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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 can vary from pink to dark red. 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 it may be covered with a whitish coating, which 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.
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.
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.

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.
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°C (68°F) and 22°C (72°F) is perfect. 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?, pages 316-317). 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. Here are some things you can do:

- 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, pages 346-350). 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, pages 586-595).
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?, pages 316-317), 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 change from soft to liquid, it may be a sign of a transient trouble. 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

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Your baby starts “talking” to you from birth onward. 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 will listen more than talk during her first two years of life. This is normal because her brain is still growing. 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.

She feels safe and happy when she hears your voice.
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, breast-fed 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.
What to do?

Make sure your baby’s needs are being met and that she isn’t exhibiting any other concerning signs (see the red box, page 238).

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 infant 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.
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.

**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.

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**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, pages 586-595)
- Is vomiting or has abnormal stools (see Stools, page 233)
- May have been injured
- Is showing other signs that worry you
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. You can also phone the LigneParents help line, at 1-800-361-5085.

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.

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

Marie-Ève Bolduc
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 hang a pacifier around your baby’s neck or wrist or attach it to her crib. The string could injure or strangle her. Don’t use a safety pin.
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.
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.
Baby massage

To give a successful 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. Some hospitals are beginning to offer screening for deafness at birth through a simple, quick and safe test. The test is normally given while the mother and baby are still in hospital.

If your baby doesn’t have this test, you should make sure she reacts 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.
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, see Eye problems, page 576.
Sleep

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Sleeping safely

Your baby should sleep on her back on a firm mattress in a crib that meets Canadian safety standards, from birth onwards (see Crib, cradle, and bassinet, page 625). The blanket should be the only extra thing in the crib.

Tragically, every year there are reports of deaths of babies who were sharing their parent’s bed. For this reason, the Canadian Paediatric Society states that during the first six months of life, the safest place for a newborn to sleep is in her parents’ room in her own crib.

For her own safety, your baby should sleep on her back, in her own crib.
Do you sleep with your baby?

To avoid an accident, make sure you:

- Do not sleep on a couch or similar piece of furniture (armchair) with your baby;
- Use a firm mattress (no soft surfaces or water beds);
- Keep enough distance between the mattress and wall that your baby doesn’t get stuck;
- Never let a newborn sleep alone in an adult bed.

In all circumstances:

- Never sleep with your baby if you have been drinking, taking medication that makes you drowsy, or have taken any other drugs (marijuana, crack, etc.);
- Never sleep with your baby if you are extremely tired (more than usual).

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

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. The quality of your sleep is very important.

Your baby must sleep in a safe place even when you are travelling. Never, under any circumstances, put your baby to bed 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 playpen or a mattress on the ground can be a solution for putting your baby to bed when you are travelling.

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.
Car seats must be used for all vehicle travel with your infant. During baby’s first month of life, try to avoid taking him on trips of more than one hour at a time. If you must take your newborn on a long trip, it is a good idea to take frequent breaks. Newborn babies have very little muscle tone and they tend to slide down in their seats, which can constrict their breathing. Stop every now and then to take your baby out of his seat and move him around.

When you go for walks, your baby will be safest and most comfortable sleeping on her back in a stroller. The back of the stroller should fold down flat or almost flat, and your baby should be properly strapped in.

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

**Sudden infant death syndrome**

The sudden death of an infant under the age of one usually 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 are:

- being exposed to her mother’s smoking during pregnancy;
- sleeping on her tummy;
- ending up with her head completely covered by blankets.
Here are some recommendations to reduce the risk of Sudden Infant Death Syndrome:

- Avoid smoking during pregnancy. Tobacco by-products absorbed by mothers who smoke are passed from the mother’s blood to the baby’s blood via the placenta.

- Place your baby on her back to go to sleep. Tell anyone who looks after your baby to do the same. Healthy babies won’t suffocate when they sleep on their backs. When your baby begins turning over on her own, you can allow her to sleep in the position that she prefers without any danger.

- Avoid using comforters because they can easily cover your baby’s head as she moves around.

- Avoid using pillows, bumper pads or other similar items in your baby’s crib. Your baby could suffocate against these objects if she is on her stomach or accidentally turns onto her side or stomach.

You can swaddle your baby in a blanket. In this case, make sure that she sleeps on her back and isn’t too warm.

