Toddler’s First Steps

A Best Chance Guide to Parenting Your 6- to 36-Month-Old Child

fifth revision second edition
<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Health Care Support Team**

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Personal Support Team**

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Contents

Acknowledgements .............................................. v  
Preface .................................................................. vi 
How to Use this Handbook ........................................ 1  
Introduction from Dr. Clyde Hertzman ..................... 2  
Introduction from Child Health BC ............................ 2  

## Getting Started

Getting Started ................................................... 3  
Learning About Your Toddler ................................. 3  
Growing As a Parent ............................................. 7  

## Child Development

Child Development in the Toddler Years  .................... 9  
The Five Areas of Child Development ...................... 9  
Child Development by Age .................................... 12  
Independence .................................................... 37  
Empathy .......................................................... 37  
Play .............................................................. 38  
Toys .............................................................. 41  
Screen Time .................................................... 43  
Reading to Your Toddler ..................................... 43  
Sexual Development .......................................... 44  
If You Have Concerns About Your Toddler’s Development.... 45  

## Healthy Eating for Your Toddler

Healthy Eating for Your Toddler ............................. 47  
Key Ideas for Healthy Eating ................................ 47  
The Eating Relationship ..................................... 48  
Breastfeeding Your Toddler .................................. 50  
When Your Toddler Stops Breastfeeding ................... 53  
Introducing Solid Foods ...................................... 54  
Safe Microwave Cooking and Reheating ................... 55  
Learning to Drink ............................................. 56  
Feeding by Age ................................................ 56  
Vitamin and Mineral Supplements .......................... 64  
Ideas for Healthy Meals and Snacks ........................ 65  
Offering Safe, Healthy Food and Drinks .................... 66  
Preventing Choking .......................................... 70  
Eating Together ............................................... 71  
Preventing Picky Eating ..................................... 72  
Being a Vegetarian Toddler ................................ 73  
Understanding Food Allergies ............................... 74  

## Health and Well-Being

The Health and Well-Being of Your Toddler ............... 75  
Your Toddler’s Growth ....................................... 75  
Your Toddler’s Weight ....................................... 76  
Physical Activity ............................................. 77  
Outdoor Protection for Your Toddler ...................... 79  
Sleep and Your Toddler ..................................... 81  
Learning to Use the Toilet ................................... 86  
Looking After Your Toddler’s Teeth ....................... 88  
Looking After Your Toddler’s Vision ...................... 92  
Looking After Your Toddler’s Hearing .................... 94  
Preventing Illness ............................................ 96  
When Your Toddler is Sick ................................ 100  

---

*Note: The page numbers indicate the place in the document where each section begins.*
Parenting

Parenting Your Toddler ......................................... 103
Why Toddlers Behave the Way They Do .................... 103
Positive Discipline .............................................. 104
Challenging Behaviours ......................................... 109
Staying Cool as a Parent ........................................ 111
Parenting Issues ................................................ 113
Parenting a Toddler with Special Needs ......................... 117
Helping Your Toddler Adjust to Change ......................... 118
Child Care . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .123

Safety

Toddler Safety .................................................. 129
Key Safety Points ............................................... 129
Childproofing Your Home...................................... 130
Preventing Fires and Burns ..................................... 131
Preventing Falls................................................. 131
Preventing Choking ............................................ 132
Preventing Poisoning ........................................... 132
Safety in the Bathroom ......................................... 133
Safety in the Kitchen............................................ 134
Car Safety ...................................................... 135
Equipment Safety .............................................. 138
Water Safety .................................................... 143
Safety in the Community ..................................... 145
Violence ........................................................ 147
Safety With Pets .............................................. 149
A Final Note on Toddler Safety .................................. 150

Appendix

Eating Well with Canada’s Food Guide ......................... 151

Resources

Key Resources for Parents ...................................... 159
Aboriginal Resources ........................................... 159
Abuse or Neglect ............................................... 160
Alcohol and Drug Use.......................................... 160
Breastfeeding .................................................. 160
Child Care ...................................................... 160
Child Development ............................................. 161
Child Support .................................................. 162
Dental Care ..................................................... 162
Family Resources ............................................... 162
Family Violence ................................................ 162
Fathering ....................................................... 163
HealthLink BC .................................................. 163
Health Authorities .............................................. 164
Hearing ........................................................ 164
Immunizations ................................................. 164
Medical Resources ............................................. 164
Nutrition ....................................................... 165
Parenting ....................................................... 165
Perinatal and Postpartum Depression ......................... 165
Physical Activity ................................................ 165
Prescription Drugs .............................................. 165
Safety .......................................................... 166
Shaken Baby Syndrome ....................................... 167
Special Needs .................................................. 167
Speech Therapy ............................................... 167
Vision .......................................................... 167

Index ............................................................. 168
Acknowledgements

Many people in British Columbia helped review the information in Toddler’s First Steps (2nd ed.). Thanks are given to them all. Thanks are also given to the people who worked on the first edition of the handbook. Their work has made this edition possible.

The 2008 Design Team included:
Lisa Rogers, Janice Lidstone Ministry of Health Consultants
Michelle Nicholson Project Manager/Readability Editor
Dini Steyn Project Coordinator
Cindy Lundy Senior Subject Matter Expert/Researcher
Carol Orom Instructional Designer/Writer
Susan Doyle Writer
Janet Bartz Art Director/Book Designer
Ken Faulks Illustrator
Keith Learmonth, Shannon Mitchell Ministry of Health Consultants
Laurie Lozoway, Dennis Evans Ministry of Health Consultants
Ilona Ugro Copyright Officer
Glen Brownlow Print Coordinator
Sherry Brown, Eluned Davies Distribution Coordinators
Frances Litman Photography Inc. Cover Photographer
Madea Solberg Cover Model

Individuals who attended a Provincial Advisory Committee Meeting (2008) include:
Radhika Bhagat Vancouver Coastal Health
Margaret Chesterman BC Speech and Language Pathology
Laurie Ford Department of Educational and Counselling Psychology and Special Education; and the Human Early Learning Partnership, University of British Columbia

Dr. Virginia Hayes University of Victoria School of Nursing and Children's and Women's Health Centre of British Columbia
Dr. Jill Houbé Division of Developmental Pediatrics, BC Children's Hospital
Mary Lou Matthews BC Healthy Child Development Alliance
Dr. Carol Matusicky BC Council for Families
Becky Milne BC NurseLine

Subject Matter Experts who participated in the instructional design workshop and/or conducted extensive review of the content include (2008):
Dr. Shelina Babul-Wellar BC Injury Research & Prevention Unit, Department of Pediatrics, University of British Columbia
Radhika Bhagat Vancouver Coastal Health
Dr. Jill Houbé Developmental Pediatrics, BC Children's Hospital
Dr. Carol Matusicky BC Council for Families
Becky Milne BC Nurseline
Jane Wark Registered Dietitian
Joanne Wooldridge Vancouver Coastal Health

Other Content Advisors include (2008):
0-6 Years Subcommittee Community Nutritionists Council of BC
Marilyn Barr
Diana Elliott, Mary Clifford BC Speech and Language Pathology
Dr. Pam Glassby BC Baby Friendly Network
Dr. Clyde Hertzman Vancouver Coastal Health
Linda Kirste Human Early Learning Partnership of British Columbia
Ann Marie Newroth Dial-A-Dietitian
Dr. R.G. Peterson BC Early Hearing Program, Provincial Health Services Authority
Irene Rathbone Child Health BC
Barbara Selwood West Shore Health Unit, Vancouver Island Health Authority
Anita Vallee Perinatal Services BC, Provincial Health Services Authority

Plus several representatives from the Ministry of Health, Ministry of Children and Family Development, and the Ministry of Education
BC Government personnel who participated in the 2008 project include:

**Ministry of Health**
- **Healthy Children, Women, Seniors and Injury Prevention:** Joan Geber, Tessa Graham, Matt Herman, Janice Lidstone, Erin O’Sullivan, Lisa Rogers, Carla Springinotic, Anita Vallee, Lori Wagar, Kristen Yarker-Edgar
  - **Other:** Lisa Forster-Coull, Leah Davidson, Tristan Davis, Toby Green, Andrew Hazelwood, Debbie Leach, Linda Poirier, Pete Rose, Craig Thompson, Dr. Malcolm Williamson, Lori Zehr

**Ministry of Education**
- Catherine Jensen, Susan Kennedy

**Ministry of Community Services**
- Debbie Anderson

**Ministry of Children and Family Development**
- Melanie Gordon, Jana Harley, Lynne Hol, Susan Perkin, Sandy Wiens, Lara Woodman

**Public Affairs Bureau**
- Laura Stovel

We also appreciate the feedback provided by our 2008 parent focus groups from:
- Pacific Spirit Community Health Centre, organized by Radhika Bhagat
- Northern Interior Health Unit, organized by Michelle Fitt
- Knee-Waas House, Port Alberni Friendship Centre's Urban Aboriginal Early Childhood Development Program, organized by Lori Gardiner and Jackie Wells

A special thanks to all those who provided reference photos for the illustrations.

Fifth Revision (2017)
Thank you to all the health professionals and other experts who contributed to the fifth revision of this edition.

---

Preface

Welcome to the second edition of *Toddler’s First Steps: A Best Chance Guide to Parenting Your 6- to 36-Month-Old Child* published by the Government of British Columbia. The first edition was published in 2002. This edition has been revised based on best practices and evidence and has practical information on child development, nutrition, health and wellness, parenting and safety. Early childhood health and development sets the foundation for well-being across the lifespan.

This information will help you provide the environment and support that contribute to your toddler’s optimal growth and development.

**Baby Friendly Initiative**
The second edition of *Toddler’s First Steps* has been revised to meet the Baby-Friendly Initiative criteria. The Baby-Friendly Initiative (BFI) is a global program of the World Health Organization (WHO) and UNICEF to increase hospital and community support for promoting, supporting and protecting breastfeeding. Accepted criteria have been established for designation of Baby-Friendly hospitals, maternity facilities, and communities.

More information on the Baby-Friendly Initiative can be found at:
- [www.unicef.org/programme/breastfeeding/baby.htm](http://www.unicef.org/programme/breastfeeding/baby.htm)
- [www.bcbabyfriendly.ca/](http://www.bcbabyfriendly.ca/)
How to Use this Handbook

How do you read a book? From cover-to-cover, or do you dip in and out seeking specific information? This book is designed for both types of reading. The following components will help you find the information you need, quickly and efficiently.

Contents
The table of contents will help you find a specific topic. Note that the book is divided into five main chapters:

- Child Development in the Toddler Years
- Healthy Eating for Your Toddler
- The Health and Well-Being of Your Toddler
- Parenting Your Toddler
- Toddler Safety

At the back of the book you’ll find:

Resources
Need a phone number or contact information? See the Resources on p. 159.

Index
Need to find a topic quickly? See the Index on p. 168.

Websites
Throughout this book, there are many references to Internet websites. If you do not have Internet access at home, go to your local public library for free use of a computer with access.

Page Arrangement
The layout will help you sort information quickly.

Key Points

Hand Sanitizer
Hand sanitizer gel works well when you don’t have access to soap and water. Just rub hands together until the gel is dry. The alcohol will kill the germs on your hands and your toddler’s hands.

Travelling Outside of Canada?
If your toddler is going outside of Canada, he may need extra immunizations for protection. Contact your doctor or public health office for more information.

What About Flu Immunizations?
Each year during influenza (flu) season, free flu immunizations or flu shots are offered to certain groups of people in B.C. All children aged six months to 23 months are encouraged to get a flu immunization. Caregivers (babysitters, grandparents, parents, other household contacts) of children from birth to 23 months of age are also encouraged to get a flu immunization.

If your toddler has chronic health problems, they may put her at higher risk if she gets the flu. So it is also important that she get an influenza immunization.

Talk to your doctor or public health nurse if you have questions about the influenza immunization.

Avoid using antibacterial soaps. They may add to the growth of “superbugs.” Superbugs are bacteria that are too strong to treat with antibiotics.

Wash your hands and his hands often, especially:
- After changing diapers or toileting
- After blowing a nose
- After touching animals or cleaning a litter box
- When tending a sick child
- When preparing food
- Before eating

Important information you need to know.

Interesting tidbits of information that can help you.

Stories from parents relating their experiences.
Introduction from Dr. Clyde Hertzman

“The first years last forever.” Our health, well-being, and coping skills throughout our lives are strongly affected by whether or not we get a good start. The period from conception to school age is especially important. During this time the brain develops rapidly. It organizes and reorganizes based on the stimulation, support, and nurturing that a child receives. By the time of school entry, a child’s brain will have been shaped by these experiences. One quarter to one third of Canadian children who enter school need extra support to help them successfully navigate school and life. The sad fact is that for the most part this can be prevented.

A wide range of early experiences affects a newborn:
- visual
- touch
- verbal
- smell
- emotional
- taste
- physical

Children who grow up in a stimulating environment have the best chance for a good start in life. We now know a lot about the kinds of early settings that work best. We know the value of reading to children. Taking the time to snuggle up with your child and read bedtime stories is one of the best things you can do. Children need chances to talk, to listen, and to explore their world through play. They need warmth and acceptance, and protection from teasing and punishment.

Effective parenting and care means making environments for children that have these characteristics. Children feel protected when they have a stable home environment and relationships that are close and supporting. They also need a sense of personal safety. But parents and carers cannot do it all alone. Parents and carers must have economic security and a work place that supports them.

They need neighbourhoods that are safe and caring of children. High-quality, affordable child care and family support programs make a big difference, too. It is with these thoughts in mind that this book has been developed. Its aim is to provide parents and carers of children ages 6 to 36 months with practical information on how to best support, encourage, and help their toddlers to grow and develop to their full potential.

Original text provided by Dr. Clyde Hertzman (1953-2013)
Founding Director, Human Early Learning Partnership of British Columbia

2017 updates to text provided by Pippa Rowcliffe
Deputy Director, Human Early Learning Partnership of British Columbia

Introduction from Child Health BC

Toddlers are citizens in their own right. They are key to the future success of British Columbia. Our children trust us with a huge responsibility as their parents, grandparents and caregivers. They rely on us to provide a safe, nurturing and stimulating environment for them. We all take this responsibility very seriously. In return, and to our great fortune, we get a loving response for our efforts.

Infants and toddlers go through astonishing development in a short period. This development covers physical, intellectual, cognitive (including hearing, speech and language), emotional and behavioural growth. In each of these areas of development there are milestones. These milestones act like building blocks that must be in place before children can move to the next higher level. The final goal is that children reach the point where they can make their own lifelong contributions to their families and communities.

Toddler’s First Steps is a wonderful companion for this adventure. Health-care providers, early childhood educators and child development specialists worked together to create this reference for the early years of life. We encourage all parents, grandparents and caregivers to enjoy its content. Please discuss it with those who partner with you in providing care to your toddler. Use it to generate your own questions regarding your experiences with your toddler.

You will find that most toddlers thrive in our environment. They’ll continue to surprise and enrich you as they move through this unique period of development. However, we need to be aware of when to expect toddlers to move through the stages of development. We must recognize when to ask questions about their behaviour, language development and the other aspects of normal childhood development. If we don’t, we might not identify issues early. This can have important consequences for a child.

You will find many answers to your questions in this book. It can be a great help in understanding the amazing journey of your toddler’s growth and development.

Use this opportunity to its fullest!

Maureen E. O’Donnell MD MSc FRCPC
Executive Director, Child Health BC
Associate Professor, Department of Pediatrics, UBC

A network which includes all health authorities, key child-serving ministries, health professionals and provincial partners dedicated to improving the health status and health outcomes of British Columbia’s children and youth.
Getting Started

Welcome to the world of parenting a toddler. As you travel on this joyful journey of growth and development with your toddler, you will see amazing changes in her. You will teach her and she will teach you. This is an exciting partnership for all. Welcome to this wonderful world!

Learning About Your Toddler

Attachment

Attachment is one of the key factors in raising a happy and confident child. Attachment is the coming together of a child and a parent (or caregiver) in a close and connected relationship. When a child is attached to a parent in a healthy way, he feels safe, secure and protected on physical, emotional and mental levels. The parent senses and responds to his cues (or what he needs and wants). Attachment occurs gradually over time, through day-to-day actions and routines.

When you respond to your toddler in a loving and accepting way time after time, he learns that someone is there to support and protect him. This is especially important when he is sick, hurt or upset. He then feels free to explore the physical and social world with confidence. He knows he can return to the safety of a parent if something frightens or overwhelms him. Knowing this, he can take full advantage of opportunities to learn new skills. The basis of a secure attachment is that the parent always offers a safe place from which to explore the larger world.

There are many things you can do to make sure your toddler develops a secure attachment.

It is important that you respond to your toddler in a loving and accepting manner time after time when she is sick, hurt or upset. This will make her feel confident and secure.
Gettting Started

Provide Comfort
As you grow with your toddler, you will learn to read her signals and determine when she is in need of comfort. She may become upset if she is sick, hurt or lonely. She will want you to reassure, rock or hold her. If you can respond this way regularly and predictably, your child will learn that she is safe when you are around. Be responsive, sensitive and available, as much as you can.

Respond and Notice
Your toddler needs to know that he is important and that you will respond to him. He needs not only to be comforted when upset, but also to be given attention. He wants you to spend time with him and to help him with problems. Find activities that you both enjoy. Spend time talking with and listening to him, asking him how he feels about things and taking him places. Read stories, go for walks and play games together. Show interest in his activities and spend lots of one-on-one time with him. Tune in to your toddler, and let him take the lead. Keep these activities warm and intimate, even if they are sometimes brief.

Provide a Sense of Trust
Strike a balance between being sure your toddler is safe and encouraging her to explore the world in a trusting manner. Instil a sense of trust in your child by letting her know you believe that she can do things. Keep your home and environment as safe as possible, to allow your toddler to explore. Protect her independence without abandoning her. For example, when she learns to crawl or walk, you can let her go off a short distance, but make sure you remain nearby so she can return to you. Do not expose your toddler to scary accounts of tragic events or acts of violence on a screen. If she does have a frightening experience, give her lots of support and talk about what happened.

Review and Re-enact Experiences
Talk with your toddler about things that have happened in his life. As he gets older, tell him stories about when he was small. Show him photos of when he was younger, and answer any questions he may have. These memories can give him a sense of his past and create a feeling of security.

If your toddler goes through a difficult event, talk to him about it. Review it, play it out and discuss it when he is willing and able to do so. This can help avoid nightmares and trauma. Events, such as the birth of a sibling or a friend leaving town, are important, and it helps to talk to him about these events. If you are going through the same trauma as your toddler, you may not be able to talk about it. If this is the case, it is important to find professional help for both you and your toddler.

Create Warm Memories
Keep good memories alive. Make a photo album and look at it with your toddler. Maintain a collection of her crafts and artwork. Keep a diary of her achievements. Make videos and keep a record of special events. Establish family traditions; they help her feel secure and able to look forward to things.

Provide a Sense of Security
Being away from your toddler once in a while will help his sense of attachment, but these separations need to be handled well. When leaving him with someone else, set up a goodbye ritual and leave with confidence. Provide him with some things to do while you are away. Give him a photo of yourself, a security blanket or familiar toys to keep him calm. Let him know when you will return, and make sure to come back on time.

If your toddler is very upset about being away from you, try to do it gradually. Remain present during part of the first few days.
Be Predictable and Positive
Be as predictable as you can, to provide your toddler with an additional sense of security. Keep to a routine for meals, bedtime and so on. Establish clear rules and follow through on them. Always comfort and soothe your toddler if she is sick, hurt or upset.

Excerpted from the AboutKidsHealth website. AboutKidsHealth provides trusted answers from The Hospital for Sick Children for families’ health questions. www.aboutkidshealth.ca

Temperament
Every person has a temperament, including your toddler. Temperament is his distinct nature or character; it is “who he is.” Some children’s temperaments are obvious right from birth, while others will show over time. Your toddler’s temperament may be seen in a number of ways, such as activity level, how predictable he is, how he reacts to new situations and how he adapts to things. Does he react strongly or mildly to events? Is he easily distracted or can he focus well? What’s his attention span like? How is his general mood?

Your temperament may not be the same as your toddler’s. If you’re active and out-going, it may be harder for you to understand his if he is quiet and shy. If you love to spend time alone, it may be hard for you if he always wants to play with you or other children. Learning to accept and work with his temperament rather than trying to change it will make both your lives easier and more pleasant. Your home environment and who your toddler spends time with will have some effect on his temperament, but it is mostly just an inborn part of the kind of person he is. Your job is to find ways to support him.

Supporting Your Toddler’s Temperament
Try this exercise: If you are right-handed, take a pen in your left hand, and if you are left-handed, take the pen in your right. Now write your name and address. How did that feel? Difficult, uncomfortable, slow, unnatural, that you are not doing as good a job as you know you could? Now imagine trying to live your life that way. Forcing your toddler to be someone she’s not is just as difficult for her as this writing exercise was for you. She may, with practice, be able to act in a certain way, but this won’t be easy or feel natural to her. Understand that your toddler’s temperament is not her choice, but rather how she naturally feels about things.

Here are some ways you can try to understand and work with your toddler’s temperament:

- Try not to label her temperament. A child who grows up with the belief that she is shy or not good in sports will tend to live up to those expectations.
- Be prepared to change your ideas of what you may have thought she would be like. Boys are not always rough and tumble and not all girls like to play with dolls. Let her lead you to discover her talents and preferences.

Ways to Help Your Toddler Work With His Temperament
Try to find ways to help your toddler direct his tendencies into positive activities. This will make him more comfortable and will help him to learn ways of working with his temperament.

- A toddler who tends to be shy or slow to warm up may take longer to get used to a new playgroup. You can help by letting him sit with you and watch until he’s ready to join in. Supporting his temperament does not mean that he can do whatever he wants. But allowing him to join in at a slower rate or to play in a different way helps him to develop those skills he will need.
- If your toddler has lots of energy, provide ways for him to move around as much as possible and safely explore the world using his body. He may excel in sports or dance, or just simply enjoy running around the backyard for an hour. If he must be still for a period of time, give him something to do with his hands, such as playdough, or have him turn pages in a book or push a toy on his lap. Play games that give your toddler the chance to move. Let him help you around the house with chores and other tasks.

Learning about My Toddler
A nurse told me a really great trick to learn about my toddler. All I had to do to get to know Mike was to get down on the floor with him and quietly watch what he was doing. Then I was to ask myself, “What is he thinking?” as he played on his own. Sometimes he would get frustrated and ask me for help, but other times he could solve a problem all by himself. I learned a lot about him from this simple act of quiet watching.
• If your toddler tends to be easily frightened, talk to him about his fears. Even if his fears seem silly to you, they are very real to him. Together think of ways to overcome fears, such as checking the closet together for monsters or holding him on your lap when near a dog. Let him know that you believe he can learn to cope with his fears. “Someday I bet you could be friends with that dog if we visit him often and get to know him.”

• If your toddler is sensitive, bright lights and loud noises may bother him. Try to dim the lights and reduce noise from the radio or television. If tags in his clothing or wrinkles in his socks bother him, try to adjust his clothing so he feels better. Ignoring requests for clothing to be adjusted or noise to be decreased won’t cure him of his sensitivities. He will only continue to be distracted by the discomfort and be unable to focus well on other tasks.

• If he has a strong reaction to new situations, try breaking new things down into simple, small steps, such as “This is how you sit on your bike, this is where your feet go, and this is where your hands go” instead of “Jump on and let’s ride.” Simplify your life—don’t take him to places where he must stay quiet or sit for a long time. Restaurants and shopping malls may be too difficult for a spirited child at this age. Also, give plenty of warning before any change, such as leaving the park or bedtime. Be sure to praise his behaviour when he does well in difficult situations. Try to be as specific with your praise, such as “I like how you shared the blue truck with your friend.”
For a toddler of any temperament, it is important to provide routines and rituals so he will know what to expect. Being able to predict daily routines may keep stress lower in times of change. Meaningful rituals may provide a sense of belonging and foster a sense of who he is.

Temperament is your toddler’s way of being in the world, both socially and emotionally. How you and others respond to his temperament can impact how he feels about himself as he grows.

**Growing as a Parent**

Your toddler is not the only one who will be growing and learning during the first 36 months of her life. You, too, will experience change and growth in your role as a parent. Remember to take time to celebrate your successes as you learn new parenting skills.

Your family, friends and other experienced people can support you and help you understand and meet the changing needs of your growing child. Remember, “It takes a whole village to raise a child.”

**Here are some general tips that can help support you to parent a toddler:**

- Keep learning. With each new stage of her growth, you will be learning new parenting skills. To keep learning, you could try parenting classes, talk with other parents, read books on parenting and find out more about child development. (See the Child Development chapter on p. 9 for more information.)

- Find out how to get the help your family needs. Talk to your health-care providers or other professionals you connect with to learn how to get what you need for your child and your family. These could include additional income, extra child care or help if your toddler has special needs. Your community offers many resources, from toddler playgroups to swimming lessons. Check the Resources chapter to find out what resources are available. (See p. 159.)

- Stay healthy and active. Check the state of your own health regularly, and try to get 30 to 60 minutes of moderate physical activity every day. Eat a healthy diet. Eat a balance of food from the four food groups, as outlined in *Eating Well with Canada’s Food Guide*. (See p. 151.) Pay attention to your emotional well-being, and seek help if you are depressed or overwhelmed. (See p. 113 for more information on perinatal depression.)

For more information about parenting your toddler, see p. 103.

**Key Points**

**Growing as a Dad**

Many men want to be active dads. They want to be involved in the care of their children right from the start. They want strong emotional bonds with their children.

For information about fathering, including information for teenage fathers, see “Fathering” in the Resources chapter.
Child Development in the Toddler Years

You may have heard the saying “the first years last forever.” This means that the experiences that your toddler has in the early months and years of life affect her health, well-being and coping skills for the rest of her life.

The Five Areas of Child Development

During the toddler years, your child will go through a time of rapid change in all areas of development. Many experts divide child development into five areas: physical, social, emotional, cognitive and language.

The different areas of development are closely linked. The progress your toddler makes in one area affects – and is affected by – the progress she makes in another area. No one area of child development is more important than any other.

Many things affect your toddler’s growth and development, including:
- the genes she inherited
- the kind of nurturing and support she receives from you and her other caregivers
- her experiences in your home and community

Learning about child development can help guide your parenting. The following table describes each area of child development. It also gives you some parenting suggestions for each area.

Portions of content provided by Invest in Kids.
http://fcssa.org/resources/invest-kids
Physical Development

Usually divided into gross and fine motor skills.

Gross motor skill is the control of the large muscles that he needs for physical activities such as sitting, crawling, walking, running, climbing and jumping.

Fine motor skill is the control of the muscles in the hands and fingers. It also covers hand-eye coordination, needed for actions such as reaching for and picking something up.

Parenting Suggestions

Help him develop gross and fine motor skills through physical activity.

He’ll do well when you:
• Create safe, interesting places and activities for him to explore and be active in.
• Respond to him with physical affection (hugs and cuddles). Physical touch helps his brain release hormones that he needs to grow.

Social Development

Learning to make friends and get along with others.

Parenting Suggestions

Help her learn to cooperate, trust and become confident with others.

She’ll do well when you:
• Respond as often as you can when she shows that she wants help and attention.
<table>
<thead>
<tr>
<th>Emotional Development</th>
<th>Cognitive Development</th>
<th>Language Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning to know, show and begin to manage a full range of feelings.</td>
<td>Learning to think, remember, imagine, gather and organize information, solve problems and develop judgment.</td>
<td>Learning to communicate through talking and listening.</td>
</tr>
</tbody>
</table>

**Parenting Suggestions**
Help her learn to see emotions in herself and others, and how to show feelings. She’ll do well when you:
- Help her know and show her feelings.
- Comfort her often.
- Set reasonable limits and consequences.

**Parenting Suggestions**
Help him become a lifelong learner. He’ll do well when you:
- Give him safe and stimulating chances to play.
- Play with him.
- Praise and encourage him.

**Parenting Suggestions**
Help her develop language skills. She’ll do well when you:
- Tell her stories and talk to her.
- Listen to her and encourage her to talk.
- Read to her as much as you can.
- Sing and play with her.
- Respond to her signals, such as cries, sounds, movements and eye contact.
Child Development by Age

The overall pattern of child development is the same for most toddlers. Most reach the milestones of development at about the same pace. However, sometimes a toddler will develop more quickly or more slowly than expected.

The following charts show the skills you are most likely to see at each stage. They will also give you ideas about how you can support your toddler’s healthy development.

Keeping Track of Your Toddler’s Development

As a parent, you are the best source of information about your toddler’s development. If you have concerns about your toddler’s development, talk with a public health nurse at your local public health office or make an appointment with your child’s doctor or nurse practitioner.
Physical Development

What Your Toddler Is Likely to Do

- Sit steadily without help for longer periods.
- Sit and bounce on his bottom.
- Push up from his tummy onto his hands and knees, and rock back and forth.
- Sit up by pushing from a crawling position with his arms at his sides.
- Crawl or move by shuffling on his bum.
- Help when you pull him up to a standing position.
- Stand firmly on his legs when held in a standing position.
- Progress from holding things in his palm to using his thumb and first and second fingers.
- Rake at tiny objects with his hands.
- Pick up larger objects with his fingers.
- Chew or gum finely minced foods (six to seven months).
- Feed himself small pieces of food (by nine months).
- Pick up, hold and control an object using both hands.
- Explore objects by grabbing, shaking, sliding and banging them together.

Other Things Your Toddler May Do

- Pull himself up using furniture.
- Move by rolling to where he wants to go or turning in circles on his stomach.
- Stand by himself while holding on to your hands. He may then put one foot in front of the other.
- Extend his arms to keep from falling backwards.
- Lower himself to sitting from a hanging-on position.
- Craw up stairs.
- Step sideways while holding on to furniture.
- Throw objects.
- Build a tower of two blocks.
- Point with his index finger.
- Poke his fingers into holes or anything that looks interesting.
- Take objects out of containers.
- Release objects with no fuss.

How You Can Help Physical Development

- Continue to breastfeed.
- Get down on the floor at his level.
- Provide safe places for him to crawl and explore.
- Encourage movement. For example, put some distance between you and him when playing on the floor, put toys just a bit out of reach, or hold his hands and go for a walk.
- Give lots of opportunities for “tummy time” and crawling. (See p. 15 for more information on tummy time.)
- Provide soft pieces of food for snacks and meals to develop finger control and chewing skills.
- Offer him a spoon (but he won’t be able to use it correctly).
- Roll a ball back and forth on the floor with him while he’s sitting.
- Make noisemakers with plastic bottles for him to grasp and shake.
### Social Development

**What Your Toddler Is Likely to Do**
- Play social games, such as peekaboo or patty cake.
- Want to take part in activities with people.
- Point to things for a reason.
- Seek attention.

**Other Things Your Toddler May Do**
- Show fear of people he doesn’t know.
- Begin copying what he sees, such as sticking out his tongue or opening his mouth.
- Show he feels some control over his life. For example, he may show you a toy but won’t give it to you.
- Learn to protect himself and his things.
- Won’t do something he doesn’t want to do. For example, he may push a spoon away when you try to feed him.
- Focus when doing something, ignoring other things that are going on.

**How You Can Help Social Development**
- Continue to respond when he shows that he wants help or attention.
- Keep to regular routines.
- Model good manners: use “please” and “thank you.”
- Play “seeking” games to help him understand he is not part of you: “Where’s Liam?”
- Play with him and invite others to play too.
- Join a playgroup for parents and toddlers.
- Follow his lead; let him decide what to do.
- Go slowly. Help him approach new people by following his pace.
- Have him eat at the table with you and others.

### Emotional Development

**What Your Toddler Is Likely to Do**
- Show strong feelings about likes and dislikes.
- Laugh.
- Not want to be away from you or other caregivers.
- Show fear (possibly by crying) if he is scared.

**Other Things Your Toddler May Do**
- Look worried about loud noises, such as vacuum cleaners, loud stern voices or banging.
- Show clear likes or dislikes for certain people, objects or places.
- Be sensitive to other children and perhaps cry if they cry.
- React to other people’s moods. If you are sad, he may cry. If you are happy, he may laugh along with you.

**How You Can Help Emotional Development**
- Continue to breastfeed.
- Make lots of eye contact and smile at him.
- Hold and comfort him, especially when he is upset, sick or hurt.
- Create and stick to routines.
### Cognitive Development

**What Your Toddler Is Likely to Do**

- Notice the size of objects, reaching for smaller objects with her finger and thumb and larger objects with both hands.
- Know whether objects are near or far.
- Understand how objects can be used. For example, she may bang blocks on the floor, shake a noisemaker harder or push buttons on a toy.
- Search briefly for an object when it is taken away from her.

**Other Things Your Toddler May Do**

- Drop objects and then look for them.
- Understand the concepts of “in” and “out.” For example, she may drop several large beads in a cup, dump them out, and repeat.
- Use problem-solving skills. For example, she may pull the string of a pull toy to get it closer.
- Start to combine known behaviours in new ways. For example, she may reach and crawl at the same time.
- May think of herself when she sees a child in photos or a mirror.

**How You Can Help Cognitive Development**

- Continue to breastfeed.
- Give lots of praise for her new skills.
- Give him a range of objects or toys (fill and dump toys; toys for stacking, nesting and sorting; toys with a variety of textures, shapes, sounds, colours and weights; childproof books). (See p. 41 for more information on toys.)
- Read toddler books with her.
- Play copy games, such as sticking out your tongue or banging a pan.
- Play hide-and-seek games.
- Play in-and-out games, such as putting blocks in a container and taking them out.
- Dance, play music and sing with her.

---

**Child Development**

**Crawling and “Tummy Time”**

Putting your child on her tummy for some supervised play time helps her get ready for crawling. Tummy time is when you lay your child on her stomach or side when she is awake. Your child can be on the floor, on a safe firm surface, on your lap or on your chest. It is a time when you can show her toys or pictures, sing or talk, or massage her back. When on her tummy, your child pushes up with her arms and raises her head in order to see around. Tummy time will help your child develop the upper body strength needed for crawling. Crawling usually develops between six and eight months.

Until she can roll over on her own, put her to sleep on her back to decrease the chance of sleep-related infant death. (See p. 84 for more information on safe sleeping.)
### Language Development

<table>
<thead>
<tr>
<th>What Your Toddler Is Likely to Do</th>
<th>Other Things Your Toddler May Do</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Say several sounds (ma, mu, da, di, ba) all in one breath.</td>
<td>• Turn to listen to familiar sounds, such as the telephone.</td>
</tr>
<tr>
<td>• Babble/repeat sounds (da-da-da, ga-ga-ga).</td>
<td>• Look at you when you say his name.</td>
</tr>
<tr>
<td>• Respond to some words, such as “Mommy,” “Daddy,” or “ball.”</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Other Things Your Toddler May Do

- Recognize familiar words like “uh-oh.”
- Do simple things, such as showing you a ball or waving goodbye, when asked.

### How You Can Help Language Development

- Talk to him whenever you can. This is how he’ll learn language: “Let’s change your diaper,” “Let’s find your doll.”
- Respond to his babbling sounds with the words he is trying to say. Say “mama” or “dada” when he gets close to the words.
- Give names and labels to things that catch his attention.
- Use simple sentences to talk about what each of you is doing: “We are looking at the cat,” or “Daddy is throwing the ball.”

---

### Just Out of Reach

When our daughter, Maya, was just starting to crawl and move around, I would get on the floor and sit or lie just out of her reach with a toy. She would work hard to reach the toy and me. I would then talk about the toy: “What a great teddy. Yes, it’s teddy bear.” Then I would pick up another toy and move a few feet away. Again, she would work away to get to me. It kept her occupied and active, and helped her learn words. If I were tired at the end of the day, I would lie there reading a book until she got to me. We both were happy.
## Physical Development

### What Your Toddler Is Likely to Do

- Turn in a circle when sitting.
- Twist to pick up objects.
- Stand by flexing her knees and pushing off from a squat.
- Walk while holding on to furniture.
- Walk when supported by both hands.
- Crawl up stairs.
- Crawl very well.
- Use the tip of her index finger and thumb to pick up small items.
- Put objects in and take them out of containers.
- Point, poke, touch and pry with her index finger.
- Place one block on top of another.
- Give objects to another person, if asked.
- Hold and try to use a spoon.
- Chew small pieces of food.

### Other Things Your Toddler May Do

- Walk, with one hand held.
- Squat down, stoop, bend over, then get up.
- Crawl up and down stairs.
- Climb two or three steps without help.
- Drop down from a standing to a sitting position.
- Use both hands freely.
- Pull off socks and hats.
- Hold large felt markers and make marks with them.
- Build a tower using two blocks.
- Feed herself with a spoon and drink from a lidless cup.

### How You Can Help Physical Development

- Continue to breastfeed.
- Provide lots of encouragement.
- Go for walks outside and give her practice walking with your support.
- While playing on the floor, place favourite toys just far enough away so that she has to reach for them.
- Let her practise climbing a few stairs, making sure you support her from behind or by holding her hand.
- Increase the variety of foods and textures. Place small pieces of food on her plate or tray.
- Offer water to drink from a cup.
- Show her how to place building blocks one on top of another.
- Create a safe play space in the kitchen with lots of different-sized plastic containers, bowls, wooden spoons and other objects.
- Play finger games with her, such as *Round and Round the Garden*.
- Introduce her to toys that require handling, such as activity tables or toys that make a noise when a button is pressed.
### Social Development

**What Your Toddler Is Likely to Do**
- Know when a parent likes or dislikes her behaviour.
- Hold out her arms and legs while being dressed.
- Mimic simple actions.
- Imitate other children.
- Repeat sounds or movements that made you laugh.

**Other Things Your Toddler May Do**
- Show fear of strangers.
- Dance to music.
- Know routines.
- Try different ways of getting attention, such as copying sounds.
- Enjoy being the centre of attention.

**How You Can Help Social Development**
- Respond to her calls or signals for help and attention to build her trust.
- Create and follow regular routines.
- Provide her with chances to play with other children and to be around people.
- Model good manners: use “please” and “thank you.”
- Talk about what happens next in routines or upcoming events.
- Provide safe places for her to explore.

### Emotional Development

**What Your Toddler Is Likely to Do**
- Seek comfort when upset.
- Show many emotions, such as being sad, happy, mad, scared, hurt or uncomfortable.
- Show distress when she does something wrong.
- Show that she always needs to be within sight and hearing of the caregiver.
- Display affection in hugs, kisses, pats and smiles.

**Other Things Your Toddler May Do**
- Cry when you leave her with other caregivers.
- Show empathy, such as starting to cry when another toddler cries.
- Express a desire to do things herself.
- Show like or dislike of certain people or toys.
- Show discomfort when fearful or stressed.
- Express new fears and insecurity with situations that were fine before.

**How You Can Help Emotional Development**
- Continue to breastfeed.
- Cuddle her.
- Make lots of eye contact and smile at her.
- Comfort her, especially when she is upset, sick or hurt.
- Create routines and structure in her day.
- Offer choices you are comfortable with. For example, “Do you want this cup or that cup?”
- Turn everyday routines into playful moments.
- Talk about her emotions: “I see you are feeling sad/happy/frustrated.”
- Ask her for hugs and kisses.
## Cognitive Development

### What Your Toddler Is Likely to Do

- Try to find objects that you have hidden.
- Try out new actions to reach the same goal, or change old actions through trial and error.
- Connect animals with actions and sounds, such as meows, barks or chirps.
- Copy the actions of others.
- Develop stronger memory skills.

- Become aware of parents as separate people from herself. She may point when asked, “Who’s Mommy? Who’s Daddy?”
- Recognize her own name, when spoken.
- Start to see cause and effect, such as the fact that things fall when dropped.
- Match shapes. For example, she may place a cube in a matching square hole.

### Other Things Your Toddler May Do

- Enjoy looking at pictures.
- Point to the correct parts of the body when asked where they are.
- Know that smaller objects fit into larger ones.
- Search more for hidden objects.

- Repeat an action that gets a reaction, such as knocking over blocks.
- Put two ideas together, such as going to another room to get a toy and bringing it back.
- Leave an activity and return to it later.

### How You Can Help Cognitive Development

- Continue to breastfeed.
- Praise her new accomplishments.
- Keep adding to the range of objects/toys you are providing for her.
- Play action games in which you and she take turns. Try blowing kisses, clapping or playing peek-a-boo.

- Ask her to help you find lost objects.
- Talk about cause and effect: “You dropped Teddy, so now Teddy is on the floor.”
- Read toddler books with her.
- Play music for her and encourage dancing and movement.

---

**Copy and Learn**

Whenever my friend, who was a teacher, would come to visit us, she would take the time to talk with our 10-month-old. She would also pull out keys, toys or whatever and say the names of them carefully. Often our son would copy her and say the word (or something like the word). It was a good example of what I needed to be doing every day. I would just get busy and forget how kids copy and learn so much from us. She didn’t need to tell me to do it. I just watched and copied her, just like our son did.
Play Dates

When our daughter was little we used to have play dates with other kids the same age. We moms would all laugh about it being a “play” day – the kids didn’t really play with each other. It was the moms who loved it the most. We would visit, talk and share stories and tips. Gradually, the kids got old enough to actually play with each other. It was the moms who formed the strongest bonds. We still get together now.

Early Literacy

Early literacy does not mean trying to teach your toddler how to read or write. Reading, talking, chanting, singing and having conversations with your toddler are the best ways to build early language and literacy skills.

Language Development

What Your Toddler Is Likely to Do

- Babble in long, repetitive strings.
- Understand simple sentences, questions and requests, such as “Please give the book to Daddy.”
- Take turns making sounds with you.
- Copy speech sounds.
- Respond to her own name.
- Point and talk to specific objects.

Other Things Your Toddler May Do

- Copy sounds, such as “bow-wow” or “woof.”
- Use a few words: “no,” “baby,” “bye-bye,” “Mommy,” or “Daddy.”
- Use simple words with matching gestures. For example, she may say “no” and shake her head or say “bye-bye” and wave.
- Use a single word to express a whole thought, such as “more” for “I want more.”
- Talk less while learning how to walk.

Other Things Your Toddler May Do

- Talk to her whenever you can.
- Respond to her babbling sounds with the words she is trying to say.
- Continue to introduce new words to her.
- Talk to her while doing regular activities and tell her what you are doing.
- Describe her actions. For example, “You stacked the blocks into a tower.”
- Read to her every day.
## Physical Development

### What Your Toddler Is Likely to Do

- Walk alone.
- Crawl or walk upstairs one step at a time, holding on to a railing or your hand.
- Push and pull toys while walking.
- Squat to pick up a toy without falling.
- Climb by himself on things (for example, chairs and tables) or climb by himself out of things (for example, cribs, high chairs and strollers).
- Give an object to another person if asked.
- Pick up and eat small pieces of food.
- Drink from a cup.
- Turn a container upside down to get something out.
- Turn pages of a book.
- Stack three or more blocks.
- Scribble with a big crayon.
- Give an object to another person if asked.
- Pick up and eat small pieces of food.
- Drink from a cup.
- Turn a container upside down to get something out.
- Turn pages of a book.
- Stack three or more blocks.
- Scribble with a big crayon.

### Other Things Your Toddler May Do

- Walk down stairs holding a railing, placing both feet on the same step.
- Try to kick a ball.
- Ride toys.
- Run, but fall and run into things.
- Walk backwards.
- Feed himself with a spoon.
- Throw a ball forward.
- Begin to unlatch, unscrew, open and take apart things.
- Squeeze, poke and pat playdough.
- Copy simple lines drawn on paper.

