

New York City's baby book : a handbook for parents.

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NEW YORK CITY'S



Baby Book

A HANDBOOK FOR PARENTS

issued by the

DEPARTMENT OF HEALTH
CITY OF NEW YORK



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DR. K. VIGORS EARLE
Watchet
Somerset, England

NEW YORK CITY'S

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A HANDBOOK FOR PARENTS



issued by the

**DEPARTMENT OF HEALTH
CITY OF NEW YORK**

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CITY OF NEW YORK
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Dear Parents:

In behalf of the millions of your fellow-New Yorkers, I welcome your new baby to our ever-growing family.

This book on child care is sent as a token of good will. It symbolizes the fact that your city government is deeply interested in your family's welfare.

The staff of your City Health Department, by whom this book was carefully prepared, considers the protection of the health of children its most important work. I hope you will enjoy reading "New York City's Baby Book" and will find it helpful.

God bless you and your family.

Sincerely yours,

William O'Dwyer
Mayor

THIS BOOK IS FOR YOU

Here is a book written especially to help you and your family as your baby grows during the coming months. You want the best for your baby . . . all mothers and fathers do. You love your baby and want to see that he has every chance to develop into an attractive and healthy youngster.

About Babies.—Parents always have many puzzling and wonderful experiences with a new baby. They wonder about many things—how soon baby will smile—how to put on diapers—when to expect the first tooth—when to call the doctor—and, when the baby grows older, how he learns discipline.

This book tries to help you with these problems. You may like to read through it at one sitting. Probably you will prefer to read the different chapters as your baby grows. You will see that the book repeats almost the same advice in several places. This is done to make it easy for you to find out all about your baby at each age instead of hunting all through the book for separate bits of information about him.

After you have read this book, we hope it will be clear to you that your baby, like every other baby, is very much of an individual, different from

all other babies. And remember, it is important that all those who care for him do it in much the same way so that he doesn't get confused. So share this book with the others who may care for the baby. Let them know how you want him cared for so he won't be confused.

About Experts.—Experts and some parents like you helped write this book. Credit for most of the work of this book goes to the staff of the Bureau of Child Health in the Department of Health, chiefly Dr. Leona Baumgartner and Dr. Samuel R. Berenberg. Suggestions of many New York City mothers and fathers, and various pediatric, psychiatric, and educational specialists have been included in the book.

Particular thanks are due to officers of the American Academy of Pediatrics, the New York City Committee on Mental Hygiene, and the Children's Bureau at Washington, D. C. for reading the manuscript and making suggestions. The cover of this book was designed by H. J. Barschel; the baby's photograph on the cover is by courtesy of the Maternity Center Association.

About Making Sure.—To make sure that the baby develops a healthy mind and a sound body, he and his parents

need the help of a doctor. The doctor should see him not only when he is sick but at regular intervals to keep him healthy. If for any reason you do not have a baby doctor or a family doctor, you may take your baby to one of the child health stations operated by your city government. There doctors and nurses will help you keep the baby well.

About the Fun You'll Have.
—It is really a lot of fun to have a baby in spite of the worries you sometimes have. We hope this book will help you to enjoy the new baby. It was written to help not only

new parents but also those who have had other children and who may get from it some new ideas for caring for this one in the simplest way.

About Your Own Common Sense.—But do trust your own common sense. No book can answer every question about every baby.

And when your baby is two years old, you may be ready for a new book. The one we recommend is "One To Six" which you can get free by writing to the Children's Bureau, Federal Security Agency, Washington, D. C.

CONTENTS

	<i>Page</i>
FOREWORD	4
Chapter I. NATURE AND YOUR BABY	11
1. Babies Grow by a Plan of Nature	11
2. Your Baby Is a Person	11
3. Routines for Good Care	12
4. Loving Your Baby Wisely	14
Chapter II. THE BABY: FROM BIRTH TO THREE MONTHS	16
1. How the Baby Grows	16
Your Newborn Baby	16
The Inborn Controls	16
The Mouth Comes First	17
Learning about His World	18
2. The Little Baby's Day	19
The Baby's First Food	20
The Right Milk for Your Infant	20
A Flexible Routine for Feeding	21
Suggestions for the Mother Who Breast- feeds Her Baby	23
Suggestions for Making Formula and Sterilizing Bottles	25
Water	28
Fish Liver Oil	28
Orange Juice or Substitutes	29
The Baby's Bowels and Bladder	30
Sleep	31
Bathing the Baby	35
Clothes and Being Dressed	39

	<i>Page</i>
Fresh Air and Sunshine	40
Exercise, Play and Companionship	41
How to Tell That Your Baby Is Well	42
Some Things That May Trouble the Little Baby	44
Hiccups	44
Spitting up and Vomiting	44
Colic	44
Skin Rashes	45
Eye Conditions	47
The Navel	47
Noisy Breathing	47
"Nervous" Babies	48
3. What to Buy for Your Baby	48
Clothes and Bedding	48
The Baby's Bed	49
Care of the Baby's Clothes	50
Toilet Articles	50
Equipment for Sterilizing Bottles and Making Formula	51
Chapter III. THE BABY: FROM THREE TO NINE MONTHS	52
1. How Your Baby Is Growing	52
The Desire to Touch Things	52
That Left Hand	53
Turning Over on His Own Power	53
Sitting up Alone	54
Crawling—in a Dozen Styles	54
New Tricks	55
When the First Tooth Comes	55

	<i>Page</i>
2. Changing Patterns of the Baby's Daily Life	57
Naps and Bedtime	57
Now Your Baby is Ready for Solid Foods	58
How to Begin	58
Cereal or Fruit for Starters	59
Vegetables	59
Eggs	60
A Day's Meal	61
Happy Mealtimes	61
Changing Schedules and Formulas for Milk	63
Increasing Appetite	63
If the Baby Sucks His Thumb	64
Elimination	64
Clothes and Baths	65
Fun for the Baby and the Family	66
Protect Your Baby from Disease	68
 Chapter IV. THE BABY BEGINS TO GET AROUND: FROM NINE TO FIFTEEN MONTHS	 71
1. How Old Is Your Year-Old Baby?	71
2. New Lessons in Your Baby's Everyday Life	74
Eating in a More Grown-up Way	74
Three Meals a Day	74
What to Cook for the Baby's Meals	75
Trust Your Baby's Changing Appetite	78
Now Your Baby Is Ready to Help to Wean Himself	78
Now Your Baby Is Ready to Control His Bowels	80
Now Your Baby Learns to Stand up	83
Playing Is Learning	84

	<i>Page</i>
3. When Puzzling Traits Develop	86
When the Baby Gets Into Everything	86
If Your Baby Shows Temper	88
If Your Baby Has Trouble Sleeping	88
If Your Baby Is Afraid	90
If Your Baby Plays With His Genitals	90
If Your Baby Continues to Suck His Thumb	91
 Chapter V. THE TODDLER: FROM FIFTEEN MONTHS TO TWO YEARS	 92
1. The Baby's Growth in Independence	92
Walking, Climbing, Running	92
New Skills with His Hands	93
Expressing Himself and Talking	93
2. More Grown-up Routines for the Day	94
Meals	94
Baths and Clothes	97
Naps and Bedtimes	98
3. Bladder Control	99
4. Lessons in Behaving	102
Fitting into Family Life	102
Learning from Playmates and Playthings	108
How Parents Can Teach Their Children	111
When Problems Arise	115
Fears	116
Tantrums	116
Biting, Scratching and Hitting	117
Dirt-eating	118
Sex Play	118

	<i>Page</i>
Chapter VI. WHAT TO DO WHEN YOUR BABY IS SICK	120
1. How to Tell Whether Your Baby Is Sick	120
Fever	120
Vomiting	120
Diarrhea	120
Running Nose, Cough or Hoarseness	120
Eating	120
Restlessness, Crankiness, Crying as if in Pain	120
2. Choosing a Doctor	121
3. What to Do Before the Doctor Comes	122
4. How to Care for a Sick Baby	123
Follow the Doctor's Orders Exactly	123
Keep the Baby in a Warm, Quiet Room	123
How to Take a Baby's Temperature	124
How to Give an Enema When the Doctor Orders It	125
How to Give an Alcohol Sponge Bath	126
How to Keep the Air in the Baby's Room Moist	126
5. If Your Baby Must Go to the Hospital	127
6. When Your Baby Is Getting Better	128
7. Some Common Diseases of Childhood	130
Colds	130
Croup	130
Convulsions	130
Chicken Pox	131
Measles	131
Whooping Cough	131
8. First Aid for Accidents	131
Cuts and Scratches	131
Swallowing Objects	132
Poisons or Pills	132
Burns	132
9. Be Careful but Do Not Worry	133
INDEX	134

Chapter I

NATURE AND YOUR BABY

1. BABIES GROW BY A PLAN OF NATURE

Your newborn baby has a lot of growing and learning ahead of him. In the next two years he will grow more, and probably learn more, than he will all the rest of his life. He starts out at birth able to do a lot of important things himself. He grows by himself. Without any instruction he can breathe, eat and digest his food, and sleep. His tiny nervous system has its own way of functioning.

The baby's muscles, bones and nervous system will grow and develop according to nature's plan. He can see, hear, coo and laugh, use his hands, cut his teeth, and crawl. These and many other abilities develop in a definite way. Generally speaking, his muscular development is from the top of his body downward. First he learns to control his mouth and eyes, his head and neck, then his shoulders and arms, next his trunk and lastly his legs.

As the baby grows he learns how to sit up, walk, talk, feed himself, control his bowels

and bladder and behave as a child of his age is expected to behave. His satisfaction and success in each little thing he learns lead him on to the next step in growing up. All his growth—in body, mind and feelings—is interwoven. At every age the baby's patterns of behavior change. It is a usual sign of growth when he naps less often or wants to play at different times in different ways.

It is very important to know what to expect your baby to be able to do at the different stages of his growth. This book tells what a baby naturally does as he grows and how his parents can help him. Wise parents respect a child's natural development and are guided by it. They try neither to force it nor to hold it back but go along with the baby, helping as much as they can.

2. YOUR BABY IS A PERSON

All babies follow the same general patterns of nature, but every baby has its own characteristic way of growing and behaving. Even newborn babies look different, and act dif-

ferently, from one another. Each is an individual, a new and different person. The father's relatives may think the baby takes after their side of the family, while the mother's folks say he resembles them. The truth is that the baby looks like *himself*. He won't look quite like anyone else in the world, and he can't be expected to feel or behave just like anyone else.

No baby grows just the way this book or any other book says. There's no one "correct weight" for all babies at a certain age. A baby's weight depends upon a lot of things—how tall and broad his parents are, the kind of food his mother ate during pregnancy, how well the baby has been, whether he's a fast grower or a slow one. There's no one *right* way of doing any one thing either. One baby may be placid and easy going, sleep for long stretches at a time and get hungry as regularly as the clock strikes. Another baby, who is just as healthy, may take short naps, be extra lively every minute he's awake, and have a variable appetite. One baby may scoot around the floor on his hands and knees like a little bug at six months. Another may not crawl but

just squat until he's ready to get up and walk.

It's natural for parents to be proud of their children and to want them to be normal or above average. But the parents shouldn't worry if their baby is thinner than the neighbor's child, or doesn't cut his first tooth or say his first word as early as some other baby. What is important is not how your baby compares with another child, but whether he is well and contented and growing in his own best possible way.

So love your baby for the kind of little boy or girl he or she is. As you study your baby, you will learn to recognize his own particular style of growing and doing things. He'll grow better and learn faster and be happier if you respect him for what he is.

3. ROUTINES FOR GOOD CARE

Good care for a baby includes sensible, healthy ways of doing such things as feeding, bathing and dressing him. It also means protecting your baby from accidents, sickness and unwise things he might do that would harm him. But good care means more than this. It also means helping your baby to do things himself, little by little to develop



self-control, judgment and independence.

There are a great many things to be done for a young baby. At first it's a full-time job, on all three shifts. Added to this, the child's mother has other important things to do—homemaking, housekeeping, being a wife and sometimes mothering other children. She needs rest and fun herself. And of course she needs time to enjoy her baby. So a fairly regular routine for the baby is highly desirable if the mother isn't to wear herself out.

A baby needs regular routines, too. His education really begins with the orderly pattern of his everyday life. Fairly sys-

tematic care is the only way he can comfortably get his food and rest. Besides, the baby thrives better and is more comfortable if he comes to realize that his needs will be met regularly. The feeling that he can depend upon the person who cares for him gives him confidence in others and also in himself. One of the first things to do, therefore, is to plan his day so that it fits in easily with the rest of the family day and at the same time fits him.

But making a schedule isn't everything. Your baby is a human being first of all. He grows and changes from day to day, so that his routines need to be flexible. A mother is human, too, and naturally she can't always manage to have dinner or a bath ready on the dot. Occasional changes in the daily routine won't hurt the baby.

A few years ago mothers used to be warned to put and keep their babies on an exact, rigid schedule—meals, naps and playtime by the clock, so many minutes to nurse or finish the bottle, and just so many ounces of milk at each feeding. The baby was treated like a kind of machine, too, in the mistaken belief that it was better for him not to be held

but to lie alone in his crib and "cry it out" when he wanted attention.

In recent years, however, many doctors have discovered that a more flexible routine works better for both mother and baby. We believe you will find that your baby is more contented and a better baby if his life is planned upon a stable framework of *orderly, flexible routine*. This routine should be based on his natural rhythms of doing things.

4. LOVING YOUR BABY WISELY

Your baby is born with a need to be loved. He learns to love others by being loved himself. He senses his parents' affection in the way they hold him while they feed and cuddle him, and in the gentle tones of their voices long before words have any meaning for him.

Anyone who has visited an institution for homeless children can plainly see the difference between those lonely little waifs, who get no individual attention, and the baby in his own home, whose parents give him lots of loving care. Babies can be lonely.

Wise loving and thoughtful consideration of a baby's feel-

ings never spoil him. The "spoiled child" is often the one who has never had a feeling of security, whose normal craving for love hasn't been satisfied in his everyday life or whose parents don't really like to take care of him but only want to show him off. Consequently he always wants something that he doesn't have and cries and whines for it.

Babies are born ready to be reasonable and friendly. Once you understand how they grow and why they behave the way they do, you'll find that they can be trusted a great deal. A baby tries to learn to do things the way grownups do, and he is very anxious to receive the approval of his family.

A baby needs both a father and a mother. Naturally the mother is the more important parent at first because of his dependence on her. She takes care of the baby most of the time and she alone is with him day after day. But even a tiny baby notices his father, and as he grows a little older he learns to listen for his homecoming and greets him happily. In the first weeks, while the mother is regaining her strength, the father can help by bringing the baby to the mother to nurse, or by giving an occasional bottle. He can take on

the job of making the formula. Sundays and holidays, or if he gets home early enough at night, giving the child a bath will help father and baby to get acquainted. The time for a father to begin being a companion to his child is during babyhood.

A child often learns a great deal about family life by observing how his own father and mother get along together. In fact, a child's attitude toward his home is largely determined by the way his father and mother feel about each other and about him.

A child doesn't need "perfect" parents. But it is very important for him to feel sure that his parents want him even though they may be cross at times. All parents occasionally make mistakes in bringing up their children, but as they try to understand each other and their children better they learn to handle everyday problems more wisely.

No book or doctor can tell you everything about the care of your infant. You will become more familiar with the subject, as time goes on, by studying your own baby.

Chapter II

THE BABY: FROM BIRTH TO THREE MONTHS

1. HOW THE BABY GROWS

Your Newborn Baby.—You will never forget the first sight of your tiny, helpless newborn baby.

Before birth the baby was safe and warm inside his mother's body. There he was protected from all shock, noise or pain. All his wants were taken care of immediately and without any effort on his part. The new outside world is very different and less comfortable. Hunger causes him pain; cold, noise and sudden movements bother him. In some ways a baby isn't fully born until he's about a month old. It takes that length of time for his body to get to working smoothly and regularly; and it takes time for him to adapt himself to the new routine he finds.

It is therefore important to the baby's well-being and future development that we do everything possible to comfort him and make him feel secure in his new world. He especially needs to be close to his mother, to feel her warmth and tenderness. He needs to be handled gently. His natural

wants should be heeded and satisfied. He should not be left alone to scream with the pain of hunger, discomfort or loneliness. He needs to find that he can trust his parents to look after his wants and relieve his distress. Then he will grow in body and mind, in confidence and happiness.

Although it is hard to believe that the tiny newborn creature can do anything for himself, he doesn't start from scratch. He has already been at his job of growing for nine months. His little body is very wise and already knows a lot about what's good for him. He goes on learning more from the first breath of life.

The Inborn Controls.—The most important parts of the baby's natural equipment are the systems that carry on and regulate his vital functions of breathing, eating and digesting, and eliminating. When the baby's stomach is empty, he feels pains and his cry tells us it's time for food. He turns his head if we touch his cheek; he roots around, hunting for his dinner. He sucks and swallows, and has a mechanism

that tells him when he has had enough food and sucking, so that he stops sucking of his own accord when he is satisfied.

A baby can do a number of other useful things at birth, too. He can cough and sneeze to get mucus out of his throat and nose. He can also yawn, hiccup and belch. He shivers and his skin turns blue or mottled when he's cold. If there is a sudden loud noise or a jarring movement, his body stiffens, he stretches out and doubles up his arms and legs, he shrieks and looks pained. If his legs are held so tightly that he can't move, he cries and struggles to be free. Some babies show their reactions more clearly and intensely than others. Your baby's behavior will show you what makes him comfortable and what makes him miserable.

The Mouth Comes First.—Nature gives a baby a strong urge to suck in order to get food. Some babies are "good suckers" from the beginning. Some need a little help to learn how to get the nipple into the mouth and swallow. Sucking is an important business for every baby. It enables him to fill his empty stomach, and it is also a very satisfying exercise. Watch how hard and eagerly

your baby works for his meal. He wriggles and pushes, gets red and perspires. And how very contented he looks when he has finished! Some babies seem to have a greater desire to use their mouths than they have capacity for milk, and may try to suck their fingers after a meal. This is a normal urge; it is not wrong or harmful. One should not try to prevent a baby from sucking his thumb by pinning his sleeves down or putting splints on his arms or an aluminum mitt on his hands. This naturally makes him angry and does not cure the trouble. He will probably outgrow the need for extra sucking of his own accord.

The cry of the baby when he is born serves a useful purpose in getting air into his lungs and giving his breathing apparatus a first vigorous workout. His later crying has a purpose too, as we shall see. When the baby is a couple of weeks old, the mother may think she sees him smiling in his sleep, but the first real smile comes when he is about a month or two old, as his parents smile and talk to him. Later he begins to make little mewes and throaty sounds and coos. He works very hard at these new accomplishments, moving his mouth, wriggling

his hands and toes and making a great effort to get out a tiny squeak or gurgle. Soon he learns to laugh. Then he tries to babble and practices by himself for long periods. His ability to learn how to use words and sentences depends to some extent on his hearing others talk.

Learning About His World.
—The newborn baby apparently doesn't see very much even though he blinks his eyes at a bright light. At first a baby may look cross-eyed; one eye turns in one direction and the other in another. As he grows older he stares vacantly, sometimes for quite a while, at windows, ceilings and walls. Later on he follows a moving light or hand with his eyes; then he turns his eyes in the direction of an unusual sound. Generally, by the time he is two months old, the baby recognizes his mother's face, her breast, his bottle and other familiar things.

At the same time that he is learning to use his eyes, the baby gets impressions of his little world through his ears. Before he is two days old, he is startled by loud sounds. Except for sudden, sharp sounds, however, babies are not likely to be disturbed by ordinary noises and soon become accustomed to the usual household

sounds. It is not necessary to tiptoe around the house, but it is well to remember that babies don't like loud, sharp noises. Before he is a month old, your infant will pay attention when you whisper in his ear and will stop crying to listen. He stares when he hears sounds, and turns his head and eyes to listen. He soon learns to associate the soft voice of his mother with the comforts of being fed, changed and bathed. Long before he understands words, he knows that when she comes to him something pleasant is going to happen. It is a good idea, therefore, to speak to your baby and chat with him when you care for him.

The baby can raise his head for a moment when he is lying on his stomach, soon after birth. But his head wobbles so much that care must be taken to support it whenever he is lifted or held. However, he is pretty tough and it won't hurt him if his head flops back accidentally. Gradually, he finds that he is able to raise his head for a few more seconds, although three or four months must elapse before it is really steady on his shoulders. He likes to be held up over his mother's shoulders and to practice raising his head. He turns it from side to side, resting it when he is tired.

In the early weeks the baby kicks and waves his arms about in jerky movements. He may push himself to the foot or head of his crib while he is lying on his stomach. At first his hands are clenched most of the time, except after he has been fed, when the fingers may relax. When he is a few weeks old, he seems to feel things that he touches, such as his mother's breast or his blanket. He begins to clutch at his father's necktie or his own nightie, but he won't be able to reach for and grasp objects till he is well over three months old. Meanwhile he throws his arms about like a little windmill. He may be able to get halfway over from his back to his side, in three or four months.

The baby smells things early. He soon takes on his parents' attitudes toward different smells, so don't wrinkle up your nose in disgust when you offer him fish liver oil. And remember that the sense of taste is closely connected with that of smell.

Besides all these special senses, babies are sensitive to touch and to changes in temperature. Little babies like to be snugly wrapped and firmly held, but as they grow they like to be free to kick and wriggle.

All in all, your little baby knows a lot about what he

needs, how to express himself and how to grow. He knows how to tell you when he is uncomfortable. By the time he is three months old, he is quite at home with his family. His little body has grown into good working order. He has become accustomed to the orderly routines of his day. If he has had good care and plenty of loving, and if his needs and wants have been respected, he will be a reasonable little person. He'll be eager for his meals, enjoy his baths, recognize his father and mother, cry less, and express himself in smiles and coos. He works very hard at learning a lot of new things. He makes steady progress, and his behavior changes as he develops.

2. THE BABY'S DAY

Your baby is busy all day with the business of growing, and you will be busy a good part of the day taking care of him. If this is your first baby, you will probably want to know what to feed him and how to prepare it, how much sleep he should get, how to dress him, how much fresh air and sunshine to give him, how much exercise and play he needs, how to tell whether he is cold, and what to do if he seems a little upset. And if you're experienced with ba-

bies, perhaps you'll like to get some pointers on good ways to manage. The rest of this chapter discusses each of these points of the baby's daily life in detail. This information will help you to follow your doctor's instructions in regard to the baby's care.

Remember that your baby must be carefully protected from diseases and infections. Everything that his food comes in contact with should be kept clean and sterile. His clothes and bedding should be washed and rinsed thoroughly and frequently. It is a good rule to wash your hands well before you pick up your baby or attend to his wants.

A. The Baby's First Food: The Right Milk for Your Infant.—The right food for your baby is the first essential to his health and good growth. Equally important is the way he is fed and how much he enjoys his meal. Providing satisfying, happy mealtimes, with bottle or breast, is the first and most important way a mother shows that she loves her baby wisely. Nature has established a wonderful plan for the baby's nourishment which is beneficial to both the mother and the baby. The infant's digestive system needs a milk supply that is just right. If you can nurse your baby, it is al-



most certain that your milk will agree with him.

The loving, warm relationship between mother and child first develops at these mealtimes. The nursing mother naturally holds her baby during meals, and the baby feels the warmth and security of her arms; he is cuddled and smiled at, he touches his mother's soft, living skin and feels she is near him and that she loves him. The wise mother understands how much this experience means to her little one. It is good for her to have these periods to relax and rest and find happiness in her baby.

But perhaps you are not able to nurse your baby or, for

some other reason, decide not to do so. If you are giving your baby a bottle, you should faithfully follow the doctor's directions as to the kind of milk mixture required by your infant. The doctor will also tell you when and how to change the formula as the baby grows. Then do all you can to duplicate the great values of breast feeding. Hold your baby in your arms every time you give him a bottle, cuddle him and smile at him. When you are busy, don't lay him down and prop up the bottle beside him, for the bottle may slip and the baby may suck air instead of milk. Give him your full attention at mealtimes. Let him have just as much of your time as you would devote to him if he

were at your breast. Let him get all the pleasure he wants from sucking. Make each bottle-feeding period as happy a time as you can.

A Flexible Routine for Feeding.—It usually takes two or three hours for a little baby's stomach to digest its meal. The stomach then needs a little rest before starting its work again. When it has become empty, it contracts. This is painful to the baby and he cries out, in a sharp, piercing way that you'll soon learn to recognize. This cry is a sign that your baby has a good appetite and is ready for his next meal.

The baby's stomach has a natural rhythm, and this is why doctors advise a three or four-hour feeding schedule. If he is fed only when he cries from hunger, a baby will usually regulate his appetite to meals at about three or four-hour intervals too. Sometimes, however, it takes an infant several weeks to acquire this habit. Some babies, moreover, need food more often than others. The usual feeding schedule of three or four-hour intervals is partly for the mother's convenience and partly to guard against overworking the baby's stomach. Meals should be given on a flexible, orderly routine that



changes as the baby grows and varies according to his individual requirements.

If your baby occasionally wakes up half an hour to an hour earlier than mealtime by the clock, and seems hungry, cries and roots around for food, and isn't satisfied when you have made him comfortable in other ways, it's all right to give him his feeding a little early. He'll probably sleep longer the next time and even if he's ahead of schedule all day, he'll get it straightened out at night. If your baby is regularly hungry before the usual time, this is generally a sign that he needs more frequent meals or bigger ones, and you should consult your doctor. If he wakes up and cries between meals, he may have colic instead of being hungry. If the baby sleeps past his regular time, you should let him sleep at least half an hour longer before you disturb his sleep. He will probably wake up of his own accord with a good appetite.

During his first few weeks, the baby needs to have meals at the same frequent intervals during the night as during the day. All babies give up their night feedings of their own accord as soon as they are able to get along on their other meals. Some do this earlier

than others. A mother can be sure that between six weeks and three months, if the baby is well and satisfied with his other meals, he will learn to sleep about eight hours at a stretch, ordinarily from the evening feeding at 9 or 10 o'clock until morning. If the baby is hungry in the night, it is cruel to expect him to endure the pain of an empty stomach. Crying will not make him less hungry and may only frighten him and make him spend a restless night.

It has been said that every baby has a kind of inside gauge that tells him better than any grownup can when he has had enough to eat. At one meal he may need more milk than another time. If you are nursing your baby you can't see how much milk he drinks but you can soon learn to know when he has had enough, and usually you let him stop nursing when he seems full. If your baby is bottle-fed, let him help to decide how much he wants at each meal. If he takes only part of the bottle, don't force him to finish it. If he leaves some, he will probably wake up early and be extra hungry for his next meal. Usually, when the baby has had enough, he will stop sucking, release the nipple of his own accord, and fall

asleep with a blissful look on his face. This is the best sign that he has had enough to eat. The wise mother does not try to get him to take another mouthful when he is no longer eager for it. Urging doesn't do any good anyway, and may make him lose his appetite or even throw up his meal.

Often a baby likes to stop for a little rest part way through his meal. He doesn't need to be hurried but should have all the time he wants to enjoy his meal. Breast-fed babies usually nurse 15 or 20 minutes, sometimes a little longer. If the bottle baby finishes his meal in less than 20 minutes and still wants to suck, try giving him nipples with smaller holes. Part way through the meal, and when the feeding is finished, the baby needs to be "bubbled." Hold him up on your shoulder and pat his back firmly until he belches up the air in his stomach. It may take a few minutes for him to belch but he will probably feel more comfortable if he does. Some babies are more comfortable if "bubbled" more than once. Lying on his stomach after meals may help him to burp himself.

A good appetite begins with a baby's first meals. Every time the baby's cry of hunger is

heeded and he is comforted and satisfied and given attention along with his milk, his feeling of well-being and confidence grows. That spells "security" for a baby.

Suggestions for the Mother Who Breast-feeds Her Baby.—

When the newborn baby is a few hours old and he and his mother have had a good rest, he is usually put to the breast to suck for a few minutes. The first fluid that the breasts secrete is a thick, yellowish substance called colostrum. Whether the mother decides to nurse her baby or not, many doctors advise that the baby get this fluid for two or three days. It contains food that is easily digested. If the mother plans to nurse her baby, the infant's vigorous, hungry sucking during these first few days stimulates the breasts and helps to produce a good supply of milk after two or three days.

By the time the mother gets home from the hospital, she has had a chance to get acquainted with her baby and feels more at ease in nursing him. But she may get tired very soon, the baby may be fussy, and she may wonder whether she has enough milk. The nursing mother should give herself and the baby time to work this out together. The



father's encouragement will help too, and for the first few weeks after her return home he can do many things for the mother that will give her a better chance to regain her strength. Changing diapers, bringing the baby to the mother to be nursed, and putting him back to bed will give the father a chance to get acquainted with his baby.

Breast milk for even a few weeks is worth while. (If you need to change from breast to bottle, see page 79.) The doctor will decide whether or when it is necessary to give the baby some bottle milk after the breast feeding. If he advises this additional feeding formula, he will tell you to give the baby the smallest amount needed to satisfy him

after each nursing. You will find that at some meals the bottle may not be needed. Sometimes nursing the baby more often, say on a three-hour schedule instead of every four hours, makes an extra feeding unnecessary. As the milk increases, the meals can gradually go back to the longer interval. The milk flow also tends to be increased if the baby is nursed at both breasts at each feeding; ten minutes at each side, unless he stops sooner at the second. The next time, begin with the breast he nursed last. Even though the baby seems to stop sucking at the first breast, he may begin again with renewed vigor when offered the other. The baby gets most of the milk in the breast in the first five minutes, but he needs the extra time to suck, and this helps to empty the breast and stimulate the production of milk for the next meal. If the baby doesn't let go of the nipple when he falls asleep draw the corner of his mouth a little to one side, or gently push his two cheeks together.

A mother who breast-feeds her baby will be able to lead an ordinary, healthy, social life if she follows a few simple rules in caring for herself. Regular visits to her doctor and dentist are advisable.

