



Pinwheels for  
**PREVENTION**

**Prevent Child Abuse  
Florida**



*Family Development: A Caregiver's Guide*



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# **Family Development A Caregiver's Guide**

# Dear Parent or Caregiver:

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

Parents and caregivers who have a social network and concrete support in times of need are better able to

provide safe environments and nurturing experiences for their children. All families need a helping hand at some point, so we want to be sure you know that help is available when you need it.

## **This book provides information about:**

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

## community resources

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

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

\*This guide is also available as an e-book for smart phones, tablets or other mobile devices. Download the free e-book at:

**[www.dcf.state.fl.us/programs/chilc](http://www.dcf.state.fl.us/programs/chilc)**

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*Published in 2015*

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# Why the Early Years Are So Important

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

develop all of his or her abilities.

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

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

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



peer group and society.

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

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

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

Failing to progress in one area affects the ability to progress in all other areas.

Development in each of these areas happens in stages and each child will develop at his or her own rate.

Developmental guidelines simply show what a child of that age could do—if not right now, then soon. If your child was premature, keep in mind that babies born early usually need a bit more time to meet their milestones. Professionals like doctors, nurses, early learning providers and home visitors can help you track your child's development, identify possible concerns and make

referrals for help when needed. Discovering and treating health issues or developmental delays early can help prevent more serious problems later in life.

## **A Word about Discipline and Safety**

As children grow and develop, their needs for discipline and safety will change. Discipline, which means “to teach,” is not something infants or toddlers can understand. They also do not understand danger. Babies are curious and will play with just about anything. The only way to discipline an infant is to make sure

they are safe in their surroundings so they can explore and learn about the world. For example, if you do not want your baby to stick his finger in the electrical outlet, then you need to cover the outlet with safety caps. More examples of how to meet your child's needs for discipline and safety at each stage of development are included in the following pages of this booklet.

**CHILDPROOFING alone will not keep your child safe.**

Childproofing increases the amount of time it takes for your child to get into a dangerous situation, but it does not replace ADULT

SUPERVISION.

# **PARENTING & CHILD DEVELOPMENT**

## **Your Child at Birth**

The moment you've been dreaming of has finally come! You are now the proud parent of a tiny little bundle of joy. Feeling anxious? Overwhelmed? Exhausted? Then it's official, you are a new parent! You may be surprised by all of the new emotions, new

experiences and new worries that come along with your new baby. As you begin to adjust to your new life, try to remember that getting as much information and support as you can now will help you make the best decisions for your family in the days ahead.

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

**Sleep** Newborns may sleep up to 20

hours a day, but will not have any sort of sleep pattern for the first two months. It can take up to six weeks for babies to learn to be awake during the day and asleep at night. Let babies form their own schedule by feeding them when they are hungry and putting them to bed when they seem tired.

**Nutrition** Newborns need to be fed every two to four hours. The American Academy of Pediatrics and many other worldwide organizations strongly support breastfeeding. Baby formula is a popular alternative to breastfeeding for infants less than one year of age.



To meet your baby's nutritional needs, baby formula must be prepared exactly as described on the container.

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

- Has almost fully developed senses of taste and smell

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

## **Social and Emotional Development**

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

**Cognitive Development** Babies respond purely through reflexes at

birth. Some common reflexes are:

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

## Your Newborn's Safety

**Safe Infant Sleep** According to the American Academy of Pediatrics,

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

- The crib mattress should fit tightly in its frame and have a snug fitted sheet
- The crib should be undamaged and meet current Consumer Product Safety guidelines ([www.cpsc.gov](http://www.cpsc.gov))
- If a blanket is needed, babies should be placed near the foot of the crib and a thin blanket should be tucked around the

sides and bottom of the mattress to avoid covering the baby's head

- No other objects should be placed in the crib
- The crib should always be placed in a room that is smoke free
- Offering a pacifier has also been linked to a decreased risk of Sudden Infant Death Syndrome (SIDS)

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

**Other Safety Tips for Newborns** A Home Safety Checklist should be

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

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

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

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

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

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

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

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

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

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

- Always placing your newborn in a rear facing infant car seat



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

## **Positive Parenting Activities that Promote Nurturing and Attachment**

- Breastfeeding
- Responding promptly to your baby's cries
- Rocking, singing and comforting your baby
- Maintaining loving relationships with other caregivers

- Keeping primary caregivers consistent over time so attachments can form

# Safe Sleep for Your Baby

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

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

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

*—The American Academy of Pediatrics*

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

- Place babies on their backs (face up), every time they sleep. Sleeping on the stomach or side increases the risk of suffocation. Once an infant can roll from back to stomach and

stomach to back, the infant can remain in the sleeping position they choose.

- Make sure your baby's crib is in good condition and meets current Consumer Products Safety Commission standards ([www.cpsc.gov](http://www.cpsc.gov)).
- Use a firm crib mattress that fits tightly in the crib's frame and cover it with only a tightly fitted sheet.
- Keep soft objects and loose bedding (pillows, quilts, comforters, sheepskins, toys, etc) out of your baby's crib.
- Place your baby's crib close to

your bed until your baby is six months old. Infants may be brought into the bed for feeding or comforting, but should be returned to their own crib or bassinet when the parent or caregiver is ready to return to sleep.

- Keep all loose strings (i.e. blind cords, electrical cords and clothing) away from your baby's crib.
- Keep the room temperature of your baby's sleeping area comfortable for a lightly clothed adult. This will help keep your baby from getting too hot or

overheated.

- Use infant sleep clothing designed to keep your baby warm without the possible hazard of head covering or entrapment; but over-bundling should be avoided due to the possibility of overheating. Infants are typically comfortable with one layer more than an adult would wear to be comfortable in the same environment.
- Offer your baby a pacifier\*, but never a bottle, at naptime and bedtime. If your baby doesn't want the pacifier, don't force it.

If breastfeeding, wait until breastfeeding is well established before offering a pacifier.

- Avoid exposing your baby to smoke both during pregnancy and after birth, as exposure to smoke is a major risk factor for SIDS.
- If your baby's crib has a mobile, make sure it is out of your baby's reach. Once your baby can sit up, remove the mobile.
- To keep your baby from falling out of the crib, lower the mattress when your baby learns to sit, and again when he learns



to stand.

- Respond to your baby's cries during the night.
- 

## **\*IMPORTANT INFORMATION!**

Research shows that using a pacifier may decrease SIDS. The American Academy of Pediatrics recommends pacifier use throughout the first year of life.

Here are some tips for pacifier use:

- The pacifier should be used when placing the infant down for sleep. It is okay if they baby spits it out during sleep.

- If the infant refuses the pacifier, he or she should not be forced to take it.
  - Pacifiers should not be coated in any sweet solution.
  - Pacifiers should be cleaned often and replaced regularly.
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# **Better Sleep for You and Your Baby**

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

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## IMPORTANT INFORMATION!

**Sleeping with your baby is dangerous.**

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

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## 10 tips to help your baby sleep at night

1. Make sure your baby has active playtime, such as “tummy time,” during the day.
2. Respond to your baby’s needs quickly during the day to reduce your baby’s stress.
3. Allow for skin-to-skin contact during the day.
4. Keep a consistent schedule for meals, naps and bedtime.
5. Use a bedtime routine of three or four relaxing activities to help your baby wind down (giving your baby a bath, gently massaging muscles, and

then spending a short period of quiet time together). Research has shown that babies who have a bedtime routine fall asleep 30% faster, wake up 50% less often, and sleep for longer stretches of time.

6. Talk or sing softly to your baby before bed. Just the sound of your voice is very soothing to your baby.
7. Put your baby in the crib when he or she begins to look tired, but is still awake. Putting babies to bed while they are tired, but still awake, helps them learn to fall asleep on

their own.

8. If your baby seems restless at bedtime, put your baby to bed 30 minutes earlier. When babies become overtired, they sometimes become energetic and fight off sleep.
9. Play soft music, turn on a fan or put a ticking clock near your baby's crib. Listening to repetitive sounds lulls babies off to sleep. Continuing normal household activities while babies sleep helps them learn to sleep without silence.
10. Place a warm towel down on your baby's sheet and remove

it just before you place your baby down.

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

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***For more information on safe infant sleep, visit [www.ounce.org/safe-sleep.html](http://www.ounce.org/safe-sleep.html)***



# **Your Child at Two Months**

Your baby is growing very quickly and learning a lot. Your baby's brain is developing through a series of back and forth interactions. Babies and young children naturally reach out for interaction by babbling and making facial expressions. By consistently responding to these efforts in a warm and loving way, you are creating a nurturing environment. At this age, it's important to spend a lot of time cuddling, playing, reading and talking

with your baby. Over time, these interactions help infants form strong attachments with their parents. These early attachments create patterns for the way the child connects with people later in life.

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

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

## **Physical Development**

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

## **Social and Emotional Development**

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

## **Cognitive Development**

- Uses taste, touch, smell, sight, and sound to learn about the

environment

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

## **Additional Safety Tips for Your Baby at Two Months**

A Home Safety Checklist should be

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

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

## Positive Parenting Activities that Promote Nurturing and Attachment

- Always respond to your baby's cries and try to figure out what your baby is trying to say to you
- When you hear your baby cooing, coo, sing or talk in return
- Hold and touch your baby as much as possible
- Look into your baby's eyes and talk to your baby during feedings and diaper changes
- Practice being patient. Having patience is very important for your child's overall development.

Babies are just learning what is in the world; it will take time before they know how to behave in it!

## **When to be Concerned**

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

- Doesn't seem to respond to



loud sounds

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

# Coping with Crying

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

- Crying happens most often in

the evenings

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

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

- Check your baby's basic needs: feed, burp or change baby's diaper if needed
- Make sure your baby's clothing is not too tight, too hot, too

cold, etc.

- Offer your baby a pacifier, but never force it

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

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

- Give your baby a warm bath

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

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

your baby

Dealing with a crying baby can be very stressful, but **NEVER SHAKE YOUR BABY!** Shaking a baby can cause blindness, brain damage or even death. If you are feeling overwhelmed, it is important to reach out for support. Ask a family member or trusted friend to watch the baby and give you a break.

## **Soothe, Don't Shake Your Baby**

Everyone that cares for your child should know about Shaken Baby Syndrome. Shaken Baby Syndrome (SBS) is one of the most common

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

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

- Unable to turn head
- Extreme irritability, often misdiagnosed as colic
- Feeding problems or decreased appetite
- Inability to suck or swallow
- Vomiting
- Lethargy or poor muscle tone
- Inability to follow movements with eyes
- No smiling or vocalization (cooing, gurgling, etc.)
- Rigidity



- Seizures or convulsions; rolling of eyes upward into head
- Pale or bluish skin
- Coma or loss of consciousness
- Difficulty breathing
- Dilated pupils
- Blood spots/pooling of blood in eyes
- Bruises on shoulders, neck, ribs, upper arms, arms, wrists

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

The Florida Department of Health

contributed to the content of this tip sheet. For more information, visit their website at [www.doh.state.fl.us](http://www.doh.state.fl.us).

# Your Child at Four to Six Months

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

skills!

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

**Nutrition** Discuss your baby's

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

## **Physical Development**

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

## **Social/Emotional Development**

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

## **Cognitive Development**

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

## **Additional Safety Tips for Your Baby at Four to Six Months**

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

- Prevent strangulation by

removing or shortening any cords that your child can reach

- Prevent electrocution by installing protective covers on all electrical outlets
- Prevent poisoning by moving all poisonous liquids, such as cleaning supplies, to upper cabinets and shelves
- Prevent falls by keeping babies away from open windows and installing window guards on all upper level windows

**Positive Parenting Activities that Promote Nurturing and Attachment**



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

## When to be Concerned

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

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

# Your child at Six to Nine Months

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

day and your baby will try to reach any objects that look interesting.

**Sleep** At this stage, your baby still needs two or possibly three naps a day. Put your baby down to sleep for the night between 6 and 8 pm, and expect 11 to 13 hours of sleep.

However, some babies, especially those who are breastfed, may still wake for a night feeding.

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

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

allergic to a specific food, be sure to wait at least two to three days before starting another new food.

## **Physical Development**

- Develops hand-eye coordination
- Sits with, and eventually without, being supported
- Reaches for a bottle or spoon when being fed
- Transfers objects from one hand to the other
- Begins to crawl (some infants never crawl; however, by 9 months, many babies will)
- Starts to stand (this

developmental stage varies for each child; however, some infants are able to pull themselves up and hold onto furniture by 9 months)

## **Social and Emotional Development**

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

anxiety)

## **Cognitive Development**

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

**Additional Safety Tips for Your Baby at Six to Nine Months**



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

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

reach

- Prevent falls by using child safety gates at the top and bottom of all staircases
- Prevent poisoning and other injuries by keeping purses and wallets out of baby's reach

## **Positive Parenting Activities that Promote Nurturing and Attachment**

Help your baby cope with separation anxiety by:

- Explaining that you are going to leave, but that you'll return
- Always saying goodbye when

you leave your baby to help teach your baby that you will come back

- Providing a comfort object that will help your baby feel close to you while you are away

## **When to be Concerned**

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

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

# **Your child at Nine to Twelve Months**

By the end of the first year of life, your baby's body weight will have tripled and body length will have doubled. Babies this age are very good at expressing their feelings with their gestures, sounds and facial expressions. They can engage in "conversation," for example, handing things back and forth or imitating sounds and actions. They also understand "cause and effect"—and that they can make

something happen: “If I drop this food from my highchair, it will fall on the floor,” or “If I cry, mom or dad will come get me.” Following a consistent routine helps babies know what to expect and how to behave.

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

During this stage of development, it is normal for babies to cry at bedtime because they feel scared when a parent leaves the room. Establishing a bed time routine that includes quiet activities together will help lessen fear and stress. When putting babies to bed, give them some time to fall asleep on their own. If crying continues, check in on your baby, but do not pick your baby up. Instead, rub your baby's tummy and talk softly to help your baby relax and fall asleep. For more nighttime tips, turn to Better Sleep for You and Your Baby on page 6.

**Nutrition** By the time babies are

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

Serve foods that offer new tastes and textures; but be sure they are soft, easily gummed and digestible. Examples include Cheerios® with small pieces of bananas; pieces of cheese and well-cooked pasta;



steamed vegetables such as zucchini, peas and carrots. Cut foods into safe, bite-sized pieces and avoid any foods that need to be chewed. It is very important to supervise your child constantly during feeding times.

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

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

## **Physical Development**

- Crawls forward on belly
- Sits up without assistance
- Pulls self up to stand
- Walks two or three steps without support
- Walks holding onto furniture

- Takes objects out of containers
- Pokes with index finger

## **Social and Emotional Development**

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

## **Cognitive Development**

- Responds to “no”
- Babbles with inflections:

changes in tones

- Makes sounds like “mama” and “dada”
- Finds hidden toys and other objects
- Begins to use things correctly: drinks from cups, listens in a phone
- Explores items in different ways: banging, shaking, throwing, etc.

## **Additional Safety Tips for Your Baby at Nine to Twelve Months**

A Home Safety Checklist should be completed at each stage of your child’s development. A sample

checklist is provided for you on page 57.

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

of television sets

- Prevent poisoning by storing medications where children cannot get them

## Positive Parenting Activities that Promote Nurturing and Attachment

- Playing games like hide-and-seek and peek-a-boo helps your baby learn to cope with separation and feel secure that you always come back
- Respond to your baby's cries at night, but avoid picking your baby up to rock him or her back to sleep—falling asleep in your

arms makes it more difficult for your baby to learn how to get back to sleep on his or her own

- When saying “goodbye,” tell her you will miss her, and that you will return
- When your baby does something you don’t like or that may be dangerous, distract him or her from the activity by quickly providing something else to do. For example, as your child reaches for a lamp, you quickly pick your child up and say, “Let’s go read this book.”
- Redirect unwanted behavior by showing and teaching your child

the right way to use something. For example, if your child is drawing on books, take the books away and say, “Books are not for drawing on.” At the same time, give the child paper saying, “If you want to draw on something, draw on this paper.” If your child is throwing blocks, you can take away the blocks and give him a soft ball to throw.

## **When to be Concerned**

While each baby develops at his or her own pace, you should be aware of certain milestones your child



should be reaching. Failure to reach certain milestones may be a sign of medical or developmental problems requiring special attention. You should let your baby's doctor know if at nine months your child:

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

caregiver

- Doesn't seem to enjoy being around people

# Your Child at 12 to 18 Months

At 12 to 18 months, your child is still growing quickly, but not as noticeably as during the first year. This developmental stage will be filled with firsts. Some baby's will learn to say their first words or take their first steps, while just about all toddlers will begin to make their first efforts at independence. As children begin to walk, run and climb, they will gain confidence and a greater sense of independence. Children this

age are also curious about the nature of people and things. Your child needs encouragement and freedom to explore, as well as clear boundaries and limits to feel safe.

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

**Sleep** At this age, your child needs about 14 hours of sleep in a 24-hour period. Most children will start giving

up their morning nap and instead take one longer afternoon nap per day. As children adjust to less napping, they may be ready for bed a little earlier—anytime between 6 and 8 pm.

## **Nutrition**

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

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

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

**DRINKING:** By 12 months, your baby is ready to stop drinking formula and begin drinking up to 24 ounces of whole milk a day. Give

your baby milk from a cup rather than a bottle. Don't forget to offer water throughout the day.

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

## **Physical Development**

- Walks without help
- Enjoys holding objects while walking—often one in each hand
- Holds a crayon and scribbles (but with little control)
- Gestures or points to indicate wants

- Turns pages in a book
- Likes to push, pull and dump things

## **Social and Emotional Development**

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

## **Cognitive Development**

- Understands and follows simple, one-step directions
- Says about 8 to 20 words, including “hi” and “bye”



- Identifies objects in a book when asked
- Pays attention to conversations

## **Additional Safety Tips for Your Baby at 12 to 18 Months**

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

- Most toddler falls are from windows and balconies. Help prevent falls by moving furniture away from windows, installing window guards and securing balcony doors with child-resistant latches.
- Prevent motor vehicle injuries by placing your baby in an appropriate rear-facing car seat. Infants and toddlers should ride in a rear-facing car seat until they are at least two years old or until they reach the highest weight or height allowed by the car seat manufacturer. Never leave you child alone in

the car, not even for a minute. The temperature inside a car can reach deadly levels in minutes, even in mild weather.

- Prevent burns by blocking the kitchen with gates and keeping hot liquids out of reach
- Prevent drowning by installing safety latches on toilets, emptying buckets and keeping pet water bowls out of your child's reach
- Prevent poisoning by installing latches on drawers, cabinets and anyplace where medications or cleaning materials are kept; call Poison

Control immediately if you think your child has swallowed something poisonous: 1-800-222-1222.

## **Positive Parenting Activities that Promote Nurturing and Attachment**

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

## appropriate discipline techniques:

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

is never an effective form of discipline.

## When to be Concerned

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

- Does not crawl
- Drags one side of body while crawling for over one month
- Cannot stand while supported
- Doesn't search for objects that are hidden while he watches
- Says no single words
- Does not point to objects or

pictures

- Does not use gestures such as waving or shaking head

# Teaching Your Child to Use the Potty

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

**Are YOU ready for potty training?**

A few things you should think about include:



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

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

## signals:

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

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

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

make the child feel bad, and training will take longer.