### How You Can Help Physical Development

- Continue to breastfeed.
- Spend lots of time playing outdoors in safe places. Try running and kicking balls.
- Play favourite music or songs and encourage dancing.
- Build an obstacle course for him to crawl through using boxes, chairs, big pillows and other objects.
- Provide different-sized balls to kick and play with.
- Let him feed himself with small pieces of food at mealtimes.
- Offer him plastic bowls for stacking and nesting.
- Provide big crayons and lots of paper.
- Provide pots with lids to encourage matching.
- Help him solve simple, large-piece jigsaw puzzles.
Social Development

What Your Toddler Is Likely to Do

- Love being the centre of attention.
- Begin to show a sense of humour.
- Play best by himself.
- Be unlikely to share toys.
- Copy adult activities, such as driving a car, reading or cooking.
- Separate himself from you for brief periods of time.
- Change his food likes and dislikes often.

Other Things Your Toddler May Do

- Strongly resist the limits you set.
- Cooperate, or not.
- Want to do things on his own.
- Fight with other children as he is learning to share.

How You Can Help Social Development

- Create and stick to regular routines.
- Offer choices you are comfortable with: “Do you want to put your coat or your shoes on first?”
- Have happy goodbye routines when you and family members leave each other.
- Give him chances to help with chores. He could put clothes in the laundry basket, pick up toys or put away clean clothes.
- Provide regular chances for him to play beside children the same age.
- Don’t force him to play with other children.
- Play with him and teach sharing.
- Use “yes” and “no” to clearly set reasonable limits. Briefly explain your reasons and be consistent.
- Model good manners: use “please” and “thank you.”

Emotional Development

What Your Toddler Is Likely to Do

- Enjoy familiar places.
- Boldly explore and try new things.
- Take risks, if a trusted adult is present.
- Identify himself in a mirror or photo.
- Hug and kiss parents and other very familiar people and pets.
- Enjoy being the centre of attention.

Other Things Your Toddler May Do

- Show jealousy when attention is given to other family members.
- Get frustrated easily.
- Display a sense of owning toys and people.
- Enjoy older children but not play with them.
- Have a security toy or blanket.

How You Can Help Emotional Development

- Continue to breastfeed.
- Comfort him, especially when he is upset, sick or hurt.
- Set reasonable limits and consequences.
- Provide many chances for happy moments, such as family meals and bedtime routines.
- Give him many chances to feel successful.
- Provide chances for him to play on his own.
- Talk about emotions: “You seem to be really happy!”
- Read stories and look at pictures that focus on emotions.
- Talk about changes in routines.
### Cognitive Development

#### What Your Toddler Is Likely to Do

- Realize things still exist even when he cannot see them.
- Find things in pictures when asked.
- Learn about the world by touching and moving things. He may fit things into holes, mix and dump sand, or stack items and knock them down.
- Expect events to follow in routines and be predictable.
- Follow simple directions, such as “Come and show me the ball.”

#### Other Things Your Toddler May Do

- Group similar things, such as socks, shoes or blocks.
- Use imagination in play. For example, he may move toy trucks around on the floor.
- Handle playdough, crayons and paints.
- Show understanding of some colours and shapes.
- Show increased memory skills by asking for something you took away earlier.

#### How You Can Help Cognitive Development

- Keep adding to the range of things that you give him to play with.
- Talk about events and people that he remembers.
- Count things together in books and find the same things in your home.
- Point out colours and shapes when you talk to your toddler.
- Give him simple directions: “Put your truck and doll in the toy box, please.”
- Make special books with him and read or enjoy them together.
- Read toddler books with him and encourage him to talk about and point to the pictures.
- Encourage him to make music and dance with shakers, pots and pans.
### Language Development

#### What Your Toddler Is Likely to Do
- Point to show you something.
- Understand far more words than he can speak. For example, he can point when asked, “Where’s your belly button?”
- Use a vocabulary of five or more words to make short expressions such as “all gone.”
- Use “no” correctly, often with a shake of his head.
- Try to sing songs.

#### Other Things Your Toddler May Do
- Begin to understand basic sentences.
- Name pictures in a book.
- Use one word to name things he sees or say what he wants. For example, he may say “More” for “I want more.”
- Copy animal sounds.
- Use his own name to refer to himself.
- Follow simple directions.
- Look at what you are talking about.
- Start combining words to form two-word sentences. For example, “Mommy ball!” for “Mommy, I want the ball.”

#### How You Can Help Language Development
- Expand on his language: If he says “Doggie,” you say “Yes, that is a dog.”
- Read to him as often as you can.
- Complete his sentences. For example, if your toddler says, “Daddy going…,” say, “Daddy is going to the car.”
- Read and sing nursery rhymes.
- Encourage him to point out things in picture books.
- Give him books to look at.
- Use different voices and lots of expression when reading to him.
- Monitor your use of “no,” and use it only when needed for safety.
- Keep a diary of the words he says. It may surprise you how quickly he learns language.

---

**Hugs and Kisses**

We used to have a goodbye routine whenever one of us left for the day. We called it our “group hug,” or as our toddler Taylor called it, our “dup ugh.” We would all hug and say, “Let’s kiss Daddy,” “Let’s kiss Mommy,” and then, “Let’s kiss Taylor.” It was fun, took a minute and made leaving easier for everyone.
Physical Development

What Your Toddler Is Likely to Do

- Ride on a small-wheeled toy.
- Carry a large toy while walking.
- Kick a ball.
- Squat while playing.
- Walk backwards or sideways while pulling a toy.
- Back into a chair to sit down.
- Remove lids from containers.
- Nest cups and boxes inside each other.
- Take off her shoes, hat and socks.
- String large beads with two hands.
- Raise and drink from a cup, then put it back on the table.

Other Things Your Toddler May Do

- Walk on tiptoes.
- Throw and go get objects.
- Jump in place with both feet.
- Catch a large ball.
- Open doors by turning knobs.
- Copy straight or circular strokes with a crayon.
- Snip with child-sized scissors.
- Fold paper in half.

How You Can Help Physical Development

- Continue to breastfeed.
- Spend lots of time playing outdoors in safe places, like a toddler playground. Try running and kicking balls.
- Look for child-sized versions of adult things, such as furniture, a soccer ball, a plastic baseball and bat, or garden tools.
- Try toys that allow pushing and pedalling with feet.
- Play with her by pretending to be an animal: “hop like a frog, fly like a bird, jump like a rabbit.”
- Say her movements and actions as she does them. If she climbs the stairs, say, “You're climbing the stairs.”
- Play different kinds of music for her to dance to, such as marches, rock 'n' roll and waltzes.
- Encourage her to dress and undress on her own.
- Only help when needed.
- Provide lots of containers during bath time.
- Offer activities that require the sorting of shapes.
- Offer things like finger paints, paints and easels, ride-on toys and push-pull toys.

Child Development
### Social Development

**What Your Toddler Is Likely to Do**

- Enjoy playing alone for short periods of time.
- Act like she owns certain objects.
- Like to do things without help.
- Help with simple household chores.
- Have trouble sharing. Say “no” and “mine.” May hit, push and grab to keep toys.

**Other Things Your Toddler May Do**

- See herself as a separate person. She may say, “No me do it.”
- Put on simple clothing without help.

**How You Can Help Social Development**

- Use everyday routines such as walks and mealtimes to talk about family and friends.
- Talk to her ahead of time about new routines and events: “At playgroup, we will sing songs and listen to stories.”
- Introduce her to a playmate.
- Watch her while she is playing with other children. At this age she will be better at playing beside rather than with another child.
- Talk about the play of other children: “Look, Kim is building a block tower.”
- Let her help with chores, such as cleaning up spills, putting clothes in drawers or putting away toys.
- Model good manners: use “please” and “thank you.”

### Emotional Development

**What Your Toddler Is Likely to Do**

- Show concern for others.
- Show fear, but she can be settled down.
- Change between doing things on her own and wanting help or comfort.
- Be watchful around adults she doesn’t know.

**Other Things Your Toddler May Do**

- Have mood swings and tantrums.
- Show aggressive behaviours such as biting and hitting.
- Say “no” a lot, especially if she hears “no” a lot.
- Sometimes share food, toys and other items.
- Become familiar with routines.
- Be unhappy about any changes in routines.
- Develop new fears.
- Have a security toy or blanket.

**How You Can Help Emotional Development**

- Continue to breastfeed.
- Have fun with her. Laughing together builds good feelings.
- Talk about her emotions: “Your tears tell me you are feeling sad.”
- Suggest ways to deal with feelings: “When you feel angry, come and get a grown-up for help.”
- Sing simple songs about emotions, such as *If You’re Happy and You Know It.*
- Read stories that explore emotions, and talk about them.
- Offer her choices to help her cope with her feelings: “You’re feeling sad, do you want to cuddle or be alone?”
- Talk about how others feel: “John is sad because you took his truck.”
- If she hurts another child, explain: “You cannot hurt others.” Redirect her activity.
**Cognitive Development**

**What Your Toddler Is Likely to Do**

- Use things the way they are supposed to be used. She may put a telephone to her ear or use a comb for her hair.
- Understand the passing of time and the meaning of phrases like “not now” or “when we go home.”
- Recognize and name familiar people in photos.
- Show increased memory for details and routines.

**Other Things Your Toddler May Do**

- Explore the concept of counting.
- Understand the idea of “more than one.”
- Show great interest in checking any new person, thing or sound.
- Understand two-part requests, such as, “Please go to the shelf and bring back the blocks.”

**How You Can Help Cognitive Development**

- Continue to breastfeed.
- Praise her successes.
- Watch her to learn what toys she needs. She will outgrow toys that are too simple. She might also ignore toys that are too hard for her to use.
- Notice what toys she used to like but is no longer interested in.
- Keep adding to the range of things that you are providing for her.
- Offer art supplies, such as crayons and markers for use on paper.
- Offer simple puzzles with two to four pieces.
- Point out familiar sounds, such as car horns, dogs barking or fire truck sirens when walking or playing outside.
- Help challenge her skill levels, when she’s ready. For example, if she can stack three blocks almost every time, give her a fourth to try.
- Talk about numbers: “There are two blocks in the pail.”
- Talk about time: “We are going over to Grandma’s tomorrow.”
- Talk about colours: “Here is your red ball.”
- Read toddler books with her and encourage interaction with pictures.

**Learning all the Time**

While I watched the evening news, my 18-month-old daughter, Aimee, jumped up from playing on the floor. She grabbed a magazine from the coffee table across the room and brought it to me. This was just after the reporter spoke about the picture on the cover of that same magazine. I was amazed. I suddenly realized that although Aimee was barely able to talk, she understood so much more than I thought she did!
Talk, Talk, Talk
I always talked to my daughter, Chloe, about anything and everything we were doing. Even when she was just under a year, we’d be crossing the street and I would say, “Is it safe to cross? Let’s look for cars. Look, there are no cars, it’s safe. Let’s go.” Or when we were getting groceries, I’d talk about the fruit: “This one is not ripe enough,” or “This apple is nice and red. Let’s buy this one.” I wasn’t surprised when Chloe talked at an early age. I think all the talking really helped her learn words.

Language Development

What Your Toddler Is Likely to Do

- Use two- to three-word sentences: “More milk please.”
- Recognize about 200 words.
- At 18 months, say about 20 words (they do not have to be clear).
- Ask for help using words or actions.
- Talk in a run-on flow of words while talking to stuffed animals or herself. The words may not make sense.
- Name some pictures in a book.
- Copy new words and phrases you say: “Go bye-bye.” “Grandpa’s car.”

Other Things Your Toddler May Do

- Sing simple songs with words and actions.
- Begin to be understood by others outside the family.
- Start to use plurals.
- Use the past tense.
- Copy or request new words.

How You Can Help Language Development

- Ask simple questions starting with “what” or “where.”
- Read to her as often as you can.
- Build upon what she says. For instance, if she says, “cat,” respond with “Yes! That’s a black cat.”
- Listen carefully to her and try to find the meaning in what she says by asking her questions.
- Point out the names of things around your home and outside.
- Take her to the library to get books and stories on tapes or CDs.

To Do

Read, Sing, Rhyme, and Tell Stories
Nursery rhymes help toddlers learn language patterns. Tell stories to spark your toddler’s imagination. Try Itsy Bitsy Spider.
### Physical Development

#### What Your Toddler Is Likely to Do

- Walk backwards and sideways.
- Walk upstairs and downstairs alone, placing both feet on one step.
- Run without falling.
- Jump in place, lifting both feet off the floor.
- Climb on a riding toy and make it move using both feet at the same time.
- Scribble, holding a crayon in his whole hand.
- Copy drawing up-and-down and side-to-side and horizontal lines.
- Build a tower of five or more blocks.
- String beads, picking them up with his thumb and index finger.
- Remove lids by turning his wrist.

#### Other Things Your Toddler May Do

- Walk on a narrow balance beam.
- Walk upstairs and downstairs using one foot and then the other, holding the handrail.
- Run without bumping into things.
- Jump forward.
- Pedal a simple tricycle.
- Begin to use thumb and fingertips when holding a crayon.
- Copy drawing a cross or a circle.
- Fold paper.
- Use small safety scissors to snip paper.
- Remove unbuttoned clothes and zip up zippers.
- Begin to show an interest in using the toilet.

#### How You Can Help Physical Development

- Continue to breastfeed.
- Play different music and dance with him.
- Spend lots of time playing outdoors in safe places, like toddler playgrounds. Try running and kicking balls.
- Encourage him to try new movements, such as jumping, rolling, stretching, marching and walking.
- Set up some plastic bottles for bowling pins so he can knock them down with a ball.
- Play simple movement games where he can stop and go, change directions and move quickly or slowly.
- Sing songs like *If You’re Happy and You Know It*, name body parts and do different actions.
- Praise his drawing efforts and describe the markings you see.
- Provide him with chances to practise dressing skills, helping him with buttons and zippers only when he needs help.
- Make playdough with him and create different shapes together.
- Supply him with costumes for pretend-play, including hats, shoes, coats and pants.
- Offer art materials, such as markers, crayons, finger paints, paints and an easel.
- Offer ride-on toys and push-pull toys.
- Provide puzzles of different sizes, colours and number of pieces.
- Invite him to help with simple cooking jobs, such as adding vegetables to a salad or stirring with a spoon.
## Social Development

### What Your Toddler Is Likely to Do
- Try to do more independently. For example, he may say, “No! Me do it!”
- Enjoy playing near other children (parallel play). However, he is probably not yet able to play with other children (cooperative play). (See p. 38 for more information on types of play.)
- Have trouble sharing. Say “no” and “mine.” May hit, push and grab to keep toys.
- Become aware of the difference between boys and girls.

### Other Things Your Toddler May Do
- Act shy around strangers.
- Pull hair, hit or bite other children when upset.
- Willingly help put things away.
- Accept new people, if you have talked to them.
- Begin to start playing with others.
- Show patience.

### How You Can Help Social Development
- Provide chances to play with other children, but keep it on a one-to-one basis.
- Teach him to practise sharing by using toys as examples: “Dolly’s sharing her blocks with Teddy.”
- Explain how conflicts make other people feel sad, angry or frustrated.
- Share quiet times together by reading, telling stories or cuddling.
- Give lots of praise for positive behaviours: “I think you’re doing a great job putting your toys in the toy box.”
- Provide chances for him to do things without help.

## Emotional Development

### What Your Toddler Is Likely to Do
- Move back and forth between doing things by himself and wanting help.
- Demand his own way much of the time.
- Want routines.
- Connect feelings to language and pretend-play. For example, he may roar like an angry lion.
- Have many strong feelings that he has trouble expressing.

### Other Things Your Toddler May Do
- Show clear likes or dislikes for certain people, objects or places.
- Be more sensitive to other children and cry if they cry.
- React to other people’s emotions.
- Have a security toy or blanket.
- Have tantrums.
### How You Can Help Emotional Development

- Continue to breastfeed.
- Encourage him to show his emotions and talk about them: “It’s OK to cry. Can you tell me what’s making you sad?”
- Move him to a quieter place when he is having difficulty coping with his emotions.
- Provide chances for pretend-play with dolls and stuffed animals to help practise emotional responses.
- Give him chances to do things by himself, such as getting dressed and helping with chores.
- Read books that show how children or animals experience a range of emotions, such as jealousy, anger and affection.
- Talk about how his behaviour may affect others: “You took away Tommy’s toy, and now he has no toy to play with. I think this has made Tommy feel sad.”
- Let him know ahead of time when you will be interrupting his play: “In five minutes it will be time to be put on our coats and pick up your sister from school.”
- Encourage breathing exercises for self-regulation.

### Cognitive Development

#### What Your Toddler Is Likely to Do

- Pretend-play with others.
- Begin to match and sort shapes, pictures and some colours.
- Understand that things are different shapes and sizes.
- Become aware of the sequence of numbers, when spoken.
- Show an increased attention span.
- Begin to solve problems by trial and error.

#### Other Things Your Toddler May Do

- Sort groups of objects into sets.
- Complete simple puzzles.
- Combine toys and games in more complex ways, such as using playdough in dramatic play.
- Understand the concept of future time (soon, tomorrow) but not past time (yesterday).
- Begin to understand one-to-one actions, such as setting one plate per person.
- Recall past experiences.

#### How You Can Help Cognitive Development

- Continue to breastfeed.
- Praise his successes.
- Keep adding to the range of objects and toys that you are providing.
- Give him a broader range of art supplies and ask him to talk about the drawings and colours.
- Allow time for him to solve a problem; don’t rush to help.
- Include shapes and colours in daily routines.
- Let him fill in the blanks while singing a song or reading a book.
- Play matching games. For example, match jars and lids together, or sort a mix of puzzle pieces and crayons back into their separate boxes.
- Read toddler books with him and encourage interaction with the pictures.
- Play singing and actions games with music.
Encouraging Different Languages

If your family members speak more than one language, consider passing on this gift to your toddler. Here are some strategies:

• Use two languages from the start. For example, one parent or caregiver can use one language while the other parent or caregiver uses another language.
• Or, use only one language at home, and your toddler can learn the second language in the community, at daycare or at playschool.

### Language Development

**What Your Toddler Is Likely to Do**

- Use personal pronouns such as “I,” “me,” and “you.”
- Put together simple two-word sentences.
- Say his first and last names.
- Answer simple questions, such as, “What’s your name?”
- Enjoy looking at books and talking about the pictures.
- Sing parts of songs.
- Ask many questions.

**Other Things Your Toddler May Do**

- Use words that describe, such as “big,” “dirty,” “wet,” or “hot.”
- Talk more in interactions and during stories.
- Know and say details about himself, such as his name and age.
- Understand two-step directions: “Please go into the kitchen and bring me the big spoon.”
- Recite a few simple nursery rhymes.
- Use plurals in a general way. He will likely say “foots” instead of “feet.”

**How You Can Help Language Development**

- Talk and read to him whenever you can.
- Listen to audiotapes and CDs of nursery rhymes together.
- Use correct pronouns in sentences. For example, instead of saying, “Mommy is going out,” say, “I am going out.”
- Show him that you are interested in what he says by repeating what he says.
- Look at family pictures with him and use simple sentences to describe what is happening: “This was Sarah’s birthday party.”
- Play language games, such as “Where Is Your Ear?”
- Be prepared to answer a lot of questions.
Physical Development

What Your Toddler Is Likely to Do

- Take part in group activities that include running, galloping, crawling, rolling over and twirling around.
- Walk on a narrow beam, putting one foot in front of the other for a few steps.
- Run without bumping into things.
- Climb the ladder of a slide or other play equipment.
- Pedal a tricycle.
- Hold a pencil as if to print.
- Copy drawing a cross, circles, dots, small lines and swirls.
- Cut paper with small safety scissors. However, she may not be able to cut along a line.
- Turn pages of a book one at a time.
- Turn handles and doorknobs.

Other Things Your Toddler May Do

- Walk forward and backward on a narrow beam.
- Ride a tricycle, steering well and using the pedals.
- Kick a ball so it sometimes goes where she wants.
- Throw a ball overhand with fairly good aim.
- Take part in circle games with many players, such as musical chairs, hokey-pokey or The Farmer in the Dell.
- Scribble with pencils, crayons and markers.
- Draw squiggles and say that’s her name.
- Join in songs and finger plays.
- Play with different manipulative toys (toys that she can hold and move), such as connecting straws, snap blocks or folding paper.
- Put on and take off clothes.

How You Can Help Physical Development

- Continue to breastfeed.
- Cheer her on when she tries new physical challenges, making sure of safety.
- Set up a big target for her to aim at when throwing or kicking a ball.
- Be physically active with her by playing tag or rolling down a hill.
- Play music and provide colourful scarves to move and dance with.
- Show her movements like galloping and twirling by playing “follow the leader.”
- Show her pictures of different animals and ask her to move like them: “Show me how you move like a fish!”
- Create a simple obstacle course with blocks and hoops.
- Praise her skill at drawing, dancing, climbing and other activities.
- Let her turn the pages of the book while you are reading to her.
- Provide writing and art supplies, such as pencils, markers, crayons or chalk. Supervise the activity and only give a few supplies at a time.
- Help her cut out small pieces of paper to use as tickets for a puppet show.
- Provide different kinds of dress-up clothes with snaps, buttons and zippers.
- Talk about safety rules and explain how to use playground equipment carefully.

Child Development
# Social Development

## What Your Toddler Is Likely to Do

- Show affection openly, for example, by hugging and kissing.
- Use social language, such as “please,” “thank you,” and “bye-bye.”
- Play with others and take turns more easily.
- Play make-believe games and create imaginary characters.

## Other Things Your Toddler May Do

- Copy adult behaviours, such as shopping, banking, parenting, breastfeeding or cooking.
- Create an imaginary friend to talk to.
- Be more comfortable around new adults.
- Help other children to do things.
- Develop skills such as taking turns, sharing and using words instead of fighting.

## How You Can Help Social Development

- Introduce her to familiar neighbours and community workers.
- Show affection with hugs and loving words.
- Praise good behaviour. Instead of saying “good girl,” say, “Sharing your teddy with Kim was very kind.”
- Provide chances to play with other children.
- Encourage her to wash, dress and feed plastic dolls to teach caring for others.
- Encourage imaginary play. Join in with questions: “Is the tea ready?”
- Make sure you are nearby to help her solve problems when playing with other children.
- Make sure a trusted adult is close by when children are playing.

# Emotional Development

## What Your Toddler Is Likely to Do

- Be upset with major changes in routines.
- Know and respond to other people’s feelings.
- Become more comfortable with new people.
- Want to do things by herself, but she may fear new experiences.
- Want approval and need praise.

## Other Things Your Toddler May Do

- Explain her feelings when asked about them.
- Understand the feelings of other children and talk about them.
- Stamp her feet when frustrated.
- Ask you to tell certain stories to help deal with her fears.

## How You Can Help Emotional Development

- Continue to breastfeed.
- Praise her new skills and when she does something without help.
- Accept her feelings and talk about them.
- Give and use words for feelings: “disappointed,” “hurt,” “thrilled,” “excited.”
- Talk very simply about your own feelings as examples.
- Listen to and understand her fears.
- Sing songs and read stories about emotions. Talk about the feelings of a story’s characters and why the characters might feel that way.
### Cognitive Development

**What Your Toddler Is Likely to Do**

- Compare sizes of things and use words like “bigger,” “smaller,” and “really little.”
- Try to play-act her thoughts and ideas. For example, she may pretend to be a dinosaur.
- Count three objects.
- Match and sort similar pictures and objects.
- Enjoy creative movement.

**Other Things Your Toddler May Do**

- Make a plan before taking action. For example, she may search for needed felt-board pieces before playing.
- Notice changes in nature, such as a seed that she planted growing a sprout.
- Use words related to time, such as “sleep time.”

**How You Can Help Cognitive Development**

- Continue to breastfeed.
- Praise her successes.
- Keep adding to the range of things that you give her.
- Provide dress-up clothes and props.
- Give her a broader range of art supplies. Try sticks, cotton balls, paper and cones.
- Use laundry time as a chance to talk and sort clothing.
- Provide more complex puzzles with three to six pieces.
- Cook with her and explore different foods. Always remember to be safe in the kitchen!
- Continue to talk about time, shape and colour concepts.
- Encourage her to tell stories.
- Encourage creative moves to music.
- Teach and play singing games like Ring-Around-the-Rosie and London Bridge.
- Occasionally, ask your child “what do you think?” or “why might that be?”
The “Why” Game
Some days I would get tired of hearing my toddler ask “why” for what seemed like the hundredth time. I started answering, “Well, why do you think the sky is blue?” or “What do you think?” It seemed to make him stop and think for himself for a minute. He still asks why, but I can get him to participate more with different answers that make him think, too.

Language Development

What Your Toddler Is Likely to Do

- Ask a lot of questions.
- Tell stories, sing nursery rhymes and do finger plays.
- Repeat five-word sentences.
- Talk to adults and other toddlers and be understood.
- Talk to herself about recent events and make-believe characters.
- Use social words: “please,” “thank you,” “hello.”
- Name most body parts.

Other Things Your Toddler May Do

- Use and understand direction and position words, such as “around,” “backwards,” “forward,” “inside,” and “underneath.”
- Comment on pictures in books.
- Show an understanding of story plots and act them out using puppets or dolls.
- Answer complex questions, such as “What is this?” or “How did you do that?”
- Respond to requests: “Go find your coat, please,” or “Please get a paper towel.”

How You Can Help Language Development

- Take time to talk to her and ask about the things that interest her.
- Sing number songs and rhymes like Five Little Monkeys.
- Ask open-ended questions: “What did you see on your walk?”
- Be prepared to answer lots of questions.
- Instead of always answering her questions, occasionally ask: “What do you think?”
- Make up silly rhymes.
- Invent songs.
- Read to her often.
Independence

Developing a sense of independence is an important step for toddlers. Independence is when your child does something by herself. This usually starts to happen between 12 and 36 months of age. Your toddler is starting to learn that she can control herself, her body and sometimes those around her. She will love learning new skills and enjoy doing things by herself, including making choices.

When your toddler is learning to be independent, you will notice an increase in her willpower and self-control. You may feel frustrated when she wants to do things “her way” and not yours. However, you can also see it as a sign of her healthy development.

To help your toddler learn to be independent:
- Encourage her to do things by herself even if she fails or it takes extra time.
- Let her do whatever she can on her own, from dressing to washing, and encourage her efforts.
- Give her simple choices, such as choosing which cup to drink from.
- Encourage new activities that she has a good chance of doing well at.
- Let her be successful and build her confidence. Give her time to repeat each skill she learns so that she feels successful. For example, give her two blocks and let her stack them successfully before you give her a third block to add to the stack.
- Avoid shame and ridicule.

Empathy

Empathy is understanding and caring about how others feel. Teaching your toddler how to feel and show empathy is an important part of helping him develop into a responsible and caring person.

You can help your toddler develop empathy for others by:
- Responding to his needs and those of others in a caring, kind and fair way. You are the most important role model of empathy.
- Using positive discipline with the goal to teach. (See p. 104 for more on disciplining your toddler.)
- Reasoning with him to help him understand how his actions can affect others. If he has hurt or upset someone, teach him why this is hurtful and what he can do to make it better: “When you hit your sister, it hurt her and made her sad. Please check on her to see if she is okay.”
- Teaching him to share and be kind to others. “Look how happy Jessica is because you gave her a toy. That was so nice of you.”
- Encouraging him to talk with you about his feelings.
Play

Play is the work of toddlers. It is one of the most important ways your toddler learns and develops. She discovers and learns to understand the world around her through play. It also helps her see how everything and everybody relates to each other. As a parent, you can provide the safe environment for play.

Experts recommend that parents support toddlers to:

- Play actively. Toddlers need at least 60 minutes of physical activity every day to help build strong bones, muscles, heart and lungs. (See p. 77 for more on physical activity.) Try dancing, jumping, running, rolling and skipping.
- Play with other children, when possible, to help them learn social skills like cooperating and sharing.
- Play in ways that help them to learn about the world around them.
- Play in ways that foster creativity and self-expression.

Types of Play

Children can learn through different kinds of play. You’ll probably see your toddler play in the following ways:

**Solitary Play**
This is when she plays by herself. All children like solitary play at times.

**Parallel Play**
This is when she plays beside another child without interacting. She will, however, observe the other child and often imitate what they do. Toddlers enjoy parallel play.

**Imitative Play**
This is when she copies another child and they copy her. One toddler starts to jump and soon they are all jumping. Or you are folding clothes and she tries to do the same.

**Social Bids**
This is the first step toward having fun with others. Well before the age of 24 months, she will offer toys, looks or words to other children. It’s her way of communicating.

**Cooperative Play**
As she gets older, she will start to play with other children. She might help to build a block village or take their stuffed animals to the doctor. Many children are not ready for this kind of play until they are 36 months of age or older.
## Skills Learned Through Play

By encouraging your toddler to play, you are helping her physical, emotional, social, cognitive and language skills to develop.

<table>
<thead>
<tr>
<th>Area of Development</th>
<th>Physical skills</th>
<th>Social skills</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>how to crawl, climb, walk, run</td>
<td>how to cooperate</td>
</tr>
<tr>
<td></td>
<td>how to make small fingers work</td>
<td>how to share</td>
</tr>
<tr>
<td></td>
<td>how to see</td>
<td>how to be a leader and a follower</td>
</tr>
<tr>
<td></td>
<td>how to hear</td>
<td>how to say please and thank you</td>
</tr>
</tbody>
</table>

| Emotional skills      | how to identify her feelings                                                   | how to deal with feelings                        |
|                       | how to tell others about feelings                                              |                                                 |

| Cognitive skills      | how to solve problems                                                          | how close or far things are                      |
|                       | how to make things work                                                         | how to imagine                                   |
|                       | how things feel and look                                                        | how to explore                                   |
|                       | how things affect each other                                                    | how to paint and draw                            |
|                       | how shapes, colours and numbers differ                                          |                                                 |

| Language skills       | the names for things                                                           | how to tell a story                              |
|                       | the words for some big ideas like love and share                               | how to listen                                    |
|                       | how to say a sentence                                                          | how things sound                                 |


Play by Age

Each toddler is unique and will develop at his own pace. However, the following are general guidelines of what you will notice at different ages.

<table>
<thead>
<tr>
<th>6 to 12 Months: Explorers</th>
<th>12 to 24 Months: Movers and Shakers</th>
<th>24 to 36 Months: Social Butterflies</th>
</tr>
</thead>
<tbody>
<tr>
<td>During this time, your toddler will use his body to make discoveries. He will begin to sit up, crawl, pull up and grab for everything within reach. He will start to understand cause and effect. He will also search for things that have become hidden – that may include you, as you go into another room. You will find yourself talking to him more and more as you begin to hear his first words. He will be busy dumping, stacking and pouring. This is a good time to give him balls, sturdy toys on wheels, blocks, nesting toys, rattles and bowls of different sizes.</td>
<td>Between 12 and 24 months, your toddler will go through big changes. Once she can walk, her play will become more complex. She will be able to handle smaller toys as her coordination improves. You will see her imagination develop, as she copies the things she hears and sees. You will also see her personality by the type of play she chooses. • Does she prefer quiet play or active play? • Does she tend to focus for quite awhile on a single task? or, • Does she do many tasks at the same time? At this age, she will still not be able to play with other children (cooperative play). However, she will be able to play beside other children (parallel play). This is a good time to give her balls to chase and later to kick and throw. It’s also a good time for toys to push, such as pop-up toys, or sit-and-ride toys.</td>
<td>Between 24 to 36 months, your toddler will become sociable and want playmates. Gradually, he will develop the skills to play with another child. Make sure you are nearby to help him solve possible problems when playing with other children. Your toddler will also show much more imagination. Encourage imaginary play; join in and expand the play with questions. This is also a good time to supply dress-up clothes and props.</td>
</tr>
</tbody>
</table>
Encouraging Your Toddler to Play

Your toddler will learn best when she can choose what she wants to do from a couple of options. Here are some ways you can encourage her to play:

- Let play be directed by her.
- Be playful. If you like to sing or dance or do puzzles, do these things with her.
- Use your imaginations in play. For example, pretend to be animals. Move and make noises like the animals.
- Follow the cues she gives you, such as “Roll ball, Mommy.”
- Provide a variety of toys appropriate for her age.
- Set aside time to play with her each day. If you are rushed, play singing, word and guessing games while you are doing other things.
- When you put toys out, put others away, instead of having them all out at once. She may find it too much to handle if there are too many toys to choose from.
- Encourage a mix of both active and quiet play.
- Read to her every day.
- Take her outside and watch her crawl over logs, inspect insects, pick grass or stones and explore nature.
- Let her help wash dishes, tear lettuce, dig in the garden, make beds or whatever else interests her. What looks like work to you may seem like play to her.
- Encourage her to do artwork, using her own ideas. This may be gluing clippings of colourful paper onto a board or smearing paint with her hands. She may need your help to get started and to understand what she can do with the materials. Then, let her be creative.
- Show her that you value her play by giving her lots of praise. Tell others how good she is at climbing, painting or building with blocks, and proudly show her work.
- Gently stop playing if she looks away or cries. She is probably tired, hungry or overstimulated.

To Do

Play at Child Care

If your toddler is in child care, she will be involved in lots of play. Spend some time observing this play when you have a spare moment. You might be able to pick up ideas for play at home. You can also see whether or not you think she is getting enough variety of play experiences. If you have concerns, talk with your child-care provider.

Toys

Many household items are perfect toys for children. Your toddler does not need fancy and expensive toys. He can use things like plastic bowls for filling and dumping, pillows for climbing or making a cave, and old clothing to play dress-up. Provide the old classics, like blocks, dump trucks, stuffed animals, toy hammers, play food, garages and farms. These toys are great for developing imagination. (See the following page for information on toy safety.)

“Natural” toys are free, fun and easy to find, too. Children love getting down and dirty with earth and clay, water, sand and stones. Playdough can substitute for clay. The bath is great for water play. (See p. 143 for more information on bathing and water safety.)
**Child Development**

**Family Stories**

**Keeping Toys for Older Kids Away from your Toddler**

When our daughter, Julia, was a toddler, we were worried about how we could keep her away from the small toys that our seven-year-old, Lucas, played with. We asked Lucas to take on the job of being the big boy in the house by helping keep his little sister safe. He said he would play with the smallest toys in his own room. This worked until we found Julia always crying outside the door. Lucas came up with the suggestion of putting a gate on the door so that she didn’t feel so shut out.

We helped out during the play times, too – while our son was playing, we spent time with her. We also did a daily sweep of the house to make sure no small parts of toys were lying around.

---

**Facts & Stats**

**Choking**

One-half of all toy-related deaths among children are caused by choking. Many of these choking deaths happen when children try to swallow marbles, small balls, small or broken parts of toys, or objects that are not meant to be toys.

---

**Toy Safety**

Check the size of toys. Any toy that fits completely into your toddler’s mouth is too small and can cause choking. Check that he cannot squash a larger toy, such as a sponge, into a smaller size and put it into his mouth. A good rule of thumb is that anything that can pass down the middle of a toilet paper roll is too small for a toddler. Toys should be at least 3.5 cm (1.4 in.) wide and 6 cm (2.4 in.) long.

- Make sure any paint on toys is non-toxic and cannot peel.
- To prevent strangling, don’t offer your toddler toys with strings, cords or ribbons that are longer than 15 cm (6 in.). Longer ties can get wrapped around his neck and cut off breathing. Cut these cords off before giving the toy to him. Be careful about other things that can act like cords, such as audiotapes, pull toys or skipping ropes.
- Avoid using polystyrene or Styrofoam material (egg cartons, packing materials, food containers) as toys. They can break into pieces and cause choking if your toddler puts them in his mouth.
- Check toys often for broken, sharp or loose pieces. Fix or throw out broken toys right away.
- Watch when your toddler plays with battery-operated toys. Make sure he does not take the batteries out of the toy. When the toy is not in use, store it and the batteries out of reach.
- Be very careful with balloons. They can cause choking for children of all ages. Always blow up balloons for children. Never allow your toddler to chew on any unused balloons or those that have popped. Throw away balloons that have gone flat, and do not let your toddler suck or chew on inflated balloons.

- Put toys away that are not being used to prevent tripping. If you use a toy box, check that the lid with not trap your toddler inside or slam down on his fingers or head.
- Make sure that any toy (or toy box) that is large enough for your toddler to climb into and has a lid or door also has a source of air such as air holes or cut-outs.
- When possible, give your toddler well-made toys. These last longer and are generally safer.
- Always read the safety information on a toy’s warning label. Choose toys that are recommended for your toddler’s age.
- To prevent suffocation, immediately throw away or recycle the packaging from new toys.
- Do not let noise from toys damage your toddler’s hearing. If you have to raise your voice to be heard above the noise level of a toy, the toy is too noisy.
Screen Time
It may be helpful to ask yourself if watching or using a screen (such as a tablet, smart phone, computer or television) helps your toddler grow and develop. Research and child development experts suggest that toddlers do not gain much from watching programs because only two senses are used: sight and hearing. Even programs shows created for young children often move too fast and are too much for your toddler to follow. Too much colour, movement and sound all at once does not support your toddler’s health and development. We know that childhood obesity is linked to screen time.

Choosing not to use screens gives you and your toddler quality time to do things that can help her be more creative, improve problem-solving skills and get more physical activity. Limiting or cutting out screens also lowers how much she will see advertising for unhealthy food choices, violent images and male and female roles that are stereo-typed. Research shows that children who watch a lot of shows are more aggressive – in both words and actions.

The Canadian Paediatric Society recommends no screen time for children under the age of two. They recommend a maximum of one hour a day of screen time for children ages 2–4, and less is better.

If you choose to let your toddler use screens here are some tips:

- Limit her viewing to programs on children’s channels or channels without commercials.
- Rent, borrow (from the library or friends) or buy children’s videos. Ask other parents or caregivers to give you names of suitable videos for toddlers.
- Set a limit on total screen time (including tablet, smart phone, computer and television use). Use a timer: when the timer goes off, her screen time is over – do not allow your mind to be changed.
- Discuss your decisions about screen time with those who care for her, like grandparents or child-care providers.
- Monitor violence in programs or games that others may be watching or playing while she is nearby. This includes television and radio news reports, which can be very violent and frightening. Television shows can be recorded and watched when she is not nearby.

Reading to Your Toddler
Reading aloud to your toddler can help his learning in many ways. Research shows that reading helps him learn new words as well as develop skills in listening, language and math. Reading also helps him develop imagination and creativity.

TV Violence
It is likely that by the age of 18 the average child has seen more than 200,000 acts of violence on television alone.

It’s Never Too Soon to Read!
I began reading to my daughter, Ava, when she was seven months old. I started with picture books that showed objects that I’d name for her. Soon she was repeating the names after me. Then, I’d point to the pictures and she’d say the names on her own. Later, we moved to very short picture books with a lot of repetition. Once again, I’d start leaving out words and she’d fill them in. By the time she started school, she could read many of these simple books by herself.
Influences on Children’s Sexuality
Parents and caregivers have wide-ranging values and beliefs about sexuality. These values and beliefs will affect the children in our lives. It can be very helpful to check in with your own values and beliefs and reflect on what are the key messages you want your children to receive from you about sexuality.

Hugs and Kisses
Allow your child to decide who they want to show affection towards. For example, don’t require your child to hug or kiss someone if they aren’t comfortable doing so. If we teach our children that they are able to choose who they can share their bodies with and then direct them to show affection to someone they are not comfortable with, it sends a mixed message.

Sexual Development

The way you touch, care for and talk about your toddler’s body sends him important messages about positive sexuality, self-worth and trust. Teach your child that all body parts are important. Use scientific terms for all body parts including genitals (for example: head, nose, elbow, vulva, scrotum, breast, penis). This gives children a working knowledge about all parts of their body and helps them to feel connected to their body and feel valuable.

Your toddler is curious about the world and that includes his own body and genitals. Here are some examples of typical behaviours you may see in your toddler.

Sexual Development by Age

Birth to 24 Months
- May enjoy being naked.
- May like to touch and explore his own body, including genitals.
- May experience a spontaneous erection or vaginal lubrication as a natural reflex.

24 Months to 36 Months
- May touch his genitals or masturbate. This could be for relaxation, self-soothing or because it feels good.
- Can identify whether someone is a girl or a boy.
- May explore bodies with a same-age playmate in a playful, curious manner (e.g., playing doctor).
- As children transition into independent bathrooming, genitals often become more interesting as children are more aware of body functions. Children may talk openly about their bodies including where pee and poop come from.

Masturbation

Although children as young as seven months will explore their genitals, it is more common in toddlers 24 to 36 months old. Genital investigation comes from natural curiosity. It is as normal for your toddler to touch his genitals as to explore his toes and fingers. Once they make this discovery, most children realize quickly that touching their genitals feels good. Reinforce that our genitals are personal areas of our bodies and if they want to explore them, it’s best to do that in a personal space such as bedroom or bathroom.

It’s important to begin to talk about the difference between public and private/personal behaviours. If he is touching his genitals in public and is old enough to understand, provide him with limits. Tell him what he can do in public and what he can do at home: “Some things are private. You can do that at home in your room – how about playing with this toy for now?”

Exploring Body Parts With Other Children

You may find your toddler exploring his genitals with another child of similar age (usually 36 months and older). If this happens, try to be calm. Simply comment on what the children are doing: “I see you two are looking at each other’s penises.” You can let both children know that their genitals are private and personal areas of their body and should not be touched or looked at by other people unless they have given them permission to do so. Ask them if they have any questions. Then re-direct the children to another activity.

An older child should not be exploring genitals with a younger child. The younger child usually sees the older child as more powerful. Calmly talk with him about what happened in order to get the facts. Reassure him that he hasn’t done anything wrong but remind him that no one should touch or look at his genitals without his permission. Talk to your doctor or public health nurse if you have concerns about your child being touched inappropriately by another child.
If You Have Concerns About Your Toddler’s Development

There may be times when you worry that your toddler’s development is not following the usual path. You may find that the milestones set out in the previous pages are different from what is happening with your toddler.

Your toddler also may have already been diagnosed as having a special health, developmental or behavioural need. As a result, it may be difficult to see how the usual developmental milestones relate to her. Children with special health-care needs do follow pathways of development in the same five areas of development. However, your toddler may reach milestones at a different pace.

Your toddler may also have been born early (preterm birth) or faced special health problems early in life; you may find that her health and development seem different from those of other children born at the same time. It is important to remember that a child born early or with health problems may develop differently during infancy and early childhood than other children the same age. These differences will become smaller as a child gets older.

Parents of children who had a serious illness at birth or were born very preterm are encouraged to follow their growth and development closely. Try to understand the developmental milestones to support and guide your toddler. Find members of the community who can provide you with help and support. Look to these resources, such as public health nurses, family physicians, parent and child groups, neighbourhood resource centres, infant development programs, HealthLink BC or child-care programs.

If you are concerned about your toddler’s development, talk to a doctor, public health nurse or child development professional in your community. It is important for health-care professionals to hear your concerns about your toddler’s development. They should follow up on your concerns. Follow-up might include watching your toddler playing, filling out a child development screening questionnaire with you, or referring you to another child development or health professional in your community.

To Do

Do you need more Information?
For more information on government support for children with special needs, visit the Ministry of Children and Family Development’s Special Needs Supports and Services web page. (See “Special Needs” in the Resources chapter for the web address.)
Healthy Eating for Your Toddler

You can help your toddler be healthy and eat well. Eating habits and attitudes will have an influence on his health and development throughout his life. Here are some ways to help him have healthy eating habits.

Key Ideas for Healthy Eating

**Feeding “jobs.”** A healthy feeding relationship is one where both you and your toddler have feeding “jobs.” Your “job” is to offer a choice of healthy foods at regular times each day. His “job” is to decide what to eat and how much to eat from the foods that you have offered.

