about 9 months, his hand-eye coordination will improve. He can drink by himself from a bottle with a spout.

#### Language

Deliberate communications begin at about 7 months, mainly by gesture until 18 months. Meanwhile, the baby's babble is becoming more diverse and sophisticated, copying the sounds he hears. He is interested in people who talk to him, looking at them and answering to his name. He now starts using a few familiar words ("daddy, baby").

By about 9 months, your child understands familiar gestures. If you hold out your hand and ask for his toy, he might give it to you. A baby understands language before he tries to use it voluntarily. At this age, your child understands many words even if he can't yet say them.

#### Understanding

He likes mirrors and articles he can handle, turn and move. He enjoys large plastic cubes. He is fascinated by noisy games and will bang things against each other or the table, walls and floor. He likes squeeze toys that make noise. He will play the same game over and over. He doesn't throw things on the floor to make you angry – he's learning how to throw and how things fall. Your child learns from the things you do with him. He is gathering knowledge and putting it to use.

At about 8 or 9 months you will notice that your child likes to look at his cubes, his teddy bear and his bowl from every angle – top, bottom, left, right, back and front. He's learning perspective. In front of a mirror, he tries to capture his image and yours; he examines himself. Tell him that it's him, and say his name, which he has known for a long time now.

#### Relationships

The baby is discovering his body and his parents' faces. He feels the need to touch them, to put his fingers in their mouth, nose and eyes. He pulls at their clothing. He laughs at the faces they make and becomes something of a tease. He tries to attract the attention of other babies by smiling and babbling when they meet. The fear of strangers may make him cry when he sees unfamiliar faces.

At 8 or 9 months, it will be hard to separate your child from the person who takes care of him the most. He will cry when you leave. Try playing peekaboo so he will understand that you're not disappearing forever when you leave. He'll learn to keep an image of you in his mind. After you have left or when he wakes up, he may be worried to discover you aren't there. Always tell him, particularly if he's taking a nap, that you are going away and will be back soon. A child may become attached to substitute objects such as a doll or blanket to make up for absent parents. Be careful of this precious article and wash it secretly. Keep an identical spare if possible and switch on laundry day.

Help make the baby's separation from his mother easier by having the father or partner also spend lots of time with him. This will make it easier for the child to turn to another person in the family circle (see Importance of the father-child relationship, page 732).

#### Activities

**Peekaboo** – Several times in a row, hide your face behind your hands then reveal yourself while calling "peekaboo." Start the game over using his favourite toy; he will be surprised and happy to see it reappear so quickly. At this age, children think that people or things they can no longer see have really disappeared.

**Mirror, mirror on the wall** – Put yourself and your baby in front of a mirror. Make lots of smiles and faces; he is learning to recognize both you and himself. Make noises with your mouth and he will try to answer them.

**The wide world** – Whatever the season, take him outdoors. It's good for his health and yours. Help him discover the world around him – trees, birds and flowers – and other children.



Whatever the season, take him outdoors to help him discover the world.

**The tunnel** – A big cardboard box with holes in both ends makes a fine tunnel to crawl through. Be sure to remove any staples first. Get down on all fours with your baby and you'll see the world from his point of view.

**Blocks, balls, bottles** – Give him blocks to pile, balls to push and floating toys. In the bathtub he will play with plastic bottles and small containers; he will love to fill and empty them. Don't use toys that don't drain because they make a fine home for bacteria and other nasty microbes.

**Words and books** – Reading stories is a good way to learn new words. Choose a book with simple colour pictures.

**Parts of the body** – You can now play at identifying parts of the face. Then name parts of the body.

#### From 9 to 12 months

#### **Fine motor skills**

Your little one will want to explore every corner of the home. He races around on hands and knees and disappears before you know it. He's becoming more and more independent. He may not walk yet but he can stand up, squat and bend over.