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

## FIRST STEPS

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

do the following:

1. For the first few weeks, let your child sit on the potty with clothes on while you explain what the toilet is and when to use it.
2. Once your child is used to sitting on the potty, try it with the diaper off. Make the potty part of the daily routine, slowly increasing from one time to several times each day.
3. Try changing your child's diaper while he or she is seated on the potty. Dropping the contents of the dirty diaper into the potty helps your child understand

what the potty is for.

4. Let your child play near the potty without a diaper and remind him or her to use the potty as needed. Children may forget or miss at first, but don't get angry. Wait until he or she goes correctly and reward and praise your child.

Like most children, your own toddler probably will take a little longer to complete nap and nighttime control. The best approach is to have your toddler to use the potty right before going to bed and as soon as he or she wakes up. Using training pants instead of diapers at

nap time and bedtime may help. There will be a few accidents, but a plastic sheet between the mattress and the bedding will keep the mattress dry. All children have these accidents. Praise your child whenever he or she makes it through the nap or night without wetting. Tell your child to call for you if he or she wakes up in the middle of the night and needs help to use the toilet.

# **Positive Parenting Tips that Promote Good Behavior in Early Childhood**

## **Keep a Schedule**

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



children to play by themselves.

## **Offer Encouragement**

Encouraging words help your child build confidence. The key to encouraging your child is to be a coach more than a cheerleader. A cheerleader says: “What a great job!” or “What a beautiful picture!” A coach uses specific praise. For example, when your child sets the table, you might say, “You did such a good job setting the table! You put the spoons and forks in the right place and remembered the napkins!” When you look at a child’s painting, you might say, “This painting just glows with color. You used blue,

green, red, yellow and orange. Tell me how you did this!” Specific praise means a lot more to a child than a brief, “You are great.”

### **Additional tips:**

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

children

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## **Change Your Approach**

*Instead of:* “Don’t leave your toy there.” *Try:* “Take your toy back to your room.”

*Instead of:* “Don’t touch anything.” *Try:* “We are just looking at these things.”

*Instead of:* “Don’t kick her.” *Try:* “Kicking hurts, use your words to tell her you are upset.”

## **Use Simple Explanations and Alternatives**

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

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

### **Practice Giving Choices\***

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

Would they like to play with blocks or books?

\*Avoid asking if your child is *ready*

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

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# Your Child at 18 to 24 Months

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

memory skills improve. He or she may also be finding it easier to understand and respond to simple requests.

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

**Sleep** Most toddlers sleep about 14 hours a day. They often take one nap a day, usually from about 1 to 3 pm, and go to bed between 6 and 8

pm. It is still important to sleep during the day. If children are well rested, they fall asleep easier and sleep longer during the night.

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

- Giving five to six small meals per day
- Offering finger foods toddlers can feed themselves



- Making meals fun by serving foods with a variety of colors, textures and tastes

## **Physical Development**

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

## **Social and Emotional Development**

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

## **Cognitive Development**

- Refers to self by name and uses the words “me” and “mine”
- Says 30 to 50 words
- Copies single words spoken by someone else and uses the words “please” and “thank you” if asked

- Chooses between two objects
- Enjoys humming or trying to sing familiar songs
- Uses two to three word sentences

## **Additional Safety Tips for Your Baby at 18 to 24 Months**

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

- Prevent climbing accidents by using "L" brackets to secure large objects and furniture and installing window guards to

prevent your child from falling out

- Reduce the risk of injuries from falls by seeking out playgrounds with soft surfaces like sand, woodchips or rubber
- Prevent poisoning by never referring to vitamins or medicine as candy
- Prevent burns by keeping matches and lighters out of children's reach and avoiding use of portable heaters in rooms where children play or sleep

**Positive Parenting Activities that Promote Nurturing and**

## Attachment

- Praise good behavior
- Ignore small incidents and accidents, such as spilled milk
- Give your child the opportunity to correct misbehavior by giving a second chance
- Never use spanking or other physical punishment and limit your use of the word “no”
- Model good behavior
- Talk and read to your child every day to encourage language development
- When you leave, give your child an object that will soothe him and make him feel close to you

- To encourage good behavior from your child, you should try to be patient as well as clear and consistent with your rules and consequences

## **When to be Concerned**

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

- Cannot walk
- Fails to develop a mature heel-toe walking pattern after several months of walking, or walks exclusively on toes
- Does not speak at least 15

words

- Does not seem to know the function of common household objects (brush, telephone, fork, and spoon)

# Your Child at 24 to 36 Months

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

**Sleep** For many children this age,



it's time to leave the crib and move on to a bed.

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

calmly take him or her back to bed until he or she learns to stay there.

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

- Avoid the use of food as a reward

- Avoid withholding food as a punishment

## **Physical Development**

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

## **Social and Emotional**

## **Development**

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

## **Cognitive Development**

- Calls self by own name

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

## **Additional Safety Tips for Your Child at 24 to 36 Months**

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

57.

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

## **Positive Parenting Activities that Promote Nurturing and Attachment**

- Try to remain patient and keep your cool during temper tantrums.

- Rather than using physical punishment, create consequences that relate to the behavior. For example, if your child colors on the wall, take away all the crayons and explain that he can try again later to play with crayons.
- Stay in control and do not give in to unreasonable requests. For example, when it is time to eat or go to bed, take away toys.
- When children are upset about being disciplined, allow time for both you and them to calm down before trying to talk to

them about their behavior. Let them know you understand how they feel, but that certain behavior is not acceptable.

- Avoid problem situations. If your child is likely to become unreasonable when he's hungry, remember to carry snacks with you.

## **When to be Concerned**

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

- Cannot push a wheeled toy
- Doesn't follow simple directions



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

# Your Child at Three Years Old

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

**Sleep** Goodbye naptimes, hello bedtime struggles. Between the ages of three and four, children

commonly give up their afternoon naps. Your child should sleep anywhere from 9 to 13 hours each day. As a way of gaining control of their world, children sometimes try to resist bedtime. You can help make bedtime easier by:

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

**Nutrition** At this age, your child's eating habits should be similar to

yours. He or she should eat the same foods at the same times as you, and use child-size utensils. Choking is still a hazard because your child has not yet mastered chewing and swallowing. Avoid foods such as hard candies and cherries with pits and make portion sizes small, especially when serving:

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

## **Physical Development**

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

## **Social and Emotional Development**

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

## **Cognitive Development**

- Identifies “same” and “different” objects
- Talks in short sentences others

can understand

- Tells and remembers parts of stories

## **Additional Safety Tips for Your Three Year Old**

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

Children who have reached the weight or height limit on their rear-facing car seat should use a forward-facing car seat with a five-point harness until they reach the weight or height limit allowed by the car seat manufacturer. Now is also a

good time to get your child swimming lessons and to teach playground safety, such as not running in front of or behind swinging children.

## **Positive Parenting Activities that Promote Nurturing and Attachment**

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

certain way.

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

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

## **When to be Concerned**

According to the American Academy of Pediatrics, you should let your



doctor know if at three years old  
your child:

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

# Your Child at Four Years Old

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

**Sleep** Four year olds need at least

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

**Nutrition** Proper nutrition includes:

- Three meals a day, plus two nutritious snacks
- Limiting high sugar and high fat

foods

- Eating fruits, vegetables, lean meats and low fat dairy products

## **Physical Development**

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

## **Social and Emotional**

# Development

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

may still throw tantrums

- Enjoys pretending
- Has a vivid imagination and sometimes imaginary playmates

## **Cognitive Development**

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

directions

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

## **Additional Safety Tips for Your Child at Four Years Old**

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

- Always supervise while your child is in and around water—

- both in and outside of the home
- Teach pedestrian behavior such as crossing streets and using sidewalks and cross walks
  - If you must have a gun in the house, keep it separate from the bullets in a different locked place

## **Positive Parenting Activities that Promote Nurturing and Attachment**

Your child is quickly leaving behind baby behaviors. There are new skills your children must learn and behaviors they are learning to control. They are beginning to solve problems and learning to follow



rules. How are they processing all this new information? They are imitating the adults around them as they begin to understand many different functions in their world.

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

something important.

Children this age need to learn healthy ways to deal with anger and the importance of self-control.

Children may feel very angry and not understand how to let it out. Help them label their emotions and explain that it is ok to feel that way, but that we must still follow all the rules.

### **When to be Concerned**

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

- Still clings or cries whenever his

parents leave him

- Shows no interest in interactive games
- Ignores other children
- Doesn't respond to people outside the family
- Doesn't engage in fantasy play
- Resists dressing, sleeping, or using the toilet
- Lashes out without any self-control when angry or upset
- Cannot copy a circle
- Doesn't use sentences of more than three words
- Doesn't use "me" and "you" appropriately
- Can't tell the difference between

fantasy and reality

- Cannot understand two-part commands using prepositions (“Put the cup on the table”; “Get the ball under the couch.”)
- Can’t correctly give first and last name

# Your Child at Five Years Old

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

**Sleep** Five year olds still need lots of sleep and many will still take a nap. A good bedtime for your five

year old is 8:00 p.m. during the school year.

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

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

their growing body's  
requirements

## **Physical Development**

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

## **Social and Emotional Development**

- Is aware of gender
- Separates fantasy from reality
- Is sometimes demanding,  
sometimes eagerly cooperative
- Comforts friends and others

when they are sad

- Understands there are rules when playing games
- Expresses feelings
- Wants to please friends
- Wants to be like friends
- Agrees to rules
- Likes to sing, dance and act
- Shows more independence

## **Cognitive Development**

- Uses past, present and future tenses correctly
- Groups similar objects together
- Understands the idea of today, tomorrow and yesterday
- Identifies most letters and



numbers

- Retells a story from a picture book

## **Additional Safety Tips for Your Five Year Old**

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

Practice water safety by teaching your child to swim. Do not let your child play around any water (lake, pool, ocean, etc.) without adult supervision (even if he is a good swimmer). Always wear a life preserver or safety vest when on a

boat and childproof the pool by enclosing it in a fence with a self-closing, self-latching door.

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

## **Positive Parenting Activities that Promote Nurturing and Attachment**

Expressing appreciation for kind and thoughtful behavior is another way to set a good example for children. By reinforcing children's kind behavior, you are helping them to understand

that their kindness makes a positive difference. For example, “Emily, I’m really glad that you shared your toy with Ryan. See how much he likes playing with it?” Children need to know that the adults in their lives care about them and about others. Children who experience respect and appreciation from adults are more likely to demonstrate caring toward others.

Research says that harsh physical punishment can weaken children’s trust in adults. Physical punishment does not help children learn self-control. When adults use physical discipline, children feel angry at

adults and ashamed of themselves. When young children experience consistent and positive guidance, they are more likely to act kindly toward others.

### **When to be Concerned**

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

- Has trouble eating, sleeping, dressing or using the toilet
- Is extremely fearful or timid
- Is extremely aggressive
- Is unable to separate from parents without major protest

- Is easily distracted and unable to concentrate on any single activity for more than five minutes
- Shows little interest in playing with other children
- Refuses to respond to people in general, or responds only superficially
- Rarely uses fantasy or imitation in play
- Seems unhappy or sad much of the time
- Doesn't engage in a variety of activities
- Avoids or seems distant with other children and adults

- Doesn't express a wide range of emotions
- Cannot build a tower of six to eight blocks

# Supporting Your Child's Social Development

TEACHING CHILDREN HOW TO INTERACT WITH OTHERS IN HEALTHY WAYS will benefit them not only at school, but also throughout their lives. It will also help them recognize inappropriate behaviors such as bullying. Bullying is a pattern of aggressive behavior that makes another person feel hurt, degraded, threatened or humiliated. Some examples of bullying include name calling, pushing, leaving others

out of an activity and vandalizing personal possessions. Cyber bullying occurs when these activities take place through computer communications and the Internet.

It is important to help your child understand what bullying is and what they can do if they are bullied or see others being bullied.

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

- Talking with your child about what bullying is, why bullying is wrong and what they can do if



they witness their peers being bullied

- Providing a safe and healthy atmosphere at home
- Keeping the lines of communication open between family members
- Teaching your child the difference between appropriate and inappropriate behavior
- Teaching your child what qualities to look for in a friend, such as someone that makes them feel comfortable and likes them for who they are
- Encouraging your child to get involved in social activities like

school and community groups (parents' involvement in groups with their children may increase children's willingness to participate)

- Encouraging participation in out of school activities with a different peer group
- Encouraging children to make friends and play with others during times when bullying can occur (they are less likely to be the victim of bullying if they are not alone)
- Teaching children not to participate in teasing or hurting other children

- Teaching children that reporting bullying is different from tattling on someone- bullying hurts someone and can be stopped
- Encouraging children to seek help from teachers or other adults if they see someone being bullied (If they are scared to tell by themselves, they should seek help with a friend or even an older sibling)

All kids involved in bullying—whether they are bullied, bully others, or see bullying—can be affected. It is important to support all kids involved to make sure the bullying doesn't continue and effects can be

minimized.

## **Is Your Child Being Bullied?**

Many times kids won't ask for help, so it is important to know what to look for. If your child is at immediate risk of harming himself or others, get help right away.

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

- Shy, insecure, suffers from low self-esteem

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

**Here are some tips to help your**

## **child if he or she is being bullied:**

- Listen to what your child says
- Support your child by talking about how to solve the problem
- Avoid blaming your child for provoking the situation; this can make the child feel further victimized and may close the lines of communication
- Ask specific questions about what, who, where, and how long the bullying has been happening
- Encourage your child to continue being themselves—changing their ways for others is not the right solution to end

bullying

- Teach your child how to step away from the bullying situations instead of fighting back, which may make matters worse
- Contact the school, principal or teacher immediately

## **Avoid these mistakes:**

- Never tell the child to ignore the bullying.
- Do not blame the child for being bullied. Even if he or she provoked the bullying, no one deserves to be bullied.
- Do not tell the child to physically

fight back against the kid who is bullying. It could get the child hurt, suspended, or expelled.

- Parents should resist the urge to contact the other parents involved. It may make matters worse. School or other officials can act as mediators between parents.

**Follow-up.** Show a commitment to making bullying stop. Because bullying is behavior that repeats or has the potential to be repeated, it takes consistent effort to ensure that it stops.



# Is Your Child Bullying Others?

## Signs a Child is Bullying Others

Kids may be bullying others if they:

- Get into physical or verbal fights
- Have friends who bully others
- Are increasingly aggressive
- Get sent to the principal's office or to detention frequently
- Have unexplained extra money or new belongings
- Blame others for their problems
- Don't accept responsibility for their actions
- Are competitive and worry

about their reputation or popularity

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

- Tell your child that it is unkind to make others feel unhappy
- Tell your child that bullying is

inappropriate and explain how you expect their behavior to change (making expectations clear helps children recognize desired behavior)

- Help them recognize appropriate social skills and learn the kind of behavior that is appreciated and accepted by praising them for kind acts offered to other children
- Spend more time with your child and monitor his or her behavior
- Surround your child with positive role models
- Teach your child other ways to make and keep friends

- Seek help from school counselors

**Follow-up.** After the bullying issue is resolved, continue finding ways to help the child who bullied to understand how what they do affects other people. For example, praise acts of kindness or talk about what it means to be a good friend.

## **What Can Your Child Do to Help Stop Bullying?**

### **Bystanders**

Even if a child is not directly involved in bullying, they may be contributing

to the behavior. Witnessing the behavior may also affect the child. Here are some things bystanders can do to stop and prevent bullying:

- **Be a friend to the person being bullied.** Reaching out to the person being bullied by talking to them, sitting with them at lunch or inviting them to play during recess helps them know they are not alone.
- **Tell a trusted teacher, family member or coach.** Adults can help stop bullying, but only if they know about it. If your child has already talked to an adult and it appears nothing has

changed, you may need to get more adults involved. Teachers, counselors, custodians, nurses and parents can all help to address and prevent bullying.

- **Lend a hand.** Bystanders can sometimes help the person being bullied by causing a distraction to draw attention away from the bully, or giving the person being bullied a reason to leave the scene. For example, a bystander could say, “Come on, we need to get to class.” Or “Mr. Smith needs to see you right now.”
- **Speak up and walk away.** Let

those who bully know that it is not funny or entertaining. Don't provide an audience because that often encourages bullying behavior.

- **Set a good example.** Get involved in anti-bullying campaigns and projects.

## Cyber Bullying

Using the Internet, cell phones, or other electronic means to send or post text or images intended to hurt or embarrass another person is called cyber bullying. Cyber bullying affects almost half of all American

teens, but most victims say they have never told a parent or other adult about their negative online experiences.

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

Talk to your teens and be sure they



know they can talk to you about cyber bullying.

## **If your child is being cyber bullied:**

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

**For more information, visit:**

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[StopBullying.gov](http://StopBullying.gov)

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<http://www.pacer.org/bullying/nbpm/>

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[http://preventingbullying.  
promoteprevent.org/cyberbullying/  
interactive-scenarios](http://preventingbullying.promoteprevent.org/cyberbullying/interactive-scenarios)

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[http://www.childrenssafetynetwork.  
org/sites/childrenssafetynetwork.  
org/files/  
BullyingPreventionResources.pdf](http://www.childrenssafetynetwork.org/sites/childrenssafetynetwork.org/files/BullyingPreventionResources.pdf)

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[http://www.pinterest.com/  
childrenssafety/school-safety-  
bullying/](http://www.pinterest.com/childrenssafety/school-safety-bullying/)

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# Keeping Kids Drug Free

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

Most parents find it difficult to talk to their kids about smoking, drinking and taking drugs, but substance abuse education should begin at home long before children enter a

classroom. Open communication with your children is key to keeping them drug free. It is important to start talking with your children early and to continue emphasizing strong values throughout their teenage years. Here are some tips to help you address substance abuse with your children from an early age.

### **Ages 5 – 8**

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

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

- Model good listening skills by paying attention, allowing your child to speak without being interrupted and repeating back to your children what they said to be sure you understood.
- Practice ways to say “no” with

your children by describing situations that may make them uncomfortable, such as someone inviting them to ride their bikes in an area you have set as off-limits or someone asking them for help to cheat on a test.

## **Ages 9 – 11**

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

motivation to resist peer pressure.

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

- Teach your kids what to say if they are offered drugs or

alcohol by someone. “No thanks, I’m not into that.”

- Prepare yourself with the facts so you are able to answer questions about alcohol, tobacco and drugs.

## **Ages 12 – 14**

Since fitting in with peers matters now more than ever, kids are easily influenced by what their friends feel is suitable behavior and are exposed more and more to drugs and drug use. Talking to your child about the direct unpleasant consequences of tobacco and marijuana use, such as bad breath, smelly hair or clothes or yellow teeth, will be more valuable



than discussing the long-term consequences. Kids in this age group are more likely to see older kids doing drugs without seeing immediate consequences, so they are less likely to believe a “black-and-white” statement that drugs are bad.