**Let your toddler's hunger and fullness cues guide you.** He knows when he is hungry or full. Watching for and responding to his cues will help you understand how much food to offer.

**Continue breastfeeding to 24 months or longer.** The World Health Organization, Health Canada, Dietitians of Canada and the Canadian Paediatric Society recommend that you continue breastfeeding until your toddler is 24 months of age or older.

**Introduce your toddler to a variety of healthy foods.** By starting to introduce solid foods at six months, you can introduce him to a full range of foods that provide all the nutrients he needs to grow and develop into a healthy, active child.
Help your toddler develop healthy eating habits and attitudes. Family life is busy at the best of times. It can be hard to find the time to support your toddler in eating well and learning healthy eating habits. Here are some ways to help:

- Create a calm, relaxed eating environment. A calm and relaxed environment helps him eat well. Good food and good feelings will create the setting where he can learn healthy eating habits and attitudes.
- Eat together. Taking the time to sit down and eat with him shows him the importance of eating together. It also helps him develop important language and social skills. Right from the start, you can include him in the family meal by having him join you at the table.
- Be a healthy-eating role model. Modelling healthy eating habits yourself is a powerful way that you can show your toddler the importance of healthy eating. Healthy eating habits that you can model include:
  - preparing and eating a variety of healthy foods
  - eating at regular times
  - sitting down to enjoy your meal
- Offer your child up to 3 small meals and 1 to 2 snacks during the day. Try to serve meals and snacks at about the same time every day. A schedule of meals and snacks can help your child develop healthy eating habits and decrease the risk of tooth decay.

The Eating Relationship

Your toddler has a lot to learn about healthy eating. By choosing an eating relationship with feeding “jobs” and following her hunger and fullness cues, you can help her develop healthy eating habits. Children who experience healthy eating from an early age have the best chance to become lifelong healthy eaters.

Feeding Jobs

Thinking of yourself and your toddler as having feeding “jobs” can start you off on the right path toward healthy eating. Following the feeding “jobs” can also help to avoid fighting about food.

Your “job” is to:

- Offer a choice of healthy foods.
- Offer enough food.
- Offer meals and snacks at the same times each day.
- Watch and respond to your toddler’s hunger and fullness cues during meals and snacks.

Your toddler’s “job” is to:

- Choose whether to eat.
- Choose what to eat from what is offered.
- Choose how much to eat.

Hunger and Fullness Cues

Your toddler knows when she is hungry or full. She will usually give you signs, or “hunger and fullness cues,” to show that she does or doesn’t want to eat. By reading and responding to these cues, you can help her be healthy, eat well and enjoy food.

You can tell if she is hungry when she:

- Opens her mouth when offered food.
- Leans forward excitedly, kicks her feet or waves her hands when offered food.

You can tell when she has had enough food when she:

- Closes her mouth when food is offered.
- Turns her head away when food is offered.
- Pushes food away.
Your toddler's appetite will vary from day to day. Sometimes she will eat a lot and at other times she will have no interest in eating. By never forcing her to eat, you will support her in following her body’s own feelings of hunger and fullness.

**When the Feeding Cue Is “NO!”**

Sometimes you may get a strong “No!” from your toddler at a meal or snack time. If this happens, end the meal naturally and remind him when the next meal or snack will be offered. By doing this, you are supporting his feeding “job” of choosing whether to eat.

Here are some other helpful tips when the feeding cue is “No!“:

- Allow him to leave the table.
- Wait until the next regular meal or snack time to offer food or drinks.
- Avoid using dessert or other foods and drinks as a bribe for finishing food.
- Avoid using food for comfort. Try offering playtime, attention and affection instead.

Here are some questions that you can ask yourself if you are not sure whether your toddler’s feeding cue is “No”:

- Is he overtired, excited or sick? Schedule some quiet time or check out your suspicions.
- Is he full? Check the amount of cow’s milk or juice being consumed. More than 750 ml (3 cups) of cow’s milk per day leaves little room for food. Offer water between meals and snacks. Juice is not necessary. If you choose to give juice, offer no more than 125 ml (1/2 cup) of juice a day.
Breastfeeding Your Toddler

The World Health Organization, Health Canada, Dietitians of Canada and the Canadian Paediatric Society recommend that at the age of six months, you start to offer your toddler other food in addition to breast milk. Breast milk is still the healthiest food you can offer your toddler. Breast milk has many benefits and is not just for babies.

<table>
<thead>
<tr>
<th>Benefits of Breast Milk for Your Toddler</th>
<th>Benefits of Breastfeeding for Mom</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Breast milk:</strong></td>
<td><strong>Breastfeeding:</strong></td>
</tr>
<tr>
<td>• Is an excellent source of nutrition.</td>
<td>• Decreases the risk of certain cancers.</td>
</tr>
<tr>
<td>• Is the best type of milk for young children.</td>
<td>• May decrease the risk of osteoporosis.</td>
</tr>
<tr>
<td>• Helps prevent colds, ear infections and other infections.</td>
<td>• Costs less than formula.</td>
</tr>
<tr>
<td>• Helps your toddler develop healthy teeth.</td>
<td>• Is convenient and time saving (no bottles).</td>
</tr>
<tr>
<td>• May help prevent diabetes, heart disease and obesity later in life.</td>
<td>• Is environmentally friendly (no waste).</td>
</tr>
<tr>
<td>• May improve brain development (higher IQ).</td>
<td></td>
</tr>
</tbody>
</table>

Breastfeeding also helps you give comfort and cuddling, and be close to your toddler.

Breastfed children and many formula-fed children need a vitamin D supplement. (See p. 64 for more information.)
Healthy Eating

Frequently Asked Questions About Breastfeeding Your Toddler

You may have questions about how to enjoy and be successful at breastfeeding your toddler. Talking with other moms who are breastfeeding toddlers can be a great way to find answers to questions you may have.

Here are some frequently asked questions and answers about breastfeeding a toddler:

**Can I continue breastfeeding...**

**If I return to work outside the home?**
Yes. You will be able to breastfeed your toddler before you leave and when you see her after work.

Also, many workplaces support a breastfeeding mother’s need to change break times and the need for a private place where breast milk can be expressed. With a little planning you can store this milk and have it given to your toddler the next day. For more information, see the resource *Baby's Best Chance: Parent's Handbook of Pregnancy and Baby Care* (sixth revision, sixth edition), or visit the Healthy Families BC website, at [www.healthyfamiliesbc.ca](http://www.healthyfamiliesbc.ca). Check out the chapters on breastfeeding and working, and expressing and storing breast milk.

You can get help and advice on returning to work and breastfeeding. Contact your public health nurse, lactation consultant, La Leche League, or breastfeeding support group. (See “Breastfeeding” in the Resources chapter.)

**If I want my toddler to learn to become independent?**
Yes. In fact, some studies show that toddlers who are breastfed longer than 12 months achieve independence at their own pace and become more secure than children weaned at a younger age.

**If I have to take prescribed medication?**
Most medications are safe to take while breastfeeding, although there are a few medications that must not be taken while breastfeeding. In this case, your doctor may be able to prescribe something else.

If your doctor wants you to take a medication, be sure to say that you are breastfeeding. If you are unsure about a medication, your doctor, pharmacist and public health nurse are all good resources for information on medications and breastfeeding. You can also contact Motherisk toll free at 1 877 439-2744 for information on the safety of a specific medication while breastfeeding.

**In public?**
Yes. If you feel reluctant to breastfeed in public because of the comments or reactions of others, know that breastfeeding is a normal and healthy activity.

**If I get pregnant again?**
Yes. You’ll need to be extra careful to get enough nutrition for your unborn child, your breastfeeding toddler and yourself. Talk to your health-care provider or a public health nurse about taking a vitamin supplement to meet your need for extra vitamins.

**If I use alcohol, cannabis or street drugs?**
The safest choice is not to drink alcohol while breastfeeding. Alcohol may decrease the amount of breast milk you produce. Alcohol can affect your baby’s motor development and sleep. It can also decrease the amount of breast milk your baby takes at feeding time. Despite popular myth, it has been shown that drinking beer does not increase your milk supply.

Breastfeeding mothers who choose to drink alcohol should plan breastfeeding around it to prevent alcohol from reaching their baby. This may include pumping and storing milk before drinking and waiting until alcohol has passed out of their breast milk before breastfeeding their baby (approximately 2 – 3 hours per drink). There is no need to ‘pump and dump’ after drinking alcohol unless it is for comfort or to...
Healthy Eating

Family Stories

A Time to Love
The thing I love the most about breastfeeding my toddler, Noah, is seeing the "baby" in him still. When he is pulled in close to my body, skin on skin, I forget about the rough-and-tumble kid. I don’t see the boy who frustrates me when he colours on the wall or upsets his brother when he takes his toys. When I breastfeed, he is my baby once again, even if only for a moment. I know I am giving him the best gift ever.

Best Times
The best times of my day are when I get to breastfeed my 15-month-old, Kelsey before and after a busy day at work. It is a chance for us to connect, reinforce our bond and snuggle.

Vitamin and Mineral Supplements
If your toddler is eating a variety of foods from all the food groups, is growing well and looks healthy, he probably does not need extra vitamins or minerals, except for the following:

Vitamin D
Breastfed toddlers up to 24 months need 400 IU of liquid vitamin D each day. If your toddler drinks both breast milk and formula, he needs a liquid vitamin D supplement. If your toddler does not drink two cups of cow milk or eat a variety of other vitamin D rich foods every day, he may benefit from a vitamin D supplement of 400 IU. For more information about vitamin D supplements, call HealthLink BC at 8-1-1 to talk to a dietitian.

Vitamin D helps to build healthy bones and teeth. Vitamin D may also help prevent some chronic diseases later in life, such as diabetes.

In the past, when the dangers of too much sun were still unknown, toddlers made enough vitamin D from being in the sun. We now know they should be protected from the sun. Also, from October to March, 

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/

If my toddler bites me?
Toddlers bite while breastfeeding for many reasons. If your toddler bites, it does not mean that she should be weaned or you should stop breastfeeding. Try to determine why she is biting you. Is she teething? Does she have a cold or ear infection?

If your toddler bites you, remove her from the breast and firmly say, “No biting. Biting hurts mommy,” then try breastfeeding again. You may have to repeat this message a few times before the biting stops. She cannot bite while breastfeeding if she is properly latched onto the breast and sucking. If she tends to bite at the end of the feeding, remove her from the breast as soon as active sucking stops. You can also offer a teething ring for biting if her teeth are coming in. (See “Breastfeeding” in the Resources chapter.)

If I smoke cigarettes?
Cigarette smoking is not recommended if you are breastfeeding. Nicotine and other harmful ingredients in cigarettes pass through your breast milk. They can affect your toddler. Smoking can also reduce the amount of breast milk you produce. It may lead to earlier weaning. However, because breastfeeding is so good for a toddler, it is better to breastfeed than not. This is true even if you do not stop smoking. For more information, visit QuitNow.ca at www.quitnow.ca/
the Canadian sunlight is too weak for toddlers to make vitamin D. So they need the vitamin D in their food to meet their bodies’ needs.

**Other Vitamins and Minerals**
Iron is important for growth and brain development. If your toddler is not eating a variety of iron-rich foods or is a vegetarian or vegan, talk with your doctor about the risk of iron deficiency. (See p. 54 for a list of iron-rich foods.) Do not give your toddler cod liver oil or other fish liver oils. These oils are too high in vitamin A for toddlers. Too much vitamin A can be toxic.

If you give your toddler a vitamin and mineral supplement, choose one approved for his age. Speak to your pharmacist who can help you find the right one. Help keep your toddler safe from overdoses by not calling supplements “candy” or “sweets” and keeping them out of his reach.

---

**When Your Toddler Stops Breastfeeding**

As your toddler grows, she will learn to feed herself solid foods more and more independently. This begins the natural process of weaning. When she is ready, she will begin to wean herself from breastfeeding.

You do not have to wean her, it occurs naturally – she will gradually stop breastfeeding at her own pace.

Allowing your toddler to decide when to stop breastfeeding lets:
- You and her adjust more easily to the end of your breastfeeding relationship.
- Your body reduce the amount of milk it produces in a natural way, which will prevent your breasts becoming overfull and uncomfortable.

**If You Decide to Wean Your Toddler**
If you need or want to stop breastfeeding before your toddler completes the process herself, here are some tips on how to do it. The time it takes to stop breastfeeding will vary, depending on you and her. If possible, try not to rush the process. Mothers can find that breasts become sore and full of milk if they wean too quickly. Weaning gradually helps to give your body time to adjust to the reduced demand on breast milk production.

Here are some tips to help the weaning process be comfortable for both you and your toddler:
- **Plan:** Choose a non-stressful time to start. Starting to wean her on your first day of work or child care, or during a move, can add to the stress of these situations.
- **Start slowly:** Choose to replace one feeding every day for the first week. You may wish to pick the feeding that provides the least comfort for her. This is often the late-afternoon feeding. To provide enough nutrition, replace the skipped feeding with expressed breast milk and food.
- **Skip one more:** After one week, or when you feel comfortable, replace one more feeding.
- **Continue to skip:** Keep replacing one feeding per week with food and other fluids.
- **Last to go:** Last of all, replace the feeding that provides the most comfort. Often these are the morning and bedtime feedings. When you are ready to stop the morning or bedtime feeding, it may work best to have your partner or another family member take over the routines at this time.
- **Be ready to give more comfort and cuddles:** You may be looking forward to fewer demands on your time and energy when you stop breastfeeding. However, this most likely will not be the case. Your toddler may need more attention and love during and after
weaning. You may find that you are spending more
time holding, comforting and settling her.

**Changing From a Bottle to a Cup**

To make the change from a bottle to a cup easier, you
can use a cup with your toddler’s meals and snacks.
Start this when he is six months old. Using a bottle is
not necessary. Breastfed toddlers can begin using a
cup while continuing to breastfeed.

You may wish to slowly cut down the amount of milk
you give in a bottle for each feed. This way your toddler
may not notice the change. If he requests more to drink,
offer a small amount of water in a separate bottle.

To prevent choking and spills, ask your toddler to sit
down with you when he drinks from a cup. This is safer
than walking around with it.

Your toddler’s teeth may decay if he is still drinking
from a bottle filled with anything other than water.
This is especially true during rest and sleep periods.
Tooth decay can occur if he walks around with a bottle
during the day and always sips from it. (See p. 88 for
more information on how to prevent tooth decay.)

**Introducing Solid Foods**

The World Health Organization, Health Canada,
Dietitians of Canada, the Canadian Paediatric
Society and the Breastfeeding Committee of Canada
recommend that when your toddler is six months old,
you keep breastfeeding but also offer solid foods.

You will know she is ready for solid food when she:
- Sits and holds her head up.
- Watches and opens her mouth for a spoon and
closes her lips around the spoon.
- Does not push food out of her mouth with her
tongue.

**Choosing a First Food**

The best “first foods” are meat or an infant cereal
that is iron-fortified. Rice cereal is an example of an
iron-fortified cereal. (For more information on how
to prepare meat, see “Getting Started With Meat” on
p. 55.) To make sure your toddler is getting enough
iron, offer iron-rich foods at least twice a day.

**Iron-rich Foods**

Iron-rich foods include:
- Meats: beef, pork, lamb, veal
- Cereals: iron-fortified infant cereals
- Poultry: chicken, turkey
- Fish
• Tofu (cooked)
• Beans and other legumes
• Egg yolks

For more information about iron, see HealthLinkBC Files p. 163 in the Resources chapter.

**Gagging**

When toddlers try foods with more texture, they sometimes gag. This is a normal part of learning to eat. A toddler’s gag reflex is very sensitive – and very effective in preventing choking. Gagging is normal and healthy; your toddler is learning how to eat without choking. If he gags, don’t panic because it could startle him and make him afraid to try new foods. Stay calm and reassure him.

**Getting Started With Meat**

Mix water, mashed vegetables or gravy with meat to make sure that it is moist enough for your toddler to chew. Shredding or grinding the meat into very small pieces also helps make it easy to chew.

Ground meat is easier to chew. You can use it in casseroles, meat loaf or patties. If you are serving chicken, you can mince some of the dark meat, which is moister than the white meat. Fish is another good choice because it is tender and easy to chew.

To reduce the risk for food poisoning, cook meat well. When you cut into well-cooked meat or poultry, the juices should be clear, with no traces of pink.

Meat, fish and poultry are well cooked when they reach the following safe temperatures. Use a thermometer to check the temperature.

- **Beef (roast, steaks):** 63°C (145°F)
- **Ground beef:** 71°C (160°F)
- **Poultry (chicken, turkey):** 74°C (165°F)
- **Pork:** 71°C (160°F)

Or, safe and easy to remember: cook all meats to 74°C (165°F).

**Homemade Baby Food**

Both homemade baby food and store-bought baby food are options for feeding a toddler. To make homemade baby food, mash the foods your family eats. It is not necessary to purée your food. Even without teeth, your toddler can enjoy food that is well mashed.

Following these steps can help make sure that homemade baby food is safe:

- Wash counters and equipment with soap and water immediately after use. Clean with 5 ml (1 tsp.) of liquid household bleach added to 750 ml (3 cups) of water. It is especially important that you clean up after contact with raw meats.
- Discard worn cutting boards where germs can hide.
- Store leftovers for no longer than two to three days in the refrigerator. If you freeze leftovers, use frozen portions within two months.

**Safe Microwave Cooking and Reheating**

Following these steps for microwave safety will help protect your toddler from food or drinks that are unevenly heated.

- Cover, stir or turn foods at least once midway through cooking or reheating.
- Check the temperature of food by tasting it before giving it to her.
- When cooking foods in a microwave, heat them to a temperature at least 14ºC (25ºF) higher than what is recommended for other types of cooking.
- When reheating food in a microwave, heat to 88ºC (190ºF). Then allow it to stand covered for two minutes after heating.
- It’s safer to heat bottles in hot water because liquids heated in a microwave can heat unevenly.
Learning to Drink
At six months of age, a toddler can learn to drink from a regular cup. Sip cups don’t help your toddler learn to drink from a cup because most sip cups are just bottles in disguise. The valve to stop spills makes him suck rather than sip.

Instead of using a sip cup, encourage your toddler to sit down with you when he has a drink from a cup, rather than walking around with it. This will help prevent choking and spills.

Feeding by Age
The charts on the following pages are based on the four food groups from Eating Well with Canada’s Food Guide (see Appendix p. 151). The charts give guidelines and suggestions on foods that match your toddler’s development age. The amounts given are guidelines only. Don’t worry if your toddler does not eat the same amounts. Remember, her appetite will depend on age, body size, activity level and growth rate.

Right from the start you can include your toddler at the family meal table. Sharing good food and good feelings can help create a setting where she will learn healthy eating habits.

6 – 9 Months

Typical Eating Skills of Toddlers From 6 – 9 Months
- Picks up food with fingers or palms and puts in mouth.
- Bites off food.
- Closes lips around a cup held by an adult.
- Chews by:
  » moving food to sides of mouth
  » moving food from front to back of mouth
  » munching up and down
  » grinding food with jaws

Feeding Tips for 6 – 9 Months
Here are some ideas to help you promote healthy eating habits:
- Offer solid foods before or after breastfeeding. You and your toddler will decide what works for you. This may change over time.
- Offer small amounts of water from a cup. At six to nine months your toddler is learning to drink from a cup. However, keep in mind that she needs the nutrition from breast milk.
- Foods such as peanuts, tree nuts, egg, milk, wheat, soy, sesame and seafood can be introduced starting at about 6 months of age. Offering these foods one-at-a-time may make it easier to identify the culprit food should an allergic reaction occur.
- Feed solids with a spoon; do not put solid foods in a bottle.
- You can use a fork to mash soft, cooked foods and use that instead of store-bought puréed baby food.
- Give your toddler lots of chances to feed herself – she can use the practice.
### Daily Food Suggestions for Toddlers Aged 6 – 9 Months

At six months, offer a variety of solid foods at two to three feedings per day, and one to two snacks plus breast milk. By nine months, offer a variety of solid foods up to three feedings, and one to two snacks per day from each of the food groups, plus breast milk.

<table>
<thead>
<tr>
<th>Vegetables and Fruit</th>
<th>Grain Products</th>
<th>Milk and Alternatives</th>
<th>Meat and Alternatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Cooked, well-mashed vegetables (potatoes, yams, squash, carrots). Progress to small pieces by 9 months.</td>
<td>• Iron fortified cereal. Start with a small amount and give your toddler more according to her hunger and fullness cues.</td>
<td>• Breast milk (breastfeed according to your toddler’s hunger and fullness cues).</td>
<td>• Fully cooked, well minced meat, poultry, fish, shellfish, mashed cooked egg, mashed cooked tofu, legumes.</td>
</tr>
<tr>
<td>• Soft fruit (banana, kiwi) and cooked hard fruit (apples, pears).</td>
<td>• Progress to rice, pasta, “oat ring” cereals, noodles, crackers by 8 to 9 months.</td>
<td>• Introduce milk products (such as yogurt, cottage cheese, pasteurized cheese).</td>
<td>• Peanut or nut butter.</td>
</tr>
<tr>
<td>• Start with a small amount and give your toddler more according to her hunger and fullness cues.</td>
<td>• Juice is not necessary. If you decide to give juice, offer no more than 125 mL (1/2 cup) of 100% fruit juice a day.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
9 – 12 Months

Typical Eating Skills of Toddlers from 9 – 12 Months

- Chews up and down.
- Uses thumb and finger to pick up small pieces of food.
- Holds a cup in two hands.
- Twists and turns hand when using a spoon.
- Drops things from a high chair.
- Wants to sit at the family table and feed herself.
- Feeds herself with fingers or spoon but usually needs some help.

Feeding Tips for 9 – 12 Months

Here are some ideas to promote healthy eating habits:

- Sit and eat with your toddler to show that you value healthy eating.
- Offer solid foods before or after breastfeeding to best meet her nutrition needs. You and your toddler will decide what works. This may change over time.
- This is a great age to increase the variety of flavours offered.
- Offer water in a cup to quench thirst and help her learn to drink from a cup.
- To keep her safe, be aware of choking hazards. (See p. 70.)
- Wait until after 12 months to offer honey.
## Daily Food Suggestions for Toddlers Aged 9 – 12 Months

Offer a variety of solid foods at up to three feedings and one to two snacks per day, plus breast milk depending on your toddler’s appetite.

<table>
<thead>
<tr>
<th>Vegetables and Fruit</th>
<th>Grain Products</th>
<th>Milk and Alternatives</th>
<th>Meat and Alternatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Soft fruits and vegetables, mashed or cut in small pieces. Start with a small amount and give your toddler more based on her hunger and fullness cues.</td>
<td>• Iron-fortified infant cereal: about 125 ml (½ cup) or more.</td>
<td>• Breast milk.</td>
<td>• Fully cooked, soft and diced meat, poultry, fish, shellfish, egg, cooked tofu, legumes.</td>
</tr>
<tr>
<td>• Small pieces of cooked vegetables (potato, yam, squash, carrots).</td>
<td>• Whole-grain toast, pasta, rice.</td>
<td>• Small amounts of pasteurized whole (3.25% M.F) cow milk may be offered once your toddler is 9 to 12 months old and is taking a variety of iron-rich solid foods.</td>
<td>• Peanut or nut butter.</td>
</tr>
<tr>
<td>• Soft fruit (banana, kiwi) and cooked or small pieces of hard fruit (apples, pears).</td>
<td>• Small pieces of bannock, tortillas, roti.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Juice is not necessary. If you decide to give juice, offer no more than 125 mL (1/2 cup) of 100% fruit juice a day.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Eating Together

I was amazed at how much better Nathan would eat when we sat together and ate the same foods. So I made meals that both of us could eat. For example, if I was making chicken with rice and vegetables, I would cut the chicken and vegetables into small pieces that he could pick up. It was so cute watching him study how I ate. Then, he’d try to copy how I used the fork to get the food from my plate into my mouth!
Typical Eating Skills of Toddlers from 12 – 24 Months

- Feeds himself with fingers or spoon, but is messy.
- Sometimes eats very little, other times eats a lot.
- Puts food in mouth and takes it out again.
- Is easily distracted.
- May throw food.

Feeding Tips for 12 – 24 Months

Here are some ideas to promote healthy eating habits:

- Include your toddler in regular family meals and snacks. This helps support healthy eating, language and social skills.
- Be aware of choking hazards. (See p. 70.)
- Water is the healthiest drink to offer between meals and snacks.
- Limit foods high in salt, sugar and caffeine (chips, chocolate, candy, pop).
Daily Food Suggestions for Toddlers Aged 12 – 24 Months

Offer a variety of food three to four times per day from each of the food groups, plus one to two snacks. Continue to breastfeed.

<table>
<thead>
<tr>
<th>Vegetables and Fruit</th>
<th>Grain Products</th>
<th>Milk and Alternatives</th>
<th>Meat and Alternatives</th>
</tr>
</thead>
</table>
| Choose at least 1 dark green and 1 orange vegetable.  
• Offer five or more times each day.  
Start with a small amount of food and give your toddler more based on her hunger and fullness cues.  
• fresh vegetable or fresh fruit.  
• cooked or mashed fruit.  
• cooked or mashed vegetables.  
Juice is not necessary for your toddler. If you decide to give juice, offer no more than 125 mL (1/2 cup) of 100% fruit juice per day. | Choose 100% whole-grain products.  
• Offer five to six times each day.  
Start with a small amount of food and give your toddler more based on her hunger and fullness cues.  
• whole grain bread, bannock, tortilla, roti.  
• whole-grain cereal.  
• hot cereal, cooked pasta, rice, congee. | Breast milk.  
• Give about 500 mL (2 cups) pasteurized whole (3.25% M.F.) cow milk if your toddler is no longer breastfeeding and is taking a variety of iron-rich solid foods.  
Start with a small amount of food and give your toddler more based on her hunger and fullness cues. | Offer two to three times each day.  
Start with a small amount of food and give your toddler more based on her hunger and fullness cues.  
• well-cooked, ground, chopped or cubed lean meat, fish or poultry.  
• mashed legumes.  
• whole egg.  
• cooked tofu or tempeh.  
• peanut or nut butter. |
Typical Eating Skills of Toddlers from 24 – 36 Months

• Holds cup in hand.
• Spills a lot.
• Feeds herself if food is cut up.
• Eats family foods.
• May eat a lot or very little.
• Can take a long time to eat.
• May show strong food likes and dislikes.

Health Canada recommends following *Eating Well with Canada’s Food Guide* once your toddler is 24 months old. (See Appendix p. 151.)

Your toddler has now outgrown the need for whole (homogenized) milk and you can choose to switch from whole milk to 2% or 1% milk. Breast milk is also a healthy choice.

Feeding Tips for 24 – 36 Months

Here are some ideas to promote healthy eating habits:

• It is normal for your toddler’s appetite to vary from day to day. Follow her hunger and fullness cues. This will support her in listening to her body’s signals and eating in a healthy way.
• Include her in regular family meals and snacks.
• Be aware of choking hazards. (See p. 70.)
• Water is the healthiest drink to offer between meals and snacks.
• Limit foods high in salt, sugar and caffeine (chips, chocolate, candy, pop).

Number of Recommended Daily Food Guide Servings for Toddlers 24 – 36 Months:

• Vegetables and Fruit: 4 servings
• Grain Products: 3 servings
• Milk and Alternatives: 2 servings
• Meat and Alternatives: 1 serving
Sample One-Day Menu for Toddlers 24 – 36 Months

Breakfast
• whole-grain cereal
• 2% cow milk

Snack
• carrot sticks and broccoli florets with salad dressing
• water

Lunch
• salmon sandwich on whole wheat bread
• red pepper strips and cucumber slices
• 2% cow milk
• 1 peach

Snack
• oat rings cereal
• 2% cow milk

Dinner
• whole wheat spaghetti with tomato and meat sauce
• 2% cow milk
• applesauce

Snack
• banana slices

Start with a small amount of food and give your toddler more based on her hunger and fullness cues. For example, a small amount of food could be ¼ to ½ of a food guide serving.

**Vitamin and Mineral Supplements**

If your toddler is eating a variety of foods from all the food groups, is growing well and looks healthy, she probably does not need extra vitamins or minerals, except for the following:

**Vitamin D**

Breastfed toddlers up to 24 months need 400 IU of liquid vitamin D each day. If your toddler drinks both breast milk and formula, he needs a liquid vitamin D supplement. If your toddler does not drink two cups of cow milk or eat a variety of other vitamin D rich foods every day, he may benefit from a vitamin D supplement of 400 IU. For more information about vitamin D supplements, call HealthLink BC at 8-1-1 to talk to a dietitian.

Children over 12 months of age need 600 IU of vitamin D each day. You can stop giving your toddler vitamin D drops once she is eating enough solid food to get 600 IU of vitamin D from food most days.

Food sources of vitamin D include:
- 1 egg yolk: 25 IU
- 5 ml (1 tsp.) margarine: 25 IU
- 30 g (1 oz.) salmon: 100 IU
- 250 ml (1 cup) cow’s milk: *100 IU
- 250 ml (1 cup) formula: 100 IU

* Cow’s milk is NOT recommended until your child is between 9-12 months of age.

Vitamin D helps to build healthy bones and teeth.

Vitamin D may also help prevent some chronic diseases later in life, such as diabetes.

In the past, when the dangers of too much sun were still unknown, toddlers made enough vitamin D from being in the sun. We now know that they should be protected from the sun. Also, from October to March, the Canadian sunlight is too weak for them to make vitamin D. So they need vitamin D in their food to meet their bodies’ needs.

**Other Vitamins and Minerals**

Iron deficiency is a concern for growth and brain development. If your toddler is not eating iron-rich foods or is a vegetarian or vegan, talk with your doctor. (See p. 54 for a list of iron-rich foods.)

Do not give your toddler cod liver oil or other fish liver oils. These oils are too high in vitamin A for toddlers. Too much vitamin A can be toxic.

If you give your toddler a vitamin and mineral supplement, choose one approved for her age. Speak to your pharmacist to help you find the right one. Help keep her safe from overdoses by not calling supplements “candy” or “sweets” and keeping them out of her reach.
Ideas for Healthy Meals and Snacks

Here are handy ideas for you when you are planning meals for your toddler. They are based on Eating Well with Canada’s Food Guide.

- For each meal, aim to offer food from all four food groups.
- For each snack, offer food from at least two food groups. You can use the following suggestions to help plan combinations of food that will make sure your toddler is eating from the four food groups.

**Meal and Snack Builders**

- baked beans and toast
- buttered toast spread with fruit purée
- carrot or pumpkin bread spread with cream cheese
- chili, dahl or lentils, and rice with vegetables
- congee or rice porridge with small pieces of meat
- dessert tofu with fresh fruit
- fish served in a whole wheat bun or bannock
- fresh fruit cut into wedges, with seeds and tough peels removed
- fresh fruit pieces and yogurt for dipping
- grated carrots, beets or cabbage in salad
- grated or small cubes of cheese with whole-grain crackers
- macaroni and cheese
- meatballs with pasta
- milk or yogurt shakes blended with fruit
- oatmeal or cream of wheat with whole milk
- pancakes or waffles topped with applesauce
- raw or cooked vegetables with dip or hummus/dahl
- rice or pasta and meat with vegetables
- rice and raisin pudding with whole milk
- scrambled eggs and toast
- small muffins and orange wedges
- soft tortillas filled with beans or ground meat
- soups made with milk, and a whole-grain bun
- spaghetti with tomato or meat sauce
- tomato or mixed vegetable juice

- vegetable, split pea or bean soup with whole wheat crackers, bannock or roti
- whole-grain cold cereal with whole milk and fruit pieces or berries
- whole-grain crackers or rice cakes spread with cottage cheese or mashed avocado
- whole wheat pita/roti and hummus/dahl
- whole-grain toast spread with butter, fruit purée or non-hydrogenated margarine
- yogurt mixed with pieces of fruit or applesauce
- yogurt with crackers or roti

**To Do**

List your ideas for meal and snack builders:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Offering Safe, Healthy Food and Drinks

Drink Choices

Water
By offering your toddler small amounts of water starting at six months, you will be helping him get used to the taste of water. If you think he is thirsty, try offering small amounts of water in a cup. Breast milk is still an important source of nutrition, so water should not replace it altogether. A healthy habit to aim for is to drink milk with meals and drink water to quench thirst.

Generally, tap water is safe and bottled water is not needed for safety. Some plumbing in older buildings may have leaded components that allow lead to get into water. Flushing tap water until it runs cold in the morning is an easy way to reduce lead in water. If you have your own private water supply, you should have your water tested. (See “BC HealthFiles” in the Resources chapter.) It is important to follow all public system “boil water” advisories or notices in your area. If you have concerns about your water supply, check with your public health office about using this water.

Milk
Your toddler can continue to breastfeed. If he’s no longer breastfeeding and eating a variety of iron-rich solid foods, you can safely offer him pasteurized whole (3.25% M.F.) cow milk or fortified goat’s milk at meals and snacks. It is safest to wait until he is between 9 to 12 months old to start offering whole (homogenized) milk.

Toddlers who are younger than 24 months need a lot of energy for growth and development. Choose whole (homogenized) cow’s milk until your toddler is at least 24 months. You can switch him to 1% or 2% milk after 24 months.

Since milk is not a good source of iron, offer high-iron foods twice a day to make sure your toddler gets enough iron. For a list of iron-rich foods, see “Choosing a First Food” (p. 54).

Sometimes toddlers would rather drink cow’s milk or goat’s milk than eat solid foods. But too much cow’s or goat’s milk fills up a toddler’s small tummy and leaves little room for other healthy foods. Toddlers who drink too much cow’s or goat’s milk are at higher risk for not getting enough iron (iron deficiency). Limit to less than 750 ml (3 cups) of cow’s or goat’s milk a day.

All milk sold in stores is pasteurized. Some farmers may have access to raw milk. Raw milk may contain harmful bacteria that can cause your toddler to become very sick or even die.

If you choose goat’s milk, make sure it is pasteurized and full-fat. Most goat’s milk does not contain vitamin D. Be sure to give your toddler a vitamin D supplement if you give him goat’s milk. For more information about vitamin D supplements, call HealthLink BC at 8-1-1 to talk to a dietitian.

Fortified soy, rice and other plant-based beverages (including nut milks) are not recommended before your toddler is 24 months old. After 24 months of age, for healthy growth and development, choose a soy, rice or other plant-based beverage that is fortified with calcium and vitamin D. Check the label to find out if it has added calcium and vitamin D.
Juice
Toddlers do not need juice. After 6 months, if you decide to give juice, choose 100% fruit juice. Offer it in a cup as part of a meal or snack. Give no more than 125 ml (1/2 cup) of juice a day. Giving your toddler juice in a bottle can lead to tooth decay. Offer her whole fruit or whole vegetables instead. They are more nutritious than juice.

Only drinks that say “100% juice” are juice. If the label says “made with real juice,” the drink is mostly water and sugar with a little bit of juice. You can find sugar in the ingredient list by looking for words ending in “ose” (e.g., sucrose and high fructose corn syrup). These drinks are not recommended for toddlers.

Unpasteurized juices may contain harmful bacteria. These bacteria can cause young children to become very sick or even die. Most juice is pasteurized. Unpasteurized juice will say “unpasteurized” on the label.

Sugary Drinks
There is a lot of sugar in fruit-flavoured drinks, fruit beverages, drinks made from powders or crystals, pop and slush drinks. They are not recommended for toddlers because they have too much added sugar and very little nutrition. Offer healthier choices such as water or milk.

Drinks With Caffeine
Toddlers can easily get more caffeine than the safe levels recommended by Health Canada. Caffeine can cause a rapid heart rate and can make your toddler excited and anxious. Caffeine is found in many soft drinks, sports drinks, coffee and coffee-slush drinks, tea and chocolate. To be safe, choose not to offer drinks that have caffeine in them.

Toddler Nutritional Supplement Drinks
Toddlers do not need toddler nutritional supplement drinks.

Food Choices
Vegetables and Fruit
Local food is fresher and may be more nutritious than imported food that must be trucked a long way to get to a store near you. The freshest vegetables and fruit will be the ones you grow or pick yourself.
Foods labelled “certified organic” may have lower levels of pesticides and herbicides. Frozen vegetables and fruit can be just as high in nutrients (and sometimes higher) than fresh vegetables and fruit.
Whether you choose “certified organic,” local, fresh or frozen vegetables and fruit, know that you are making a good choice. Healthy eating includes lots of vegetables and fruit.

Honey
Because honey may contain botulism spores that can make your toddler sick, wait until she is 12 months old before offering honey. Don’t add honey to baby food, use honey on a soother or offer foods that contain honey, such as graham wafers. The botulism spores are not a risk for adults or children older than 12 months.

To Do
Little Gardeners
Toddlers who help with growing and preparing food are often better eaters. A fun thing to do with your toddler is start a “garden.” Radishes and lettuce are good choices to grow in a container. These vegetables grow quickly and easily. They are likely to catch her attention and she will be waiting impatiently to eat them.
Undercooked Meat and Eggs
Undercooked meat, poultry, fish, seafood and eggs can cause food poisoning. To reduce the risk of food poisoning, cook all meats until they are brown – NOT PINK – and the liquids run clear. Braising, stewing and sautéing are good ways to cook meats thoroughly while keeping them soft to chew. Cooking fish until it flakes with a fork reduces the risk of food poisoning. Cooking eggs until hard, with no soft or runny yolk, reduces the risk for food poisoning.

Sprouts
Do not offer raw or lightly cooked sprouts (for example, alfalfa or mung bean sprouts). These sprouts may contain harmful bacteria. Check for sprouts in salads or sandwiches from restaurants and vending machines. Only sprouts that are thoroughly cooked in stir-fries or soups are safe for your toddler to eat.

Fast Foods
Offer your toddler healthy choices such as vegetables, fruit, whole-grain foods and milk products instead of fast foods. Fast foods are high in fat and salt. Also, they are usually poor sources of nutrition. Offering fast foods prevents your toddler from getting high quality nutrition from other foods.

Unpasteurized Cheeses
Choose cheeses made from pasteurized milk. This will lessen the risk of food poisoning. Cheeses made from unpasteurized milk may contain harmful bacteria. These bacteria can cause toddlers to become very sick or even die. Cheese made from unpasteurized milk will say “unpasteurized” on the label.

Seafood
Fish is part of healthy eating. Fish provides many nutrients, such as protein and omega-3 fats. Omega-3 fats are important for brain and eye development.

When you choose fish, it is important to know that some fish are high in mercury and have recommended serving limits. Mercury is a metal found naturally in the environment. Even small amounts of mercury can damage a growing brain. Mercury cannot be removed or reduced by cleaning, preparing or cooking fish. So it is important to choose fish low in mercury more often and to limit the number of servings of higher mercury fish.

The BC Ministry of Health and BC Centre for Disease Control have developed the recommendations in the following tables for choosing and eating fish specifically for British Columbians. These recommendations can help you provide the healthy benefits of fish while keeping mercury levels low.

Note: Information about the mercury levels of other types of fish is not yet available. If you eat fish that are not included on the lists, do not eat large amounts of the same fish very often. Instead, eat a wide variety of fish.
## Recommendations for Choosing and Eating Fish

<table>
<thead>
<tr>
<th>Mercury Level of Fish</th>
<th>Children 6–12 Months</th>
<th>Children 1–4 Years</th>
<th>Children 5–11 Years</th>
<th>Women of childbearing age, including pregnant and breastfeeding women</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Low in Mercury</strong></td>
<td>No Limit</td>
<td>No Limit</td>
<td>No Limit</td>
<td>No Limit</td>
</tr>
<tr>
<td>Eat Freely</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Canned light tuna</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Canned Albacore tuna from B.C. or Canada*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Rainbow trout</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Salmon</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Herring</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Haddock</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Atlantic mackerel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sole</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Shrimp, prawn</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Canned Albacore tuna from B.C. or Canada will have the statement “Product of Canada” on the label.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Moderate in Mercury</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Canned Albacore tuna (not from B.C. or Canada)**</td>
<td>2 servings a month</td>
<td>4 servings a month</td>
<td>2 servings per week</td>
<td>4 servings per week</td>
</tr>
<tr>
<td><strong>Canned Albacore (white) tuna can also be high in mercury but not as high as the fish listed below. Health Canada recommends that you limit the amount of canned Albacore tuna you eat or give to your toddler.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>High in Mercury</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Limit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Tuna, fresh or frozen</td>
<td>About 0.5 servings per month</td>
<td>1 serving a month</td>
<td>Less than 2 servings per month</td>
<td>2 servings per month</td>
</tr>
<tr>
<td>• Shark</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Marlin</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Swordfish</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Escolar</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Orange roughy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6–12 months: one serving is equal to 40 g (1.25 oz.)
1–4 years: one serving is equal to 75 g (2.5 oz.)
5–11 years: one serving is equal to 125 g (4 oz.)
Women of childbearing age: one serving is equal to 150 g (5 oz.)
For more information, see HealthLinkBC File #68m: Food Safety: Mercury in Fish or call HealthLinkBC at 8-1-1 to speak with a dietitian.
Identify and Reduce Choking Hazards

<table>
<thead>
<tr>
<th>Think about food that is:</th>
<th>Examples:</th>
<th>Steps to make food safer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Round</td>
<td>Whole grapes, small tomatoes or large berries, hot dogs, sausages</td>
<td>Slice lengthwise into quarters</td>
</tr>
<tr>
<td>Hard</td>
<td>Fruit with pits or seeds&lt;br&gt;Raw vegetables that can break into chunks, such as carrots&lt;br&gt;Whole nuts or peanuts&lt;br&gt;Seeds</td>
<td>Remove pits and seeds&lt;br&gt;Grate or chop finely, cook and slice into thin sticks&lt;br&gt;Chop finely&lt;br&gt;Chop finely</td>
</tr>
<tr>
<td>Sticky</td>
<td>Globs of peanut butter&lt;br&gt;Raisins and other dried fruit, marshmallow</td>
<td>Spread thinly on toast or crackers&lt;br&gt;Cut into small pieces</td>
</tr>
<tr>
<td>Stringy</td>
<td>Celery and citrus fruit, such as oranges and grapefruit&lt;br&gt;Leafy vegetables</td>
<td>Remove large, stringy sections&lt;br&gt;Cut into small pieces</td>
</tr>
<tr>
<td>Chunky</td>
<td>Chunky peanut butter or nut and seed butter&lt;br&gt;Large chunks of meat or cheese</td>
<td>Choose smooth nut butters or seed butters; spread thinly on toast or cracker&lt;br&gt;Cut into small cubes</td>
</tr>
<tr>
<td>Easy to eat by handfuls without chewing</td>
<td>Pretzels, chips</td>
<td>Serve small amounts onto plate or bowl rather than out of bag</td>
</tr>
<tr>
<td>Bones</td>
<td>Chicken and whole fish</td>
<td>Remove bones from chicken and fish; flake fish before serving. Rub between fingers to feel for bones</td>
</tr>
</tbody>
</table>

Preventing Choking

WARNING: Do not give whole nuts, whole peanuts, whole grapes, popcorn, gum, cough drops or hard candy to children under four years of age. These foods are very likely to cause choking.

The greatest risk for choking is in children under four years old. Their mouth muscles are not developed enough to control hard or slippery foods. The airway of a small child is about the same diameter as a pencil.

You can help prevent choking by staying with your toddler while she eats. Also, to help prevent choking, do not let her eat while she is walking, in a stroller or riding in a vehicle.