Infant sound and movement monitors do not replace these precautions. All these safety measures must be followed even if you use a baby monitor.
Preventing a flat head

Sudden Infant Death Syndrome happens 50% to 70% less often since paediatricians have recommended that infants sleep only on their backs. But if a baby always stays in the same position, in her crib or car seat, she may end up having a flat head. The medical term for this is positional plagiocephaly.

Since the bones of the baby’s skull are still soft, the part of the head lying on the mattress flattens with pressure. A slight flattening of the head will disappear on its own. A more pronounced flatness may be permanent but will not harm your baby’s brain or development.

Your baby needs to spend some time on his tummy every day.
To prevent a flat head, the Canadian Paediatric Society recommends changing your baby’s position in the crib every day.

- One day, place your baby with her head at the head of her crib.
- The next day, place her head at the foot of the crib.

Make sure she is always looking towards the room, not towards the wall. You can also put a mobile on the side of the crib facing the door to encourage your baby to look in that direction.

Your baby needs to be placed on her tummy for short periods of time every day when she’s awake and is with a parent. This will help her grow and prevent flat spots from forming on the back of her skull.

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.

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.
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.
Your child’s development

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Children grow and develop gradually. But some days the progress is surprising and delightful! Your child needs simple but essential elements to grow in mind and body. He needs food, physical care, sleep and security. He needs to develop significant relationships with the people who take care of him, and in whom he trusts. For this bond to be created, your baby needs to be:

- Loved as he is, with all his strengths and weaknesses;
- Surrounded by love and be touched;
- Encouraged and supported with gentle words;
- Stimulated by people who talk and play with him;
- Guided in his experiences by a few clear rules.

Bit by bit the bond between you and your child grows through the care, affection, attention and time you give him.
**Bonding**

In order to grow, a child needs to develop a bond of trust with one or more people who are sensitive to his needs and who reassure him when he is afraid. This bond known as “attachment” is created through the daily care, affection and attention you give to your baby and the time you spend with him.

**Sense of confidence**

Your baby sends you signals (sounds, crying, arm and leg movements, frowns, etc.) to express his needs. You learn to understand them as you try to respond. It is important to pay close attention to these signals to determine the appropriate response to his needs.

Your response should also be prompt and reassuring for your baby, especially when he is crying. That’s how he’ll gain confidence in you. Your baby will know you’re there for him.

For example, if your baby begins to cry, you can pick him up to comfort him. If your baby is colicky, you can take him for a walk in the baby carrier. It’s a good way to soothe colic and build trust with your child.

Here are a few tips to help your child gain confidence:

- Hold him often in your arms, especially when he cries.
- Take time to play and talk with him.
- Learn to get to know him and to take his personality into account.
If your baby has confidence in you, he will have confidence in himself. This sense of confidence is necessary for your child to explore his world. He will feel safe if he knows his parent is there to help and comfort him in a moment of trouble. Some more sensitive children need more time to feel confident.

Since children gain confidence from the people that take care of them regularly, it’s normal for them to react against separation from their parents. It is usually around the age of nine months that toddlers have a difficult time coping with separation.

When you’re back together with your child, he may show he was unhappy about the separation or instead show his joy at you being there again. After a bit of time close to his parents, he will feel safe and confident again.

**Temperament**

From birth, a newborn has a character and manner of his own. Each baby has his own ways. Here are the kinds of differences you can see in babies:

- How energetic they are;
- How regular they are in terms of appetite, sleep and bowel movements;
- Their reactions to new experiences;
- Their ability to adapt to new things;
- Their sensitivity to noise, light and texture;
- How much they react to good and bad events;
- Their mood;
- Their ability to concentrate;
- Their ability to persevere.
Take time to observe your baby to get to know him. Your observations are important. They will help you adjust how you treat and care for your child. You’ll also learn to guide your child in his learning and discoveries.

Some babies are considered “easy.” They wake and eat according to a regular schedule. They’re generally in a good mood and are somewhat active. These babies, like others, also need a routine but they adapt well to changes and new situations. In response, their parents simply learn their own way of taking care of them.

Other babies are “more sensitive.” The care and attention they need change from one day to the next. They don’t adapt as easily to new things and sometimes cry a lot. They may be irritable for a number of reasons. Some are more sensitive to light, others to noise and others to movement.