Using furniture for support, he stands up, takes a step or two and falls down. And starts over! His hand coordination is improving and he is becoming more and more capable of doing things. He picks up crumbs and tiny objects and holds them between thumb and forefinger. He still puts things in his mouth because that's how he discovers. So pay attention!

#### Language

Your child can understand what you tell him, especially if you speak plainly and use gestures as well as words. This is the stage when your baby starts to follow simple instructions (e.g., show me your nose). He knows "bye-bye" and "clap" and how to hide. He is beginning to communicate for specific reasons, to get something or attract attention. You have to know what he wants because he illustrates his babble with gestures while saying "ba ba ba, ma ma ma" and so on, holding out his hand and eventually pointing to the thing he wants. He turns when his name is called and imitates the sounds you make. He also still enjoys noise-making toys, and can locate the source of a familiar but hidden noise or voice (from several metres away).

#### Relationships

He is becoming very sociable. He and the children he plays with are beginning to imitate each other. He cries when he can't see you any more. You are still the centre of his life but he is exploring the world around him with great curiosity. It can put your patience to the test but this curiosity is a sign of good development.

He can begin playing alone, but would much prefer that dad be there to give him a friendly hard time. He still doesn't play with the same toy for very long, but can show his appreciation for one specific object.



Your baby will love simply playing with a ball.

#### Understanding

Your child enjoys imitating you. He is beginning to show interest in books and music. He really enjoys games of emptying and filling. He is able to use his knowledge in new situations. If you prevent him from taking something, he will look for other ways to get it. He can coordinate several actions to achieve a goal, such as crawling across the room to get a toy.

He links events and reactions, such as how his parents react to his crying. He is fascinated by the results of his actions, and may pull on the tablecloth to get the glass of milk on the table.

#### **Activities**

**A ball** – Sit on the floor face to face with your legs open. Roll the ball between his legs. Ask him to send it back the same way. He will be proud of himself when he sees you're happy he succeeded.

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**A toy chest** – Give him a box full of colourful, washable toys such as balls, blocks, stacking rings and fabric animals. Keep him fairly near to you. He'll start playing by himself.

A cupboard for baby – Give him permission to go through a cupboard located away from the stove and full of plastic containers in various shapes and colours. While he plays with them you can work quietly in the kitchen. Don't forget to use security locks on all the other drawers and cupboards.

**Smells** – Use mealtime to introduce your baby to different odours, such as bread, meat, fruit, vegetables and spices. This will help develop his sense of smell.

**Books** – Let him handle his first books, made of cardboard or cloth. Point at things on the pictures and tell him their names. He will learn to identify them and later to name them.



#### From 12 to 15 months

#### **Fine motor skills**

Your baby can walk, or almost. But there's no rush. Children grow at their own pace. Maybe he prefers to wait until 15 to 18 months. Don't push it. He'll soon be climbing on the furniture and moving chairs around you.

He is very capable on all fours and can climb the stairs this way. He is learning about shapes, putting small cubes inside big ones, balls in holes, rings on a cone.

#### Understanding

He sorts objects by shape and colour. And he likes testing different actions. For example, if he drops an article down the stairs he'll throw another one down to see what happens.

#### Language

Children generally say their first words at about 12 months. A baby's first words will refer to people close to him (e.g., mommy, daddy) and to familiar articles (e.g., ball, doll). It's important to know that some words will not match adult speech (e.g., banky for blanket). He recognizes the names of familiar people and things. He enjoys repeating what he hears and continues to babble.

#### Relationships

Your child is very sensitive to his parents' emotions, especially in unfamiliar or threatening situations. A parent's worried or confident expression will affect his behaviour and feelings. Your young child is more sensitive to family mood than anything else. During your baby's one-year medical exam, the doctor will ask you some questions about your child's growth; for example:

- Does he turn toward you when you call his name?
- Does he look directly in your eyes?
- Does he point at things to show his need or interest?
- Is he beginning to pretend (feeding a baby, talking on the phone)?

#### **Activities**

**The falling tower** – Show him how to make a stack of three or four blocks. Put one down and ask him to add a second, and so on. Then tell him to knock the stack down – and start over.