Be careful that you do not give children younger than four years of age foods that they could choke on. These foods are very likely to cause choking. By following the directions in the chart above, you can make the food you give safer to eat.
Eating Together

Offer Meals and Snacks at the Same Times Each Day

Toddlers often do well with regular routines. By sitting down for meals and snacks at the same times each day, your toddler can focus on learning to eat a variety of foods and learning the skills to feed himself.

“Grazing” between meals and snacks is not a healthy eating habit and is especially harmful to teeth.

Offering water between meals and snacks is a healthy way to quench thirst.

Making Meals Enjoyable

Sitting down or having a family member sit with your toddler while he is eating can be a habit to choose as soon as he begins to eat solid foods. Studies show that children who eat meals with family members eat healthier and do better in school.

Mealtimes can be good times to learn and teach. Your toddler can use mealtimes to develop fine motor skills (such as picking up small pieces of food with his fingers). It is a good time to learn language skills (like talking and listening) and social skills (for example, using “please” and “thank you”).

Your toddler will probably have a hard time staying in one place for any length of time. However, when he is hungry and eating, you can expect him to stay at the table. Let him leave the table when he loses interest in eating.

A great start is to securely seat your toddler in a high chair or booster seat, or on your lap. Reduce distractions to make the most of this special time. For example, keep toys away from the table, and let phone-callers leave a message. Remove any other distractions.

Promote language skills by choosing to turn off the TV. Watching TV disrupts family conversations. It also makes it harder to follow your toddler’s signs of fullness. (See p. 43 for more information on TV.)

Eating together is a great opportunity to have pleasant conversation. It also gives you the chance to teach your toddler to say “no, thank you” instead of “yuck” or “gross.”

Don’t Stress About the Mess

Your toddler needs to explore food the same way she explores the rest of the world — with her eyes, hands and mouth. This is an important part of learning. This also means a mess: food in the hair, food in the ears and food all over the floor. She will make a mess because she doesn’t have complete control of her hands and fingers. She may drop food on the floor by mistake — or on purpose, to see how you react. Be patient and remember that “being neat” is not important to her. Serve small portions and let her set the pace. Have a wet cloth nearby for cleanup after the meal or snack is over. Enjoy watching her learn to eat and develop fine motor skills. Before you know it, she will have learned and adopted all of your good manners. (See Child Development chapter on p. 9 for more information.)
**Eating on the Go**

There will be times when you are away from home at meal and snack times. You can still take the time to stop and sit down together to enjoy food and conversation with your toddler.

There are nutritious snacks that are easy to take on the go. Try packing dry cereal, cheese and crackers, or cut-up fruit or vegetables. Also, a small plastic drink container with a folding spout is handy for water.

Keeping a plastic bag handy with plastic knives and spoons and some wet wipes can make eating on the go easier. Carrying snacks in small containers with tight-fitting lids can help reduce mess and spills.

Talk to other parents to get more helpful tips on eating meals and snacks away from home.

**Preventing Picky Eating – Offering a Variety of Healthy Foods**

Many toddlers and their caregivers struggle with periods of picky eating. Providing many opportunities for your toddler to smell, touch and taste new foods gives her time to accept the foods. Let her eat at her own pace. Offer a new food along with something that she already likes.

Providing foods with a variety of textures from an early age can help your toddler accept new foods. Children who have eaten only puréed, store-bought baby food often won’t eat foods with lumper textures.

Role modelling healthy eating can be powerful. It sends the message that healthy eating is important. You can be a role model for healthy eating by eating a balanced, healthy diet. Do this by following *Eating Well with Canada’s Food Guide*. (See Appendix p. 151.)

Your toddler is more likely to eat foods that she sees you and other caregivers enjoying. If you remove or limit junk food and soft drinks in your home, she will not see them and won’t ask for them. If you have these foods around the home and she sees you eating them, she will want them too.

Involve your toddler as much as you can in planning and preparing meals and snacks to increase her interest in trying new foods. Many have found that children will happily eat foods that they have chosen in the store, grown or “helped cook.”
Being a Vegetarian Toddler

The term “vegetarian” can mean different things to different people. Some vegetarians choose not to eat red meat. Others choose not to eat red meat, fish or poultry. People who call themselves “vegan” choose not to eat any food that comes from animals.

By choosing foods carefully from all four food groups, you can make sure that your toddler is meeting his nutrition needs. You can find the food groups listed in Eating Well with Canada’s Food Guide. (See Appendix p. 151.) If you choose not to offer meat, choose meat alternatives, including:

- Eggs
- Beans and legumes
- Tofu (cooked)
- “Veggie” meats
- Nut and seed butters

If food choices are too limited, he may not get all the nutrients he needs. Your toddler will get the right foods if the meals you offer contain foods from all four groups. Offer snacks that contain food from two or more food groups.

If you are raising your toddler on a vegan diet that does not include any meat or milk products, following these steps can make sure that he is meeting his nutrition needs:

- Breastfeed for 24 months or longer. Note for breastfeeding vegan mothers: Make sure that you are getting enough vitamin B12 from fortified foods or from a daily supplement. This will make sure your toddler has good brain development.
- If you choose not to breastfeed, give your toddler soy protein-based formula that is fortified with iron. These should be used until he is 24 months old.
- Give him a liquid vitamin D supplement of 400 IU every day. (See p. 64.)

- Introduce iron-fortified infant cereals at six months.
- For energy and protein, use meat alternatives: tofu, soy or veggie “meats,” beans, peas, lentils, nut and seed butters. For younger toddlers, mix nut or seed butters with breast milk, water or other liquids. This will make it thinner and will prevent choking.
- Fortified soy beverages (except formula), rice beverages and other plant-based beverages are not recommended before your toddler is 24 months of age. These beverages do not contain enough nutrients to meet your toddler’s needs.
- Remember – your toddler needs sources of:
  - **Energy:** offer food from all four food groups.
  - **Omega-3 fats:** offer canola, flaxseed oil, breast milk and/or infant formula with added DHA and ARA.
  - **Protein:** offer breast milk and/or infant formula, tofu, lentils, dry beans, nut butters.
  - **Vitamin B12:** is found only in animal foods and veggie “meats” with added vitamin B12. Offer foods with extra vitamin B12 added to them or give vitamin B12 supplements. This will prevent anemia and damage to your toddler’s brain, spinal cord and nerves.
  - **Iron:** offer iron-fortified infant cereal, enriched cereals, legumes, quinoa, peas, lentils, tofu and blackstrap molasses.
  - **Calcium:** better sources include breast milk, calcium-fortified orange juice, canned baked beans and blackstrap molasses. Other sources include almond and sesame butter and oranges. Since it is difficult to get enough calcium without milk products, it is important to breastfeed your toddler until 24 months or older.
- Contact a registered dietitian by calling HealthLink BC at 8-1-1, or contact the public health dietitian at your local public health office.

Can My Toddler Be a Vegan?

You may be a vegan and want your toddler to eat this way too. If so, consult a registered dietitian to make sure your toddler gets the nutrients she needs. Contact a registered dietitian by calling HealthLink BC at 8-1-1, or contact the community nutritionist at your local public health office. (See Key Resources for Parents on p. 159 in the Resources chapter.)
Understanding Food Allergies

An allergic reaction occurs when the body mistakes the protein (an allergen) in a food as harmful. An allergic reaction is the body's immune system fighting back. It is not known why some children develop food allergies. Allergies tend to run in families.

Talk about your family history with your doctor to find out if your toddler is at risk.

For more nutrition information and advice on food allergies, call HealthLink BC at 8-1-1 and talk to a registered dietitian. Or, talk to the public health dietitian (registered dietitian) at your local public health office. (See “Key Resources for Parents” on p. 159 in the Resources chapter.)

**Possible Signs of Food Allergy**

Food allergy can vary and range from mild to severe. Signs can appear within minutes and often within two hours after exposure to the food. Signs can also occur hours later, but this is less common. **The most common signs include hives, redness and rash.** Hives are red blotchy raised bumps that appear on the skin.

Other possible signs of food allergy include:
- Stuffy or runny nose with itchy, watery eyes
- Vomiting, stomach cramps and diarrhea
- Moderate to severe eczema

Stop giving the food and get medical advice if you are concerned that your toddler is having an allergic reaction.

Some signs of food allergy require immediate attention.

For more information, see Healthlink BC File #100a, Severe Allergic Reactions to Food: Children and Teens.

**Signs of a severe allergic reaction include:**
- Swelling of the mouth, tongue and throat
- Trouble breathing
- Trouble swallowing, hoarse (rough) voice, trouble speaking
- Pale or blue colour of the face or lips
- Feeling faint, weak or passing out
- Hives that are spreading

Call 9-1-1 or other emergency service immediately if you see signs of a severe allergic reaction.
The Health and Well-Being of Your Toddler

Your Toddler’s Growth

Your toddler will grow very fast up until her first birthday. Between the ages of 12 and 24 months, her growth will slow, although she will continue to gain weight and grow taller.

Once your toddler is walking, she develops more muscle in her legs and arms. She will usually lose fat around the face and tummy. This makes her look less like a baby and more like a young child.

Here are general guidelines for growth from six months to 36 months of age:

<table>
<thead>
<tr>
<th>Age</th>
<th>Weight</th>
<th>Length/Height</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months</td>
<td>Birth weight has usually doubled by 6 months</td>
<td>Average length: 55–57 cm (21.5–22.5 in.)</td>
</tr>
<tr>
<td>12 months</td>
<td>Birth weight has usually increased by 2.5–3 times by 12 months</td>
<td>By 12 months, average growth is 25.5 cm (10 in.) in length since birth</td>
</tr>
<tr>
<td>12 – 24 months</td>
<td>Between 12–24 months of age toddlers gain an average of 1.4–2.3 kg (3–5 lb.)</td>
<td>Average growth is 7–12 cm (3–5 in.) between 12–24 months</td>
</tr>
<tr>
<td>24 – 36 months</td>
<td>Between 24–60 months (2–5 years) of age children gain an average of .5–2.5 kg (3.3–5.5 lb.)</td>
<td>Average growth is about 8 cm (3 in.) between 24–60 months (2–5 years)</td>
</tr>
</tbody>
</table>

If you are concerned about your toddler’s growth, talk to your doctor or public health nurse.
A growing concern among parents is the problem of children being overweight or obese. You can help your toddler stay at a healthy weight by combining enough physical activity with healthy food.

Here are some additional ways that you can help your toddler maintain a healthy weight:

- Breastfeed until she is 24 months and older.
- Encourage her to be physically active every day.
- Always offer wholesome meals with lots of fresh vegetables, fruits and grains. *Eating Well with Canada’s Food Guide* can help you plan meals. (See p. 151 for information on *Eating Well with Canada’s Food Guide* and p. 47 for the chapter on Healthy Eating.)

- Let her eat the amount of healthy food that she wants. Avoid forcing her to eat. A healthy eating relationship is one where you provide healthy food choices at meal and snack times and she decides how much she wants to eat.
- Never take food away from her if she is still hungry.
- Avoid using food as a bribe or reward.
- Avoid giving her soft drinks and high-sugar or high-fat drinks or snacks.
- Have regular mealtimes as a family. Avoid grazing or snacking all day long.
- Set a good example for her. Eat healthy foods, eat meals at a table, eat slowly and get enough physical activity.
- Limit the amount of time she spends in front of the TV or other media to a maximum of one hour a day or, better yet, none at all. (See p. 43 for more information on screen time.)

Ask your physician, dietitian or public health nurse if your toddler is at a healthy weight. Your health-care provider will look at her age, sex, height and weight. If she is over 24 months of age, it might be possible to calculate her Body Mass Index (BMI). The BMI is useful for children 24 months of age or older because it allows you to see if they are at, over or under the normal weight for their age and height.
Physical Activity

Regular physical activity is the best way to help your toddler stay at a healthy weight. Physical activity is also a way for him to play, have fun and develop physically, socially and emotionally. (See p. 38–41 for more on play and child development.)

Some of the other benefits of physical activity are:
• Better overall health
• More energy
• Improved fitness
• Stronger muscles and bones
• Better posture
• Improved self-esteem
• Less stress

Your toddler needs at least 60 minutes of physical activity every day to help build strong bones, muscles, heart and lungs. Physically active children are much less likely to become overweight or obese. Being overweight or obese is a serious health concern for both adults and children in Canada, but it is especially serious in children.

**Toddlers and Physical Activity – Key Ideas**

- Physical activity includes any activity where most of your toddler’s body is moving.
- Physical activity is a natural part of every day. It can easily fit into daily routines.
- Your toddler needs opportunities every day to use the large muscle groups of the body. (See “Physical Development” in the Child Development chapter starting on p. 10 for more information.)
- Your toddler needs to develop confidence with basic movement skills like walking, climbing and balancing.
- Your toddler needs active role models.
- Your toddler will learn new skills and try new physical activities when he is encouraged and praised for his efforts.

**Helping Your Toddler be Physically Active**

You can get your toddler off to a good start by being active yourself for at least 30 minutes every day. Try a variety of activities and make them fun. Joining with other families is one of the best ways to have fun while being active.

A good way to keep your toddler active is to turn off the TV and computer and get outside. Limit his TV watching to no more than one hour a day – better yet, none at all. (See p. 43 for more information on TV watching.)

Unless he’s sleeping, your toddler should not be sitting still for more than 60 minutes at a time. Notice how much time he spends sitting or lying and look for ways to help him be active. Encourage his natural need to move, play, run, jump, climb and explore.

**To Do**

**Start Early**

My husband and I made a conscious effort to change our lifestyles when we had our daughter, Emma. We realized that she would be watching us and copying what we did. So we started walking together every night after work. When Emma was small we would put her in the stroller, and as she got older she walked with us. It was a great family time to reconnect while getting some fresh air and exercise.
Here are some other ways to help your toddler enjoy being active:

**At 6–12 Months**

- Put some toys just out of reach so he has to work to move toward them.
- Hold and rock him.
- Play physical games ("peekaboo" and "Patty Cake").
- Encourage him to crawl, roll and explore in safe spaces, either indoors or outdoors.
- Choose toys that promote physical activity.

**At 12–36 Months**

- Do activities with him. Go outside and explore. Throw a ball, chase bubbles or play at the park.
- Turn off the TV and other interactive media and get him moving. Limit the time he spends in front of the TV and other media to one hour or less per day – or better yet, none at all.
- Go to a park and teach him to use the slides, swings and climbing equipment.
- Teach him basic sports skills (throwing and catching a ball and jumping).
- Include him in daily activities that are physically active (walking to the store, cleaning the house, washing the car or gardening).
- Whenever possible, get him out of the stroller and have him walk with you. Your toddler is not active while in the stroller.
- Check with your local recreation centre or public health office about activities that he might be able to join (swimming, gymnastics, dance and others).

---

**Toddler Workout**

When our son, Caleb, was little I wanted to get fit again but found I didn’t have much time. So I started using him as my "little weight" and would lift him instead of a dumbbell. It started small but gradually became a full weightlifting and stretching workout to music. I would do sit-ups with him on my feet and use my arms to lift him over my head for a number of upper-body workouts. He loved it and would roll around me on the floor whenever I wasn’t lifting him.

**Making it Safe for a Toddler to Move**

When our son, Matthew, really started moving, I had to childproof our home all over again. So I crawled around with him and looked at everything that could be grabbed from that height. I was surprised at how many things were dangerous to a toddler who was crawling or walking. The stairs, coffee table corners, anything on tables, standing lamps – the list was very long. It took a few hours of looking, but we made the house safer just by being aware of what he could do now. (See p. 130 for more information on childproofing your home.)
Outdoor Protection for Your Toddler

When you are outside playing and being active with your toddler, it’s important to protect her from the heat and cold.

Heat and Sun

Your toddler has sensitive skin that is easily damaged by the sun, even on cloudy or overcast days.

Protect your toddler from sunburns to reduce the chance of skin cancer in the following ways:

**Stay out of the sun and heat**
- Keep children less than 12 months of age out of direct sunlight.
- Try to keep her out of the sun between 10 a.m. and 4 p.m., when the sun’s rays are the strongest.
- Never leave her alone in a car.
- Do not let her get overheated.
- Make sure she has plenty of water to drink in hot weather. Offer her a drink of water every hour or so.
- Dress her in loose clothing that offers protection from the sun.
- Make sure she takes regular breaks from activity.

**Dress for protection**
- Dress her in loose clothes that have a tight weave.
- Give her a large-brimmed hat with neck cover and no ties.

**Use sunscreen**
- Choose water-resistant sunscreens rated SPF 30 or higher and approved by the Canadian Dermatology Association. (Look for their logo or name on the label.)
- Teach her why using sunscreen is a good idea.
- Do not wait for signs of sunburn to get her out of the sun. Sunburns do not usually show up for six to 24 hours.

**Put sunglasses on your toddler**
- See p. 92 for more information on sunglasses.

**Tips for Applying Sunscreen**
- Use water-resistant sunscreen that works immediately.
- Apply about 15 ml (1 tbsp.) of sunscreen to all areas of skin that the sun will touch.
- Apply lip balm with sunscreen to the mouth area.
- Put on more sunscreen about every two hours if your toddler is out on sunny, cloudy or overcast days without breaks spent indoors.

**The 4-S Protection System**
- Seek shade.
- Slip on a shirt.
- Slap on a hat.
- Slop on the sunscreen.

Heat Exhaustion

Signs of heat exhaustion include fatigue, weakness, confusion, nausea, headache, muscle cramps and pale skin that is cool and damp. If your toddler has these signs, bring him indoors or into the shade. Loosen or remove his clothing, and give him a cool bath and a drink of water. If your toddler still shows signs of heat exhaustion or starts to vomit, call or see your doctor.
Cold

There are many fun activities to do with your toddler in the winter or during colder weather. Here are some tips on how to protect him from the cold while playing outside:

- Provide a warm, water-resistant coat. The sleeves should be snug at the wrist.
- Provide warm, slip-proof footwear that is water resistant.
- Give him mittens. Attach these to his coat sleeves.
- Choose a warm hat that fits well and does not have ties.
- Dress him in loose-fitting layers that will go under the coat.
- Make sure he is able to warm up every 30 minutes or so.
- Keep him indoors when temperatures are below -25°C (-13°F), or if the wind chill is -28°C (-18°F) or more.

Frostbite

If your toddler needs to be out in very cold weather for any length of time, watch for signs of frostbite or skin injury from cold. Do this by checking for whiteness and numbness on his cheeks, nose, ears, fingers and toes.

If you think your toddler has frostbite:
- Bring him indoors immediately.
- Remove wet clothing. Wet clothes take heat away from his body.
- Put the frostbitten body part(s) in warm water until feeling has returned. Make sure you test the temperature of the water yourself, because he will not be able to feel heat or cold. He may cry from the stinging that will happen as the feeling returns.

Playground and Park Safety

The playground can be a lot of fun and give your toddler a place to develop and practise new physical skills. She can also learn social skills as she plays in the playground with other young children.

Always go with your toddler to the playground, and watch her closely. Playground falls are a major cause of serious injuries. She can also get caught in playground equipment. Never dress her in clothes that may become caught on equipment. Drawstrings, skipping ropes, scarves, bike helmet straps and loose clothing can become tangled and strangle a toddler.

Use the following questions to check the safety of any playgrounds or parks you visit:

- Is the playground equipment in good condition, well anchored, and the right size and height for your toddler? If she can’t reach it without help, it’s too big. Children younger than five should use playgrounds that are designed for preschool children. The playground equipment should be no more than 1.5 metres (5 feet) in height.
- Does the play equipment have guardrails and barriers to prevent injuries?
- Is the play equipment free of points, corners, hooks, joints and other things that could catch clothing?
- Are the swing seats made of soft material to prevent injuries?
- Is there lots of space around the play equipment?
- Does the playground have proper surfaces? Sand, wood chips and synthetic materials are best.
Sleep and Your Toddler

Just like adults, each toddler needs a different amount of sleep, but most children follow this pattern:

### Sleep Patterns of Toddlers

<table>
<thead>
<tr>
<th>Age</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>At 6 months</td>
<td>May sleep 11 to 12 hours at night and have two naps. Usually naps once in the morning and once in the afternoon, with each nap lasting one to two hours. May sleep at night for a stretch of several hours, or even through the night. Will start sleeping through the night at different ages; there is no correct age for children to start.</td>
</tr>
<tr>
<td>At 12 months</td>
<td>May sleep about 14 hours per day. Part of this may be in morning and afternoon naps. Between 12 months and 18 months, the morning nap disappears and is replaced with one longer afternoon nap.</td>
</tr>
<tr>
<td>At 24 months</td>
<td>May sleep 11 to 12 hours at night, with a nap in the afternoon lasting one to two hours.</td>
</tr>
<tr>
<td>At 36 months</td>
<td>May sleep about 12 hours at night, and may or may not have a short nap.</td>
</tr>
</tbody>
</table>

### Developing Good Sleep Habits

Here are some tips on how you can help your toddler develop good sleep habits:

#### Keep Regular Day Routines
- Try to set up daytime routines and habits. Your toddler thrives on routine.
- Keep a regular nap schedule, even on weekends (if you can). If your day is very busy and naps are missed, he may not sleep well at night.
- Offer him regular meals and snacks during the day.

#### Keep Regular Bedtime Routines
- Wind down the action at bedtime. Giving him a bath, followed by reading and quiet cuddle, helps teach him to slow down from the day. Ask other members of the family to share in this quiet time.
- Make bedtime a special time. Set aside time for talking about the day. This will help in later years as he comes to know that this is the time of day when he has your full attention.
- Give him some choices at bedtime – which story to read or which pajamas to wear.
- Avoid TV watching before bedtime. TV is stimulating, not relaxing.
Encourage Your Toddler to Settle

From time to time, your toddler may find it difficult to settle down to sleep. Stresses such as teething, being overtired or being off a routine may all cause problems with settling.

Here are some tips on how you can help your toddler settle:

- Help him understand what to expect by giving a kiss and saying: “Now, it is time to sleep.” He will gradually learn the meaning of this phrase.
- Teach him that it is bedtime by putting him into bed awake. This will help him learn to fall asleep and settle himself.
- He may have become used to being nursed and rocked to sleep as a baby. As he gets older, help him learn to fall asleep on his own so that when he wakes during the night he will know how to settle himself to sleep again. You can do this by gradually putting him down to sleep a little sooner – first before he’s sound asleep, and then before his eyes are shutting.
- Don’t try to sneak out. Instead, try patting him gently and quietly, singing a quiet song over and over, playing some relaxing quiet music and staying close by. When he is settling, say “Goodnight” and leave.
- If he is having a hard time settling, use this time as your relaxation time. Sit in a chair close by and read, listen to music or just relax. Over a few days, move the chair farther and farther away until he is independent.
- If he is having a hard time settling, use this time as your relaxation time. Sit in a chair close by and read, listen to music or just relax. Over a few days, move the chair farther and farther away until he is independent.
- If he is having a hard time settling, use this time as your relaxation time. Sit in a chair close by and read, listen to music or just relax. Over a few days, move the chair farther and farther away until he is independent.
- Keep his sleeping area quiet.
- He may not easily let go of habits such as being rocked to sleep or held until asleep. Parents have different comfort levels when it comes to letting a toddler cry when settling to sleep. If you are comfortable with it and you know your toddler is not ill or hurt, you can try letting him cry for short periods of time. Make sure you check regularly until he falls asleep.

Night Waking

Night waking is very normal for small babies and even for toddlers. However, most parents want their toddler to sleep through the night once it is no longer necessary to have a night feeding. But it is not always easy. Children are quick to develop habits, and waking at night may have become a habit that stays even when your toddler no longer needs a night feeding. Sleep researchers have found that even adults never really sleep through the night. It’s normal to wake up from time to time and go back to sleep without remembering the waking. Learning to resettle herself is a skill that your toddler will learn over time.

Here are some tips on how you can help your toddler end the habit of night waking:

- When you feed her in the middle of the night, keep the lights off. Don’t make this a time to talk or play. Gradually shorten the feeding time. She may find it easier to resettle herself if she does not fully waken.
- Monitor daytime napping. You may need to gradually shorten or move naps to earlier in the day so that she sleeps better at night.
- Some parents choose to break the night waking habit by letting their toddler cry for a set period of time, perhaps two or three minutes, before going in. Do not pick her up or play with her, just calmly tuck her back into bed and say, “It’s time to sleep now.” Leave the room. You may have to do this more than once until she falls asleep. Over a few days, gradually increase the amount of time before going to her. It can be hard to listen to the crying, but it often works over time. (If at any time you have concerns for her safety or well-being, go and check immediately.)
- After making sure she is not ill or injured, you can also call out to reassure her but not go into her room.
• Some parents find it works to immediately get up, go into her room and reassure her by saying: “This is sleep time.”
• If your toddler is big enough and no longer sleeping in a crib, make a bed on the floor of your bedroom. She can come in and use it if she wakes.

Sleep Problems

Some of the most common reasons for sleep problems include:
• Inability to fall asleep by himself (for example, he is used to being rocked or fed to fall asleep and is unable to settle himself when he wakes in the night)
• Busy daytime schedules that are not regular
• Eating meals at different times from day to day
• Bedtimes or bedtime routines that change from one day to the next
• Lack of quiet and comforting bedtime routines
• Interrupted naps
• Not enough physical activity during the day
• Sickness
• Teething
• Having foods or drinks with caffeine (See p. 67 for more information on caffeine.)

Sleeping Arrangements

The Canadian Paediatric Society recommends that the safest place to sleep for infants under the age of 12 months is in their own crib. If your toddler is under the age of 12 months, he should be put to sleep on his back, in a crib meeting the Canadian government’s safety standards. (See p. 85 for more information on crib safety.)

Bedsharing is when your toddler shares the same sleeping surface with you or another adult. Bedsharing is not recommended for infants under 12 months of age because it increases the chance of suffocation. This risk increases even more if your infant shares a bed with someone and they:
• Are a smoker, or he is exposed to second-hand smoke.
• Have been drinking alcohol or using drugs.
• Have taken any medicines that could make them extra sleepy.
• Are very tired, to the point where they would not be able to respond to your infant.
• Are ill or have a medical condition that might make it difficult to respond to him.
• Have long hair that is not tied back.
• Are obese.

When there is exposure to cigarette smoking, the risk of Sudden Infant Death Syndrome (SIDS) is further increased with bed sharing.

Room sharing is when your toddler is within arm’s reach of you but is not on the same sleeping surface (for example, he is in a crib beside your bed). Room sharing can protect against SIDS.

To Do

Keep a Sleep Diary

If your toddler is not sleeping well, keeping a sleep diary might help. Write down when your toddler sleeps and for how long. Do this for about two weeks. This will help you see the patterns. You can then experiment with changes in nap times or routines.
Sleep Safety

At some point, you will decide it’s time to move your toddler out of a crib and into a bed. Some 36-month-olds still sleep happily in a crib, while some 18-month-olds are already climbing out. If your toddler is trying hard to climb out of the crib, then it’s time to move her to a bed.

- Place beds and cribs away from windows, heat sources, lamps, curtains, blinds and electrical plugs and cords. Check for these or anything else that could be dangerous.
- Use a firm, flat mattress in a crib or a bed.
- She only needs a thin blanket if she is dressed in a sleeper. In a warm room, a sleeper and a light blanket or blanket-weight sleeper should be enough to keep her comfortable.
- Never cover her face or head with blankets.

Back to Sleep

If your toddler is under 12 months of age, put her to sleep on her back, called “back to sleep.” It lowers the risk of suffocation. Once she is strong enough to turn over on her own (every time), there is no need to continue to place her in the back to sleep position.

Co-sleepers

A co-sleeper is a type of crib that attaches to the side of an adult bed. These may pose a danger of suffocation, as toddlers have been trapped between the edge of the mattress and the side of the co-sleeper.

Babies and toddlers are safest when put down to sleep on their back, in a properly-designed crib or bassinet that meets Canadian safety standards, with no quilts, pillows, stuffed toys or other soft material in the crib.

Sudden Infant Death Syndrome

Sudden Infant Death Syndrome (SIDS), also known as “,” is the sudden and unexpected death of an apparently healthy child under 12 months of age. While the cause of SIDS is not fully understood, there are steps you can take to lessen the risk:

- Children under 12 months of age should be put to sleep on their backs on a firm surface. The Canadian Pediatric Society recommends that for the first 12 months of life the safest place for a child to sleep is in his own crib.
- A smoke-free home will reduce the risk of SIDS.
- Do not place a baby to sleep on pillows, reclining chairs, couches, air mattresses, waterbeds, sagging mattresses, feather beds, couches, daybeds or soft surfaces. Avoid these soft surfaces, even for temporary sleeping arrangements (for example, during travel).
- Do not use sheepskins, pillows, pillow-like items, quilts, Comforters, stuffed toys or bumper pads.
- Room sharing may protect against SIDS and is safer than bedsharing. Bedsharing should be discussed with your health care provider.
- Breastfeeding may help prevent SIDS.
- Keep your toddler warm but not hot. To check if he is too hot, place your hand on the back of his neck. He should not be sweating.
Safe Bedding
Your toddler only needs a thin blanket if he is dressed in a sleeper. Do not use sheepskins, pillows, pillow-like items, quilts, comforters, stuffed toys or bumper pads.

Crib Safety Checklist
Choose a crib that meets the federal government regulations for cribs and cradles. Cribs built before 1986 do not meet these regulations and are not safe. Drop-side cribs are not recommended. As of December 29, 2016 the sale or advertisement of drop-side cribs is banned in Canada. This includes the resale of used drop-side cribs.

If you do use a drop-side crib, ensure that it has double locks that prevent the crib from collapsing or folding. For more information, visit the Canadian Health Network website and search for “cribs.” (See “Safety” in the Resources chapter for the web address.)

- Follow the manufacturer’s instructions when you put the crib together.
- Check that there is less than 6 cm (2 in.) of space between the vertical slats (bars) on the sides, head and foot of the crib.
- Use a crib mattress that is 15 cm (6 in.) thick or less, and fits the frame tightly. Only two fingers or less should fit between crib and mattress to prevent your toddler from getting stuck between the mattress and the bars.
- Keep the mattress placed at the lowest position if your toddler is able to sit up.
- Once in a while, check the joints to make sure screws are tight.
- Do not use plastic sheets, as they can get in the way of breathing.
- Avoid items that your toddler could climb on and then fall out of the crib.
- Keep the crib free of mobiles, activity gyms and other hanging objects after your child is five months old. Once he is able to get on to his knees, these kinds of toys can be a strangulation risk.

Key Points

Bed Safety Checklist
- Choose a bed with a simple design. There should be nothing sticking out, no cut-outs and no fancy headboard and footboard.
- Check the joints every few months to make sure screws are tight.
- There should be no spaces between the mattress and the headboard, walls or other surfaces that could trap your toddler.
- Place the headboard (rather than the side of the bed) against the wall. This position prevents your toddler from becoming trapped between the bed and a wall.
- Choose a bed that is low to the floor. Put protection on the floor (carpet, quilts and pillows) in case your toddler falls out of bed.
- Use safety rails that you can attach on all sides.
- Your toddler is safest in the lower bunk of a bunk bed set.
Learning to Use the Toilet

Toddlers learn to use the toilet at different times. Toilet learning can be a positive experience. Your toddler will discover a new skill and feel a sense of accomplishment. Try not to be pressured into making her use the toilet before you think she is ready. Rushing the process may make it more difficult and frustrating for both of you.

Most children learn to use the toilet between the ages of 24 and 48 months. Staying dry all night often takes longer, sometimes up to the age of six or older. Toilet learning is easy for some children, but most toddlers take between two weeks and six months to learn.

The Keys to Toileting Success

- Start only when your toddler shows you she’s ready.
- Let your toddler be in charge of her toileting, but do your part, too. Have a potty chair close by, have a general routine with potty chair reminders and praise her accomplishments.
- Do not pressure your toddler to use the toilet. Keep the toilet a battle-free zone.

Is Your Toddler Ready?

If you answer “yes” to most of the questions below, your toddler is likely ready to get started.

- Does he stay dry for a few hours at a time or occasionally wake up dry from a nap?
- Does he show in some way that he is aware when he urinates or has a bowel movement? For example, does he go into a corner or squat to have a bowel movement? Does he comment on soiled diapers? Does he notice when he has an “accident” without diapers on?
- Can he follow simple directions, such as, “Let’s go to the toilet”?
- Can he let you know when he needs to use the toilet?
- Is he able to pull down his pants and underwear by himself?

Helping Your Toddler Start Using the Toilet

- **Wait for a stable time** in your toddler’s life to get started. The best time is when there are no other stresses going on, like going to a new daycare, a new sibling in the house, moving to a new home, illness or other family changes.
- **Use reminders:** “I’m going to the bathroom – do you want to come too?” or “Your potty chair is waiting for you,” or “It’s potty time.”
- **Give lots of praise for action.** When your toddler is successful, give lots of praise but direct it at her actions rather than at her “being good.” Encourage her by saying something like, “It’s great that you went pee in the potty chair!” instead of saying “Good girl!” That way you will help her see that using the toilet is the goal. You will show her that whether she succeeds or not doesn’t make her good or bad in your eyes.
• Let your toddler watch you go to the bathroom. Explain what you are doing (if you are comfortable with it). Observing a same-sex parent or sibling is worth a thousand words.

• Encourage your toddler to sit on and play with the potty chair. Encourage her to help “dolls” toilet on the potty chair.

• Explain how using the toilet is a good change: “You won’t have to wear diapers anymore.” “You will be able to wear underwear like big kids.”

• Keep a potty chair next to the main toilet.

• Get a toilet seat that fits on top of the regular seat, if your toddler is interested in the big toilet. Make sure this seat is stable, and provide a solid step stool for her to use to get up onto the toilet.

• Let your toddler claim the potty chair as “my own.”

• Use training pants or clothes with elastic waists that can be pulled down quickly and easily.

• Pants can be optional. You may choose to let your toddler go without pants around the easily cleaned parts of the house or yard. If she feels the urge, she can sit on the potty chair quickly.

• Place your toddler on the toilet immediately after she awakes.

• If your toddler gets bored while sitting on the potty chair, give her something to do, like looking at a book. Check your library for books about toilet learning.

• Do not use sweet treats as rewards for success. If you do use a reward system, try stars on a chart, a coin in the piggy bank or a song of success.

Helping Your Toddler Succeed

• To help your toddler succeed at toileting, try to stay relaxed and be patient. Think of toilet learning in the same way as learning how to run. It’s a new skill for him and it will take some time to learn. Praise his efforts and try not to be upset over accidents. Just clean up soiled pants and encourage him to use the potty chair next time.

• Accidents will happen. Even older children forget to use the toilet, especially when they’re sick, cold or very involved in play.

• Prepare to continue toilet learning away from home. If you can, find the locations of bathrooms before you go out. Bring along the potty chair if you’re going to be away from home, and make any other preparations you’ll need.

• If your toddler is dealing with a major change or stress in his life, or just refuses the potty chair, be prepared to go back to diapers for a while. If this happens, remember that he is learning a new skill. It’s normal to go two steps forward and one step back.

Using Diapers

If your toddler doesn’t want to have her bowel movements in a potty chair or toilet, let her continue to use diapers. This will keep her from becoming constipated. Constipation can cause painful bowel movements that may delay toilet learning.

Using Training Pants

Training pants are pull-up pants that look like normal underwear but are made from the same material as diapers. Not everyone agrees on the use of disposable training pants while a toddler is trying to learn to use the toilet.

Some people think that using them slows down toilet learning. Training pants feel the same as diapers and a toddler could forget that the goal is to use the toilet. Some parents prefer to put their toddler in normal underwear.

However, because a toddler’s nighttime bladder and bowel control often is slower than daytime control, it is sensible to use training pants at night or when you’re out and about with your toddler.
Looking After Your Toddler’s Teeth

To prevent tooth decay, toddlers need to have their teeth brushed daily by an adult.

Your toddler’s first teeth (called baby teeth) are important because they:

- Help him to stay healthy. Infections in the mouth and teeth can affect overall health and have lifelong health consequences.
- Help him eat and digest food properly.
- Play an important role in speaking.
- Help in jaw development and guide the permanent teeth into their proper position.
- Help him look good.

Your toddler’s first tooth is likely to appear at about four to six months of age. By about 36 months of age, he should have 20 teeth (10 on the top and 10 on the bottom). These teeth will be replaced by permanent teeth starting when he is between five and seven years old. Some baby teeth do not fall out until age 11 or 12.

Once teething begins, it will continue for about two years. Many children have no problem with teething. Other children may have pain or trouble eating. A common sign that a new tooth is coming is increased drooling.

If your toddler has a fever or diarrhea while teething, it may not be related to the teething. If he has a fever, see p. 101 for more information. You can also search the HealthLink BC website at www.HealthlinkBC.ca for medically-approved information or access HealthLink BC by dialing 8-1-1.

Here are some ways you can help your toddler cope with teething:

- Use a bib to catch drool and wipe his face often to prevent chaffing.
- Give a clean, chilled wet face cloth or teething ring to chew on. Check the condition of teething rings frequently. Throw away any that are cracked or worn. Teething gels and ointments are not recommended.
- Avoid giving teething cookies or biscuits. These can lead to tooth decay.
- Give your toddler extra love and patience to help him through the teething process.

Preventing Tooth Decay

Tooth decay can start as soon as a tooth appears in your toddler’s mouth. Bacteria that stick to the teeth mix with food and drink and make acid. This acid can break down tooth enamel and cause tooth decay.

Here are some tips on how to care for your toddler’s teeth:

Brush Her Teeth

- Once baby teeth appear, gently brush her teeth (once in the morning and after the last evening feeding) with a child’s toothbrush. She needs to have her teeth brushed daily by an adult.
- Have her lie comfortably in your lap, on a change table or on the floor.

Teething Necklaces

Young children can be injured by necklaces marketed and sold with the promise of preventing or reducing teething pain. Pieces of the necklace can break off, creating a choking risk and there is also risk of strangulation. Parents and caregivers should avoid placing a necklace of any kind on a child under 3 years of age.
Choose Her Food and Drink Carefully

- Do not offer her sugary drinks like pop, punch or slush drinks.
- Avoid letting her drink milk or juice out of a bottle at naptime or bedtime.
- Offer regular meals and snacks. Avoid grazing (eating and drinking all the time, including from a bottle or a sip cup).
- Make time for frequent spitting.
- Make a game of teeth brushing. Sing a silly song, or tell a story about clean teeth.
- Keep toothpaste out of reach. Children should not swallow large amounts of toothpaste with fluoride.
- Replace toothbrushes frequently. Some children like to chew on the bristles, so these toothbrushes may need to be replaced more often.

Check for Tooth Decay
Check her mouth often for any signs of tooth decay (chalky white crescent or spots along the gum line). See your dentist if you notice any tooth decay.

Visit the Dentist
The Canadian Dental Association recommends that toddlers see a dentist six months after the first baby tooth appears or no later than 12 months of age. During this first visit, the dentist will have a look in your toddler’s mouth. This is also a good time to talk about daily dental care, fluoride and eating habits.

If you have concerns about your toddler’s teeth before she is 12 months old, see a dentist.

<table>
<thead>
<tr>
<th>First Teeth</th>
<th>When Teeth “Come In”</th>
<th>When Teeth “Fall Out”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central incisors</td>
<td>7–12 months</td>
<td>6–8 years</td>
</tr>
<tr>
<td>Lateral incisors</td>
<td>9–13 months</td>
<td>7–8 years</td>
</tr>
<tr>
<td>Canines (cuspids)</td>
<td>16–22 months</td>
<td>10–12 years</td>
</tr>
<tr>
<td>First molars</td>
<td>13–19 months</td>
<td>9–11 years</td>
</tr>
<tr>
<td>Second molars</td>
<td>25–33 months</td>
<td>10–12 years</td>
</tr>
<tr>
<td>Lower</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second molars</td>
<td>20–31 months</td>
<td>10–12 years</td>
</tr>
<tr>
<td>First molars</td>
<td>12–18 months</td>
<td>9–11 years</td>
</tr>
<tr>
<td>Canines (cuspids)</td>
<td>16–23 months</td>
<td>9–12 years</td>
</tr>
<tr>
<td>Lateral incisors</td>
<td>7–16 months</td>
<td>7–8 years</td>
</tr>
<tr>
<td>Central incisors</td>
<td>6–10 months</td>
<td>6–8 years</td>
</tr>
</tbody>
</table>
Fluoride
Fluoride helps make tooth enamel stronger and better able to resist tooth decay. Some “baby” toothpastes do not contain fluoride. Check the toothpaste ingredients for fluoride.

Floss Her Teeth
- Once her teeth touch each other, floss once a day.
- Use a floss pik or string floss. She could damage her gums if she uses floss on her own teeth, so it’s best if an adult does the flossing.

Tooth Safety
Here are some ways to protect your toddler’s teeth:
- Use size-appropriate car seats, booster seats and seat belts to prevent injuries to his teeth if there is a car crash. (See p. 135 for more information on car seats.)
- Young toddlers may chew on almost anything. Keep him from chewing on hard things that could crack his teeth, are a choking risk or could cause injuries.
- Children fall often when they are learning to walk. Do not allow him to walk around with a toy, sip cup, bottle or anything else in his mouth.

Soothers
Soothers are also called pacifiers or dummies. Soothers are sometimes given to toddlers to help them satisfy their need to suck, beyond their need for nutrition. A soother should not be used in place of cuddling, comforting or breastfeeding. Try finding out if your toddler wants something or is hungry, bored or tired before giving her a soother.

Sucking on a soother is thought to be better than thumb-sucking because it’s easier to break the soother habit later on. Try to use a soother only for sleep or when she wants extra sucking.
Helping Your Toddler Stop or Reduce the Use of a Soother

If your child sucks a soother or his thumb, it is best to help him stop at around four or five years of age – before his permanent teeth start to come in.

Children who use soothers have more ear infections than those who do not use a soother. Children who have frequent ear infections should have their use of a soother limited.

To help your toddler stop or reduce the use of a soother:
- Choose a time when no changes are happening.
- Start by limiting where and when he can have the soother, slowly getting it down to one place at one time. This often ends up being during naps or bedtime. Once he is asleep, gently remove the soother from his mouth.
- Use comforting and calming techniques like extra hugs, story times and listening to music.
- Praise him for using the soother less (stars on a chart, a phone call to Grandpa to report on how long the soother has been put away).
- Avoid the use of punishment to make him give up a soother.

Soother Safety Checklist
- Make sure the soother is a one-piece design.
- Check regularly that the nipple is firmly attached to the handle by giving it a good tug.
- Replace the soother every two months. If the soother is sticky, cracked or torn, throw it away. It can easily tear and become a choking hazard.
- Sterilize the soother before the first use by boiling it in water for five minutes and then letting it cool completely.
- Clean the soother in warm, soapy water.
- Avoid cleaning it in your own mouth, which can transfer bacteria from your mouth to your toddler’s mouth.
- Never tie a cord to a soother and hang it around your toddler’s neck or attach it to clothes. It can get tangled around her neck, causing her to strangle. You can use a clip with a short ribbon attached.
- Avoid letting your toddler chew a soother for teething. It can tear or break and become a choking hazard.
- Never dip a soother into honey, syrup or any other sweetener. This can lead to tooth decay.
- Also, honey should not be given to children under 12 months of age. It may contain botulism spores that can make them sick. (See p. 67 for more information on honey.)

Thumb-Sucking
Thumb-sucking in toddlers is usually not a problem. However, children who suck their thumbs a lot or intensely after their permanent teeth start to come in are at risk for dental or speech problems. If you are concerned about your toddler’s thumb-sucking, talk to your dentist.
Looking After Your Toddler’s Vision

To help your toddler develop healthy vision:

• Make sure her eyes are safe from injury.
• Protect her eyes from sun exposure.
  Use sunglasses:
  » with 99–100% UVA and UVB protection
  » with lenses that fully cover the eyes
  » that fit snugly and comfortably
• Provide healthy food.
• Show things to her (mobiles, colourful images, patterns).
• Encourage her to climb, run on the playground with you, play with a ball and big puzzles, build with blocks and look at books.
• Have her eyes checked if you think there may be a problem with her vision.