These children require flexibility and patience. Daily care becomes a routine that is good for them and reassures them. It’s important that you keep up your efforts to give warm and constant care even when your child is irritable and unhappy. Your presence and your calm make them feel better.

If your six-month old baby is very active, you can help him focus his attention and concentration. Looking at children’s books with him for several minutes is helpful. Over time, his interest and attention increase.

Some babies are more “cautious.” They’re calm and take time to observe before acting. They’re a little more timid about new activities. They take their time, and may resist change. Because they often make less noise and require less attention, they may seem to be more independent. But even though they take their time, they understand and learn to explore, to socialize and to play with others.

It is good to encourage them to discover new things at their own speed. Your child will feel understood, respected and encouraged in his learning. Be sure to take plenty of time to play often and regularly with your child even if he’s calm and undemanding. Quiet children need physical games too.
To interact is to stimulate

Children need a lot of contact with the people around them, especially their parents. From the time they’re born they have everything they need to interact: sight, hearing and touch. As they grow, their ability to interact improves.

You can enjoy great times with your baby while caring for and playing with him. Use those times to stimulate your child’s abilities. Interaction with your child creates a happy relationship that allows your baby to get to know you and learn to predict what comes next. From birth, he needs you to be able to relate to objects and the world around him. You are introducing him to life outside the womb.

Your baby understands language several months before knowing how to express himself. Speak to him, use words to describe what you are doing and your actions. “Look, Mummy’s going to feed you now.” “Daddy is giving you a bath.” Don’t be afraid of repeating yourself; he is taking in what he hears and learning to remember.

By playing with your child, you help his development.
Playing to learn

Playing is essential to your child’s growth. Through play, he shows his joy for life and discovers his body, family and home. All children love to play. Not only is it fun and instructive, but it also promotes development.

Play is what helps your child learn important skills and gain confidence. He will make his greatest discoveries during the first two years of his life.

He will learn to:

• Crawl, walk, climb, run and dance (general motor skills);
• Use his hands and fingers to hold and handle objects and develop hand-eye coordination (fine motor skills);
• Understand language, talk, interact;
• Develop his intelligence;
• Get to know the world around him and his place in it;
• Be proud of his successes and develop a sense of confidence.

Toys

The toys you choose should be appropriate for his age and be safe (see Choosing toys, page 628).

Be sure to give him stimulating toys. For example, a dog on wheels that he has to pull is better than a battery-operated puppy that he just has to watch. And be sure to take time to play with him.

He needs help learning to discover his new playthings. Time with his parents is always better than a more complicated toy, especially if it’s forgotten in the bottom of the closet.

The best toys aren’t the most expensive. Many household objects can amuse young ones: pots, plastic utensils, bowls and of course the quintessential cardboard box (beware of staples!), which becomes a house, tunnel, car, hat and so on.
Parents – no need to buy your child every toy on the shelf. Just spend quality time with him. Play with him, pamper him, and discover the joy of just being together.

**A few suggestions**

- Store some toys for awhile. When you take them out again, your child gets to discover them all over. That way you can rotate the toys in your house or even trade with friends.

- Toys play different roles at different ages. At first, your baby will handle them and put them in his mouth. Then he will figure out how they work or start piling them on top of one another.

- After very active games or before bedtime, it’s a good idea to choose a calm activity. Read a story, rock the teddy bear to put him to bed, hum a lullaby.

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**Questions about language**

Babies begin communicating from the time they leave the womb. Slowly they learn the language that will let them express themselves and interact with the people around them. The step-by-step development of language is described beginning on page 282 in *Stages of growth*.

Parents may worry about how well their child is learning language. Before worrying, remember that children learn at different speeds. Some are slow to speak, others are quick. Temperaments are different too: some children are quieter, others like to talk.

In this section, we will try to answer the most common questions from parents about language.
How should I speak to my child?

Use simple words and short sentences that are not much longer than your child’s. Speak more slowly and repeat what you say often. Your child will no doubt come up with words like “wawa” for water, “woof-woof” for dog, and “banket” for blanket. Help him learn the right words. When he says “wawa,” offer “Yes, water.”

You can also use words and sentences to describe what you and your child are doing. As he grows, you will naturally adapt to his level.