Play with your baby at building – and rebuilding – a tower. This will help him learn to gather and handle objects. **Decorating the refrigerator** – Your child will have fun with fridge magnets. Moving them around helps teach the finger and thumb to pinch, and improves hand-eye coordination. Careful! Be sure the magnets are firmly assembled and too big to swallow (see Choosing toys, page 691).

**Mastering the stairs** – Once he starts walking, there's a new game he'll love: going downstairs backward.

**Nursery rhymes and chitchat** – Chatting with him frequently is a good way for your baby to learn language skills. He will enjoy having body parts named, for example. To add to your choices, your local library may have CDs of the nursery rhymes and songs that children love so much.

#### From 15 to 18 months

#### **Fine motor skills**

By now your child is walking. He happily struts around with legs apart and arms out for balance. It's a good time to buy him some soft shoes for walking outdoors (see First shoes, page 775). He climbs stairs on all fours, goes downstairs backward, gets into cupboards, climbs on chairs and touches everything.

He's learning to handle screw tops, door handles and the pages of a book. He helps you dress him, and undresses quickly and throws away his boots. He can take a few steps sideways or backward. He can roll a ball toward an adult.

He can also draw pictures with a large crayon. He can stack two or three cubes and put things in a bowl. He likes to fill and empty containers. Careful! He still puts things in his mouth, including stones. He is so excited he wants to eat and sleep less.

#### Understanding

He is still experimenting with gravity, dropping things on purpose from his highchair. Throwing things is still part of his learning program. He looks for various ways to do what he wants and tries out new behaviour. For example, if he steps on a plastic duck it makes a noise. He may then try to squeeze it in his hands or sit on it to make the same noise. He's starting to solve problems by trial and error.

#### Relationships

This is the beginning of independence, and a very important time in a child's social development. It can be very hard on parents. He will follow you and imitate the things you do around home – toilet, housekeeping, toothbrushing, preparing meals. Lend him a cleaning cloth, a spoon and a bowl. Name the things he does. Invite him to imitate the sounds of things he hears: cars, airplanes, the vacuum cleaner, dogs and cats. He likes to pretend he's on the phone. Play music for him and he will dance to the rhythm. Play chase and hiding games with him and he'll be delighted. He loves playing in sand and splashing water.

He likes playing alongside other children of his age but each will play independently. Interactions between two children of the same age become longer and more complex. Periods of mutual imitation indicate that, to a certain extent, the child is conscious of the other's intentions.



Rather than responding to what he wants before he asks, let him express his needs.

#### Language

He is starting to grasp simple instructions (e.g., "go get your teddy bear") and depending less and less on your gestures. When he hears a noise, he looks toward the source of it. By 18 months, he knows at least 18 words that his parents understand, and he speaks one word at a time. He says "daddy" and "mommy" and a few useful terms such as "down", "wait" and "more".

He may name some body parts (nose, eyes), pets (dog, cat), and articles of daily life (ball, car). He tries to repeat words and imitate the sounds of animals.

Give him time to talk and encourage conversation, because he will learn through practice. When he says a word, add more words to it. For example if he says "turn", you say "yes, the top is turning fast."

# y Your child's development

### Baby

#### **Activities**

**Puzzles and a tool box** – He is becoming more capable with his hands. He loves toys he can put together and take apart, nesting and stacking games. It's time for his first jigsaw puzzle (with large parts), a plastic tool box and some big building blocks.

**A pull toy** – He likes to push and pull a vehicle. Give him toys with long handles, carts, wagons, balls and boxes full of various things. Tie a piece of string to an empty shoe box and suggest that he put his teddy bear in it. This makes a great sled.

**Bubbles** – You can blow bubbles for him to catch in the bathtub. He will get very excited so be sure to keep him sitting down. This will be just as much fun outside on the grass.