The following are typical vision skills of toddlers:

<table>
<thead>
<tr>
<th>Typical Vision Skills of Toddlers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>By 6 – 8 months</strong></td>
</tr>
<tr>
<td>• Sees objects of interest and moves toward them.</td>
</tr>
<tr>
<td>• Eyes appear “straight” and work together.</td>
</tr>
<tr>
<td><strong>By 8 – 12 months</strong></td>
</tr>
<tr>
<td>• Uses her eyes to help herself move around objects.</td>
</tr>
<tr>
<td><strong>Over 12 months</strong></td>
</tr>
<tr>
<td>• Shows interest in books/stacking toys.</td>
</tr>
<tr>
<td>• Moves, climbs and throws in a coordinated manner.</td>
</tr>
</tbody>
</table>
Eye Safety

Here are some ways you can protect your toddler’s eyes from injury:

• Do not allow her to play with sharp items (darts, scissors or any pointed object).
• Keep her away from older children who are playing with sharp objects.
• Teach her not to walk or run while carrying sharp objects (pencils, Popsicle™ sticks or other sharp or pointed objects).
• Keep your home and yard childproofed for safety. (See p. 130 for more information on childproofing.)
• Limit the amount of screen time to no more than one hour per day, if any. (See p. 43 for more on TV.)
• Keep her at least three metres (8 to 10 feet) away from a TV screen.
• Place your TV so there is no glare coming from the screen.
• Put a hat and sunglasses (if possible) on her when you go outside. (See more in the sun safety section on p. 79.)

Vision Warning Signs

Here are some other signs that could mean your toddler has problems with her vision:

• Difficulty following objects or people with her eyes.
• Constantly rubbing eyes, squinting or frowning.
• Blinking more than usual.
• Complaining that her head hurts.
• Closing one eye or tilting or holding her head in a strained or unusual position when trying to look at an object.
• Difficulty finding or picking up small objects dropped on the floor (after 12 months of age).
• Difficulty focusing or making eye contact.
• Bringing objects very close to eyes to see.
• Eyes are red or watery or have a discharge.
• Eyes appear to be crossed or turned after six months of age. (You may notice this in a photograph of your toddler.)

If you think your toddler has a vision problem, talk to your eye doctor (optometrist), doctor or public health nurse.

Keeping Your Eyes Open

It was my friend who noticed that my daughter, Hailey, had a problem with her vision. She noticed that Hailey would “root around” for her toys, and when things were handed to her, she would move her hand around until she hit the object. I hadn’t noticed because I was so used to it.

The eye doctor was great. Even at Hailey’s young age, he tested her vision. Since she started wearing glasses, she is so much happier and more active. She can actually see where she’s going and all of the things around her that she couldn’t see before.
Looking After Your Toddler’s Hearing

Your toddler starts to learn speech and language from the moment he is born. Hearing plays a key role in how he learns language and speech skills. It is also important for his social and emotional growth.

Every toddler develops at his own pace, but the following are their typical hearing skills at various ages.

The following are typical hearing skills of toddlers:

**Typical Hearing Skills of Toddlers**

| By 6 – 8 months | • Turns head toward sound.  
|                 | • Tries to imitate changes in voice pitch.  
|                 | • Babbles (“baba,” “mama,” “gaga”). |
| By 9 months     | • Imitates speech sound of others.  
|                 | • Understands “no-no” or “bye-bye.”  
|                 | • Will locate sound source at eye level or below. |
| By 12 months    | • Understands simple requests like “Look here,” “Open your mouth.”  
|                 | • Tries to say a few words.  
|                 | • Imitates different speech sounds.  
|                 | • Likes to repeat sounds.  
|                 | • Recognizes words for everyday people and items.  
|                 | • Can hear you call from another room.  
|                 | • Understands short sentences. |
| By 24 months    | • Points to pictures when they are named.  
|                 | • Listens to stories, songs and rhymes.  
|                 | • Uses several different words, “Mama,” “Dada,” “cat,” “ball.”  
|                 | • Points to body part when asked (for example, “Where’s your nose?”).  
|                 | • Follows simple directions like “Get the ball.”  
|                 | • Puts two words together: “My teddy.” |
Protecting Your Toddler’s Hearing

Here are some ways you can protect your toddler’s hearing:

• Breastfeed. Breastfed toddlers have fewer ear infections. (See p. 50 for more on breastfeeding your toddler.)

• Avoid putting him to bed with a bottle. This can lead to ear infections, which can reduce hearing.

• Keep him away from second-hand smoke. Second-hand smoke increases the risk of ear infections.

• Use only a light towel when cleaning his ears. Avoid using cotton swabs or putting anything in the ear canal.

• Check the volume of the TV or music. If you have to raise your voice to be heard above the noise of other sounds, the noise level is too high.

• Provide ear protection like earmuffs if he must be around loud sounds, such as loud music or fireworks. Do not use earplugs, as they can be a choking hazard.

• Have him immunized on time. (See p. 96 for more on immunizations.)

Hearing Warning Signs

The earlier hearing problems are found and treated, the better. It is best if this can be done by six months of age.

Looking in a toddler’s ear will only help find an ear infection. Testing a toddler’s hearing takes special equipment and skills. Hearing testing for young children is available in British Columbia through public health hearing (audiology) clinics.

See your doctor or public health nurse, or call HealthLink BC at 8-1-1 if your toddler has any of the following conditions, which may lead to hearing problems:

• Ear discharge (runny ear)

• Earache (pain in the ear)

• Bad smell from the ear canal

• Reddened skin around the ear

• Wax totally blocking the ear canal

• An object in the ear canal

The following signs may indicate that your toddler already has a hearing problem. If he shows any of the following signs, speak to your doctor:

• Talks in a very loud or very soft voice.

• Seems to have difficulty responding when called from across the room, even when it is for something interesting.

• Turns his body so that the same ear is always turned toward the sound.

• Has difficulty understanding what has been said (after 36 months of age).

• Is rarely startled by loud noises.

Genes and Hearing Loss

Children can inherit hearing loss. If any of your toddler’s relatives have had hearing loss early in their lives, tell your health-care provider. Also, be sure to have your toddler’s hearing tested.
Preventing Illness

You can help prevent your toddler from getting sick by doing three simple things: getting her immunized, washing her hands and keeping surfaces clean.

Immunizations are also called vaccinations, boosters or shots. They protect your toddler from serious childhood illnesses and diseases before they have a chance to make her sick. Immunizations are a safe and effective way to prepare her body to fight certain diseases and help her stay healthy.

Why Immunize Your Toddler

Immunizations have reduced several serious diseases in Canada (e.g., polio, diphtheria, tetanus, whooping cough and measles). However, the germs that cause these diseases still exist. Immunizations are the best way to protect your toddler from serious diseases. By having her immunized, you help protect other children and unprotected adults from these diseases as well. In the long run, this helps to reduce the spread of disease and the chance of outbreaks.

Immunizations are often required for enrolment in childcare centres and schools because of the protection they offer to everyone.

How Immunizations Work

Immunizations help your toddler’s immune system make antibodies. Antibodies fight diseases and protect her from getting sick. Because she gets an immunization, she doesn’t have to get sick first to get protection.

Vaccines are given by injection, using a sterile needle or syringe. Children are given free immunizations as part of their basic health care in British Columbia.

Immunizations are Very Effective

Most routine childhood vaccines are effective for 85 to 95 per cent of the children who receive the complete series. Some children can still get sick, even if they have the immunization. To protect these children, it is important for all children to be immunized, so the disease won’t spread.

Diseases Immunizations Protect Against

British Columbia provides publicly funded immunizations to protect your child against these diseases: measles, mumps, rubella, hepatitis B, diphtheria, tetanus, pertussis (whooping cough), polio, rotavirus, Haemophilus influenzae type b disease (Hib), varicella (chicken pox), pneumococcal and meningococcal diseases, and human papilloma virus (for girls).

When to Immunize Your Toddler

Immunizations work best when they are given at certain ages. Some vaccines are only given once or twice. Some need to be given over a period of time in a series of properly spaced immunizations.

Children are usually immunized at: 2 months of age, 4 months of age, 6 months of age, 12 months of age, 18 months of age, 4–6 years of age, 11 years of age (Grade 6 level), and 14 years of age (Grade 9 level).

If you have been following the recommended schedule for immunizations, your toddler will have already had visit #1 (at 2 months) and visit #2 (at 4 months). Visit #3 will be needed when your toddler is 6 months old.

The immunization schedule can change. To find out more about the current immunization schedule, visit www.immunizebc.ca.
Immunizations are Safe
Immunizations are very safe for your toddler. Sometimes immunizations may cause minor side effects, but these are temporary. These side effects might be soreness where the needle went into the arm or leg, or a slight fever. These do not usually last long. Serious side effects from immunizations are very rare. If your child gets one of these diseases, the risks of the disease are far greater than the risk of a serious reaction to the immunization.

For more information, or if you have questions about side effects or how to make your toddler more comfortable if he gets a fever or a sore arm or leg, ask your health care provider, public health nurse, or call HealthLink BC at 8-1-1 www.immunizebc.ca/.

Protection from the “Flu”
The influenza vaccine protects against the 3 strains of influenza viruses that health experts think will likely cause influenza – often called the “flu” – during the flu season. It does not protect against other viruses or bacteria that may cause colds or stomach illnesses (the stomach “flu”). The virus changes (mutates) every year, which means a new seasonal flu immunization must be given every year.

What about Flu Immunization?
Influenza (flu) vaccine is recommended for all children 6–23 months of age, as early as October of each Fall. Children 6–23 months of age can get free influenza immunizations. Caregivers (parents, grandparents, babysitters, other household contacts) of children from birth to 23 months of age are also encouraged to get a flu immunization. Older children with certain health conditions can also get free influenza immunizations.

If your toddler has chronic health problems, they may put her at higher risk if she gets the flu. So it is also important that she get an influenza immunization. Talk to your doctor or a public health nurse if you have questions about immunization for influenza.

Preparing for an Immunization Visit
Here is a quick checklist of reminders to help you prepare for an immunization visit:

• Bring your toddler’s Child Health Passport with you to the appointment. You may have been given one on your first public health visit. If you do not have one, tell your public health nurse at your visit.
• Dress your toddler in clothes that can be easily removed from her arms and legs.
• Bring your toddler’s favourite toy or blanket for comfort.
• Tell your toddler what is happening: “You are going to get an immunization that will help you stay healthy. I will be with you the whole time.”

During the Immunization Visit
• Encourage your baby to breastfeed throughout the immunizations.
• Distract your toddler during the immunization by using toys or get her to blow out or take deep breaths.
• Be prepared to stay for 15 minutes after the immunizations.
• Book your next visit when you take your toddler in for her immunizations.
• For information, see HealthLink BC File 50e, A Better Immunization Experience for your Child at www.healthlinkbc.ca/healthfiles/hfile50e.stm.

Reactions to Immunizations
Immunizations cause very few serious reactions. Those that do occur are far less serious than the actual diseases that immunizations help prevent. Most reactions to vaccines are mild and do not last very long. The most common reactions include:

• Redness, mild swelling or soreness where the vaccine was given
• Mild fever (about 38°C [100.4°F] or less taken under the arm)
• Drowsiness, irritability and poor appetite
• A mild rash that may occur seven to 14 days after the chicken pox or measles, mumps, rubella (MMR) vaccines

Immunizing a Sick Toddler
There is no need to delay immunization if your toddler is sick with a cold, cough or mild fever. If your toddler has a more serious illness on the day of the immunization, talk to your public health nurse or doctor.
Severe reactions to immunizations are rare. These could be a very high fever (over 39°C [102°F] under the arm) or difficulty breathing. If your toddler has either of these signs, tell your public health nurse or doctor and seek medical care right away.

If you are worried about your toddler’s reaction to immunizations, talk to your public health nurse or doctor, or call HealthLink BC. (See “Key Resources for Parents” in the Resources chapter.)

**Hand Washing**

Hand washing is the best and easiest way to help prevent your toddler from getting sick. Show him how to wash his hands properly, and make sure to let him watch you wash your own hands. When he sees you doing it regularly, he’ll learn to do the same thing.

Wash hands for 15 to 20 seconds, which is about the time it takes to sing Happy Birthday. Use plain soap and warm water. Finish with a rinse and dry hands well with a clean towel.

Avoid using antibacterial soaps. They may add to the growth of “superbugs.” Superbugs are bacteria that are too strong to treat with antibiotics.

Wash your hands and his hands often, especially:

- After changing diapers or toileting
- After blowing a nose
- After touching animals or cleaning a litter box
- When tending a sick child
- When preparing food
- Before eating

**To Do**

**Travelling Outside of Canada?**

If your toddler is going outside of Canada, he may need extra immunizations for protection. Contact your doctor or public health office for more information.
Keeping Surfaces Clean

Cleaning surfaces and the other things that your toddler or her food touches is another good way to prevent her from getting sick.

Some of the most important things to keep clean are:
- Food preparation areas and kitchen utensils
- High chairs, bibs, her dishes and cups
- Strollers, toys
- Cribs, changing tables, other furniture that she touches
- Garbage containers
- Pet litter boxes, pet toys, pet beds

Tips to help make cleaning quicker and easier:
- Keep cleaning supplies in one area where they are handy but locked away from your toddler.
- Clean the most important areas first. You may have time to get to other things later.
- Normally, plain soap and water are all you need for cleaning. Antibacterial household products may reduce the spread of germs. However, their use in the home is not yet proven. Using them may add to the growth of superbugs.
- When cleaning up vomit, diarrhea, blood or pet droppings, use a mixture of one part bleach to nine parts water, and wear rubber gloves.
- Wash cleaning cloths frequently.
- Avoid using a dishcloth to wipe her face. You could spread germs. Use a clean face cloth.
- You may find it easier to have paper towels and disposable wipes on hand.
- If possible, divide up cleaning tasks between people in the house.

Hand Sanitizer

Hand sanitizer gel works well when you don’t have access to soap and water. Just rub hands together until the gel is dry. The alcohol will kill the germs on your hands and your toddler’s hands.
When Your Toddler Is Sick

Your toddler can get sick very quickly. She may be playing happily one minute and then, unexpectedly, start feeling sick. You may have already learned her early signs of getting sick. You might notice glassy eyes, more crying or clinging, or pale skin. Be alert to these behaviours and watch her more closely when you see them.

British Columbia has a number of health resources that can help you when your toddler gets sick.

B.C. Health-Care Resources

HealthLink BC
When you need information right away, you can call HealthLink BC. The registered nurses will give you 24-hour confidential information and advice. You can also speak to a pharmacist about medication concerns. The pharmacist is available from 5 p.m. to 9 a.m. every day.

When you call the service, have your Personal Health Number from your B.C. Care Card ready to give. Also, have a clear idea of the symptoms or concerns you want to discuss. Note: If you do not have your B.C. Care Card number available, you still will be able to get service.

Anywhere in B.C. 8-1-1
TTY (Deaf and hearing impaired) 7-1-1

Translation services are offered in over 130 languages.

Public Health Offices
You have a local public health office near you. It provides many supports for you and your toddler. Typical programs and resources include:

- Child immunization programs
- Programs and services for parents of infants and preschoolers
- Assessment and screening of child development and progress
- Education and support for families of children with asthma, allergies and eczema
- Resources on pregnancy and parenting (pamphlets, brochures, books, videos and more)
- Telephone contact with all new mothers and follow-up home visits
- Breastfeeding support
- Postpartum depression screening
- Support for women during postpartum adjustment or those who are experiencing postpartum depression
- Education and support for parenting concerns (safety, healthy lifestyle choices, parent support services and more)

For more information, see “Key Resources for Parents” and “Health Authorities” in the Resources chapter.

Other Health-Care Professionals
If you have any doubts about your toddler’s health or development, talk to any of the following health professionals:

- Family doctor
- Dentist
- Optometrist
- Pharmacist
- Members of your local public health office.

Family Stories

Little Doctors and Nurses
One of the toys Ella and Sarah played with a lot was their doctor and nurse kit. They used the stethoscope and pretend needles and medicine to make each other “feel better.” They were never frightened by the doctor or public health nurse. I think that the play really helped.
Helping Your Toddler with Health-Care Visits

Visits to health-care professionals can be a stressful experience for your toddler. He may be at the developmental stage when he is afraid of strangers. And it is likely that this “stranger” may need to touch and look closely at him.

Here are some tips to help prepare your toddler for health-care visits:

- Talk about what is happening. Explain where you are going and why. Use simple language: “The nurse is going to give you an immunization in the arm. It will sting for a minute, but I’ll hold you on my lap the whole time.”
- Answer his questions simply and directly.
- Book health-care appointments during times when he is well rested and not hungry.
- Model what a health caregiver might do, such as listening to his chest or looking in his ears.
- Encourage him to play “doctor” or “dentist” with a toy.
- Bring along items that will make him more comfortable (a favourite blanket, toy).
- Read children’s books about visits to a doctor, dentist, optometrist or nurse.
- Praise his behaviour and efforts to cooperate (even if he cried the whole time). “You held so still when the doctor looked in your ears!”

Fever

A toddler has a fever if her temperature is 37.4°C (99.4°F) or higher measured in the armpit. (A temperature taken in the armpit is also called an axillary temperature.) A fever itself is usually not harmful. However, it can cause discomfort and dehydration. A fever in a healthy toddler is usually not dangerous. This is especially true if the toddler does not have other symptoms and the fever goes away in three to four days.

It is important to look for other symptoms of sickness besides fever. The degree of fever may or may not tell how serious your toddler’s illness is. For example, a cold may cause a high fever of 39°C (102°F). Then again, a very serious infection may cause only a mild fever or none at all.

How Do You Know If Your Toddler Has a Fever

Simply touching your toddler’s forehead or neck may or may not tell you if she has a fever. Taking her temperature will tell you how high your toddler’s fever is. It will also allow you to keep track of how long she has her fever.

Taking a rectal in the rectum or “bum” temperature is the most exact way to measure fever. However, taking a rectal temperature is not recommended for toddlers. This method might cause injury.

The best way to take your toddler’s temperature is in the armpit with an easy-to-read thermometer (such as a digital thermometer). Place it high up in the centre of her armpit. Make sure it is touching bare skin on all sides. Tuck the arm snugly against her body. Hold her arm close to her body, and wait at least three minutes. Comfort and distract her while taking her temperature.

If the reading is high or you are not sure if it is accurate, wait a few minutes and take her temperature a second time.

Fever

<table>
<thead>
<tr>
<th>Method</th>
<th>Normal temperature range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rectum</td>
<td>36.6°C to 38°C (97.9°F to 100.4°F)</td>
</tr>
<tr>
<td>Armpit</td>
<td>36.5°C to 37.5°C (97.8°F to 99.5°F)</td>
</tr>
<tr>
<td>Ear</td>
<td>35.8°C to 38°C (96.4°F to 100.4°F)</td>
</tr>
</tbody>
</table>

Key Points

- Let your toddler breastfeed more, or offer more to drink
- Take off extra clothes that your toddler is wearing
- Give your toddler medicine to help bring down the fever and make her more comfortable
- Give your toddler a lukewarm bath

If you are concerned about a fever, call HealthLink BC (at 8-1-1), your public health office or your family doctor.
Here are some other tips for taking your toddler’s temperature:

- Mercury (glass) thermometers are not recommended. If the thermometer breaks, she might be exposed to the mercury, which is poisonous.
- Forehead strips or pacifier thermometers are not accurate.
- Do not use a thermometer in the mouth of a child under five years. Young children cannot keep the thermometer under their tongue long enough. Never use a glass thermometer in a toddler’s mouth.
- An ear (tympanic) thermometer is quick, but it may not be accurate. Talk with your public health nurse about how to use your ear thermometer correctly.

If you are concerned about a fever, call HealthLink BC (at 8-1-1), your public health office, or your family doctor.

Coughs and Colds

Most children get several mild colds and coughs every year. These usually improve within a week and go away within 14 days. A toddler under the age of three who has a cold or cough needs to be watched closely. He can become more ill than older children.

When your toddler has a cough or cold, you might notice he has a runny nose, cough (which may or may not produce mucus), fever or sore throat. He may also be irritable.

**How Do You Treat Coughs and Colds?**

- Let your toddler rest.
- Keep the room temperature comfortable but not too hot.
- Give your toddler plenty of fluids (breast milk, water, other fluids).
- Use a cool air humidifier.
- Use saline drops in your toddler’s nostrils to help clear a stuffy nose.
- Raise the head of your toddler’s bed by 2.5–5 cm (1–2 in.) by placing blocks under the legs of the bed.
- Give extra attention.
- Practise good hand washing. (See p. 98 for more information on hand washing.)
- Do not use decongestant or antihistamine medications unless recommended by your doctor.
- Use acetaminophen to reduce pain or fever. Always check the label carefully so that you give the right amount. Phone HealthLink BC at 8-1-1 for guidelines if needed.

If you are concerned about your toddler’s cough or cold, phone HealthLink BC, or contact your public health office or family doctor.
Parenting Your Toddler

Being a parent can be one of the most important and rewarding things you do. It is also hard work. There is no instruction manual for the challenges you will face as a parent. You will learn to parent as you go, based mostly on the way you were brought up. You may also base your parenting on what you see others do or what you read in books and magazines.

Toddlers grow and learn so quickly that you may need to change the way you parent every day. It can help if you try to keep learning what resources your family needs and stay healthy and active.

Why Toddlers Behave the Way They Do

What is happening when you and your toddler disagree or she is doing something you don’t like?

Are you expecting too much? Do your expectations match your toddler’s needs and temperament? (See p. 5 for more on temperament.)

Is it part of your toddler’s stage of development? She sees herself as the centre of the world. She also has little or no control over her impulses. When a feeling arises, she simply goes with the first idea that comes, whether it is hugging or biting. She can easily become upset by her lack of control over her world. She may not be able to say how she feels because she doesn’t know the words to do that. (See p. 9 for more on child development.)

Is she stressed? A tired or hungry toddler will often act out if there are too many activities that are too close together.

Has something changed in her life? Changes in your home or routine can be unsettling for her. Sometimes she’ll act out more until the change becomes routine.

Is she getting enough attention? She may be misbehaving in order to get your attention.

Is the setting suitable for her? Some settings are just not meant for toddlers. Try to avoid settings that require more control than she has.
Positive Discipline

The goals of positive discipline are to teach and guide your toddler as he grows. The aim is to keep him safe and to help him to become a responsible person and to act in acceptable ways.

There is a fine line between punishment and positive discipline. Punishment is an unpleasant consequence that follows an action. Punishment can be physical, verbal or emotional. Hitting or slapping is physical punishment. Shouting is verbal punishment. Shaming or disgracing is emotional punishment.

Positive discipline should not be used to punish or to make your toddler obey. Rather, it should help him understand how to fit into the world in a thoughtful, healthy and productive way.

Your toddler will benefit most from positive discipline that is:

- Based on respect for him and his feelings. Name calling, blaming or talking in a hurtful way is not positive discipline.
- Seen as fair by your toddler (although he may not feel this at the time).
- Right for his age and what he can do.
- Consistent.
- Given at the time when the problem behaviour occurs.
- Explained in a way he can understand. This helps the discipline become a learning experience.
- Built on the trust and love between you and him.

The following section gives you information on how to promote positive behaviour and how to deal with problem behaviour. It also provides information on how to guide your toddler’s behaviour as he gets older.

How to Promote Positive Behaviour

You can help promote positive behaviour in your toddler. This can prevent problems from developing in the first place. Here are some tips on how to promote positive behaviour.

Communicate With Your Toddler

Much of your communication with your toddler is a form of teaching. Your words should be simple. Some days it can feel like you each are speaking a different language. You will sometimes have to listen hard to learn what she wants to tell you.

Here are some tips for communicating with your toddler:

- Get her attention before you speak.
- Get down to her level. You may have to sit on a chair, stoop or sit on the floor.
- Make eye contact.
- Use a gentle touch.
- Keep your words clear, simple and direct. Saying “Please put that down” is more direct than “Cut it out.”
- Make only one request at a time. She cannot react to two or three requests at the same time.
- Use positive communication. Try to tell her what to do instead of what not to do. Saying, “Please ride on the sidewalk” is more positive than, “Don’t ride on the street.”
- Listen carefully to her. If you are too busy to listen, say, “I can’t listen right now, but I will be able to in five minutes.”
- Focus on her behaviour. Saying, “How wonderful that you went pee in the potty” instead of, “Good girl” helps her understand what behaviour you want from her.
• For every “No,” try to offer two reasonable choices. “No, that paper is for Daddy. But you can play with this book or this toy.”
• Use “please” and “thank you” whenever you can.

Provide a Safe and Stimulating Environment
• Supervise your toddler.
• Childproof your home for safety. (See the Safety chapter on p. 129 for more information.)
• Provide a range of interesting toys and activities.
• Set up play areas in the kitchen, living room, garage and yard, so you can be close to your toddler.
• Provide tools and toys for play cooking, office work and gardening. You don’t need to buy fancy toys. Just use items that you have around the house.

Keep Routines
• Organize your day so there are regular naps and mealtimes.
• Keep to bedtime routines.
• Balance active and quiet times.
• Tell your toddler about any changes in routine that will be happening.
• Give your toddler regular attention, even if you are busy.

Set Good Examples
• Be calm and patient.
• Model the behaviour you want to see in your toddler (such as sharing or taking turns).
• Gently remind your toddler about limits – she has a short attention span and can quickly forget what you’ve said.
• Avoid reacting in angry or defensive ways.

Praise Good Behaviour
• “Catch” your toddler behaving well and tell her right away: “I really like the way you are playing gently with your sister.”
• Tell your toddler what you like about her behaviour: “Thank you for using your quiet voice at Grandma’s house,” or “I really like that you are holding my hand while we cross the street.”

Focus on Cooperation, Not Control
• Offer appropriate choices, usually no more than two.
• Show your toddler how to negotiate: “I will read you a story after you’ve picked up the blocks.”
• Talk about conflicts: “I can see that you are angry at Tim for taking the ball.”
• Offer solutions to conflict: “Maybe you can let Tim have a turn and then he will give you a turn.”
• Let your toddler know that other children have needs too: “Tim wants to have a turn with the ball too.”
• Help your toddler express feelings and desires: “Does that song make you feel happy?”

How to Deal With Problem Behaviour
When your toddler wants to do something that you don’t want him to do, he is not testing you. He is testing his ideas, boundaries and power. Learning to be independent is an important part of his development. (See p. 37 for more on independence.)

Dinnertime Solution
Dinner was the worst time of the day or us. Both my toddler, Breanne, and I were tired and hungry, and I was trying to clean up and make dinner. When my husband, Wayne, came home, I would be yelling and Breanne would be in tears – not a pretty picture for him every night. So I decided to stop the pattern. At five o’clock Breanne sits on the couch with her blanket and has quiet time with soft music, a toy and a small snack of fruit. I put my feet up and relax as well. When Wayne comes home, he plays with Breanne in the other room for half an hour while I have time to make dinner. We eat a little later but we are all calm and much happier. I had to rethink how I was doing things that no longer worked for us.
Here are some positive ways to guide behaviour:

**Offer Choices**
“Would you like to wear your yellow T-shirt or your red T-shirt?” Your toddler will respond to being able to make simple choices. This helps give him a sense of control. Try to limit choices to two options. More than two options may confuse him. Making choices helps him develop independence and cognitive skills.

**Redirect**
“Let’s throw your ball out on the deck. No one will get hurt out there.” Use this strategy when your toddler is doing something that is all right, but the way in which he is doing it is not. If he is throwing blocks in the kitchen, take him to find a ball and a place where it is safe to throw. You can say: “This is where it is safe to practise throwing, and a ball is safer to throw than a block.”

**Set Limits**
“Remember to hold my hand when we cross the street.” Let your toddler know what the limits are and what is expected or what you want. If possible, state limits in a positive way. The most important limits you set are around safety. A simple “no” is an effective way to make the limits clear: “No. We don’t hit.” Be consistent in sticking to the limits you set. Remind him of limits when you need to: “You need to be buckled in your car seat before we drive to the park,” or “Be gentle with your little brother.”

Make your directions clear and simple enough for your toddler to follow. Be fair and consistent. Don’t let him bite you one day and laugh it off, then get angry when he does the same thing the next day. Biting is always wrong. (See p. 109 for more on biting.)

**Distract**
“Look at this book.” Distraction can work very well with even very young children. If he is doing something you don’t want him to do, switch to something else. Show him a toy, ask him to read a book with you or do a quick finger play. Distraction works because young children have very short attention spans.

**Use Consequences**
“That’s too bad – the bubbles are all gone now.” Older toddlers can learn from experience. Make sure you tell your toddler ahead of time what is likely to happen. Then he has a choice. If he is going to pour bubble-making soap on the grass, tell him, “There won’t be any bubble soap left if you pour that out.” And, if he decides to pour it out anyways: “That’s too bad – the bubbles are all gone now.” He may cry and may need a hug for comfort. But he’ll learn quickly that some actions have consequences. Use consequences that teach.

**Remove Your Toddler from the Situation**
“It’s time to take a break. Come and have some quiet time with me.” If your toddler is nearing 36 months of age, removing him from a difficult situation can work well. This gives him a chance to calm down. Give him something quiet to do, like looking at a book or doing a puzzle. Once you feel he has calmed down, praise him. If he is going to go back to the same situation, remind him of what you expect: “You seem ready to play with your sister again. Remember to play gently with her.”

---

**Family Stories**

**Learning about Limits**
We learned the hard way that our kids need limits. With our first child, Ella, we decided not to say “no” to anything and to redirect the negative behaviours instead. It worked well when she was young, but as she approached 36 months, her behaviour became downright obnoxious. One thing she would do at each meal was demand a certain spoon and cry till she got it. My niece came to visit, and one night when Ella was crying for her special spoon, my niece said, “Oh no, not the spoon routine.” At that moment, my husband and I both came to the same realization that Ella needed clearer limits. We started saying “no” and setting reasonable limits. Her behaviours improved within a week and there were less performances and crying when she didn’t get her own way.
**Use a Time In**

“You need a time in.” Time in is when your toddler is having a difficult time, and you ask her to sit with you, perhaps in quiet space, for comfort and calming. During the time-in, you can help your toddler share her feelings, listen to her and empathize with her. If she was behaving inappropriately, you can explain why this behaviour is not acceptable and help her figure out another way to approach the situation. You should only use a time in if you are calm.

**Learn to Compromise**

A compromise is a middle way that is safe and will work for both of you. Your toddler may be at the stage when she needs to try things out for herself. Sometimes she may want to do something that you don’t want her to do. In these situations, a compromise might work. Compromising is a skill that she will use to get along well with others.

For safety reasons, some things are not open for compromise. She should learn that safety comes first. For example, tell her, “No, you can’t play with matches, you could burn yourself.” She will soon learn that there is no compromise for some things.

**Learning Control**

I was sick of always fighting with my son, Jasper. It seemed like he was the one in control most of the time. Then my mother gave me a tip. She suggested that I let him be in control of some things, that it was something he needed to be learning at this stage in his development. So I started with, “Jasper, do you want to wear your blue shoes or your black shoes today?” instead of, “Put your shoes on now!” It worked. So I tried it with lots of different things: “Do you want to eat your carrots first or your tomatoes first?” “Do you want to play with your blocks or ball?” Suddenly, I wasn’t fighting with him anymore to get things done. Once he was able to make decisions regularly, he was happier, and I knew I was helping him learn to be independent.
## Positive Discipline by Age

The way you guide your toddler’s behaviour is going to change as he gets older. No single strategy will work for all stages. Try to change what you do as he gets older.

<table>
<thead>
<tr>
<th>6 Months to 12 Months</th>
<th>12 Months to 24 Months</th>
<th>24 Months to 36 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>A regular schedule of rest, feeding and play is the best way to support and guide your toddler at this age. If your 10-month-old spills his milk, he is not being bad, but he may have been trying to move the glass. Consequences do not work as a form of discipline between 6 to 12 months of age. It is helpful for your toddler to experience some frustration so that he learns to comfort or soothe (or settle) himself. You don’t always have to pick him up the moment he fusses, as long as you comfort him in other ways. Some of the best ways to support your toddler at this age are to: • Spend quiet time together. • Give him a comfort toy. • Redirect. • Distract.</td>
<td>At this age, your toddler will begin to try to exercise control over her world as she develops a stronger sense of self. She may be demanding and easily frustrated, and she may have a very short attention span. Remember, she is not misbehaving to upset you. She is simply testing and exploring. Her desire to explore, along with her short attention span, make safety a very important concern at this age. Try to be patient and keep a close eye on her. Children between 12 and 24 months of age should not be left alone. Time outs should not be used because they may increase separation anxiety or fear of being abandoned. Some of the best ways to support your toddler at this age are to: • Childproof your home. • Offer choices. • Redirect. • Distract.</td>
<td>Between 24 and 36 months of age, your toddler is struggling to master his world, going between independence and dependence. He is trying to figure out who he is. You may find he is very possessive and demanding at this stage. This can be difficult for both him and you. Outbursts and temper tantrums are likely. Stay patient, try to have empathy, keep your routines, give careful supervision and set limits. (See p. 109 for more on tantrums.) Try to have realistic expectations of his skills and explain the reasons for limits in simple ways. Some of the best ways to support your toddler at this age are to: • Childproof your home. • Offer choices. • Redirect. • Set limits. • Use consequences. • Distract. • Use a short time out, if you choose.</td>
</tr>
</tbody>
</table>

---

**Family Stories**

**Age Makes a Difference**

I took a parenting course and learned that the challenges I was having with my two-year-old, Ethan, were because I was expecting too much from him. I thought he understood everything I said and was just choosing to not listen. But he just wasn’t old enough to understand.
Children do not come into this world knowing how to work well with others. It is during the toddler years that they begin to learn what they can and cannot do. This is the time for you to help your toddler learn the basic skills she needs to think, care and act responsibly in the future. She will misbehave for a number of reasons. Very few (some would say none) of these reasons have to do with wanting to make you angry with her.

Some behaviours can be very challenging for parents, such as biting, tantrums, fighting, whining and dawdling.

**Biting**

At one time or another, your toddler might try biting. It is unclear why he may bite, but it’s best if he learns that it is something he must not do. If your older toddler bites:

- State the limit clearly and simply: “No, please don’t bite. It hurts.”
- If he bites while breastfeeding, loudly say, “Ouch, that hurts. Please don’t bite!” and remove him immediately from the breast. Then try breastfeeding again. Just because he bites does not mean you need to stop breastfeeding.
- Avoid biting him back. It will frighten and confuse him and will not stop him from biting.
- Avoid laughing or taking biting lightly. A nibble on your leg may not seem serious, but a deep bite on a playmate is.

**Tantrums**

Tantrums can be normal events for toddlers. Your toddler is at a stage where he gets upset easily and reacts quickly. He wants to be in charge of his world, but he does not have the language or emotional skills to do it well. He can also easily become overtired, hungry and anxious. Tantrums are usually more about how he is feeling overall than the event that seemed to start the tantrum.

**How to Avoid or Cut Down on Tantrums**

- Make sure your toddler has regular rest, physical activity and meal and snack times. If you are out, take healthy snacks and water with you. (See p. 65 for more information on healthy snacks.)
- Let him know ahead of time what is going to happen and what you want him to do. When going into the store, tell him what you have planned, “We are going to the store for milk and fruit. You can help me choose the bananas.”
- Find helpful ways for him to share strong feelings. This could be throwing a ball, running fast or talking about his feelings (“mad,” “sad”).
- Try not to say “no” to every request.
- Give him control over little things. This will help lower his frustration level.
- If you see a tantrum coming on, try to redirect or distract him. Or try correcting whatever the problem is. Give him quiet time or some food if he’s hungry or tired.
What to Do During a Tantrum

- If the tantrum has started, don’t try to stop it or talk to your toddler. He is out of control, cannot stop and will not hear what you say.
- Stay calm. Take 30 seconds to think about what to do. Do not scream at or spank him.
- Some children are better able to move back into control if they are held firmly but lovingly. Others find this closeness even more upsetting and their tantrum may become worse.
- If you are in a public space during a tantrum, keep in mind that most people will understand. Many people have been in the situation themselves.
- Make sure that he is somewhere safe, where the flailing, rolling or pounding will not hurt him or others, or damage property. If he is in a shopping cart, make sure you hold on to him for safety.
- When the tantrum is over, cuddle and comfort him. Praise him for regaining control. Recognize his feelings: “I know you are upset about not being able to get that toy.”
- Avoid giving in to whatever the tantrum may have been about. You do not want him to learn that a tantrum will make you change your mind.

Fighting

Have you watched your toddler around her playmates or siblings? You have probably seen that she doesn’t always get along with them. She is beginning to understand ownership. She wants control over other people. She is likely to have at least a few fights in her toddler years. Think ahead about how you will handle a fight. Here are some tips that might help:

- Help her come up with solutions: “What do you think you should do?” She will need lots of coaching to arrive at solutions.
- Step in and offer solutions that are fair: “Let’s take turns. Let Michael have the toy for a few minutes. Then he can give it to you.”
- If you feel the children are safe, step back for a few minutes to see if they can solve the problem themselves.
- If you are worried about their safety, step in right away and stop the fight.

Sometimes Nothing Works

When my daughter, Julia, was two, we were walking to the library to return a book on parenting. She had a meltdown right on the road. It was a classic, kicking, screaming down-in-the-dirt tantrum. I had no energy left or ideas on how to stop it. So after making sure that she was safe, I sat down on the curb and reread the chapter in the book about tantrums! None of the suggestions were helpful at that moment. But by the time I’d finished reading the chapter, Julia had stopped the tantrum on her own and was looking at me. Maybe she was wondering why her mother was relaxing on the side of the road while she was having a meltdown!
Whining

Whining is that unpleasant tone between talking and crying. It bothers most parents much more quickly than other challenging behaviours. Whining often happens when your toddler is tired or hungry. You may hear it when he feels no one is listening to him, or he cannot find the words to tell you what’s wrong.

Here are some tips to help prevent whining:

- Make sure he is not hungry, tired or uncomfortable.
- Praise him when he is not whining: “I like your grown-up voice.”
- Keep in mind that “more is caught than taught.” Try to be a role model.
- Say, “I can’t hear you when you whine.”
- Do not give in to the demands of the whining.

Staying Cool as a Parent

Parenting can be very rewarding, but once in a while almost all parents lose their tempers with their toddler. And most parents wish they had not. Here are some tips to help you stay calm:

- **Stick to routines.** Your toddler likes routines. It helps her to cooperate if she knows a certain thing will happen at the same time each day. Keeping routines for sleeping and eating will go a long way.
- **Adjust your expectations.** Sometimes parents have expectations of themselves and their toddlers that are much too high. Learn about child development to get a better idea of what to expect from your toddler at different stages. (See p. 9.)
- **Rest.** Sometimes taking a nap when your toddler does can help you feel less overwhelmed or angry.
- **Make time for yourself.** Build in some regular time for your own relaxation. Trade time with family members, friends or another parent. Do something you enjoy.
- **Know that you don’t always have to fix everything.** It can be difficult to hear your toddler cry. But if she hasn't learned to talk yet, crying may be her only way to express herself. You do not have to “fix it” every time she cries. If she’s not hungry, hurt or otherwise in need of your attention, and if she seems to be crying because she is upset or angry, it is fine to let her cry for a little while. Don’t ignore her, but wait to see if she is able to calm herself down.

Slowness or Dawdling

Time does not have the same meaning for your toddler as it does for you. She doesn’t dawdle to make your life difficult. She is just more focused on an activity than she is on time. It is normal for her to take a long time when she is learning new skills, going somewhere or getting something done.

Since it’s almost impossible to get your toddler to stop dawdling, here are some tips to help:

- Give her plenty of notice that you are going to change from one activity to another.
- Build in extra time when you are organizing your day and week.
- Clearly and simply tell her what you want: “Put on your coat now, please.”
- Get rid of distractions when you are in a hurry.
- Get yourself ready ahead of time, turn off the TV and put toys away.

Humour can Work

When my toddler, Eric, would whine, my wife and I offered him a cute suggestion. We’d tell him: “Eric, put your whiny voice in your pocket.” It would, at the very least, make him stop to think. Sometimes he would pretend to put his voice in his pocket. It was pretty cute and a lot better than the whining!

Spanking

Never spank a toddler. Spanking is not recommended by the Canadian Paediatric Society or early childhood educators. This is because you can really hurt your toddler when you are angry. Spanking can also lead to anger and resentment. It can cause him to lose trust in you. Spanking also teaches him that hitting others is all right.

What should you do if you feel you are beginning to lose control? Make sure he is safe, and take some time to cool down. If these feelings persist, talk with your health-care provider.
**Key Points**

*Every Parent makes Mistakes*

Nobody is perfect. Everyone makes parenting mistakes. When this happens, follow up with your toddler: “I’m sorry I yelled at you. I was afraid that you would drop the vase.” This will model the kind of behaviour you expect from your toddler.

- **Keep a journal.** Try to figure out what triggers your temper. You may find that you tend to get angry at mealtimes when you are busy and your toddler is hungry. If this is true, plan a late snack, have a short rest together or make some quiet time with a toy before making the meal.

- **Talk about the challenges.** Talk to someone close to you about the challenges you are having and how you are feeling. It is best not to do this in front of your toddler.

- **Get to know other parents.** Connecting with other parents of toddlers can help you build a support network.

- **Protect your toddler.** If you are feeling overwhelmed and afraid you might lose control and hurt your toddler, get help immediately. Put your toddler somewhere safe and call a family member, a friend, HealthLink BC, your public health office or your doctor.

---

**Shaken Baby Syndrome**

Shaken Baby Syndrome (or neurotrauma) is the name for the injuries that can happen when a baby or toddler is shaken. Shaking a toddler can cause serious injury or death. Shaking can cause brain damage, blindness, paralysis and seizures.

Shaken Baby Syndrome often happens when a parent or caregiver loses control because a child won’t stop crying. The parent or caregiver gets angry and ends up hurting the child.

To prevent Shaken Baby Syndrome:

- Learn how to calmly cope with your toddler’s crying.
- Do not leave your toddler in the care of someone who has problems controlling their anger.
- Tell others who care for your toddler that crying is normal. Ask them to call you if they get frustrated, so you can return.
- Learn how to control your anger. If you are very angry, put your toddler in a safe place, such as the crib, and walk away until you are under control again. If you feel unable to cope or are afraid that you may hurt him, make sure he is safe. Then call someone for help. Never pick up a toddler when you are angry about the crying. Call a family member, a friend, HealthLink BC, your public health office or your doctor.

See “Shaken Baby Syndrome” in the Resources chapter for more information.
Parenting Issues

As a parent, you will likely face situations that you were not expecting. This section gives you information about special situations including perinatal depression, nurturing your relationship with your partner and dealing with differences in parenting. It also includes information about cultural diversity, parenting on your own and parenting a toddler with special needs.

Postpartum Depression

“Perinatal” means “around the time of birth”. Perinatal depression is depression that happens any time from when you first become pregnant to one year after your baby is born. Postpartum depression is perinatal depression that happens after birth. It can also affect women who have had a miscarriage, stillbirth or who have adopted a child. It is different from “baby blues” where mothers feel more irritable, restless, tired or tearful in the first two or three weeks after a baby is born. Most mothers experience “baby blues”, but this gradually disappears.