He doesn’t talk; what do I do?

It’s important not to pressure your child. Keep your interaction enjoyable. Try these strategies to get him to express himself:

- Create funny situations that will interest him. For example, pretend to try to put his boots on your feet, or pretend to fall asleep when you’re playing with him;

It’s best to put yourself at your child’s level so he can see your face when you speak.
• Try to avoid responding to his needs before he asks. Wait for him to indicate what he wants using gestures, words, or a look;
• Ask questions that require more than a yes or no answer. For example, “What would you like to eat?”;
• Offer a choice when he points to what he wants: “Would you like an apple or a banana?”;
• Say the beginning of the word or sentence: “You want the ba…” (balloon); or “You want the…” (balloon);
• Place things out of reach so he has to ask for them;
• Encourage all his attempts at using a new word and congratulate him.

I don’t understand what he’s saying. What do I do?

Without blaming him, tell him that you don’t understand.

It’s important to encourage all his attempts to communicate, even if you don’t understand. If you understand a few words, try to ask about the rest of the sentence: “Something happened to your teddy bear?” If you have no idea, ask him to show you.

His pronunciation is wrong; what do I do?

When a child learns to speak, some sounds come early, like p, b, m, t, d and n, while others develop later. Children should be able to correctly pronounce the sounds f, v, k, g, h, s, and z by age 3 or 3 ½. The l sound can usually be articulated by age 4. Mastery of the sounds ch, j, and r may not come until age 5, and the th sound usually comes at about age 6.

The sh and j sounds appear at around 3 ½ years and may be learned at only 7 years in some children – no reason to worry before then. Many children replace sh with s and z (e.g., shoe ➔ soe, jam ➔ zam).
To help your child learn to say sounds correctly, repeat the words in the right way, emphasizing the sound he mispronounced. For example, if he says “woud” for “loud,” help him by stretching the correct sound and saying it louder: “LLLLLLoud.” Don’t force him to repeat the word. Indirectly encourage him by asking follow-up questions.

**When should I see a professional?**

Remember that to speak your child needs first to be able to hear. If you’re worried about your child’s hearing, talk to your doctor. Your child’s hearing can be tested from birth.

Some aspects of learning to speak and communicate are very important. We encourage you to ask for advice from a health professional if:

**At about 6 months**, your child does not react to your voice or noise. He doesn’t babble and doesn’t smile.

**At about 12 months**, he stops making sounds. He doesn’t react to familiar words, like his name and the names of people close to him, his teddy bear and favourite games. Your child doesn’t look you in the eye, and doesn’t seem interested in communicating through gestures or sounds.

**At about 18 months**, he isn’t using any words. He doesn’t point. He doesn’t understand simple and familiar instructions, such as “give” or “come here.”

**At about 24 months**, he doesn’t combine two words, and expresses himself mainly with gestures. He doesn’t imitate sounds or words. He says less than 100 words.

**At about 3 years**, strangers are unable to understand him. He doesn’t speak in sentences. He doesn’t try to communicate. He doesn’t understand simple sentences. He’s not interested in other children.
Some situations can increase the risk of language problems. You should talk to a health professional about such situations, which are listed below. Together, you will be able to decide if a special consultation is required.

- Speech, language or learning difficulties in the family;
- Hearing problems in the family;
- Drug or alcohol consumption during pregnancy;
- Your child speaks loudly or needs things repeated often.

Should he see a speech-language pathologist?

Language is essential to your child’s growth and ability to communicate. When he gets to school, he will need to be able to express himself and be understood. If you notice that he has specific troubles, it would be worthwhile to see a speech-language pathologist. Your doctor can help you find one.

The local CLSC, hospital or rehabilitation centre might offer such services. Schools also offer support, but it’s better to help your child before he gets to kindergarten. Waiting times for seeing a speech-language pathologist lead some parents to pay for one through the private sector.

A complete list of speech-language pathologists and audiologists in your region is available through the Ordre des orthophonistes et audiologistes du Québec. 514-282-9123 / 1-888-232-9123  
www.ooaq.qc.ca (in French only)
Setting limits

All children need limits. As parents, you respond to this need according to your values but also taking into consideration your child’s character, age, and physical and emotional needs. It is important for him that the rules in your family be simple and clear.