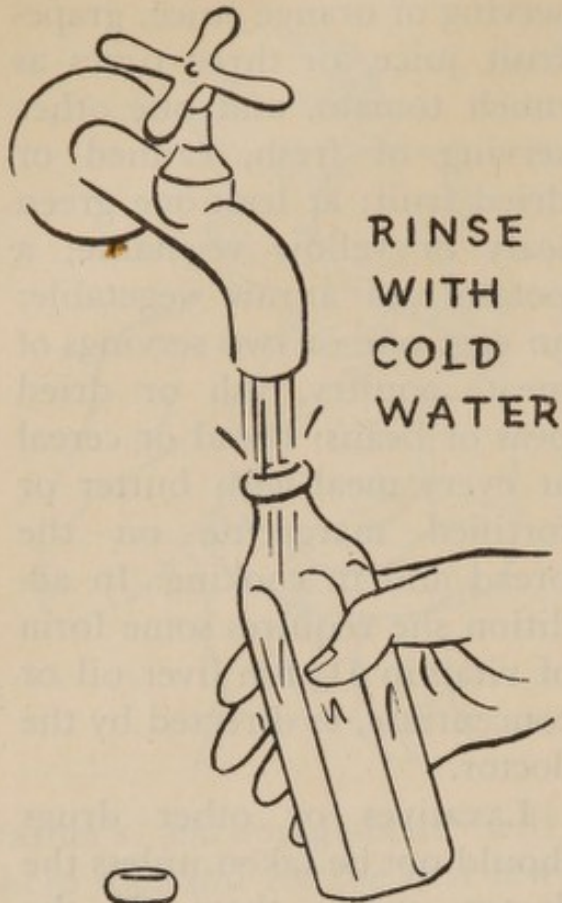
Cleanliness in the care of the breasts is necessary. Before each nursing, the hands should be washed thoroughly and then the nipples wiped off with a bit of sterile cotton and cool boiled water. If the nipples are cracked or sore or if a red spot appears on the breast, the doctor should be consulted. Eight hours' sleep at night and at least an hour's rest during the day are helpful in having a good milk supply. It is important to avoid strain and fatigue as much as possible. A temporary nervous upset on the mother's part may decrease the milk and make the baby fussy but will not make it necessary to wean the infant unless the doctor advises it. It is all right for the baby to continue to be nursed during the mother's menstrual periods. Often menstruation does not begin until the baby is weaned.

The nursing mother's food, too, is important. She should eat the same nourishing meals that she plans for the rest of the family. Every day she needs from a quart to a quart and a half of milk, some of which may be evaporated or dried milk; for variety, two ounces of American cheese may be substituted for one pint of milk. She should also have plenty of fruit, a large

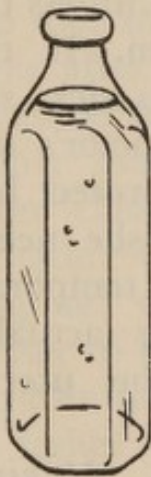
serving of orange juice, grapefruit juice, or three times as much tomato, and one other serving of fresh, canned or dried fruit; at least one green leafy or yellow vegetable; a potato and a raw vegetable; an egg; one or two servings of meat, poultry, fish or dried peas or beans; bread or cereal at every meal with butter or fortified margarine on the bread and in cooking. In addition she requires some form of vitamin D—fish liver oil or concentrate, as directed by the doctor.

Laxatives or other drugs should not be taken unless the doctor orders them. If the nursing mother gets sick, she should have her doctor's advice as to how to protect her baby and whether she needs to give up nursing temporarily. Breast feeding actually helps to return the uterus back to normal.

Suggestions for Making Formula and Sterilizing Bottles.—Bottle feeding can be safe for the baby and easy for the mother if the doctor's instructions are carefully followed. Only the doctor should decide what formula to give the baby or when to change it. The mother's job is to keep everything that touches the milk clean and sterilized, and to follow the doctor's direc-



RINSE
WITH
COLD
WATER



AND FILL
WITH
CLEAN
WATER

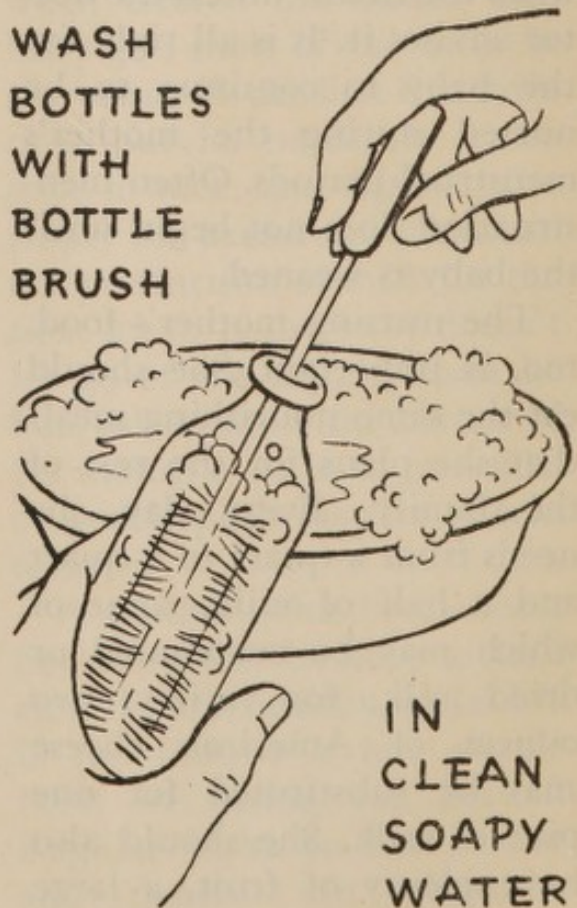
tions exactly in making the formula.

Before you make the formula, sterilize all the utensils and bottles. An easy way is to rinse each bottle with cold water after using it, and then to fill it with water. This will make it easier to clean the bottles later. Wash them with a bottle brush in clean, warm, soapy water and rinse. Scrub

the nipples and caps, and squeeze water through the holes so that no milk remains to clog the nipples.

To sterilize the bottles means to boil them so that all germs are destroyed. To do this, first place the bottles in a large kettle along with the strainer, funnel, caps or corks, jar top, nipple jar, nipples and anything else you use in making the formula. Put the tongs on top so that you can take them out first to handle the other hot utensils. Fill the kettle with water, cover it, and put it on the stove to boil. Let it boil hard for five minutes, then take off the cover. If the cover is flat, place it upside

WASH
BOTTLES
WITH
BOTTLE
BRUSH

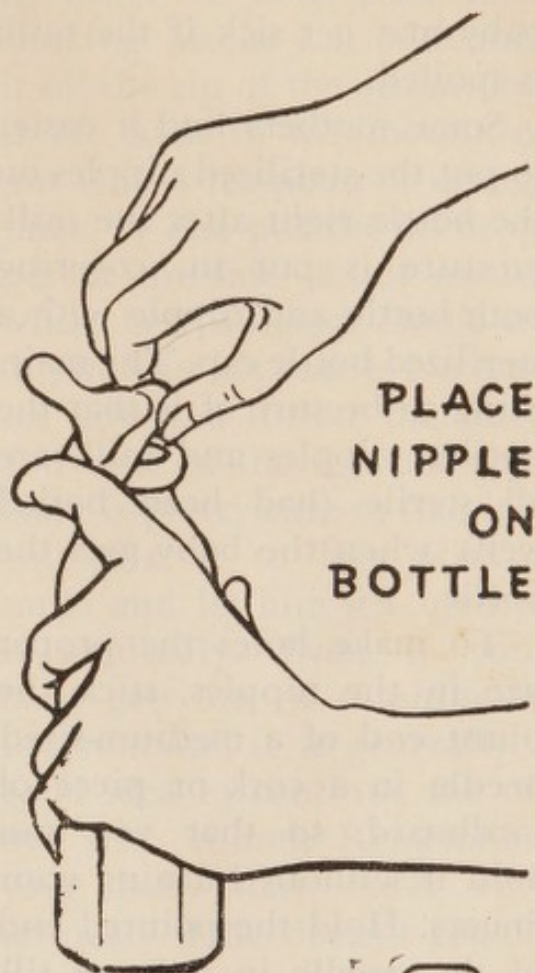


IN
CLEAN
SOAPY
WATER

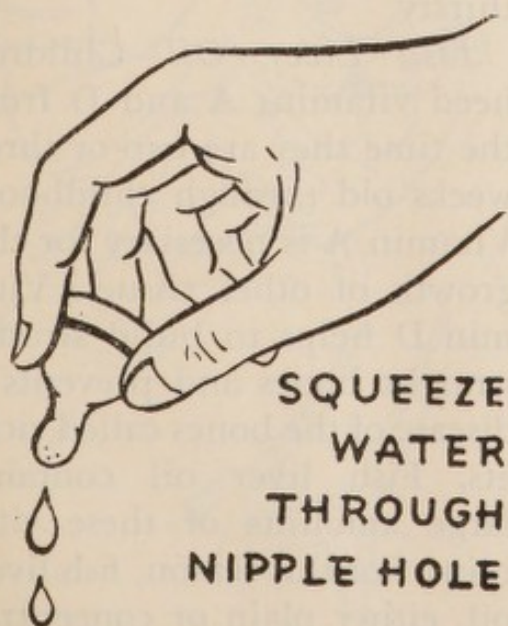
down on the table, to serve as a sterile place to put the funnel and strainer on. Remove the tongs first, taking care not to burn your hands. Use the tongs to remove all the things from the kettle except the nipples. Then empty the water from the nipple jar, pick up the nipples with the tongs, put them in the jar, and cover it.

Pour the hot water from the bottles and set them on a tray or pan. Place the funnel in the neck of a bottle, hold the strainer over it, and pour in the correct number of ounces of formula. Then cover the bottle with a sterilized cork or cover, and place it in the ice-box. Take a sterilized nipple from the nipple jar and put it on the bottle when you use it, taking care not to touch any part of the nipple that goes into the baby's mouth.

Follow your doctor's orders exactly in making the formula. It's a good idea to keep part of one shelf in the ice-box just for the baby's bottles. If you have no icebox and are

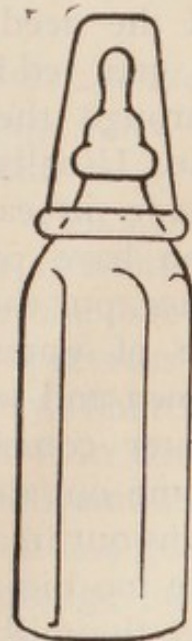


**PLACE
NIPPLE
ON
BOTTLE**



**SQUEEZE
WATER
THROUGH
NIPPLE HOLE**

**AND
COVER
WITH
STERILE
CAP**



unable to get even a small one, try to arrange with a neighbor to keep the baby's bottles in her icebox. The most carefully boiled formula will spoil if it isn't kept at a cold temperature, and your baby may get sick if the milk is spoiled.

Some mothers find it easier to put the sterilized nipples on the bottle right after the milk mixture is put in, covering both bottle and nipple with a sterilized bottle cap. The main thing to be sure of is that the bottles, nipples and milk are all sterile (had been boiled well) when the baby gets the bottle.

To make holes the proper size in the nipples, stick the blunt end of a medium-sized needle in a cork or piece of cardboard, so that you can hold it without burning your fingers. Hold the pointed end of the needle in a flame till it gets red-hot, then stick it through the top of the nipple. Usually three holes are made in each nipple. After you have put the needle in once, put the nipple on a bottle of water, turn it upside down and watch how fast the water comes out. It should come out drop by drop. If it runs out in a stream, the holes are too big and the baby will get the milk too fast to swal-

low it comfortably. After nipples have been used a few months they get soft and worn, and should be replaced with new ones.

When it is time to feed the baby, warm a bottle of milk and put a sterilized nipple on it. Then test the milk by shaking a drop on your wrist. It should feel comfortably warm but not hot. Never give the baby a bottle of milk that has been heated without first testing it to see that it is just right.

Water.—Babies need a lot of liquids, most of which are supplied by the milk. It is a good plan to offer the baby a drink of cooled boiled water, by spoon or bottle, between meals. Some babies will drink several ounces a day but others will not. If the baby fusses between meals, try giving him a drink of water. He may be thirsty.

Fish Liver Oil.—Children need vitamins A and D from the time they are two or three weeks old through childhood. Vitamin A is necessary for the growth of other tissues. Vitamin D helps to build strong, straight bones and prevents a disease of the bones called rickets. Fish liver oil contains large amounts of these vitamins. For this reason, fish liver oil, either plain or concentra-

ted, is needed for the baby. There are many different brands of fish liver oil on the market. Be sure to get a kind that is labeled U.S.P. Some fish liver oils are sold in a concentrated form, of which the baby needs only a few drops a day. When plain fish liver oil is given, a couple of teaspoonfuls are the usual dose. Your doctor will tell you exactly how much your baby needs. The baby will require only a small amount at first—half a teaspoonful of the plain oil, or a drop of the concentrate. Then you should increase the



amount by half a teaspoonful, or a drop, every two or three days until the baby is getting the full amount the doctor ordered. It is better to hold the baby up when giving the oil in order to keep him from choking on it. Let him suck it off the tip of the spoon. Put it far back in his mouth, or put it in a teaspoon of orange juice, or else put the oil dropper at the side of his mouth while he's nursing. Don't try to put it in his bottle. No matter how you dislike the smell and taste of the fish oil, your baby is pretty sure to like it if you give it to him with a smile and let him get used to it gradually. Even if your baby gets lots of sunshine in the summer, it is generally a good idea to continue the oil the year 'round. Remember, your baby may suffer very seriously if he doesn't get oil regularly.

Orange Juice or Substitutes.—Babies need orange juice or a substitute as soon as they are two or three weeks old. This is needed for vitamin C, which is good for the baby's development and prevents a disease called scurvy. There is very little vitamin C in cow's milk and only small amounts in mother's milk. It is a good plan to start the orange juice after the baby is used to fish

oil, so that if he gets upset you'll know what caused it. Your doctor will advise you when to start. Begin with a small amount; a teaspoonful mixed with a teaspoonful of cooled boiled water is enough for the first couple of days. The amount should then be increased by a teaspoonful every other day until the baby is getting two ounces a day of pure orange juice. A small amount of water may be added.

To prepare the juice, wash the orange under running water before you cut it, squeeze, then strain the juice, making sure there are no seeds in it. It is best to fix the juice just before using it, as it loses its vitamin C content quickly. *It should not be boiled* as heat destroys vitamin C. Orange juice can be given to the baby either by spoon or bottle. Of course it tastes strange to him at first, but most babies soon like it. If your baby refuses to take it, try substituting tomato juice or grapefruit juice. You will need to give more of some of the other juices. Your baby needs one of the following every day:

2½ oz. fresh orange juice
(30 mg. of Vitamin C)

2½ oz. canned orange juice
(30 mg. of vitamin C)

3 oz. canned grapefruit juice
(30 mg. of vitamin C)

3 oz. canned orange and grapefruit juice (30 mg. of vitamin C)

6½ oz. canned tomato juice
(30 mg. vitamin C)

Pineapple, prune and apple juice cannot take the place of orange juice, though the baby will like their taste and they may later be used for dessert. If your doctor advises a vitamin C pill, called ascorbic acid, he will tell you how much to give the baby daily.

The Baby's Bowels and Bladder.—The baby's body takes care of the elimination of waste products naturally and easily. The bladder empties very often daily during the first months. It sometimes seems as if the little baby were constantly wet. In time his bladder controls develop and then he urinates less often.

The bowels, too, move according to a natural system. The waste material collects in the bowel until a movement starts downward. Then, and only then, does a bowel movement take place. The baby may seem to be a little uncomfortable and he will fuss and wriggle until he relieves himself.

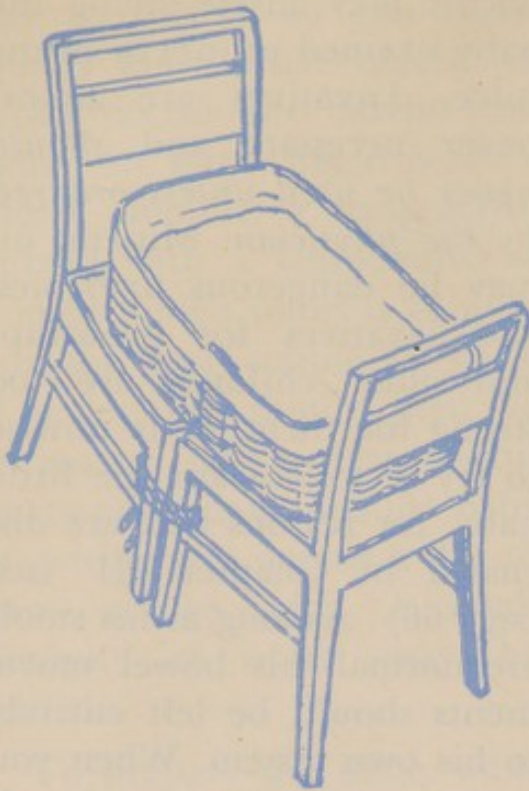
Breast-fed babies may have several movements a day or only one. The stools are soft, like thick pea soup, and are usually a bright yellow or orange color, and may contain small curds or a little mucus. A baby fed only breast milk very rarely gets constipated. Some babies have a natural pattern of a movement only every second or third day. You can trust your baby, if he is breast-fed, to have a movement of his own accord. You'll find he suffers no distress from skipping a day, although he may have to work a little to get the stool out when it's so soft. When he begins to eat solid foods, his movements are likely to be more regular.

The stools of bottle-fed babies depend on what is in the formula. They are more pasty, vary between dark yellow and light brown in color and may show some curds and mucus. If they get dry, hard and painful to pass, you should tell the doctor, who may adjust the formula. If the baby's stools are soft, it doesn't matter if his movements are irregular. *Enemas and suppositories should never be given to establish regular bowel movements.* There are better ways of helping the baby to eliminate. Besides changing the formula, the

doctor may advise giving the baby strained prunes or prune juice. Laxatives are almost never necessary and *should never be used unless ordered by the physician.* Mineral oil may be dangerous to babies, and laxatives for grownups and older children are too strong for them. It is unwise to try to toilet-train the little baby, for reasons that are discussed in Chapter III (see page 66). As long as his stools are normal, his bowel movements should be left entirely to his own system. When you notice anything unusual, tell your doctor.

If the baby has frequent, watery, green stools, he has diarrhea. While this is sometimes the result of a mild upset, it is often a sign of more serious illness. It is therefore wise to call the doctor whenever the baby begins to pass such stools. The doctor should also be called if the stools contain blood or look very black or greasy, or if they contain a lot of curds or mucus or have a very bad odor. (See Chapter VI.)

B. Sleep.—Sleep is as necessary to the little baby as food. He needs no training in how to sleep. Later on he will enjoy being awake, but now sleeping is his natural way of



life. In his first days the baby seems to be in a dozing state most of the time, scarcely sound asleep but not fully awake. He takes a lot of short naps. He stirs, cries and moves often. In a sense he really wakes up only to eat, but he reacts to loud noises, sudden handling, cramps or the discomfort of being wet or cold. When he no longer feels uneasy he usually dozes off again until the next mealtime.

The baby sleeps more comfortably if he is occasionally turned from one side to the other. Sleeping in one position will not affect his posture. Any slight flattening of the head that does occur will correct itself later on. Many babies

seem to like to sleep on their stomachs.

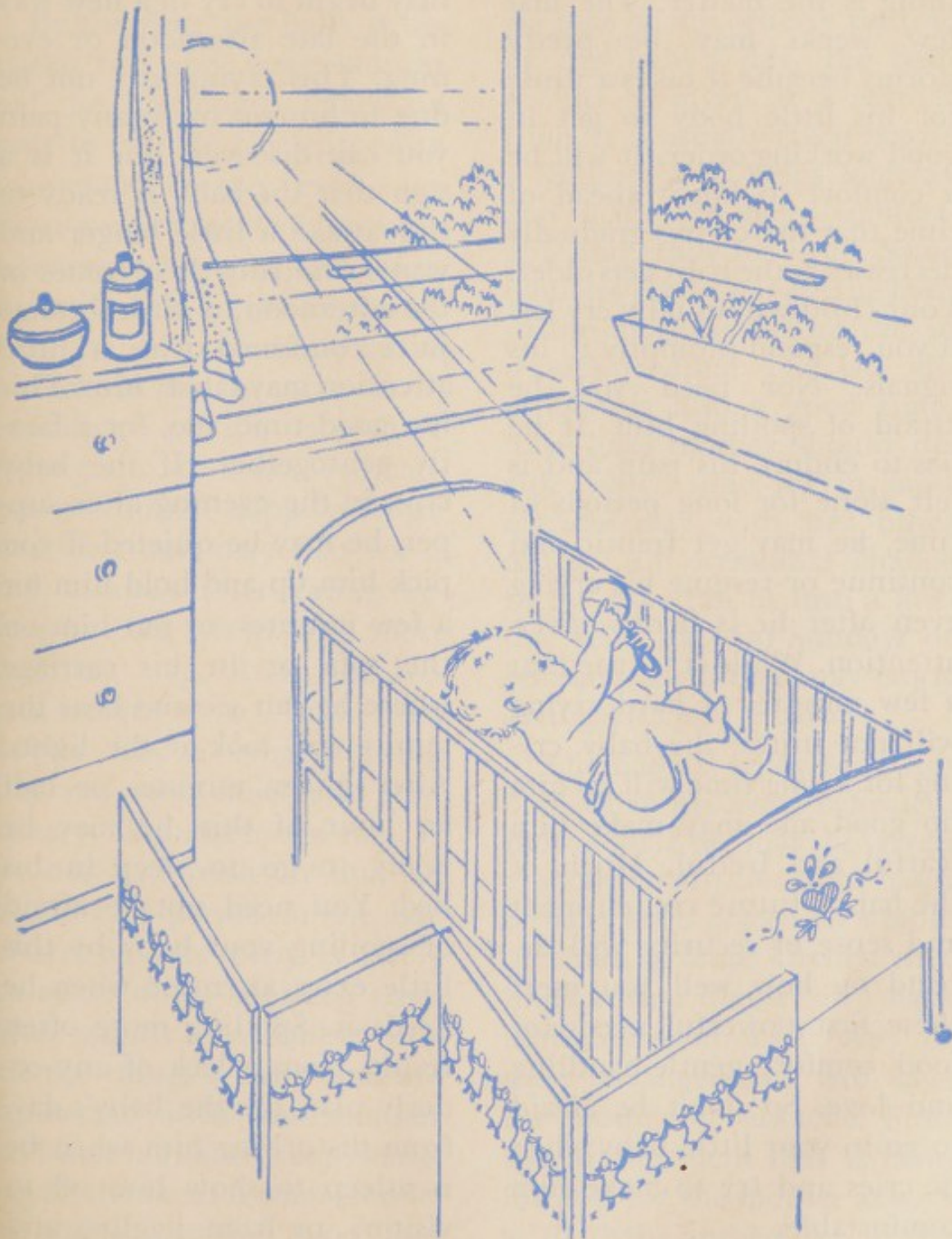
It is very important to keep the sheets and covers on the baby's bed tucked firmly under the mattress, in order that they may not get pulled loose and bunch up around the baby's face or cover it so he cannot breathe. Do not hang blankets or clothes on the sides of the crib, as they might fall down and smother the child. Remember, a baby cannot help himself if an accident happens. He can only cry. Usually a baby sleeps better in a fairly quiet room by himself, but the mother should be near enough to hear his cries and should look in on him often to make sure that everything is all right.

A room that lets in direct sunlight is best for the baby. The furnishings should be simple and washable so that they can be kept clean. (See page 49 for suggestions about beds.) While the baby is little, it may be more convenient for the mother to have the crib in her room, but the infant should never sleep with her. Where the family can arrange it, the baby should have a separate room. Parents need privacy, and even young babies very often see and hear more than their parents realize. If

The Baby: From Birth to Three Months

a separate room isn't possible, a screen may be placed around the crib, or the baby's bed can be moved into another room during the day or night to give the baby quiet and the parents privacy.

It is one of the mother's chief duties to be alert to any crying or fussing, to find out the cause of it, and to remove that cause as promptly as possible. At first all the baby's cries seem to sound alike, but



soon the parents can tell the difference between a hunger cry, fussing when he is uncomfortable or wants attention, and a cry of pain. We can scarcely blame a little baby for crying, for it is the only way he has of telling us that something is the matter. The first few weeks may be pretty stormy because it takes a while for his little body to get in good working order. It will be a comfort to know ahead of time that the crying gradually decreases as the baby gets older. Your child will usually cry less if you respond promptly to his signals. Nor need you be afraid of spoiling him. If he has to endure his pain and is left alone for long periods of time, he may get frantic and continue or resume his crying even after he is finally given attention. While it is true that a few minutes of hard crying will not injure the baby, crying for a long time will do him no good and may make him fearful and fretful. Much of the baby's future contentment and sense of security will depend on how well you meet these first powerful needs for food, comfort, gentle handling and love. So don't be afraid to go to your little baby when he cries and try to make him comfortable.

During the first month the baby gets about as much companionship as he is ready for while he is being bathed, changed and fed. Sometimes he may like a little extra patting and soothing. Between his first and second month he may begin to cry in a new way in the late afternoon or evening. This crying may not be due to hunger or to any pain you can discover, but it is a sign that the baby is ready to stay awake a little longer and wants company. If it comes in the afternoon, a little orange juice combined with a little attention may satisfy him. This is a good time, too, for a family get-together. If the baby cries in the evening after supper, he may be quieted if you pick him up and hold him for a few minutes, or put him on the sofa or in his carriage where he can see and hear the family and look at the lights. After fifteen minutes or half an hour of this, he may be ready to go to sleep in his bed. You need not be afraid of spoiling your baby by this little extra attention when he needs it. Spoiling more often results from a lack of any orderly plan for the baby's day, from disturbing him when he is asleep to show him off to visitors, or from jiggling and

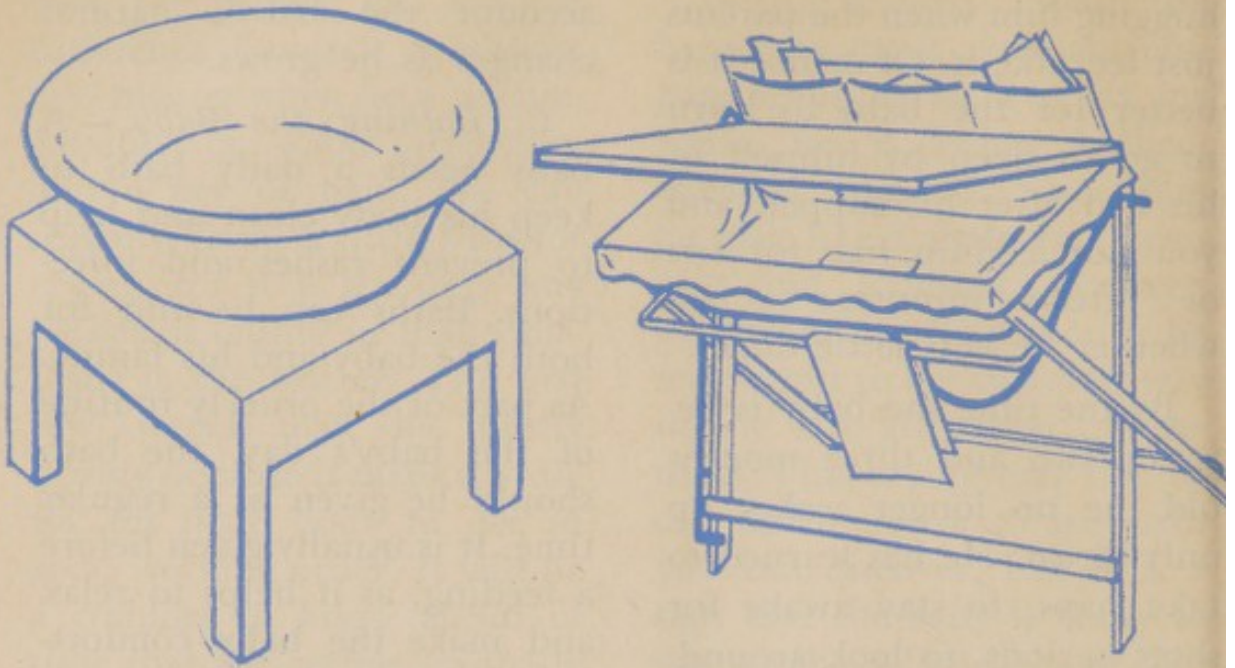
hugging him when the parents just feel like it. Of course it is better for the baby to learn to go to sleep by himself in his bed after his supper, and you can let him fuss for ten or fifteen minutes to see whether he will settle down.

By the time the baby is between two and three months old, he no longer wakes up only to eat. He has learned to take naps, to stay awake for short periods, to look around, to exercise his arms and voice, to smile and enjoy company. Now he sleeps from 9 or 10 o'clock in the evening until morning, waking anywhere from 5 a.m. to 8 a.m. He babbles to himself happily before breakfast and may play for a few minutes after eating before he falls asleep for a short morning nap. After the second feeding at 10 o'clock, most babies take a long morning nap and, after lunch and play-time, a long afternoon nap. If he has had fresh air and an active play period in the late afternoon, the baby is likely to settle down to sleep right after supper. Remember that all the things a baby does are connected with one another and that his habits keep changing all the time. A comfortable, satisfying routine takes into

account the baby's natural changes as he grows.

C. Bathing the Baby.—A baby needs a daily bath to keep his body clean and help to prevent rashes and infections. Baths can be fun for both the baby and his family. As part of the orderly routine of the baby's day, the bath should be given at a regular time. It is usually given before a feeding, as it helps to relax and make the baby comfortable and ready for sleep. Some mothers prefer to give the bath in the morning before the 10 o'clock feeding. The late afternoon is also a good time. The busy mother should decide which time fits in most conveniently with her other duties. An occasional change in the time can fit into a flexible schedule. On Sundays or holidays the father may enjoy giving his child a bath.