**Drawings** – Give him paper and non-toxic wax crayons. Show him how to doodle and he will immediately see the link between action and result. After praising the artist, hang the masterpiece on the fridge.



#### From 18 to 24 months

The Agir tôt program provides an opportunity for you to meet with a nurse to discuss your child's development and any concerns or questions you may have. The meeting is held at your local CLSC, at the same time as your child's 18-month vaccination appointment. You can prepare for the meeting by observing your child's daily activities. This will make it easier to answer any questions the nurse may ask about your child's development. To learn more, visit the website: publications.msss.gouv.qc.ca/msss/ fichiers/2021/21-864-11WA.pdf.

#### **Fine motor skills**

Your child has a wild need to move now. He runs, stops, starts, stops again, legs wide, chest forward, crouches as if urinating, stands up, starts running again and falls down. He bumps into everything. He kicks his ball to move it. He dances by spinning around and around when he likes the music. He loves playing outside. He needs room to walk, jump and run the way he wants. Teach him to rest when he's tired by sitting cross-legged. It's a good position for the legs. By about 2 years he can do a standing jump and between 2 and 3 years he will be able to hit the ball with his foot. He will also learn to walk on his toes.

He is becoming more coordinated every day. He may be able to run a piece of string through something hollow or a bobbin of thread. Between 2 and 3 years old, he will be able to hold scissors and turn the pages of a book one at a time.

He doesn't want help at the table. He holds his spoon well but still has trouble getting it to his mouth. He willingly splashes his soup on himself. He can easily take off his hat and socks, and you can encourage him to dress himself by choosing clothes that are easy to put on.

#### Language

By about 18 months, your child will clearly understand simple sentences like "go get your ball" with no gesturing. He will also turn his head toward a noise. By 24 months, he can do what you ask (e.g., point at a picture in a book). He likes listening to little songs and stories. By 30 months, he can correctly answer questions about who, what and where with words and actions.

His vocabulary is now growing quickly. From the 18 words he knew at 18 months, he has learned 100 by 24 months. The first 2-word sentences appear at about 2 years (e.g., daddy gone, more milk), and grow to 3 words by about 2 ½ years. At this age, your child is also starting to use small words like "me" and "one."

Little conversations will soon become possible. You'll be able to talk with your little one about an event or a thing. Don't worry if he still can't pronounce all the sounds and syllables. Children make lots of language mistakes at this age.

#### Relationships

Your child is becoming more self-assured and independent. Do you feel the distance is growing between you? In fact, he's discovering the world around him. He sometimes talks a lot and continues to imitate you. He feeds his teddy bear, washes it, walks it and puts it to bed. He's playing the role of mother and father.

At 2 years old, he wants to do everything by himself: eat, drink and undress, mainly. He loves learning. Sometimes he makes a mess but never mind. Let him experiment while you watch. His success will make him confident.

Your child will have fun with you or with an older child but not yet with a toddler his own age. He may find it hard to lend his toys but you will gradually convince him to share. It will be easier at 3 or 4 years. Many children go through a phase when they push, bite and hit. Say NO clearly but don't hit or bite your child.



Your child is ready for his first construction games.

#### Understanding

Between 18 and 24 months, he learns that objects exist even when he can't see them. When your child sees an object moved from one place to another, he looks for it in the last hiding place. He also looks for articles he hasn't seen moved.

Your child can understand symbols now, and can think of people, things and events he doesn't see. He can imitate someone who isn't there, or pretend to. He can draw objects. At about 2 years old, he will be able to sort articles based on common characteristics such as colour.

He is also beginning to understand cause and effect. When your child bangs on things with a spoon, he realizes that each one has its own sound.

#### **Activities**

**A story every night** – As often as possible, take the time to read your child stories. Point out pictures by naming objects and actions. Ask him to turn the pages and let him handle the book.

Your child will learn that reading goes from left to right and from the top of the page to the bottom, and that stories have a beginning and an end. He will express his emotions. This is a great time to share precious moments of pleasure and togetherness. Choose books he likes. You can go to the library, and ask family members to give him books as presents.