Providing clear, simple rules

Love also means setting rules. Rules exist to help keep your child from getting hurt, from hurting others and to teach him to respect others and the world around him. He needs rules and limits, but since he doesn’t know what they are, he needs you to teach him.

We usually begin to teach a child rules when he starts to move around on his own with ease; in most cases, that’s at about 9 months. From that age on he’s able to learn simple rules.

Your little one will follow a rule if you explain it to him taking into account his age and his ability to understand and remember what you are asking him. Teach him one rule at a time and go on to the next only when the last one has been well integrated into his day-to-day routine.

At the age of 18 months, take time to explain the “why” of a rule. Use clear, simple, descriptive language that shows him exactly what you expect from him. This will make it easier for him to understand, accept and respect this rule.

Learn to say NO

Be consistent: when you say no, stick to your word. For example, if you’ve just told your child he’s not allowed to touch the oven door, but he tries to do it anyway, you should say NO firmly.

You can then move him away from the door and offer him a toy as a distraction. If he starts playing with it, praise him. If he cries, repeat no softly, taking care to reassure him.
If he is old enough to understand, explain why this is not allowed. If he gets up and returns toward the oven door, simply say no once again and repeat the process. Usually it takes several times, so don’t be too discouraged.

Individual parents have their own style of educating their children, probably learned from their own parents; they can be adapted to today’s realities. Some are more permissive, others more strict. The most important thing is to trust your instincts and respect your child.

Keep the emotional bond

From the time your baby was born, you’ve created a strong emotional bond with him. This will help you a lot when it comes to setting rules. A child who feels loved, understood and respected will be much easier to guide than one who doesn’t feel appreciated.

Simple, clear instructions are followed more promptly.
Discipline is necessary

Discipline exists first to keep little ones physically and emotionally safe. It also makes living with others possible – for your child today and in the future. For discipline to work, both parents must decide together what is and isn’t allowed. That way, you can set clear rules without contradicting each other.

Some children need more structure than others. As parents, you are in the best position to judge your child’s specific needs and personality.

Clear rules for staying physically safe – This means preventing behaviour that could be dangerous for your child and that could result in him being hurt. For example, you don’t allow him to climb something that’s not stable. You can make discipline easier by not having too many unsafe things around – make your house safe.

A routine for emotional well-being – Your child needs a routine. He likes things to happen in about the same order each time. That way he can learn to predict what’s happening and how it will affect him. He will feel reassured if meals, bedtime and leaving for daycare follow a predictable routine. Having a routine also keeps you from having to repeat rules and instructions.

Rules that teach cleanliness and politeness – You can teach your child to eat with a spoon, put objects away, use the potty and brush his teeth morning and night. You can also teach him some basic rules that will make his life in the outside world easier later on:

• Washing his hands before meals;
• Saying please and thank you;
• Not talking at the same time as someone else;
• Waiting his turn.
A few tips for making discipline easier

- Place yourself at eye level with your child so that he looks at you and is listening when you teach or repeat a rule.

- Be sure to get his attention before explaining a rule; avoid having him be distracted by noise or a game.

- Use games to pass on certain rules. For example, little ones love to be with their parents and to imitate them. Playing a game of pretending to be a grown-up can help teach your child to pick up his toys and clothes.

- Congratulate your child with a kind word or a smile each time he listens and follows a rule.

Reward good behaviour

Help your child learn good behaviour through the rules you set by congratulating more than scolding. Put more time and energy into encouraging than arguing. Work to guide him toward acceptable and good behaviour. The results will be much better than constantly having to reprimand.

A child that is given too many instructions and scolded too often is likely to become upset or discouraged.

Recognize and congratulate your child’s good actions. This will teach him about your expectations and reassure him about his skills and abilities. A child’s self-esteem grows through his daily experiences; this is how he develops a positive image of himself.

The challenge for parents is to balance encouragement and correction.
Don’t hesitate to acknowledge your child’s good behaviour and to congratulate him on it.

Teach patience
By around 12 months, you can start teaching your child that he can wait a few minutes before getting what he needs. But be sure to be reassuring during these first waiting periods. Keep talking with him, saying for example, “Mommy’s on the phone; I’ll be with you in two minutes,” or offer him a toy.

This will help him learn to be patient little by little in daily situations, for example, while you’re making supper, taking care of another child or answering an important phone call.