The baby is ready for a tub bath when his navel is healed. Before that he may be given a sponge bath. A large basin or baby's tub placed on a table or chair, a large kitchen sink lined with a diaper, or a bath table may be used. Any of these arrangements will save the mother a backache. Find the arrangement that is comfortable for the mother as well as the baby and collect all the



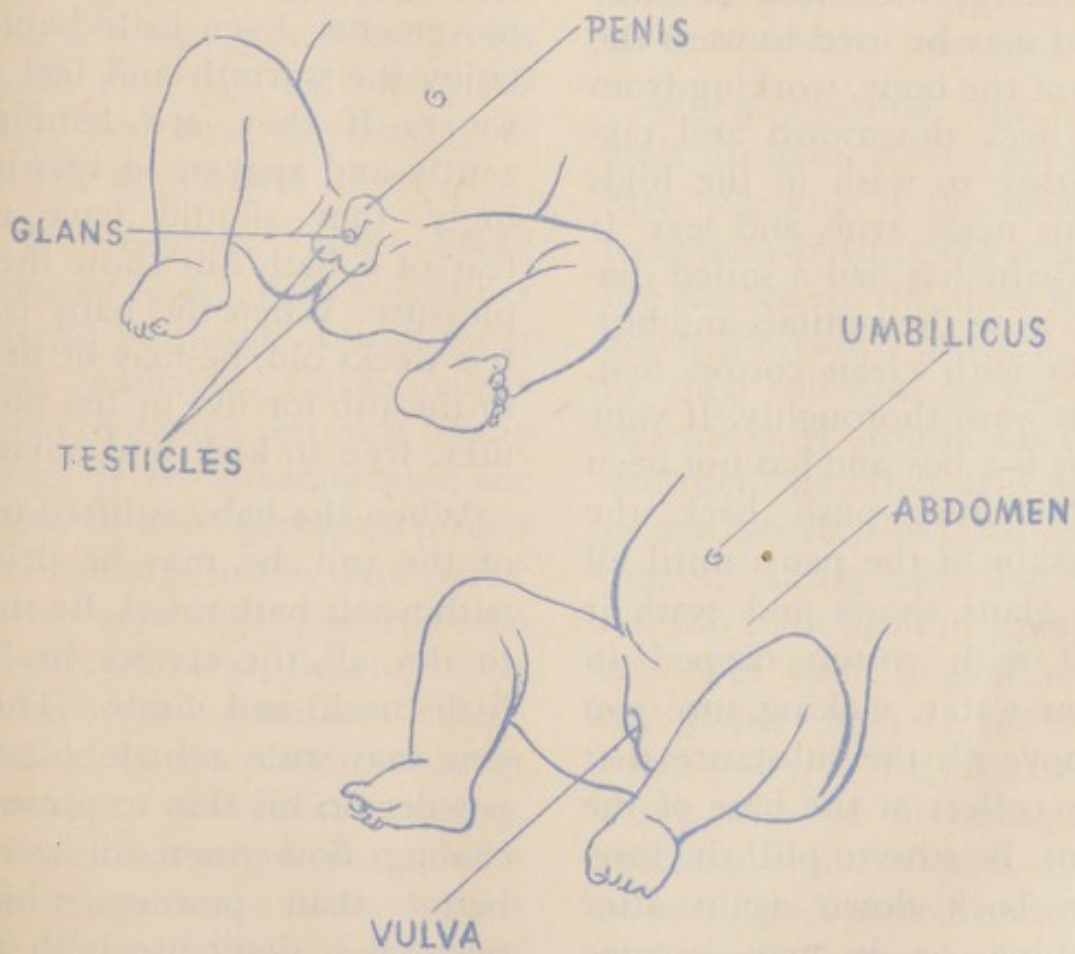
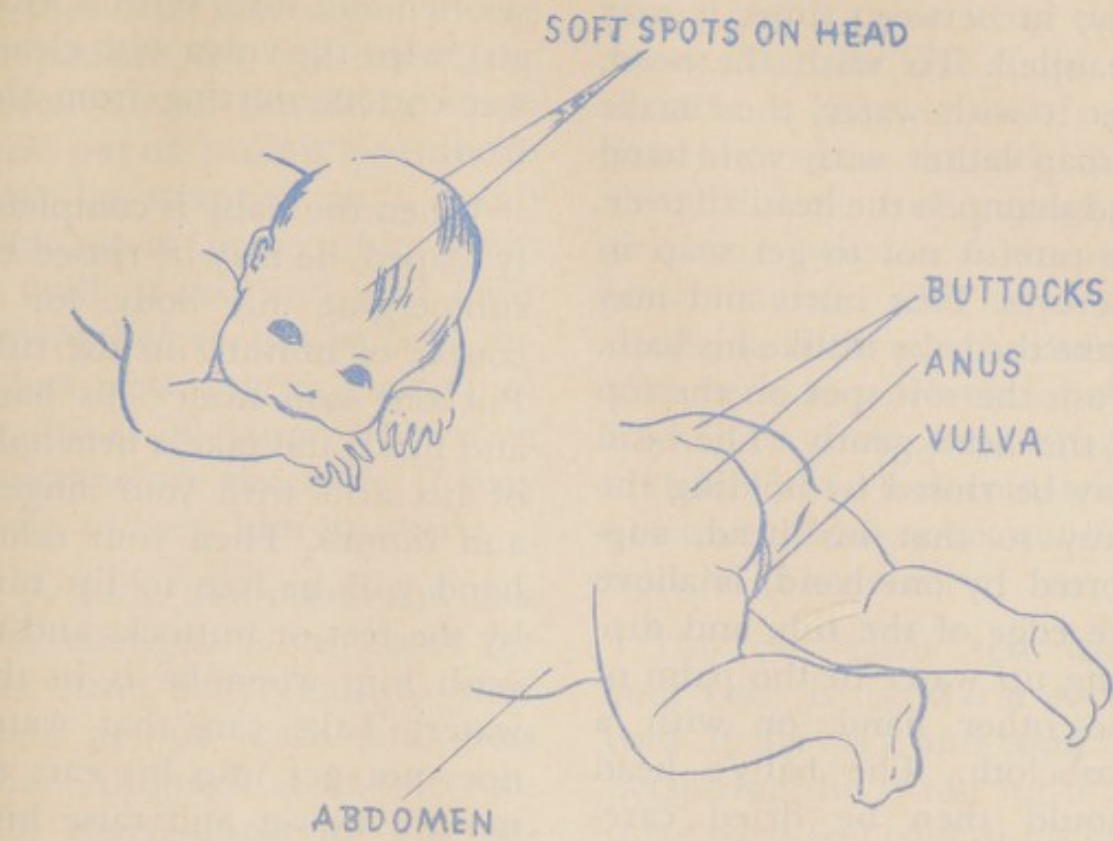
toilet articles and clean clothes before beginning the bath itself. Choose a warm place for the bath, where the baby can be protected from drafts.

If your baby was born in the hospital, you may have had a chance to watch the nurse give him a bath, or you can arrange for a public health nurse to come to your home to show you how to do it. Here are a few simple suggestions:

First make sure that the water is warm but not hot. Dip your elbows in the water, and if it feels warm, the temperature is about right. Wash the eyes with pieces of sterile cotton dipped in cooled boiled water. The cotton should be wiped across the closed lids gently, from the inside near the nose, outward. Use a fresh piece of cotton for each eye.

Do not probe in the nose, ears or mouth to clean them. Cotton swabs on sticks or toothpicks may injure the delicate lining of these organs. All babies dislike such poking and fight against it. Natural secretions protect these organs. The baby will sneeze or rub out any mucus in his nose, and the wax in the ear will drop out by itself. A corner of the washcloth or a bit of twisted cotton dipped in clean water is sufficient to clean the outside parts of the nostrils and ears. Better leave the mouth alone. If there are any sore spots in it, ask the doctor what to do.

Next wash the face with a wet washcloth, without soap, and dry it by patting gently with a soft towel. It is not necessary to wash the head every



day; in between times it may be oiled. To wash the head, wet it with water, then make a soap lather with your hand and shampoo the head all over. Be careful not to get soap in the eyes. That hurts and may make the baby dislike his bath. Wash the soft spot on the top of the head gently. The head may be rinsed by holding the baby so that his head, supported by one hand, is above the edge of the tub, and dipping up water in the palm of the other hand, or with a washcloth. The baby's head should then be dried carefully.

A soapy washcloth or your hand may be used to wash the rest of the body, working from the neck downward and taking care to wash in the folds of his neck, arms and legs. If the baby has had a soiled diaper, wipe the genitals and buttocks with clean cotton first, then wash thoroughly. If your baby is a boy and has not been circumcised, push back the foreskin of the penis until all the glans shows and wash it well with cotton dipped in clean water, making sure you remove all the substance that may collect at the base of the glans. Be sure to pull the foreskin back down again after washing or it may become

swollen and sore. With a little girl, wipe the vulva with clean, wet cotton, starting from the front.

When the baby is completely soaped, he may be rinsed by submerging his body for a couple of minutes in the tub. Put one arm under his back and head, and take a firm hold of his arm with your fingers and thumb. Then your other hand will be free to lift him by the feet or buttocks and to wash him when he is in the water. Take care that water does not get into his ears or mouth. Lower and raise him from the tub slowly, as babies are frightened by sudden movements. Even little babies enjoy the warmth and feel of water. If they are handled gently and spoken to reassuringly, they should have no fear of a bath but show their pleasure. When the baby is a few weeks old, he may be held in the tub for five or ten minutes, free to kick and splash.

When the baby is lifted out of the tub, he may be dried with a soft bath towel. Be sure to dry all the creases in his little neck and limbs. Then you may rub a little oil or powder on his skin to prevent chafing. Sometimes oil works better than powder, which may cake; don't use both to-

gether. He may begin to get impatient for his meal, so clean clothes should be ready and put on promptly; then he can be wrapped in a small blanket to protect him from a chill. If you find your baby crying before the bath is finished, next time try giving him a drink of water or orange juice before the bath. It may help to keep him satisfied.

A bath, like meals and diaper changes, is an event for the little baby. Talk to your baby as you wash and dress him. Although at first he cannot reply, apparently he enjoys listening to your voice. He will smile and coo when you tell him it is time for his bath, that you will wash his face, that now the hand goes in the sleeve, and so on.

D. Clothes and Being Dressed. — A baby's clothes should be simple, comfortable and washable. Little babies seem to dislike restraint of any kind. It is uncomfortable for them to have garments pulled over their heads, and their arms and legs pushed into sleeves and legs. Because their skins are sensitive, there should be no rough seams or bunches to irritate them. When the room is warm, with the temperature at 68 degrees or above, babies don't need

many garments to keep them warm. For the first couple of months a baby is most comfortable when dressed in a shirt, diaper, and nightgown or linen jacket and wrapped in a blanket. This is all he needs to wear in the house, with perhaps a sweater for cool days. The little baby's hands and feet may feel cold when you touch them no matter how well he is covered.

You can easily tell when your baby is too warm or too cold. If his neck and chest are perspiring, he is too warm. If these parts feel cold, if his skin is blue or blotchy, if his face loses its color or if he shivers, he is not warm enough.

When dressing the baby after his bath, put on the shirt first, slipping it on over his feet, then putting the arms in the sleeves. If the shirt opens down the front, put one arm in, then roll him on his side, put the shirt around his back, and then the other arm in the second sleeve. Next put on his diaper, taking care that it is not too tight around his stomach. Put your fingers under the diaper, next to his body, when you put the pins in and there will be no danger of pricking him. An extra diaper or small pad placed under his nightgown before you wrap

him in a blanket will help to protect his clothing and blankets.

During the first month or six weeks, little babies seem to mind the discomfort of wet or soiled diapers and fuss until they are changed. Leaving wet diapers on for long periods, or using diapers that have not been thoroughly washed, rinsed and dried usually causes a rash. Whenever the diaper is changed, wash the buttocks and genitals, and dry them. A few drops of light mineral oil or a little powder should be used to prevent chafing.

Even little babies are amazingly successful in kicking off their covers. In the first weeks the baby likes to be snugly wrapped, and if the receiving blanket is closely folded around his body, the outer blankets can be simply tucked in the side of the bassinet. A sleeping bag may be dangerous; if you use one, make sure that the baby can move around in it and won't smother or choke. Remember that after the first few weeks the baby dislikes being restrained. His growing muscles need plenty of chance to be used; he likes to turn and wriggle in his sleep as well as when he is awake. It is cruel to pin his sleeves down.

E. Fresh Air and Sunshine.
—Your baby needs fresh air and sunshine. He will eat and sleep and grow better if he spends a lot of time outdoors. When the weather is pleasant, the baby should be outdoors a couple of hours every day from the time he is three weeks old. Before that, or if the day happens to be cold, wet or windy, you can give him an airing indoors. The air in the room in which he lies should be kept fresh by leaving the window open a couple of inches or more at both top and bottom. A window ventilator, a screen, or a sheet on a chair by the side of the crib will protect the baby from drafts when it is cold or windy. It is better for him to sleep in a cool room. In very cold weather, the room may be aired several times a day by putting the baby in another room and then opening the windows wide for a few minutes.

It is a good idea to give the baby an airing outdoors at a fairly regular time every day as far as the weather permits. His bassinet or crib may be moved near a window, or placed in a yard or on a walk where you can keep an eye on it. A carriage is a great convenience for a mother, both indoors and out; if there is no

one you can leave the baby with, you can take him with you while you do the shopping. Then you will be sure to get the exercise and fresh air you should also have if you take the airing with the baby. No baby of any age should ever be left alone in a house or out of doors. Too many accidents have happened when babies were left alone "just for a few minutes."

Sun baths may be started when a healthy baby is three or four weeks old. His skin is tender, so don't let him get pink and burned. You may give him the sun bath outdoors or inside in front of an open window where it is not windy. At first let the sun shine on his cheeks and hands for two or three minutes. Turn him so that it won't shine in his eyes. The next day expose his cheeks and hands five or six minutes. After his cheeks and hands have become accustomed to the sun, expose his arms and then his legs. When the weather is warm enough, take off his shirt and diaper and let him lie naked in the sunshine for two or three minutes. The next day you can expose him five minutes. Continue to increase the time gradually until the baby is sunned all over his body. On hot days when the

temperature is above 85 degrees, give the sun bath before 11 a.m. or after 3 p.m. Cover the baby's head if he is out during the hot part of the day.

F. Exercise, Play and Companionship.—Love is just as necessary to a baby as food, sleep, fresh air and cleanliness. He soon needs a chance to play and to exercise his growing muscles and he needs sociability. From the beginning show your baby that you love him by cuddling and talking to him when you dress, change or play with him.

When the infant is about one month old and begins of his own accord to have short wide-awake periods, he will



enjoy lying on a big bed or sofa with his clothes off, if the weather is warm enough to permit it. This will leave him free to kick and wave his arms around. He likes to be held or carried or moved to another room where he can look at a new ceiling and walls for ten or fifteen minutes. These are the times when the father, the other children and the relatives, as well as the mother, can play with the baby and laugh at his antics without disturbing his regular habits.

When the baby begins to coo and laugh and throw his arms around, he will amuse himself by practicing these new accomplishments. It is good for him to be left quietly alone part of the time when he is awake, for he has much to do learning to see, to hear, and to use his muscles. But part of the time he needs company. Babies as well as grown-ups can feel lonely, and even little babies learn much from listening to and watching people. Give your baby the pleasure of your attention sometimes when he is happy, not just when he is fussy.

The young baby's rapidly developing senses make him almost hungry to see and hear. He should be given opportunities to look at colored ribbons and toys hanging above or be-

side his crib or carriage, and to watch lights, and people moving about. A flowered cushion, or a piece of red or orange cloth placed within his view, may quiet a restless infant. A baby reaches for things with his eyes long before he can reach them with his hands. He may grasp a small rattle placed in his palm, but cannot hold it long. When he is about three months old, he will enjoy having small colored objects strung across his crib where he can touch them even if he cannot grasp them. A small spoon, spools, bright buttons strung on a cord, ribbons, a celluloid toy or cradle gym will keep his arms and legs flying and his eyes dancing. A young baby enjoys music and rhythm and will listen to soft music and be soothed by lullabies. Between two and three months the baby begins to notice his own arms and legs waving before his eyes, and begins to gain control of his arms and hands. He spends much time kicking and waving and should be free to exercise all he wants. Any healthy baby who is not held down by too many clothes and covers gives himself all the exercise he needs.

G. How to Tell That Your Baby Is Well. — Most babies are born well and normal. With good care at home and

medical supervision the parents as a rule are able to keep their baby well and happy. Take your child to a doctor regularly and telephone him whenever you are in any doubt about your baby's health. You will protect your child's health, save yourself much worry and also save the doctor's time if you obtain and follow his advice about the baby's care.

Parents should also learn the signs of good health and of illness in a baby. You will soon learn to recognize these important details and to sense changes in your child's condition.

A healthy baby is eager for his food and enjoys it. It is normal for his appetite to change from meal to meal and to change as he grows. If your baby, however, drinks a great deal less milk than usual during the day, or turns away from the breast or bottle when it is offered him, it may be a sign of illness. Do not urge or force him to eat, but let him take only as much as he wants. Offer him all the water he will take.

A healthy baby establishes his own ways of sleeping, although these change frequently as he grows. If the baby is restless and cries out in his sleep, he may be overtired and need a quieter day. Or you

may need to look for other causes of illness.

A healthy baby grows and develops so fast that his parents can see him change from week to week. Some babies gain more rapidly than others who are equally well. The little baby may be expected to gain from three to eight ounces a week, unless he was premature or unusually small at birth. One week he may gain a little more or less than before. Occasionally he may make no gain for a week without anything being the matter, but if he makes no gain for several weeks, the doctor should be consulted. There are many other indications besides gains in weight that your baby is well, so it is not necessary to have baby scales of your own. Indeed, it is better for the parents not to watch the weight too much or to worry about it needlessly. If the baby is weighed once a month when the doctor sees him, that is usually often enough.

You can also tell how your baby is growing by watching the things he does. Is he making progress in adapting himself to an orderly routine? Is he learning to use his eyes and ears and exercise his muscles? On the whole, does he behave something like the growing baby described in this chapter?

Above all, is he happy and contented? If you have given him the good care and wise loving he needs, he should enjoy his life, be full of smiles and energy, and content to lie alone at times and play with his feet and hands. Of course, every baby will fuss and cry occasionally and have bad days, but he should cry less as he grows older, and when his wants have been attended to, his fussing should be brief. If he is unusually fretful or cries in pain, and the things you generally find helpful do not comfort him, look for signs of one or another of the minor upsets that may trouble the little baby. Also watch for other signs of illness. You can't expect your baby to be well in every respect every day, for he has many ups and downs in growing. If at times he isn't hungry or sleepy, it doesn't necessarily follow that he is ill. Whether he is healthy or getting sick, the calm, reassuring attitude of his mother is essential for his well-being or his recovery.

H. Some Things That May Trouble the Little Baby. — *Hiccups* are common in babies. They are not harmful and usually stop in a few minutes. Sometimes "bubbling" the baby or giving him a drink of warm water helps to stop them.

Spitting up and vomiting are common too. The baby may spill or spit out a mouthful of milk after eating or between meals. Occasionally he may throw up part of his feeding. If the baby is otherwise healthy, vomiting once in a while will not harm him and is not a sign of illness. However, if he vomits several times during the day, or after every meal, or throws up with such force that the milk flies several feet, call the doctor promptly. Meanwhile give the baby nothing to eat or drink.

Colic is one of the most common and distressing complaints from which little babies may suffer. If your baby cries sharply as if he were in pain, draws up his legs and passes gas, but is not feverish or does not show any other signs of illness, he probably has colic. The attack may last only a few minutes or several hours. He may have colic occasionally or it may occur every day, usually at about the same time and most often in the evening.

The causes of this condition are not known, but the baby acts as though he had cramps in his stomach and intestines from gas. In mild cases holding the baby over your shoulder and patting his back so he can belch may relieve him. If this

does not help, try giving him a drink of warm water from a bottle. The colicky baby is likely to act as though he were hungry, but it is better not to feed him between meals. Extra food won't relieve the pain anyway. Sometimes the baby is comforted by being placed on his side with a hot water bottle against his stomach, or with quite warm cloths on his abdomen. Wrap the hot water bottle carefully so that it will not burn him, and test the hot cloths carefully on your own inner arm because his skin is very tender. If your baby gets colic, make sure that he is dressed and covered warmly enough, and give him as much comfort as you can in his distress. Some doctors think colic is more likely to occur in tense, nervous babies and advise mothers to be as calm as possible. They also advise that the baby's life be quiet and orderly without much stimulation or excitement. It is not advisable to give the baby an enema or insert a rectal thermometer even though he seems to have excessive gas. While this treatment might relieve the pain temporarily, it would probably upset the baby and irritate the rectum. If the colic is severe and persistent, ask your doctor for further suggestions.

As far as we know, colic does not injure the child. He continues to gain and, except for the times when he has pain, seems perfectly well and comfortable. It usually disappears between six weeks and three months of age. It is distressing to the baby while it lasts, though the parents seem to suffer more than the baby. If your infant is colicky, check over all the things we have mentioned that may upset him. Try the things suggested; one of them may help your baby, or none of them may help. This is not very comforting, to be sure, but there is not much more that can be done for colic than to try to make the baby as comfortable as possible. Maybe your baby will be quieter if you walk the floor with him. Perhaps nothing you can do will make him feel better and you will just have to try to ignore his wails until he gets over the colic. It does not help the baby to realize that his mother is upset. Try not to let it get on your nerves, and if you can, get someone else to take care of the baby now and then.

Skin Rashes. — The baby's skin is very sensitive and may easily become irritated and sore.

Diaper rash appears on the thighs, buttocks and lower ab-

domen. It looks like small red pimples or patches of rough red skin. The rash usually occurs when wet diapers have not been changed promptly or when the skin, which is very tender, has not been washed and dried thoroughly. Chafing may also occur if the diapers have not been well washed and rinsed. When the baby has a diaper rash, do not use soap in bathing his buttocks. Wash gently with clean water, dry well by patting lightly, dust with a little powder or cornstarch, or rub on oil or boric acid ointment. Be sure to change his diapers and bed pads often. Wash the diapers thoroughly and rinse them in a boric acid solution (see page 50). A good treatment is to expose the rash to the air for several hours a day. For a severe rash that does not clear up after being treated a few days, consult your doctor. Do not use any patent medicines except on the doctor's advice.

Prickly heat or heat rash may appear on any part of the body where the baby perspires. It looks like tiny water blisters the size of a pin point. It is a sign that the baby is too warm and should wear fewer clothes, none in hot weather, and have less covering. Keep him cool, give him a sponge bath two or three times a day with cool

water to which a little baking soda has been added (4 teaspoonfuls to a quart of water). Do not use soap in his bath. Dust a little cornstarch on the rash.

Orange juice rash. The so-called orange juice rash is usually just a little irritation on the skin from the juice. Very, very few babies get a real rash. Don't stop the orange juice until your doctor has seen the baby and told you what to do. Even if your infant happens to be one of the few who cannot take orange juice at first, he may be able to take it later. Meanwhile, do not fail to give him a substitute for orange juice (see page 31).

Other minor skin rashes. Little babies commonly get a few small white pimples or small red spots on their faces. These do not spread but usually clear up in a short time. If your baby develops a rash that looks different from the kinds described here or that you are not sure about, it is advisable to consult the doctor. Itchy skin, pimples with pus in them or white spots in the mouth need to be treated by the doctor, and the sooner they are attended to, the less severe they become.

Rashes with fever. Whenever your baby has a fever with

a skin rash, call your doctor immediately.

Cradle cap is a common name for a crust that babies often get on their scalps. It looks yellowish and first appears in small patches but may soon spread over the whole head. To relieve it, rub the scalp with a little mineral oil, white petroleum jelly, or boric acid ointment and leave it on the head for two days. At least once a week, wash the scalp thoroughly with warm water and rinse. Rub off the crust with cotton or a clean cloth or comb it gently with a fine tooth comb. It may take a few treatments to clear up and it may reappear and need to be treated again. Cradle cap is not painful to the baby but should not be neglected.

Eye Conditions. — Many babies' eyes water frequently. A white discharge shows along the edge of the lids or in the corners of the eyes. This is not serious and requires no treatment except washing with cooled water that has been boiled. However, if the white part of the eyeball becomes red or inflamed, you should see the doctor without delay.

Cross-eyes are common among babies. It may be a year and a half before the child's eyes focus correctly, so until this age cross-eyes are quite

common and are not serious. In most cases they are outgrown and get less noticeable. If the eye muscles, however, are weak at 18 months, it is very important to consult an eye specialist and get proper treatment. In New York City there are special clinics, including those of the Department of Health, that are equipped to study and treat children with cross-eyes and other eye defects.

The Navel. — If the navel has not healed by the time your baby comes home from the hospital, you can treat it by cleaning it with sterile cotton dipped in alcohol. Then cover it with sterile gauze and wrap a binder or strip of cloth around the baby's abdomen. If the navel gets red or sore, consult the doctor immediately. If it protrudes, your doctor will advise you what to do about it. The condition is not serious and the baby may be given a tub bath.

Noisy Breathing. — Your doctor will tell you if there is anything unusual about your baby's breathing. Many infants make a kind of wheezing, snorting or rattling sound when they are perfectly well, and they outgrow it in time. There is no reason for alarm, as all babies change the rhythm of their breathing from time to

time. It is a good idea for the mother to notice and get used to the way her child ordinarily breathes when he is asleep. She will then be able to tell when his noisy sounds are different.

"Nervous" Babies. — Some little babies are very restless and are easily startled without anything being the matter. It is natural for some infants to be this way. After a while they become less sensitive.

Occasionally an infant cries a lot and nothing that is done for him helps much. Like colic, his restlessness is usually outgrown by the time he is three months old. Think over your baby's routine carefully and try to make any changes that might make him more comfortable and happy. Have a talk with your doctor. If he finds nothing wrong with the child and you are giving him plenty of fresh air, quiet and attention, try to make the best of things until he is a little older. The mother of a crying baby especially needs to get away from him a few times a week. She should not feel that she is neglecting her baby if she asks the father or a friend to take care of him occasionally.

To sum up: The best way to tell whether or not your baby is well is to know your baby—to know how he usually looks and acts. Try to find out what

kind of baby he is — whether he is a restless or a calm type, steady or changeable. Remember babies differ in temperament just as grownups do.

If your baby suddenly looks different and behaves differently from the way he usually does, if he is feverish or has a running nose, vomits, has diarrhea, is fretful and restless or shows any other signs of illness such as those discussed in Chapter VI, call your doctor at once.

3. WHAT TO BUY FOR YOUR BABY

Clothes and Bedding. — Below are listed the clothes and bedding a little baby needs. You probably have some things but may be planning to get others. It is a good idea to buy the first clothes in six months to one year sizes, as babies grow so fast. If your baby is born in the spring or summer, he will need lightweight clothes — sleeveless shirts, nightgowns and kimonos made of thin material. If he is born in the fall or winter, he should have long-sleeved shirts and cotton knitted or flannelette gowns. Do not buy any clothes with drawstrings or ribbons at the throat, for these may choke the baby. If friends give your baby presents or you can afford extra things, it is fun to let the

The Baby: From Birth to Three Months

baby wear pretty clothes on special occasions. But he will look just as sweet in a shirt and diaper or plain gown if his clothes are clean and neat.

- 3 - 4 shirts — cotton knit, with ties or buttons
- 3 - 6 nightgowns — gowns that are open down the back are easier to put on and take off
- 3 - 4 dozen diapers — bird's-eye or 3-ply gauze
- 1 - 2 flannelette jackets or kimonos opening down the front or back with big sleeves
- 1 - 2 warm sweaters, preferably cotton, as some babies' skins are irritated by wool
- 1 cap
- 1 baby bunting bag or warm hood and coat for winter
- 2 - 3 flannel squares or receiving blankets, a yard or more square, to wrap the baby in. They will help to protect the woolen blankets.
- 6 small sheets or large diapers, big enough to cover the mattress. Pillow slips may be used to cover the mattress in a bassinet.
- 1 or more waterproof sheets or squares to cover the mattress if it is not waterproof. Do not put a rub-

ber sheet under the baby's head, as it will cause him to perspire; cover the sheet so that it will not be too cold for the child to lie on.

- 2 diapers folded over a small waterproof square, or small quilted pads, may be used under the baby in order to keep his clothes and bedding dry.
- 2 soft, lightweight blankets
- 3 washcloths made of some soft, fine material
- 2 large, soft bath towels
- 1 covered diaper pail

The Baby's Bed. — A bassinet, a sturdy clothes basket tied onto two chairs, a dresser drawer or a carriage makes a good bed for a little baby. Any one of them can be easily moved about and will protect the baby from drafts. Something firm and smooth to lie on, whether it is a regular baby mattress or a blanket or pad folded several times, is better than a soft mattress or pillow. The baby needs a straight, flat surface, firm but not too hard. He should not have a pillow. If a bassinet of some kind is used at first, a large crib should be provided by the time the baby is three months old or as soon as his active arms and legs hit the sides. When buying a crib, be sure the slats are close

enough together so that the baby cannot possibly get his head between them.

Care of the Baby's Clothes.—The baby's skin is very sensitive, so all his clothes should be washed often and carefully. He will be healthier and more comfortable if his clothes are always clean and dry. If you do your own washing, as most mothers do, you will find it easier to wash every day than to do all the wash at one time.

As soon as you remove a wet diaper, put it in a pail or the laundry tub, filled with water. When the diaper is soiled, shake off the bowel movement into the toilet and rinse off as much as you can when you flush the toilet. Then put the diaper to soak in soapy water until you are ready to wash. When you take care of the diapers in this way, it is easier to get them really clean. Many mothers prefer to boil the diapers before washing by putting them in a large kettle or the diaper pail, covering them with clean water. Let them boil hard for five minutes. Wash the diapers with a mild soap. Remember that washing soda and disinfectants are strong and may irritate the baby's skin. Be sure to rinse the diapers at least three times in clean water; for the first rinsing, use water as

hot as you can stand. When you hang the diapers up to dry, shake them out and pull them straight. Diapers should not be ironed, as it puts harsh folds in them. Just smooth them with your hands as you fold them. The baby may get a rash on his buttocks if the diapers are not thoroughly washed. Never use a diaper a second time without washing it. Always be sure diapers are really dry. Many mothers use one of the diaper laundering services and find it very convenient.

If the baby's skin is sensitive and he gets a diaper rash on his buttocks, thighs or abdomen, take special care to wash, boil and rinse the diapers thoroughly. After they have been rinsed three times, dip them in a boric acid solution made by dissolving 4 level tablespoons of boric acid powder in each quart of water. Wring the diapers out and let the boric acid dry on them. *Be careful not to leave the boric acid solution where the baby can get at it and drink it.*

Toilet Articles.—A tray or large, shallow cardboard box or large cake tin in which you can keep all the baby's bath articles together.

A bar of mild soap in a covered dish.

1 small covered jar for steril-

The Baby: From Birth to Three Months

ized cotton. (You can use a small empty mayonnaise jar that can be boiled.)

1 small covered jar for plain mineral oil or baby oil.

A small box of cornstarch or baby powder. (Do not use talcum powder that is made with zinc or magnesium stearate; it may cause pneumonia if the baby breathes it into his lungs.)

A package of sterilized gauze or small squares of soft, clean cloth sterilized in the oven.

A tube of boric acid ointment.

A small, soft hairbrush.

Small covered jars of boiled water and sterile cotton to wash your breasts if you nurse your baby. Boil the jar and the water every day.

Something to bathe the baby in—a large dish pan, a baby tub or bathinette.

Equipment for Sterilizing Bottles and Making Formula.—

A large pan or kettle with a cover.

A metal rack to hold bottles is handy and saves much time when boiling bottles; or a wooden one to put on the bottom of the kettle. The wooden one can be made by nailing small pieces of wood together.

7 to 9 8-oz. bottles. Get the type that can be thoroughly cleaned inside.

9 nipples.

7 to 9 nipple covers or clean squares of waxed paper tied over the mouth of the bottle.

A covered jar for nipples.

Tongs or forceps for handling the hot bottles.

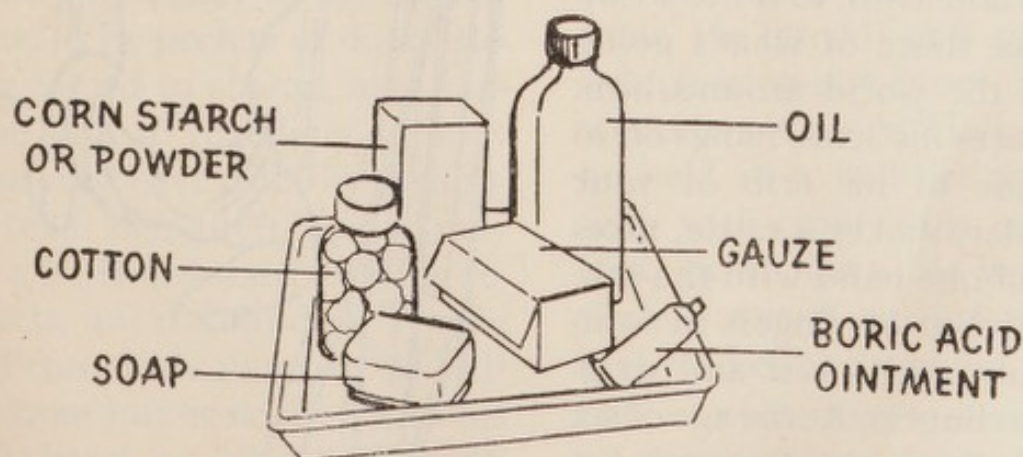
A glass or metal funnel that can be boiled.