Postpartum depression is a serious health concern and requires that mothers get help from health care providers. It can affect your body and mind, and upsets your thinking, emotions, behaviour and habits.

Common symptoms of postpartum depression include:

• Difficulty sleeping, extreme fatigue or exhaustion
• Lack of self care, e.g., not eating or emotional overeating
• Uncontrollable crying
• Feeling upset or angry over things that usually wouldn’t bother you
• Depressed feelings or extreme mood swings
• Unable to enjoy your child
• Feeling unfit or unable to care for your child
• Thoughts of harming yourself or your child
• Strong feelings of guilt, failure or worthlessness
• Panic attacks where you feel your heart is racing, you are out of breath or shaking and sweating
• Lack of interest in things that you usually enjoy

It is important to get help. Without treatment, postpartum depression affects both you and your toddler. A mother who is depressed for a long time can have difficulty bonding and caring for her toddler. He may not feel safe and loved, and may not be able to develop secure attachments. Over time, he might struggle with relationships.

If you think you, your partner or family member may be experiencing postpartum depression, ask your doctor or public health nurse for help. There are many effective supports and treatments that can help with recovery from this serious illness. The best help usually comes from a mix of support from health care providers, family, friends, self-help and the community.

How to Help Yourself

Ask for help from your health-care providers.

Some women have a hard time asking for help, but it is important to talk to your doctor, midwife or public health nurse about how you are feeling so that they can help you.

One treatment may include local support groups who know about the feelings you are having. Other treatments could be individual counselling, and sometimes, medication. There are medications used to treat perinatal depression that are safe for breastfeeding mothers. If you need to take any medicine while you’re breastfeeding, talk to your pharmacist or healthcare provider.

Get Help when the Crying is Too Much

I remember how awful it was when our daughter, Emily, was going through a crying phase. It would go on for hours. Nothing seemed to calm her, and I wasn’t getting enough sleep. After many angry, tired days, I made a list of friends who I could call and they would talk me through it each time. They would say, “Put Emily in the crib, now go into the bedroom, put the phone down, and hold the pillow over your mouth and scream. Do you feel better?” It sounds silly but I needed to share it with someone and get myself in control again.

I had to find a way of expressing myself while making sure that Emily was safe when I did it.
For more information about medication safety during breastfeeding, you can also contact Motherisk toll-free at 1 877 439-2744 www.motherisk.org/.

Ask for help from your friends, family and community. Mothers who have had postpartum depression report that having a strong circle of supportive people helped them recover. If possible, talk to your partner about how you are feeling. Talk with someone you trust and who you think will understand your feelings. Ask your partner, family members or a babysitter to care for your toddler so that you can take regular breaks. It is also a good idea to find a support network, such as a mother-child group.

Self-help. Try to get enough sleep, eat well and exercise regularly. Sleep while your toddler naps, take a daily walk with your toddler, have a friend over and keep in contact with friends.

How Partners and Family Members Can Help
A mother who is trying to cope with postpartum depression needs support. You may feel helpless during this difficult time and may think there is little you can do, but you can make a difference.

Here are some suggestions that may help a mother with postpartum depression:
- Encourage the mother to talk about her feelings. Show that you are trying to understand.
- Help with or take over household chores and responsibilities.
- Let her know that she is loved and valued.
- Let friends know when she doesn’t feel like having company.
- Say yes when friends or family offer to help with things like cleaning the house or helping care for the toddler. She needs some time away from her toddler.
- If you are a partner, be loving without asking for sex.
- Try not to act like you think she is making a fuss over nothing. Postpartum depression is a serious health issue.
- If you have concerns about how the mother is coping, show your support and concern. One way to do this is by going with her to visit her health-care provider and sharing your concerns.
- Find support for yourself. Talk with someone you trust and who you think will understand your feelings. Talking with others can provide you with hope and support.

Taking Care of Your Relationship
Parenting a toddler can be a very stressful time in a relationship. It is easy for parents to neglect each other because the toddler can take most of the focus and energy of the family. It is important that you find time to take care of your relationship.

Here are some ways in which you can nurture your relationship:
- Go on regular dates together. Write them on your calendar and have a babysitter or trusted family member take care of your toddler.
- Make mid-week dates, even if it is just for a coffee. Use this time to reconnect.
- Make time for a healthy sexual relationship.
- If possible, travel to and from work together.
- Allow your toddler to occupy himself sometimes. He can learn how to amuse himself and to be independent. You just need to be close enough to supervise him.
- Take an evening class together.
- Plan and cook meals together.
- Connect every day. This could be some quiet time before your toddler is up in the morning or after bed in the evening. Even 10 minutes to talk about the day may work.
Differences in Parenting

Consistent parenting offers your toddler a safe and nurturing environment. Sometimes, parents do not agree with each other about the best way to handle their toddler’s behaviour. It seems to be healthy for toddlers to see their parents sometimes not agree. It helps toddlers learn that people may see things differently. It also teaches them how to be flexible.

Sometimes, however, parents find they never agree. This can be confusing for a toddler. It can give her unhealthy power within the family, where she takes sides and plays one parent against the other. This is especially likely if parents argue in front of her.

There are three main parenting styles:

**Permissive Parenting Style**  Parent takes a relaxed attitude and usually lets children do what they want. Children know they are loved but don’t learn consequences.

**Authoritarian Parenting Style**  Parent takes control, is strict and expects obedience. Children learn good behaviour, but often with the threat of punishment, and may rebel.

**Authoritative Parenting Style**  Parent is gentle but firm, is consistent, explains the reasons and models good behaviour. Children feel secure and have self-respect.

Research shows that the "authoritative" style of parenting is the most successful. It helps children grow into responsible, thoughtful, healthy and productive adults. Discuss your parenting style with your partner.

Here are some other things you can do to help you and your partner work together on parenting:

* Respect and talk about your differences. Try to understand the reasons for your disagreement. Do this in private where your toddler cannot hear you.

* Be prepared to make compromises and negotiate with your partner. Remember, some differences in parenting styles are healthy for your toddler.

* If you seem stuck, get help. Take a parenting course, talk with friends and family, read books or talk with a counsellor.

Cultural Diversity

If there are differing cultural beliefs and traditions within your family, you can use these to teach your toddler and enrich her life. She can gain a lot from being around cultural diversity. Parenting styles and what is expected of children differ from culture to culture. What is thought to be strict or respectful in one culture may not be the same in another culture. The value placed on children, the rules and the role of relatives in raising a child can vary greatly. Who is allowed to discipline children also varies. In some cultures, extended family members as well as parents are responsible for the actions of young children. In other cultures, only parents are responsible for a child’s behaviour.

It’s a good idea for parents and families to discuss their childhood beliefs, practices and traditions about parenting and the meaning of family.

The Joy of Telling Stories

In China, where my mother grew up, babies and children were not read to or “played with.” Grandparents told stories and older children played with younger children. Sometimes my mother felt she couldn’t do anything with my son, Michael, because she couldn’t read English and didn’t know any of the English nursery rhymes. So I took my mother to the local library so she could pick a picture book. She started to use the books to tell her own stories to Michael in Mandarin. This way, she could re-tell her stories in her own language and use a picture book from the local library.

Nursery Rhymes in Hindi

We mainly spoke English at home but it was really important for us that our growing toddler learned or was exposed to Hindi. I used to sing a nursery rhyme in Hindi that was about 10 birds sitting on a tree and what happened to them as one flew off. By doing this, my daughter learned the names of birds and trees and to count to 10 in Hindi.
Here are some tips for supporting cultural diversity:

- Acknowledge and respect the cultural differences. Listen to each other and try not to judge. Try to find out what your partner and family members believe and value.
- Think about your own culture and beliefs. Try to understand exactly why you parent the way you do. Do you consider your position more “normal” than your partner’s? Do you believe something is important because it was traditional in your family? Have you questioned whether it really is important? Have you questioned the long-term consequences of your beliefs? Is your belief based on your own fears or your own experiences?
- Try combining your values and beliefs and using the best from all cultures involved. Combine and celebrate holiday traditions. Read stories to your toddler in all the languages used in your family. Cook and value traditional foods. Choose positive discipline strategies that are consistent and promote child development.

**Giving positive discipline.** Set firm, clear limits for your toddler. These should match her development stage. Use the recommended disciplining practices described earlier in this section (See p. 104 for more on positive discipline.)

**Giving your toddler quality time.** It’s not just the amount of time that you spend with her that counts; it’s what you do when you are together. Try to support, encourage and listen to her.

**Finding time.** If you are looking for more time with your toddler, be creative. Maybe your employer will be flexible with your hours. Arrange to trade babysitting with other single parents. Join activities with other parents and their kids.

**Taking care of yourself.** Don’t forget about yourself and your own health. Eat a healthy diet, get exercise and try to get enough sleep. Find ways to take care of yourself – whether it is taking a nap, playing a sport, reading a book or learning relaxation techniques.

**Avoid treating your toddler as an adult.** Use your adult relationships to talk over issues and troubling events. Your toddler cannot take on adult roles.

**Ask for help.** When you feel overwhelmed, depressed or exhausted, get help. Look to friends, family members and professionals.
Parenting a Toddler with Special Needs

Parenting a toddler with special needs brings both joys and challenges. Your health-care provider will be able to help you understand your toddler’s development and individual needs. Your health-care provider can also tell you about the services available to assist you.

Here are some suggestions that may be helpful in parenting a toddler with special needs:

- Talk with other parents or join a support group for parents of children with special needs. Talking with parents who have had similar experiences can provide you with emotional and practical support.
- Expect to go through many changing emotions about your toddler’s needs. Know that these emotions are normal.
- Have open discussions with members of your immediate family. Give yourself, family members and friends time to adjust.
- Remember that you are not alone. Ask for help from professionals, extended family members and friends. Contact organizations that focus on your toddler’s special needs.
- Take care of yourself and make sure your needs are met. Exercise, eat well, get enough sleep, get regular medical care and give yourself some time off from child care.
- Take time to enjoy your toddler and celebrate his strengths and abilities.

It is important to remember that, even if your toddler has a special need, he will still go through stages of development. He may not reach these stages at the same age or at the same rate as other children, but he will make progress.

Your toddler’s needs are also very similar to those of other children. He needs chances to play, to try out new skills and to be praised for his successes. Most of all, he needs your love and attention.

Teamwork

Parenting a toddler with special needs usually means working with a team of specialists and professionals. You are the key member of the team and the expert in your toddler’s needs. You understand her better than anyone else. You know her history, her daily routine, her strengths and her ongoing needs. This knowledge can help professionals develop the best plan for therapy, treatment or support.

Here are some other tips for building a team that supports you and your toddler:

- Get support as soon as possible. Research shows that the sooner your toddler gets support for her needs, the better her chances are for healthy development.
- Make sure that all members of your team know what the other members are doing to help your toddler.
- When you meet with your team, ask a lot of questions. Remember, all questions are good questions.
- Take notes during visits with your team.
- Consider bringing a friend or family member to meetings for support. That person can also help take notes, keep track of information and review the discussion with you later.
- Keep a journal about your toddler’s condition, including any changes in behaviour, times of day they occur and triggering events. You can use it to review and make decisions.
- Since you know your toddler best, be a champion for her. Think about the recommendations made to you by professionals. Then decide what would be best for her. This way you can join in the problem solving with the members of your team.
- If you have a concern about your toddler that you feel is being overlooked, trust your instincts. Let others know about your concern. You may be able to see something that everyone else is missing.

Our Special Toddler

When our son Brandon was first diagnosed with Down syndrome, we were devastated. As we moved through the process of grieving for our loss of a “normal child,” we began the process of learning about our “special child.” With the help of our health-care team, support group and family, we have developed a loving and nurturing home for our little guy. He’s the light of our lives and we can’t imagine life without him.
Helping Your Toddler Adjust to Change

Toddlers are most comfortable with regular routines. Regular routines can make your toddler feel safe and protected. However, sometimes changes happen. Some children react very strongly to changes, while others don’t seem to notice them.

Your toddler may not be able to tell you how he is feeling in words, so when there is a change in his life, he may show you how he feels by:

• A loss of appetite
• Crying
• Nightmares or sleep problems
• Outbursts of anger or temper tantrums
• Clinging
• Being very quiet or withdrawn
• Going back to old habits (thumb sucking, wearing diapers)
• Having trouble being apart from parents and caregiver

You can help your toddler adjust to change by showing him that he is loved and will always be taken care of. Keep in mind that he cannot be a support to you when things are difficult for you. He is too young. If you are upset and crying, tell him that you are upset right now, but you will feel better soon. If you need to, ask a safe, caring person to look after him while you talk with a friend, doctor, counsellor or crisis centre.

It also helps to monitor how your toddler is adjusting. You know his temperament best and can predict the reactions he might have. Finally, it’s important to tell him that the change is not his fault.

Expected Changes

This next section may be helpful if you are expecting big changes, such as welcoming a new baby to the family. It also provides information on how to help your toddler deal with death or a family breakup.

There are some changes that you know about, such as the birth of a new baby or a move to a new house. Here are some ways you can help prepare your toddler for a change:

• Talk to her about the expected change in a positive way.
• Listen to her concerns and reassure her.
• Read books to her about the expected change. For example, if you are moving, read stories about families that move.
• Provide toys that allow her to act out the change. Use a baby doll to talk about a new baby. Use a toy moving truck to talk about moving to a new home.
• Try not to have more than one change at a time. If possible, try to avoid having several big changes at once. For example, don’t try moving her to a bed and start toilet training at the same time.
• Be warm and loving to make her feel safe and secure.
• Her concerns are real, even if they may seem small to you. If keeping a favourite teddy bear or pair of shoes out of the moving box helps, then make sure they do not get packed away.
• Try to make time every day for the usual things she enjoys, such as a favourite story, food she likes in her special bowl or a cuddle before bed.
Welcoming a New Baby
How your toddler changes when a new baby is in the house will depend on a number of things, such as:

- His age
- How he usually responds to change
- How much he knows and understands

It does help to know that it is very common for toddlers to be upset by the arrival of a new baby. Toddlers don’t like changes in their day or any change in the amount of time with their parents. A new baby in the house changes routines and can take time that may have been your toddler’s.

Here are some ways to help with making the coming of a new baby easier for all of you:

Preparing for the Baby

- Tell your toddler about the new baby and answer his questions simply and honestly.
- Let your toddler feel the baby kicking and help him talk to the baby “in Mommy’s body.”
- Read books about babies and big brothers and sisters.
- Show your toddler his baby pictures and talk about what he was like as a baby.
- Find a baby doll for your toddler to “parent.” He can change the diapers or cuddle the doll.
- Make any changes in your toddler’s life, such as moving out of a crib to a bed, changing rooms or toilet learning, long before the birth, if possible.
- Talk to your toddler about what a baby does and needs. He may expect someone to play with, not someone who cries or sleeps most of the time. If possible, visit friends who have babies so he can see for himself.
- Have a plan for your toddler’s child care when the new baby arrives, and explain it to him.
- If you plan on having your toddler present at the birth, arrange for someone, other than your partner, to be his main support. This person must be able to leave the room with him if the labour or birth becomes upsetting or frightens him.
- Plan to have your toddler see and visit the baby soon after the birth. It is better to do this when no other visitors are there. Time his visit so you can focus on introducing him to the baby. Tell him ahead of time what he might see, such as any medical equipment in the room or on you.

Spacing Your Pregnancies
Have you ever wondered how long you should wait between pregnancies? Research shows that it is best to wait at least 18 months between the birth of one child and the time you get pregnant again. When pregnancies are closer together than this, there is a higher chance of preterm birth and low birth-weight babies. A mother’s body needs time to rebuild for the next pregnancy.

To Do

Who are the Health Professionals on Your Team?
As your child grows from being an infant to a preschooler, you may wish to get other forms of support. Check the following professionals and services that may also help you and your toddler:

- Specialized doctors/pediatricians
- Public health nurses
- Mental health professionals
- Child development centres/infant development programs (you can contact them yourself, no referral needed)
- Social workers, child and youth care workers
- Speech-language pathologists
- Supported child development consultants
- Occupational therapists
- Public health audiologists
- Physiotherapists
On the Day of the Birth
- A daily plan is important. Make sure your toddler knows who will take care of him when you go into labour. Try to plan it so that his day is as normal as possible.
- Help your toddler safely hold and talk to the baby.
- Talk about how much your toddler looks like the baby or how the baby is looking right at him.
- Encourage your toddler to interact with the new baby as much as possible when you are all together.

At Home After the Birth
- Try to keep the routines you had before your new baby arrived. This will help your toddler feel safe and loved even as changes are made for the new baby.
- Try to make time to do the special things that you used to do with your toddler. You might want to give him a chance to suggest activities.
- Be patient with your toddler. He may want to return to old habits, such as sleeping in a crib or wetting his pants. (This can happen even if he knows how to use the toilet.) This is normal. Let him take these few steps back into babyhood for a short time. Praise him for the skills he shows you, like eating with a spoon or talking.
- Include your toddler when you can. This may be as simple as having him sit beside you or your partner during breastfeeding or throwing a soft toy back and forth with him while the baby rests beside you.
- Try not to use the baby as the reason for not doing something. Say, “When I’ve finished feeding the baby, let’s read a story,” instead of “I can’t play with you now because I have to feed the baby.”

Helping Your Toddler Deal with Loss and Grief

Your family may have to deal with the death of a loved one or a separation. Even if you don’t tell your toddler, she will be able to sense that something is different. It is important to understand that she can sense these changes and to support her through her own fears and grief.

When you can, it helps to prepare your toddler for a loss. Try to find simple ways to tell her that something has changed. It is also important to keep her temperament in mind when you are trying to help her cope with loss and grief. (See “Temperament” on p. 5.)

Helping Your Toddler Deal with Death

Your toddler has little to no understanding of time and that some things are final. She may have little or no reaction to someone’s death. Or, she may react with tears, anger or fear that someone else may die. If a friend or family member dies, don’t keep it a secret from her. She will know that something is wrong and may be more afraid if you don’t talk to her about it.
When talking with your toddler, use simple terms that she can understand, such as “Grandma was very sick and died last night. She won’t be with us anymore.” Your toddler may want to know where Grandma is. You may choose to answer using your religious beliefs as a guide. Remember to keep your explanations simple and non-frightening. Allow her to express her feelings. Give details only if she asks for them.

**Before There is a Death**

- Take any chance that comes up to talk to her about the cycle of life and death. Plants in the garden, the changing seasons and the death of an insect – all provide a chance to show your toddler that death is a part of life.
- Be truthful and open about death. Your toddler might ask difficult questions, such as, “Will you die? Will I die?” Try to answer as honestly as you can without creating new fears: “Yes, we all die, but Mommy and Daddy won’t die for a very long time and neither will you.”

**When a Loved One or a Pet Dies**

- Include your toddler in your own grief. That will let her know that feeling sad and showing grief is normal when a loved one dies. Let her know that painful feelings are part of living and that, over time, the pain will decrease: “We are feeling sad. Sad things happen to us. But we’ll feel better after awhile.”
- Use language that will not confuse your toddler. Use the words “die” and “dead.” If you use protective terms like “asleep” or “gone away,” she may develop fears of sleeping or travelling.
- Try to keep daily routines the same. This can help your toddler keep her sense of security in knowing what to expect each day.
- Keep thoughts of the person or animal alive by talking about them or by looking at pictures. If your toddler does not show an interest, it’s all right. Some children avoid the feeling of loss by refusing to talk about the person or look at their picture.
- Think about how your toddler might feel. Pay attention to the way she acts. Is she afraid of being away from you after the death of Grandma? She may be thinking that you will not come back.
- Give extra love, attention and support. This will help your toddler develop healthy emotional skills.

**To Do**

**The Death of a Pet**

The death of a pet can be very sad for you and your toddler. Be honest with him about the death of a pet. Listen to his questions and try to understand his concerns. It is an opportunity for you to talk with him about death and help him learn how to cope.

**Family Stories**

**Learning about Death**

When my brother, David, died unexpectedly, I was devastated and feared that our two-year-old, Gavin, would be very upset. I gently explained to him that Uncle David died, was in heaven and would not be back again. He looked up at me and said, “He’s all gone?” And when I said, “Yes, he is,” he replied, “OK.” And that was it. No tears, no fuss. It wasn’t until a few weeks later that he started asking more questions about him and when he was coming to visit. He just didn’t understand at first that it was final.
Helping Your Toddler Through a Family Breakup

A family breakup can be a difficult time for everyone. The changes to daily routines may leave your toddler feeling upset and confused. During a family breakup, he needs to feel safe and secure. No matter how difficult your separation or divorce is, try to keep him out of the tension and discussions.

Here are some more tips for helping your toddler through the difficult time following a family breakup:

• Try to keep calm, even though you may feel upset, sad and scared.
• Give him lots of love and attention, and tell him that you will not leave him.
• Keep the same routines and the same limits as you had before, and use the same type of discipline. This will help him feel safe.
• Give him chances to ask questions and talk about the changes in your family. Be direct and simple in your answers. You might be tempted to talk about adult problems such as responsibility or trust. It is much clearer to him if you say that you and the other parent are not happy together and will be happier if you live apart.
• Be patient with him. Be prepared to have the same discussions over and over to help him process and understand what is happening.
• Be sure he understands that he is not the reason for the breakup. He may think he is to blame.
• Let him talk happily about your ex-partner. When he can hear you, keep your comments about your ex-partner calm and neutral. He needs to know that his parents are still there for him even if you are not together anymore.
The majority of parents work outside the home. Both parenting and paid work are becoming more and more equally shared between moms and dads. Finding a way to balance the demands of work and parenting your toddler can be a challenge.

Here are some ideas to help balance the demands of combining paid work and parenting:

Develop a strong child-care partnership. Choose the best-quality child care you can. Think of your caregiver as a key support in raising your toddler. Keep your caregiver up to date about events in his life. Visit the child-care setting, and if possible make time to volunteer. This will help you form relationships with other children and parents. (See p. 124 for more information on choosing child care.)

Try to make the mornings run smoothly. Avoid letting the morning become a stressful time. Follow the same routines each morning so that your toddler learns what to expect. To help mornings go smoothly, it may help to get things ready in the evening. You may also find it helps to make time for yourself before your toddler wakes up.

Take a break before rejoining your toddler. Try to take a few minutes for yourself after work before rejoining your toddler. Walk home, read on the bus or just take a few minutes for yourself. This will help ease the transition between work and parenting. Keep to routines so that everyone knows what to expect.

Simplify. Try to be reasonable with what you expect about work and parenting. You don’t need to do everything and you don’t have to be perfect. Choose to do those things that matter most and keep your life simple. A good rule of thumb when choosing what is most important is to always put your toddler’s health and safety first.

Manage household chores. If you have someone else to share the work at home, try to agree about how the tasks will be shared. Negotiate with each other. Take care to keep things fair to prevent resentment from growing. If you are handling the household work on your own, don’t expect too much of yourself. Spread the tasks out over the week so that you don’t feel there is too much work and too little time.

Develop a sick plan with friends and family. Your toddler will likely become sick at some point and need to stay home. Plan ahead so that you can avoid a crisis. With your partner, friends or family, discuss how to arrange keeping your toddler at home when he is sick. Talk to your employer to develop potential plans and to find out if you have benefits that cover family illness. Line up friends or family members who can stay with him on short notice.

Making it Work

When I returned to work, we had to rethink what was most important. We made a sick plan, because we knew that our son, Justin, would eventually get sick.

We also gave up making fancy dinners all the time. Wednesday is our soup and sandwich night, and Friday is “snack night” where we munch on veggies and dip, cheese and other healthy food we have on hand.

I also get up 20 minutes earlier to do yoga, stretch and have some “me time.” It takes more planning, but it works for us.
Child-Care Choices

Choosing child care is an important and sometimes hard decision. There are many child-care choices available. Child-care options can be divided into two main types: outside your home and inside your home.

What will Work for Your Family?
- Can you take your toddler to child care or does the caregiver need to come to you?
- How will you transport your toddler to the childcare setting? How much travelling time will it take?
- What kind of care approach do you want? Something that really helps your toddler develop? Lots of time with people? Free play time?
- How much can you pay?

What will Work for Your Toddler?
Children can be happy in many different sorts of child-care settings. Here are some questions to think about:
- Does your toddler like large groups, small groups or one-to-one attention? What kind of care suits her temperament?
- Do you think your toddler would like being at home? Near your home? Near your work?
- Does your toddler like going out and having lots of things to do, or does she like quiet times the best?

Child Care Outside Your Home

If you choose child care outside your home, your options are: centre care, family care or a babysitter, relative or nanny.

Licensed Child Care
Licensed child care can be in a public building like a community hall, a church or a specific child-care centre. It can also be provided in the caregiver’s home. It often has set hours. There are caregivers who step in for absent staff members. Often there are children of the same age group, and larger groups of children.

Finding Child Care

Start trying to find child care long before you need it. Child-care spaces fill up quickly. Once you have an idea of the kind of child care your family needs, in or out of home, you will need to search out the options in your community:
- Talk to other parents.
- Check your public health office for referrals.
- Check with neighbourhood groups.
- Check local newspapers, Yellow Pages, community bulletin boards.

Contact the Child Care Resource and Referral (CCRR) program in your local area. (See “Child Care” in the Resources chapter for contact information.)

Key Questions for Child Care

You will want to interview possible child-care providers. Here are some key questions to consider whenever you place your toddler in the care of others:
- Will your toddler be safe?
- Are the caregivers qualified?
- Do you agree with their approach to child care?
- Will they help to encourage your child’s development?
- What are their values and beliefs about children?
- What is the financial cost of the child care?
- Do you trust the caregivers with your toddler?
Regulations that licensed child-care facilities must meet include:

- Staff must have certain qualifications for schooling and practice.
- The centre must have the right number of staff for the number of children.
- Staff must undergo criminal record checks.
- Space and equipment must meet regulations.
- The food must meet standards.
- Emergency plans must be in place.
- No one is allowed to smoke.

**Licence-Not-Required Child-Care Options**

Licence-not-required (LNR) child care is given in an informal child-care setting. This is usually in the caregiver’s home. LNR care is allowed for one or two children of any age in addition to the caregiver’s own children. Family care may have more flexible hours. The children can be of different ages. If the caregiver becomes ill or has to be absent, care may not be available. Sometimes the care may be stopped with little warning.

**Child Care in Your Home**

In-home care is where you get someone to look after your toddler in your own home. In-home child care can range from having the help of a grandparent to hiring a nanny who lives with you full time. An inhome caregiver may be called a nanny, an au pair or a babysitter. Parents may hire an in-home caregiver directly or use a “nanny agency.”

There are both advantages and disadvantages to inhome child care. Your toddler will be able to stay in the place he knows best. Travel time is not required. There are no special arrangements to be made if he becomes ill. On the other hand, you will have to bring a new person into your home. You will need backup plans for times when your caregiver is not available. Also, your toddler may be upset if your caregiver leaves.

Parents who use in-home care are considered employers. They must make both Employment Insurance and Canada Pension Plan payments. If you are interested in in-home care, please contact both the Canada Revenue Agency and WorkSafeBC. (See “Child Care” in the Resources chapter.) They will tell you more about your duties as an employer.

Some ways to find an in-home caregiver include:

- Ask family members and friends.
- Call a placement or nanny agency.
- Check newspapers and bulletin boards for advertisements.
- Call a child-care resource centre.

---

**Helping You Choose Between Family Care and Centre Care**

Narrow down your options by using these questions:

- Do you prefer centre-based child care or family care?
- If you prefer centre-based care, does the facility take children of your child’s age?
- Do the hours of operation suit your needs?
- Is the location good for you?
- Can you afford the child care? You may be able to get financial help. For information, contact your local Ministry of Children and Family Development office. (See the Resources chapter of this book for contact information.)
**Babysitters**

You may be looking for a casual or evening babysitter. A good guideline is, “The younger the child being watched, the older the babysitter should be.” Generally, children under 12 years of age are not old enough to deal with problems that could come up when looking after your toddler. Choking, poisoning or other emergencies may be too much for them to handle. Most babysitting courses require that children must be at least 12 years old to join. Before leaving your toddler with anyone, make sure you are comfortable with the person’s maturity and ability to care for your toddler.

For more information about choosing a child-care option and checklists, see the Ministry of Children and Family Development Parents’ Guide to Selecting and Monitoring Child Care in BC. (See “Child Care” in the Resources chapter for more information.)

**Helping Your Toddler Adjust to Child Care**

Once you have decided on the type of child care you want, talk to your toddler about it. You may want to read books together about child care. Let him meet the caregiver(s) and other children and spend time with them before you leave him on his own.

Here are some additional tips to help your toddler get used to child care:

- Plan to stay as long as you need to on the first day. When you do leave, arrange with the caregiver to give extra attention to him.
- Have him choose a blanket or toy to take with him (if the child care is outside of your home).
- Tell him that you will return.
- Tell him that you are leaving. Don’t just disappear when he starts to play. Although it may seem hard to say goodbye, he will become sure that you will tell him about changes and will be less anxious.
- Develop a leaving ritual or routine. Say and do the same things each time you leave.
- Telephone your caregiver if your plans change. This will help to stop your toddler from worrying or being afraid that you won’t come back.
- Develop a returning ritual or routine. Give your toddler special attention.
- Talk to him about what he did while you were away and tell him what you did.
- Ask the caregiver about his day.
- Be aware that there may be a “honeymoon phase.” He may seem to be happy for several weeks and then unhappy.
If your toddler seems unhappy with the child care:

• Discuss his unhappiness with the caregiver. Ask if the caregiver has noticed anything unusual. Maybe he has not been napping or eating well.
• Call the caregiver to see how he is doing or drop in and see for yourself.
• Find out whether he stays upset after you have gone. Ask another parent to watch your toddler, or wait and listen outside the door.
• If he is old enough to talk, listen to what he says. Ask what he likes and doesn’t like.
• If he continues to be unhappy, think about other child-care options.

**Supported Child Development Program**

If you have a toddler with special needs, you may be able to get extra financial help through the Supported Child Development (SCD) Program. The SCD Program is a family-centred child development program. Some children with developmental delay or disability need extra help to join child-care settings. The SCD Program helps place your toddler in a childcare setting that follows government regulations and includes all children.

You can find out more about the SCD Program by visiting the Ministry of Children and Family Development (MCFD) website. Or you can contact your local MCFD office. (See “Special Needs” in the Resources chapter.)

---

**Child Care Subsidy**

If you need help paying for child care, consider applying for a subsidy. British Columbia has a government program that helps families with low incomes pay for child care.

If you wish to apply for a subsidy, contact the Child Care Subsidy Service Centre or your local Child Care Resource and Referral Centre. You can also visit the Child Care Subsidy web page of the Ministry of Children and Family Development. (See “Child Care” in the Resources chapter for contact information.)
Toddler Safety

During her toddler years, your child will begin to crawl, walk, run and jump. Toddlers are very curious about the world, and she will use her new skills to explore her world. She will climb on, touch or taste just about anything. She will discover and test her new abilities. It is almost impossible to think of all of the ways to keep her safe, but using the information in this chapter will get you off to a good start. (For more information, see “Safety” in the Resources chapter.)

Key Safety Points

• Supervising your toddler is the best way to prevent injuries.
• Childproofing will help make your home safer. Childproofing is an ongoing process.
• Reading and following the manufacturer’s instructions for toddler equipment is important.
• Securing your toddler in a child car seat is the law when you are travelling in a vehicle. Make sure the seat has been installed properly.
• Staying within arm’s reach when your toddler is close to or playing in water is the best way to keep her safe around water.
Childproofing Your Home

You may be surprised at how quickly your toddler learns and shows you new skills in her first 36 months. It may amaze you how much you have to watch and know to keep up. Your toddler may not have been able to climb onto the couch yesterday. However, today you may find her up on the couch and starting to climb the bookcase beside it.

Childproofing your home will help to create a safer environment. To childproof your home, remove as many dangers to your toddler as possible.

To begin, get right down on the floor and crawl around on your hands and knees. At that level, you will be able to see exactly what your toddler may be interested in and what may be dangerous. Check for small objects that she could swallow or choke on. See if there are any cords that she could get caught in. Are there any large or heavy items that she could pull down? Check for any poisonous or harmful things she could reach or open.

General Home Safety Tips

- Keep emergency numbers by each phone in your house. Include 9-1-1 and the numbers for poison control and your doctor. You may know these numbers, but other caregivers may not.
- Know basic first aid. It is important to know what to do if someone is choking. If a child stops breathing, you need to know cardiopulmonary resuscitation (CPR). Contact your local St. John Ambulance, Red Cross or community centre to sign up for classes.
- Drawstrings on children’s outfits are very dangerous. Remove all hood and neck strings from children’s outerwear, including jackets and sweatshirts. Drawstrings could get caught on the corner posts of a crib or on playground equipment. Many manufacturers have stopped making clothes with hood or neck strings. They have put on snaps to prevent this type of injury.
- Keep items such as toys, clothing and household items with strings, cords or ribbons that are longer than 15 cm (6 in.) out of your toddler’s reach. Longer ties can get wrapped around her neck and cut off breathing.
- Cords on blinds and drapes must be removed or tied up where your toddler cannot reach them, even when she climbs on the furniture.

Tie cords on blinds and drapes up out of reach or clip them shorter, cut them off or fasten them high and to the side.
Preventing Fires and Burns

- Check your home smoke detectors or alarms every month. Press the test button to make sure that the batteries are working. If the detector is wired into the electrical system, this will test if the alarm itself is working.
- Replace the batteries of your home smoke detector or alarm. The best time to do this is when you change your clocks in the spring and fall for daylight time. If you have extended-life batteries, check the manufacturer’s instructions and follow them.
- Fireplace glass and other hot surfaces are really dangerous and can burn your toddler’s hands very quickly. Fireplaces or inserts should be completely screened when a fire is blazing or at a low burn and even if the fire has gone out.
- Set the water temperature in your hot water tank at 49°C (120°F) to prevent burns. If you live in an apartment, it might not be easy to turn down the temperature on your hot water heater. If so, you can attach an anti-scald guard to the tap, tub or shower head faucet to slow the water if it gets too hot. You can restart the flow by turning up the cold water. Most hardware stores sell anti-scald guards.
- The best thing you can do for your toddler is to have a smoke-free home. Do not smoke or let anyone else smoke when she is around. Also, make sure that she cannot touch ashtrays, matches, lighters or cigarettes. www.quitnow.ca

Preventing Falls

- Keep gates at the bottom and the top of the stairs until your toddler shows you that he can use the stairs easily all the time. At about the age of 24 months, he will start going up and down stairs on his own. Teach him to go up and down facing the stairs. (See p. 138 for more information on gates.)
- Keep toys off the stairs, and put away any loose carpets that are on them.
- Soften edges on furniture, countertops and fireplaces. To do this, put homemade or store bought corner guards or cushioned strips on the corners and edges.
- Your toddler may want to reach something up high or look out the window. He could use a laundry basket or box to prop himself up, so be sure you’ve put them out of reach.
- Make sure that you have window locks on all windows. Always lock the doors to rooms that contain things your toddler should not have.
- Your toddler is not steady on his feet and can fall easily. It is dangerous for him to carry breakable things such as glass when he is walking. It is wise to stop your toddler from walking with a sucker or Popsicle™ in his mouth.
- Put decals, cut-outs or your toddler’s artwork on your glass doors at his eye level to help him see that there is glass.
- Your toddler probably loves to climb. Secure bookcases, TV cabinets or other furniture to the wall with safety screws. This will prevent the furniture from falling on him.
- A chest freezer can be a danger for the older toddler, who can fall in when reaching for frozen treats. Be sure to keep your freezer locked and store the key where your toddler cannot get to it.

Outlet Covers

After watching me plug in things that make noise, my 18-month-old, Justin, tried to poke a paper clip into an outlet. I put outlet covers on all the electrical outlets that same day!
Preventing Choking

Purses can contain coins, small mints and medications that can harm your toddler. Keep purses high up and out of reach.

Preventing Poisoning

The average home contains 250 poisons. Your toddler explores her world with her mouth. She does not know about or understand the same warning signs as adults do. Your toddler may not understand that a substance can hurt her. Many household items are poisonous for her if they are used in the wrong way or taken in the wrong dose. The most common of these are cough and cold medications, vitamins, fluoride, antibiotics, cleaning products and plants.

Poison-Proofing

- Keep all poisons, including alcohol, drugs, medications, vitamins, home cleaning and personal care products in their original containers. Make sure they are well labelled. Place them on high shelves or locked up away from sleeping or play areas. Even hair shampoo can be dangerous.
- Do not tell your toddler that medicine is candy, and do not take medicine or vitamins in front of her.
- Never mix household chemicals together. Some mixtures can produce harmful gases.
- Remove poisonous houseplants from your home, and watch your toddler around plants in other people’s homes.
- Be careful with your recycle bin: your toddler may want to chew on the newspapers, which contain ink that can hurt her if she eats large amounts. She may want to play with magazines or brochures and may suck on them. So keep those away from her, too. The bright colours in the magazines can contain lead and be harmful.
- Tin cans may also be in your recycle bin. Their sharp edges can cut.
- Children of any age should not be exposed to moth balls or their odour.
- Never leave alcohol where your toddler can get to it. Lock liquor cabinets and use the back of the highest shelf in the refrigerator to store alcohol. Always clear away leftover drinks in the evening. Your toddler may get up early and drink what is left in the glasses. It does not take much alcohol to make her very sick.
- Secure your diaper pail with a tight-fitting lid. Deodorant disks are poisonous.
- If you are buying something that is poisonous, make sure it has child-resistant packaging. But remember that child-resistant does not mean childproof. Your toddler may be able to get into a package that is supposed to be childproof. Lock it up out of reach.
- Help visitors store their handbags and briefcases in a safe place out of your toddler’s reach. Bags often contain medications.
- Protect your toddler from lead-based paints, trinkets, mini-blinds or other products that have lead.
- Install carbon monoxide monitors in your home and work areas.

For more information on poisonous substances, visit the Drug and Poison Information Centre website. (See “Poison Control Centre” under “Safety” in the Resources chapter for the web address.)

Poison warning symbols: You can start to teach your toddler that these warning symbols mean “Danger! Do not touch.” However, do not expect your toddler to understand or remember. Keep all poisons locked up and out of reach.
If you think your toddler has been poisoned:
• Call the BC Poison Control Centre immediately 1 800 567-8911.
• Have the following information ready:
  » the name of the substance you think may be poisonous
  » the amount your toddler took
  » the time your toddler took it
• Follow the first aid instructions on the label of any product taken.
• Get medical help by going to your hospital emergency. Take the container and label with you. Or call 9-1-1 if you don’t have a way to get to the hospital quickly.

Safety In the Bathroom
Many things in the bathroom, such as soaps or shampoo, smell nice. They smell so nice that your toddler may want to taste or drink them. He may also watch you as you put on makeup or shave in this special room. These activities can be very interesting to him and he may try to do what you do. Most bathrooms have low cupboards under the sink. They may have dangerous things in them, so lock these cupboards.

Bathroom Safety Checklist
• Always supervise your toddler every moment that he is near water or in water (including the bathtub). If you must leave the bathroom, even for a minute, take him with you.
• Keep all medications, cosmetics, nail polish, mouthwash, hair spray, hair dye and cleansers out of reach or locked up.
• Put away hair dryers, electric razors and curling irons after you use them.
• Keep sharp objects like razors, scissors and nail files out of reach or locked up.
• Use a non-skid bath mat on the bottom of the bathtub or shower.
• Close the lid on the toilet seat and install a toilet seat lock. Your toddler could lean over and fall in, and not be able to get out by himself.
• Keep baby powder, talc, cornstarch, diaper pins, and other baby-care objects well out of your toddler’s reach.
Safety In the Kitchen

Your toddler loves to be where you are and to be part of what is happening in her home. In many homes the kitchen is where all the action is. She will likely be spending a lot of time in that room.

Kitchen Safety Checklist

- Store knives out of a toddler’s reach.
- Make countertop area near the stove off limits.
- Turn pot handles toward the back or middle of the stove, and not over another element.
- Keep a fire extinguisher in the kitchen, away from the stove. Keep it near a door to the outside so you can use it and leave if necessary.
- Use the back burners of the stove for hot temperatures and the front burners for lower temperatures. It is even better if you try to cook using only the back burners.
- Keep hot oil out of reach and make sure it cannot splash or spill onto your toddler.
- Teach your toddler that the area in front of the stove is off limits as a play area.
- Unplug and keep small appliances out of reach.
- Keep small foods that could cause choking, such as beans or nuts, out of reach.
- Secure tablecloths so that they cannot be pulled down.
- Keep the dishwasher locked and the soap container empty until ready for use.
- If you have a chest freezer, keep it locked or in a locked room to prevent your toddler from falling in. Keep the key out of reach.
# Car Safety

## Child Car Seats
Finding a child car seat that is right for your toddler can be a challenge. Use the information following to help you find the right seat for your toddler’s age and weight.

## Child Car Seat Guide

<table>
<thead>
<tr>
<th>Type of Child Car Seat</th>
<th>Use</th>
</tr>
</thead>
</table>
| **Stage 1:** Rear-Facing Infant Car Seat | - Used from birth until the baby reaches the weight limitation of the seat. The weight limitation depends on the make and the model.  
- Choose a rear-facing infant car seat with at least two sets of shoulder harness slots. The infant car seat should also have two crotch strap slots to allow for adjustment as your toddler grows.  
- It is the law in BC that every child who rides in a vehicle must be in a child car seat. The child car seat must face the rear until your toddler is 12 months old. It is recommended that you keep her in a rear-facing infant car seat until she is at least 9 kg (20 lb.). |
| **Stage 1:** Rear-Facing Convertible Car Seat | - If your baby has outgrown the weight limit of the infant seat, switch to a convertible seat in the rear-facing position. Rear-facing child car seats must be used until the child is at least one year old AND weighs at least 9 kg (20 lb.).  
- Convertible car seats have a five-point harness.  
- Look for an infant/child car seat that has a weight limit of 15 kg (33 lb.) when it is rear-facing.  
- It is the law in BC that children must stay facing the rear in a car seat until they are 12 months old. After 12 months, your child should be keep rear-facing for as long as possible (until he reaches the rear-facing weight limit of the seat or his head is within 2.5 cm (1 inch) of the top edge of the seat. |
| **Stage 2:** Front-Facing Car Seat | - Once your toddler is over 12 months and 9 kg (20 lb.), you can switch to a car seat that faces the front. However, it’s best to keep her in a car seat that faces the rear until she’s reached the upper weight limit for rear-facing car seats.  
- Your toddler should continue using this car seat until she is at least 18 kg (40 lb.). |
| **Stage 3:** Booster Seats | - Once your toddler has reached the maximum weight for the front-facing car seat, you can switch to her to a booster seat.  
- Booster seats lift your toddler so that the seat belt fits properly.  
- It is the law that all children must use booster seats while riding in vehicles until their ninth birthday unless they have reached 145 cm (4'9'”) tall. |

### Rear-Facing Until 12 Months

It is the law in B.C. that every child must be placed in a child car seat. Your toddler must be in a child car seat that faces the rear until he is 12 months old. However, it is recommended that you keep him in a rear-facing car seat until he is at least 9 kg (20 lb.) or at the upper weight limit for rear-facing child car seats.

### Renting a Car Seat

If you want to rent a child car seat, contact your public health for the names of local rental/loaner programs. You can also call the toll-free Child Seat Information Line at 1 877 247-5551 for a list of providers.
Be sure the child car seat has the Canadian Motor Vehicle Safety Standards (CMVSS) label. Do not buy a child car seat in the United States or another country – it will not have this label.

Look for a child car seat that is easy to use and fits in your vehicle. Try it in your vehicle before buying it. Be sure it is easy to use so you will use it correctly every time.