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

- Alcohol and drugs can cause them to make poor decisions that can prevent them from being accepted into college, being accepted by the military

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

## **Synthetic “Designer” Drugs**

High school and college students are now commonly choosing synthetic marijuana or bath salts over marijuana, cocaine and other

drugs because they are highly promoted online, are easy to obtain and will not be detected in routine drug tests. Users begin to feel the effects of the drug within 15 minutes and can remain high for up to eight hours. Until recently, these drugs have been legal in many states; however, these drugs are very dangerous. Effects of these designer drugs include severe paranoia and hallucinations that can cause users to harm themselves or others.

**K2 and Spice** are street names for synthetic marijuana. This product is sold under a number of trade

names such as “Blaze,” “Bliss,” “Black Mamba,” “Bombay Blue,” and “Genie”. Whatever perceptions people have of marijuana, they should not underestimate the risk of this drug or make the mistake that synthetic marijuana is somehow less dangerous than cultivated marijuana. K2/Spice is a mixture of herbs or other plant materials that have been sprayed with artificial chemicals that are supposed to mimic the effects of THC, the psychoactive ingredient in marijuana. One of the signs that parents can look for is a strong clove smell. K2/Spice is typically

smoked, so parents may find a coffee grinder around the house – which is often used to reduce the product to a fine powder so that it is easier to smoke— and other drug paraphernalia such as pipes or screens.

**Bath Salts** are very different from the product that you put into a bath. The only reason why they have the same name is because the products look similar like a fine powder. Bath salts are a synthetic form of amphetamines and cocaine. The packets are marketed as “bath salts”, “plant food” or even “stain remover” and are available in

corners stores, truck stops and online. They come with an often-ignored disclaimer, “not for human consumption.” Bath salts are really a tablet or powder that is snorted, injected or smoked. They are sold in packets marked with names like Bounce, Bubbles, Energy-1, Ivory Wave, and more.

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## **What Parents Need to Know**

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

**Alcohol** Alcohol affects the central

nervous system and brain. It can make users loosen up, relax, and feel more comfortable, or it can make them more aggressive.

Unfortunately, it also lowers their inhibitions, which can set them up for embarrassing or dangerous behavior. In fact, each year approximately 5,000 young people under the age of 21 die as a result of underage drinking.

**Tobacco and Nicotine** Nicotine, the main drug in tobacco, is one of the most heavily used addictive drugs in the United States. Nicotine is highly addictive and acts as both a stimulant and a sedative to the

central nervous system. Exposure to these harmful drugs has been known to cause lung cancer, bronchial disease, emphysema, cardiovascular disease, respiratory problems and sudden infant death. Research also shows that youth who smoke cigarettes are fourteen times more likely to try marijuana as those who don't.

**Marijuana** The marijuana of today is stronger than ever before. More teens are in treatment with a primary diagnosis of marijuana dependence than for all other illegal drugs combined. Smoking marijuana leads to changes in the brain that are



similar to those caused by cocaine, heroin, or alcohol. It affects alertness, concentration, perception, coordination and reaction time, many of the skills required for safe driving and other tasks. Marijuana can also lead to bad grades, broken friendships, family problems, trouble with the law, etc.

**Cocaine** The major ways of taking cocaine are sniffing or snorting, injecting and smoking. Health risks exist regardless of whether cocaine is inhaled, injected or smoked. These risks include: the collapse of the nasal septum, paranoia, aggression, anxiety, seizures and

cardiac arrest. When combined with alcohol, there is an increased risk of sudden death.

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

**Inhalants and Huffing** Inhalants are common products found right in the

home and are among the most popular and deadly substances kids abuse. Inhalant abuse can result in death from the very first use.

According to the annual Monitoring the Future national poll, approximately one in six children will use inhalants by eighth grade. The same report notes that inhalants are most popular with younger teens. Teens use inhalants by sniffing or “snorting” fumes from containers; spraying aerosols directly into the mouth or nose; bagging, by inhaling a substance inside a paper or plastic bag; huffing from an inhalant-soaked rag; or inhaling from balloons filled

with nitrous oxide. Hazards associated with huffing include: hearing loss, brain damage, blood oxygen depletion, limb spasms and depression.

**Club Drugs** Club drugs are being used by young adults at all-night dance parties such as “raves” or “trances,” dance clubs, and bars. MDMA (Ecstasy), GHB, Rohypnol, ketamine, methamphetamine, and LSD are known to be some of the club or party drugs. It is likely that club drug use can cause a variety of behavioral and cognitive consequences as well as impair memory. Some of the physical

effects include dilated pupils, higher body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth and tremors.

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## **Preventing Prescription Drug Abuse**

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

drugs and help keep your teen drug-free:

- 1. Safeguard all drugs at home.** Monitor quantities and control access. Take note of how many pills are in a bottle or pill packet, and keep track of refills. This goes for your own medication, as well as for your teen and other members of your household. If your teen has been prescribed a drug, be sure you control the medication and monitor dosages and refills.
- 2. Set clear rules for teens about all drug use, including**

**not sharing medicine and always following the medical provider's advice and dosages.** Make sure your teen uses prescription drugs only as directed by a medical provider and follows instructions for OTC products carefully. This includes taking the proper dosage and not using with other substances without a medical provider's approval. If you have any questions about how to take a drug, call your family physician or pharmacist.

- 3. Be a good role model by following these same rules**

**with your own medicines.**

Examine your own behavior to ensure you set a good example. If you misuse your prescription drugs, such as share them with your kids, or abuse them, your teen will notice. Avoid sharing your drugs and always follow your medical provider's instructions.

**4. Properly conceal and dispose of old or unneeded medicines in the trash.**

Unneeded prescription drugs should be hidden and thrown away in the trash. To discourage teens or others



from taking them out of the trash, you can mix them with an undesirable substance (like used coffee grounds or kitty litter) and put the mixture in an empty can or bag. Unless the directions say otherwise, do NOT flush medications down the drain or toilet because the chemicals can pollute the water supply. Also, remove any personal, identifiable information from prescription bottles or pill packages before you throw them away.

5. **Ask friends and family to safeguard their prescription**

**drugs as well.** Make sure your friends and relatives, especially grandparents, know about the risks too. Encourage them to regularly monitor their own medicine cabinets. If there are other households your teen has access to, talk to those families as well about the importance of safeguarding medications. If you don't know the parents of your child's friends, then make an effort to get to know them, and get on the same page about rules and expectations for use of all drugs, including alcohol and

illicit drugs. Follow up with your teen's school administration to find out what they are doing to address the issue of prescription and over-the-counter drug abuse in schools.

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

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**Painkillers** Painkillers are drugs commonly prescribed for pain and

are only legally available by prescription. Brand names include: Vicodin, Tylenol with Codeine, OxyContin, and Percocet. Painkiller abuse can be dangerous, even deadly with too high a dose or when taken with other drugs, like alcohol. Short-term effects of painkiller abuse may include drowsiness, inability to concentrate, apathy, lack of energy, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and most significantly, respiratory depression. If a teen abuses painkillers for a period of time, he can become addicted to the drug

and experience withdrawal symptoms when he stops taking the drug. Associated with addiction is tolerance, which means more and more of the drug, or a combination of drugs, is needed to produce the same high or euphoric feeling, possibly leading to overdose.

### ***What Is a Painkiller Overdose?***

Physical signs of painkiller overdose include pinpoint pupils, cold and clammy skin, confusion, convulsions, severe drowsiness, and slow or troubled breathing

### ***Are Teens Abusing Painkillers?***

Painkillers like OxyContin and

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

## **Additional Tips**

- Eat dinner together on a regular basis to stay connected with your kids and communicate your family values. Among teenagers who eat dinner with their parents six or seven times a week, 93 percent have not smoked a cigarette in the last month and have not attended drinking parties in the last six months.
- Let your children know that you do not approve of them trying drugs, alcohol or tobacco. Set clear expectations and be consistent in enforcing consequences.

- Educate yourself on the names of drugs and the effects they have on a person so you can give your children the facts. Giving them misleading information will only discredit you as a source of information on these topics.
- If your children come home from school with information about Keeping Kids Drug Free, ask them about it and reinforce the message at home. More importantly, listen to what your children have to say.
- Promote positive decision-making. Letting your children



make age-appropriate decisions will help them feel good about themselves and the choices they make. This will help your children develop self-confidence, which will help them reject peer pressure.

- Be involved in your children's lives. Get to know their friends, their friend's parents, who they hang out with and what they talk about. Work with the parents of your children's friends to set up rules about curfews, unchaperoned parties and other social activities.

**For more information and tips,**

visit [www.drugfree.org](http://www.drugfree.org).

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

# **Your School-Age Child (6-12 years old)**

Although school-age children seem so grown up, their social skills are not yet well developed. They may argue and fight a great deal with friends. School-aged children need a lot of help learning social skills like how to make friends, trust others, work in a team and resolve conflicts. Children also need to be taught how to use good manners, ask for help and negotiate with others. Often they have to be reminded to carry

out homework responsibilities or household chores. Learning self-discipline is an ongoing process that improves each year.

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

## **Physical Development**

- Needs vision, dental, and hearing to be checked starting in the first grade
- Grows very slowly, so there is a

huge range of weight and height differences

- Needs parents to provide a healthy diet as obesity sometimes becomes a problem during middle childhood; fast food should be limited
- Develops coarser skin; freckles and moles may begin to appear
- Begins to lose baby teeth
- Coordinates many motor skills (jumping, skipping and running)
- Begins to focus on “competition” rather than “cooperation”

## **Social/Emotional Development**

- Develops a greater

understanding of themselves and their role in the family, at school and in the community

- Gains greater control of their emotions and becomes less fearful
- Learns to value themselves and develop an overall sense of self-worth
- Has opportunities for socializing outside of the family
- Begins to worry about making mistakes, being ridiculed or failing in school
- Interacts in a give-and-take fashion when playing with peers
- Prefers other children who are

outgoing and supportive

- Interacts more effectively when parents have been affectionate, warm and accepting with them, and less effectively when there is stress in the family

## **Cognitive Development**

- Needs clear, concrete and specific directions (there are still limitations in their thinking and parents need keep that in mind)
- Uses visual cues and objects to help them solve problems
- Uses reason in logical steps in order to solve problems
- Has improved memory

- Understands cause and effect
- Understands what is real and what is not real

## **Additional Safety Tips for Your School-Age Child**

**Parents need to provide education and supervision to prevent passenger and pedestrian accidents, drowning and serious burns, which are the leading causes of death for school-age children.**

- All children whose weight or height is above the forward-facing limit for their car seat should use a belt-positioning



booster seat until the vehicle seat belt fits properly. This is typically when they have reached 4 feet 9 inches in height and are between 8 and 12 years old. Children under the age of 13 should always ride in the back seat.

- Texting, talking or listening to music through earbuds is distracting and prevent students from seeing and responding to dangerous situations. Make sure your children put away their phones and other electronics when walking, biking, or using other forms of

transportation so they can pay attention to their surroundings.

- Make sure your child's bicycle, skateboard, scooter or skates are the right size for your child and that your child knows traffic and pedestrian rules and always wears a helmet.
- Teach your children how to swim and remind them about water safety around the home and while visiting friends and neighbors.
- Teach your children about the dangers of playing with matches and lighters and the safety rules for using barbecues and stoves.

## **When to be Concerned**

Children develop at various rates, but if your child's physical, emotional or cognitive development appears to be outside the normal range, talk to a healthcare provider. Talking to your child, their teachers and their friends' parents will help you learn about any possible problems your child may be having.

# **Positive Parenting Tips that Promote Good Behavior in Middle Childhood**

## **Natural and Logical Consequences**

Natural and logical consequences are effective in helping children see the connection between their actions and the results of their behavior.

Natural consequences include the results of a child's actions without any adult interference. For example,

the natural consequence of refusing to eat is hunger. Playing in rain puddles will result in wet socks and shoes.

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

When natural consequences are unsafe for a child, you can use logical consequences to help the child correct behavior. Logical consequences require adult intervention. A logical consequence

for an 8-year-old not studying for a test because he/she was talking on the phone with friends could be losing the privilege of talking to friends on the phone until grades improve.

The following examples also illustrate the use of logical consequences:

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

behavior may result in a child writing an essay for the parent.

## **Additional tips:**

- Since middle childhood brings about a better understanding of reasoning, parents may have to give more detailed explanations for expected behaviors.
- Have your child help out with setting limits and consequences.
- Parental listening skills and nurturing continue to be important.
- Children in middle childhood need to feel they have done a job well to build healthy self-

confidence.

- Helping out at home gives school-age children a sense of belonging, mastery and confidence.
- Monitor and guide children from a distance as they move into new activities on their own.
- Interact with all children in a warm, accepting, yet firm manner at all times.
- Structure the home environment so that children can meet school responsibilities.
- Become involved with and support your children in activities outside of the home



(i.e. school, sports teams and organized activities).

- Help your children deal with social problems such as social isolation, aggression and bullying by talking openly with them.
- Monitor the amount and content of television watching.

# **Managing Your Child's Use of Multi-Media**

FROM TELEVISION AND RADIO TO VIDEO GAMES, SOCIAL MEDIA AND CELL PHONES, OUR KIDS ARE “PLUGGED IN” MORE THAN EVER BEFORE. Multi-media tools can be a valuable source of information, entertainment and communication. However, excessive use of media can lead to obesity, interfere with sleep and school, and lead to aggressiveness and other behavior problems. Education and

parent involvement can help kids benefit from technology while also protecting them from danger. Here are some ideas you can use to help your child use media responsibly, followed by a few web sites you can visit for more ideas and information.

- 1. Set Ground Rules.** Agree on what is reasonable for each child, from the amount of time they can spend online each week, to which sites they can visit without permission. The American Academy of Pediatrics recommends limiting entertainment screen time to no more than two hours a day.

**2. Explain Safety Rules.** When children know what you expect of them and have clear, consistent consequences for not following rules, they are more likely to follow rules and avoid dangerous situations.

- If young children are searching for information online, it is a good idea to assist them during the search process and then let them navigate the sites once you are sure they are safe
- **Personal Information** Let your children know that it is

dangerous to reveal any personal information about themselves to someone they meet online. This includes their names, where they live, their ages, the school they attend or where their parents work. Tell them to let you know if someone is asking for this information while they are online. Be sure to praise them when they follow through with this rule. Also, tell your children it is never a good idea to share user names, logins or

passwords with friends or people they chat with online. This is personal information and should not be shared.

- **Pictures** Do not allow your children to send any pictures of themselves to someone online without your permission.
- **Meeting in Real Life** Tell your children never to get together with someone they meet online without your permission. If your children make a friend online they wish to meet in person, go

with them to a public place to meet the person.

- **Cyber Bullying** Have your child agree never to post anything that is mean toward another person online. If someone sends your children a nasty message, tell them to let you know so that you can report it to the website.

**3. Keep the Computer in a Common Room.** When everyone in the house can see the screen, there is a better chance kids will follow the rules of online safety. Children who

have computers with Internet access in their bedrooms are more likely to come across inappropriate content online.

- 4. Supervise.** Just as we want to know where our children are physically, who they are with and what they are doing, we need to know where they are going on the Internet and whom they are meeting there. When kids are first learning about the Internet, use the Internet with them.
- 5. Respectfully Monitor Online Activity.** Online activities are



unrestricted and open for your review. Checking up on children online for their safety is very different from looking through their rooms for their private diaries. What is available about your children online could place them at risk, while personal thoughts they journal and keep to themselves allow for healthy self-expression and reflection.

- **Social Media** Pre-teens should not have accounts on major social media sites. If you have young children, you can create accounts for them on sites

that are designed specifically for kids their age. If you want to see if your children have online profiles, such as Instagram or Facebook, you can search the Internet by inserting your children's names, or their friend's names, into a search engine like Google. If your children have online profiles, let them know you need to see them, perhaps tomorrow. Give them a chance to look at their profiles and think about the

content. Learn about social media privacy setting and help your children understand how to use these settings to protect their private information and reduce their “digital footprint”. Tell them to never accept “friend requests” from people they do not know.

- **Browser History** Check your computer’s history. This will tell you what websites were viewed recently. However, many children and adolescents

know how to clear a browser history or delete records of certain web sites. Fewer children will clear cookie files. If the history is consistently empty, your computer may be set to automatically delete the history each time you exit out of the Internet. This is a feature that you can easily disable.

- **Filtering/Monitoring Software** Check with your Internet service provider to see what free filtering and monitoring options are

available. Software can track how much time kids spend online, allow them to access the Internet during only certain times of day when you know you will be home, and filter content so children aren't accidentally exposed to inappropriate content while doing a search on the Internet. Software programs can be a big help, but there is no substitute for adult supervision.

- **Smart Phones** If your child has a smart phone, ask

your cell phone service provider how to filter your child's Internet usage, limit usage and block certain content or phone numbers. You should also password protect your child's phone and have the screen automatically lock after a few minutes of non-use. Teach them to use the caller ID and not to respond to calls or texts from anyone they do not know.

**6. Talk to Your Children.** Music, television, magazines, and the

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

By establishing clear expectations with your children, and supervising and monitoring their online activity,

you are being a responsible parent. If you feel your children are hiding their online activities from you, or you believe they might be in danger, it is up to you to find out what is going on.

Websites with additional information about keeping kids safe online:

### **Web Safety Guides**

[www.getnetwise.org](http://www.getnetwise.org)

[www.ikeepsafe.org](http://www.ikeepsafe.org)

[www.cybertipline.com](http://www.cybertipline.com)

### **Safe Sites for Kids & Tools for Adults**



[www.netmom.com](http://www.netmom.com)

[www.seniornet.org](http://www.seniornet.org)

## **Supervision Tools**

[www.netlingo.com](http://www.netlingo.com)

[www.teenchatdecoder.com](http://www.teenchatdecoder.com)

[www.mymobilewatchdog.com](http://www.mymobilewatchdog.com)

<http://kids.getnetwise.org/>

# Your Teenager

Many parents that have raised teenagers say the two hardest times in life came when they were a teenager and when they raised a teenager. Adolescence, the period from 13-17 years of age, is a time of energy, passion and emerging identity. During this stage, teenagers' bodies and minds are growing. As they grow, heredity, culture, health and nutrition will influence developmental changes. Parents and caregivers need to accept that

maturing is a natural process. This process helps youth grow toward independence so that as adults, they will be prepared to manage their own feelings, thoughts and actions. Parents often struggle with how to deal with their adolescents. Although your child seems to want little to do with you right now, teenagers still need nurturing, support and guidance to become independent adults.

## **Sleep**

Even if your child used to wake up fresh and energetic to start the day, you may have noticed that your young teen now finds it difficult to fall

asleep at night and is extremely drowsy and difficult to wake in the mornings. Researchers have found that this is because the biological clock of teens shifts forward, creating a “forbidden” zone for sleep around 9 or 10 p.m.

Putting good sleep habits into practice is difficult for teenagers, but not impossible. Sleep experts say getting lots of daylight in the morning and exercising during the day, then dimming the lights at night and sticking to a routine bedtime of 10 p.m., can help to reset the body clock. It may also help to sleep in a cool environment and turn off all

electronic devices at least two hours before going to bed. While an extra hour of sleep on the weekends can be helpful, if a student is used to getting up at 6:30 a.m., they shouldn't sleep until noon on the weekend because that will simply confuse their bodies and disrupt their sleep pattern for the following week.