A bottle brush.

A measuring tablespoon.

A quart measure.

Fix a shelf in your cupboard or get a large covered box in which you can keep all the things for making the formula.



Chapter III

THE BABY: FROM THREE TO NINE MONTHS

1. HOW YOUR BABY IS GROWING

When your baby is only a few weeks old, visitors are sure to express surprise when they see how tiny he is. But when he is three or four months old, relatives and friends who have seen your baby from time to time will begin to marvel at the way he is growing. In five or six months most babies have about doubled their birth weight. Even more remarkable is the speed with which the infant grows in his ability to do things. In fact, you will probably be aware of interesting changes in your baby every day.

The Desire to Touch Things.—Now that the baby has learned to hold his head steady on his shoulders, he begins to learn how to manage his hands and arms, to try to sit up and see more of what's going on in the world around him. He waves his arms, hangs on to the side of his crib or your shoulder, shakes a rattle, takes hold of one hand with the other, stares at his fingers in wonder, turns his wrist and wriggles his fingers. At the age of six months he is able to reach for

his toys and has a pretty good sense of direction so that he can get what he sees if it is within reach. In this period he explores and handles everything. His eyes, too, are continually seeing more. He examines everything near him, reaches for it, fingers it, puts it to his mouth and tastes it. He may even try to smell and hear it. Now he wants to touch things, just as earlier he was absorbed in looking at them. By nine months he begins to use his forefinger to poke into things,





and he can use his thumb and finger like little pincers to pick up small objects. The baby's eagerness to touch is a useful part of his natural curiosity and his desire to learn, so he fingers and tastes things.

That Left Hand. — Sometimes, as early as six or nine months, a baby shows a definite preference for his right or left hand. More often he uses either one with equal readiness and skill until he is much older. It is best not to try to change the child's tendency to use his left hand if he prefers to do so. Being forced to change may confuse him so that later he may stutter or have trouble learning to read. Being left-handed may be a little awkward in some respects, but if a child isn't made self-conscious about it, he will become just as skillful with his left hand as others are with

their right hands. It is a good idea to offer him toys so that he may grasp them easily with either hand.

Turning Over on His Own Power. — Most of the time, while your young baby was awake, he lay on his back. Now, at three or four months, he wriggles and tosses and turns himself part way to one side and then to the other. It must be a great satisfaction to the baby to be able presently to turn over alone. Then he can change his position when he feels like it without waiting for someone to do it for him. But now it is very dangerous to leave him alone on a table or bed for even an instant. Most babies have at least one fall sooner or later. While they are not often seriously hurt, the mother should at all times be very careful to protect her baby from this danger.

When the baby is on his stomach, he may raise his head and shoulders and rest on his arms. He quickly gets tired in this position and fusses, but he wants to see more. He loves to be held in a half-sitting position with your arm around him, or to have his mattress slightly raised on one end so that he lies at an angle. Some babies, while they are held, try to rock back and forth a little

or else try to bounce up and down. These exercises help to develop a baby's back muscles and to get him ready for the next step, sitting alone. One should not prop a baby up with soft pillows until his back is strong enough.

Sitting Up Alone.—You can tell when your baby is ready to sit up alone. Before that time he slumps forward or folds up like a jackknife with a curved back when you set him down. Somewhere around six or seven months he will sit upright for a moment or so, and then tip or slump backward instead of forward. Do not let him try this too long and get too tired. A minute or two at a time is enough at first. Gradually he will be able to sit for five to fifteen minutes by himself. Most babies seven or eight months old can sit up steadily, some not until a month or two later. When he is ready to sit up, he will; don't hurry him.

Crawling—in a Dozen Styles.—About the time that he learns to sit up alone—sometimes earlier and sometimes later—a baby begins to crawl. A few babies never learn how, but go right from sitting to standing and walking. The little baby may make swimming motions when he is on his stomach but he doesn't get anywhere. Real

crawling begins after much practice. He may do it in any one of a dozen different styles—backward, sideways, forward, on his hands and knees or humping himself along on his haunches. It doesn't matter much whether or not your baby learns to crawl, but he should have plenty of chance and space to exercise and practice when he feels like it. A blanket or sheet on the floor makes a good place for a young baby to lie and kick and practice rolling over, sitting up or crawling. It is easier for him to sit and crawl on a firm surface than on a soft one.

By the time the child is able to crawl well, he will be eager to explore farther and farther in the room. He probably won't be content to stay in his playpen all the time. He needs the experience of moving about, so let your baby crawl to his heart's content. He will want to follow his mother wherever she goes, and he can be encouraged to go after his own toys. The bits of dirt he may pick up—and try to eat—are not likely to hurt him. It is important, however, to make sure that the floor has no splinters and that there are no dangerous objects around, such as electric wires, tacks, pins, buttons, glass toys or bottles. Cigarettes may be

fatal to a baby, so keep boxes out of reach and ash trays empty.

The baby needs space to move around. It is so important for him to have room to crawl that in small, cramped quarters it is worth while to move the furniture to give him a free space. A play-pen provides him with a safe place to move around without getting hurt on the furniture but it is not a necessity. The baby may soon prefer the larger freedom of the floor anyway, and it is better for him not to be cooped up too much in a small space. If you are going to get a play-pen for your baby, get it early, when he is five or six months old. If you have a place where you can put it outdoors, the baby will enjoy watching people going by. Later, when he is ready to practice standing up, the slats will be helpful to hang on to and he can pull himself up by them. When he is older, take one side off the pen, turn it upside down to make a playhouse.

New Tricks.—Your big baby learns to make new sounds and "talks" to himself, carries on conversations with his family, laughs, babbles and may learn to say one or two words such as "dada," "mama," "bye-bye" or "ta-ta" before he is twelve months old. He watches with

great interest everything that goes on and can read many of the gestures and expressions of grownups. If his mother or father feels cross, he knows it just as he knows that their smile means they like having him around. He also understands increasingly what is said to him. He enjoys games like peekaboo and pat-a-cake and begins to imitate the action in these and other games. All these experiences with his family and the little world of things he explores help to make up his day.

When the First Tooth Comes.—Another big event in the baby's growth that is likely to occur before he is nine months old is cutting his first tooth. The baby teeth are all formed under the gums before birth. How good they are depends somewhat on the diet of the baby's mother while she was pregnant and on the food the baby has been eating since he was born. In most infants the first tooth appears when they are about seven or eight months old. Some babies get a tooth as early as four or five months. Occasionally a baby who is healthy in every way does not get any teeth until he is a year or more old. The first two teeth to appear are usually the two lower center ones. By

a year the four upper and the four lower center teeth may appear.

For months before the first tooth shows, the baby may drool, try to bite on anything within reach, and be fretful

and fussy. Sometimes a child shows no signs of teething and the mother first discovers that a tooth has come when it clicks on his spoon or cup. Although teething is a natural process in babies, it can cause consider-



5 TO 9 MONTHS



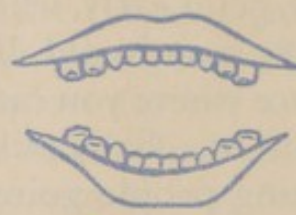
5 TO 12 MONTHS



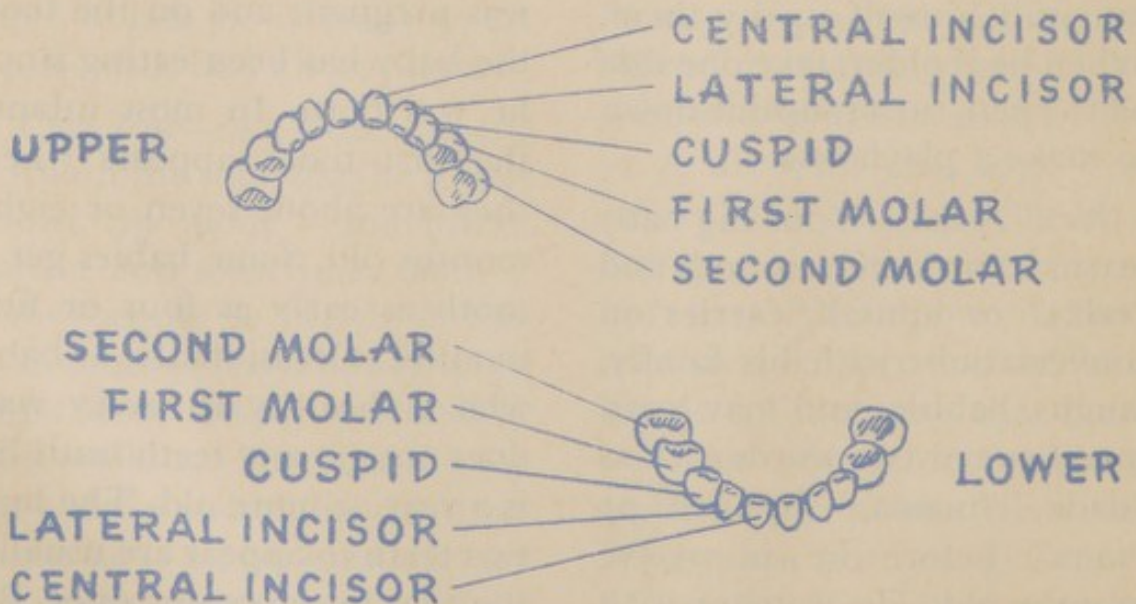
12 TO 18 MONTHS



18 TO 24 MONTHS



24 TO 48 MONTHS



able discomfort. When you notice signs of teething, give your baby something hard to chew on—a hard rubber or bone teething ring, a metal teaspoon, a small toy or a piece of cloth. You needn't worry about germs on such things if they are kept clean by scrubbing. But make sure that the baby does not chew paint off furniture. Paint may contain lead, which is poisonous.

If the mother is nursing her baby, she may some day feel a little nibble on her nipples. The baby just likes to feel his teeth and does not realize that he may hurt you. Do not hit or scold him. Draw the breast away gently and he will soon learn not to bite the nipples. If he should get a firm grip and hang on, you can get him to let go by gently holding his nose a minute so that he has to open his mouth to breathe.

If your baby wakes up at night and cries out with pain from teething, he may go back to sleep in a few minutes. If he keeps on crying, don't be afraid to pick him up and comfort him. When the pain is gone, he will willingly go back to sleep. Sometimes only a small bottle of milk or a short period of nursing will comfort the teething, wakeful baby. This won't

spoil him or start a habit. A little wise mothering when he needs it will soothe his distress and keep him from getting into a crying habit. *Do not use any soothing syrup or rub-on medicine to relieve the baby's pain.*

2. CHANGING PATTERNS OF THE BABY'S DAILY LIFE

Naps and Bedtime.—The way the baby grows and learns gives his parents the best cues as to how to plan and change the orderly routines of his care.

By three months the baby has learned to stay awake part of the day instead of sleeping most of the twenty-four hours. You can begin to count on his regular nap times, although these change often as he grows older, and babies differ in the number and length of naps they need. The young baby is likely to wake up any time between 5 and 8 a. m., but he will probably not demand his breakfast immediately and may talk to himself for fifteen minutes or so before he fusses. By six months he may enjoy playing with a toy in his crib for a while. After the early breakfast the younger baby may take a short nap before bath time. When he is a little older and is no longer sleepy after breakfast, he is likely to play hap-

pily by himself for an hour or two if he gets a different toy now and then. When he is able to sit up in his high chair or to crawl around, he will enjoy watching the household activities while his mother cooks in the kitchen or cleans.

After the second feeding, whether or not there is a morning bath, most babies take a long morning nap. If the mother can arrange it, this is a good time for the baby to sleep outdoors. As he grows older, he stays awake longer in the afternoon, but nearly all babies under a year still want a short afternoon nap. Drowsy eyes, turning his head from side to side, wriggling, sucking his thumb or fussing may all be signs that the child is sleepy.

Your baby may be wakeful after his supper, but you should get him used to going to bed after eating, and most babies will fall asleep after they have talked to themselves a little while. Sometimes your infant may get so keyed up learning new things and playing with his father or with visitors that he will be too excited and restless to go to sleep. The parents should then plan some quieter period before bedtime. If your baby cries and seems unable to go to sleep alone, try letting

him stay up half an hour later to see the lights and hear conversation. If he is a restless, fussy baby, a few minutes of extra mothering, being held, gently rocked and sung to, may quiet him until he gets drowsy. He can then be put back in his crib. If the bed coverings are too heavy or wrapped too tightly, the baby can't sleep comfortably. He needs freedom at night as well as in the daytime.

It is very unwise to take the baby into bed with you. He may soon prefer to sleep near you and it will be difficult to get him used to his own bed again.

How long the baby is going to need the 10 p.m. feeding will depend largely on his appetite and gains. This is discussed under "Meals." (See page 63.)

Now Your Baby Is Ready for Solid Foods. How to Begin.—Remember that anything but liquids is an altogether new experience to your baby. Solid foods taste and feel different to him. He has to learn how to eat all new things. At first he may not like the idea. He may clack his tongue and push the cereal out, look puzzled, and be obviously displeased. Give him a chance to get used to it and see that his first experience is as pleasant as possible. He is most

hungry at the beginning of a meal, but some babies prefer to drink their milk first. Do not try to start a new food on a day when the baby is out of sorts or tired. Offer it to him at a mealtime when he is usually most hungry. See that the food is neither too hot nor too cold, and give it to him with a smile. Start with just a little bit on the tip of a small spoon. One taste will be enough for the first day, unless he seems to like it from the beginning. The next day offer him a taste again, but don't force him to eat it if he doesn't like it; instead, try again in a few days. It may take some weeks before he gets used to the spoon. If his reactions are not respected, he may get balky and begin to refuse his bottle, too. So take it easy. If he still dislikes solid food, wait a week or two and then try again.

Cereal or Fruit for Starters.—Your doctor will advise you when to start solids and what to begin with. Some babies accept solid food better if they are started on fruit instead of cereal. Try either applesauce or bananas; both are great favorites. You can either use ordinary canned applesauce or cook it yourself from ripe apples and put it through a strainer. Sugar may be added if the apples are sour. If you use bananas, be

sure they are fully ripened with no green skin; peel and mash fine with a fork, adding a little water or milk if it seems too thick. Cereal is sometimes the first solid food given because it is easy to digest. You can either fix it yourself, by cooking a fine cereal—like farina or cornmeal over a low heat, or you can use one of the prepared baby cereals with a little milk so that it is rather thin.

After a trial of two or three days, when your baby seems to be getting accustomed to fruit or cereal and apparently likes it better, start increasing the amount. Add another teaspoonful every two or three days until the child gets as much as he wants, usually two or three tablespoonfuls. If he has cereal for lunch, give him fruit for supper, and vice versa, beginning with a small amount and increasing gradually.

Vegetables.—When the baby is about four months old, or after he has begun to take fruit and cereal well, puréed or strained vegetables may be added to the diet. They are usually given at the 2 p.m. feeding. To prepare strained vegetables, first wash them, then peel or scrape only when necessary. Drop immediately into a very little boiling water. Cover the pan and cook a few minutes,



until the vegetable is tender when pierced with a fork. Cooking with a small amount of water saves all the food values, especially the minerals and vitamins. Serve the liquid from the vegetables with it, or use it in soups, or gravies for the grownups. Mash the cooked vegetable through a fine sieve, and season with a few grains of salt. It is not necessary to boil the dishes and spoons you use for solids. Germs don't thrive on dry, clean dishes. It is only utensils and bottles for the formula and water that need to be sterilized. The prepared

vegetables that may be bought in jars or cans are more expensive than those you prepare at home.

There are many vegetables suitable for babies. Carrots, peas, spinach and other greens, beets, green beans, tomatoes, squash and asparagus are all good. In fact almost any kind may be given except cabbage, onions, sauerkraut, corn, dried peas and beans. Start offering vegetables as you did cereal and fruit, a little at a time. If your baby dislikes one kind, don't force him to take it. There are plenty of others you can give him and a month or two later he may like one he refused at first. Increase the amounts gradually until he gets two or three tablespoonfuls, depending on his appetite. By the time he is used to solids, he is likely to enjoy almost anything offered him on a spoon, and it is a good idea to give him a variety of foods. This develops his sense of taste, helps him to enjoy his food more, and teaches him to eat all kinds of food—something that will be useful later on. It is best to add only one new food at a time in order that you may be able to tell whether it agrees with him.

Eggs.—Around four to six months, depending on the doctor's advice, egg yolk may be

given the baby. The yolk is the most valuable part of the egg for him and should be started first. The white may be added later, when he is taking the yolk well. The egg may be hard-boiled and the yolk mashed with a fork or put through a strainer, then mixed with a little milk or butter. Or the egg may be soft-cooked by putting it in cold water, bringing to a boil, then turning off the heat and letting the egg stay in the water three minutes. Or the egg yolk may be cooked separately. Put it in a cup, place in water, and heat from three to five minutes. Offer the baby a half teaspoon with a feeding and increase gradually. When egg is added, make sure you are not adding another new food at the same time in case it should upset the baby.

A Day's Meals.—By seven, eight or nine months most big babies have meals something like this.

Milk at about 6 a.m.

Orange, grapefruit or tomato juice, fish liver oil at 9 a.m.

Cereal, milk and fruit at 10 a.m.

Vegetables at 2 p.m. plus milk. Simple milk puddings in custard form may be added if the baby takes them after he

has had as much as he likes of his other foods.

Cereal, fruit and milk for supper. If the baby's bowel movements tend to be a little hard, puréed prunes or prune juice every night may help.

Zwieback or plain crackers may be given at the end of the meal or after a nap.

A healthy baby's appetite is the best measure of how much food he needs. If he is offered a good diet and both his eagerness to eat and his signs of when he has had enough are respected, there is usually nothing to worry about in connection with his eating. A baby's inside system seems to tell him how much he needs. If he is not urged to eat when he does not feel like it or has had enough, and if the mother watches for the few changes that may come, he is pretty sure to enjoy his food. And learning to like to eat is an important lesson for a baby.

Happy Mealtimes.—Remember that your baby is learning to use his hands and likes to hold things. A piece of hard toast or plain cracker will give him something to hold and put in his mouth. It satisfies his urge to bite on something hard when he is teething and helps him to learn how to chew.

About the eighth month the baby may also get a peeled apple to chew and exercise his gums and jaws on. He will enjoy playing with a spoon during meals, and though it will be some time before he can feed himself with it, it is a good practice for him to play with it. He is learning to pick up things with his fingers, too, and may be given a few peas or small pieces of cooked carrot on his tray. At this stage he should start feeding himself with his fingers and learning how to chew lumps of food.

Around five or six months it is a very good idea to begin giving your baby a sip or two of milk from a cup at meal-times. He will get used to drinking it this way and will have some advance preparation for weaning. He will soon try to hold his bottle, and while the full bottle will be too heavy for him to handle alone, if you let him put his hands on it, he will manage it when it is partly empty. Around eight or nine months he will be interested in handling a small cup or plastic glass and may try to give himself a drink. Then put a little milk in the bottom, and soon he will like to drink milk in this new, grown-up way. Thus the intelligent mother can as-

sist her baby in learning how to feed himself by giving him opportunities as soon as his muscles are ready for them.

When the baby is first given solids, it is well for the mother to hold him in a half-sitting position on her lap in order that he may not choke. When he can sit up steadily by himself, he will enjoy sitting in a high chair for his meals. In his eagerness to learn all about his new food, he will surely put his hands in the cereal bowl and his fingers in his mouth and try to feed himself. This is bound to be messy, but if the mother can bear it, her baby may learn more quickly how to get along without her constant help at mealtimes. You can put a bib on the baby, an apron on yourself, and newspapers or a piece of oilcloth under his chair. You should also keep a dishcloth handy to wipe up the spilled food. When your child can sit by himself, you can show him how to feed himself by sitting or standing behind him and directing the hand holding the him use either his right or his him use either his right or his left hand; in this connection he should be allowed to follow his own inclination.

One of the first signs of illness or upset is often a decrease in appetite. When your baby

begins to refuse food, he may be temporarily upset by teething or may be coming down with a cold. His lack of appetite should warn you to watch him with extra care. Do not urge him to eat but let him take only as much food as he wants. When he feels better, he will make up for what he has missed.

Changing Schedules and Formulas for Milk. Increasing Appetite.—If your baby gets a formula, it will need to be changed from time to time as he grows. Your doctor is the only one who should make these changes. The baby may get seriously upset if you try to change the formula yourself or use the one a neighbor has. Every time you take the infant for a regular check-up, discuss with the doctor the baby's appetite, how long it takes him to finish his bottle, how eager or satisfied he seems to be with his meals, and how the new foods agree with him.

When he is about six months old or a little older, your baby may be ready to pass up the 10 p.m. feeding and sleep through the night. Some babies are ready for this change sooner than others. Your baby may begin to sleep past 10 o'clock and then wake up hungry at 11 or 12. It is all right not to be too

strict about this feeding. You can wake the baby at 10 p.m. or whenever you go to bed yourself, or you can wait until he wakes up. It is much better not to try to hurry him in giving up this meal because if he is hungry, he will naturally not be able to sleep well. On the contrary, he will be restless and fussy and both his sleep and his appetite may be affected. After you have had to wake him several weeks to give him this feeding, try letting him sleep through the night without disturbing him.

If you breast-feed your baby, you will usually find that the amount of milk you have adjusts itself to his increasing appetite. If the breasts become uncomfortably full when the baby first sleeps all night, you may use a breast pump or squeeze out some of the milk by hand to give yourself some relief. As a rule the breasts accommodate themselves to the changed schedule, and you should be able to enjoy an unbroken night's sleep, as your baby does. But if you happen to wake up occasionally from habit, peek in and make sure that the baby is covered. Take care, however, not to wake him up.

In most cases, babies are not ready to give up the bottle or

breast until they are nine months old or so. If it is necessary to change your baby from breast to bottle, you can follow the suggestions for weaning (see page 79). Give the baby a bottle instead of a cup of milk.

If the Baby Sucks His Thumb.—Although your child gets a great deal of satisfaction from his new, grown-up way of eating solid foods, he may want to suck a lot and should be allowed to do so. This is the thumb-sucking age, and if your baby sucks his thumb a few minutes before mealtime, it is only because he is hungry. If he sucks it after feeding or between meals, it may be a sign that he is not getting enough sucking at mealtimes. If he is breast-fed, let him nurse longer at one breast before offering him the other. If he is a bottle baby, get new nipples with smaller holes. The thumb-sucking baby may need more time to suck at meals, so the 10 p.m. feedings should be continued until he refuses them.

The parents might also consider whether the baby seems contented and happy. More time outdoors, more freedom and toys to play with, or a little extra attention and fondling will sometimes give the baby more enjoyment. Should you try to stop him by direct meth-



ods? Well, it doesn't do any good. Pinning his sleeves down or putting mittens on makes a baby angry, and it will not cure him.

If you have followed these suggestions and your baby still sucks his thumb, you need not worry. Your efforts will have made him better satisfied in other ways, and he will probably be ready to give it up earlier than he would have done otherwise. It is no disgrace to a baby or his parents if he sucks his thumb.

Elimination. — As the baby grows older, his bowel movements are likely to be less frequent than they were in the first months. The addition of solid foods to the diet usually changes the consistency and

color of his stools. You may see bits of color or lumps of vegetables in the stool, but this does not mean that anything is wrong. Prune juice or pulp given at supper will generally help to soften hard movements. If the stools are hard and uncomfortable to pass, your doctor will advise you what to do. Enemas and suppositories are rarely necessary or advisable. It is much better to treat any tendency toward constipation by correcting the cause through the diet.

A few years ago it was considered a good idea to try to train babies to a pot from a very early age. Now we know that while a mother can sometimes catch the movement in the chamber, a very young baby cannot be really trained. His nerves and muscles at the bowel opening are not developed enough for him to be able to control himself. It is much better and easier in the long run to wait until the baby is a year or fifteen months old. Then he will be ready to start training himself. (See page 80).

Clothes and Baths. — When the baby begins to crawl, he may need a sponge or tub bath before his supper, for he is sure to get dirty even in the cleanest of homes. Getting dirty is as much a part of crawling

as getting clean is a part of bathing. When he can sit up steadily alone for ten minutes, he will enjoy part of his bath sitting up in the deep laundry tub or in the sink; or else he may lie in the big tub, where he can splash and try to swim. A floating toy, or clothespins, or an unbreakable cup will give him fun in the bath. Most babies try to suck the washcloth, drink the bath water and eat soap. A little of this, which is bound to happen anyway, will not hurt them. The baby should never be left alone in the bath even for a moment. He might slip and be drowned in only a couple of inches of water. All babies love to play in water, and unless the room is cold, you may safely let your infant play in the tub 15 or 20 minutes. In hot weather a second bath or sponge bath every day will help to keep him comfortable, and a dip in the washbasin when his diaper is changed is useful in preventing prickly heat and diaper rash.

As the baby grows, he is awake more of the day and less disturbed by being handled than when he was little. The mother may now enjoy dressing her little boy or girl in rompers or dresses. Cotton, corduroy or jersey overalls are very practical for the crawler.

They protect the legs from scratches and bruises and are easy to wash. In hot weather the baby needs nothing but diapers or a sun suit. In cold weather pajamas with feet will help to keep a lively kicker warm. If a sleeping bag is continued, the baby may get so used to it that he will be unhappy if a change is made later. Booties look pretty but do not stay on long because babies like to pull or kick them off. The same applies to socks. Your baby will begin to help a bit with dressing, holding out his arms for sleeves or tugging at his cap. Let him do as much as he can. He learns that way and has fun in addition.

Fun for the Baby and the Family.—The baby's development suggests the kind of play and exercise he needs and enjoys. Each month he sleeps less and gets more interested in things around him. By the time he is three months old, play becomes as important to his growth as sleep. He likes a change of scene, a shift from the crib to his carriage or the sofa or the floor. Even when he can sit up alone, he will enjoy lying on his back part of the time, kicking, waving his arms, talking, turning over, looking around, raising himself up. A play-pen and especially a high

chair give him a better view of the household. He loves a ride in his carriage, tries to look over the sides, smiles at people who stop to talk to him, plays with a toy or spoon. When he becomes more active, he will need a strap around him to keep him from falling.

Now he really begins to play with toys. Simple, inexpensive playthings or household objects are as much fun as anything. Paper to crinkle, empty cereal boxes, a small soft ball, stuffed animals, a stout string of empty spools, a set of colored plastic measuring spoons, a wooden mushroom darning or any small object that has no sharp edges and cannot be swallowed will give him great pleasure. Clothespins make wonderful toys that will be played with for months. They are easy to wash, not too heavy to hold, good to bite on, float in the bath, and can be thrown or carried around. The baby will especially like things to bang, and a small saucepan and lid will give him much amusement. When he can crawl, his mother might fix a low shelf in one of her cupboards with pans, empty boxes, nested measuring cups and similar objects. He will be happy playing with these things while she does her housework.

When he is about nine months old, your baby will enjoy playing little games. He likes to have someone roll a ball to him, to crawl after it and to push it. You may be able to teach him pat-a-cake and he will respond to the attention and admiration his new tricks win. He soon learns the fun of throwing down his toys and watching you pick them up for him. This game really means something to the baby, for after he has learned how to take hold of things, he still has to learn how to let go of them, and he practices dropping and throwing his toys over and over. He learns to recognize more people. Babies begin early to enjoy music, sometimes smile and are quieted by it, or try to sing to themselves. Later they attempt to move their arms or bodies in time to the rhythm. This is a pleasure that nearly every home can give its baby. An infant likes to play peekaboo too, although at first he may look puzzled and worry about his mother's disappearance. She is very important, indeed, to the baby. She does almost everything for him and he could not live without her or someone in her place. So when his mother's face disappears over the side of the chair or behind a handkerchief and then comes back

again, the baby is delighted and shrieks and laughs happily. This age-old little game helps the baby to learn that his mother may be expected to come back to him even if she has been away for a while.

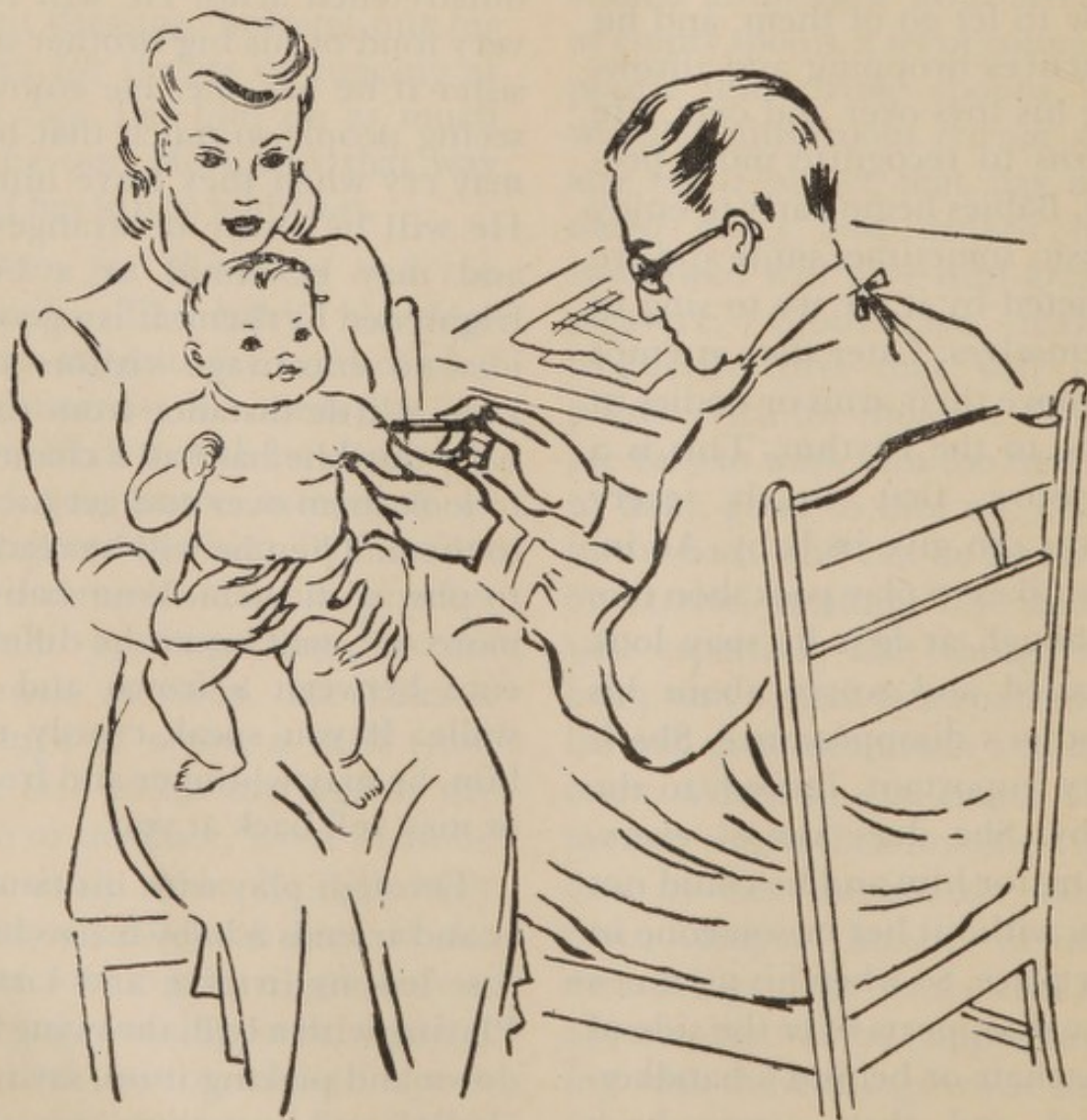
By the middle of his first year, your baby will recognize members of his family. He may look toward the door when he is told it is time for his father to come home. When he hears him, the child will greet him with a crow of pleasure and outstretched arms. He will be very fond of his big brother or sister if he has one. He enjoys seeing people so much that he may cry when they leave him. He will be aware of strangers and may be timid or a bit frightened by them. It is a good idea to encourage visitors to keep a little distance from the baby until he has had a chance to look them over and get used to them. Then he will be ready to play with them. Your baby, moreover, will know the difference between a frown and a smile. If you speak crossly to him, he may whimper and fret, or may yell back at you.