Look for a child car seat with at least two sets of shoulder harness strap slots to allow room for growth. Make sure they are easy to adjust.

You can choose from two types of harnesses used in child car seats:

- **Three-point harness**: Restrains your toddler at the shoulders and buckles up between the legs.

- **Five-point harness**: Restrains your toddler at the shoulders and over the hips, and buckles up between the legs. A **five-point harness is recommended**.

### Second-Hand Car Seats

Second-hand car seats are not recommended. However, if you are going to use a second-hand car seat, make sure it meets all Canadian Motor Vehicle Safety Standards (CMVSS). Check that it is not on a recall list and make sure it is the right type and size for your toddler.

A second-hand car seat should not be used if:

- The CMVSS label is not attached, or the manufacturer’s instructions are missing.

- There are cracks in the plastic shell.

- The tubular frame is bent or rusted at the rivet points.

- It is older than 10 years or past the manufacturer’s expiry date.

- A harness strap or padded liner is frayed, torn or coming away from the seat.

- The tether strap or tether anchor is frayed, torn or missing.

- You are unsure of the car seat’s history. It could have been damaged in a crash.

---

### Key Points

**Airbags and Car Seats Don’t Mix!**

Never place a car seat in the front seat of a car with active air bags. If an airbag inflates, your toddler could be seriously injured or killed. If you have to transport your toddler in the front seat, turn off the airbag, put the seat back as far as it will go, and secure him properly. Be aware of side airbags, and keep your toddler away from them.

Here are the most important ways you can protect your toddler in a car:

**Securing Your Toddler in a Child Car Seat**

- Make sure she is always correctly buckled into an approved child car seat, even for very short trips.
- The safest place for children under 12 years is in the back seat, centre position. Avoid placing an infant car seat in the front seat.
- Keep track of her weight so you know when to move her to the next stage of car seat. Check the car seat directions for upper weight limits.
- There should be no more than a finger-width space between the harness and her collarbone.
- Make sure the harness straps are straight and not twisted.
- Make sure the harness fits her and is not covering bulky blankets or bunting bags. Dress her so that you can latch the buckle between her legs.
- Keep the chest clip (that holds the harness) at the level of her armpits.
- Make sure the harness straps pass through the slots in the back of the car seat so that they are level with her shoulders or slightly below. Almost all car seats can use the top set of harness slots only when in the forward-facing position. Check the manufacturer's directions.
- Never leave her sleeping alone by herself in the car seat, either in the car or in your home.

**Installing Your Child Car Seat**

- Never place a car seat in the front seat of a vehicle with an active passenger airbag. Serious injury or death may result if an airbag opens and hits a car seat.
- Make sure the child car seat is installed according to the manufacturer's directions. Secure the car seat with the car's seat belt or a system that uses anchors to keep the car seat in place.
- Check that the child car seat does not move from side to side or forward and back more than 2.5 cm (1 in.) each time you use the car seat.
- Make sure to check the expiry date given by the manufacturer.
- Anchor the forward-facing car seat to the frame of the car using the tether strap located on the back of the car seat. All cars built after 1989 (except convertibles) have an anchor slot that is already drilled and threaded for a bolt.

**Safety In and Around Vehicles**

- Never place your toddler in a car seat on a counter, on the car or on any raised surface. He could move suddenly and flip over.
- Teach your toddler to be wary of cars and to hold a grown-up's hand in the street or parking lot.
- Always wear your own seat belt, and make sure all passengers wear theirs, too.
- Never drive while talking on your cellphone or text messaging. Pull over and stop first.
- If your toddler needs your attention or you need to do something while driving, pull over.
- Always put away loose objects in cars. These may include unused child car seats, anti-theft clubs and other objects. In a crash, they could fly around and hit or injure you or your toddler.
- Keep your car free of small objects that can roll around and get stuck under the brake pedal.
- Never allow your toddler to play with power windows. Keep windows locked from the main control panel.
- When you raise or lower power windows, check that your toddler’s fingers, head and arms are inside.
- Keep pets behind screened partitions.
Equipment Safety

Choosing safe, approved equipment will go a long way to creating a safe environment for your entire family.

General Safety Tips for Equipment

- Use caution when using second-hand equipment unless it meets the latest safety requirements.
- Always inspect and check for recalls before using second-hand or older child equipment.
- Check all equipment regularly for sharp edges or tears or holes in the upholstery. Your toddler can bite off and choke on a piece of torn vinyl. Also check for loose wheels or brakes that don’t work.
- Choose equipment that is right for your toddler’s height, weight and age.
- Make sure that all the sides are firmly fixed in the fully raised position and latches are in the fully locked position.
- Use safety straps and be sure that equipment is installed according to the manufacturer’s instructions. Follow all manufacturer’s instructions for assembly, care and use.
- Never leave your toddler unsupervised in equipment.

Toys

See p. 42 for information on safe toys.

Beds and Cribs

See p. 84 for information on safe sleeping.

Gates

Gates can be an important piece of equipment to keep your toddler safe and to give you peace of mind. It is wise to get a gate before you think your toddler will need it. You will then be ready for the day when a new skill appears.

Use the following tips to assess the safety of any gates in your home:

- Use gates manufactured after 1990.
- Accordion-style or expandable gates are not safe. The wide, V-shaped openings along the top or large diamond-shaped openings along the sides can trap your toddler.
- Check the gate for a safety-approved label.
- Ensure the gate has a smooth finish and is free of splinters, cracks, snags and rough parts.
- Make sure the gate is the right size and style for the space being blocked.
- The best gate for stairs is a swing gate that attaches to one side of the wall and opens on the other side. Mount one of these gates at both the top and bottom of stairs, and do not remove them until your toddler can climb stairs on his own, without help.
- Pressure gates can be pushed over, so they are only useful for between rooms or in hallways, not for stairs.
- Avoid raising the height of the gate by lifting it off the floor; your toddler may try to crawl under it.
Chairs
Safe seating that is right for your toddler’s age and size will make mealtimes easier and more fun for everyone. Use the following tips to check the safety of his chairs:

High Chairs
- Choose a high chair with a wide base, a safety strap and strong tray locks. If it is a foldaway high chair, make sure it has proper locking devices.
- Always use the waist and leg straps.
- Check that your toddler’s hands, arms and legs cannot get caught in any moving parts when the chair or tray position is being changed.
- Make sure that older children do not use the chair. They could tip it.
- Place the chair away from hard surfaces that your toddler could push against (walls, doors, counters), causing the chair to tip.
- Place the chair away from appliances, windows, blind cords, mirrors and sharp corners.

Booster Chairs/Seats (for eating)
- Booster chairs are useful when toddlers grow out of a high chair but are still too small for an adult chair.
- Booster chairs are placed on a regular chair and are held in place with a safety belt.
- The belt normally goes around the back of the chair. If possible, select a booster chair with a strap that keeps your child secure.
- Safety straps that cross over his chest should be placed low enough that they cannot reach his neck, even if he slips down in the chair.

Hook-On Chairs
Hook-on chairs are not recommended, as they can fall off under your toddler’s weight or when he moves. However, you may find that you have to use a hook-on chair once in a while because nothing else is available, such as in a restaurant.

Here are some safety tips if you choose to use a hook-on chair:
- Make sure the hook-on chair is attached to a strong, sturdy table.
- Place the chair away from table legs. Your toddler could push against the table leg and push the chair off the table.
- Test the chair after it is hooked to the table but before you put him in it. You can test the chair by pulling it backwards.
- Use a different kind of chair if he is over 13.5 kg (30 lb.) or is very active.

Playpens
If you put your toddler in a playpen (also called a play yard) check to make sure it meets these guidelines:
- Playpen walls should be mosquito-type netting. His little finger should not be able to pass through the mesh.
- It has only two wheels or casters. His actions in a playpen with four wheels can make it move.
- The walls are at least 48 cm (19 in.) high.
- Hinges should be designed not to pinch or collapse accidentally.
- All parts that are small enough to choke on are firmly attached.
- Vinyl rails and mattress pads are in good condition and not torn.
- The space is free of all cords, scarves, necklaces, and similar items.
- Toys strung across the top of the playpen have been removed.

Jumpers
Jumpers (also called Jolly Jumpers™) do not help your toddler walk sooner. They may even cause more injuries because he will tend to try to walk before he has good leg control. It is better to let him explore and be active on the floor.
Strollers

It is a good idea to let your toddler walk whenever possible. However, sometimes a stroller can make it easier to be out in the community.

Stroller safety tips:
• Strollers are not safe for sleeping or playing.
• Make sure the stroller has a good security strap, and always use it.
• Check to see that there are no openings that your toddler could slip through when the stroller is in a fully reclined position.
• Watch out for fingers when you’re folding or unfolding the stroller. Also, be careful when you’re switching the handle from one side of the stroller to the other.
• Always set the brake when the stroller is not moving.
• Do not overload a stroller with heavy bags – it may overturn.
• Follow the manufacturer’s instructions on assembly, care and use.

Child Carriers

Child carriers help you to carry your toddler while keeping your hands free. Back carriers are considered safe for children aged five months or older.

Front Carriers

If you are going to use a front carrier, be sure to follow the manufacturer’s instructions. Some carriers have weight restrictions.

Back Carriers

Back carriers are considered safe for children aged five months or older. Look for a back carrier that:
• Has a proper safety strap.
• Has leg openings that are small enough to keep your toddler from slipping out but are large enough that they will not rub his legs.
• Is light but well made.
• Has a folding frame that will not pinch your toddler.
• Has a padded covering over the metal frame nearest your toddler’s face.

Baby Walkers are Dangerous!

Never use a baby walker, whether new or second-hand. Baby walkers with wheels were banned in Canada in April 2004. A toddler in a baby walker could tip over, roll down stairs or fall into a swimming pool. A toddler in a baby walker could also reach dangerous items.

Choose a child activity centre that does not move (without wheels). Make sure you put it in a safe place where your toddler can’t reach dangerous things while playing in it.
Helmets, Tricycles and Bicycles

When your toddler is playing on a riding toy or tricycle, provide a properly fitting helmet. Watch carefully, and make sure she is playing in a safe place.

Helmets
The illustration below details the four S’s that can help you check your toddler’s bike helmet for safety:

- Size
- Strap
- Sticker
- Straight

Other Helmet Safety Tips:
- Choose a bike helmet made especially for young children.
- Choose a bright colour so your toddler can be seen.
- Store helmets on handlebars, ready for the next ride. Store helmets out of the sun. Don’t store them in the back window of cars.
- Replace old helmets. Their lifespan is only five years, because the foam lining breaks down.
- Do not use a helmet that has been in a crash, dropped or damaged.
- It is not recommended to buy a second-hand helmet. You won’t know how old it is or whether it has been in a crash.
- Choose round helmets rather than “aero”-shaped ones. The tail of an aero-shaped helmet forces your toddler’s head forward when it rests against the back of the seat. This is not good for her neck.
- It is not recommended to put stickers on helmets because this can affect the condition of the shell so that it does not protect properly.

Size: Make sure the helmet covers the upper part of the forehead and sits level on the head.

Strap: Make sure the strap is adjustable and has a quick-release buckle.

Sticker: A helmet must be approved. Look for the right stickers (CSA, Snell, ANSI, ASTM, BSI, or SAA).

Remember to use the four S’s to help you check your toddler’s bike helmet for safety.
Most children are well into their third year before they start to ride a tricycle.

**Tricycle Safety Tips:**

- Start early to get your toddler used to this rule: no helmet, no bike ride.
- Always supervise your toddler closely while she learns to ride.
- Don’t offer a tricycle until your toddler can control it and ride it safely.
- Make sure the tricycle is solidly built.
- Make sure the tricycle is the right size for your toddler. She should be able to pedal while sitting squarely on the seat.
- Avoid all areas that are close to cars, swimming pools or other dangers.

**Bicycles**

Children under the age of 12 months should not ride with you on a bicycle. They should not be put in a bicycle-mounted trailer, child seat, sidecar or any other carrier. A very young child’s back and neck muscles are not strong enough to withstand the jostling of bike riding. They also cannot support the extra weight of a helmet. Wait until your toddler can sit well without support and is able to wear a helmet. Both of you should always wear a certified bicycle helmet whether your toddler is in a trailer or a bike seat. You must also have the safety belt done up.

Only skilled cyclists should carry young children on bicycles or in trailers. These bike rides should be only in safe areas, such as parks, bike paths or quiet streets. Practise turning, stopping and hill climbing with some weight (such as a bag of flour) before putting your toddler in a carrier. This will help you learn how to manage the extra weight.

**Bicycle Child Trailers**

Trailers have a lower centre of gravity and are more stable than child seats mounted on a bike. They can be used for one or two children weighing up to 45 kg (100 lb.).

Here are some bicycle child trailer safety tips:

- Use a bike flag to increase visibility.
- Make sure the trailer has a tail light and reflector.
- Choose quiet, protected areas in which to ride.
- Do not ride with your toddler during bad weather or when road conditions are bad.
- Your toddler should not be able to reach the wheels while in motion.
- Make sure the trailer is stable. Make sure the hitching bar and connection that joins the trailer to the bike is strong.
- Your toddler should be well protected from sand and grit thrown up by the bike tires.
- Check that your toddler’s harness is well designed and secure.

**Bicycle-Mounted Child Seats**

These seats can be used until your toddler reaches 18 kg (40 lb.) in weight.

Here are some bicycle-mounted child seat safety tips:

- Buckle the harness snugly around your toddler.
- Check that your toddler’s feet, hands and clothing are well away from the spokes or other moving parts of the bike.
- Be prepared to be thrown off-balance if your toddler moves suddenly.
- Never leave your toddler alone in a bicycle-mounted child seat.
Water Safety

Playing in and around water is fun and soothing for toddlers. It can also provide great learning experiences. Your toddler may play in the bath, at the beach or in the backyard with a wading pool, a water table or a bucket. Water is also a good source of fun, exercise and family time.

Protect your toddler around any water by being close enough to reach her and watch her at all times. Parents should buy a child-sized life-jacket. Check the labels for the right size and weight. Even if your toddler is wearing a life-jacket, you still need to watch her carefully. Always hold on to her hand when on a dock or near a pool, since she might suddenly run toward the water.

Follow these water-safety tips to make water play safer – while keeping it fun:

- Always supervise your toddler every moment that she is near water or in water (including the bathtub). If you must leave, even for a minute, take her with you.

- Keep bathroom doors closed, put the toilet lid down and use a toilet seat lock so your toddler cannot fall in the toilet.

- Do not leave water in a bucket or other container near your toddler.

Safe Bathing

Never leave your toddler alone in the bathtub.

- Check the bath water temperature on your wrist or elbow, before placing your child in the water. The water should feel warm, not hot.

- Do not let your toddler play with the hot water tap.

- Teach your toddler to sit, not stand, in the bathtub.

- Bath rings and bath seats are not recommended. They have been linked to childhood injuries and drowning.

Key Points

Stay within Arm’s Reach around Water
Drowning is one of the main causes of death among children between the ages of 12 and 48 months. It only takes seconds for a toddler to drown. You need to stay very close – within arm’s reach of her – even if she is wearing a life-jacket.

Life-jackets or PFDs?
Life-jackets are made to turn a person face-up so his or her mouth is out of the water. Personal Floatation Devices (PFDs) do not have the ability to always turn a person face-up.

They also do not float as well as a life-jacket, and can give a false sense of security.
**Swimming Pools and Garden Ponds**

- Empty your toddler’s yard pool when it’s not in use and turn it upside down so rainwater won’t collect in it.
- Remember that flotation devices, such as water wings or air mattresses, will not keep your toddler safe.
- Put a life-jacket on your toddler when around water or boats. Use only a government-approved life-jacket, and make sure it is the right size. Set a good example by always wearing a life-jacket when you are in a boat.
- Cover and lock your hot tub when it’s not in use.
- Your toddler can very easily become overheated and should not be allowed in a hot tub.
- Make sure your swimming pool is properly fenced with a fence that is 120 cm (4 ft.) high on all four sides, and there is a self-latching, spring-locked gate that your toddler cannot open.
- A pool alarm is not enough to keep your toddler safe. By the time you hear the alarm, it could be too late. Your toddler must be supervised at all times when near water.
- Teach your toddler about safe play around the pool or pond (no running, pushing, diving or unsupervised swimming).
- Remove all children’s riding toys from near the pool or pond.
- Always clear away chairs, toys, tables or other things that your toddler could use to climb into a fenced pool or pond area or an above-ground pool.
- Empty your pool at the end of the season, and cover it securely with an approved tarp. Keep pool or pond covers drained.
- Make sure all pool chemicals are safely stored and locked away.

**Swimming Lessons**

Swimming lessons may help your toddler develop confidence, be physically active and learn to enjoy the water.

But don’t assume that swimming lessons will make your toddler safe in the water. There is no evidence to support this. You still need to supervise him in the water and stay within arm’s reach.

Swimming lessons may help your toddler develop confidence, be physically active and learn to enjoy the water.

But don’t assume that swimming lessons will make your toddler safe in the water. There is no evidence to support this. You still need to supervise him in the water and stay within arm’s reach.
Safety in the Community

Your toddler needs fresh air and space where she can run and play, have fun, get dirty and make noise. You need to be with your toddler outdoors to share her fun and energy and to keep her safe.

Streetproofing Your Toddler

Keeping your toddler safe in the community is very important. You can help your toddler develop self-protection skills and learn to be cautious, but she is still too young to protect herself. She is still too young to be street smart. You must take responsibility for her safety.

Unfortunately, the majority of people who harm young children are known to them. Often the person who harms a child is a family member, someone quite close or someone who your toddler knows. It does not help just to tell your toddler “never talk to strangers.”

To help protect your toddler:

- Always know where she is.
- Never leave her with anyone unless you thoroughly trust the person.
- Stay well informed of the possible dangers in the community.

One of the ways to prepare your toddler for her increasing independence is called streetproofing.

Streetproofing is helping her develop and use good sense if she is in traffic, around strangers or lost. You can help streetproof your older toddler by teaching her how to react to situations that could be dangerous. Teach her to know what to do and practise doing it with her.

Some things you can teach your toddler to keep her safe are:

- Her first and last names.
- Your first and last names.
- The proper names for genitals. (See p. 44 for more information on sexual development.)
- The name of the street you live on – repeat the street name often when you talk to her.

Check With Me First

Your toddler will probably find great pleasure in talking with people and in giving and getting small gifts and treats. With your support, being around people that he doesn’t know can be a positive experience. Learning trust in his environment and community is a part of normal development. One way of keeping safety in mind and helping him to learn about his world is to teach the “Check with me first” approach. Teach him to check with you or a caregiver first before going anywhere with anyone or taking a gift or treat. Teach him that you need to know where he is all the time and what things are given to him. Let other caregivers know that you use this system so that they can do the same thing and teach him about safety the same way you do.

Singing your Phone Number

A tip I used to teach my daughter our phone number was to sing it as a little song. Twenty years later and now living in another province, we both can still recall our old phone number by singing the song!
**Toddlers Learn by Example**

Your toddler learns by watching and copying you and other caregivers. So talk to him as you do things. It will help teach him safe behaviour. For example, say:

- “We’re carefully looking both ways first – see the car?”
- “We won’t run out here because there may be a car coming – let’s look for a crosswalk or clear spot first.”
- “What do we all do when we get in car? Buckle up.”
- Be very clear in your communication. Say, “Look up the driveway when you ride,” or “You must wear your helmet when you’re on your bike,” instead of “Be careful on the tricycle.”

**Keep Instructions Simple**

Start off with what instructions must be followed and talk about the reasons in a simple way. It will help your toddler to learn more quickly if you use the same words and ideas over and over. Also, your actions should be the same as your instructions – you always walk in a crosswalk to cross the street when going to the store, even if it means walking half a block more.

**Show Your Toddler**

Show your toddler what you want him to do to help him develop a safety zone, or limits. For example, walk with him around the yard and show him how far he can go: “You can play anywhere in front of the big tree, but you can’t go past it.” Remember, he does not yet have the ability to make good decisions and may forget what was learned yesterday, so remind him often.

Also, help him get to know his neighbourhood. Point out houses of neighbours and landmarks. Point out police officers, and explain that police help people.

**Be Prepared**

If you are in or have left a difficult relationship, keep a recent picture of your toddler and your ex-partner. Make sure to have a current list of the telephone numbers and addresses of your ex-partner’s family and friends. As well, keep on record the make and year of your ex-partner’s car and its licence plate number. In the event of abduction, the police can work faster if they have this information.

Some communities have child identification events where you can have a picture taken and fingerprints done for you to keep. Many communities also have block parent programs that you may want to know more about or be part of. (See “Safety” in the Resources chapter for more information.)
Violence

Toddlers are greatly affected by violence. Watching or experiencing violence can change your toddler’s ability to learn about and reach out to adults and other children. Don’t be fooled into thinking that your toddler is not upset by violence because she doesn’t show you she is upset each time she experiences it. At first she may cry to get your attention. If this does not help, she may soon shutdown and become silent. Although she does not continue to tell or show you that she’s upset, she will be having the same physical and emotional reactions. Some research shows that a child who is around violence a lot may always feel upset or anxious. This may be true even though your toddler doesn’t show or tell you how she is feeling.

Violence in the Home

Violence and abuse happen in all kinds of homes and in many ways. Abuse is not always physical or violent. It can also be an ongoing pattern of threats, emotional or verbal abuse, neglect, isolation, sexual abuse or financial control.

Abuse occurs in all cultures and is carried out by both men and women. It occurs in same-sex as well as opposite-sex relationships. It may be directed at a partner (male or female) or at a child.

Abuse does not affect the victim alone. A toddler in the home is also exposed to fear and stress. She may be directly injured by an abuser or may be exposed to abuse by hearing the conflict, seeing the injuries, being blamed for the abuse or being used as part of the abuse.

Exposure to abuse can change how your toddler thinks and feels about you, herself and the world in general. Even if she doesn’t actually see the abuse, she can still feel the tension and fear in a house.

Ways your toddler may be affected by abuse in the home:

- Have short- and long-term problems. These can include behaviour problems such as aggression and emotional problems such as depression and anxiety.
- Be more likely to accept violence as a “normal” response to stress. She may feel that she doesn’t deserve happiness or respect.
- Be more likely to have learning difficulties.
- Lack the positive parenting role model she wants and needs. She may also miss out on learning positive ways of solving problems and treating people in her life.
- See the abused parent as unworthy of respect. She may not trust her parents to keep her safe and can come to view the world as an unsafe place.
- Develop negative beliefs about herself.

What to Do if there is Violence in Your Home

Sometimes parents feel quite helpless to do anything about the violence in the home. But there is help. If you find yourself in violent situations, you must make a move to protect both you and your toddler right away. Talk with your crisis line, local women’s shelter, child protection social worker, doctor or public health nurse or police.

Anyone who has a reason to believe that a child is in a violent or abusive situation must report this to the closest child protection social worker. You may have had violent experiences in your life. If so, it might help you to learn more about identifying violent situations early. You can get this information by talking with a community counsellor or police or a social worker. (See “Abuse or Neglect” in the Resources chapter for more information.)

Facts & Stats

Family Violence
In Canada, about 100,000 women and children seek shelter from violence every year.
How to Prepare for Your Safety during a Violent Incident

If you are living in an abusive relationship, here are some ways you can prepare to protect yourself and your toddler:

• Keep your wallet and keys where you can easily get to them.
• Teach your toddler to call 9-1-1.
• Decide where to go if you leave.
• Tell neighbours you trust to call 9-1-1 if they hear something suspicious.
• Practise getting out of your home safely and quickly. If you feel you are in danger at any time, take your toddler, leave and call 9-1-1.

Sexual Abuse

Sexual abuse is very different from normal sexual play between children of the same age. Sexual abuse is a criminal activity. It includes any sexual activity that the child is not able to understand or agree to. This includes obvious sexual acts, such as intercourse, fondling or any form of sexual touching. It also includes acts such as a person exposing their genitals to a child, watching children when they are naked, and showing pornography to a child.

Most abusers are not strangers to their victims. Most sexual abuse of children is by someone they know. Toddlers are too young to be able to effectively protect themselves from a determined sexual abuser.

Be sure your toddler is safe by:

• Always knowing where he is.
• Making sure he is cared for by someone you fully trust.
• Being aware of who may be around him when he is in someone else’s care.
• Encouraging him to tell you if he is not comfortable with anyone he is around or who cares for him. This means that as a parent you must listen carefully to him and encourage him to talk to you about his feelings, especially about friends and relatives. Pay attention when he shies away from someone.

You can also support your toddler to develop personal boundaries by not forcing him to kiss or hug others. Allow him to refuse unwanted kisses and hugs or tickling. It helps him learn that “no means no” when it comes to someone touching his body.

If you believe he has been sexually abused, contact the police.
Safety With Pets

Animals can be excellent friends for your toddler. She can learn valuable social and emotional skills by interacting with and helping to care for pets.

Safety with Your Pet

- Keep dry pet food out of your toddler’s reach. It is a choking hazard.
- Thoroughly wash your hands and your toddler’s hands after handling pets.
- Never leave your toddler alone with an animal, even if you trust the animal.
- Teach your toddler to recognize the signs of aggression in a pet.
- Model gentle caring for a pet. Remember, your toddler learns from what she sees.
- Explain in simple terms how to act with animals:
  » “The dog likes to be patted gently.”
  » “The puppy’s barking or growling is his way of telling you to stop.”
  » “That’s the puppy’s special toy and he wants to chew on it now.”
- If you are thinking about getting a pet, it is best to wait until your child is five or six. At an older age, she will be better able to understand how to be gentle with an animal.
- Keep your pet healthy by taking it to the vet regularly, and keep your pet’s immunizations current. Also, keep your pet away from wild animals.
- Do not keep wild animals, including ferrets, as pets.

Safety with Other People’s Pets and Animals

- Always keep your toddler away from animals you do not know. Teach him not to go near an animal unless there is an adult around and the owner gives permission.
- Don’t be shy about asking someone to put his dog on a leash. A toddler’s safety comes before a dog’s right to roam freely. Many parks have rules that dogs must be on a leash or well controlled.
- Always be with your toddler around animals, even ones you trust.
- When near a new mother cat or dog, do not go very close since they may feel threatened and bite or claw.
- If people bring their dog when they visit, ask them to put the dog on a leash for a while. This gives your toddler a chance to warm up to it, and the dog can become comfortable with everyone. It also gives you a chance to check whether it is safe for the dog to be off leash.

Animal Bites and Scratches

Certain diseases can spread from pets to people through biting, scratching or direct contact. Cat bites are usually thin and deep, and they may not look very serious. However, they are often more serious than dog bites.

Prevent the spread of disease by training your dog or cat not to bite or scratch. If your toddler does get a bite or a scratch, thoroughly clean the area with soap and water. If the area does not seem to be healing normally, ask your doctor about the possibility of an infection.

Reptiles as Pets

Children younger than five years should not touch turtles or other reptiles, such as snakes or iguanas, or objects that touch these animals. Salmonella bacteria can make toddlers very sick, and they are often found on these animals.
If your toddler is bitten by an animal that is not yours, call your doctor, local public health office, or HealthLink BC if:

- There was no obvious reason for the animal to bite.
- The animal is not acting normally.
- The animal seems sick.
- The wound looks serious.

If you suspect that your child has had contact with a bat, even if there is no sign of a bite, call your doctor, local public health office, or HealthLink BC at 8-1-1 as soon as possible.

**A Final Note on Toddler Safety**

Over the next couple of years, your toddler will scrape his knees and bump his head. It is almost impossible to protect him from all threats of injury, but you can reduce the chance of injury by making his world safer. Creating a safe environment is an ongoing process. As your toddler begins to walk, run, jump and climb, you will need to make more changes to protect him. The exciting news is that you’ve already started to make his world safer by reading this chapter. The next step is to use what you have learned. Revisit this chapter often as your toddler passes through these different stages.

**Key Points**

**Overcoming a Fear of Dogs**

A big dog knocked down my son, Ryan, when he was only 11 months old. He became terrified of dogs. This became a real problem, as we love dogs. So we had to find a way to help him get over his fears. What we did was ask a friend who had a small, quiet dog to come over and let us handle the dog together. We found that by keeping Ryan on our lap so that he was a bit higher than the dog and taking as much time as our son needed, we solved the problem.
### Recommended Number of Food Guide Servings per Day

The following chart shows how many Food Guide Servings you need from each of the four food groups every day.

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>Children</th>
<th>Teens</th>
<th>Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Girls and Boys</td>
<td>Females</td>
<td>Males</td>
</tr>
<tr>
<td>2-3</td>
<td>4</td>
<td>7</td>
<td>7-8</td>
</tr>
<tr>
<td>4-8</td>
<td>5</td>
<td>8</td>
<td>8-10</td>
</tr>
<tr>
<td>9-13</td>
<td>6</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>14-18</td>
<td>7</td>
<td>6-7</td>
<td>8</td>
</tr>
<tr>
<td>19-50</td>
<td>8</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>51+</td>
<td>7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Food Groups

**Vegetables and Fruit**
- 2-3: 4
- 4-8: 5
- 9-13: 6
- 14-18: 7
- 19-50: 7-8
- 51+: 7

**Grain Products**
- 2-3: 3
- 4-8: 4
- 9-13: 6
- 14-18: 6
- 19-50: 6-7
- 51+: 6

**Milk and Alternatives**
- 2-3: 2
- 4-8: 2
- 9-13: 3-4
- 14-18: 3-4
- 19-50: 2
- 51+: 3

**Meat and Alternatives**
- 2-3: 1
- 4-8: 1
- 14-18: 2
- 19-50: 2
- 51+: 2
What is One Food Guide Serving?
Look at the examples below.

**Bread**
- 1 slice (35 g)

**Bagel**
- ½ bagel (45 g)

**Flat breads**
- ½ pita or ½ tortilla (35 g)

**Leafy vegetables**
- Cooked: 125 mL (½ cup)
- Raw: 250 mL (1 cup)

**Fresh, frozen or canned fruits**
- 1 fruit or 125 mL (½ cup)

**100% Juice**
- 125 mL (½ cup)

**Milk or powdered milk (reconstituted)**
- 250 mL (1 cup)

**Canned milk (evaporated)**
- 125 mL (½ cup)

**Fortified soy beverage**
- 250 mL (1 cup)

**Cooked rice, bulgur or quinoa**
- 125 mL (½ cup)

**Cereal**
- Cold: 30 g
- Hot: 175 mL (¾ cup)

**Cooked pasta or couscous**
- 125 mL (½ cup)

**Cooked legumes**
- 175 mL (¾ cup)

**Tofu**
- 150 g or 175 mL (¾ cup)

**Eggs**
- 2 eggs

**Peanut or nut butters**
- 30 mL (2 tbsp)

**Shelled nuts and seeds**
- 60 mL (¼ cup)

**FORTIFIED SOY BEVERAGE**

**BOISSON DE SOYA ENRICHIE**

**Children Teens Adults**

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>2-3</th>
<th>4-8</th>
<th>9-13</th>
<th>14-18</th>
<th>19-50</th>
<th>51+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls and Boys</td>
<td>Females</td>
<td>Males</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vegetables and Fruit</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8-10</td>
<td>7</td>
</tr>
<tr>
<td>Grain Products</td>
<td>3</td>
<td>4</td>
<td>6</td>
<td>6</td>
<td>7</td>
<td>6-7</td>
</tr>
<tr>
<td>Milk and Alternatives</td>
<td>2</td>
<td>2</td>
<td>3-4</td>
<td>3-4</td>
<td>3-4</td>
<td>2</td>
</tr>
<tr>
<td>Meat and Alternatives</td>
<td>1</td>
<td>1</td>
<td>1-2</td>
<td>2</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>
Make each Food Guide Serving count…
wherever you are – at home, at school, at work or when eating out!

➤ Eat at least one dark green and one orange vegetable each day.
  • Go for dark green vegetables such as broccoli, romaine lettuce and spinach.
  • Go for orange vegetables such as carrots, sweet potatoes and winter squash.

➤ Choose vegetables and fruit prepared with little or no added fat, sugar or salt.
  • Enjoy vegetables steamed, baked or stir-fried instead of deep-fried.

➤ Have vegetables and fruit more often than juice.

➤ Make at least half of your grain products whole grain each day.
  • Eat a variety of whole grains such as barley, brown rice, oats, quinoa and wild rice.
  • Enjoy whole grain breads, oatmeal or whole wheat pasta.

➤ Choose grain products that are lower in fat, sugar or salt.
  • Compare the Nutrition Facts table on labels to make wise choices.
  • Enjoy the true taste of grain products. When adding sauces or spreads, use small amounts.

➤ Drink skim, 1%, or 2% milk each day.
  • Have 500 mL (2 cups) of milk every day for adequate vitamin D.
  • Drink fortified soy beverages if you do not drink milk.

➤ Select lower fat milk alternatives.
  • Compare the Nutrition Facts table on yogurts or cheeses to make wise choices.

➤ Have meat alternatives such as beans, lentils and tofu often.

➤ Eat at least two Food Guide Servings of fish each week.*
  • Choose fish such as char, herring, mackerel, salmon, sardines and trout.

➤ Select lean meat and alternatives prepared with little or no added fat or salt.
  • Trim the visible fat from meats. Remove the skin on poultry.
  • Use cooking methods such as roasting, baking or poaching that require little or no added fat.
  • If you eat luncheon meats, sausages or prepackaged meats, choose those lower in salt (sodium) and fat.

* Health Canada provides advice for limiting exposure to mercury from certain types of fish. Refer to www.canada.ca/en/health-canada.html for the latest information.
Oils and Fats

- Include a small amount – 30 to 45 mL (2 to 3 tbsp) – of unsaturated fat each day. This includes oil used for cooking, salad dressings, margarine and mayonnaise.
- Use vegetable oils such as canola, olive and soybean.
- Choose soft margarines that are low in saturated and trans fats.
- Limit butter, hard margarine, lard and shortening.

Having the amount and type of food recommended and following the tips in Canada’s Food Guide will help:

- Meet your needs for vitamins, minerals and other nutrients.
- Reduce your risk of obesity, type 2 diabetes, heart disease, certain types of cancer and osteoporosis.
- Contribute to your overall health and vitality.

Enjoy a variety of foods from the four food groups.

Satisfy your thirst with water!

Drink water regularly. It’s a calorie-free way to quench your thirst. Drink more water in hot weather or when you are very active.
Advice for different ages and stages...

**Children**

Following Canada’s Food Guide helps children grow and thrive.

Young children have small appetites and need calories for growth and development.

- Serve small nutritious meals and snacks each day.
- Do not restrict nutritious foods because of their fat content. Offer a variety of foods from the four food groups.
- Most of all... be a good role model.

**Women of childbearing age**

All women who could become pregnant and those who are pregnant or breastfeeding need a multivitamin containing folic acid every day. Pregnant women need to ensure that their multivitamin also contains iron. A health care professional can help you find the multivitamin that’s right for you.

Pregnant and breastfeeding women need more calories. Include an extra 2 to 3 Food Guide Servings each day.

Here are two examples:

- Have fruit and yogurt for a snack, or
- Have an extra slice of toast at breakfast and an extra glass of milk at supper.

**Men and women over 50**

The need for vitamin D increases after the age of 50.

In addition to following Canada’s Food Guide, everyone over the age of 50 should take a daily vitamin D supplement of 10 µg (400 IU).

---

**How do I count Food Guide Servings in a meal?**

Here is an example:

<table>
<thead>
<tr>
<th>Vegetable and beef stir-fry with rice, a glass of milk and an apple for dessert</th>
</tr>
</thead>
<tbody>
<tr>
<td>250 mL (1 cup) mixed broccoli, carrot and sweet red pepper = 2 Vegetables and Fruit Food Guide Servings</td>
</tr>
<tr>
<td>75 g (2 ½ oz.) lean beef = 1 Meat and Alternatives Food Guide Serving</td>
</tr>
<tr>
<td>250 mL (1 cup) brown rice = 2 Grain Products Food Guide Servings</td>
</tr>
<tr>
<td>5 mL (1 tsp) canola oil = part of your Oils and Fats intake for the day</td>
</tr>
<tr>
<td>250 mL (1 cup) 1% milk = 1 Milk and Alternatives Food Guide Serving</td>
</tr>
<tr>
<td>1 apple = 1 Vegetables and Fruit Food Guide Serving</td>
</tr>
</tbody>
</table>
Eat well and be active today and every day!

The benefits of eating well and being active include:
- Better overall health.
- Feeling and looking better.
- Lower risk of disease.
- More energy.
- A healthy body weight.
- Stronger muscles and bones.

Be active

To be active every day is a step towards better health and a healthy body weight.

It is recommended that adults accumulate at least 2 1/2 hours of moderate to vigorous physical activity each week and that children and youth accumulate at least 60 minutes per day. You don’t have to do it all at once. Choose a variety of activities spread throughout the week.

Start slowly and build up.

Eat well

Another important step towards better health and a healthy body weight is to follow Canada’s Food Guide by:
- Eating the recommended amount and type of food each day.
- Limiting foods and beverages high in calories, fat, sugar or salt (sodium) such as cakes and pastries, chocolate and candies, cookies and granola bars, doughnuts and muffins, ice cream and frozen desserts, french fries, potato chips, nachos and other salty snacks, alcohol, fruit flavoured drinks, soft drinks, sports and energy drinks, and sweetened hot or cold drinks.

Limit trans fat

When a Nutrition Facts table is not available, ask for nutrition information to choose foods lower in trans and saturated fats.

Read the label

- Compare the Nutrition Facts table on food labels to choose products that contain less fat, saturated fat, trans fat, sugar and sodium.
- Keep in mind that the calories and nutrients listed are for the amount of food found at the top of the Nutrition Facts table.

Take a step today...

- Have breakfast every day. It may help control your hunger later in the day.
- Walk wherever you can — get off the bus early, use the stairs.
- Benefit from eating vegetables and fruit at all meals and as snacks.
- Spend less time being inactive such as watching TV or playing computer games.
- Request nutrition information about menu items when eating out to help you make healthier choices.
- Enjoy eating with family and friends!
- Take time to eat and savour every bite!

For more information, interactive tools, or additional copies visit Canada’s Food Guide on-line at: www.canada.ca/en/health-canada/services/canada-food-guides.html

or contact:

Publications
Health Canada
Ottawa, Ontario K1A 0K9
E-Mail: publications@hc-sc.gc.ca
Tel.: 1 866 225-0709
Fax: (613) 941-5366
TTY: 1 800 267-1245

Également disponible en français sous le titre :
Bien manger avec le Guide alimentaire canadien

This publication can be made available on request on diskette, large print, audio-cassette and braille.

Nutrition Facts

Per 0 mL (0 g)

<table>
<thead>
<tr>
<th>Amount</th>
<th>% Daily Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calories</td>
<td>0</td>
</tr>
<tr>
<td>Fat</td>
<td>0 g</td>
</tr>
<tr>
<td>Saturates</td>
<td>0 g</td>
</tr>
<tr>
<td>+ Trans</td>
<td>0 g</td>
</tr>
<tr>
<td>Cholesterol</td>
<td></td>
</tr>
<tr>
<td>Sodium</td>
<td>0 g</td>
</tr>
<tr>
<td>Carbohydrate</td>
<td>0 g</td>
</tr>
<tr>
<td>Fibre</td>
<td>0 g</td>
</tr>
<tr>
<td>Sugars</td>
<td>0 g</td>
</tr>
<tr>
<td>Protein</td>
<td>0 g</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>0 %</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>0 %</td>
</tr>
<tr>
<td>Calcium</td>
<td>0 %</td>
</tr>
<tr>
<td>Iron</td>
<td>0 %</td>
</tr>
</tbody>
</table>

Resources

Key Resources for Parents

9-1-1 Emergency Contact

BC Poison Control Centre
Phone toll-free: 1 800 567-8911
Website: www.dpic.org

HealthyFamilies BC Website
An easy-to-use website for pregnant women and parents of babies and toddlers. Filled with up-to-date and practical information on pregnancy, child health, parenting, safety, child development, healthy eating and much more.
Website: www.healthyfamiliesbc.ca

HealthLink BC
British Columbians have trusted health information at their fingertips with just a phone call or a click away with HealthLink BC. HealthLink BC gives you quick and easy access to non-Emergency health information and services.
You can:
• Speak with a nurse about your symptoms
• Talk to a pharmacist about your medication questions
• Get healthy eating and nutrition advice from a dietitian
• Find the health services and resources you need that are close to you
• Get information about activity from a qualified exercise professional.
Phone: 8-1-1. For deaf and hearing-impaired assistance (TTY), call 7-1-1.
Translation services are available in over 130 languages on request.
Website: www.HealthlinkBC.ca

Public Health Offices/Community Health Centres
Offer a wide range of services to promote the optimal physical development, communication and cognitive abilities, healthy emotional attachment, and positive social development for all infants and children. Services include: breastfeeding clinics, nutrition information and consultation, parent and infant drop-in, child health clinics, and family and infant follow-up. Contact your local health authority for more information. (See “Health Authorities” p. 164.)

Aboriginal Resources

Aboriginal Head Start Association of BC includes 12 urban Aboriginal Head Start preschool sites. These programs provide early childhood education and services to Aboriginal children and their families.
Website: http://ahsabc.net/

Aboriginal Health Services: See the blue pages of your phone book under Health Authorities, Key Word Listings. For other Aboriginal and Métis organizations, see the Yellow Pages of your phone book.
The BC Aboriginal Child Care Society is a non-profit provincial organization serving Aboriginal early childhood programs throughout British Columbia.
Website: www.acc-society.bc.ca

The BC Aboriginal Infant Development Program offers services for Aboriginal children. It is a parallel organization to the BC Infant Development Program. For information on local programs, contact your public health office.
Phone: 250 388-5593
Website: www.aidp.bc.ca/home

BC Association of Aboriginal Friendship Centres. Aboriginal friendship centres aim to improve the quality of life of Canada’s Aboriginal people and to protect and preserve Aboriginal culture for the benefit of all Canadians.
Phone toll-free: 1 800 990-2432
Website: www.bcaafc.com
Eating Well With Canada’s Food Guide: First Nations, Inuit and Métis is a new tailored food guide that includes both traditional foods and store-bought foods that are generally available, affordable and accessible across Canada.
Phone toll-free: 1 866 225-0709
Website: www.hc-sc.gc.ca/fn-an/pubs/fnim-pnim/index-eng.php

Abuse or Neglect

Helpline for Children
A child is anyone under the age of 19. Abuse can be physical, emotional or sexual. Abuse can be abandonment, desertion, neglect, ill treatment or failure to meet the physical, emotional or medical needs of a child. Anyone can call the Helpline for Children for help 24 hours a day, including parents who are afraid they might hurt their child or if you know a child is being abused. You can call anonymously.
Phone: 310-1234 (no area code needed)
Website: www.mcf.gov.bc.ca/getting_help/help.htm

Alcohol and Drug Use

To learn about programs for people with alcohol and other drug problems, ask your health-care professional or check in the Yellow Pages under “Alcohol” or “Drugs.”