## **Nutrition**

The body demands more calories during early adolescence than at any other time of life. Calorie needs vary widely based on size and activity level. On average, boys require about 2,800 calories per day and girls require about 2,200 calories per

day. Typically, the ravenous hunger starts to decrease once a child has stopped growing, though not always. Kids who are big and tall, or who participate in physical activity, will still need increased amounts of energy into late adolescence. These calories should come from nutrient-rich foods, including grains, fruits, vegetables, protein and dairy products. The amount of fat, especially saturated and trans fat, and sugar should be limited.

Specific nutrients, like iron and calcium, are especially important during the teen years because of the special roles they play in

development. Lack of iron can lead to anemia and sluggish feelings during the day, negatively affecting alertness in school, at work and even during athletic participation. Iron intake is especially important for teenage girls, as menstruation depletes iron. Calcium is important for building bone mass during the teen years, which will help prevent osteoporosis and other health problems in the future.

Practicing teen vegetarians can still get adequate nutrition. Calcium sources include calcium sulfate-processed tofu, leafy green vegetables and soymilk and orange

juice fortified with calcium. High-iron vegetables include broccoli, spinach, watermelon and raisins. Vegans should find a vitamin B-12 supplement, although some soymilk has this fortification. You may want to have your teen meet with a nutritionist to learn how to plan well-balanced vegetarian or vegan meals.

**Physical development** occurs at different rates for everyone. In early teens there is a rapid increase in physical growth. Typically, females mature two years earlier than males. By late teens, both male and female bodies are close to adult size.



- **Begins puberty:** Girls have body growth along with the growth of breasts, pubic hair, and underarm hair and may also start menstruating. Boys will have body growth along with the growth of testes, penis, underarm/facial hair, and will have a change in their voice.

## **Social/emotional development**

occurs as teens build a sense of themselves. Typically, teens build relationships with others outside of the family. Teens normally feel great pressure to identify with their peers. To help prevent poor choices due to peer pressure, parents and teens

need to be aware of this influence. Research shows that as time spent with family decreases, the amount of conflict with parent's increases (Larson & Richards, 1994). Conflict with parents stays high for a few years. Do not take this personally. This is a natural step to independence.

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

as “What am I good at?”

**Cognitive development** is the ability to think and reason. The part of the brain that deals with decision making while considering options, facts and setting goals continues to grow and mature into our 20s. Teens may not always make the best decisions. Decision making is a skill learned over time. As the saying goes, practice makes perfect. Teens often learn by watching others. Teens need good guidance and direction from their support system. They can use step-by-step planning and are able to learn from mistakes. This allows them to make changes

to their plans. Involvement in positive activities can help reduce risky behaviors.

- Thinks more flexibly
- Thinks through several solutions to a problem
- Suspends judgment until receiving all information
- Knows how to seek information
- Anticipates the probable consequences of alternative actions before choosing them
- Has a tendency to misinterpret other people's behaviors and motives
- Tends to exaggerate or oversimplify matters

- Engages in argumentative and rebellious behavior
- Has trouble with indecisiveness
- Finds fault with authority figures

## **Safety Tips for Teens**

Parents and caregivers should be aware of special health and safety concerns facing teenagers, such as eating disorders, depression and suicide, and motor vehicle safety.

### **Eating Disorders**

Many teens try to lose weight by eating very little, cutting out whole groups of foods (like “carbs”), skipping meals, and fasting. These

methods can leave out important foods their bodies need and negatively impact their health and development. Other weight-loss tactics like smoking, self-induced vomiting, or using diet pills or laxatives can also lead to health problems.

In some cases, eating disorders develop because a teen participates in an activity that values extreme thinness—gymnastics, ballet, or ice skating, for example. In other cases the eating disorder is a manifestation of underlying psychological issues, including low self-esteem, poor self-image, family problems, stress, or

feelings of not being in control.

Signs of eating disorders include unusual weight loss, preoccupation with food, peculiar eating habits, and menstruation that ceases for three or more consecutive months. These disorders are difficult to treat, often because the person denies that anything is wrong and hides the behavior from friends and family. Nutritional and psychological counseling are required. The earlier treatment is begun, the better the chances for recovery.

## **Depression and Suicide**

It can be difficult to tell the difference between the ups and

downs that are just part of being a teenager and teen depression. Talk with your teen. Try to determine whether he or she seems capable of managing challenging feelings, or if life seems overwhelming. Some signs that your teen may be struggling with depression include:

- Feelings of sadness, which can include crying spells for no apparent reason
- Irritability, frustration or feelings of anger, even over small matters
- Loss of interest or pleasure in normal activities
- Loss of interest in, or conflict



with, family and friends

- Feelings of worthlessness, guilt, fixation on past failures or exaggerated self-blame or self-criticism
- Extreme sensitivity to rejection or failure, and the need for excessive reassurance
- Trouble thinking, concentrating, making decisions and remembering things
- Ongoing sense that life and the future are grim and bleak
- Frequent thoughts of death, dying or suicide
- Tiredness and loss of energy
- Insomnia or sleeping too much

- Changes in appetite, such as decreased appetite and weight loss, or increased cravings for food and weight gain
- Use of alcohol or drugs
- Agitation or restlessness — for example, pacing, hand-wringing or an inability to sit still
- Slowed thinking, speaking or body movements
- Frequent complaints of unexplained body aches and headaches, which may include frequent visits to the school nurse
- Poor school performance or frequent absences from school

- Neglected appearance — such as mismatched clothes and unkempt hair
- Disruptive or risky behavior
- Self-harm, such as cutting, burning, or excessive piercing or tattooing

If these symptoms continue or begin to interfere in your teen's life, talk to a doctor or a mental health professional trained to work with adolescents. Your teen's family doctor or pediatrician is a good place to start. Or your teen's school may recommend someone.

Depression symptoms likely won't get better on their own — and they

may get worse or lead to other problems if untreated. Depressed teenagers may be at risk of suicide, even if signs and symptoms don't appear to be severe. Take all talk of suicide seriously. **If your teen is having suicidal thoughts, get help right away. Here are some steps you can take:**

- Call a suicide hotline number — in the United States, call the National Suicide Prevention Lifeline at 800-273-TALK (800-273-8255) to reach a trained counselor, or encourage your teen to do so.
- Seek help from your doctor, a

mental health provider or other health care professional.

- Reach out to family members, friends or spiritual leaders for support as you seek treatment for your teen.

If you think your teen is in immediate danger of self-harm or attempting suicide, make sure someone stays with him or her. Call 911 or your local emergency number immediately. Or if you think you can do so safely, take your teen to the nearest hospital emergency department.

## **Motor Vehicle Safety**

In the United States, car accidents are the leading cause of death in teenagers. Parents and caregivers should make sure that teens wear their safety belt at all times whenever they travel in a car, and should set a good example by wearing their safety belt as well.

**The following tips can help reduce the risk for a serious or fatal crash involving teenagers:**

- Consider enrolling your teen in an additional driving instruction program.
- Limit unsupervised driving for the first 6 months after your

teen gets his or her license (e.g., restrict teen passengers, night driving, and driving in adverse conditions).

- Provide plenty of opportunities for your teen to practice driving with supervision under different conditions (e.g., parking lots, side streets, busy streets, highways, daytime, nighttime, light rain or snow) and continue to ride with your teen to monitor his or her progress.
- Institute a zero tolerance policy for drinking and driving. Tell your teen never to ride with a driver who is impaired by alcohol or

other drug use. Instead, instruct him or her to call you for a ride. Let your teen know that they can call you for a ride at any time.

- **Avoid distractions while driving including:**
  - **Texting** Texting on a cell phone or a handheld device is the most alarming practice because it involves all three types of distraction: visual, mental and manual.
  - **Talking on cell phones** Research shows even drivers who use hands free



devices have dramatically reduced field of vision and slower response times while driving.

- **Talking to passengers**

For teen drivers, the more passengers in the car, the higher the chances of distraction.

- **Teens should also avoid:**

- **Grooming** (e.g., putting on makeup, shaving, combing your hair, etc.)

- **Eating and drinking** (e.g., a cup of coffee, sandwich, etc.)

- **Reading**, including maps

- **Using a PDA or navigation system, such as a GPS**
- **Changing the radio station, CD, or Mp3 player**
- **Listening to a video playing in the backseat**

# Positive Parenting Tips that Promote Good Behavior in Teens

Teens need positive, caring adults to provide consistent support, guidance, praise and encouragement, as well as a safety net. By supporting them as they mature, you allow teens room to develop their own sense of identity. Teens will gradually gain confidence in their ability to make decisions, but they need to know they can still turn

to you for advice.

To help your teen develop and grow independent, parents and caregivers should:

- Listen to their teens and try to understand their feelings
- Talk to teens in a friendly open way
- Help teens set and achieve realistic goals
- Expose teens to diversity and demonstrate how to accept differences
- Help identify possible issues while encouraging teens to practice their decision making

skills by:

- Encouraging teens to consider the consequences of their actions, both good and bad
- Discussing pros and cons of specific decisions
- Help teens bounce back from poor choices

It is vital to have good communication with teens. Good communication builds strong relationships. It takes effort to communicate so that everyone is understood. Research from Penn State shares the acronym **RECIPE** for better communication with adolescents:

**R - Reflective listening.** Truly listen to what the other person is saying. Repeat back what you think they said, either exactly or in your own words. By repeating or rephrasing what the speaker said, the speaker knows they have been heard.

**E - Encourage and understand with each other.** Consider what they are trying to express to you by putting yourself in their “shoes.”

**C - Compromise and cooperate with each other.** Find ways to work together rather than argue.

**I - “I” messages keep people from**

**feeling blamed.** They help you express your own feelings rather than focusing on the behavior of the other person. For example: “I get very worried when you don’t answer your phone when I call” is better for maintaining healthy communication than “You NEVER answer your phone when I call”.

**P - Practice, practice, practice!**

Good communication is difficult to learn. Expect it to take time to get it right and allow other family members to get it right as well.

**E - Engagement.** Pay full attention to the person speaking to you. It is

difficult to hear what is really said if you are doing something else. (Can you really watch television and listen to someone?)



# What Parents Can Do To Promote Healthy Relationships

TEEN DATING VIOLENCE IS A PATTERN OF ABUSIVE BEHAVIORS THAT ONE PARTNER USES TO GAIN POWER AND CONTROL OVER ANOTHER. The abusive behavior may include, but is not limited to physical, emotional, verbal and/or sexual violence. Teen dating violence does not discriminate; the violence occurs

consistently across racial and ethnic backgrounds. Dating relationships begin younger than most parents and guardians might think; in fact, almost half of 11 to 14 year olds report already being in a dating relationship. Among 11–14 year olds in dating relationships, 62% report they have a friend who has been verbally abused by a partner.

While significant levels of abusive behaviors are reported in tween dating relationships, abusive behavior increases dramatically in the years 15 through 18. One in four adolescents report being verbally, physically, emotionally, or sexually

abused by a dating partner.

It is never too early to have a conversation with your child about healthy boundaries in relationships.

## **What is a healthy relationship?**

Healthy relationships include behaviors and attitudes that promote mutual respect and equality. An example of this may include assertive, non-violent communication and appropriate responses to conflict. Having conversations with your teen about healthy behaviors is just as important as recognizing the warning signs of an unhealthy relationship. Talking with your teen about everything from healthy

relationship boundaries, the potential abuse of technology in dating relationships, and that you are there for them to talk to about healthy relationships will increase their knowledge and safety.

Some conversation starters for parents/guardians to approach teens about their ideas of relationships include:

- If you have a problem with your partner, how would you let them know how you feel?
- Is it ok to have your own time and space away from your partner?

- What are some ways your partner shows you they care about you?

Creating an environment where teens feel like they are heard can make the difference between them keeping a potentially dangerous situation to themselves, or trusting you.

## **What is an unhealthy relationship?**

There are many different ways that an unhealthy relationship may begin. Teen dating violence is different than a conflict where both parties can voice how they feel and there is a

solution or agreement. In an abusive relationship, one partner is not looking for a solution, but rather to assert power and control, often thorough fear and intimidation.

Warning signs of an unhealthy relationship may include, but are not limited to:

- Calls or texts excessively
- Makes the other person ask, “Have I done something wrong?”
- Uses guilt to control or manipulate
- Isolates from family and friends
- Monitors technology use and

access

- Embarrasses the other person in public and on purpose
- Threatens self harm if the person threatens to leave the relationship

There are things you can do if you suspect your teen may be in an unhealthy relationship. Adults and teens often use different terms to define relationships and these terms have different meanings. Additionally, adults and teens may have varying expectations about the acceptability of certain behaviors within a relationship.

Being empathetic can help when addressing teen dating violence with youth. Empathetic phrases may include:

- I hear you say...
- I wonder if...
- Do you feel...
- You must have felt...
- I don't understand, can you explain more...

These phrases show empathy without judgment and allow teens to share their thoughts in their own way. Teens are more likely to confide in their friends if they are being abused. To create an



environment where teens feel comfortable it's important that you ensure they are heard, listen without judging, and provide clear information about what you may be able to do to help them.

Teens often deny, minimize and feel confusion about the violence in their relationships. They may feel embarrassed, ashamed or fearful about the consequences of disclosing an unhealthy relationship. Below are common responses from teens and open ended statements for adults to use to provide support and resources.

Teen statements:

- *It's not that bad. It is not like they hit me.*
- *I know he gets mad when I hang out with my guy friends. He told me not to and I did anyway. I guess I deserved it.*
- *I am scared of what will happen if they know I told someone.*
- *I don't want them to get in trouble. I just want it to stop.*

### Adult statements:

- *It is not your fault. No one can make another person use violence.*
- *I am worried about you. Emotional and verbal abuse is*

*serious too.*

- *No one deserves to be hurt. There is nothing that you could say or do that would make it okay for someone to hurt you.*
- *I understand that this may be scary for you. It took a lot of courage to talk about it. Let's talk about next steps to keep you safe.*
- *I understand that you want to feel safe. Let's talk about what your options are.*

Avoid phrases that may come off as blaming or judgmental like:

- *Why don't you just break up*

*with them?*

- *You shouldn't have let this happen to you.*
- *Why do you let them treat you this way?*

The abuser is responsible for their actions. Dating abuse is a choice by one partner to hurt another to gain power and control.

## **For more information**

*For more information, training, or services such as confidential counseling or referrals, go to the Florida Coalition Against Domestic Violence's website at [www.fcadv.org](http://www.fcadv.org) or call the Statewide Domestic*

*Violence Hotline at 1-800-500-1119  
or TDD 1-800-621-4202, 24 hours a  
day/7 days a week to speak to a  
trained advocate*

# **TOOLS & TIPS FOR PARENTS & CAREGIVERS**

## **Understanding Healthy Sexual Development: *What to Expect as Your Child Grows and Matures***

SEXUAL DEVELOPMENT IS AN IMPORTANT PART OF HEALTHY HUMAN DEVELOPMENT. Having an understanding of normal sexual

development helps parents and caregivers understand and nurture children as they grow and move through different developmental stages. Children who are nurtured and understand healthy sexual development are less likely to become victims of sexual abuse.

## **You can nurture healthy sexual development by:**

- Meeting emotions with understanding, acceptance and respect
- Fostering a positive view of the human body
- Reinforcing children's strengths

and abilities

- Promoting a positive self-image and respect for others
- Responding honestly and accurately to children's questions
- Providing information about bodies and sexuality
- Promoting clear and open communication

**Ages Birth to 2 years** Infants and toddlers will:

- Learn about sexuality through being held and caressed and by exploring their own bodies, including their genitals



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

**Ages 3 to 5** Preschoolers will:

- Learn to name body parts—teach children the actual terms for the parts of their body, especially their genitals—penis and vulva, etc.
- Become more aware of the genital area through toilet training and develop positive and/or negative attitudes toward elimination and urination depending on toilet learning (for more information, see Teaching Your Child to Use the Potty on page 19)
- Establish a firm certainty about being male or female
- Sometimes get pleasure from

touching their genitals and may begin to masturbate

- **It is important to know** that children do not have the same feelings adults have when masturbating during this age. Parents and caregivers can set limits as to when and where it is appropriate to engage in this activity. For example, “It is ok to touch your penis in your bedroom, but not in the grocery store.” It is also important not to instill too many rules, because it may

result in children feeling ashamed of their bodies.

- Show an interest in the differences of boys and girls while urinating
- Be curious about the physical differences between the genders and make comments or ask questions about these differences
- Enjoy nudity
- Be interested in privacy for themselves, yet be very interested in the bathroom activities of others
- Be curious and aware of their navels

- Sometimes grab their genitals when under stress or when they need to urinate
- Have fun with bathroom humor and like to use toilet language (bathroom talk) like, “You’re a yucky poo-poo.” Or “Poopy-head.”
- Be curious about where they came from
  - **Teach children correct information** instead of letting them believe misinformation. How much information and how specific varies depending on the person teaching and

the need to know. It is perfectly appropriate to tell children at this age that babies come from mommies and daddies. That may be just enough for them before they are interested in another topic.

- Learn what is socially appropriate, about respecting the personal boundaries of others, and about public and private behaviors
- Be interested in babies—usually more about how a baby is born than how one is conceived
- Show curiosity about pregnancy

and nursing

- Likely to play house, doctor or other forms of body exploration or “sex play” with friends
  - **These games are universal** and help children understand gender differences.
  - **This can be a good opportunity** to say to your child, “I know you are wondering about each others’ bodies. Let’s talk about what you want to know.”
  - **It is also a good opportunity** to say, “Your

body belongs to you. You can tell someone, ‘No’ if you don’t want to be touched.”

- **You also need to be aware of safety issues.** Children may insert pencils, sticks or other objects in body openings and cause injury.
- **Although it is normal** for children of the same ages to engage in this exploratory play, there is cause for concern if one of the children is older.

- May learn words related to sex



and try using them.

- May imitate adult sexual roles, for example, your preschoolers may talk about having a boyfriend or girlfriend or who they are going to marry when they grow up. These conversations are normal fantasies for preschoolers.

**Ages 6 to 8** It is important to be open and honest during this stage of development and to have home be the first source of sexual information given to children. You want to be a credible source of information to keep the lines of communication open between you and your child.