Through play with his family and friends a baby learns his first lessons in give and take. Playing with a ball, throwing it down and picking it up, saying "hello" and "goodbye," are all

part of his learning about people and how they get along together. At each stage in your baby's growth you will find him more amusing and more interesting. If you enjoy watching and studying the many changes in your child, the work and responsibility of caring for him will seem less tiring and more fun.

Protect Your Baby from Disease. — If anyone in the household has a cold or sore

throat, he or she should stay out of the baby's room, especially in the first days, when the infection is most contagious. No one, whether sick or well, should kiss a baby on the mouth. Be firm and refuse to allow visitors with colds to hold the baby or even come into the same room with him. When the mother happens to be sick, it is wise to have someone else take care of the baby if possible. If the mother or whoever else



takes care of the baby has a cold, that person's hands should be washed thoroughly each time before the baby is handled.

Babies should be protected against several contagious diseases that are sometimes fatal. Years ago many babies died of those diseases, but nowadays such deaths are infrequent. Some forms of health protection are now so well established that a parent is actually neglecting his child if he does not give him such protection. Many parents do not object to such protection or immunization, but never get around to it. Do not fail to have your baby immunized. If you have no doctor for your baby, take him to the nearest Child Health Station to get the necessary treatments.

Most doctors advise that babies be immunized against at least three serious diseases: smallpox, diphtheria and whooping cough. This is done by giving something that builds up the baby's resistance to the disease. The treatments or "shots" should be completed by the time the child is a year old.

Parents in New York City now realize how important vaccination is. This is a result of the recent appearance of

several cases of smallpox in the city for the first time in many years. Smallpox is a serious disease and is common in communities where vaccination is not compulsory. In the states where vaccination is compulsory, there are almost no cases of smallpox.

The smallpox vaccination is made by pricking the skin and applying a drop of vaccine. After three days, if the vaccination takes, a small red pimple appears which changes into a blister. After eight or nine days a tough brown scab develops. Until this scab falls off of its own accord, the spot should not be washed but should be kept dry. Some babies may feel a little upset and run a fever, but most of them suffer no ill effects from the vaccination. Babies under a year are less likely to get sick from it than older children. Besides, it is easier to keep a young baby's vaccination clean, since he is not so active.

For protection against diphtheria, two or three injections are given a month or so apart before the baby is a year old. These injections provide safe and simple protection against a disease that used to kill thousands of children every year. The injection may sting for a few minutes after it is

given, but it causes no serious discomfort or illness. The doctor may test the baby some months later to see whether immunity has been established. It will also be necessary to give a "booster dose" before the child goes to school.

Whooping cough is a dangerous disease, especially for children under two. Not only is it dangerous, but it is such a long-drawn-out illness that the mother will certainly wish to prevent her children from getting it. Occasionally a baby will get whooping cough even though he has had the injections, but he gets a much milder form of the disease than he would if he had had no protection at all. Keep your baby

away from anyone who has this disease. He may be a little feverish and restless after the injection but is usually over it within 24 hours.

Another type of protection that is very useful is given when a young or weak child has been exposed to measles. This injection protects him for about three weeks, but is of great value because measles in a child under three years of age or in a sick child may be extremely dangerous.

If your baby has been near anyone with a contagious disease, ask your doctor's advice. Do everything you can to keep your baby away from anyone who is sick.

Chapter IV

THE BABY BEGINS TO GET AROUND: FROM NINE TO FIFTEEN MONTHS

1. HOW OLD IS YOUR YEAR-OLD BABY?

A baby's first birthday is an important occasion to his family and is often celebrated with presents and a cake with a single candle. Somehow we feel that the baby has now passed a milestone and we expect him to be more grown up, but this is really a sort of in-between age.

Several big events take place between the ninth and the fifteenth month. Perhaps the most noticeable change is that the baby of a year really begins to get around. He crawls all over, climbs, pulls himself up by the furniture and toddles around hanging on to things. He may take a step or two alone, and some children may be walking by fifteen months. Your baby at this age is more active and curious. He wants everything and gets into everything. All these changes, as he grows, require many adjustments in his daily life. He still needs almost constant care.

By a year, most babies have about tripled their birth

weight and have grown eight or ten inches taller. But they no longer gain weight as rapidly as they did in the first six months. This is normal for healthy babies. It is part of nature's plan of growth, and as they become more active and begin to lengthen out they lose some of their baby chubbiness. Think what giants babies would be if they doubled their weight every few months as they did in their first year. This is the time, too, when the baby is getting more teeth. He may have a poorer appetite, may be fussy during the day, and wake up frequently at night. Many babies have half a dozen teeth by the time they are a year old, and the others come in fairly rapidly. If your baby has not cut any teeth during the first nine months, he is likely to get several all at once.

Along with teething and other developments of growth, sometimes during this six-month period your baby will begin to wean himself, to go on three meals a day and to eat coarser foods. By a year he

may be ready to start learning to control his bowels. All these are tremendous changes for a baby to make. Thoughtful care will enable him to go from babyhood to childhood happily and confidently.

The baby's hands grow more skillful all the time. Now he can feed himself nicely with his fingers, dip his spoon in the dish and lick it off even though he may not get much into his mouth. He can also hold his cup and take a few swallows of milk before he spills the rest. He likes to carry something in each hand as he crawls or walks. He loves an audience and repeats his tricks when he gets a laugh.

The child's eating equipment should be unbreakable and easy to handle. To encourage his feeling of independence in taking care of himself, the spoon should be easy to grasp and hold and the dish from which he eats should have a rim to prevent the food from spilling over every time he pushes it to the edge. A chair with a tray, which should also have a rimmed edge, and a foot-rest will help him to sit comfortably. His cup, too, should have a good handle and a smooth edge. It should weigh enough not to tip over easily, and yet should not be

so heavy as to be unwieldy. At this age a large oilcloth bib in some gay color protects the baby and makes it unnecessary for his mother to watch every mouthful he takes for fear lest it should be spilled. A certain amount of spilling, of course, will take place, until he has learned the right technique.

Now the baby chatters a lot and may have learned to say a few words. In any case he sounds as if he were making conversation, for he is very expressive. He exclaims, questions, pleads, demands. He may have a special grunt or sound that he makes over and over when he wants something, until his mother feels worn out by his continual demands and heartily wishes he would learn to talk. He understands a great deal of what is said to him, and his parents are often surprised to find how much he knows. He can follow simple instructions and, as he gains skill with his hands and can move them around, he can go after his ball, look for a toy, pull off his cap and maybe his shoes, hand his mother a spoon or shut a door. He listens and recognizes the sound of approaching footsteps, the telephone ringing, dog barking, the motors of cars and airplanes. He has a passion for climbing



steps, pulling himself up by the furniture, exploring, and handling things. He can't stay very long in any one place and needs a frequent change of toys. He knows what he wants and he is very demanding, but he is easily distracted by something new.

As the baby begins to feel less helpless and enjoys doing things himself, he naturally becomes more independent. He screams and fights for what he wants and resents being restricted in any way. At the same time he seems to be more dependent on his mother in some ways, may want to be near her while he is playing, and often cries when she leaves him.

With all these changes in the baby's abilities and activities, puzzling traits may appear—signs of fear, tantrums, naughtiness or peculiar habits. Now that he has begun to get around, he finds himself in trouble because he insists on touching and handling things. His parents begin to wonder how they can make their baby mind and how they can teach and discipline him.

At this stage patience is of the utmost importance. This is the time to put away the costly vase and floor lamp. The baby can hardly be expected to distinguish between a delicate work of art and an easily replaceable, inexpensive object. Anything within reach arouses his curiosity and he proceeds to investigate. For his own sake, as well as the protection of your most valued possessions and your peace of mind, fragile objects should be put away for a time. During this period, lanes of traffic through the rooms should be arranged so that there are no hazardous sharp corners, no floor plugs that can be chewed, no pot handles within reach on the stove, no buckets of water, no ink, or ammonia, or any medical or cleaning equipment left where the baby can get at it. He has

not yet learned that these things can get him into very serious trouble.

2. NEW LESSONS IN YOUR BABY'S EVERYDAY LIFE

A. Eating in a More Grown-up Way. Three Meals a Day.—Your baby's own changing appetite was the best guide as to when he was ready to skip the night feedings and eat solid foods. So, too, he will let you know when he is ready to change to three meals a day. This time may come when he is between ten and fifteen months old. If he seems hungry and cries for food at the end of four hours, he still needs more frequent feedings. When he begins to have less appetite for some of his meals, or when he stays awake all morning and wants only one nap a day, he probably needs only three meals. The mother's convenience plays a part, too, in this change, and if it makes things easier for her to feed him only three times a day, let her try this plan and see how her baby reacts to it.

If your infant seems ready to change early, you might try giving him milk when he wakes up, which will probably be around 6 a.m. If he is about a year old, a drink of orange juice may satisfy him. Then he can have the rest of his break-

fast—his cereal and fruit—around 8 or 9 o'clock. A little fruit juice and some toast or crackers in mid-morning and mid-afternoon will help him to get used to the long time between meals. It is better not to give him milk between meals as it may decrease his appetite. He should have his lunch around noon. Some babies get hungry by 11:30; others, especially if they take a morning nap, may not be hungry until 1 p.m. Supper may come between 5 and 6, and your baby will probably want his bottle for a nightcap before he goes to sleep.

Between nine months and a year, or earlier when he is able to chew, it is a good idea to get your baby used to eating chopped foods instead of strained ones. Even if he has no teeth, he can manage well-cooked bits of vegetables. If you wait till he is more than a year old, it will be harder to get him to change. An excellent way to begin is to put a few whole well-cooked peas or pieces of carrot on his tray. He will enjoy picking them up with his fingers and popping them into his mouth. Mash some of his food fine with a fork instead of straining it, and give him just a little at a time. Gradually mash the food

The Baby: From Nine to Fifteen Months

into coarser bits until he is getting small pieces. He may eat finely chopped or scraped meat, too, even if he has to use his fingers. As soon as his hands are able to manage a spoon well, he will change to this neater way of feeding himself. Meanwhile, put a spoon on his tray and let him practice with it at mealtimes. A messy face and floor are indications that he is on his way to growing up. It will take him a while, however, to learn new ways of eating, so give him plenty of time.

What to Cook for the Baby's Meals. — Plan your family meals so that it is easy to give the baby the food he needs.

A GOOD MENU FOR THE WHOLE FAMILY

Morning

The Family Meal

Orange
Oatmeal with fresh or evaporated milk
Whole wheat or enriched toast
Butter or margarine
Milk or coffee

Child from 1 to 2 Years Old
Vitamin D-1,000 units
Orange juice
Oatmeal with fresh or evaporated milk

Whole wheat or enriched toast
Butter or margarine
Milk

Noontime

The Family Meal

Vegetable soup
Egg sandwich on whole wheat bread
Raw carrot strip
Apple
Milk

Child from 1 to 2 Years Old

Vegetable soup
Hard-cooked egg
Raw carrot
Bread and butter sandwich
Baked apple
Milk

Evening

The Family Meal

Beef balls with tomato sauce
Baked potato
String beans
Cole slaw
Bread and butter or margarine
Vanilla pudding with chocolate sauce

Child from 1 to 2 Years Old

Small meat ball (no sauce)
Baked potato
String beans
Vanilla pudding
Milk

Offer small first servings of food to the young child. Generally a child of this age will eat servings less than half as large as those eaten by adults.

If the child wants more, give it to him. The baby may have a mid-morning and mid-afternoon lunch of milk or fruit unless it takes away his appetite for the next meal.

When the baby goes on a three-meal-a-day schedule, a potato may be added if it has not already been given. Some babies gag on potatoes. You might try baking the potato or boiling it with the jacket on; mash fine, add a few grains of salt, fortified margarine or butter, and a little milk. Offer just a taste at a time for several days. If your baby does not like potato at first, you can try it again in a few weeks. The baby may like sweet potato or you may sometimes give him rice, macaroni, spaghetti or noodles, or else more bread. When he gets tired of his cereal, try a different variety or give him toast instead.

Nearly all babies like bacon. It has a good flavor but is not a substitute for other meat. Fry the bacon in a pan over a slow fire. Turn it often until it is crisp and a light golden color, then drain on a piece of paper. At first you can crumble it in pieces for the child, but he will soon want to hold half a slice in his hand and feed himself.

A good diet for children includes three or four eggs a

week, and it is all right to give as many as one or two a day. If your baby doesn't like eggs try to include most of one in simple custard puddings, or beat one and add it to the milk.

To prepare fish for the baby, bake or boil the fish until it is tender, then mash, making sure that all the bones have been removed. Add a little salt and butter.

When your doctor advises you to add meat to the baby's diet, start with a small amount, say a teaspoonful, of scraped or ground meat, well cooked, and increase it gradually. The meat may be given separately or mixed with mashed potato or vegetable. Liver, lamb and beef are usually the first meats that children get. Chicken may also be given to them, but veal, pork and ham require long cooking and are less digestible. It is therefore better not to give them to babies.

To prepare liver, use a thin slice of fresh beef, lamb, pork or calf's liver. Heat a small pan, turn the gas low, then put the liver in the pan and sear, turning it constantly. Cook only long enough to change the color. Pork liver should be cooked longer. Take it out and grind or cut it up very fine, or scrape with a spoon and mash. Remove the

stringy fiber. Feed alone or with mashed potato or vegetable.

To prepare scraped beef, buy beef chuck or round or any other cut. Scrape the meat off with a spoon and shape it into a small flat cake. Turn it in a hot pan until seared, or sear the meat first and scrape off into a ball afterwards.

Ground beef may also be used. Ask the butcher to grind a piece of chuck or round, or a piece of any lean beef. Shape the meat into patties and cook in a hot pan 2 or 3 minutes, turning the meat often. Use no fat.

To prepare lamb, cut a piece of the chop off the bone or cut a small piece from lean lamb. Broil or pan-broil it without using fat until it changes color, then chop or grind very fine.

When you have chicken for the family, give the baby a piece of the meat or liver cut fine. He will enjoy chewing on one of the large bones. Make sure it has no splinters or sinews that might hurt him.

You can safely keep raw meat 3 or 4 days in the icebox if you freeze it, but never re-freeze it after it has been thawed out. Cooked meat should also be kept cold.

Meat broth or soup cooked

with vegetables may be given to the baby if the fat is skimmed off, but broth does not take the place of meat.

If your baby is satisfied with meat and vegetables for lunch, there is no need to give him dessert. If you do give him dessert, some kind that contains milk, eggs or fruit is best for him.

Make desserts for the family that are suitable for the baby, such as custards, plain corn-starch pudding (vanilla, lemon, etc.), bread pudding and rennet. Plain ice cream may occasionally be given to a year-old baby. Raw fruits are good, too. Banana and apple may be given to the baby raw, mashed, scraped or cut into pieces for finger feeding, as may ripe peaches, pears and apricots. Stewed fruits are all right, too, but the syrup from canned fruits is too sweet for babies. If your baby likes fruit, you may give it to him twice a day; let him have orange or other fruit juice between meals and fresh or stewed fruit or more juice for dessert.

Your baby may drink between 2 and 3 measuring cups of milk a day, but he can get along perfectly well on less. Milk may be added to his diet by cooking the cereal with milk instead of water, or serv-

ing milk puddings or cheese. Remember that milk is a food and that if a child gets a lot of it with his meals, he will have less room for other foods.

Trust Your Baby's Changing Appetite. — Many kinds of food are good for a baby when he is eating solid foods. So long as he does not eat rich, sweet foods like fancy cookies and cakes or puddings to the exclusion of fruits and vegetables, you can pretty much trust your baby's appetite in judging how much food he needs. If your baby should take a sudden dislike to spinach, do not mind; he will get just as much nourishment from other vegetables. Perhaps he will eat only peas and carrots for weeks or even months. Or a baby may refuse all vegetables for a while. Then give him lots of fruit to supply him with vitamins and minerals. The most important thing about eating is for your baby to like to eat. If he is one of those rare children who likes anything and eats a lot of everything, you need not worry. You need not worry either if your baby has a very particular appetite. It may mean a little more effort on your part to think up new varieties or you may get tired of preparing the same few

things every day, but your baby will be just as healthy. If he does not like potato or some other vegetable, do not serve it for a while.

Your best mealtime service to your baby is to trust his appetite and never force, urge, plead, show your annoyance or try to trick him into eating. Even a young baby soon catches on if his mother seems to be worrying about him. Babies love to get extra attention. If you are casual and cheerful at meals and do not get concerned when your baby isn't very hungry, he will be free to follow the urges of his appetite. Nearly all food fads disappear in time if the appetite is respected. Your baby may even take a liking to things he refused for a time. When a baby is teething, he may have less appetite, and in hot weather he may eat considerably less than usual.

Feeding problems, so called, often begin in this age period. You will save yourself much worry and real trouble later if you trust your baby's appetite and do not urge him to take what he does not accept readily. If you think he is really eating too little, talk it over with your doctor.

B. Now Your Baby Is Ready to Help to Wean Himself —

Weaning means changing from breast or bottle to cup, from sucking to drinking. Weaning is a very important experience in a baby's life. You will remember that the baby loves to suck in his early months and that he outgrows this need gradually. It is a shock to anybody to have something that means a great deal to him taken away suddenly without any preparation. If your baby's great satisfaction in his bottle or the breast is snatched away from him suddenly, it may bother him very much. He will let you know when he is ready to give up the breast or bottle. Breast-fed babies are usually ready for weaning when they are about eight or nine months old. Bottle-fed babies may not be quite ready until they are a year or fifteen months old. Some want their bottles till they are two years old. If the baby was born prematurely or has been sick, he usually needs a longer time before weaning.

Therefore, watch when your baby is ready to change and help him to make the change gradually and pleasantly. It is better not to start weaning at a time when he is having other changes, such as starting on three meals a day, or moving to a different apartment, or having relatives visit. Give him

extra mothering and attention, and see that he has an interesting time the rest of the day. This is the age when your baby is increasingly active and wants freedom. Let him crawl about, explore things, have fun with toys, ride in his carriage and play nursery games. If he is having a good time, he will have less occasion to feel unhappy about weaning. If he feels miserable and is left alone to cry, especially at bedtime, he will find it that much harder to give up his beloved bottle. The evening bottle is usually the last one the baby wants to give up, and there is no reason to take it away from him until he is good and ready. Sometimes a little extra cuddling at bedtime will console the baby and help him to feel that his mother still loves him.

If your baby has been breast-fed, some time during the last months of his first year you will notice that he becomes less interested in nursing. He does not stay at it long but soon turns his head away, and begins to play or tries to sit up. If he has been getting a sip of milk from a cup since he was five or six months old, he will be used to drinking milk in this way. Now you may offer him milk at all his meals and give him as much as he wants

this way. At first you might offer him the breast after the cup. Then begin to omit this offer at the meal in which he is least interested in the breast. In a few days leave out a second breast feeding each day, and later a third one. The baby may still want the breast when he wakes up in the morning, and take a long time to give up the bedtime nursing. It is best not to rush him but to take it away gradually. Remember that he may want to nurse again, especially if he has had some upset. Your breasts will gradually adjust themselves and secrete less milk. Ordinarily, if the weaning process is slow, the nursing mother does not have to do anything special, such as omitting fluids or binding her breasts.

If your baby has been bottle-fed, the same directions may be followed whenever he is ready for weaning. This is usually between twelve and eighteen months. Sometimes a baby gets through with his bottle all of a sudden and one day just flings it away and will have nothing more to do with it. In most cases the process is a more gradual one. The baby begins to get bored with his bottle, and may prefer the cup at one or two meals while he still wants the bottle at bed-

time. So try to follow his lead. Forcing your baby to hurry and give up the bottle before he is ready will only result in an unnecessary struggle. It may even start a serious feeding problem and make him unhappy and difficult in other ways.

If the baby at first refuses to drink from the cup, it is a good idea to wait a few days and try again. You might put a cup on his tray at each meal and let him take as much as he wants without urging him. If just a small quantity of milk is poured into the cup at one time, he will have the satisfaction of finishing it. Then, if he accepts this good-naturedly, the bottle he is least interested in may be omitted, and a few days later a second bottle may be omitted. The weaning may take several weeks. Some time after two years, if not before, the baby usually gives up his last bottle of his own accord.

C. Now Your Baby Is Ready to Control His Bowels.—Just as a baby's body is ready, when he is about a year old, to learn more grown-up ways of eating, he is getting ready for a more grown-up way of eliminating waste materials. He can really be taught how to control his bowels only when his nervous and muscular systems are mature enough. Urging and

hurrying him will only result in a struggle in which he can beat you. Just as you can lead a horse to water but can't make him drink, you can lead your baby to the bathroom but can't make him go unless he is ready to.

It may seem strange to you, but this important business of learning to control his bowels can be left almost entirely to the baby himself. Like so many other things that parents used to consider it their duty to force on children, grown-up toilet habits are things that children learn when they are old enough. All you can do is to help your child when he is ready. Sometimes, if a mother pays no attention to toilet training, the baby between eighteen months and two years old will give her some sign or go to the bathroom himself. A mother may help her baby to learn this a little earlier if she watches for signs of his being ready to go, gives him a little assistance, and does not urge him or get into a fuss about it.

If a baby regularly has a bowel movement after a meal, when he is nine or ten months old the mother may try putting him on the toilet and he will probably go. Even if he seems to be pretty well trained for several months, he may



change after he is a year old. He may refuse to go, and start soiling his panties again. If he is not regular or does not give his mother any signs by grunting, looking at her or clutching his panties, it is better to wait.

Real training in any habit comes when the baby himself takes over the control of the time and place he does a thing. When he is between a year and a year and half old, a baby becomes more aware of his bowel movements. He is able to hold back when he has to go or try hard and push. This is a good time to begin putting him on a toilet. Babies seem to feel most comfortable on a little toilet chair of their own.

Success is more likely to result if the baby is put on the toilet for a few minutes after

his meal or at any other time that he regularly has a movement. The mother might grunt the way he does, or might make any other sound that he makes, to give him the idea, and at the same time use a regular word or expression to suggest what he should do. The little child may be confused if a word or phrase used for going to the toilet is also used for something else; for instance, "number 1" and "number 2," or "duty," or "try hard." Find a word that stands only for the toilet and will be suitable when the child begins to talk himself. For example, you might use the regular terms "make a bowel movement" and "urinate," or "void," or "go to the toilet," or "go to the bathroom." If the baby is ready for a movement, he will have one in about five minutes. It is better to take him off if he begins to fuss earlier than this. Sitting longer is not likely to bring results and may make him dislike the seat. If he has a movement, a little casual praise will show him that his mother is pleased with his new accomplishment. If he sits down but cannot go, he may do it on the floor or in his pants later, when he can relax better. This is the way he has been used to doing it ever since he was

born, so he should not be scolded or blamed for it. Sometimes a baby will cry and fight against being put on the seat, and even if his mother succeeds in making him sit down against his will, he will not be able to relax but will simply become more stubborn. It is better to let him do it his own way and wait a few more weeks. Stewed prunes or prune juice given regularly may help if movements are painful. If the child has persistent constipation, the doctor should be consulted. It is dangerous to give a baby any patent medicines. Suppositories and enemas should not be used in order to establish regular toilet habits without a doctor's advice. They do not teach the infant self-control but, on the contrary, may frighten him badly.

It is natural for the baby, as he becomes aware of his bowel movements, to become interested in his stools. He wants to look at what he has done, is proud of it, and may try to touch them. This may seem odd and disgusting to you, but it is not to the baby, and you can use this normal interest in helping to train him. One advantage of a small toilet chair is that the baby can look at his stool and empty it into the big toilet himself.

If he is given a few moments to look, this may satisfy his curiosity, and in time, of course, he will outgrow this interest. If he should start to play in the stool, just suggest that he empty it out, and help him do so. Then clean him up. If he regularly soils himself in bed, his diapers and pants should be pinned securely. Try not to show any disgust, and don't scold him or make him feel ashamed on any of these occasions. He will outgrow this tendency if you don't pay too much attention to it, but if he is blamed or punished he will be confused. Unpleasantness between a mother and her child over toilet habits can have a very bad effect on their relationship. It is much wiser to be easygoing and friendly and not to show alarm or displeasure. Children love excitement and attention and soon learn how to get it, whether it be by not eating or by not performing on the toilet. If there is a great deal of scolding and insisting, a baby may get to feel like fighting and saying no to everything. If he gets the idea that his mother is very much displeased with him, he will feel guilty and anxious, for he needs her love. He should not be made to feel ashamed of his natural impulses. It takes time

for a baby to learn and he should not be blamed for being unable to grow up all at once. It may comfort you, when training takes a long time, to remember that children will learn some time after two years of age, if not before. If you have made some mistakes, as all mothers do now and then, you can correct them by patience and understanding.

D. Now Your Baby Learns to Stand Up.—For months you have noticed that your baby's legs have been getting stronger, that he likes to push against the side of his crib or carriage with his feet, and that he tries to bounce up and down when he sits on your lap. After he sits up steadily alone, he learns to pull himself up to his feet, hanging on to the side of his play-pen or a piece of furniture or his mother's skirts. Usually this happens in the last months of the first year. A few wiry babies are ready to stand earlier, and some, especially the heavy ones, make no effort until they are more than a year old.

After the baby has learned how to get up, he may not know how to sit down. He may get very tired and cry and need to be helped until he gets the courage to let go and

'bump down. Next he may try to make stepping movements when you hold him. He will not try to stand or walk until his muscles and bones are ready, so it is no use trying to teach him these tricks. Furthermore, you need not fear that he will get bowlegged. If anything is wrong with his feet, your doctor will tell you what to do. Shoes are not necessary for the baby in the house unless it is very cold or the floors are rough.

Sometimes, after the child has learned to pull himself upright, he will use both hands and stand alone for a few seconds. Most babies pull themselves around by holding on to the furniture, and it takes them several weeks or months to learn to walk alone. The baby's size, rate of growth, heredity, general liveliness and self-confidence may make a difference in the age at which he will begin to walk. By the time he is about a year old, he will probably enjoy walking around if someone holds one or both of his hands. This is fun for the baby but back-breaking for the mother, and it is not necessary in learning to walk. The average age at which babies take their first steps alone is about fifteen months. A few learn to walk earlier, and it may take a

healthy, heavy baby or one who has been sick considerably longer.

Around this time, too, babies love to climb steps and will quickly learn, after they have been shown how, to get up and down safely. If you have no stairs in your home, you can make a couple of steps out of boards, or put on overalls or a snow suit and let your baby climb steps outdoors in good weather. This is really exercise; it keeps him busy for a long time and strengthens his leg muscles.

E. Playing Is Learning.—Your busy, active baby learns in two ways: through the steady, oft-repeated experiences of his daily routines, and through his play. From his earliest days he works hard and enthusiastically at learning about his world. "The greatest educator of all time," it has been truly said, "will be the person who shows us the way to conduct children through the pre-school years so that this baby eagerness to learn is maintained."

The baby's eager eyes and fingers explore the shape, size, texture and possibilities of everything he can reach. He finds out many things about the household—how doors and cupboards close, where things go, that chairs are to sit on and

stairs to climb, how covers fit on pans and tops screw on jars, how round things roll or bounce, what practically everything tastes and smells like. At the same time he learns much about what he himself can do and exercises all his muscles. Shoes fascinate him. He likes to pull and tug at his own and some day soon he will learn to take them off himself. One of his father's or mother's old shoes, scrubbed up for him, will interest him for weeks as he tries to pull the laces out and put them in. He learns first how to take things out and only later how to put them back. A desk or dresser drawer or low cupboard shelf of his own filled with old magazines, empty boxes and small objects varied from time to time will give him many happy hours.

Small blocks that he can grasp easily will interest him. When he is a year old or a little older, he may be able to put one on top of another, and he loves to have someone build a tower for him to knock over. He is learning how to let go of things as well as how to hold them, and enjoys a game of throwing things down. He can now roll and even throw a ball. He likes to play with several small objects

at the same time and put them in a container.

When he crawls or cruises about the house, he gets some idea of distance and direction. He comes to understand the meaning of "under," "on top of," "in back of," "in front of," "in" and "out," "here" and "there," "wall" and "corners," "indoors" and "outdoors." In steadying himself as he learns to walk he likes to push and pull things. A small toy on a string or a box, or a push toy of some kind, is useful at this age. A few extra minutes in the tub to splash or play with little cups will help to train the tiny hands to hold and dip and pour.

Although babies at this age do not actually play with other children, they notice them and should have a chance to be with them now and then. They often pat one another's faces, pinch, pull hair and jabber together as they find out what the other youngster is like. Getting together on the floor, they will grab one another's toys. Thus they begin to learn how to live with their equals. They are not yet ready to share or to take turns, and one should be careful not to expect too much of them.

Outdoors the baby eagerly watches people and cars going

by and older children playing, and soon learns to recognize animals, airplanes and other objects. When the baby is able to pull himself up and stand alone, he will enjoy being on his feet near a bench or fence, or climbing steps. In warm weather a trip to the park and a chance to sit on the grass will be fun.

3. WHEN PUZZLING TRAITS DEVELOP

A. When the Baby Gets Into Everything. — When a baby begins to get around, many new problems arise. As long as he "stays put" in his chair or carriage or play-pen, it is easy to select for him the things he may play with and to keep him from getting hurt, or from damaging household objects. But as soon as he can move around by his own efforts, he is bound to get many falls and bumps, to reach for lamps, vases and books, to pull off the tablecloth, open drawers and try to turn on gas jets or water faucets. It is normal for him to be curious and to want to learn about everything, but he needs to be protected from danger and must learn not to touch certain things. It is very puzzling for his parents to know how best to teach him, and it is puzzling for the baby too. Before this his

mother gave him only pleasure and satisfaction. Now she begins to take away some of the things he wants, and she may scold him. His mother begins to wonder how to make him mind, whether spanking will help, and how she is to keep her house halfway tidy without losing her temper.