**Other word games** – Writing is everywhere. While taking a walk, satisfy his curiosity by reading things that attract his attention: posters, the names of stores, advertising, road signs, etc. He will learn to recognize logos, which is the first step toward understanding words. **The sound of music** – He is also discovering music. Listen to CDs and sing his favourite songs with him. He often prefers songs accompanied by simple gestures. Since he is using toys with more ability, you can provide him with simple instruments like drums, a xylophone and cymbals.

**Free creativity** – It's time to use toys that let him create things. He likes finger painting, modelling clay and mud pies. Say something about what he makes. He will want to talk about it. Don't forget to show off his handiwork – he will be very proud of it.

**Long live the outdoors** – Your child needs to move. He needs space to run and jump. Play with him outside in your yard or the park as often as possible. He likes playing outside and it's good for him.

**Costumes** – He loves disguises and will borrow grownups' hats and shoes. Set aside some old clothing that doesn't matter if it gets dirty.



The age of toilet training varies greatly from one child to another.

#### **Toilet training**

Toilet training usually begins at about 2 years old. Most children are fully toilet trained through the day between 2 and 4 years old.

Toilet training usually takes from 3 to 6 months. We recommend that you do not set a timetable. There is no use forcing a child who isn't ready.

Night-time bladder control may take several months or even several years.

A child is capable of toilet training somewhere between 18 months and 3 years of age. Here are a few signs that your child might be ready for this new experience:

- Your child can walk to his potty.
- He is starting to undress (he can pull down his pants).
- His diaper stays dry for several hours.
- He understands simple instructions, like "take this to Daddy."
- He can express his needs with words like "want milk" and he will soon be able to say "need to pee!"
- He is proud he can do things by himself.

It's important to go at your child's speed so this major new step in life is positive. Never try to force him to toilet train before he's physically and mentally ready. Trust him!

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#### How to make toilet training easier

Here are some ways to make toilet training easier:

- Get him ready a bit at a time by teaching him the words and gestures of elimination – "poop", "pee", "potty", "toilet".
- Ask him to imitate you. Your child will want to copy you in the bathroom the same way he copies your speech.
  Put the potty close to the toilet and urge your child to do the same thing you do. When he's ready, he'll want to be like mommy and daddy.
- Use the potty rather than the toilet during the first steps. Your child will feel safer and more stable.
- Ensure that he is well seated on the potty, feet on the floor. If he's too high, use a small footstool so he can relax.
- To begin with, ask your child to sit on the potty with his clothes on, and then again after the wet diaper has been removed.
- Congratulate your child every time he shows interest in sitting on the potty.

- Later, have him sit on the potty at set times of the day (for example, after waking up, after eating and before naps, baths and bedtime) to establish a routine.
- Start using training pants or cotton pants after your child has been using the potty regularly for a few days.
- Don't be discouraged by accidents. This is all part of learning.
- Encourage his efforts and avoid punishing him if he has an accident.

One of these days your child will want to go in the potty. There's no rush, and it will be easier if there's no stress.

It's not a good idea to start toilet training during an unsettled time in your child's life, such as when you move, hire a new sitter or a new baby arrives.

#### **Emergent reading and writing**

Now that your child has learned to handle books, he's beginning to discover the written word. Long before he goes to school, you can use everyday events to help him take the first steps toward reading.

Your child watches you and wants to imitate you. Do some of your reading and writing while he's watching. Here are a few suggestions for activities:

- When he begins naming the people around him, you can write each person's name beside their photo.
  If he says "daddy" for example, you can write the name in big letters under a picture of daddy.
- When he brings you a drawing, write his name at the bottom of it.



Let him handle books. Reading will be an important part of his life when he goes to school.



Once your child has learned to handle books, he'll become increasingly familiar with the written word.

Your child will make the connection between speech and writing a bit at a time. He will discover the purpose of writing and decide it is a good idea.

Don't hesitate to visit your local library.