Always remember, it is OK to say, “I don’t know, but we can find out together.” This is a better approach than making an answer up and having your child find out later it wasn’t true. Children ages 6 – 8 will:

- Need to learn to set personal boundaries
- Need to understand actual terms for body parts and be able to talk about all body parts without a sense of naughtiness
- Need to be able to ask trusted adults questions about sexuality, and know that sexuality has private aspects
- Need to be able to identify

differences between sexes and learn how babies “get in” and “get out” in general terms if they are curious

- Begin to insist on increased privacy for getting dressed and using the bathroom
- Sometimes use sexual and obscene language to test adults' reactions
- Become more sensitive to gender differences—same sex friendships tend to be more dominant and development of male/female roles becomes stronger
- May continue masturbation and

## sex play

**Ages 9 to 12** Sexual development is very active during this age, with rapid physical, emotional and behavioral changes in children. Children begin looking more grown up, but it is important to remember they are still children. Children ages 9 – 12 are about to experience many changes to their body that may make them feel self-conscious, embarrassed or awkward. It is important to talk with your child about sexual development and assure them that these changes are normal and that they will be experiencing many changes in their

bodies over the next several years. Children at this age can gain a clearer understanding of sexuality through education. By the end of this stage children should be aware of the following: the life cycle and sexual development at all ages, anatomically accurate terms to talk about body parts for both sexes, non-stereotyped gender roles, and the basic facts about personal hygiene. Children ages 9 – 12 will:

- Experience changes in voice and the penis and testicles mature (boys)
- Begin having periods and develop breasts (girls)

- Experience increased sweating requiring the use of deodorant
- Notice changes in skin complexion, including getting pimples
- Begin to grow pubic hair
- Sometimes masturbate to orgasm
- Sometimes engage in some mutual, same gender exploration and sex play, but less than earlier
- Begin to have an interest in the details of their own organs and functions and seek out pictures in books
- Feel uncomfortable undressing

in front of others, even a same-sex parent

- Continue to value same sex friendships—may share information about sexuality with friends of the same gender
- Enjoy being like their peers and dressing and speaking the same, which can make them feel less different in times of rapid change
- Sometimes experiment with peeping, sexual jokes, name calling and teasing
- Often engage in swearing and conversations with sexual content—may also use sexual

terms to insult each other

- Experience increased sexual feelings and fantasies
- Develop crushes on friends, older teens, teachers, rock stars, etc—romantic feelings may be directed toward the same sex and/or the opposite sex
- Have to face decisions about sex and drugs

## **Children ages 13 to 18 will:**

- Complete the changes of puberty
- Menstruation occurs in almost all girls by age 16 and ovulation



is established in girls 18 – 24 months after menarche, the first menstrual period or bleeding

- Value independence and rely less on parents as the sexual authority figures
- Experience increased sexual feelings and desire physical closeness with a partner
- Begin to face peer pressure to be sexually active whether or not they feel ready
- Likely masturbate and engage in sexual fantasies more often
- Favor romantic relationships over close friendships
- Be faced with choices which

may lead to pregnancy or sexually transmitted diseases—set expectations and limits about sexual behavior with your child

### **Additional Tips**

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

- Letting your child know he or she can come to you for

information

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

*Contributing authors: Jessica Dunn with Judith A. Myers-Walls and Dee Love*

# Stimulating Development in a Disabled Child

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

NO TWO CHILDREN ARE EXACTLY ALIKE. Children with disabilities—even those who have the same type of disability—have

unique needs. In this section, we will look at different types of disabilities and how parents can help children with special needs to learn new skills.

## The Role of Parents

**Provide love and support.** The primary need of any child is the love and support of parents. Sometimes parents of children with special needs become so concerned about stimulating their child to compensate for a disability that they forget the most important task is to love and take pleasure in their child as a human being. When children see that their parents enjoy being with them,

their sense of self-worth is nourished. That growing sense of self-worth is an important measure of a parent's success in raising a child.

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

encourage your child do on his or her own at each stage of development.

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

When your child reaches a plateau, it is helpful to look back and focus on how far he or she has progressed. This may also be a

good time to focus on short-term rather than long-term goals—finger-feeding, getting dressed, repeating the first intelligible word or phrase, or finally mastering toilet training.

When parents focus all their energy on a single, short-term goal, a child with a disability may begin to move forward again. Stopping to observe how your child copes with challenges and how he or she adapts to new and greater demands will help you develop realistic expectations for your child.

Children progress best when their parents function as advocates for them, choosing the most appropriate



educational settings, setting reasonable goals, and providing a warm and nurturing environment. Parents should view themselves as partners with professionals in planning the care of their children with disabilities.

## **Stimulating Developmental Potential**

From the moment they are born, children begin learning about the world around them. They learn through their movements and through their senses of taste, touch, smell, sight and hearing. When one or more of these senses are impaired, the child's view of the

world may be different and how they learn from it changes. Yet, with advances in medicine, technology, and our understanding of how babies grow and learn, we can frequently expect far greater physical and mental development from children with disabilities than was possible even a decade ago. How much development depends upon the extent of the disability, how soon it is correctly diagnosed and how quickly the child is placed in an appropriately stimulating environment. Children with mental disabilities, for instance, need frequent and consistent stimulation

because they often have difficulty focusing their attention and remembering. They may also have perceptual difficulties that make it hard for them to understand what is happening around them and why it is happening.

**Focus on the impaired sense.** In many cases, a child's abilities can be improved by stimulating the impaired sense. Children with muscular dystrophy, Down syndrome and cerebral palsy often can benefit from a physical therapy program that exercises all their muscles. Exercising the legs and feet of children with severe cases of spina

bifida prepares them for walking with braces and crutches. Children with hearing impairments can learn to use their residual hearing with the help of high-power hearing aids and auditory training that increases and expands their listening ability. Children with severe visual impairments can sharpen their other senses to help compensate for their lack of sight while they learn about their world. Children with Down syndrome and cerebral palsy may also benefit from vision, speech and occupational therapies.

**Work with a therapist.** Stimulation programs geared for children from

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

teaching hospitals and private agencies that serve children with disabilities may also be good sources of information.

**Use play to explore.** Play is an important way of learning for all children. Children with disabilities who can't move around to explore on their own can still learn about their neighborhoods through trips with the family. Within the home, children can be carried or guided from room to room to touch, feel, see, smell or hear various objects. Children with impaired vision can use their hands, faces, feet and other parts of their bodies to explore and learn. Children

with impaired hearing need constant language stimulation and, like all children, need to hear explanations for what is happening around them. Pictures in books and magazines are another way of exposing children with disabilities to places, people, animals and ways of life outside their immediate experience.

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

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

# Home Safety Checklist

Today's Date:

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

- Prenatal or less than 3 months old
- 4 to 6-months-old: Getting ready to crawl
- 9 to 12-months-old: Getting ready to walk



- 2-years-old
  - 3-years-old
  - 4-years-old
  - New home
  - Other:
- 

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

## **HOME SAFETY**

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

1. Yes No Are electrical cords intact and away from the reach

of children?

2. Yes No Are electrical appliances away from a filled tub, sink or running water?
3. Yes No Are painted surfaces (including walls and furniture) free from chalking, flaking and peeling, which could indicate the presence of lead-based paint?
4. Yes No Are all exterior doors, including pet doors if applicable, childproofed (latches, high locks or alarms, etc.)?
5. Yes No Are all stairways and floor space for walking clear from obstruction and in a non-slippery condition?

6. Yes No N/A Is there railing protecting all stairways and elevated landings (top and bottom of stairs)?
7. Yes No N/A If there are railing slats greater than 2-3/8 inches apart, are they covered with a piece of wood or hard plastic?
8. Yes No Is there a safe place for the child to sleep?
9. Yes No N/A If there is a crib, are the gaps between the slats on the crib 2-3/8 inches or less?
10. Yes No N/A If there is a child under 1 year of age, is the

sleeping area free of soft bedding (including bumper pads), pillows, blankets and stuffed animals?

11. Yes No N/A If there is a crib, does the crib sheet and mattress fit tightly to avoid entrapment and suffocation?
12. Yes No N/A Are all houseplants out of the reach of children?
13. Yes No N/A Are all ashtrays out of the reach of children?
14. Yes No N/A Are emergency numbers readily accessible?  
(See list of phone numbers)
15. Yes No Are knives and other

sharp objects out of the reach of children or in a childproofed drawer?

16. Yes No Are plastic bags out of the reach of children?
17. Yes No Are sharp edges and corners covered (i.e., fireplace, tables, etc.)?
18. Yes No Are there safety plugs in all unused electrical outlets?
19. Yes No N/A Are hair dryers and curling irons out of the reach of children?
20. Yes No N/A Are the iron and ironing board out of the reach of children?

21. Yes No Are all chemicals and cleaning supplies stored in original containers? (Some examples of dangerous products include paint thinner, antifreeze, gasoline, turpentine, bleach, insect spray, fertilizer, poison.)
22. Yes No Are all chemicals and cleaning supplies stored out of the reach of children or in a childproofed cabinet? >>
23. Yes No Are all vitamins, over-the-counter and prescription medication stored out of the reach of children or in a childproofed drawer/cabinet?

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

## **FIRE SAFETY**

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

## **WATER SAFETY**

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



## 424.2.17.

1. Yes No N/A If there is an in-ground pool, is there at least a 4-foot barrier with gaps of no more than 4 inches?
2. Yes No N/A If there is an in-ground pool, is there two inches or less between the ground and the bottom of the pool barrier?
3. Yes No N/A If there is a door from the house that leads into an area with water, is there an exit alarm or a lock located at least 54 inches above the floor?
4. Yes No N/A If there is a barrier around the pool, are

large objects outside of the barrier (such as tables, chairs or ladders) far enough away from the barrier to prevent children from using them to climb over the barrier and into the pool area?

5. Yes No N/A If there is a gate into the area with water, is there a latch on the gate that closes automatically? Is the latch located on the side with the water? Is the latch located at least 54 inches above the bottom of the gate?
6. Yes No N/A If there is a window that is accessible to the

area with water, is there an exit alarm and/or is the base of the window at least 48 inches from the interior floor (can be 42 inches if there is a cabinet beneath a screened or protected pass-through window)?

7. Yes No N/A Are toys and objects that may attract children kept out of the water when not in use?
8. Yes No N/A Are there life saving devices near the pool such as a hook, pole or flotation device?
9. Yes No N/A Are pool

chemicals kept away from heat sources and out of the reach of children?

10. Yes No Is the property free from containers of water or other fluid left uncovered or accessible to a child (i.e., inflatable “kiddie pool”, buckets, etc.)?

*This Home Safety Checklist was developed by Healthy Families Florida*

# Choosing Child Care

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

You may also want to ask your employer, family members, friends, church or school for

recommendations. Consider all your child care options. After you find a few child care programs that meet your family's budget, schedule and special needs, call to arrange an appointment to visit the child care centers or family homes you have selected.

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

arrangement if possible.

An overview of the types of child care typically available and a checklist of things to look for in quality child care providers is provided on the following pages. For additional tips on quality child care settings and programs, please visit the Florida Children's Forum at [www.thechildrensforum.com](http://www.thechildrensforum.com). For additional information on child care standards and licensing requirements, visit [www.myflorida.com/childcare](http://www.myflorida.com/childcare).

## Types of Child Care

### **In-home Care Providers**

In Florida, when one adult cares for

one family's children other than their own, there are no state guidelines or inspections.

## ***Relative Care***

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Parents may choose a relative caregiver because...

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



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

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

Signed agreements that cover when

and how payment will be provided and how sick days and vacations will be handled will help eliminate misunderstandings.

## ***Nannies and Au-pairs***

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Parents may choose these in-home care providers because they believe their children will be safer and more secure in their own home. They believe that if they employ the caregiver to work in their home, they have more control over the kind of care their children will receive. Some parents find in-home care is a more convenient arrangement for the family and may provide more

flexibility. If there are several children involved, they may find that in-home care is not significantly more expensive than other forms of care.

### ***Family Child Care Providers***

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

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

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

## **Registered Homes**

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

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

## **Licensed Homes**

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

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

## ***Child Care Centers***

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Parents may choose child care centers because they believe that

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

## **Key Ingredients**

No matter which options you are considering for your child, you should always visit a home or center more

than once before deciding to place your child there. Important features to look for in any child care program include:

- ***Supervision:*** Children should be supervised at all times, even when sleeping.
- ***Sanitation:*** Caregivers should wash their hands often, especially after diapering and before handling food. Children should also wash hands before eating.
- ***Discipline:*** Discipline should be positive, clear, consistent and fair. Florida law prohibits any form of discipline that is severe,



humiliating, frightening, or associated with food, rest or toileting. Spanking or any other form of physical punishment is prohibited by all child care personnel.

- **Safety:** Toxic substances and medications should be clearly labeled and stored out of child's reach. Caregivers should know first aid and CPR. The child care location should be free of radon, lead and asbestos. Indoor and outdoor play areas should be inspected regularly for safety hazards.
- **Responsiveness of the**

**caregiver:** Caring staff should adapt their approach to meet your child's needs.

- ***Appropriateness of the learning activities:*** Activities should be appropriate to your child's age and stage of development.
- ***Ratio of children to adults:*** Good staff-to-child ratios allow for individual attention and help build strong relationships with caring, consistent adults.
- ***Qualifications of teachers and caregivers:*** Ask about the background and experience of all staff. Is the program

accredited? Accreditation means the home or center voluntarily measures up to national standards of quality beyond the minimum licensing requirements. Caregivers in accredited programs take part in ongoing child development training and are more likely to provide positive guidance for children.

- ***Turnover rate for staff and families:*** Why do families leave? How does the program help children adjust to staff turnover?
- ***Transportation:*** Appropriate

child restraints and seat belts must be used when transporting children and a log must be kept of children being transported to ensure all children have arrived safely at the destination and have exited the vehicle. Logs are required to be maintained for four months.

## **Child-to-Staff Ratios**

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

**For licensed child care facilities:**

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Children under 12 months: 1 to 4

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Children age 12 to 23 months:  
to 6 1

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Children age 24 to 35 months:  
to 11 1

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Children age 36 to 47 months:  
to 15 1

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Children age 48 months to 59  
months: 1 to 20

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Children age 60 months (5 years  
old) or older: 1 to 25

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

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1 to 4: from birth to 12 months of

age

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1 to 6: if no more than three are under 12 months

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1 to 10: as long as at least five children are school-age and no more than two are under 12 months of age

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2 to 8: if more than 4 children under 24 months old

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2 to 12: if no more than 4 children are under 24 months old

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

**The following checklist will help**

## **you measure the quality of a child care home or center:**

- Do the children look happy and appear well cared for?
- Are the children involved in age-appropriate activities?
- Are there plenty of clean, safe toys within reach of children?
- Is the program in a safe and clean environment?
- Is the space decorated in an inviting way?
- Is there a fenced-in outdoor play area?
- Are nutritious snacks or meals provided?
- Do children get a chance to

make choices about their activities, allowing them as much independence as they're ready for?

- What is the typical daily schedule?
- How often do children play outdoors?
- How do caregivers resolve conflicts between children?
- What is the discipline policy?
- Do caregivers listen and talk to children individually?
- Do caregivers play with children?
- Do children receive individual attention?



- Are there opportunities for parents to help with the program, and are parents encouraged to drop in at any time?
- How long has each caregiver worked there?
- Are reference and background checks performed on all staff?
- Is the program licensed or accredited?
- What are the rates?
- Are there any additional fees?
- Is there any financial assistance available?

## **Special Concerns for Infants and Toddlers**

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

## What is VPK?

VPK stands for the Voluntary Prekindergarten Education Program. If you live in Florida and your child turns four years of age by September 1, your child is eligible to

participate in Florida's FREE Voluntary Prekindergarten education program. Parents have the option of choosing from a wide range of participating providers that meet their family's needs including private and faith-based child care centers, private and public schools and licensed family child care homes. Parents can enroll their children in either the school-year program, which provides a total of 540 instructional hours, or the summer program, which provides 300 instructional hours. Instructor ratios for VPK are 1 instructor to 10 children with class size not to

exceed 18 children in the school-year program or 10 children for the summer program. To learn more about the VPK program, visit [www.fldoe.org/earlyLearning](http://www.fldoe.org/earlyLearning).

# Choosing AfterSchool Care

Children in quality afterschool programs tend to do better academically in school and have fewer problems with delinquent behavior, alcohol and drugs.

Effective afterschool programs offer a different environment from the regular school day and differ significantly from child care services for younger children. To find the afterschool program that is right for you and your child:

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

## **Look for these features in a quality afterschool program:**

- Well-trained staff that:
  - Have all been cleared through a Level II background screening and drug test.
  - Are certified in CPR and

## First Aid.

- Engage children and youth in positive and respectful ways through listening, acceptance and appreciation while adhering to clear limits and consistent rules.
- A system for documenting the arrival and departure of all children and youth.
- Written policies and procedures for transporting children and youth safely, if applicable.
- Adequate adult supervision of children and youth at all times.
- Indoor and outdoor activities

adapted to suit children of varying ages.

- A daily schedule that is flexible, allowing children and youth to transition smoothly from one activity to another.
- Availability of homework help, tutoring, and other engaged-learning activities from communication with local teachers or school administrators.
- Drinking water is available at all times and healthy snack options are offered.
- Resources, such as a library, sports equipment and enough



art, craft and reading materials to keep children interested.

- Activities that develop personal and interpersonal social skills and promote respect for cultural diversity. For adolescents, activities that foster an appropriate sense of independence based on their level of maturity.
- For a comprehensive list of standards for quality afterschool programs download the Florida Afterschool Network's brochure: <http://myfan.org/downloads/FAN%20Brochure>

**Also ask:**

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

For more tips, contact the Florida Afterschool Network at (850) 222-1340 or [www.myfan.org](http://www.myfan.org).

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

# Choosing a Summer Camp

There are many different kinds of summer camps. Traditional camps offer a little bit of everything, while specialty camps focus on one main area such as academics, adventure, creative arts, sports, or faith-based activities. Some camps cater to children and youth with special needs, such as those living with a serious illness or a physical disability.

## **A few things parents and caregivers should consider when choosing a summer camp:**

- Are you interested in a day camp or a sleepaway camp? Consider your child's age and maturity level as well as your family's schedule and budget.
- How far away is the camp? If there is a problem, how long will it take you to get to the camp and pick up your child? What is the refund policy if your child is unable to attend or must leave early?
- What is the duration of the camp? Do day camp hours fit

within your family's schedule? If you need a camp that lasts two, four, or six weeks, will you sign up for multiple sessions at the same camp, or send your child to a few different camps? If your child is under 12 and this will be his or her first time at a sleepaway camp, four or five nights away from home is probably long enough.

- How big is the camp? Would your child prefer a big camp with lots kids and a variety of activities, or a smaller camp with just a few dozen campers who will do most everything

together?

- What activities would your child enjoy? If your child is a good swimmer and would really love to go canoeing, swimming, and fishing, then you'll want to look for a camp that's on a lake and offers those activities. If arts and crafts are more important to your child, then look for a camp that has these programs and don't worry so much about a lake.
- Is the camp co-ed or single sex? This may not matter to everyone, but if your child has a preference, or you want your

son and daughter to attend the same camp, it will affect your choices.

- How structured is the camp experience? Some camps fill up the days and nights with scheduled, structured activities, while others allow campers more free time. Which type of atmosphere is better for your child?
- What can you realistically afford? Camps run by non-profit or community organizations may be less expensive. Many camps offer scholarships or financial aid to deserving campers, so be



sure to explore this option too!

**The best way to proceed with your comparison and to narrow your choices** is to take a careful look at some of the promising camps you have identified. Review the brochures and videos with your child. Then you can choose the ones you're most interested in and arrange to speak or meet with the camp directors or representatives. They'll give you more detail and you can ask specific questions like:

1. What is the director's age and background? How long has the director run this camp?

2. What are the camp's goals and philosophy?
3. What kind of camper is most likely to have a good experience at this camp?
4. What facilities does the camp have and how convenient are they for campers to get to?
5. What is the schedule like? Is it a structured program or one that emphasizes a lot of free choice?
6. What is the camper-counselor ratio and what are the characteristics of most of the staff?
7. What kind of staff training is

provided?