If you say "no-no" to your big baby, he may think it is just a game and smile or laugh at you, and go right on with what he is doing. Naturally he cannot understand why he may not touch some things, though he may sense your disapproval. Will it help to slap his little hands? Well, fear and pain may check him, but they are poor teachers for anyone, baby or grownup.

Slapping may give the baby the idea that it is bad to use his hands when he needs to use them to learn how to do things. A better way is to take the forbidden article away from the infant or remove him to another spot. Then give him something else to play with. A baby is easily distracted and it is a great help to give him a substitute that you approve of, or to say "do this" instead of "don't do that." In other words, redirect the baby's interest; do not just try to restrain him. Show him what he may do and

put the emphasis on that rather than on what he may not do. If he tries to get into a drawer or to climb up on a shelf, provide him with a low drawer or shelf. Then you can say, "This is mother's drawer, but this is John's drawer; see, you can open it and play with all these things." It will take many lessons like this, repeated week after week, and a lot of patience to teach your baby this way. However, it is a much sounder way for him to learn and in the long run is usually more effective than scoldings or spankings. Your baby will be good-natured and rely on your love this way instead of getting confused, resentful and discontented. Besides, many prohibitions are unnecessary if we consider the baby's needs. Even a very young child understands your tone of voice, and if you treat your baby like a reasonable person, you will be delighted to find how reasonable he can be.

The fewer things you say "no-no" to your baby about, the quicker he will learn the rules. Put your valuable, breakable things out of his reach. Make a tour of your rooms to find the things he should not get hold of. Dresser drawers can be locked or a folded piece of paper or cardboard put in the drawer when it is closed to

wedge it shut tight. A gate at the top of the stairs will protect the baby until he has learned to get up and down safely and can be trusted alone. A housewife is bound to find an untidy house a great trial, but it is inevitable with a young baby playing on the floor. Freedom for the child to learn and an easygoing attitude on the mother's part, so that she can enjoy watching her youngster's growth, are more important than a spick-and-span appearance.

Learning a lesson in his own easy way will be much more effective with a baby than "no-no." For example, to teach him to stay away from a hot stove or radiator, you might let him touch something that is not hot enough to burn him but warm enough to be uncomfortable. Say "hot" when he touches it, and he will soon associate the word with the pain, and will back away cautiously whenever you say "hot."

The best preparation for life that you can give your child is to help him to be independent, to control his own behavior and gradually to develop a sense of judgment. This training starts in infancy, when the baby's own way of doing things, his own inborn wisdom, is respected. Now that he is a year old, he is beginning to be more

independent. He wants to do things himself, such as feeding himself and trying to pull off his shoes. He has his own ideas of what he likes to eat, what he wants to play with and where he wants to go. He is likely to make a big fuss and clamor to assert himself, and to get angry if you do not give him what he wants. These are not bad traits in your baby; they are healthy, normal, useful parts of his growing up. He will learn best when you avail yourself of his cooperation and his eagerness to do things. Wise parents seldom resort to sharp methods of discipline. They understand that the growing child needs different kinds of help at different ages. They neither expect more of him than he can do nor hold him back when he is ready to try something new for himself.

B. If Your Baby Shows Temper. — It must be very annoying to a baby when he cannot reach something attractive that he sees, or when a book or pretty dish that he has found is taken away from him. Often a little child gets angry when he does not know how to do something; maybe he can't get his foot out when it is caught in a chair, or can't get his toy out of a corner, or get the cover off a box. Then he naturally feels frustrated and may cry and

kick. If he is in no danger, let him try to figure it out himself, and just ignore his temper for a little while. If he wants your help, he will yell for it or turn to you, and then you can show him how to do it. If a baby is restrained, he is going to feel angry too. Being taken out of his bath when he is having fun splashing may get him into a real temper so that he will fight and scream and throw himself around. Try giving him a word of warning a few minutes in advance. Then, if you calmly ignore the first signs of temper, he is more likely to get over it by himself. Sometimes you may take things away too quickly or may not have allowed him enough time to know what you want. You can avoid getting his temper up by giving in a little to his wishes; for example, by letting him have a few minutes longer to play in the tub or by suggesting something different to play with.

If the mother speaks crossly to him and yells and slaps him, he will feel cross too and may soon imitate her and yell angrily. If the baby gets help when he needs it and is not given too many "noes," his rage will last only a minute and in general he will be a good-natured, sunny child.

C. If Your Baby Has Trouble Sleeping. — Most babies be-

tween nine and eighteen months begin at some time during this period to have difficulty in getting to sleep or else begin to wake up during the night. It is as if they had to learn a new way of settling down to sleep. Sometimes it seems as if they dreamt at night, for they suddenly wake up crying, perhaps a number of times a night. Many babies who happily went to sleep by themselves before, now cry for their mothers at bedtime. Our long-range job is to help our children to learn to go to sleep quietly by themselves soon after they are put to bed. Babies have many ups and downs as they grow. We must expect changes from time to time and deal with them as wisely as possible. See that your child does not get too excited playing before he goes to bed. It may help to check over his clothing and covers to be sure he is comfortable. If he does not settle down after fifteen or twenty minutes and cries hard, it is best to go to him and comfort him. Sometimes just seeing the mother or hearing her voice will reassure the baby; or leaving the door open or a light on will help. If this doesn't satisfy him, the mother may need to sit quietly beside him until he falls asleep. She need not be afraid she is spoiling her baby by this atten-

tion. When he feels lonely, restless or frightened, he should be comforted.

If your baby is teething, he may wake up. This, too, is a time when he needs to be soothed. Sometimes a few minutes of mothering will quiet him. Often only a drink of water or milk will induce sleep. This is not likely to start a habit, for when the discomfort is gone, the baby will sleep through the night again. Frequently, when babies are old enough to walk, they learn to climb out of their cribs. They may wake up during the night, climb out and try to find their parents. A child should never be tied in his bed nor locked in the bedroom in an effort to solve the problem. Instead, his parents should be patient and try to find out why he keeps on getting up. Sometimes he just wants to practice his new accomplishment and will be better satisfied if he is allowed to climb in and out as often as he likes during the day or before it is time for him to go to sleep. Perhaps, since the child needs less sleep as he grows older, he will fall asleep more easily if he is permitted to stay up half an hour later. Or a child may be restless at night after the family has moved to a new house or the bed or room has been changed. In such cases it is best

for the mother to go in to the child and give him extra comforting and reassurance until he gets used to the new place.

D. If Your Baby Is Afraid.—You will remember that your little baby was easily frightened by unfamiliar loud noises and sudden movements. Your big baby may be scared by the same sort of thing. Maybe the strange noise of the vacuum cleaner terrifies him, or the sound of running water in the bathtub or of the toilet flushing, or he may seem afraid of his bath because he has been lowered into it so quickly that he fears he is being dropped. It will help your baby to overcome his fears if you comfort and reassure him as soon as you notice any fear reactions. If you can find out the cause, it is wise to help him to become familiar with the thing that frightened him and let him see for himself how harmless it is. If a child's cry of terror is ignored and he is left alone, he may feel frightened and may become anxious and timid about many things.

When they are about a year old, many little children become shy and fearful of strangers. First visits to the barber or to a doctor he has not seen before can be terrifying to a youngster. It is important to

tell the baby about the visit beforehand and to talk to him about what is happening. The mother's presence and voice will reassure him. If a child wakes up frightened by a whistle or fire engine, the mother might imitate it humorously, talk to him about it and comfort him until he falls asleep again. While some fears are natural for little children, wise handling of the first expressions of timidity and fright will help the child to feel more secure in time.

Remember, too, that babies learn some of their fears from those around them. Too often, when a child falls, his mother screams before she knows whether he is hurt. Sometimes the sudden excitement of adults over the fall is more frightening to the baby than the fall itself. At other times babies seem to sense the fact that adults are afraid to "catch" the same fear themselves.

E. If Your Baby Plays with His Genitals.—Some day in his bath or on the toilet, or while you are dressing him, you may notice your baby fingering his sex organs just as he explores his toes and his tummy. It is natural for a baby to want to touch things and he may seem to enjoy touching himself. If the mother will just pay no at-

tention and go on with the bath or whatever else she is doing, the child will soon get interested in something else. If he is scolded, slapped or punished, he will be confused and may get an unhealthy idea that his natural impulses are bad. Children learn privacy, decency and modesty best from their parents' example as they grow. They slowly lose their original baby interest in the different parts of the body. Little babies often play with their genitals, sometimes about the period of weaning, and so do older children. If the baby is cared for intelligently, this habit will soon be forgotten and disappear of itself.

F. If Your Baby Continues to Suck His Thumb. — Some mothers become worried when their babies keep on sucking their thumbs. Remember that in the little baby (see page 64) this is quite common. If he has had plenty of chance to suck at his mother's breast or at the bottle, he often stops most of his thumb-sucking when he is about a year old. If he continues after that age, it is probably because he is trying to

comfort himself. This is usually the case when he is tired or trying to get to sleep. He may not be feeling just right or perhaps hasn't enough else to interest him. Babies, like grown-ups, have bad days when things go wrong. If your baby pops his thumb into his mouth once in a while for a few minutes, it is nothing to be concerned about. If he does it often, you might try to think over his day and ask yourself what you can do to make him feel more satisfied. Has he interesting toys? Is he outdoors enough? Does he get a chance to play with other children his own age? Is he being told "no" too much? Is he getting a fair amount of mothering? If there is a new baby in the family, the older one needs more loving instead of less. Maybe your baby will be happier if you make a few changes in his life and comfort him more. Trying to restrain his arm, or punishing him for sucking his thumb, will not help the year-old baby any more than it did the little one. With sympathetic understanding and a happy life, he will probably give up the habit in time.

Chapter V

THE TODDLER: FROM FIFTEEN MONTHS TO TWO YEARS

1. THE BABY'S GROWTH IN INDEPENDENCE

A. Walking, Climbing, Running.—Now your baby is at the toddling age. Week by week he is learning to walk more steadily. His most absorbing occupation is running about. Indoors and out he is almost constantly on the go. His energy is amazing and the grownups may feel tired just watching him. He is likely to move furniture and may pull a chair down on himself or tip over a table in his effort to get hold of something he wants. He climbs like a little monkey and needs to be watched if the window sills are low or if there are breakable or dangerous things on the table. He likes to push and pull and empty everything, even waste baskets and garbage cans. He delights in carrying things from place to place and holding something in each hand. So strong is his urge to stand and move about that at mealtimes he may prefer to eat standing rather than sitting and may want to run around between courses.

Outdoors, when he is just

learning to walk, he may cling to his mother's hand even though he refuses it while indoors. But soon he will want to be off on his own. He explores all the bypaths, runs into doorways, climbs steps, darts into the street. He loves a game of being chased or running after someone. He practices all kinds of movements—stopping, starting, squatting, leaning down to look between his legs, walking backwards and sideways, turning around, running. He would rather push his carriage than ride in it, although he may enjoy a ride when he is told where he is going. If his mother has errands to do and her time is limited, she should put him in his carriage rather than try to hurry him or urge him to walk in a straight line. He finds so much to investigate that it may take him an hour to walk a block or two. It is only too easy for a mother to start a never-ending "hurry up, hurry up" that doesn't really help. The child may come more willingly if some goal is suggested — to call on a playmate, to get supper or to fetch

a toy. A small harness with reins will help to keep the toddler in tow in the stores or on busy streets. He is happiest when he can keep moving, and is not likely to let his mother sit undisturbed for long.

B. New Skills with His Hands. — Although the baby's chief development is in the larger muscles for walking, pulling and pushing, his fingers also get more skillful all the time. He can hand his mother a dish at the end of his meal, mop up a puddle, shut a drawer and perhaps turn a doorknob. He learns to take off his clothes, beginning with cap, mittens and shoes. By the time he is two years old, he may be able to open cabinet doors, turn on the radio, take things out of drawers, build a tower of three or four blocks or line them up in a row, string large beads and blow soap bubbles from a pipe. A sandbox or small pan of water will keep him busy for long periods as he empties and fills dishes and boxes.

C. Expressing Himself and Talking. — A year-old baby may have learned to say a few simple words. By the time he is two years old, he may have learned anywhere from a dozen to several hundred words and may be able to speak short sentences.

But many perfectly normal children of that age cannot say any words clearly. Slowness in learning to talk, however, does not mean that a baby is backward. Whether he uses words or not, your child will express himself more and more clearly as he grows. He may grunt or make a clucking sound to ask for particular things, and may point and gesture to make his meaning plain. He will give many greetings and will wave bye-bye many times a day. He will talk a lot of jargon that will often sound as if he were carrying on a conversation. He will play with sounds and may hum or singsong to himself while learning words.

Just as talking sensibly to a baby from the very start helps him to understand language, so conversation, simple explanations and many repetitions will help a toddler to learn words. Long before he can say them, a baby knows the names of toys, articles of clothing, the parts of his body, household objects and things he sees outdoors. He will go after or point to things when asked. Often he will make a questioning sound as he points and will be satisfied only when the name is repeated to him over and over again. The frequent repetition of sounds enables him to tell them apart.

Sometimes he asks in order to make sure that the word he is thinking of is the right one, or he may ask just to make conversation. By saying "You tell me" you may satisfy him occasionally. Simple picture books containing pictures of real things that are seen every day play a valuable part in teaching him to recognize and name objects. He learns by doing things over and over.

It will be a help to your baby, in learning to speak correctly and in preventing conditions like lisping, if he does not hear any baby talk from you. Speak to him as you do to adults. He will learn to say words correctly by his own efforts as his ears and tongue become more skillful. Consequently, it is not necessary to correct his pronunciation all the time. If you call attention to a lisp or make fun of his mistakes, you will only confuse him and make him self-conscious.

2. MORE GROWN-UP ROUTINES FOR THE DAY

A. Meals. — Now your baby can walk to his meals and climb into a chair himself. He may try to drape his bib around his neck, and pulling it off at the end of the meal is often a sign that he is through. He can

handle his cup and spoon pretty well and should be allowed and encouraged to feed himself most of the time, although he may need a little help in finishing a meal. He will eat better if his mother does not pay much attention to him after she has served him, and he may even tell her to go away. He should get only one dish at a time until he has finished.

During this age period the baby gains weight less rapidly and eats less than formerly. His appetite often varies from one meal to the next. Many a mother worries because her baby seems to eat too little. Regular examinations by a doctor will decide whether there is any physical cause for what you think is a small appetite. If your child is generally in good condition, you can trust his appetite as to how much food he needs. Do not urge him to eat the last spoonful in the dish when he is already satisfied. Serve a little less next time and give him a second helping when he is hungry. A mother can help to improve her child's appetite by making mealtimes pleasant, by not scolding, urging or nagging when the baby is not so hungry as she would like him to be. Most grownups expect children to eat a great

deal more than they are able to. Because the adult standards are wrong, parents begin to worry and concentrate on how much the child eats rather than how much he enjoys his food. As long as children are offered a wholesome variety of vegetables, fruits, eggs, meat and milk, they can usually be trusted to take what they need. A healthy child will not starve himself.

Nearly all youngsters get sudden likes and dislikes for certain foods. Vegetables may be skipped occasionally without any harm if other food is taken. If the dessert is wholesome and the child insists on eating it first some days, there is no reason why he should not be allowed to have an ordinary portion and eat the other foods later. If the baby goes on a jag and wants only certain things, such as eggs, cheese or some particular fruit, it will not hurt to give him as much as he wants, except that sweets should never be given. Many children develop very peculiar ideas about eating. Some refuse all cooked foods, mushy foods or foods of a certain color. If the child is let alone, most of these fancies pass away. If he has not learned to eat coarsely divided foods by the time he is a year old, it may take him

many months to learn, and the change will need to be made gradually.

In case your baby gets some odd food fancies or refuses to eat well, some of the following suggestions may help. First, a few don'ts: Don't fuss, don't force or scold or nag the child for not eating well. Try to make mealtimes more fun for him. Serve his favorite foods often. Give him small portions so that he will be likely to ask for more rather than to refuse part of the dish. If he refuses the first dish on the menu, take it away after a few minutes and offer him the rest of the meal. Try new ways of fixing foods, and serve them attractively. A different cup, a colored dish, a pretty oilcloth place mat for his table, may please your child. When he is about two, or as soon as he is able to do so, let him set his own table. Invite him to get his food out of the icebox. He will have fun scrubbing his potato and putting it in the oven. Ask someone else to give him a meal once in a while, and arrange for him to eat with other children occasionally. If your child drinks too much milk at meals, try giving him less and he may have more room for the rest of his meal. Let him have a reasonable time to finish his meal.

After about twenty minutes of not eating but only playing with his food, quietly take it away with some friendly remark like "All finished?" or "I guess you're not very hungry today." Then try giving him nothing to eat between meals, but if he should get very hungry, you might give him his next regular meal a little early. Sometimes a child with a small appetite eats better with four small meals a day than with three large ones.

If your child eats fairly well and wants something between meals, fruit juice, a piece of apple or raw carrot, a small cracker or piece of toast will satisfy him and not be so likely to affect his appetite for the next meal as candy or other sweets. Many dentists are of the opinion that candy should not be given to children, especially little ones who cannot brush their teeth. Mothers often find that once their children have started eating candy, they like it so much that they cry and tease for it much of the time. Wise mothers have decided that it is better not to give candy to their babies except on special occasions.

A good diet for the child fifteen months of age to two years and more includes some of each of the following groups of

foods: (1) milk, cheese; (2) oranges, grapefruit, tomatoes; (3) leafy green or yellow vegetables; (4) potatoes and other vegetables and fruits; (5) meat, fish, poultry and eggs; (6) bread and cereals; (7) margarine or butter. The amount of each that your baby will eat is going to depend on his tastes and appetite, but the list may be of some use to you in checking on the kinds you are offering your baby and may suggest some new things. These are the same foods that are needed by the other members of the family. Plan your family meals so that it is easy to give your baby the right food.

A GOOD MENU FOR ALL THE
FAMILY

Morning

For the Family

Grapefruit juice

Wholewheat cereal with fresh
milk or evaporated milk

Wholewheat or enriched toast

Margarine or butter

Milk, coffee

For the Child

Grapefruit juice

Wholewheat cereal with milk

Wholewheat or enriched toast

Margarine or butter

Milk.

The Toddler: From Fifteen Months to Two Years

Noon

For the Family

Scrambled eggs
Raw vegetable salad
Bread and margarine or butter
Fruit cup
Milk

For the Child

Scrambled eggs
Lettuce, spinach or escarole
Bread and margarine or butter
Fruit cup
Milk

Evening

For the Family

Meat loaf with gravy
Boiled potato
Carrots
Bread and margarine or butter
Apple pie
Beverage

For the Child

Meat loaf
Boiled potato
Carrots
Bread and margarine or butter
Apple sauce
Milk

B. Baths and Clothes.—The runabout baby needs a bath at



the end of the day. The tub bath may be given either before or after supper. Some babies are more wide-awake after a bath, while others are relaxed and go to sleep more quickly if the bath comes at bedtime. Try both ways to find out which suits your baby and your convenience better.

Your baby will play with the washcloth and soap and may try to suck or eat them. Soon he will try to wash himself and help to clean out the tub. A small cup and spoon, clothespins or toys that float will be fun and he will enjoy playing in the water ten or fifteen minutes after being washed. Sometimes a child will take a sudden dislike to the bath or be afraid of it. In such cases it is better not to use force but to give the baby a sponge bath for a few days. Try to figure out what made him afraid. Then try the tub bath again and offer the child a new cup or toy or soap bubble pipe to get him interested in playing in the water.

Ordinarily a healthy baby's teeth need no special care before he is two years old, when semi-annual visits to the dentist should begin, not for special care, but to get the baby used to the dentist. A diet that gives him an opportunity to chew on hard foods like toast,

raw vegetables such as carrots and celery, and coarsely divided foods, is good for the baby's teeth. Should a greenish film or black spots develop, wash the teeth with a clean cloth and a little baking soda. When the child is about two years old and begins to imitate everything the grownups do, he will want to brush his own teeth and may then be given a little brush of his own.

Children at this age begin to take part in dressing themselves, but your toddler may be so active that you have a hard time holding him still long enough to dress him. A small toy may keep him quiet while you put on his socks and shoes.

Overalls, both indoors and out, will help to protect little legs from scratches and bruises. In hot weather, cotton suits or dresses and sun suits will keep the toddler comfortable. When the baby begins to walk, he needs shoes with firm soles. The sole of the shoe should be shaped like the baby's foot, with a straight line on the inside, and without heels. The shoe should fit snugly at the heel but have roomy toes that are long enough, wide enough and high enough so that they will not rub or crowd the toes. Check the fit of your baby's shoes often and carefully. New

shoes should be about half an inch longer than his feet and at least a quarter of an inch wider at the sides. When you take the shoes off at night, examine the child's feet to see whether there are any red or rough spots where the shoe has rubbed. Most youngsters outgrow their shoes in about three months, before the shoes are worn out. Buying a pair of shoes every two or three months is expensive, but is necessary to keep the baby's growing feet in good condition. Only your doctor can advise you whether the baby needs corrective shoes. Many healthy children look a little bow-legged or pigeon-toed. If these conditions are within normal limits, they will disappear as the child gets older.

C. Naps and Bedtime. — A midday nap is still needed and is usually welcomed by the toddler, for he works so hard running and playing. A long afternoon nap may cut down the amount of sleep at night; a short one will mean an earlier bedtime. Fussy children are often tired without knowing it themselves. They will be rested by looking at pictures or playing with something while they are stretched out on a rug or are sitting down. If your baby cannot get to sleep at nap time,

a quiet rest alone in his crib playing with toys will refresh him. A daytime nap or rest time is a good routine to continue until your child is ready for school.

Sleep disturbances frequently develop in the second year. Even a baby who has been accustomed to go to sleep by himself in a darkened room with the door closed may now demand attention at night. This period can be very trying for the parents, and it may be a comfort to know that many children go through this stage and eventually learn to go to sleep by themselves. The baby may talk to himself or play in his crib for about an hour before he falls asleep, or he may call his mother and want her to sit beside him or sing to him. If the child is talking, he may ask for a drink or a handkerchief or want to go to the toilet. After you have tried leaving him alone for fifteen minutes or so to give him a chance to settle down by himself, do not hesitate to go to your baby and give him a little extra mothering if he cries hard. Sometimes delaying his bedtime half an hour, reading or singing to him before he goes to bed, or giving him a favorite toy to take to bed with him, will help. In other cases the baby will get to

sleep more quickly if his father or some other member of the family puts him to bed. If your baby still wants a bottle at bedtime, it is wise to give it to him willingly. It is no disgrace for a two-year-old to want his bottle.

3. BLADDER CONTROL

When your baby is about fifteen months of age, he will begin to control his bowels and make his bowel movements when he is seated on the toilet. After that he is ready to control his urine. A baby does this naturally when his bladder develops enough to hold the urine for a considerable length of time and when he is able to take responsibility for controlling himself. He usually begins to keep dry during the day. This change occurs in the latter part of his second year, so his mother does not have to do much "training" until he is ready for this step.

Some time after your baby is able to walk steadily, around fifteen or eighteen months, you will find him dry at the end of an hour and a half or two hours, whether he has been playing outdoors or having a nap. This is a sign that his bladder is now large enough to cooperate. If you put him on the toilet, he will naturally want to go, and if you praise

him a little when he succeeds, he may soon get the idea. If he fusses or refuses to go after a day or two, he may not be quite ready to control himself. In such cases it is a good idea to wait a while longer. In any event you will find the baby dry only occasionally in the beginning. It will take him some time to learn. If he cries and you insist, he may get stubborn about the whole idea, and the training may take that much longer.

At first the child does not know when he has to go and therefore cannot tell his mother in advance. Later he may pull at his pants or use some gesture or expression *after* he has wet his pants or made a puddle. The mother should not feel that he is naughty or uncooperative when this happens. When a baby is aware that he is wet, he has made real progress. Meanwhile, he will enjoy mopping up the puddle and may learn to bring a cloth and put it away afterwards. If he is scolded or a fuss is made about a puddle, he will quickly learn to get unnecessary attention this way. It is better to help him to clean it up, to praise him when he succeeds on the toilet, and to ignore accidents; or the mother might tell her baby calmly that soon he will

be big enough to wait until he gets to the bathroom.

By the time he is two years old, the child will probably be able to hold his urine until he gets on the toilet, to tell his mother that he has to go, or to walk to the bathroom himself. Not infrequently he may seem to learn this lesson for a while and then forget it. Accidents will happen long after the child has learned how to keep dry, especially when he is busy playing or gets excited. A little child cannot be expected to remember and tell his mother every time. Until he is at least three or four years old, the mother should do his remembering for him, and should either ask him whether he has to go or just lead him to the bathroom at fairly regular intervals. In time the child will be quite accurate in answering whether he needs to go, but often the mother's question will suggest it and a few minutes later he will feel the impulse.

Sometimes little children get so used to one toilet that they find it impossible to use a strange one. For this reason it is a good idea occasionally to help the child to use the big toilet instead of putting him on his small seat.

Learning to control himself at night is something new and

different from training during the day. This usually occurs only after daytime accidents no longer happen. Occasionally a baby will stay dry all night at an early age, but night wetting generally continues until the second year or later. The mother may be able to help the baby to learn control by removing his diapers and putting on training pants at nap-time, and by telling him that he is now big enough to keep his bed dry. She should give him a gentle word of praise when he succeeds. If your child is not ready for this step yet, merely assure him that he will soon be old enough and put it off a few more weeks. After he learns to keep his bed dry during his nap, the same method may be tried at night. It may help to pick the baby up sometime during the evening and take him to the bathroom. As he grows, he will be able to control himself for longer periods at night. Some children may be upset by being awakened to urinate and may have difficulty in getting back to sleep. In such cases it is better not to disturb them. Some children will awaken by themselves and say they want to urinate. Study your own particular child and see what method helps him best to learn self-control.

Scoldings and punishment are of no value in teaching babies to control their bladder or bowels. They merely confuse and upset the child and make it harder for him to grow up. A struggle over the toilet is likely to make him fight against the idea and become stubborn and cross. We do not expect babies to be able to dress themselves before they are two years old because their tiny fingers have not yet developed the necessary skill. We cannot expect them to learn toilet habits completely much before the age of two either, because they just aren't old enough. Some children are ready to be taught these habits sooner than others. If the neighbor's baby is dry months before yours, remember no two children are exactly alike, and it does not mean that her child is more intelligent than yours.

Whenever the toddler is sick or upset by some new experience, such as moving to a different apartment, going on a trip or getting a new baby brother or sister, he may show that he is disturbed by suddenly losing all the toilet control he has learned. Then the mother will find it best to be understanding and to wait a few weeks before expecting

him to be able to restrain himself.

4. LESSONS IN BEHAVING

The two-year-old toddler is no longer a baby, but he is still a very young child, immature in many ways. At times he appears to be quite grown-up because he understands so much and has learned to do so many new things. However, he still has a great deal to learn and we should not expect too much of him at first. A healthy, active, curious, tireless, into-everything youngster can wear his mother out before the day is over, and she may find it very hard to keep calm and patient. Taking care of the toddler is more difficult and puzzling in some ways than taking care of the little baby, but also more interesting. We must try to understand our children if we wish to guide them wisely and enjoy their liveliness, their eagerness to learn and their wonderful enthusiasm.

A. Fitting into Family Life.

—As the toddler runs about, explores things and watches other people, he learns a lot about his family and the way the household runs. The busy mother may often wish she could shut him in a playroom or in a fenced-in yard until she gets her work done. Some children, to be sure, are willing to play in

a room by themselves for a while, but most of them want to be with the rest of the family and to take part in what is going on. They long to do things and to be a part of the activities around them. This is their way of practicing for grown-up life. It is more important at this stage for children to be happy, lively, eager to learn and self-reliant than it is for their mothers to have time to keep the house spotless or to enjoy activities outside the home. With patience and imagination in thinking up ways for her baby to join the family in doing things, a mother can provide many happy hours for her little child and at the same time help him to learn many useful things.

The household jobs that grownups find tiresome seem wonderful to a little child. He likes to help with the dusting and sweeping, to carry clothes to the washtub, to get his father's slippers or pipe for him, to put the mail on the table. He notices where things are kept, will put the groceries in the right place, get his oranges or bottle of fish liver oil out of the icebox, help to clear or set the table, and pass ash trays. At first he is better at pulling things down, such as the towels in the bathroom, or at empty-

ing things out, than he is at putting them back. He needs a great deal of practice before he can hang up his coat and cap, but if his mother sees to it that there are low hooks, or that there is a low drawer he can easily open, and goes with him regularly to get or to put away his things, he will begin to be neat and orderly. The little child's eagerness to help will take much more of his mother's time than if she worked alone, but allowing him to help for a few minutes will often satisfy him and will make him a willing partner later, when he has regular chores to do.

The baby at this age is so active and curious that his mother has to be constantly on guard to protect him from danger. She must keep out of his reach anything made of glass that he might break, as well as knives, scissors, needles and war trophies. Medicines, poisons, cleaning materials and sharp tools should be kept in locked cupboards or on high shelves that he cannot reach. If he is left alone to play in his room, the electric outlets within his reach should be covered with adhesive tape in order that there may be no danger of his inserting some metal object and getting a shock. Windows should have bars, and

screens should be securely fastened, so that if he should climb on the window sill, he cannot fall out. A young child can climb from toilet to wash-bowl and get into the medicine cabinet, or pull open drawers to stand on and wreck his mother's powders and creams. Little by little the baby can be taught to be careful and not to touch things that belong to other members of the family, but until he is considerably older, it is his mother's duty to think for him and prevent accidents.

When he is about a year and a half old, a baby begins to imitate other children and also his elders. He wants to do things the way grownups do. This desire to imitate others spurs him on to learn to go to the bathroom, brush his teeth, wash his hands, hang up his clothes, put his toys away and dress and undress himself. The child can learn good manners in the same way, through watching and imitating. If he hears adults say "please" and "thank you" to one another and to him, he will learn these words along with others he picks up. Similarly, he will try to imitate his parents' table manners as soon as he is old enough. In the same natural, easy way a child learns from his family habits of cheer-

fulness, willingness, helpfulness, satisfaction in performing tasks well, courtesy and kindness. Of course, a child of two has not lived long enough to learn all these grown-up habits, but he starts to learn them bit by bit and his family is often surprised to see how much he has noticed and imitated of his own accord.

During this period a baby is likely to become especially fond of his father, to want him to play with him when he comes home, to follow him around the house and to hang on his arm. A walk with Daddy is a special treat. If he is handy at fixing things, the youngster will enjoy watching him, handing him tools and being allowed to do what he does. Children of any age need a father (or someone to act like a father) to love and to love them. The little boy begins to imitate and pattern himself after his father and may copy his gestures. In a wordless way he learns from his father how a man behaves. A little girl wants a father to love, and it is from him that she gets her first impressions of how strong men are and how they take care of their families. A child learns to love both his father and his mother without preferring one parent to the other.