The terrible twos
During this infamous time of no-no-no, which is usually between about 18 months and 3 years, children experience the need to go against anything asked of them. They are in fact going through their first assertiveness crisis. They are testing what they’ve learned and learning more.
Little by little, they understand that not everything is allowed, that there are consequences to our actions, and that rules and limits are part of living with others. Avoid confrontations. It’s a good idea to offer choices within limits that are acceptable to you. This will satisfy his need for independence. For example, if the child has to put away his toys, ask if he would like to pick up the blue blocks or the red blocks first.

**He won’t follow the rules?**

Your job of parent isn’t easy. But it’s crucial. The sooner your child learns the rules of the house, the easier and more enjoyable it will be to live with him. You’ll have more time to do interesting things together. It will also be easier for him to accept rules in other situations, like at daycare. Your household rules get him ready for life outside home, where the rules will be similar to yours.

When the rule is essential to your child’s well-being, such as bedtime, don’t hesitate to keep your word. Be persistent without being aggressive. Try not to repeat instructions without follow-through. If there are no consequences, your child will learn he doesn’t have to follow directions.

If your child refuses to follow a rule you’ve taken care to explain, you must be firm. It will show in your face and the tone of your voice. Don’t hit your child. It will only teach him to be afraid, to be disrespectful and to be aggressive. It will teach him to hit to get what he wants, because that’s the model you’ll be showing. There are more effective ways.

**Be firm** – Firm means clear and consistent. Some children need more rules and supervision than others. As parents, you are in the best position to adapt to the needs and character of your little one.

Look at a common example: the grocery store crisis. Your little angel throws a devil’s fit because you won’t give him the candy he sees. He cries, kicks and screams. He even tries to hurt you and rolls on the floor. Obviously, everyone is now watching, some who understand, others who don’t.

**What to do?**

**Withdrawal** – In this kind of situation, a good trick is to say “enough!” with a firm tone and get your child out of the situation. Once away and at a distance from spectators, explain calmly but firmly to your child that you will not
continue getting the groceries until he understands that he will not be getting any candy. This kind of radical change in the situation should surprise him and get him to change his mind.

Wait for the calm to return before going back to get your groceries. It may seem that you’re wasting time, but the limits you’re setting with your child are essential and will save you time in the months ahead.

This approach – called withdrawal – means you remove your child from a difficult situation for several minutes to explain what you expect of him. It’s better than punishment, which often leaves the child not understanding why he’s being scolded or what’s expected of him.

**Worthwhile efforts**

Parents need to work together to create healthy discipline. The daily and necessary efforts you make are an investment in the future. By gradually teaching your child the rules of life as a family and as a society, you are making him able to follow the rules on his own later in life.

Many books are available in stores or libraries if you would like to read more about discipline.

**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 age of a premature baby (born before the 37th 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 1st but your baby was born on January 1st, 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 1st, 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 750).

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).

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 immediately begin recognizing faces, and 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.

**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.

Look at your baby when he is in your arms; both of you will get to know each other better.
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.
**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.
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.

Help your baby discover the different parts of his body.
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 your baby’s separation from Mom easier by having Dad also spend lots of time with him. This will make it easier for your child to turn to another person in the family circle (see Importance of the father/child relationship, page 674).

Activities

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

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.
Baby

Your child's development

Dominique Belley

Help him explore his surroundings by letting him play with everyday objects.

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.

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.

Help him explore his surroundings by letting him play with everyday objects.
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.

**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.

**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.

Your baby will love simply playing with a ball.
**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**

**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 628).
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.

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 703). 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.”
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**

**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.

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.
Your child's development

• 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.

• Congratulate your child every time he shows interest in sitting on the potty.

• 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.

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.

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!
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 your child begins to talk, you can write the first words in large letters and put them on the fridge. Point at them and read them out loud from time to time.

- 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.

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. To know more about learning to read and write, see the documents “Emergent Literacy From A to Z!” on the ministère de l’Éducation et de l’Enseignement supérieur Web site at: www.education.gouv.qc.ca/en/current-initiatives/reading-in-school/eveil-dans-les-milieux-defavorises/hand-in-hand-emergent-literacy-from-a-to-z/.

The more your child is exposed to writing, the better he’ll be able to read and study in school.