8. What percentage of campers return each year?
9. What is the total cost of the camp including extras?
10. What are the sleeping arrangements and what toilet and shower facilities exist?
11. What is the swimming instruction program like?
12. How does the camp insure the safety and security of its campers?
13. What is the food like and who prepares it?
14. What is the policy about food packages, letters home, TV,

trips to town, and so forth?

15. What medical facilities are available and what medical staff is on campus?
16. Is there a refund policy if the camper leaves early?
17. Will the director supply references?
18. What happens when the weather is bad?
19. How does the camp program meet individual needs and differences?
20. What kind of insurance coverage is there?

*References:*

<http://pbskids.org/itsmylife/friends/>

*summer*

<http://www.summercamp.org/guidance/pamphlet.html#camp/article3.html>

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**For more information to help you find a camp** that provides activities that are of interest to your child and meets your family's needs, check out the following websites:

***National Camp Association's CampQuest:***

[http://www.summercamp.org/campquest/sub\\_sub\\_start.html](http://www.summercamp.org/campquest/sub_sub_start.html).

***American Camp Association:***

<http://www.campparents.org>

***My Summer Camps:*** <http://www.mysummercamps.com/>

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# When to Leave Your Kids Home Alone

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

Children left unsupervised or in the care of young siblings are at

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

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



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

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

- Is my child comfortable, confident and willing to stay home alone?
- Does my child consistently

follow my rules and guidelines?

- Has my child demonstrated good independent judgment and problem-solving skills in the past?
- Is my child able to stay calm and not panic when confronted with unexpected events?
- Have I brainstormed with my child about what unexpected situations could possibly come up while he or she is alone, and how to handle them?
- Is my child consistently truthful with me? Does he or she readily come to me with problems and concerns?

- Does my child understand the importance of safety and know basic safety procedures?
- Will my child make decisions to stay safe, even at the risk of seeming rude or overly cautious to other children or adults?
- Does my child have the ability to calmly provide his/her name, address, phone number and directions to our home in an emergency?
- Can my child lock and unlock the doors and windows of our home?
- Can my child tell time?
- Is my child able to work

independently on homework?

- Have my child and I established a clearly structured routine for when he or she is home alone, with defined responsibilities and privileges?
- If I have more than one child staying home, have the children demonstrated the ability to get along well and solve conflicts without physical fighting or adult intervention?
- Have my child and I had some “dry runs” to allow him or her to practice self-care skills while I am at home, but purposefully “not available”?

- Is our neighborhood safe?
- Do we have neighbors that my child and I know and trust?

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

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

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

- Place all emergency numbers (doctor, hospital, police department, fire department, poison control center, emergency medical services) and the phone number of a friend or neighbor in a visible place near all phones.
- Make sure your child knows your fire escape plans. Remind your child to get out of the house immediately if the smoke alarm sounds and to call the fire department from a neighbor's

house.

- Show your child where the first-aid kit is and how to use the items in it.
- Prepare a snack or meal for your child in advance, preferably one that does not need to be heated.
- Tell the child where you will be, how you can be reached, and when you will return home.
- If possible, leave your beeper or cellular phone number. Knowing your child can reach you in an instant will help you, and your child, feel more at ease.

- If your child arrives home to an empty house, have him or her call you to check-in.
- Set ground rules for:
  - leaving the house
  - having friends over
  - cooking
  - answering the phone/door
  - using the Internet

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



# Coaching Your Kids from the Sidelines

Participating in sports helps children develop a number of qualities that will have lifelong benefits. Studies suggest that participation in sports can help children learn responsible social behavior and gain an appreciation of personal health and fitness. Regular physical activity also helps the body manage stress, which can result in better school performance and improve your child's ability to respond

appropriately to daily challenges. In addition to these benefits, team sports give children a sense of belonging. Below are some tips to help parents build confidence and good character in their children through sporting activities.

## **Setting an Example for Your Child**

- ***Teach good sportsmanship.***  
Be a role model to your child and other parents. Offer words of encouragement to your child, his or her teammates and their opponents.
- ***Be respectful of everyone.***  
Show respect for the other

team, the coaches and the officials. Avoid criticizing a child's athletic ability, a coach's decision or an official's call on a play. Keep this in mind when attending athletic events and watching sports on TV with your child as well. If you have a concern about a coach's particular style of coaching, politely bring your concern to the coach's attention after the game. You may want to volunteer to help the coach during the next practice.

## **Building your Child's Confidence and Motivation**

- ***Focus on effort, not results.***  
The message to “win at all costs” can put a lot of pressure on a child. Regardless of the final score, your child should feel proud that he or she played their best. Let children know when they had the right idea or made the right decision in the game even if it didn’t result in a score. Let your children know they are always winners in your eyes.
- ***Accept mistakes.*** Children are still learning to master the skills of the sport and making mistakes is a valuable part of

the learning process. Focusing on what they learned or what they can do the next time will help them make progress, which is what making mistakes is all about! To help your child stay motivated, point out areas in which you have noticed personal or team improvement since the last practice. This helps children keep mistakes in perspective.

- ***Extra practice.*** If the coach brings up an area your child needs to work on, help them practice at home and offer lots of specific encouragement.

Occasionally plan to stay after practice for an extra 10 or 15 minutes so your child can get a little extra time with their teammates. This encourages social development and team building.

- ***Encourage the team.*** Cheer for the team, in addition to the individual players. This can help put the focus on the importance of all players working together.
- ***Teach your child to honor their commitments.*** When a child commits to play a sport, they should take the commitment seriously.

Sometimes a child will have a bad experience during a game or practice, and they will not feel like playing anymore. Few children will be the star athlete on every team. The benefits of setting goals and following through greatly outweigh any MVP status. Explain to your children that their coach and teammates are counting on them. If they are not able to actively participate, it is usually a good idea to have them dress in uniform and sit on the sidelines to show support for their teammates.

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



books, chess or other board games, stamp or coin collecting, music, drama, chorus, arts and crafts, etc.).

## **Supporting Your Child's Coach**

- ***Evaluate a coach before placing your child on a team.*** Practices can make or break a child's interest in sports. Find a coach who runs a fun and engaging practice. A simple test is to examine the faces of the athletes to see if they are having fun.
- ***Make early, positive contact with the coach.*** Introduce

yourself, and be sure to keep positive lines of communication between yourself, your child and the coach open throughout the season. If a problem or concern does come up, it will be much easier to talk to the coach about it.

- ***Recognize the commitment the coach has made.*** Coaches invest many hours outside of practices and games; being a coach shows their commitment to the sport and to your child.
- ***Help the coach.*** During the season, don't hesitate to volunteer. The coach may need

help calling parents about a schedule change, bringing a cooler of drinks to the game, or collecting equipment after the game. Your effort will show your child you also have an interest in creating a positive experience.

- ***Fill the coach's emotional tank.*** When coaches do something you like, let them know about it. Coaching is a difficult job and most coaches only hear from parents when they have a concern about something. A sincere compliment goes a long way and will help the coach continue

to give his all to the team.

***For more information on  
parenting kids in sports, visit:  
[www.youthsportspsychology.com](http://www.youthsportspsychology.com)***

# Just for Dads

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

## 1. Respect Your Children's Mother

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

## **2. Spend Time with Your Children**

How a father spends his time tells his children what's important to him.

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

### **3. Earn the Right to Be Heard**

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

be easier to handle as they get older. Take time and listen to their ideas and problems.

#### **4. Discipline with Love**

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

#### **5. Be a Role Model**

Fathers are role models to their kids whether they realize it or not. A girl who spends time with a loving father



grows up knowing she deserves to be treated with respect by boys, and what to look for in a husband.

Fathers can teach sons what is important in life by demonstrating honesty, humility and responsibility.

“All the world’s a stage...” and a father plays one of the most vital roles.

## **6. Be a Teacher**

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

children learn the basic lessons of life.

## **7. Eat Together as a Family**

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

## **8. Read to Your Children**

In a world where television often dominates the lives of children, it is

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

## **9. Show Affection**

Children need the security that comes from knowing they are wanted, accepted and loved by their family. Parents, especially fathers,

need to feel both comfortable and willing to hug their children. Showing affection everyday is the best way to let your children know that you love them.

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

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

## Resources for Dads:

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[www.allprodad.com](http://www.allprodad.com)

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[www.fatherhood.org/fathers](http://www.fatherhood.org/fathers)

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[www.fathers.com](http://www.fathers.com)

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[www.childwelfare.gov/preventing/  
promoting/fatherhood.cfm](http://www.childwelfare.gov/preventing/promoting/fatherhood.cfm)

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[www.dadsmakeadifference.org](http://www.dadsmakeadifference.org)

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[fatherhood.hhs.gov](http://fatherhood.hhs.gov)

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# **Co-Parenting: Learning to Work Together**

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

## **What is Co-Parenting?**

Co-parenting is when two parents work together to raise their children—even after their marriage or romantic relationship is over.

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

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

## **Communicating With Your Child about the Break-up**

When deciding to split up, both parents should talk to their children about the situation. Be honest about what is happening without sharing the details of your relationship's downfall. Continuously tell your children they **did not** cause the split. Stress how much you love them and that your love for them will not change. Let them know you are



there for them during this difficult time. For some children, this may be enough comfort, while other children may benefit from professional counseling.

## **Communicating With the Other Parent**

Communication with the other parent is a big part of your role as a co-parent. No matter what, communication with your ex is going to be a tough task. Remember that it isn't necessary to meet in person—speaking over the phone or exchanging emails is fine for the majority of conversations. The goal is conflict-free communication, so

see which type of contact works best for you. Whether email, phone or in person, the following tips can help you and your ex to communicate in a positive and effective way for the sake of your children:

- ***Set a business-like tone.*** Approach the relationship with your ex as a business partnership where your “business” is your children’s healthy adjustment and well-being. Speak or write to your ex as you would a coworker—be polite, respectful and neutral.
- ***Make requests.*** Instead of

making statements, which can sound like demands, try making requests. Requests can begin with “Would you be willing to...?” or “Can we try...?”

- ***Listen.*** Communicating with maturity starts with listening. Even if you end up disagreeing with the other parent, you should at least be able to convey to him or her that you've understood his or her point of view. Listening alone does not signify approval, so you won't lose anything by allowing your ex to voice his or her opinions.
- ***Show restraint.*** Keep in mind

that communicating with one another is going to be necessary for the length of your children's entire childhood—if not longer. You can train yourself to not overreact to your ex, and over time you can learn to ignore the buttons he or she tries to push.

- ***Commit to meeting/talking consistently.*** Frequent communication with your ex will convey the message to your children that you and their other parent are a united front. This may be extremely difficult in the early stages of your divorce or

separation.

- ***Keep conversations kid-focused.*** Remember, your child is part mom and part dad, so anything hurtful that is said to one another can affect your child's sense of their identity. Keep conversations focused on your child's activities, milestones, challenges and successes. Discussing these topics will help each parent take an active role in their child's life and let children know they are meaningful to each parent. Communicating with each other also helps parents double check

what their children are saying. Some children in this situation tend to say things that are not true (i.e. “Dad says curse words are o.k” or “Mom thinks homework is a waste of time”). In these sticky situations, communication can help you uncover the truth.

## **Visiting the Other Parent**

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

smooth as possible:

- ***Help children feel good about visitation.*** Children need to hear from both parents that spending time with the other parent is good for them. They need to know that it is alright to love each parent.
- ***Help children anticipate change.*** Make sure your children know the schedule of when they will be spending time with each parent. Consistency is the key to making this work.
- ***Always drop off – never pick up.*** It's a good idea to avoid "taking" your child from the

other parent. Always dropping your child off at the other parent's house is less stressful for everyone. Avoid sending new girlfriends, boyfriends, or spouses to transport the children, or having them babysit for long periods of time.

Children need and look forward this time with their parents.

- ***Avoid using children as messengers.*** Asking your children to transport bills, notes, or anything else can make them feel they are in the middle of their parent's relationship.
- ***Aim for consistency.*** It's



healthy for children to be exposed to different perspectives and to learn to be flexible, but they also need to know they're living under the same basic set of expectations at each home. Aiming for consistency between your home and your ex's avoids confusion for your children. These tips can help:

### **CREATE A PARENTING PLAN.**

This is a document that outlines certain parenting issues like: religion and church attendance, extracurricular activities and payment for these activities,

medical treatment for the child, cell phones, internet access and restrictions, college saving, etc. More information concerning Parenting Plans can be found at: [www.flcourts.org/gen\\_public/family/forms\\_rules/995a.pdf](http://www.flcourts.org/gen_public/family/forms_rules/995a.pdf)

### **AGREE ON THE RULES.**

Rules don't have to be exactly the same between two households, but if you and your ex establish generally consistent guidelines, your kids won't have to bounce back and forth between two radically different disciplinary environments. Try to follow similar types of

consequences for broken rules, even if the misbehavior didn't happen under your roof. So, if your kids have lost TV privileges while at your ex's house, follow through with the restriction. The same can be done for rewarding good behavior.

- ***Keep your issues to yourself.*** Always avoid saying negative things about your ex in front of your children, or making them feel they have to choose between the two of you. Also avoid asking your children for information about their visit, or for information about the other

parent. This can make their visit less enjoyable, and puts them in the middle of your adult relationship.

# **Coping with Crisis**

Big changes in everyday family life can be difficult—for both adults and children. Natural disasters, layoffs, serious accidents and other conditions beyond our control can leave us feeling powerless. Don't lose hope. Other people have overcome these challenges and you can too.

## **How to stay strong and flexible during times of crisis**

Two tools that help people bounce

back:

1. Knowing and using their internal strengths.
2. Allowing people, organizations and agencies to help them build on their strengths and learn new skills.

Using all the resources available to you will help you move toward a strong, stable future for you and your family.

## **Personal Strengths**

You have what it takes to get through this! We all learn ways of overcoming challenges in life.

Experiences like traffic jams, arguments with neighbors or coworkers, or making the necessary arrangements to take care of a suddenly sick child have helped us learn healthy ways to cope with the unexpected. Our children are learning these skills too when they struggle through a difficult math lesson, figure out a way to get home when they miss the bus, or receive bad news from a friend or parent. When a major life crisis hits, people draw upon their coping skills in a much bigger way.

Think about challenges you and your family have faced in the past

and ask yourself, “*How have we done as well as we have? What resources or skills did we use then? How can what we’ve learned from those experiences help us now?*”

***Research shows we all have at least some of the following personal strengths that we can use to overcome challenges. Which ones do you have?***

- 1. Relationships** – being a friend and forming positive relationships.
- 2. Service** – helping others or supporting a cause.
- 3. Life Skills** – making good



decisions, speaking up for yourself and others and using self-control.

- 4. Humor** – being able to share a laugh, sometimes at your own expense, to lighten your own mood as well as the mood of others.
- 5. Inner Direction** – making choices based on your own values.
- 6. Perceptiveness** – seeing past the surface of people and situations to understand what they are really about.
- 7. Independence** – distancing yourself from unhealthy people

and situations.

- 8. Positive View of Personal Future** – believing that no matter how things look today, you will pull through and get to where you want to be.
- 9. Flexibility** – accepting and adjusting to change in a positive way.
- 10. Love of Learning** – asking questions and gathering information to help you solve problems as well as learn more about things that interest you.
- 11. Self-motivation** – setting goals and working toward them because you want to

accomplish them, not because of what someone else expects or demands of you.

- 12. Competence** – knowing what you are good at doing and using your own unique knowledge, talents or abilities.
- 13. Self-Worth** – knowing that you are a valuable member of your family or community and being confident that you can make a positive difference in the lives of others.
- 14. Spirituality** – having faith in something greater than you.
- 15. Perseverance** – looking for new ways to solve problems

and overcome challenges, even if you have been unsuccessful in the past.

**16. Creativity** – expressing yourself through art, or thinking of creative ways to solve problems and achieve goals.

## **Asking for and Accepting Help**

Everyone needs a helping hand at some point. Don't wait until you are exhausted and desperate before seeking help. Asking for and accepting help as soon as you realize you are in need means you will get back on your feet sooner and need less help over the long haul.

Family, friends, neighbors and coworkers may be able to help with meals, childcare, transportation or other needs, but if they don't know your situation, they can't help. If you are under financial stress and can't seem to make ends meet:

**1. Call your mortgage lender.**

Ask for a lower interest rate, a reduced payment plan, or other considerations until you can get back on your feet. Delayed or reduced payments are better than no payment, so they may be willing to help. If you rent, before your rent is due, ask your landlord if he can lower the

payment for a few months and let you make up the difference once your situation improves. If you are able to take care of some maintenance or repairs, your landlord may let you work off part of your rent.

- 2. Contact your utility providers** (gas, electric, phone, water) and ask if they have any programs to help people in need keep their services turned on. Find out how to apply.
- 3. Call your church or community food banks.** While government funded programs can offer help to those who

meet eligibility criteria, more immediate help for families in crisis is often available through churches and local nonprofit organizations.

A variety of services are also available to help address specific needs including healthcare, food, childcare and counseling services for suicide prevention, addiction recovery, and domestic violence. See specific listings in the Family Resources section of this guide.

## **Parenting Tips for Families in Crisis**

Uncertain and chaotic environments

place children at increased risk for developmental delays affecting their reasoning, speech, movement and social skills.

Children watch adults to see how we respond to crisis. If parents stay positive and hopeful, the crisis will have less of an impact on child development. In order to keep your cool during crisis, you must take care of yourself. Listening to uplifting music, spending some time in nature, or reading and inspiring book can help you find the peace and strength you need to guide your family through this challenging time.

## **5 C's for Coping with Family**



# Crisis

- 1. Communication.** Talking to your children about what is happening is the first step to helping them find healthy ways to adjust to changes. Encourage them to talk about their feelings and express their opinions respectfully. Listen to what they have to say and make sure they know what has happened is NOT their fault. Children may have a lot of questions you can't answer right now, and that's okay. Be honest and assure them that some things, like your love for each other, will never

change. Be patient with younger children who will ask the same questions over and over; try to answer them consistently. Older children may know more about what is going on. Tell them what they need to know to understand the situation and allow them to ask questions, but be careful not to burden them with too much information. Help them understand that you are still working to support and protect them and that you do not expect them to solve adult problems.

**2. Consistency.** Setting clear and

consistent boundaries and family rules is always a good idea, but it is especially important for families in crisis. Structure and limits help children feel safe because they know what to expect. Continue existing routines as much as possible and create new ones as needed. For example, if you are no longer able to tuck your children in at night due to your new work schedule, try to talk with them over breakfast every morning instead.

**3. Connection.** People who are connected to others through a

network of family, friends, clubs or organizations are healthier and happier. Taking time to play together as a family helps raise everyone's spirits and relieves some of the stress of daily life. It doesn't take a lot of time or money to connect. As little as 10 minutes of family play a day can make a big difference in how you and your children cope with challenges. Try playing a game, singing a song, or taking a walk together.

- 4. Celebration.** Set realistic goals and celebrate progress rather than perfection. For example, if

you need to find a job, filling out an application or creating a resume is a big step in the right direction. If your child is struggling at school, turning in all her homework on time or improving a letter grade in a difficult class is a big accomplishment. Recognizing that you are making progress can help you stay focused on achieving your goals.