If the father is away from home, the wise mother will seek every opportunity for her child to enjoy the companionship of men. A grandfather, uncle or family friends may be invited to visit or asked to take the child for walks. An older boy may be found to take care of the child at times. The mother's dealings with the grocer, mailman and delivery boy and her chats with the neighbors will give the child friendly acquaintanceship with men. While the father is away, the mother can help to keep the baby from forgetting him by talking about him, saying good night to his picture, showing the child the father's clothes, keeping some of his things around, reading messages in his letters aloud, allowing the child to open packages from Daddy, and talking about the things they will do together when he comes back. Even an absent father should be an important part of family life for the baby.

Everything the mother does is important and interesting to her baby. He wants to be near her most of the time and to take part in what she is doing. While he grows more independent about doing things himself and may try to run away outdoors, he needs to



know that his mother is near him and that he can always count on her to give him a great deal of her attention.

If the mother has a relative, friend or housekeeper with whom she sometimes leaves her

child, or if she decides to take him to a nursery or has to leave him for a few days or a longer period, she should make every effort to get the child used to her absence gradually. He will be more willing to stay with

others if he has had a chance to get acquainted with them while his mother was present. If she begins by staying away only a short time at first, say half an hour, the child is less likely to be frightened and unhappy without her. In this, as in other situations, it is wise to tell little children what to expect and not to slip away when they are not looking. Telling the youngster where his mother is going, that she will be back soon, or in time for dinner, or after his nap, will often reconcile him to her departure. If the child during his babyhood has felt secure and loved, has learned to trust adults, has been held and played with and occasionally bathed and fed by other people, he is not likely to be bothered by his mother's absence. It is good for him to learn to be separated from his mother at times. But a sudden separation that takes him by surprise may be a great shock to a little child and should be avoided whenever possible.

If someone else takes care of your child for you, it is important to get a person who has in general the same ideas you have about handling children, or who is willing to learn your ways. It is very important that the person you engage be a healthy, happy person. If she is

not willing to submit to a medical examination, including a chest X-ray, do not hire her. It is your responsibility to safeguard your child's health.

When a baby brother or sister arrives in the family, it is normal for the older child to feel jealous. Up to that time he has been the center of the home. He has received all the love and attention of his parents and visitors. Suddenly he has to take second place, or at least to share other people's attention with the new baby. He will need to become accustomed to this state of affairs and not feel hurt or resentful. When parents understand this, they can do much to help an older child to feel that he is loved as much as ever and to teach him to accept his little brother or sister.

All children feel some jealousy of the new baby but some show it more than others. If the older child tries to hurt the infant, everyone realizes he is jealous. But children at times show their jealousy in less direct ways. One child may politely suggest that his mother "take the baby back to the hospital now." Or he may want to be treated the same way the baby is, to be fed from a bottle, held and carried like the baby. He may start soiling and wet-

ting himself again even though he was well trained before. Sometimes a child who is suffering from jealousy loses his appetite, cries a great deal, hangs on to his mother all the time or loses interest in playing as he did before. His anxiety, in some cases, may show itself in fits of temper.

The trouble with the jealous child is that he feels he isn't loved. The best way his parents can help him to overcome this feeling is to give him more love, to show him that he is as important to them as the new baby. When the mother comes home from the hospital, the family should arrange to let the older child first have the fun of having his mother back and having her all to himself for a little while before he sees the new baby. When the father comes home from work, let him spend some time playing with his big baby before he rushes in to see the new one. If visitors bring presents to the newcomer, it is a good idea for the mother to have some ten-cent store presents on hand to give the older child so he won't feel neglected. The father and mother should try not to talk to or about the new baby all the time.

It is a very good idea to tell the older child in advance about the new baby who is

coming, even if he is under two years of age. A few weeks ahead of time, try to explain things in a way that he can understand. If changes are to be made in the child's routine, make them beforehand too. If he is to sleep in a different bed or in a different room, is to be taken care of by some strange person while his mother is in the hospital, or is to go to a nursery school, try to get him thoroughly used to the new situation before his baby brother or sister arrives.

Show your older child you love him in ways he will understand. Set aside some time during the day when you pay attention to him only; read or play with him. If he wants to be treated like a baby, treat him that way for a while; tell him he is your baby too, and he will get over this phase more quickly. At the same time help him to take pride in being different from the baby; admire him for all the things he can do that the baby cannot. Above all, do not try to shame him, to scold, threaten or punish him for being jealous. Be patient and affectionate with him. Eventually your love will help him to conquer his jealousy. Later the two children will learn to play together, to share things and have fun with each other. Learning to get

along with his brothers and sisters is an aid in helping the child to get along with other people and is one of the invaluable lessons of family life.

B. Learning from Playmates and Playthings.—Sometimes at the age of two, but oftener when they are nearly three, little children begin to enjoy playing with others of their own age. They learn from one another even when they do not actually play together very much and even though they sometimes hit and scratch, pinch, and pull one another's hair. Laughing together, chasing and pushing one another, snatching toys are all ways of getting acquainted. Such young children are naturally very possessive about their toys. They cling tenaciously to their belongings, and having a thing in your own hands means that

it belongs to you. "It's mine" is one of their favorite utterances, and "my" and "mine" are perhaps the most important words in their vocabularies.

Mothers can help by having duplicate toys available when several children play together, by letting children settle their own difficulties as much as possible, by keeping a watchful but apparently casual eye on them to prevent any real hurts. Little tussles, bumps and scratches are a necessary part of group living at first.

Children are not born prepared to share, take turns, be unselfish or give up cherished belongings. They need to have their strong possessive feelings respected by the adults in charge of them before their generosity can become real. Children need careful supervision with a minimum amount of interference so that they may feel safe, contented and yet in charge of their own affairs. Under such conditions they play most happily and learn most from one another. Constant nagging and interference, telling children to do this or that, will make them restless, fretful and unhappy.

Play is a necessity for the healthy growth of every child. It is his way of life and through it his learning goes on without his being aware of it. By using



his hands and feet to try out his own ideas, by putting things together and taking them apart, by imitation, experimentation and repetition, he is constantly learning. He needs a variety of toys that are sturdy, scaled to his strength and size, movable and usable on his own terms. Such things as push and pull toys, steps and ramps, sand-boxes and wading pools, small ladders, boards, blocks, saw-horses, balls, low slides, swings and appropriate climbing apparatus should be provided. Special play areas exclusively for the use of these toddlers, such as are set up in some of our New York City public playgrounds, are of great value to these youngsters. A rocking horse, kiddie car, wagon or toy animal that he can sit on and push with his feet is fine for this age. Chairs, boxes and baskets can be pushed, dragged or



pulled around in the house. A doll's bed or a homemade cradle made out of a box with a rag doll or even a rolled-up towel encourages the child to play house.

Playing with water is one of the joys of childhood. Small unbreakable cups, a pitcher and a pan, in the kitchen or bathroom, where the floor can easily be wiped up, will give the toddler happy practice in learning how to pour and dip. If he is allowed to dip the mop into the bucket of water or scrub the floor with a brush, he will almost tremble with excitement and pleasure. A footstool or step in front of the washbasin will encourage him to learn to wash his hands. A little girl will wash her dolls'



clothes and enjoy practicing this delightful job for many minutes at a time.

The young child loves anything that moves or turns and that he can take apart or put together, and will enjoy trying to turn the egg-beater, use a screwdriver or pliers, or screw caps on jars. A toy telephone, an iron, a small broom or a set of dishes gives him enjoyment. With a wagon or box he may haul things around like a delivery man. Both little boys and girls like to push a doll buggy. Any toy to lift or carry, to push or pull, will amuse them and give them practice and exercise. At this age, however, a child does not play with any one toy long but changes from one to another every few minutes. Outdoors he will be interested in running, jumping and climbing and will be active most of the time. A walk to see buses, trolleys or a steam shovel at work will delight him, and he likes to watch workmen on the street. Nearly all children are fascinated by animals and usually are not afraid of them.

Most children are very fond of soft cloth animals or teddy bears and will try to feed them, put them to bed, wash them and take them for rides. Large wooden beads to string on a heavy cord, balls, a bell or drum, a toy bank with pennies

or buttons to rattle, simple picture puzzles consisting of two or three pieces, beanbags, a necklace of large buttons or painted spools, empty spice boxes, paper milk containers, spoons and other kitchen utensils can be had at little cost and will be used in many different ways by the child. A package of modeling clay is fine for a little child to play with; he can taste it without danger, pound and rub it, break off pieces and have all the fun of playing with dirt safely. If his mother from time to time suggests a new game, such as playing with blocks or pushing his car around, she will keep the child interested and give him variety. It may be that the home has no special play space for the children. In that case, one should be provided for them by fencing off a corner somewhere with chairs or boxes. It will be easier to keep the rest of the house tidy and the child contented if he has some place of his own where he may do what he likes. Even in a small New York apartment, a special place can be set apart for a small child and is well worth the trouble.

Babies differ in their interest in books, pictures and music but every child should have a chance to enjoy them. Old magazines with colored pictures are excellent, for it does not matter

if they get torn and they often show objects the baby will recognize. Small cloth or heavy cardboard books, which can be made at home, with simple pictures one to a page, may interest him. He will enjoy rhymes and brief stories about little children and animals and things he knows. For short periods he may actually listen to music and may wave his arms and dance to the rhythm.

C. How Parents Can Teach Their Children. — All of us want our children to be happy, agreeable to live with and willing to do what is asked of them. We also want them to develop self-control and good sense so that they can later take care of themselves and be good members of society. The parents are the first teachers, and some of the fundamental lessons of life are learned in the home before the child goes to school. How can we best help our little children to learn these lessons?

One of the first and most important ways in which we can become wise parents is by learning to understand our children, by really watching them. Start by figuring out why your child does certain things. Children always have their reasons for what they do and the way they feel, although they themselves may not be able to tell what those reasons are. Try

to put yourself in the child's place. Sit back and think over what you have done and how he reacted to it. Then try out some different way of doing things. What worked with the neighbor's child may not work with yours; what worked with your first baby may not work with the second one. Methods of dealing with children have to be tailored to fit the individual child and changed as he grows.

Of course parents are human, just as children are, and we cannot always succeed in being as patient and wise as we should like to be. The best parents sometimes get cross with their children. Whenever your child gets on your nerves, stop a minute and see what he is trying to do. Maybe you can figure out a way to keep him happy. Success in bringing up children requires neither perfect children nor perfect parents, but a relationship of mutual confidence and affection that enables the children to grow and learn happily.

As a rule, children can be helped to learn and behave reasonably well without severe disciplinary measures. If your child trusts and loves you, he will have the best foundation for self-control and obedience. Fear and force may make your baby stop doing one particular

thing but they will not teach him to do the things he should. Of course, a child must learn that he cannot have his own way all the time, but this lesson should be taught through kind firmness rather than through fear and punishment. *He needs a guiding hand, not a spanking hand.*

Just as orderly, flexible routines were a good foundation for your baby's health and contentment, so friendly teaching and a few simple, orderly rules will be a sound basis for good behavior now that he is older. Try to be consistent in what you require of him. It is well for the mother and father to talk over the child's conduct and agree as far as possible in their ideas and methods. In this way the child will find the same thing expected of him whether he is with one parent or the other. Children are often confused when two persons try to tell them what to do at the same time. For this reason it is better for only one parent to be in charge of the child at any one time.

The father can be a great help to the mother in teaching the child. Often his firmness will impress the child in a way that the mother's requests do not. But it is hardly fair to the father to have to discipline the

child when he comes home. After all, he wants the child's love just as the mother does, and if any discipline is called for, action should be taken promptly by either parent so that the child will associate it in his own mind with his misbehavior.

It is hard for grownups to remember how many things a child has to learn and how difficult things that are simple to us can be for little minds and muscles. A child needs time and repeated experiences to learn what is expected of him on different occasions. He will learn best if too much is not required of him at once. Small successes and quiet approval for even little things done well will encourage him to learn. Praise your child a bit when he tries hard and makes progress even though he may still be awkward. Most of the time children respond to a friendly invitation or suggestion, and the mother can figure out some pleasant way of interesting them in doing what she asks. A sense of humor, a light, friendly touch and an effort to do things together in a jolly way will make life much easier and more fun for both the mother and child. Fewer problems arise when the child has plenty to do to keep him busy.

The baby whose mother likes to have him around, lets him take part in what is going on in the home, provides him with toys to suit his age and allows him to romp and explore, finds so many enjoyable things to do that he has little reason to be fretful or defiant.

A young child does not realize that what he is doing is good or bad. What may seem like naughtiness is often only his natural, healthful curiosity and liveliness. The vigorous activity of a child who gets into everything may be a trial to his mother but is a normal part of his growth. What he needs is not scoldings and orders to stop but help in learning things he can do. Try to fix some place in the house where he can climb and jump from boxes, or a steady old chair, or a small ladder or steps. Let him run around the house hard sometime during the day, perhaps with a harness on like a horse; or play hide-and-seek with him for a few minutes; or dance with him to the radio or a song; or ask him to carry things to help you. This will work off some of his excess energy and make him more willing to settle down and play by himself from time to time.

It is normal for little children, especially around the age

of two, to be stubborn and "negative" at times. They are not able to do many things they want to do; they cannot express themselves well; they do not know how to wait. Often they say "no" when they want to do things their own way, and a different approach may start them doing what you want. Try to plan your home and your day so that there are as few chances as possible for a conflict of wills. Permit the child to do things his own way as long as it is not harmful even if it is less convenient for you part of the time. If he is to develop independence, he needs freedom and a chance to test his own will and to make his own judgments. As far as possible, let him make his own choice about things. If he rebels against going to the bathroom, ask him whether he wants to use the big toilet or the little one. Then he can assert himself without defying you. If he does not want to get dressed, ask him whether he wants to put on his red sweater or his blue one. Waiting a few minutes or laughing and talking about something interesting that you will do next will often put the child in an agreeable frame of mind.

Nobody likes to be ordered around or nagged, and a child

whose mother is always cross is bound to feel cross himself. Try to give as few stop signs as possible, and make your requests "do this" instead of "don't do that." If your child does something wrong, show him that *you disapprove of the deed but never of him*, and then show him the right way. If you see that he is about to do something actually harmful, you will need to stop him, but try to do it without being angry. When you ask him to do something or forbid him, first make sure that you have his attention and give him a simple, sensible reason if you can. If you tell him you will do such and such a thing if he does not do what you ask, carry out what you say you will do. Do not threaten to do anything unless you are prepared to follow it through, and do not make an issue of anything that is unimportant. A child will naturally be puzzled and confused if his parents laugh at his tricks one day but scold him the next day for the same things. If he finds he can get away with something once, he can hardly be blamed for trying it again and making a scene when it is forbidden. A child needs to know where he stands with his parents. He is better able to control himself if he knows how far he may go in being noisy, or taking other

people's things, or insisting on having his own way. A firm tone of voice, taking a forbidden object away from the child, making him sit quietly in one place for a few minutes, or removing him to another room is often enough to let him know what the family rules are.

Understanding, patience and tactful teaching make harsh methods of discipline as unnecessary as they are unwise. Sometimes grownups imagine they have to frighten children to make them behave, or that the only way they will learn is by being whipped. But this is not true. Such treatment can seriously harm a child and may lead to more serious behavior problems. Young children are very sensitive. They feel lost and overwhelmed if their parents are angry or harsh with them. It is cruel and false to say to a child, "Mother won't love you any more," or that she will "go away and leave you," when he is misbehaving. Scolding and punishments may make a child timid and fearful, or resentful and cruel. Threats may give him many mixed-up ideas. It is unwise to tell a child that his mother will call the policeman or take him to the doctor if he does not behave. He should trust police officers and turn to one if he is lost; and when he is sick, his parents will

want him not to be afraid of the doctor. If he is told the bogeyman will get him, he may have nightmares. Harsh measures result in fears, restlessness and upsets of various kinds. The child may no longer feel that his home is safe. Remember, parents should keep on learning just as children do.

D. When Problems Arise.—Many parents are puzzled and troubled about certain habits that their children develop—fears, tantrums, eating dirt, biting, scratching and thumb-sucking. Many of these so-called bad habits are entirely normal and are outgrown in time if handled with patient understanding. It is often hard to find the particular cause, but they do not indicate that the child is "bad." Punishment is not a cure. Indeed, harsh methods will often fix the habit more firmly in the child's mind, or if one practice is forbidden, the child may turn to another less desirable one.

The following general suggestions may help your child to overcome some of these habits: Think over the child's daily life to see whether he is getting enough rest, outdoor exercise, and play with children of his own age. Has he enough toys and interests to keep him busy? Does he get enough mothering and approval to make him feel

good, or is he told "no-no" too much? Is he scolded and punished and expected to keep too quiet? Try to be honest with yourself about the way you deal with him. Sometimes a busy mother does not realize that she has been expecting too much of her baby. If she is worried and nervous, the child may reflect her mood and be restless and fussy and pick up some annoying habit to soothe himself.

Take no direct notice of the habit itself. Do not try to stop it forcibly or scold the child or even call his attention to what he is doing. Try to keep him interested in healthy activities suitable to his age—games, toys, visiting other children. Try to spend some time every day reading to him, singing him songs, playing with him, so that he will feel his parents are interested in him and love him. If these attempts do not help and the habit continues, and seems to hold up his other interests and normal development, consult your doctor. Make sure there is no physical reason for his behavior. A general check-up by the doctor will determine whether the child is healthy and is getting a balanced diet, or whether he may have some illness that is not apparent. One should not hesitate to seek expert help if there is a

behavior problem. The main thing is not to worry yourself or your child. Calmness, cheerfulness and affection, more than anything else, will help a child, whether he is sick or merely upset.

Fears. — In the earlier chapters we discussed some of the fears babies may have and how to handle them. At about the age of two, a child begins to show his fears. Some children are timid and easily frightened, and cry whenever they are left alone. In such cases the mother should not hesitate to do whatever she can to reassure the child. A dim light in his room or a partly open door may comfort him and enable him to go to sleep. Such a solution is far better than letting him cry. He will eventually outgrow many of his fears. If he wants to play near his mother and is unhappy alone, there is little danger of spoiling him by letting him enjoy her company. When he feels surer of himself, he will be ready to go off and play by himself.

Whenever a child develops a sudden particular fear, try to think what new experience has made him feel unsafe. Children pick up many fears from grownups. Has the child heard or seen some adult frightened by a storm or worrying about

burglars or an accident? Has he heard some unexplained noise in the house or over the radio? Try to get him to talk about his fear, and explain to him that there is no danger. Gradually and gently get him used to the frightening object. Laughing at a child, scolding or punishing him will not make him less fearful but will increase his timidity and may spread his fear to many other things. If he is treated wisely and sympathetically, he is almost sure to outgrow his fears.

Tantrums. — A baby cannot look ahead or remember as adults do; he does not yet know how to wait. When he wants something, he wants it very much and right away. For these reasons we must expect crying, screaming, fussiness, "no" and "I won't" from our little ones. The best way for the mother to deal with such behavior is by smiling and keeping calm and good-natured. Often, if she seems to pay no attention to the child but quietly goes on to the next thing on the program, he will forget and soon be laughing and busy.

If your child becomes very cross and irritable, it may be because he is overtired, needs to go to the bathroom, is being nagged too much, or has not enough freedom to run and

shout. Try putting him to bed earlier or getting him started on some game, or holding him on your lap while he looks at books or strings beads. Sometimes, however, irritability and restlessness mean that he is coming down with an illness (see page 120).

Now and then, a real tantrum develops where the child screams, kicks, throws himself on the floor, tries to hit or stiffens his body so that you cannot hold him. When this happens, do not try to argue or force him but go on quietly with your business. If he is bothering other people, pick him up and take him into another room. This is a much better way to teach him that he cannot get anywhere by a tantrum than to spank or scold him. Remember, the baby may be frightened himself by his temper and may need to feel that his mother loves him even though she is firm with him. Before you refuse him, try to think whether it is really important not to give in to him, and then stick to your decision. If you give in to him, he may soon learn to stage a tantrum whenever he wants anything that you have refused to let him have. Such a habit can be very unpleasant for the parents and is not good for the child.

Try to be reasonable and consistent in what you allow and refuse him, and then make an effort to ignore the tantrum. When he finds that such storming gets him nowhere, he will usually learn to give up this kind of behavior; but if he is scolded, spanked, argued with or begged to stop, it may get worse. The mother may tell him she is sorry he is so angry, that she loves him but cannot let him have the things he wants. Her own calmness will help to quiet the child, and after he has stopped crying, she may suggest something else they can do. Once the tantrum is over, it is best not to refer to it again but to let bygones be bygones.

Biting, Scratching and Hitting.—A young baby, especially when he is teething, will sometimes bite his mother on the breast, hand or face. He does not mean to hurt her but may want to express his love, or he may just be trying out his new teeth as he tries out a new toy. Naturally he should not be punished. The mother should tell him he is hurting her and give him something else to bite on.

Little children around the age of two will often bite one another or a parent when they are angry, or they may scratch

and hit. Of course, this must be stopped and, if necessary, the child must be removed to another place. It is cruel to bite the child in return, as is sometimes mistakenly done. The problem is not an easy one to solve but the period is usually of short duration. The parent should watch the child closely while he is at this stage whenever he plays with other children, and calmly prevent him from biting his playmates. If possible, suggest something else to him that he can do. Biting is likely to occur when another child takes his toys. Try to have the same sort of toys for both children so that each plays with his own toys or so that they can exchange playthings. See to it that the stronger or bolder child does not take advantage of the other. Biting is not a sign of cruelty and, if correctly handled, will disappear.

Little children almost always fight over their possessions. We cannot let them hurt one another seriously but we must decide whether we want the child to learn to settle his own affairs with other children or whether we want him to cry and run to his mother helplessly when he is in trouble. Often children of two are punished for hitting their playmates, yet a year or two later they are

urged to fight back and are scolded and shamed for not defending themselves. This must be very puzzling to a young child.

Dirt-Eating. — Sometimes children between one and two years of age eat dirt or chew paint off the furniture. Now and then this is done to get attention, and the parents may find that giving extra attention in other ways, such as playing and reading to the child, will cause this habit to disappear. Sometimes it is connected with teething. Giving the child more hard foods to chew on or toys he can bite on will help to satisfy this urge. A small amount of sand, chalk, dust, grass or modeling clay will not hurt him. Of course, all poisonous substances should be kept out of his reach. Furthermore, he should not be allowed to play with objects like pins, nails, small buttons and marbles, all of which should also be kept out of his reach. If the child should eat really large amounts of dirt repeatedly, or chew paint off the furniture, the doctor should be consulted.

Sex Play. — In the chapter on the nine to fifteen months old baby, we talked about masturbating or playing with the genitals. This habit may develop in children of any age. It is a nor-

mal phase of growth, and if little attention is paid to it, the child will soon find other interests. He is not bad or immoral if he tries to observe or touch his bowel movement or his organs. He is naturally interested in his own bodily functions and in the bowel movement he has produced. If we understand this, we shall see that scolding, shaming and punishment are not necessary or wise. A child will not go on doing these things. It is therefore best to ignore them and after a time to see that his attention is diverted to something more interesting. When he is older, he will learn adult attitudes about sex from his parents, and will understand such things from a grownup point of view. Meanwhile, let us remember that we want our children to be natural; we do not want them to feel confused, ashamed or mixed up about things they are too young to understand. A child should always feel free to ask his parents questions. The time to begin a healthy, sensible sex education is when the baby starts pointing to the various parts of his body and asking the names of them. It will satisfy his curiosity if we tell him the names in a matter of-

fact, unembarrassed way, as we do for his fingers or toes. His attention will go on to other things if he is not made to feel guilty or ashamed, and if he has other interesting activities as well.

When they are about two years of age, many little children begin to notice the difference between boys and girls, especially if they have been in the bathroom with a person of the opposite sex. If the child has not been scolded or has not felt that his mother was embarrassed when he asked her about different parts of his own body, he is more likely to ask questions freely about other children and also about grownups. Here, again, it is well for little children to learn the simple facts in an easy, casual way from their parents. If they are told to hush or if the answer they get is "Never mind," they will feel that there must be something bad, secret or dirty about it; they will become more curious, and will no longer feel free to ask their parents. But if their curiosity is satisfied and they are allowed to look when a natural occasion arises, they will accept these differences in time and take no more than a normal interest in them.

Chapter VI

WHAT TO DO WHEN YOUR BABY IS SICK

1. HOW TO TELL WHETHER YOUR BABY IS SICK

It is often very hard to tell when a baby is sick or to know what is the matter with him. As you get to know your child, you will be better able to judge what he looks like, how he usually feels and when he shows some sudden change. The following information may help you to decide whether he is sick. If you are in any doubt, *call in a doctor*. The most common signs of illness in a baby are:

Fever.—His skin feels hot and dry.

Vomiting. — If the baby vomits only once during the day, he may have some little upset, but if he vomits more than once a day, or has any other signs of upset, he is sick.

Diarrhea. — If the baby has more bowel movements a day than usual; if the movements are loose and watery, or green, and contain an excessive amount of slimy mucus, consult your doctor. If there is blood in the stool, call the doctor at once.

Running Nose, Cough or Hoarseness.—Even a slight cold

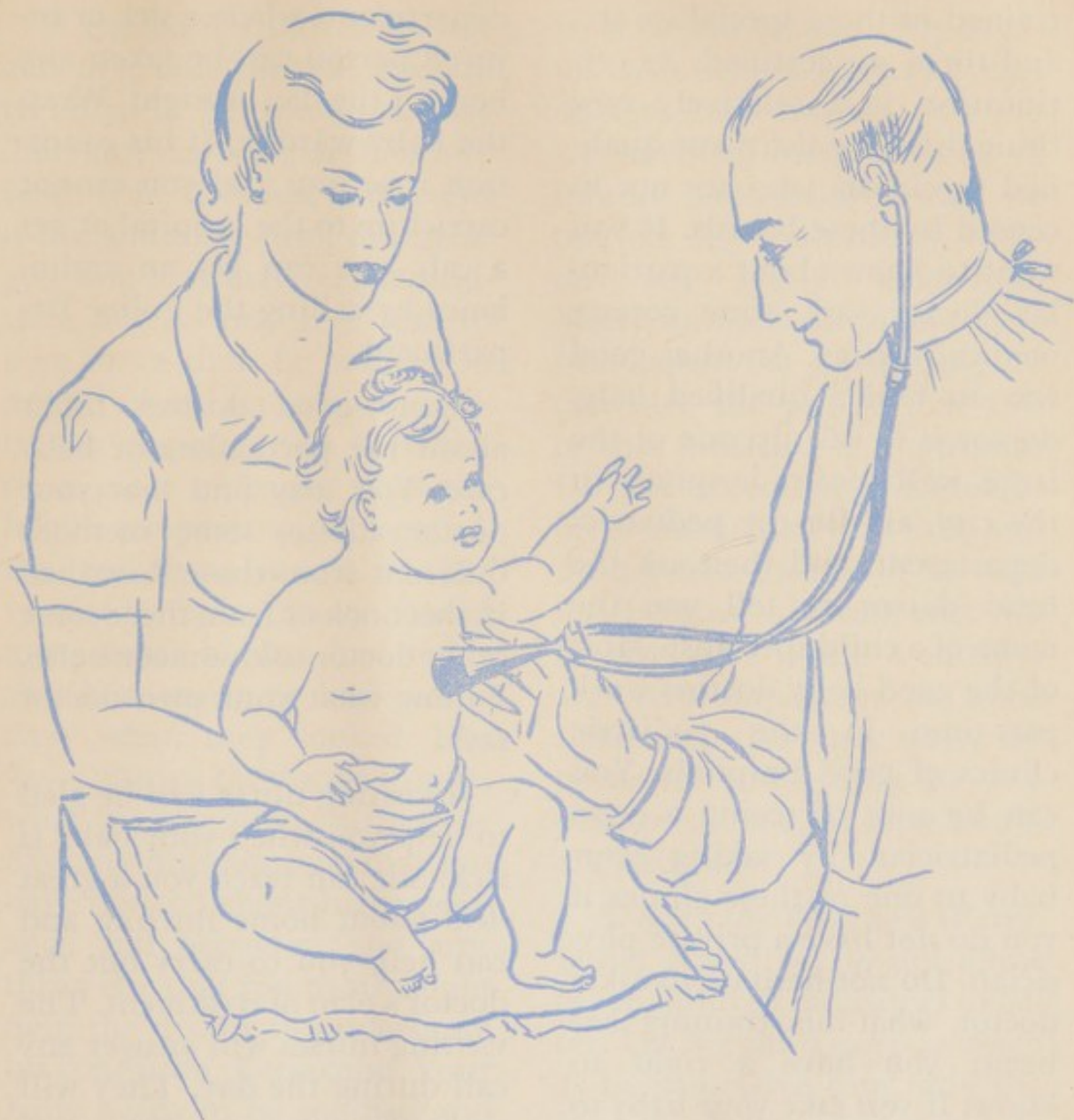
may be serious in a young baby, and may be the first sign of some other illness.

Eating. — A sudden change in appetite may be one of the first signs of sickness.

Restlessness, Crankiness, Crying as if in Pain. — All babies have their off days when they may be fussy. Be on the lookout, however, for other signs of illness if your baby gets unusually restless and irritable, cries a great deal and is not comforted by the things you ordinarily do for him, or is unusually drowsy and wants to sleep when it is his regular time to be wide-awake and eager to play.

If another member of the family has been sick, watch your baby with special care. If the child shows any sign of illness, he needs a doctor. *Prompt* attention will insure earlier recovery and may even save his life.

Home remedies or preparations recommended by a neighbor are not wise treatment for your baby. Neither your neighbor nor your corner druggist is a baby specialist. Never give your baby patent medicines. If



a child has abdominal pain, it may be dangerous to give a laxative, as it may make the condition very serious. *Never give your baby any medicine unless the doctor orders it.*

2. CHOOSING A DOCTOR

In the old days in small towns most families had a physician who knew all about the family, all the diseases they had ever had, and how the family

would be able to manage in case of sickness. Nowadays in the city few people have a family doctor, and when a baby arrives the parents have to choose a doctor for him. A baby often needs a doctor who has had special training and experience in the care of infants and children. The doctors who specialize in baby care are called pediatricians. The boards of medical experts know who the best-

trained of these specialists are, and these are certified. As certification is a relatively new thing there are also many qualified specialists who are not licensed by these boards. If you want to know about a particular doctor, ask your county medical society. Another good way to find a qualified baby doctor is to call up one of the large well-known hospitals in the city, ask for the pediatrics department, and then ask the head doctor to tell you the name of a child specialist. Most of the good baby doctors work part-time in the pediatric clinics of good hospitals. You can be sure of seeing a good pediatrician by taking your baby to one of these clinics if you do not have a private physician. Do not hesitate to ask a doctor what his training has been; you have a right to know. If you take your baby to a general practitioner or family doctor and the child gets very sick, you should ask the doctor to call in a specialist for consultation.