- 5. Contribution.** One of the best ways to bounce back from your own problems is to find a way to help someone else with theirs. Adults and children alike

can experience healing and empowerment by becoming a source of help to others.

Stress, anxiety, and other depression-like symptoms are common after natural disasters or other traumatic events. If you have any of these symptoms, call **1-800-985-5990** for information, support, and counseling. It's free and confidential.

*Resources:* [www.resiliency.com](http://www.resiliency.com)

# Parenting during Homelessness

Unstable living environments (doubled up with friends or relatives, or temporary stays in emergency shelters, hotels/motels, cars, tents, etc.) combined with parents' efforts to keep children safe in their new surroundings can cause stress and create barriers to healthy child development. For example, parents may keep infants or toddlers in strollers for long periods of time to keep them off dirty floors or away

from dangerous objects. This type of confinement limits opportunities for muscle development as well as healthy parent-child interaction.

Here are some tips for promoting healthy child development despite homelessness.

## **Infants**

Infants crave contact and interaction.

- Touch, hold, rock, sing and talk to infants to help them feel safe and secure.
- Talk to your infant about what you are doing and what will happen next to build language and thinking skills.



- Use eye contact and a reassuring tone while talking about feelings—like happy, sad or mad—to help infants learn social and emotional skills.
- Spread a blanket on the floor or in the grass for tummy time and simple games like pat-a-cake that build muscle strength and motor skills.
- Read simple books and encourage your baby to hold the book and turn the pages to build both language and motor skills.

## **Toddlers**

Toddlers need room to move, which can be especially challenging if your

whole family is living in a single room. Try to find a few safe places for your toddler to walk, run and climb. Parks, schools and even many shopping malls often have playgrounds and some community centers and libraries also have playrooms available for toddlers.

- Throwing and kicking a ball or dancing to music builds motor skills
- Using crayons and Play-doh builds fine motor skills.
- Playing simple counting and matching games with a deck of cards builds language and thinking skills.

## Preschoolers

Preschoolers need activities that encourage independence. Making simple choices, like choosing between two activities or snack options allows them to express themselves and builds self-confidence.

- Cutting and pasting builds fine motor skills
- Playing the “I am going on a trip” game builds language and thinking skills.

*Players take turns saying what they will pack for the trip, naming items from A–Z.*

*With each turn, the list of items to be repeated is longer and harder to remember. For example, with two players it would look something like this:*

**Player 1:** I am going on a trip and I am packing an Apple.

**Player 2:** I am going on a trip and I am packing an Apple and a Baseball.

**Player 1:** I am going on a trip and I am packing an Apple, a Baseball and a Cat .

- Playing games like “Mother may I” or “Simon Says” build social and emotional skills like

listening, following directions and self-regulation.

A quality pre-school can provide your child with a safe, predictable environment with social interaction and a variety of resources and opportunities for learning. In Florida, parents can enroll their 4-year-old children in FREE voluntary pre-K (VPK) programs. For more information on enrolling your child in Florida's VPK program, visit [www.vpkhelp.org](http://www.vpkhelp.org) or contact the Florida's Office of Early Learning at 866.357.3239 (1-866-FLREADY) or [www.floridaearlylearning.com](http://www.floridaearlylearning.com).

## **School age children**

Enroll your children in school and make regular attendance a top priority. The McKinney-Vento Act requires public schools to immediately enroll students experiencing homelessness, even when lacking:

- Proof of residency
- Guardianship
- Birth certificate
- School records
- Medical records, including immunization records
- Uniforms or other dress code items

The McKinney-Vento Act also allows families experiencing homelessness to enroll their children in either their school of origin (the school they were attending prior to displacement) or the school in the area where they are currently living, whichever is best for the child. Whichever school option you choose for your child, they are also entitled to transportation to and from the school. Call toll-free 1-800-308-2145 for more information.

Communicate with your child's school. Your child's teacher and the school administrators should be made aware of your family's crisis

situation. School counselors are knowledgeable about many community resources that can help your child through this difficult time. School staff may be able to connect you to organizations that can assist with school clothes and supplies, tutoring/mentoring, and school activity fees. Ask teachers to keep you informed if they notice troubling changes in your child's behavior or performance. Counseling may also be available to your child through the school's guidance office.

Staying active and participating in social activities with peers are healthy ways for children and youth



to cope with stress. Ask your child's school if assistance is available to help your child attend afterschool and summer programs and participate in extra-curricular activities.

Good nutrition will help your child better manage stress. Apply for free and reduced price breakfast and lunch programs, summer feeding programs and other services that will help you consistently meet your child's nutritional needs (see listings under Health and Nutrition Services in the Family Resource section of this guide).

*Resources:*

[www.pbs.org/parents/  
familiesstandtogether](http://www.pbs.org/parents/familiesstandtogether)  
[www.resiliency.com/free-articles-  
resources](http://www.resiliency.com/free-articles-resources)

# **Dealing with Deployment**

## **Understanding the Impact of Deployment on Children**

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

deployment.

## **Age of Child and Typical Symptoms of Stress**

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Infants (*birth to 1 year*) May have decreased appetite and increased irritability.

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Toddlers and Preschoolers (*1–6 years*) May appear more gloomy or tearful, have trouble sleeping, throw more frequent temper tantrums, return to behaviors they had outgrown such as bed wetting and thumb sucking, experience separation anxiety and engage in war-related play.

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School Age Children (*6–12*)

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

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Teenagers (13–18) May be rebellious, irritable and more easily frustrated, want to spend more time with friends, suffer from low self-esteem, loose interest in sports and other hobbies, or engage in risky behavior like sex, drugs, or juvenile crime.

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***NOTE: If children show signs of***

***extreme stress, or if any symptoms last for more than six weeks, seek professional help from school, community or military service providers.***

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## **Tips for Helping Children Deal with Deployment in Healthy Ways**

### **Pre-Deployment**

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**LEARN** all you can about the deployment and what options are available for children to communicate with the deployed family member

(mail, email, phone calls, video chats, etc.)

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

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

**REASSURE** children that the deployed family members are

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

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

**ESTABLISH** a support system for yourself where you can express adult concerns and worries related to deployment and get the support



you need to care for your family. Children are not equipped to provide the support parents and caregivers need.

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

=====  
*Activities that Help Kids Cope:*  
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- Take pictures of the deploying family member doing everyday

things and create a scrapbook the children can look at whenever they want.

- Record the deploying family member reading a chapter book so children can listen to his or her voice every day.
- Display the family member's picture in each child's bedroom so they feel close.

## During Deployment

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

**LIMIT** children's exposure to the

news and to adult conversations about frightening details.

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

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

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

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

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

## Post Deployment

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

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

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

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

**SET** aside some time to spend with each child, one-on-one, doing activities that are special to them. This makes children feel special and appreciated for their individuality and

allows family members to reconnect with each child in a way that is most comfortable for that particular child.

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

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

**SEEK** help to deal with post-traumatic stress, traumatic brain injury, depression, or other serious

concerns including personal financial crisis, substance abuse or marital problems.

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*Tips for Reconnecting with Children:*

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

**Infants**



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

## **Preschoolers**

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

## **School Age Children**

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

## **Teenagers**

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

*This tip sheet was developed with*

*information from the following  
online resources:*

[\*www.uswestaap.org/\*](http://www.uswestaap.org/)

[\*Parent\\_Guide\\_Deployment.pdf;\*](#)

[\*www.usuhs.mil/psy/pdf/\*](http://www.usuhs.mil/psy/pdf/)

[\*CTChildrenCopeDuringDeployment.\*](#)

[\*pdf; www.MilitaryOneSource.com;\*](#)

[\*www.realwarriors.net/family/\*](http://www.realwarriors.net/family/)

[\*children/reconnecting.php\*](#)

# Helping Kids Cope with Stress

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

All individuals react differently to

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

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

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## SYMPTOMS YOUR CHILD IS DEALING WITH STRESS:

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### ***Changes in sleeping pattern***

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

### ***Mood swings***

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

## ***Complaining of physical pain***

- Headaches
- Stomachaches

## ***Teasing/bullying others***

**As a parent, you can offer the following support:**

- Offer an opportunity for children to talk about how they are feeling and why
- While listening to your child, label out loud the names of the emotions he might be feeling (For example: You must have felt it was unfair/disappointing)

- Create problem solving solutions together
- Be a positive role model
- Keep kids on a regular schedule
- Encourage healthy eating and proper rest
- Help kids plan and prioritize school assignments—time management skills help decrease feelings of stress
- Provide play experiences and exercise where children are able to release built up tension such as playing a sport, taking a walk or riding a bike
- Tell or read stories about other children in similar stressful



situations

- Give hugs and back rubs—physical attention is always comforting

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

- Let the child know they are not to blame
- Do not involve children in adult disputes and try to handle conflicts when children are not present
- Work with the other parent to provide a consistent routine for the child

- Let the child ask questions and remember to do what is in the child's best interest

## **WHEN MOVING to a new school or town:**

- Prepare your child for the move to the new surrounding and allow them to express feelings of sadness for leaving their old school
- Take a tour of the new school and allow them to be familiar with places such as the bathrooms, libraries, and principal's office before their first day

- Keep kids on their regular schedule, especially meals and bedtimes
- Help your child make new friends by introducing them to different social settings with kids their own age
- Make sure to keep the lines of communication open and check-in daily with how your child is adjusting
- Be a role model and think positively

## **WHEN DEALING WITH A TRAUMATIC EVENT:**

- Allow your child to mourn; give

them time to heal

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

# **SELF-CARE TIPS FOR PARENTS & CAREGIVERS**

## **Managing Stress**

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

## **Recognizing the signs of stress**

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

Although some stressful tasks can't be avoided, changing the way we do them can help reduce stress. Try to plan your day the night before using

a to-do list, and schedule the most important or unpleasant tasks first.

## **Making Errands Less Stressful**

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

- Plan to run errands right after breakfast, when children are not tired or hungry.
- Be prepared to meet your child's needs. Pack a bag with a few diapers, wet wipes, diaper ointment, a change of clothes, a zip lock bag for soiled clothes, a pacifier and a small toy.

- If you are not breastfeeding, bring along a bottle with powdered formula and a bottle of water so you can mix it when needed.
- For older children, bring a healthy snack. Granola bars, raisins, Cheerio's, Gold Fish crackers or other favorites will hold them over until you can all get some lunch.
- A removable sunshade for the vehicle's side windows will protect your baby's skin and eyes from the sun and make the ride more pleasant.
- Limit the number of errands you



try to accomplish in a day.

Babies can be over stimulated by too many sights and sounds and may become fussy, while toddlers get bored having to sit still for long periods of time.

- Be flexible! Take care of the most urgent matters first, so if children get tired or fussy, you can head home and leave the remaining errands for another time.
- If you have several children to keep up with, ask a friend or family member to come along for your outing and help with the children.

# 25 Ways to Reduce Everyday Stress

## Do...

- Get up 15 minutes earlier
- Keep things in perspective and accept what you cannot change (the other line always moves faster, etc.)
- Learn to say NO to extra activities
- Join a parent support group
- Spend time with friends—have a potluck supper to make it easier

on yourself

- Set realistic goals
- Prioritize tasks, putting your energy into things that bring the most benefit
- Simplify meal times by making out your shopping list with easy meals in mind, and cooking enough one day for leftovers the following day
- Ask friends or family for help with errands, cleaning or child care
- Eat well-balanced meals and drink plenty of water every day
- Get enough sleep
- Exercise because regular

exercise relieves stress, lowers the risk of depression and anxiety, boosts your immune system, increases energy, and sets a good example for your children

- Attend worship services
- Break big jobs into sections and focus on one section at a time
- Combine activities when possible. For example, walk the dog with the children and talk to them about their day while you walk.
- Chose a hairstyle that is easy to maintain and clothes that don't need special care

- Have a desk, table or other place where all bills and important papers can be organized and addressed at a regular time
- Follow a set schedule. When children know what to expect, mealtimes, bedtimes, chores and homework are less stressful for the whole family
- Keep a small calendar with you at all times to keep up with appointments
- Make duplicate keys for home and car
- Remember, your children need your unconditional love

## Don't...

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

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

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## **Managing and Controlling Anger**

Experiencing anger is not good for your health. It causes your

adrenaline and blood pressure to rise above normal levels. Even worse, you could end up hurting someone or doing something that you will regret later on. Below are some tips to help you calm down and control your anger, especially when you are with your children. Remember, children imitate ways to solve problems.

- 1. Relax and Breathe.** Calm yourself down. Take a deep breath. As you exhale, imagine your anger leaving you with your breath. Release it and be free. Repeat this step over and over until you feel peace

inside.

- 2. Release your anger through safe outlets.** Exercise regularly, call a friend and vent, clean your house or water your plants. Just make sure you know what your safe outlets are.
- 3. Forgive and forget.** Learn to forgive those that have caused you pain and suffering. This doesn't mean you have to contact them and make a big deal over it, this is meant to give yourself inner peace by releasing emotional pain.
- 4. Exercise.** Engaging in exercise



increases your endorphins. Your angry mood can change to a happy one if you get involved in exercises that you enjoy doing.

**5. Listen to soothing music.**

This helps calm your soul. Take 20 minutes to relax and listen to music while you take some deep breaths.

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

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# Finding Balance between Home and Work

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

Changing jobs is always stressful, but sometimes necessary. You may

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

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

## Spouse

- 1. Make time for just the two of you.** Easier said than done? Not with the help of your friends with children of their own.

Designate a date night for each couple and swap babysitting services. This will work out for mom and dad and keep the kids happy playing with their friends for a night. Also, consider one day during the week where you and your spouse have a lunch date at the park, a bookstore or even at home.

**2. Use each other for support.**

Share domestic duties and caring for the children so that tasks don't fall on one person. While one person is cleaning up after dinner, have the other bathe kids and get them ready

for bed. Switch duties around to avoid burn out.

- 3. Show appreciation for each other.** Although it is understood, going out of your way to thank your spouse for something they did is a great way to boost confidence and happiness. Compliment each other on how great of a parent and partner they are. Make an unexpected phone call or email just to say thanks and I love you.

## Children

- 1. Assign chores on a weekly or monthly basis.** Chores teach

children responsibility and give them a sense of belonging.

While young children are limited in what they can do on their own, every little bit helps. Even toddlers can learn to pick up their toys before snack time.

Older children may like playing their favorite music while they complete their chores. Always remember to praise children for completing their chores.

- 2. Encourage a structured daily routine.** This helps to keep the family feeling organized. Inconsistent routines are likely to leave you feeling

overwhelmed. Setting a bedtime for children is a way for you to know that you have an hour or two a night to spend as you need.

- 3. Limit media interaction.** Today many young children are absorbed in television, video games and computer use. Unfortunately, much of what is in the media is not appropriate for healthy child development. Be aware of what your kids watch and how much time they spend watching. Too much exposure to technology can increase your child's stress level and affect

their temper, which will affect you as the parent.

- 4. Plan family activities for the weekend.** This gives the children and you something to look forward to while at school and work during the week. Plan an activity at home such as gardening, crafts or cooking. You can also go to parks or check online or in your newspaper for local events to keep costs to a minimum.

## Work

- 1. Keep ONE calendar for all work and home events.** This



way you can plan for the office staff meeting and also your child's soccer game or ballet recital. A single calendar will help you keep up with your whole schedule, help you prioritize your day and reduce confusion and stress.

## **2. Negotiate flexible hours.**

Flexibility allows employees to integrate their work and home responsibilities and perform better at both. Traditional flextime is available to 44 percent of employed parents, meaning they are allowed to select starting and quitting hours

but must stick to them. *Daily flextime* allows for the employee to change starting and quitting times whenever they choose as long as a required number of hours is met each week. Currently, 29 percent of full time or salary workers have this option, but many are not taking advantage of it.

- 3. Advocate for family-friendly workplace policies.** Often seen as a privilege, on-site childcare is becoming more common. Depending on the number of employees who will use the

service and whether it fits the budget, suggest on-site childcare and explain how it will be beneficial to the organization as a whole, not just the parent employees. Other family-friendly policies include telecommuting, educational opportunities, and a variety of paid and unpaid leave options.

## Self

- 1. Prioritize.** Determine what tasks you need to complete, and then rank them in order of importance. Consider your own needs, as well as those of loved

ones. If you must work on a Saturday, for example, you might plan a recreational activity with your family or friends for Sunday.

- 2. Incorporate exercise into your life.** It can seem like a hassle but the benefits definitely outweigh the costs. Being physically healthy is important not only for yourself, but also your spouse, children and employer. Today, many companies offer gyms on their premises or include gym memberships in employee benefits. Staying active

improves health, which keeps you productive and motivated at work and energized to keep up with your kids.

- 3. Nurture yourself.** Providing for your family is a given, but don't forget to give yourself a break. Try yoga, meditation or other relaxation techniques. Enjoy a quiet afternoon with a good book, spend some time with friends or schedule a day of rest. In order to nurture your family, you must first nurture yourself.

# Tips for a Healthy Relationship

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

***The key ingredients of healthy***

## ***relationships are:***

### **Equality**

If one partner controls every aspect of the relationship, the relationship is unequal and probably unhealthy.

Equality in a relationship means that both partners:

- ***Make important decisions together.*** Equal partners share their opinions about important choices, like how to spend money or raise children, and work together to reach an agreement before making any decisions.
- ***Respect one another's***

***boundaries.*** Couples in a healthy relationship allow each other to have time alone, other friendships, interests or hobbies.

- ***Work as a team.*** Partners in a healthy relationship do not compete with each other; they encourage each other and work together. They respect each other's way of doing things, cooperate to complete daily tasks, and are supportive of each other's goals.

## **Mutual Respect**

Mutual respect means valuing each other's opinions, showing



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

## **Forgiveness**

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

## **Intimacy**

In healthy relationships, partners are

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

## **Empathy**

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

## **Shared Responsibilities**

Important household tasks, such as

cleaning, running errands, and paying bills, are either divided equally, or shared equally.

## **Trust and Support**

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

## **Honest and Positive Communication**

Good communication involves both talking and listening. In a healthy relationship, each partner feels comfortable expressing thoughts,

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

### **Effort, Commitment and Fidelity**

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

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

If you feel you may be in an unhealthy relationship, get additional information at [www.loveisrespect.org](http://www.loveisrespect.org).

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

# CONCRETE SUPPORTS IN TIMES OF NEED

## Family Resources

Toll Free Help Lines by Topic

***Support Services for Parents and  
Caregivers***

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**Florida 2-1-1 Association**  
Provides free, confidential

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

Additional information is also available online at [www.211florida.org](http://www.211florida.org).

**2-1-1**

**Abuse Registry**

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

<https://reportabuse.dcf.state.fl.us>

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

## **Child Help USA**

The hotline offers crisis intervention, information, literature, and referrals to thousands of emergency, social service, and support resources.

Professional crisis counselors can provide assistance to callers in 170



languages. All calls are anonymous and confidential. Available 24 hours a day, 7 days a week. [www.](http://www.childhelpusa.org)

[childhelpusa.org](http://www.childhelpusa.org)

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

## **Prevent Child Abuse America**

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

[preventchildabuse.org](http://www.preventchildabuse.org).

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

## **Parents Without Partners**

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

**1-800-637-7974**

**AARP Foundation Grandparent  
Information Center**

A resource for grandparents raising grandchildren, professionals, support groups, researchers and policy makers. Additional information is also available online at [www.aarp.org](http://www.aarp.org) or [www.aarp.org/states/fl](http://www.aarp.org/states/fl).  
**1-888-OUR-AARP (1-888-687-2277)**

## **Boys Town**

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

**1-800-448-3000**

## **Florida State Foster/Adoptive Parent Association**

The Florida State Foster/Adoptive Parent Association (FSFAPA) is a statewide membership group for all foster, adoptive, relative and non-relative caregivers in Florida.

Membership is free for all caregivers.

<http://floridafapa.org/>

**1-866-913-0977**

Email: [info@floridafapa.org](mailto:info@floridafapa.org)

***Support Services for Military Families***

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## **Military One Source**

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

**1-800-342-9647**

**U.S. Department of Veterans**

## **Affairs**

Provides free readjustment counseling services to service members, veterans, and their families. Services include individual counseling; group counseling; marital and family counseling; medical referrals; help with applying for VA benefits; employment counseling; and alcohol and drug assessments, information, and referral to community resources. Counseling is provided at 300 community-based Vet Centers in the U.S. and surrounding territories by counselors who, as veterans themselves, have “been there and done that” and

understand what the veteran is going through. Vet Center staff is available toll free during normal business hours. Additional information also available online at [www.va.gov](http://www.va.gov).

**877-WAR-VETS (927-8387)**

## **Veterans Crisis Line**

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

to receive confidential support 24 hours a day, 7 days a week.

Additional information also available online at <http://veteranscrisisline.net>.

**1-800-273-8255 and Press 1**

**Florida Department of Veterans' Affairs**

[www.floridavets.org](http://www.floridavets.org)

***Health and Nutrition Services***

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**ACCESS Florida**

Toll-free number to apply for food stamps, Medicaid, and temporary cash assistance. Additional information also available online at



[www.myflorida.com/accessflorida/](http://www.myflorida.com/accessflorida/)  
**1-866-76ACCESS (1-866-762-2237)**

## **American Academy of Pediatrics**

A new website for families at [Healthychildren.org](http://Healthychildren.org) offers trustworthy, up-to-the-minute health care information and guidance for parents/caregivers along with interactive tools and personalized content. Additional information is also available online at [www.aap.org](http://www.aap.org).

**847-434-4000**

**Toll-free: 800-433-9016**

## **Florida KidCare**

Provides free to low-cost

comprehensive health coverage for children from birth through age 18. Florida KidCare covers everything from basic check-ups all the way through hospitalizations, in addition to vision, dental and prescriptions. Most families pay \$15 - \$20 a month in premiums to cover all of their children. Many pay nothing at all. Additional information is also available online at [www.](http://www.floridakidcare.org)

[floridakidcare.org](http://www.floridakidcare.org).

**1-888-540-KIDS (1-888-540-5437)**

**TTY Line: 1-877-316-8748**

**Family Health Line of Florida**

Assists pregnant women in accessing prenatal care and

substance abuse treatment during pregnancy and provides information on helpful community resources. All calls are confidential and are answered by trained counselors who are available: 8:00am-11:00pm, Monday through Friday, and 10:30am to 6:30pm weekends. Closed on holidays. <http://211bigbend.net/contact-family-health-line-counselor.html>  
**1-800-451-2229**

## **PPD Moms (Post Partum Depression)**

A volunteer-led organization providing support services to women and their families struggling with the

effects of postpartum depression (PPD) or related mood disorders. Each of the peer support moms on call have been trained by leaders in this field and are networked by the Postpartum Support International group. By calling 800-PPDMOMS new moms who think they may be suffering from PPD can obtain a risk assessment. If they need more help it can and will be sent to them.

<http://1800ppdmoms.org>

**1-800-PPD-MOMS**

## **La Leche League**

24 hour toll-free breastfeeding helpline provides telephone counseling, referral and extensive

information on breast feeding.  
Additional information available  
online at [www.lalecheleague.org](http://www.lalecheleague.org).  
**1-800-LALECHE (1-800-525-3243)**

## **Women, Infants and Children (WIC)**

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

# ***Child Care Resource and Referral Services***

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## **Child Care Aware**

A nonprofit initiative committed to helping parents find the best information on locating quality child care and child care resources in their community by connecting parents with local agencies best equipped to serve their needs.

Additional information is also available online at [www.](http://www.childcareaware.org)

[childcareaware.org](http://www.childcareaware.org).

**1-800-424-2246 TDY: 866-278-9428**

**Florida Childcare Resource and Referral Network**

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

**1-866-269-3022**

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

Provides referrals to local agencies

for child care information. Available 7:30am to 4:30pm Mountain Time, Monday through Friday. Additional information is also available online at [www.nrckids.org](http://www.nrckids.org).

**1-800-598-KIDS (1-800-598-5437)**

## ***Services for Adolescents and Runaways***

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### **Thursday's Child National Call Center for Endangered Youth**

Provides counseling, crisis intervention, case advocacy, referrals and messages between parents and runaway youth. Areas of assistance are child abuse, child



exploitation, eating disorders (including Anorexia and Bulimia), depression, teen suicide, missing children, runaways, sexual safety, substance abuse, teen pregnancy and teen parenting. Available 24 hours a day, 7 days a week.

[www.thursdayschild.org/  
frames\\_about.htm](http://www.thursdayschild.org/frames_about.htm)

**1-800-USA-KIDS (1-800-872-5437)**

## **The Covenant House Nineline**

Provides food, shelter, clothing, crisis care, health care, education, vocational training, drug abuse treatment and prevention programs, legal services, recreation, mother/child programs, transitional

living programs, street outreach and aftercare. Available 24 hours a day, 7 days a week. Additional information also available online at [www.covenanthouse.org](http://www.covenanthouse.org).

**Email help: [help@neline.org](mailto:help@neline.org)  
1-800-999-9999**

## **National Runaway Switchboard**

Provides non-judgmental, confidential crisis intervention and referrals. Available 24 hours a day, 7 days a week. Additional information also available online at [www.](http://www.1800runaway.org)

[1800runaway.org](http://www.1800runaway.org)

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

## **National Safe Place**

If you're in a crisis, text the word SAFE and your current location (address/city/state) to **69866**. We'll text you back the address of the nearest Safe Place site and contact number for the local youth shelter. Within that same message you'll receive a prompt that says, "reply with 2CHAT for more help." Once you reply, you'll be connected with a professional for more help.

[www.nationalsafeplace.org](http://www.nationalsafeplace.org)

Email: [info@nationalsafeplace.org](mailto:info@nationalsafeplace.org)

***Services for Children with Disabilities***

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## **CHADD**

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

**1-800-233-4050**

## **Family Network on Disabilities**

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

**1-800-825-5736**

**Florida Developmental Disabilities  
Council, Inc.**

[www.fddc.org](http://www.fddc.org)

**800-580-7801**

**TDD: 888-488-8633**

**Agency for Persons with  
Disabilities**

[www.apd.myflorida.com](http://www.apd.myflorida.com)

**Tel: 866-APD-CARES (1-866-273-  
2273)**

**TTY: 800-955-8771**

**Spanish: 877-955-8773**

**Creole: 877-955-8707**

***Services for Families Dealing with  
Domestic Violence***

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## **Florida Coalition Against Domestic Violence**

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

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

***Services for Families Dealing with Addiction***

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## **Unity Recovery Center**

24-hour toll-free addiction helpline.

[www.unityrehab.com](http://www.unityrehab.com)

**1-844-789-6766**

## **National Clearinghouse for Alcohol and Drug Information**

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

available online at [www.samhsa.gov](http://www.samhsa.gov)  
**1-800-662-HELP (1-800-662-4357)**  
**TDD: 1-800-487-4889**  
**Spanish Suicide Line: 1-888-628-9454**

## ***Services for Missing and Exploited Children***

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

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



and sexual exploitation. Available 24 hours a day, 7 days a week.

Additional information is also available online at [www.missingkids.com](http://www.missingkids.com)

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

## **Child Find of America Hotline**

Locates missing children through active investigation, prevents child abduction through education, and resolves incidents of parental abduction through mediation.

Available 9:00am to 5:00pm, Monday through Friday; voicemail during evenings and weekends.

Additional information is also available online at [www](http://www).

[childfindofamerica.org](http://childfindofamerica.org).

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

## **CAPSS Hotline**

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

[www.childfindofamerica.org](http://www.childfindofamerica.org)

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

**Parent Help Line: 1-800-716-3468**

**FDLE Missing Endangered  
Persons Information  
Clearinghouse**

[www.fdle.state.fl.us/mcicsearch/](http://www.fdle.state.fl.us/mcicsearch/)

**Tel: 888-FL-MISSING (1-888-356-4774)**

***Sexual Violence Prevention and  
Intervention Services***

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**Rape Abuse and Incest National  
Network (RAINN)**

Instantaneously connects callers to the nearest rape crisis center, providing counseling and support. Additional information is also available online at [www.rainn.org](http://www.rainn.org)  
**1-800-656-HOPE (1-800-656-4673)**

## **Florida Council Against Sexual Violence**

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

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

## ***Suicide Prevention Services***

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### **Florida Suicide and Crisis Hotlines**

The Florida Suicide and Crisis Hotline list by city; the local numbers to call for anyone in crisis and reaching out for help.

[www.suicide.org/hotlines/florida-suicide-hotlines.html](http://www.suicide.org/hotlines/florida-suicide-hotlines.html)

**1-800-273-TALK (8255) or 1-800-SUICIDE (784-2433)**

**TTY 1-800-799-4889**

### **National Suicide Hotline**

The Substance Abuse and Mental Health Services Administration's (SAMHSA) suicide prevention helpline also offers help with substance abuse, economic worries, relationship and family problems, sexual orientation, illness, getting over abuse, depression, mental and physical illness, and loneliness. (24 hours/7 days a week)

[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

**1-800-273-TALK (8255)**

## **The Trevor Project**

The Trevor Project is determined to end suicide among lesbian, gay, bisexual, transgender, and questioning youth by providing life-

saving and life-affirming resources including a nationwide, 24/7 crisis intervention lifeline, digital community and advocacy/educational programs that create a safe, supportive and positive environment for everyone.

[www.thetrevorproject.org](http://www.thetrevorproject.org)

**1-866-488-7386**

## **Youth America Hotline**

YAH is the first and only toll free, peer to peer hotline network linking callers to community based peer counseling hotlines in the nation. The YAH website is a great place to find resources, learn more about the issues that are important to youth and keep up to date on significant

events.

[www.youthline.us/mainflash.html](http://www.youthline.us/mainflash.html)

**1-877-YOUTHLINE (968-8454)**

## ***Youth Development***

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### **Girl Scouts of America**

In Girl Scouts, girls discover the fun, friendship, and power of girls together. Through enriching experiences, such as field trips, sports skill-building clinics, community service projects, cultural exchanges, and environmental stewardships, girls grow and develop to their full potential.

[www.girlscouts.org](http://www.girlscouts.org)



**(800) 478-7248**

## **YMCA**

The Y is for everyone. Our programs, services and initiatives: enable kids to realize their potential, prepare teens for college, offer ways for families to have fun together, empower people to be healthier in spirit, mind and body, prepare people for employment, welcome and embrace newcomers and help foster a nationwide service ethic. And that's just the beginning.

[www.ymca.net](http://www.ymca.net)

**1-800-872-9622**

**Step Up For Students**

Step Up For Students provides scholarships for low-income students in grades K-12. The program, which administers the Florida Tax Credit Program, empowers families to choose the school that best meets their child's needs. Families have two options to choose from: a scholarship to help cover private school tuition and fees, or a scholarship to assist with transportation costs to attend a public school in another county. To be eligible, a student's household income must qualify for the free or reduced-price school lunch program (185 percent of the federal poverty

guidelines). Children who are in foster care or who are homeless may also be eligible.

[www.StepUpForStudents.org](http://www.StepUpForStudents.org)

**877-735-7837**

## **Deliver the Dream**

Deliver the Dream provides monthly three-day retreats at no cost for families who have a child or parent experiencing a serious illness or crisis. If you are interested in applying for a retreat, please contact us!

[www.deliverthedream.org](http://www.deliverthedream.org)

**1-888-OUR-DREAM (687-3732)**

## ***ADDITIONAL RESOURCES***

(long distance charges may apply)

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### **4-H**

4-H is the nation's largest youth development organization. More than 6 million 4-H youth in urban neighborhoods, suburban schoolyards and rural farming communities stand out among their peers: building revolutionary opportunities and implementing community-wide change at an early age.

[florida4h.org](http://florida4h.org)

**To get involved, call your Local County Extension office.**

## **Parents Anonymous**

Self-help groups serving abused children and parents under stress.

Available 11:00am to 8:00pm,  
Monday through Friday. Additional  
information is also available online at  
[www.parentsanonymous.org](http://www.parentsanonymous.org).

**909-236-5757**

**1-855-4APARENT (427-2736)**

## **Big Brothers/Big Sisters of America**

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

available online at [www.bbbs.org](http://www.bbbs.org).

**469-351-3100**

## **National Center for Victims of Crime**

Working with local, state, and federal partners, the National Center for Victims of Crime provides direct services and resources to victims of crime across the country; advocates for laws and public policies that secure rights, resources, and protections for crime victims; delivers training and technical assistance to victim service organizations, counselors, attorneys, criminal justice agencies, and allied professionals serving victims of

crime; and fosters cutting-edge thinking about the impact of crime and the ways in which each of us can help victims of crime rebuild their lives. Available 8:30am to 8:30pm (ET), Monday through Friday. Additional information is also available online at [www.](http://www.victimsofcrime.org)

[victimsofcrime.org](http://victimsofcrime.org).

**202-467-8700**

## **Suncoast Center, Inc.**

A program whose mission is to prevent and reduce the impact of exposure to violence on young children ages birth through 6 years. Provides information and education on children's exposure to violence,

referrals to community resources, consultation services and training in addition to providing direct services to children and families where violence has occurred to families living in Pinellas County. Services are private, confidential and free of charge. Additional information is also available online at [www.suncoastcenter.com](http://www.suncoastcenter.com).

**727-388-1220**

## **Florida Circle of Parents**

Circle of Parents® is a mutual support and self-help program for parents based on a framework of shared leadership, mutual respect, shared ownership and inclusiveness.



Additional information also available online at [www.ounce.org/circlegroups.html](http://www.ounce.org/circlegroups.html).

**850-921-4494 ext. 107**

## **Children's Home Society**

Redirects a teen's troubled life onto a new path of hope, provides a safe harbor for a child suffering from abuse and reverses crisis situations so lives are changed for the better.

Available by phone 8:30am to

5:00pm, Monday through Friday.

Additional information also available online at [www.chsfl.org](http://www.chsfl.org).

**850-921-0772**

## **Florida Diagnostic and Learning**

## **Resources System (FDLRS)**

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

**850-245-0478**

## **Florida Military Family & Community Covenant**

[www.fmfcc.org](http://www.fmfcc.org)

**Tel: (850) 421-4499**

## **Florida Network of Youth and Family Services**

[www.floridanetwork.org](http://www.floridanetwork.org)

**Tel: (850) 922-4324**

## **Florida Afterschool Network**

The mission of FAN is to provide unified leadership to advocate for the development, enhancement and sustainability of innovative, high quality afterschool programs and policies statewide.

[www.myfan.org](http://www.myfan.org)

**850-222-1340**

## **Boy Scouts of America**

The Boy Scouts of America is one of the nation's largest and most prominent values-based youth development organizations. The BSA provides a program for young

people that builds character, trains them in the responsibilities of participating citizenship, and develops personal fitness.

[www.scouting.org](http://www.scouting.org)

**972-580-2000**

## **Boys and Girls Club of America**

Boys & Girls Clubs are a safe place to learn and grow – all while having fun. Boys & Girls Clubs offer programs and services that promote and enhance the development of boys and girls by instilling a sense of competence, usefulness, belonging and influence.

[www.bgca.org](http://www.bgca.org)

**404-487-5700**

## **Community-Based Care**

Community-Based Care is a comprehensive redesign of Florida's Child Welfare System. It combines the outsourcing of foster care and related services to competent service agencies with an increased local community ownership of service delivery and design. This innovative statewide reform increases accountability, resource development, and system performance. To find your local Community-Based Care Lead Agency visit the following link:  
[www.myflfamilies.com/service-programs/community-basedcare](http://www.myflfamilies.com/service-programs/community-basedcare)

# Easy Phone Reference List for Parents and Caregivers

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## CONTACT NUMBER

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### **Florida Family Health Line 1-800-451-2229**

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

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**Poison Control** *24 hours a day, 7 days a week*  
**1-800-222-1222**

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**Local American Red Cross Chapter:**  
**1-800-REDCROSS**  
*For emergency shelter or evacuation information*

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**Pediatrician or family doctor**  
Name:

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**Fire** (non-emergency):

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**Police** (non-emergency):

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**Electric Company** (loss of service):

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Mom's work:

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Mom's cell:

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Dad's work:

---

Dad's cell:

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Children's daycare or school:

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Neighbors or friends to contact in  
case of emergency:

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*Fill in your local and personal  
information. Post in easy-to-find  
places around your home. You can*



*also give copies to your family,  
caregiver and others who spend  
time with your child.*

# Babysitter's Emergency Checklist

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Local Emergency Phone Number:

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Family Name:

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Home Phone Number:

---

Street Address:

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Nearest intersection/cross street:

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<b>Child's Name</b>	<b>Date of Birth</b>	<b>Medications</b>	<b>Allergies</b>	<b>C</b>
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# Information

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Insurance:    Policy #:

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First aid kit is:

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Fire extinguishers are:

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House keys are:

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Car keys are:

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Garage remote is:

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*I authorize any licensed physician, dentist or hospital to provide necessary emergency medical service to my child at the request*

*of the person bearing this form.  
Please take note of the allergies,  
medications and other information  
listed above.*

Parent/Guardian

Signature:      Date:

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# Make Your Own Pinwheel!

## What you'll need:

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

## How to make a pinwheel:

1. Print the pinwheel pattern. You can reproduce this pattern on white construction paper with a copy machine. Be sure to cut the construction paper to 8½ in. by 11 in.
2. Cut-out the pinwheel on the solid lines only.
3. Decorate both sides of the construction paper pinwheel.
4. Cut the dotted lines from the four corners to the center circle. Try not to cut into the center circle.
5. Use the sharpened pencil to poke a hole through the four tiny dark circles. The pencil point

also works well to poke a hole into the straw. Carefully push the pencil point through the straw about  $\frac{1}{2}$  inch from the top.

6. Make the tiny holes on the four points meet at the center circle.
7. Push the ends of the paper fastener through the holes on the pinwheel, then push the fastener through the center circle.
8. Place the straw on the back side of your pinwheel and push the ends of the fastener through the hole in the straw. Open-up the fastener by flattening the

ends in opposite directions.

*Now you are ready to try-out your  
beautiful pinwheel.*

*All you will need is a little bit of wind  
to make your pinwheel spin round  
and round. Have fun!*