In an emergency, if you cannot reach your own doctor, call up a hospital and get the name of one of the staff members whom you may call, or rush your baby to the hospital. All the large hospitals have well-equipped, well-run emergency

departments where a sick or injured person can be taken any hour of the day or night. Wrap the baby warmly. If his condition is serious and you cannot carry him to the hospital or get a cab, you can get an ambulance by calling the Police Department.

Many good doctors differ about the particulars of baby care. You may find that your doctor advises some methods different from those described in this book or from those some other doctor told someone else. Follow what your own doctor says.

A visiting nurse will be glad to help you when your baby is sick. She can teach you a great deal about home nursing and can help you to carry out the doctor's plan of treatment. The visiting nurses will answer any call during the day. They will make the necessary number of visits for whatever you are able to pay, or without charge if you cannot pay for the service.

3. WHAT TO DO BEFORE THE DOCTOR COMES

Put the baby to bed in a warm, quiet room. See that he is comfortable but not too warmly covered. Keep other children and visitors out of the room. Give the baby a chance to quiet down and sleep.

If the baby's skin feels hot and dry, take his temperature rectally. If he vomits or has diarrhea, do not give him any food. If he does not vomit and is not suffering from diarrhea, give him his usual food at meal-time but do not urge him to take more than he wants. Do not give him any medicine until the doctor orders it. Write on a piece of paper what the baby's temperature is, how often and how much he has vomited, how many bowel movements he has had today and how many he had yesterday, what they looked like (save one for the doctor to see), what he has eaten during the day, anything unusual that you have noticed about his appearance and behavior, and anything else that you think might help the doctor to understand his condition. Keep calm. Your baby needs to be soothed and comforted, not agitated.

4. HOW TO CARE FOR A SICK BABY

A. Follow the Doctor's Orders Exactly.—Write down the directions he gives you. If there is anything you do not understand or if you have a question, telephone to him and ask him what to do. Give your baby only the medicine your doctor orders, only the exact amount

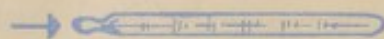
he tells you to, and only as often as he orders. In recent years doctors have learned that the treatment of many diseases of infants and children can be carried out successfully without any special medicines. Many millions of dollars have been spent in advertising to convince the public that this or that medicine is important. Do not expect your doctor to order medicine every time and do not feel cheated if he does not, because it is often safer not to give any. While medicines are very important in some sicknesses, there are many illnesses for which only the simplest medicines, or none at all, are necessary.

B. Keep the Baby in a Warm, Quiet Room. — Do not allow other children or visitors to enter. Let the child sleep as much as he can. Give him only the food the doctor advises and do not urge him to eat. Try to make him as comfortable as possible. Give him a warm sponge bath once or twice a day, but no tub baths until he is over the sickness. If he has diarrhea, wash his buttocks every time he has a movement so that his skin will not get irritated. Change his sheets and his position in bed from time to time. Give him a drink of water whenever he wants one. Do

not let him cry hard, but sing or talk to him gently, or hold him quietly on your lap if that soothes him. A sick baby needs to feel his mother's love.

C. How to Take a Baby's Temperature. — Temperatures should be taken with a rectal thermometer that has a thick round or oval bulb at the end. Do not use a mouth thermometer, as it has a thin, pointed end that might break and injure the child.

Wash the end of the thermometer with cold (*not hot*), soapy water; rinse, and wipe it off with alcohol. Shake down the mercury in the thermometer by taking hold of the upper part firmly and shaking it with a few sharp jerks, so that the mercury goes below 96 degrees. Then rub on a little white petroleum jelly, mineral oil, cold cream, or boric acid ointment. Put the baby in his crib or on a table or hold him on your lap. Put a pad or diaper under him. Turn him on his stomach or on his side. With one hand separate the buttocks and gently push the end of the thermometer into the rectum. Push it in about one-third of the length of the thermometer and hold it there for two minutes by the clock. Keep the baby quiet and hold his legs with one hand. Do not let go of the thermometer



for a moment, as the child might move and break it. Then take out the thermometer, read the temperature and write it down. When you have finished, wash the thermometer with cold, soapy water, then wipe it off with alcohol.

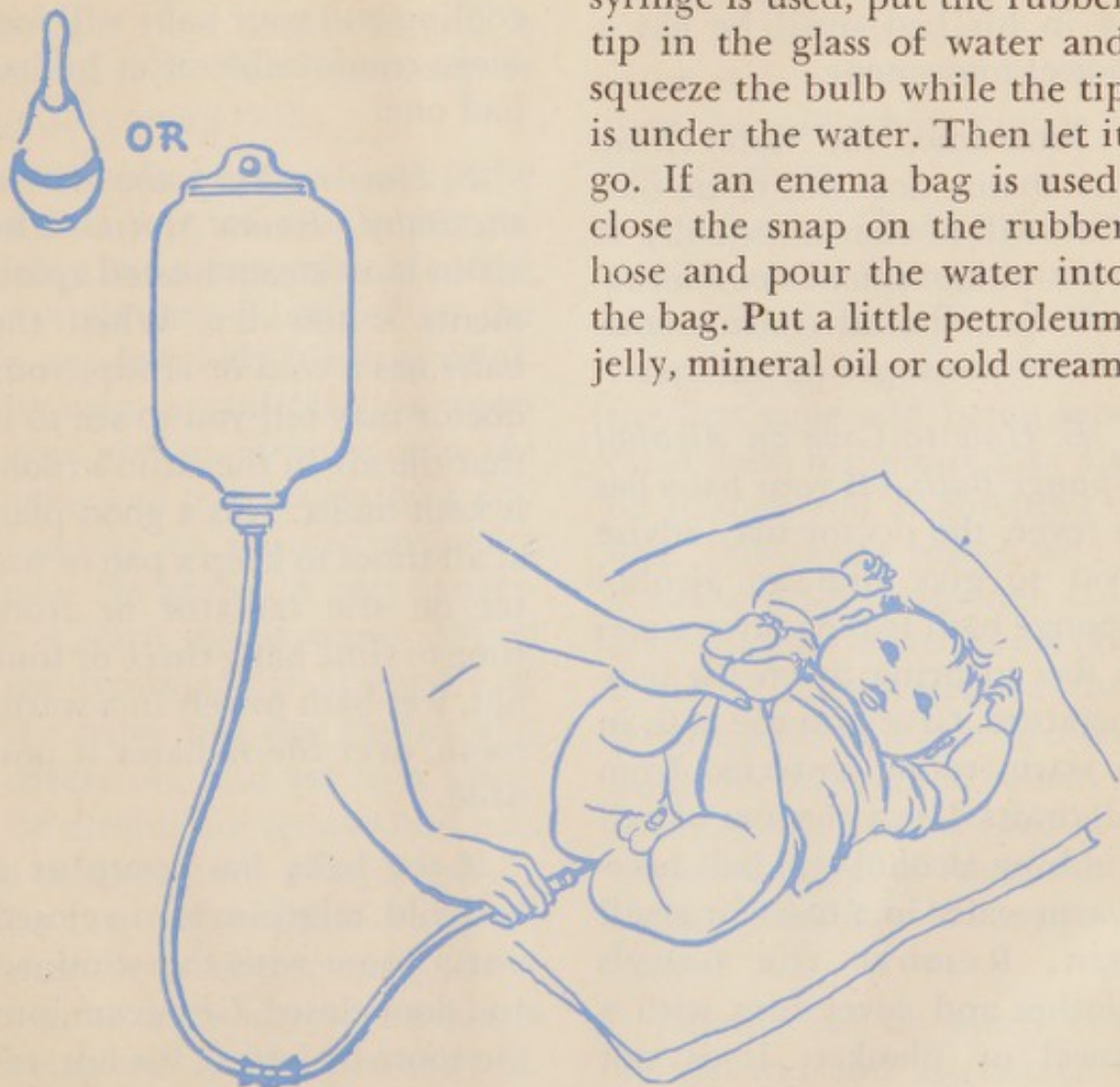
The temperature of a healthy baby is usually somewhere between 98 and 99.8 degrees. If your child's temperature is 101 degrees or higher, you should call a doctor even though the baby has no other signs of illness. Young babies often have a fever even with a small upset, but as you cannot tell what the cause is and the temperature may quickly go much higher, it is wise to call a doctor and get his opinion.

D. How to Give an Enema When the Doctor Orders It.—Elsewhere in this book you have been advised not to give your baby an enema or use a suppository unless your doctor orders it. An enema is not the best treatment for constipation. If the infant has a distended stomach, he may have a bowel obstruction or some condition in which an enema would be injurious. The baby may be hurt and frightened by the enema. For these reasons an

enema should not be given except on the doctor's orders.

Your doctor will tell you when an enema is necessary and if you ask him, he will tell you just what to use. Ordinarily a glassful of warm water is used in which half a teaspoonful of salt has been mixed. For a baby under six months of age, half a glassful is enough, and for an older baby, a whole glassful.

Either an infant syringe or an enema bag with a small nozzle may be used. If the syringe is used, put the rubber tip in the glass of water and squeeze the bulb while the tip is under the water. Then let it go. If an enema bag is used, close the snap on the rubber hose and pour the water into the bag. Put a little petroleum jelly, mineral oil or cold cream



on the tip of the nozzle. The baby may lie on his back in his crib, on a table or on your lap, with a pad under him. Lift up his legs with one hand and insert about an inch of the nozzle into his rectum. Do it gently and slowly. Then *slowly* squeeze the bulb of the syringe or unfasten the snap on the rubber hose and let the water run in *slowly*. Take out the nozzle carefully and hold the buttocks together for a few minutes. Then put a diaper on the baby and let him lie quietly in his bed until he has a bowel movement.

Sometimes the water from the enema does not come out. This will not harm the baby. If a bowel movement does not result, you should consult your doctor about giving another.

E. How to Give an Alcohol Sponge Bath.—If your baby has a fever, the doctor may advise you to give him an alcohol sponge bath two or three times a day to bring down his temperature. Give him the bath in a warm room protected from all drafts. Use a mixture of half rubbing alcohol and half lukewarm water in a basin or small pan. Remove the baby's clothes and cover him with a towel or blanket. It is not necessary to wash his face or

head with the alcohol. Be careful that none gets in the eyes or on the genitals. Dip a washcloth in the alcohol, wring it out slightly, then wash a small part of his body with long, slow strokes, soaking the cloth often in the alcohol. Go over the part until he feels cooler. Pat the washed part dry gently with the towel, cover it and then wash another part of the body. When the whole body has been washed, put the baby's clothes on and lay him in his bed. A sponge bath is refreshing and cooling and your baby will feel more comfortable after he has had one.

F. How to Keep the Air in the Baby's Room Moist.—The air in most steam-heated apartments is too dry. When the baby has a cold or croup, your doctor may tell you to see to it that the air in the child's room is kept moist. It is a good plan at all times to keep a pan of water on the radiator or from time to time hang three or four hot, wet bath towels in a warm room, over the radiator if possible.

If the baby has croup or a bad cold, take him into a closed warm room with the windows and door closed. Get steam into the room by letting the hot water run or keeping an uncov-

ered kettle of water boiling on a stove or electric plate. If this treatment is to work at all, there must be plenty of steam in the room. You should be able to feel the moisture in the room and may even find it uncomfortably warm. When the room is quite warm, the baby may be clothed in only a diaper. *Be sure the hot water is far enough away from the baby to prevent him from touching or spilling it, or getting his blankets near the fire.* A vaporizer to make steam can be bought in a drugstore and is useful if the baby has croup or gets frequent colds.

In severe cases of croup the doctor may tell you to put the baby in a steam tent. Menthol crystals may be added to the water for their pleasant odor. *Be very careful that the steam does not go directly onto the baby, and that his clothing and bedding do not get anywhere near the heater.* A very dangerous burn might result. When the treatment is finished, dry the baby, put dry clothes and covers on, and let him sleep. Be careful not to take him into a cold room too soon; if you do, he may get a chill. In severe cases your doctor may advise you to keep the steam kettle going and not to open the windows for several days.

5. IF YOUR BABY MUST GO TO THE HOSPITAL

Your doctor will tell you whether it is advisable to send your baby to a hospital for special nursing care. If your child has some condition that makes an operation necessary, your doctor will decide the best time for it in terms of its urgency and your baby's general condition. If you decide to have your baby circumcised, it is usually advisable to have this done soon after birth, before you and the baby go home from the hospital. If your doctor does not think it wise to have it done then, he will advise you as to the best time.

An operation is likely to be a painful and frightening experience for anyone, especially a baby. Going to a hospital for the first time and being separated from his family may also be strange and frightening at first. This is one reason why it is never wise to threaten children with having to see the doctor or go to the hospital if they are not good. If it ever becomes necessary for them to be sent to the hospital, they may feel it is a punishment or that something dreadful will happen to them.

Parents can do much both beforehand and afterwards to reassure their baby about a

hospital stay. Unless he is too sick to hear you, tell him where he is going and try to prepare him for it. Do not lie to him about it or he may not believe you when you promise to take him home again. If he is old enough, tell him what the hospital will be like, that the doctors and nurses will be his friends, that he will soon feel better and have fun with the other children, that you will come to see him while he is in the hospital, and that you will take him home as soon as he is better. Find out ahead of time when you may visit him, tell him when you will come again, and do not fail to keep your word. Remember, a little child lives in the present and unless he sees his parents from time to time, he may fear he will never see them again and that they do not love him. Talk it over with your doctor and see what he advises about the frequency of visits. Send the child a postcard every day, if you cannot visit him that often, and a little present at frequent intervals to let him know you remember him. You can buy little gifts in the ten-cent store, or paste bright-colored pictures on paper to make a little book, or cut out figures from magazines. Take him some of his favorite toys so that he will have something from home with him, but do

not forget to bring them home again when he leaves.

The baby who has always been treated gently, who has never been frightened by threats or punishments, and who feels that the doctor is his friend, is less likely to be upset by a separation from his family. When your child comes home again, give him extra attention for a while and do not leave him alone too long. If he is old enough to talk, let him talk about his experiences if he wishes. Try to answer any questions that may be puzzling him, and assure him that he is better now. In this way you will help him to get over any fears he may have.

6. WHEN YOUR BABY IS GETTING BETTER

Your doctor will advise you when your baby has passed the danger point in his illness, when to begin giving him regular meals, when he may sit up or walk around again, when to stop giving him the medicine, if he has prescribed any, and when you may safely take him outdoors.

It is usually best to keep the child at rest from 48 to 72 hours after his temperature has dropped to normal. The length of time will depend on what illness the child had, and the

doctor will decide in each individual case. Remember that as a result of his illness your baby may be weak and need a long rest and careful watching to prevent serious after-effects.

During the time your doctor advises you to keep your baby at rest, keep him in bed if possible. If not, put on all his clothes except his shoes and let him lie or sit in his carriage or on the living room sofa. Give him toys he can play with while sitting down. Try to think up things he can do that will be fun in bed—looking at magazines, stringing large beads, playing with small toys. A box with large buttons to rattle, modeling clay, crayons and paper, clothespins with a box to put them in, old Christmas cards, a music box, a package of Christmas seals that he can stick in a notebook, musical blocks, a box of scraps of colored cloth, animal cookies, a tinker toy set, are all good. Any time your child gets tired of his toys, put some of them away for a while. Then they may be brought out on special occasions and will seem like an extra treat.

Even though the doctor says you may begin to give him regular meals again, it will often take some time for the baby's appetite to get back to normal.

His own body knows best what its capacity is. Above all, do not try to coax him to eat when he has no taste for his food. After he has gotten back to normal, he will make up for the meals he has missed. If you force food on him when he is not ready for it, you may upset him and have a real feeding problem on your hands.

The convalescent period is often harder on the mother than the days when the baby was sick. Many children tire easily and become very cranky, fussy and demanding at this time because they are not able to entertain themselves. A mother can get very fed up with a child's demands during illness. Try to be patient with your baby and devote as much of your time as you can to making him comfortable. Provide him with things he can play with quietly while he is in bed, or on the sofa, or in his carriage. You need not be afraid that doing these things will spoil him. Keep him amused, but do not give in to him all the time; be firm about the things he needs to do. Spend as much time as possible doing little things that will interest but not excite him. As he gets stronger from day to day, you may let him play by himself a little longer. But do not expect him

to be cheerful and lively or to feel all right as soon as the crisis has passed. Do not think he is naughty just because he still needs extra attention.

7. SOME COMMON DISEASES OF CHILDHOOD

A. Colds. — What is only a slight cold in a grownup may be a bad cold in a little baby. Try to keep any member of the family who has a cold away from your child. If the mother herself has a cold, she should be careful not to put her head near the baby or breathe on him, and should wash her hands thoroughly whenever she is about to touch him or give him anything.

If your baby begins to sneeze or cough or gets a running nose, keep him as quiet as you can, protect him from drafts and try to keep the temperature in the room as even as possible. It is better not to take him outdoors, even if he has no fever, unless the day is warm and sunny and there is no wind. If his nose is stuffed, it will make him breathe more easily if you put him in a room with some moisture in the air as often as your physician advises (see page 126). Do not put any medicine in the baby's nose unless the doctor tells you to do so. Nose drops for adults

or other children are usually too strong for the baby, and even medicine that the doctor gave the baby for an earlier illness may not be the right kind this time. If the baby's nose is running, wipe a little cold cream or lanolin under it to keep the skin from getting sore. Most doctors agree that oily nose drops are dangerous and should never be used without careful supervision by a doctor.

If your baby shows any other signs of illness, call the doctor. What is apparently a cold may be the first sign of a more serious illness.

B. Croup.—Croup is accompanied by difficulty in breathing which often comes on suddenly at night. The baby breathes in a harsh, noisy way, wheezes and coughs. His voice sounds harsh. Sometimes croup is dangerous, so call the doctor as soon as possible. Before he comes, put the baby in a room that has moisture in the air. Keep calm. The child may be frightened by his discomfort and may need a calm, reassuring mother to soothe him.

C. Convulsions. — Convulsions are very frightening to a mother, and she should know what to do before the doctor comes. There is a spasm or twitching of the muscles of the face, legs, hands or other parts

of the body. The baby's lips may turn blue, he may have a fixed stare and his body may get stiff. Since convulsions often occur as the result of fever, you should give the child an alcohol sponge bath before calling the doctor.

D. Chicken Pox. — Chicken pox is one of the most contagious diseases of childhood, so keep children who have it away from your baby. It takes from 14 to 16 days for the disease to develop after one has been exposed to it. At first there may be a fever for a day or two. The first sign of a rash is usually small red spots. These spots spread over the back, chest and the rest of the body and then become little watery blisters. There may be a lot of itching. Whenever your baby develops a fever and a rash, call the doctor. He will determine what the disease is and advise you on the proper treatment.

E. Measles. — Measles is another common catching disease and is frequently very serious in babies because pneumonia and other complications may develop. If you know that your infant has been near someone who has the disease, ask your doctor whether he would advise a protective injection of gamma globulin. This can be

obtained from the Department of Health. Try to keep your baby away from other children who may have measles.

The first symptoms of measles are similar to those of a cold—running nose and eyes, a cough and fever. Later, small white spots appear on the inside of the mouth and a red rash on the face and body. If the doctor decides that your baby has measles, follow his advice carefully.

F. Whooping Cough. — This is one of the most serious diseases a little baby can catch. You should help to protect your infant against this danger by having him inoculated when he is six months old (see page 69). Never allow other children who have coughs or colds to come near your baby, even if you have to offend your best friends. What they call "just a cold" may be the beginning of whooping cough. If your child should get this disease, the constant supervision of a physician is needed. No druggist's "special cough mixture" can take the place of good medical care.

8. FIRST AID FOR ACCIDENTS

A. Cuts and Scratches.—The ordinary cuts and scratches a baby gets should be washed with water and a mild soap, and

covered with a piece of sterile gauze. There are many anti-septic preparations that may be put on small cuts. Tincture of iodine especially if it has been standing for some time, must be used very carefully because it may cause burns. Some of the preparations you can buy do not sting as much as others and therefore are preferable for children. A severe or deep cut should be treated by a doctor.

All babies are bound to get falls and bruises when they begin to walk, and may get a big, dark lump like an egg on the forehead. It is usually not necessary to do anything for a minor bruise, but you should take your baby to the doctor if the child has hurt his head or has other severe injuries.

B. Swallowing Objects.—Small buttons, coins and even pins that the baby swallows usually pass through the intestines without causing injury. If the child shows any kind of upset or pain, or has swallowed a sharp pointed object and chokes or coughs, showing that the object has gone into his windpipe instead of his stomach, hold him by the heels and shake him. If this does not dislodge the object, rush the child to a hospital or a doctor. Do not try to stick your finger down his throat to get the object out.

C. Poisons or Pills.—Poisons and medicine should be kept in a locked cupboard or on a high shelf where the baby cannot possibly get at them. If you have boric acid in the house, be sure to keep it in the medicine closet, and do not let the baby drink the solution you fix for rinsing his diapers. Remember to keep all such dangerous things out of his way. Besides, they should be bought only in small amounts in order that they may not get stale.

If you think your baby has eaten pills, roach poison or any cleaning things such as lye, washing soda or similar articles, rush him to the hospital or the doctor. Take along some of the material he was eating so that the doctor will know how to treat him. Before the doctor sees him, try to make the baby vomit by tickling the back of his throat with soft tissue paper or by giving him as much warm salted water as he will take — one-quarter of a teaspoon of table salt to an 8-ounce glass of warm water.

D. Burns.—For a mild small burn that makes a small spot of skin red, cover with a paste of bicarbonate of soda mixed with water, and a clean dry bandage. Do not put oil or absorbent cotton on the burn.

For severe burns that cause

blistering or cover a large part of the skin, rush the baby to a hospital or the doctor's office immediately. Do not put any ointment or absorbent cotton on the burns. Do not break the blisters. Do not try to remove the child's clothing but wrap him in a warm blanket, and hurry.

9. BE CAREFUL BUT DO NOT WORRY

After you have read this chapter, you may be afraid your baby will get sick. Of course he will not get all the diseases mentioned in this book. If you give him good care every day, keep him away from people who have colds and other contagious diseases, and take him to a doctor or child health station regularly for examination, he will stand a good chance of escaping serious illness. It is wise, however, to know the signs of illness and to see that the baby gets prompt medical attention when he first becomes ill. Money paid for a doctor's visit at the beginning of a sickness is health saved in

the long run. If the infant has no fever but shows other signs of sickness, you can take him to the doctor's office or to a clinic. However, if the child has a fever and appears quite ill, call your physician. He will probably want to go to your house to see the baby.

Remember to write down the name, address and telephone number of your doctor and also of the nearest hospital. Keep them in a handy place so that you will be able to get at them quickly in an emergency.

You have now had two years of wonderful experiences with your baby. There have been many puzzling and discouraging moments, but there have also been many moments of real joy and satisfaction.

Your baby has only one set of parents, and on their wisdom, from the very start, depend his sturdiness, his happiness, his health. It is a real achievement for you to have reached this stage. May you continue to be successful in bringing up your child.

INDEX

- Abdomen (*illus.*) , 37
- Accidents
 - first aid, 131-133
 - prevention of, 41, 53, 54, 73-74, 86, 92, 103
- Airing, 40
- Anus (*illus.*) , 37
- Bassinet; *see* Bed, baby's
- Baths, 35, 65, 97
 - sponge, 126
- Bed, baby's, 48-49
- Behavior (*also see* Development, Feeding, Growth) , 11, 35, 102-119
 - climbing, 73, 84, 92
 - companionship, 34, 41-42
 - crawling, 54, 71
 - crying, 17, 33-34, 44, 120
 - dirt-eating, 118
 - discipline, 111-112
 - independence, developing baby's, 113
 - learning, 35, 42, 52, 55, 61, 83-87, 93, 102-119
 - play (*also see* Toys) , 41-42, 55, 57, 66-67, 84-86, 108-111
 - restlessness, 48, 120
 - sitting up, 54
 - standing up, 83
 - swallowing objects, 132
 - thumb sucking, 17, 64, 91, 115
 - toilet training, 30, 31, 65, 72, 99-102
 - turning over, 53
 - walking, 71, 84, 92
- Bladder control; *see* Toilet training
- Bottle feeding; *see* Feeding: bottle
- Bowel movement; *see* Elimination
- Bowleggedness, 84
- Breast feeding; *see* Feeding: breast
- Breathing, noisy, 47
- Bubbling, 23, 44
- Burns (*also see* Accidents) , 132-133
- Buttocks
 - cleaning, 38, 40
 - Illus.*, 37
- Care, routines of, 12-14, 48
- Carriage, baby, 40, 49, 66
- Chicken pox, 131
- Child health station, 5, 69, 133
- Circumcision, 127
- Cleanliness, 20, 25
- Climbing; *see* Behavior
- Clothes, 39-40, 46, 48, 65-66, 98
 - care of, 50
- Colds, 120, 126, 130
- Colic, 22, 44
- Colostrum, 23
- Companionship; *see* Mental Health
- Constipation; *see* Elimination
- Convalescence; *see* Illness
- Convulsions, 130-131
- Cradle cap, 47
- Crib; *see* Bed, baby's
- Cross-eyes; *see* Eyes
- Croup, 126, 130
- Crawling; *see* Behavior
- Crying; *see* Behavior
- Cuts (*also see* Accidents) , 131
- Development (*also see* Behavior, Growth) , 11, 12, 43, 52
 - muscular, 18-19, 93
- Diaper rash; *see* Skin rash
- Diapers, 40, 46, 50
- Diarrhea, 31, 120, 123
- Dirt-eating; *see* Behavior
- Discipline; *see* Behavior
- Disease; *see* Illness
- Doctor; *see* Illness

- Drugs, 120-121, 123, 130
 - laxatives, 25, 121
 - nose drops, 130
 - soothing syrup, 57
 - suppositories, 31, 64, 82
- Ears, 18
 - cleaning, 36
- Elimination (*also see* Behavior: toilet training), 30-31, 64-65, 81-83
- Enemas, 31, 64, 82
 - how to give, 125-126
 - illus.*, 125
- Exercise, 41-42, 66
- Eyes, 18
 - cleaning, 36
 - cross-eyes, 47
 - discharges, 47
- Face, 36
- Family, fitting into; *see* Mental health
- Father, role of, 14-15, 24, 104
- Fears; *see* Mental health
- Feeding (*also see* Behavior, Food, Meals), 20-23, 43, 61, 72, 74-75, 94-97
 - bottle, 21, 25-28, 51, 63
 - breast, 20, 23, 57, 63-64
 - night, 22
 - problems, 78
- Fever (*also see* Illness), 46, 120, 133
- First aid; *see* Accidents
- Fish liver oil, 28
- Food (*also see* Feeding, Meals)
 - bacon, 76
 - cereal, 59, 76
 - desert, 77
 - eggs, 60, 76
 - fish, 76
 - fruit, 59, 77
 - meat, 76-77
 - milk, 77-78
 - of mother, 25, 55
 - orange juice, 29, 46
 - potatoes, 76
 - solid, 58-59
 - soup, 77
 - vegetables, 59
- Foreskin (*also see* Circumcision), 38
- Formula; *see* Feeding: bottle
- Games; *see* Behavior: play
- Genitals (*also see* Mental health: masturbation)
 - cleaning, 38, 40
 - illus.*, 37
- Glans; *see* Genitals
- Growth (*also see* Behavior, Development), 11, 12, 52, 71
- Head
 - cleaning, 36
 - cradle cap, 47
 - illus.*, 37
- Heat rash; *see* Skin rash
- Hiccups, 44
- High chair, 62, 66
- Hospitalization; *see* Illness
- Illness, 62-63, 120-133
 - convalescence, 129
 - disease, protection against, 20, 68-70, 131
 - doctor, choosing, 121
 - hospitalization, 127-128
 - medical care, 24, 42-44, 94, 115-116, 133
- Immunization; *see* Illness: disease, protection against
- Independence, developing baby's; *see* Behavior
- Jealousy; *see* Mental health
- Laxatives; *see* Drugs
- Learning; *see* Behavior
- Left-handedness, 53, 62
- Loving baby; *see* Mental health
- Manners; *see* Behavior
- Masturbation; *see* Mental health
- Meals, sample (*also see* Feeding, Food), 61, 75, 96-97
- Measles, 131
- Medical care; *see* Illness
- Medication; *see* Drugs
- Menstruation, 25

- Mental health, 111-119
 companionship, 34, 41-42
 family, fitting into, 102-111
 fears, 67, 73, 90, 106, 114-115, 116
 jealousy, 106-108
 loving baby, 14-15, 41, 107-108, 111
 masturbation, 90-91, 118-119
 nagging, 113-114
 separation from mother, 106
 spoiling baby, 14, 116, 129-130
 temper, 73, 88, 115-117
- Mouth, 17-18
 cleaning, 36
- Nagging; *see* Mental health
- Naps; *see* Sleep
- Navel, 47
illus., 37
- Night feeding; *see* Feeding: night
- Nipples; *see* Feeding: bottle, Feeding: breast
- Nose, 36
- Nose drops; *see* Drugs
- Penis; *see* Genitals
- Play; *see* Behavior
- Play-pen, 55, 66
- Prickly heat; *see* Skin rash
- Restlessness; *see* Behavior
- Schedules; *see* Care, routines of
- Sex education, 119
- Sex play; *see* Mental health: masturbation
- Shoes, 84, 98
- Shyness; *see* Mental health: fears
- Sitting up; *see* Behavior
- Skin rash, 45-46, 50
- Sleep, 31-33, 35, 43, 57-58, 88-90, 98-99
- Soft spots; *see* Head
- Soothing syrup; *see* Drugs
- Spitting up; *see* Throwing up
- Spoiling baby; *see* Mental health
- Standing up; *see* Behavior
- Steam tent, 127
- Sterilizing bottle, 26-27
 equipment for, 51
- Sucking; *see* Mouth, Behavior: thumb sucking
- Sun baths, 41
- Suppositories; *see* Drugs
- Swallowing objects; *see* Behavior
- Talking, 18, 55, 72, 93
- Tantrums; *see* Mental health: temper
- Teeth
 baby's, 97-98
 mother's, 24
 teething, 55-57, 71, 89, 117, 118
- Temper; *see* Mental health
- Temperature, how to take, 124
illus., 124
- Testicles; *see* Genitals
- Throwing up, 23, 44, 120, 123
- Thumb sucking; *see* Behavior
- Toilet articles, 50
- Toilet training; *see* Behavior
- Toys, 57, 65, 66, 85, 97, 109-110
- Tub baths; *see* Baths
- Turning over; *see* Behavior
- Umbilicus; *see* Navel
- Vaccination; *see* Illness: disease, protection against
- Vision; *see* Eyes
- Vitamins, 28, 29.
- Vomiting; *see* Throwing up
- Vulva; *see* Genitals
- Walking; *see* Behavior
- Water, 28
- Weaning, 25, 62, 71, 78-80
- Weight, 12, 43, 52, 71, 94
- Wetting; *see* Behavior: toilet training
- Whooping cough, 131