HealthLink BC provides 24-hour, confidential health information and advice, including referrals to other services.
Phone toll-free in B.C.: 8-1-1
TTY (Deaf and hearing impaired) phone toll-free: 7-1-1

The Alcohol and Drug Information and Referral Line offers a confidential, toll-free information line for alcohol and other drug programs in the province.
Phone toll-free: 1 800 663-1441

Motherisk offers information on the use of alcohol and other drugs while breastfeeding. Visit the Motherisk website or call its Alcohol and Substance Use Helpline.
Motherisk Helpline: 1 877 439-2744
Alcohol and Substance Use Helpline: 1 877 327-4636
Website: www.Motherisk.org

Breastfeeding

The La Leche League Canada encourages, promotes and provides mother-to-mother breastfeeding support and information.
Website: www.lllc.ca

Dietitian Services, HealthLink BC
Dietitian Services at HealthLink BC is staffed by registered dietitians who can answer healthy eating and nutrition questions. Translation services are available in 130 languages.
Phone: 8-1-1. For deaf and hearing-impaired assistance (TTY), call 7-1-1.
Website: www.HealthlinkBC.ca

Public Health Office or Hospital
Public health offices or hospitals in your area may offer additional breastfeeding services such as lactation consultants, breastfeeding support groups and phone consultation. Contact your local health authority for more information. (See “Health Authorities” on p. 164.)

Child Care

Your local Ministry for Children and Family Development office or public health office can give you information to help you select a child care facility. HealthLink BC (www.HealthlinkBC.ca) also offers tips and information on choosing child care providers.

The BC Aboriginal Child Care Society is a non-profit provincial organization serving Aboriginal early childhood programs throughout British Columbia.
Website: www.acc-society.bc.ca

The Canada Revenue Agency administers tax laws for the Government of Canada and for most provinces and territories; and various social and economic benefit and incentive programs delivered through the tax system.
Website: www.cra.gc.ca

The Child Care BC Help Line provides information for service providers and parents on child care funding and subsidies.
Phone toll-free: 1 888 338-6622
In Victoria: 250 356-6501
Website: www.mcf.gov.bc.ca/childcare/parents.htm
Child Care Licensing Regulations describe what is required of child care operators in British Columbia.
Website: www.health.gov.bc.ca/ccf/child_care.html

Child Care Resource and Referral Program (CCRR) is a source of information on child care in your local community.
Toll-free in B.C.: 1 888 338-6622
In Victoria: 250 356-6501
Website: www.mcf.gov.bc.ca/childcare/cc_resource.htm

Website: www.mcf.gov.bc.ca/childcare/parents.htm

Parents’ Guide to Selecting and Monitoring Child Care in BC
This brochure from the B.C. government is full of information that will help you make decisions about child care.
Website: www.mcf.gov.bc.ca/childcare/parents.htm

WorkSafeBC is dedicated to promoting workplace health and safety for B.C. workers and employers.
Website: www.worksafebc.com

Child Development

The BC Aboriginal Infant Development Program offers services for Aboriginal children. It is a parallel organization to the BC Infant Development Program. For information on local programs, contact your public health office.
Phone: 250 388-5593
Website: www.aidp.bc.ca/home

The Infant Development Program of BC offers help to B.C. children and parents. The program has specialized practitioners who are trained to foster healthy child development. These practitioners work in your local health area. Contact your local Infant Development Program of BC office or public health office.
Email: info@idpofbc.ca
Website: www.idpofbc.ca

DECODA provides children from birth to age five with a strong foundation in literacy, physical activity and healthy eating, through fun activities and play. This new program values the learning and bonding that happen when children and caregivers play together.
Website: www.decoda.ca/resources/

Ready, Set, Learn is a BC government initiative that helps families connect with the school system and community agencies.
Website: www.bced.gov.bc.ca/early_learning/rsl/
Child Support

**Family Justice Services.** Phone for information about government support for families.
Website: www2.gov.bc.ca/gov/content/life-events/divorce/family-justice

**Ministry of Social Development and Poverty Reduction: Family Maintenance Program.** See the website for information on government financial support for families.
Website: www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/social-development-poverty-reduction

Dental Care

**BC Dental Association**
Phone: 604 736-7202
Toll-free: 1 888 396-9888
Website: www.bcdental.org

**BC Dental Hygienists’ Association**
Phone: 604 415-4559
Website: www.bcdha.bc.ca

The **BC Healthy Kids Program** helps low-income families with the costs of basic dental care for their children. For more information, visit the website or talk to your public health office.
Phone toll-free: 1 866 866-0800
Website: www2.gov.bc.ca/gov/content/health/managing-your-health/healthy-women-children/child-teen-health/dental-eyeglasses

**Kidsmiles.ca** is a program created by the BC Dental Association, in collaboration with the B.C. government, to help parents, guardians and other caregivers learn more about caring for the oral health of young children in B.C.
Website: www.kidsmiles.ca/index.htm

Family Resources

**Support programs and family resource centres offer programs and services to support families and single parents. Contact your local public health office or public health nurse for more information.**

**For advice on financial support, including B.C.’s Family Bonus or family maintenance, contact the Ministry of Finance. For information about enforcement of maintenance orders, contact the Ministry of Attorney General. Check the Blue Pages of your phone book for the nearest office.**

The **BC Association of Family Resource Programs** is a not-for-profit provincial organization dedicated to raising awareness of the importance of community-based family resource programs.
Website: www.frpbc.ca

The **BC Council for Families** is a province-wide community service that works on behalf of families and people who serve families.
Phone: 604 678-8884
Website: www.bccf.ca

**B.C.’s Representative for Children and Youth** supports children, youth and families who need help in dealing with the child-serving system and pushes for changes to the system itself. The Representative is responsible for advocating for children and youth and for protecting their rights.
The Office works to help to improve the system of support for children and youth, mainly those who are most vulnerable. This includes those who are:
- in-care and live in foster or group homes
- in the home of a relative under a government program
- in youth custody.
The Representative for Children and Youth is an Independent Officer of the Legislature and does not report through a provincial ministry.
Phone toll-free in B.C.: 1 800 476-3933
Website: www.rcybc.ca

The **Vanier Institute of the Family** is a national charitable organization dedicated to promoting the well-being of Canadian families. Its website offers resources on many family-related issues.
Website: www.vanierinstitute.ca
**Family Violence**

*When violence happens, get help.*

**In case of emergency, call 9-1-1** and ask for the police. If your community does not have a 9-1-1 service, look for the local police emergency phone number on the first page of your phone book under ‘Emergency’. To find out about crisis support services in your community, call *VictimLinkBC* toll-free at 1 800 563-0808. VictimLinkBC can provide immediate support 24 hours a day, 7 days a week.

**BC Women’s Hospital Woman Abuse Response Program**  
Phone: 604 875-3717  
Website: [www.bcwomens.ca/our-services/support-services](http://www.bcwomens.ca/our-services/support-services)

**BC / Yukon Society of Transition Houses**  
Website: [www.bcsth.ca](http://www.bcsth.ca)

**Kids Help Phone** is Canada’s only toll-free, 24-hour, bilingual and anonymous phone counselling, referral and Internet service for children and youth.  
Phone toll-free: 1 800 668-6868  
Website: [www.kidshelpphone.ca](http://www.kidshelpphone.ca)

**National Clearinghouse on Family Violence** is a resource centre for information on violence within relationships of kinship, intimacy, dependency or trust.  

**VictimLinkBC** is a province-wide telephone help line for victims of family and sexual violence and all other crimes. VictimLinkBC operates 24 hours a day, seven days a week, and provides service in 110 languages. It will help you find information on the victim services closest to you.  
Phone toll-free: 1 800 563-0808  
Access for hearing impaired: TTY 604 875-0885  
Website: [www.victimlinkbc.ca](http://www.victimlinkbc.ca)

**Fathering**

**BC Council for Families** provides educational resources on topics such as parenting, childhood development, parent-teen relationships, work-life balance, suicide awareness and more. Information about involved fathering and parenting in general is available on the website. Print resources on fathering can be purchased as well.  
Website: [www.bccf.ca](http://www.bccf.ca)

**HealthLink BC**

*British Columbians can get trusted health information by phone or online from HealthLink BC. HealthLink BC combines the BC HealthGuide, BC HealthFiles, BC NurseLine, and pharmacist and dietitian services, to help B.C. residents find the publicly-funded health services they need, closest to where they live.*

**HealthLink BC** provides a confidential telephone nursing service available 24 hours a day, seven days a week. It includes a pharmacist service for medication inquiries. The pharmacist service is available from 5 p.m. to 9 a.m. daily. It also includes dietitian services. Registered dietitians are available Monday to Friday 9 a.m. to 5 p.m. You can get answers to your health-care questions and concerns, including when to see a doctor or visit Emergency. Translation services are available in 130 languages.  
Anywhere in B.C., phone toll-free: 8-1-1  
TTY (Deaf and hearing impaired) phone toll-free: 7-1-1  
Website: [www.healthlinkbc.ca](http://www.healthlinkbc.ca)

The **HealthLink BC Files** is a series of easy-to-read fact sheets on a variety of environmental, public health and safety topics. Several HealthLinkBC Files are available on topics related to parenting your toddler, including HealthLinkBC File #68d, *Iron Contents in Food*, and HealthLinkBC File #45, *Should I Get My Well Water Tested?* You can access the HealthLink BC Files online or request a copy from your local provincial health unit/department and various other offices (e.g., employee health and wellness services, native health centres and physicians’ offices/clinics).  
Website: [www.healthlinkbc.ca](http://www.healthlinkbc.ca)
### Health Authorities

**Northern Health**  
Phone: 250 565-2649  
Website: [www.northernhealth.ca](http://www.northernhealth.ca)

**Interior Health**  
Phone: 250 469-7070  
Website: [www.interiorhealth.ca](http://www.interiorhealth.ca)

**Island Health**  
Phone: 250 370-8699  
Website: [www.viha.ca](http://www.viha.ca)

**Vancouver Coastal Health**  
Phone toll-free: 1 866 884-0888 or 604 736-2033  
Website: [www.vch.ca](http://www.vch.ca)

**Fraser Health**  
Phone toll-free: 1 877-935-5669  
Phone: 604 587-4600  
Website: [www.fraserhealth.ca](http://www.fraserhealth.ca)

**Provincial Health Services Authority of BC**  
Phone: 604 675-7400  
Website: [www.phsa.ca](http://www.phsa.ca)

**First Nations Health Authority**  
Phone: 604 693-6500  
Toll Free: 1 866 913-0033  
Health Benefits: 1 855 550-5454 (Toll Free)  
Website: [www.fnha.ca](http://www.fnha.ca)

### Immunizations

**HealthLink BC Files** contain information on many immunization topics.  
Website: [www.HealthlinkBC.ca](http://www.HealthlinkBC.ca)

**ImmunizeBC**. This website has information about immunizations in B.C., including common questions.  
Website: [www.immunizebc.ca](http://www.immunizebc.ca)

**Vaccination and Your Child**. This web page of the Canadian Paediatric Society answers many common questions about having your child immunized.  
Website: [www.caringforkids.cps.ca/handouts/vaccination_and_your_child](http://www.caringforkids.cps.ca/handouts/vaccination_and_your_child)

### Medical Resources

**BC College of Family Physicians**  
Phone: 604 736-1877  
Website: [www.bccfp.bc.ca](http://www.bccfp.bc.ca)

**Canadian Mental Health Association** is a nationwide, voluntary organization that promotes the mental health of all and supports the resilience and recovery of people experiencing mental illness.  
Website: [www.cmha.ca/bins/index.asp](http://www.cmha.ca/bins/index.asp)

**Canadian Paediatric Society** promotes quality health care for Canadian children and establishes guidelines for pediatric care. The organization offers educational materials on a variety of topics, including information on immunizations, pregnancy, safety issues and teen health.  
Phone: 613 526-9397  
Website: [www.cps.ca](http://www.cps.ca)

**Caring for Kids** is a website designed to provide parents with information about their child’s health and well-being. Developed by the Canadian Paediatric Society.  
Website: [www.caringforkids.cps.ca](http://www.caringforkids.cps.ca)

### Hearing

The BC Early Hearing Program is the first province-wide screening program to check hearing in babies born in British Columbia.  
Website: [www.phsa.ca/our-services/programs-services/bc-early-hearing-program](http://www.phsa.ca/our-services/programs-services/bc-early-hearing-program)
**Nutrition**

*Eating Well with Canada’s Food Guide* is available through the Canada’s Food Guide website or from your health office. Website: [www.canada.ca/en/health-canada/services/canada-food-guides.html](http://www.canada.ca/en/health-canada/services/canada-food-guides.html)

**Dietitian Services, HealthLink BC**
The HealthLink BC’s help line is staffed by registered dietitians who can answer general and medical nutrition questions. Translation services are available in 130 languages. Phone: 8-1-1. For deaf and hearing-impaired assistance (TTY), call 7-1-1. Website: [www.healthlinkbc.ca](http://www.healthlinkbc.ca)

**Physical Activity**

**Physical Activity Services** – HealthLink BC. The HealthLink BC’s help line is staffed by qualified exercise professionals who can answer general physical activity questions. Translation services are available in 130 languages. Phone: 8-1-1


**Healthy Weights for Women**
Website: [www.healthypregnancybc.ca](http://www.healthypregnancybc.ca)

**Prescription Drugs**

**PharmaCare** subsidizes eligible prescription drugs and designated medical supplies. Phone toll-free outside Lower Mainland: 1 800 663-7100 Lower Mainland: 604 683-7151 Website: [www.health.gov.bc.ca/pharmacare](http://www.health.gov.bc.ca/pharmacare)

**Parenting**

Support groups, such as Parents without Partners, Mother Goose! and Nobody’s Perfect, and the family resource program (Family Place) are available in many communities. Contact your local public health office, mental health agency or family resource centre about programs. If you plan to return to school, the Ministry of Advanced Education may be able to help you look at options for your education and planning your career.

**Perinatal and Postpartum Depression**

*For information about postpartum depression support groups, contact your public health nurse.*

**BC Reproductive Mental Health Program** provides counselling to women with depression in pregnancy and after birth. Website: [www.reproductivementalhealth.ca/](http://www.reproductivementalhealth.ca/)

**Pacific Post Partum Support Society** is a non-profit society dedicated to supporting the needs of postpartum mothers and their families. They also publish *Postpartum Depression and Anxiety: A Self-Help Guide for Mothers.* Phone toll-free: 1 855 255-7999 Phone: 604 255-7999 Website: [www.postpartum.org](http://www.postpartum.org)
Safety

**BCAA Child Passenger Safety Program** provides workshops and resources about child car seats.
Phone: 1 877 247-5551

**BC Injury Research and Prevention Unit** provides useful fact sheets by e-mail.
Website: [www.injuryresearch.bc.ca](http://www.injuryresearch.bc.ca)

**Canada Safety Council** is a national, non-government, charitable organization dedicated to safety. The CSC provides resources for safety information, education and awareness in all aspects of Canadian life – in traffic, at home, at work and at leisure. The CSC website offers a wide variety of safety-related information and education materials for the general public.
Phone: 613 739-1535
Website: [http://canadasafetycouncil.org/](http://canadasafetycouncil.org/)

**The Canadian Red Cross** teaches emergency child care first aid, CPR and basic skills for dealing with emergencies.
Phone toll-free: 1 877 356-3226
Website: [www.redcross.ca](http://www.redcross.ca)

**Health Canada: Consumer Product Safety**
Phone: 1 866 662-0666

**National Highway Traffic Safety Administration.** This U.S. traffic safety website provides information on child car seat recalls.
Website: [www.nhtsa.gov](http://www.nhtsa.gov)

**Poison Control Centre.** The BC Drug and Poison Information Centre provides 24-hour poison information services.
Phone toll-free: 1 800 567-8911
Website: [www.dpic.org](http://www.dpic.org)

**Emergency Management BC** offers help with emergency planning or to create an emergency kit.
Website: [www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery](http://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery)

**Parachute** provides information for keeping children safe and preventing injuries.
Phone toll-free: 1 888 537-7777
Website: [www.parachutecanada.org/](http://www.parachutecanada.org/)

**Safe Start** is an injury prevention program of BC Children’s Hospital. It provides information to parents and caregivers on how to make homes and cars safer.
Website: [www.bcchildrens.ca/health-info/healthy-living/child-safety](http://www.bcchildrens.ca/health-info/healthy-living/child-safety)
Shaken Baby Syndrome

Prevent Shaken Baby Syndrome British Columbia
Phone: 1 888 300-3088
Website: http://dontshake.ca/

The Crisis Intervention and Suicide Prevention Centre of British Columbia. The Distress Line provides confidential, non-judgmental, free emotional support 24 hours a day, 7 days a week for people experiencing feelings of distress or despair.
Phone: 1 800 784-2433
Website: www.crisiscentre.bc.ca/

Speech Therapy

British Columbia Association of Speech/Language Pathologists and Audiologists
Phone toll-free: 1 877 BCASLPA (222-7572)
Website: www.bcaslpa.ca

Vision

The BC Healthy Kids Program helps low-income families with the costs of prescription eyewear for their children. For more information, call, visit the website or contact your public health office.
Phone toll-free: 1 866 866-0800
Website: www2.gov.bc.ca/gov/content/health/managing-your-health/healthy-women-children/child-teen-health/dental-eyeglasses

Special Needs

Your public health nurse can help if you think your toddler has a developmental problem or a disability. Most communities have an Infant Development Program for children. Staff in this program can help you with activities for your toddler that will encourage development. You will also have help finding other support services.

Ministry of Children and Family Development: Special Needs
For information on government support for children with special needs. This resource will give you details on programs for young children with special needs residing in B.C.
Website: www2.gov.bc.ca/gov/content/health/managing-your-health/healthy-women-children/child-behaviour-development/special-needs
Index

A
abduction 146
abuse 147, 148
acetaminophen 102
activity, physical 77, 78
aggression 147
air bags 136
alcohol
breastfeeding and safe storage of 51
allergic reaction 74
allergies, food 56, 74
animals, safety with 149
antibacterial soaps 98
antibiotics 102
antihistamine 102
anti-scald guard 131
appetite 49, 54, 56, 59, 62
attachment 3
  how to encourage 4

B
babbling 25
baby food 55, 56
baby gates 131, 138, 144
babysitters 126
babysitting courses 126
baby teeth 88
baby walker 140
back carriers 140
"back to sleep" 84
balanced diet 48, 72
balloons 42
bath rings 143
bathroom safety 133
bath seats 143
bathtub safety 143

battery-operated toys 42
bean sprouts 68
bedding, safety tips 84, 85
bedsharing 83
beds, safety tips 85
bedtime 81–83, 83
  reading 81
  routine 81
behaviour
  challenging 109
  dealing with problem 105
  discipline 104–107
  limits and rules 106
  promoting positive reasons for 104, 105
  setting an example 105
  understanding 103
bicycle 141, 142
  child seats 142
  child trailers 142
  helmets 141, 142
birth weight 75
bites, animal 149
biting 52, 109
blinds 130
block parent program 146
blocks, toy 41
Body Mass Index (BMI) 76
boil water advisories 66
books 18
booster seat/chairs 135, 139
bottled water 66
bottle feeding and tooth decay 89
bowel movement 86
brain injury (see neuro-trauma) 47, 50–53
breastfeeding 53
breast milk benefits of expressing 50
burns, preventing 131

C
caffeine 67
calcium 66
Canada's Food Guide 56, 62, 64, 73, 76, 151
Canadian Motor Vehicle Safety Standards label 136
cannabis 52
carbon monoxide monitors 132
carriers, child 140
car safety 135–137
car seats 129, 135–137
cats 149
chairs
  booster chairs/seats 139
  high chairs 139
  hook-on chairs 139
  "check with me first" approach 145
cheese 68
chest freezer 131, 134
cost 127
cost
  babysitters 126
  centre care 125–126
  choices 124
  family care 125
  finding 124
  in-home 125
  licence-not-required 125
  licensed 124
  regulations 125
  subsidy 127
Child Care BC Help Line 160
<table>
<thead>
<tr>
<th>Child Carriers</th>
<th>140</th>
</tr>
</thead>
<tbody>
<tr>
<td>Back Carrier</td>
<td>140</td>
</tr>
<tr>
<td>Front Carrier</td>
<td>140</td>
</tr>
<tr>
<td>Child Development (see Development, individual areas of development)</td>
<td></td>
</tr>
<tr>
<td>Area of</td>
<td>9–11</td>
</tr>
<tr>
<td>By Age</td>
<td>12–36</td>
</tr>
<tr>
<td>Importance of</td>
<td>9</td>
</tr>
<tr>
<td>Child Health Passport</td>
<td>96</td>
</tr>
<tr>
<td>Childproofing</td>
<td>78, 130</td>
</tr>
<tr>
<td>Child with special needs</td>
<td>45, 117, 127</td>
</tr>
<tr>
<td>Choking</td>
<td>42</td>
</tr>
<tr>
<td>Preventing</td>
<td>42, 62, 70, 132</td>
</tr>
<tr>
<td>Choking Hazard</td>
<td></td>
</tr>
<tr>
<td>Soothers</td>
<td>91</td>
</tr>
<tr>
<td>Toys</td>
<td>42</td>
</tr>
<tr>
<td>Choking Hazards</td>
<td></td>
</tr>
<tr>
<td>Foods</td>
<td>70</td>
</tr>
<tr>
<td>Cigarette Smoking</td>
<td>52, 83, 131</td>
</tr>
<tr>
<td>Cleaning</td>
<td></td>
</tr>
<tr>
<td>Kitchen</td>
<td>55</td>
</tr>
<tr>
<td>Surfaces</td>
<td>99</td>
</tr>
<tr>
<td>Cod Liver Oil</td>
<td>53, 64</td>
</tr>
<tr>
<td>Cognitive Development</td>
<td>9, 11</td>
</tr>
<tr>
<td>From 6–9 months</td>
<td>15</td>
</tr>
<tr>
<td>From 9–12 months</td>
<td>19</td>
</tr>
<tr>
<td>From 12–18 months</td>
<td>23</td>
</tr>
<tr>
<td>From 18–24 months</td>
<td>27</td>
</tr>
<tr>
<td>From 24–30 months</td>
<td>31</td>
</tr>
<tr>
<td>From 30–36 months</td>
<td>35</td>
</tr>
<tr>
<td>Role of Play in</td>
<td>39</td>
</tr>
<tr>
<td>Cognitive Skills</td>
<td>39</td>
</tr>
<tr>
<td>Cold, Protection From</td>
<td>80</td>
</tr>
<tr>
<td>Colds</td>
<td>102</td>
</tr>
<tr>
<td>Communication</td>
<td>104, 146</td>
</tr>
<tr>
<td>Compromising</td>
<td>107</td>
</tr>
<tr>
<td>Computer Games</td>
<td>43</td>
</tr>
<tr>
<td>Cooked Food, Safe Temperature of</td>
<td>55</td>
</tr>
<tr>
<td>Cooking Microwave</td>
<td>55</td>
</tr>
<tr>
<td>Cooperative Play</td>
<td>38</td>
</tr>
<tr>
<td>Coughs</td>
<td>102</td>
</tr>
<tr>
<td>Cow’s Milk</td>
<td>64, 66</td>
</tr>
<tr>
<td>Crawling</td>
<td>15</td>
</tr>
<tr>
<td>Crib Bedding</td>
<td>84, 85</td>
</tr>
<tr>
<td>Recommended Use</td>
<td>83</td>
</tr>
<tr>
<td>Safety</td>
<td>85</td>
</tr>
<tr>
<td>Crying</td>
<td>111–112, 118</td>
</tr>
<tr>
<td>Cues, Hunger and Fullness</td>
<td>47–48</td>
</tr>
<tr>
<td>Cultural Diversity</td>
<td>45–48</td>
</tr>
<tr>
<td>Cup, Drinking</td>
<td>56, 89</td>
</tr>
<tr>
<td>D</td>
<td></td>
</tr>
<tr>
<td>Dawdling</td>
<td>109, 111</td>
</tr>
<tr>
<td>Death, Helping Your Toddler Deal with</td>
<td>120–121</td>
</tr>
<tr>
<td>Decongestant</td>
<td>102</td>
</tr>
<tr>
<td>Dehydration</td>
<td>101</td>
</tr>
<tr>
<td>Dental Benefits</td>
<td>89</td>
</tr>
<tr>
<td>Dental Care</td>
<td>88–90</td>
</tr>
<tr>
<td>Depression, Perinatal</td>
<td>113</td>
</tr>
<tr>
<td>Depression, Postpartum</td>
<td>113–114</td>
</tr>
<tr>
<td>Development</td>
<td></td>
</tr>
<tr>
<td>Child</td>
<td>9–45</td>
</tr>
<tr>
<td>Cognitive</td>
<td>9, 11, 39</td>
</tr>
<tr>
<td>From 6–9 months</td>
<td>15</td>
</tr>
<tr>
<td>From 9–12 months</td>
<td>19</td>
</tr>
<tr>
<td>From 12–18 months</td>
<td>23</td>
</tr>
<tr>
<td>From 18–24 months</td>
<td>27</td>
</tr>
<tr>
<td>From 24–30 months</td>
<td>31</td>
</tr>
<tr>
<td>From 30–36 months</td>
<td>35</td>
</tr>
<tr>
<td>Concerns about</td>
<td>45</td>
</tr>
<tr>
<td>Defined</td>
<td>9</td>
</tr>
<tr>
<td>Emotional</td>
<td>9, 11, 39</td>
</tr>
<tr>
<td>From 6–9 months</td>
<td>14</td>
</tr>
<tr>
<td>From 9–12 months</td>
<td>18</td>
</tr>
<tr>
<td>From 12–18 months</td>
<td>22</td>
</tr>
<tr>
<td>From 18–24 months</td>
<td>26</td>
</tr>
<tr>
<td>From 24–30 months</td>
<td>30</td>
</tr>
<tr>
<td>From 30–36 months</td>
<td>34</td>
</tr>
<tr>
<td>Developmental Milestones</td>
<td>12, 45</td>
</tr>
<tr>
<td>Diaper Pail</td>
<td>132</td>
</tr>
<tr>
<td>Diapers</td>
<td>86, 87</td>
</tr>
<tr>
<td>Diet</td>
<td></td>
</tr>
<tr>
<td>Importance of Healthy</td>
<td>7</td>
</tr>
<tr>
<td>Disabilities Services</td>
<td>45, 117, 127</td>
</tr>
<tr>
<td>Discipline</td>
<td>37, 104–108, 116</td>
</tr>
<tr>
<td>Divorce</td>
<td>122</td>
</tr>
<tr>
<td>Doctor Visits</td>
<td>101</td>
</tr>
<tr>
<td>Dogs</td>
<td>149, 150</td>
</tr>
<tr>
<td>Domestic</td>
<td></td>
</tr>
<tr>
<td>Abuse</td>
<td>147–148</td>
</tr>
<tr>
<td>Violence</td>
<td>147–148</td>
</tr>
<tr>
<td>Drink Crystals</td>
<td>67</td>
</tr>
<tr>
<td>Drinking (Alcohol)</td>
<td></td>
</tr>
<tr>
<td>While Breastfeeding</td>
<td>51</td>
</tr>
<tr>
<td>Drinking, Learning to</td>
<td>56</td>
</tr>
<tr>
<td>Drink Powders</td>
<td>67</td>
</tr>
<tr>
<td>Drinks</td>
<td>66–67</td>
</tr>
<tr>
<td>Drooling</td>
<td>88</td>
</tr>
<tr>
<td>Index</td>
<td>169</td>
</tr>
</tbody>
</table>
Index

E

drugs use while breast feeding 51

Eating

ear problems 95

Eating

encouraging healthy habits 47–48

Eating

making enjoyable routines 71

Eating

skills, typical from 6–9 months 56

Eating

from 9–12 months 58

Eating

from 12–24 months 60

Eating

from 24–36 months 62

Eating

together 71

Eating Well With Canada's Food Guide 56, 62, 64, 73, 76, 151

Eating Well With Canada's Food Guide – First Nations, Inuit and Métis 64, 160

Eating

eczema 74, 100

eggs, undercooked 68

Eating

emergency numbers 130

Eating

emotional abuse 147

Eating

emotional development from 6–9 months 14

Eating

from 9–12 months 18

Eating

from 12–18 months 22

Eating

from 18–24 months 26

Eating

from 24–30 months 30

Eating

from 30–36 months 34

Eating

role of play in emotional skills 39

Eating

empathy 37

Eating

equipment safety 138–142

Eye

problems 80

Eye

safety 93

F

falls, preventing 131

F

family breakup 122

F

fast foods 68

F

fathering 7, 163

F

fear, helping toddler deal with feeding 47–74

F

bottle-feeding 54, 55, 89

F

breast-feeding 50–52

F

by age

F

6–9 months 56, 57

F

9–12 months 58, 59

F

12–24 months 60, 61

F

24–36 months 62, 63

F

chooking hazards 70

F

cues 48, 49

F

formula 50, 52, 64, 73

F

jobs 47, 48

F

picky eaters 72

F

safety 55

F

sample menus 57, 59, 61, 63

F

solid foods 47, 54, 55

F

vegetarian toddler 53, 64, 73

F

fever 88, 97, 101, 102

F

fighting 110

F

fine motor skills 10

F

fire extinguisher 134

F

fires, preventing 131

F

first foods 54, 55

F

fish 68, 69

F

mercury levels in recommendations for choosing 69

F

safe cooking temperature 55, 68

F

fitness (see physical activity)

F

flossing 90

F

flotation devices 144

F

fluoride 89, 90

F

flu shots 97

F

food allergies 56, 74

F

Food Guide, Canada's 56–69, 72, 151, 165

F

food poisoning, preventing 55, 67

F

food suggestions, by age

F

6–9 months 57

F

9–12 months 59

F

12–24 months 61

F

24–36 months 63

F

formula feeding 50

F

front carriers 140

F

frostbite 80

F

fruit-flavoured drinks 67

F

fruit juice 67

F

unpasteurized 67

F

fullness cues 47–49

G

gagging 55–57

G

gardening 67–69

G

gates, safe use of 131–133

G

genitals, safe use of 44–46, 145–147, 148–150

G

goat's milk 66–68

G

grazing 71–73, 76–78, 89–91

G

grief 120–122, 121–123

G

gross motor skills 10–12

G

growth 75–77

H

hand sanitizer 99–102

H

hand washing 98–101, 102–105

H

health care visits 101

H

HealthLink BC 100, 102, 163

H

health resources 100

H

healthy eating 47, 48

H

Healthy Kids Program 89

H

healthy weight 76, 77

H

hearing 94, 95

H

heat 79

H

exhaustion 79

H

protection from 79

H

height (growth) 75

H

helmets, bicycle 141, 142

H

high chairs 139

H

hives 74
homemade baby food 55
home safety 130
honey 67, 91
hook-on chairs 139
hot tubs 144
hot water tank 131
house plants 132
hugs, refusing 44, 148
humidifier 102
hunger cues 47–49

I
illness, preventing 96–99
hand washing 98
immunizations 96–98
keeping surfaces clean 99
imitative play 38
immunizations 96–99
flu shots 97
reactions 97
schedule 97
independence
development of 37
encouraging 37
infant cereal 54
iron 54, 66
deficiency 54, 66
iron-fortified infant cereal 54, 73
iron-rich foods 53, 54, 64, 66

J
juice 67
unpasteurized 67
jumpers (Jolly Jumpers™) 139
junk food 72

K
kisses, refusing 44
kitchen safety 134

L
language
early development 28
language development 9, 11
early
from 6–9 months 25
from 9–12 months 16
from 12–18 months 20
from 18–24 months 24
from 24–30 months 28
from 30–36 months 32
reading and role of play in
language learning 16, 20, 24, 28, 32, 36
additional languages 32
language skills 39
lead 66
lead-based paint 132
learning 27, 43
through play 38
leftovers, storing 55
life-jacket 143, 144
liquor, safe storage of 132

M
masturbation 44
meals 48
(see also feeding, by age)
suggestions for
mealtimes 71, 72
meat
introducing 55
safe cooking temperatures 55
undercooked 68
medication
breastfeeding while taking 51
memories, creating 4
mercury in fish 68, 69
microwave cooking 55, 56
milestones, developmental 12, 45
milk 62, 66
breast 50, 51, 62
cow’s 49, 64, 66
goose’s 66
whole 62
mineral supplements 52, 64
mini-blinds 132
mothballs 132
motor skills 10
fine 10
gross 10
moving house 86, 118

N
nanny 124, 125
napping 82
neurotrauma 112
new baby, preparing for 119
newspaper 132
nightmares, preventing 4
night waking 82, 83
nutrition (see feeding, eating)
nutritional supplement drinks 67

O
obesity 50, 76, 77
and screen time 43
omega-3 fats 68, 73
organic vegetables and fruit 67
outdoor safety, from heat and cold 79, 80
overweight children 76, 77

P
pacifiers 90
paint 132
parallel play 38
parent
definition of 6
growing as a 7
<table>
<thead>
<tr>
<th>Topic</th>
<th>Page(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>parenting</td>
<td>103–127</td>
</tr>
<tr>
<td>authoritarian</td>
<td>115</td>
</tr>
<tr>
<td>authoritative</td>
<td>115</td>
</tr>
<tr>
<td>challenging behaviours</td>
<td>109–111</td>
</tr>
<tr>
<td>compromising</td>
<td>107</td>
</tr>
<tr>
<td>consistent</td>
<td>115</td>
</tr>
<tr>
<td>cultural differences</td>
<td>115, 116</td>
</tr>
<tr>
<td>definition of discipline</td>
<td>7</td>
</tr>
<tr>
<td>discipline</td>
<td>104–108</td>
</tr>
<tr>
<td>new baby, preparing for</td>
<td>119</td>
</tr>
<tr>
<td>perinatal depression</td>
<td>113, 114</td>
</tr>
<tr>
<td>permissive</td>
<td>115</td>
</tr>
<tr>
<td>postpartum depression</td>
<td>113, 114</td>
</tr>
<tr>
<td>separation or divorce</td>
<td>122</td>
</tr>
<tr>
<td>single parents</td>
<td>116</td>
</tr>
<tr>
<td>skills</td>
<td>7</td>
</tr>
<tr>
<td>special needs toddler</td>
<td>117</td>
</tr>
<tr>
<td>staying calm</td>
<td>111, 112</td>
</tr>
<tr>
<td>styles</td>
<td>115</td>
</tr>
<tr>
<td>understanding toddler behaviour</td>
<td>103</td>
</tr>
<tr>
<td>park safety</td>
<td>80</td>
</tr>
<tr>
<td>penis</td>
<td>44</td>
</tr>
<tr>
<td>perinatal depression</td>
<td>113, 114</td>
</tr>
<tr>
<td>pet food, dry</td>
<td>149</td>
</tr>
<tr>
<td>pets</td>
<td>121</td>
</tr>
<tr>
<td>safety with</td>
<td>149, 150</td>
</tr>
<tr>
<td>physical abuse</td>
<td>147</td>
</tr>
<tr>
<td>physical activity</td>
<td>77, 78</td>
</tr>
<tr>
<td>importance for parents</td>
<td>7</td>
</tr>
<tr>
<td>suggestions by age</td>
<td>78</td>
</tr>
<tr>
<td>physical development</td>
<td>9, 10</td>
</tr>
<tr>
<td>from 6 – 9 months</td>
<td>13</td>
</tr>
<tr>
<td>from 9 – 12 months</td>
<td>17</td>
</tr>
<tr>
<td>from 12 – 18 months</td>
<td>21</td>
</tr>
<tr>
<td>from 18 – 24 months</td>
<td>25</td>
</tr>
<tr>
<td>from 24 – 30 months</td>
<td>29</td>
</tr>
<tr>
<td>from 30 – 36 months</td>
<td>33</td>
</tr>
<tr>
<td>role of play in</td>
<td>39</td>
</tr>
<tr>
<td>physical punishment</td>
<td>104</td>
</tr>
<tr>
<td>physical skills</td>
<td>39</td>
</tr>
<tr>
<td>picky eating</td>
<td>72</td>
</tr>
<tr>
<td>play</td>
<td>38–42</td>
</tr>
<tr>
<td>at child care</td>
<td>41</td>
</tr>
<tr>
<td>by age</td>
<td>40</td>
</tr>
<tr>
<td>encouraging</td>
<td>41</td>
</tr>
<tr>
<td>types of</td>
<td>38</td>
</tr>
<tr>
<td>play dates</td>
<td>20</td>
</tr>
<tr>
<td>playground safety</td>
<td>80</td>
</tr>
<tr>
<td>“playing doctor”</td>
<td>44, 100</td>
</tr>
<tr>
<td>playpens</td>
<td>139</td>
</tr>
<tr>
<td>poisoning</td>
<td>139</td>
</tr>
<tr>
<td>preventing</td>
<td>132, 133</td>
</tr>
<tr>
<td>vitamin A</td>
<td>53, 64</td>
</tr>
<tr>
<td>poison-proofing</td>
<td>132</td>
</tr>
<tr>
<td>poisons</td>
<td>132</td>
</tr>
<tr>
<td>poison warning symbols</td>
<td>132</td>
</tr>
<tr>
<td>ponds, safety around</td>
<td>144</td>
</tr>
<tr>
<td>pornography</td>
<td>148</td>
</tr>
<tr>
<td>positive communication</td>
<td>104</td>
</tr>
<tr>
<td>positive discipline</td>
<td>104–108</td>
</tr>
<tr>
<td>by age</td>
<td>108</td>
</tr>
<tr>
<td>postpartum depression</td>
<td>113, 114</td>
</tr>
<tr>
<td>potty</td>
<td>86, 87</td>
</tr>
<tr>
<td>praise</td>
<td>105</td>
</tr>
<tr>
<td>pregnancy, spacing</td>
<td>119</td>
</tr>
<tr>
<td>pressure gates</td>
<td>138</td>
</tr>
<tr>
<td>preterm birth</td>
<td>45</td>
</tr>
<tr>
<td>problem behaviour</td>
<td>105–107</td>
</tr>
<tr>
<td>protein sources</td>
<td>73</td>
</tr>
<tr>
<td>public health offices</td>
<td>100</td>
</tr>
<tr>
<td>punishment</td>
<td>104</td>
</tr>
<tr>
<td>routines</td>
<td>81</td>
</tr>
<tr>
<td>bedtime</td>
<td>118</td>
</tr>
<tr>
<td>changes in</td>
<td>118</td>
</tr>
<tr>
<td>daily</td>
<td>105</td>
</tr>
<tr>
<td>eating</td>
<td>71</td>
</tr>
<tr>
<td>hand washing</td>
<td>98</td>
</tr>
<tr>
<td>importance of safety</td>
<td>5, 6</td>
</tr>
<tr>
<td>mealtime</td>
<td>105</td>
</tr>
<tr>
<td>rules,</td>
<td>5</td>
</tr>
<tr>
<td>importance of</td>
<td></td>
</tr>
<tr>
<td>runny nose</td>
<td>74, 102</td>
</tr>
<tr>
<td>S</td>
<td></td>
</tr>
<tr>
<td>safety</td>
<td>149</td>
</tr>
<tr>
<td>animal</td>
<td></td>
</tr>
<tr>
<td>baby food, homemade</td>
<td>55</td>
</tr>
<tr>
<td>bathing</td>
<td>143</td>
</tr>
<tr>
<td>bathroom</td>
<td>133</td>
</tr>
<tr>
<td>bed</td>
<td>83–85</td>
</tr>
<tr>
<td>car</td>
<td>135–137</td>
</tr>
<tr>
<td>childproofing</td>
<td>78, 130</td>
</tr>
<tr>
<td>choking</td>
<td>70, 132</td>
</tr>
<tr>
<td>clothing</td>
<td>130</td>
</tr>
<tr>
<td>cold weather</td>
<td>80</td>
</tr>
<tr>
<td>cooking</td>
<td>55</td>
</tr>
<tr>
<td>crib</td>
<td>85</td>
</tr>
<tr>
<td>ear</td>
<td>95</td>
</tr>
<tr>
<td>equipment, general safety tips for</td>
<td>138</td>
</tr>
<tr>
<td>eye</td>
<td>93</td>
</tr>
<tr>
<td>fire</td>
<td>131</td>
</tr>
<tr>
<td>home</td>
<td>130</td>
</tr>
<tr>
<td>kitchen</td>
<td>55, 134</td>
</tr>
<tr>
<td>microwaving</td>
<td>55</td>
</tr>
<tr>
<td>outdoor</td>
<td>79, 80</td>
</tr>
<tr>
<td>park</td>
<td>80</td>
</tr>
<tr>
<td>playground</td>
<td>80</td>
</tr>
<tr>
<td>poisons</td>
<td>132, 133</td>
</tr>
<tr>
<td>sleep</td>
<td>84</td>
</tr>
<tr>
<td>soother</td>
<td>90</td>
</tr>
<tr>
<td>sun</td>
<td>79</td>
</tr>
<tr>
<td>tooth</td>
<td>90</td>
</tr>
<tr>
<td>U</td>
<td></td>
</tr>
<tr>
<td>-------------------------</td>
<td>---</td>
</tr>
<tr>
<td>unpasteurized cheese</td>
<td>68</td>
</tr>
<tr>
<td>unpasteurized juice</td>
<td>67</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>V</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>vaccinations</td>
<td>96–98</td>
</tr>
<tr>
<td>flu shots</td>
<td>97</td>
</tr>
<tr>
<td>reactions</td>
<td>97</td>
</tr>
<tr>
<td>schedule</td>
<td>96</td>
</tr>
<tr>
<td>vegan diet</td>
<td>53, 64, 73</td>
</tr>
<tr>
<td>vegetables</td>
<td>67</td>
</tr>
<tr>
<td>vegetarian diet</td>
<td>53, 64, 73</td>
</tr>
<tr>
<td>verbal abuse</td>
<td>147</td>
</tr>
<tr>
<td>video games</td>
<td>43</td>
</tr>
<tr>
<td>videos</td>
<td>43</td>
</tr>
<tr>
<td>violence</td>
<td></td>
</tr>
<tr>
<td>in the home</td>
<td>147, 148</td>
</tr>
<tr>
<td>on television</td>
<td>4, 43</td>
</tr>
<tr>
<td>vision</td>
<td>92, 93</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>W</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>vitamin A</td>
<td>53, 64</td>
</tr>
<tr>
<td>vitamin B12</td>
<td>73</td>
</tr>
<tr>
<td>vitamin D</td>
<td></td>
</tr>
<tr>
<td>daily requirement</td>
<td>64</td>
</tr>
<tr>
<td>food sources of</td>
<td>64, 66</td>
</tr>
<tr>
<td>goat's milk and</td>
<td>66–68</td>
</tr>
<tr>
<td>supplements</td>
<td>50, 52, 64, 66, 73</td>
</tr>
<tr>
<td>vitamin supplements</td>
<td>52, 64, 66</td>
</tr>
<tr>
<td>walkers, baby</td>
<td>140</td>
</tr>
<tr>
<td>water, drinking</td>
<td>66</td>
</tr>
<tr>
<td>water, safe temperature</td>
<td>131</td>
</tr>
<tr>
<td>water safety</td>
<td>129, 143, 144</td>
</tr>
<tr>
<td>weaning</td>
<td>53</td>
</tr>
<tr>
<td>weight</td>
<td>75–77</td>
</tr>
<tr>
<td>whining</td>
<td>111</td>
</tr>
<tr>
<td>winter protection</td>
<td>80–82</td>
</tr>
<tr>
<td>women's shelters</td>
<td>147</td>
</tr>
<tr>
<td>work, breastfeeding and</td>
<td>51</td>
</tr>
</tbody>
</table>
Your child will go through amazing changes between 6- to 36-months of age. Toddler’s First Steps (revised 2nd ed.) is packed with practical information on child development, nutrition, health and wellness, parenting and safety. This information will help you provide the environment and support that contribute to your toddler’s optimal growth and development.

This easy-to-read guide contains important information on more than 70 key topics.

You can access more information at:

**The Healthy Families BC Website**
This website is filled with up-to-date and practical information, useful tools and resources for women, expectant parents and families.

[www.healthyfamiliesbc.ca](http://www.healthyfamiliesbc.ca)

**HealthLink BC**
British Columbians have trusted health information at their fingertips with just a phone call or a click away with HealthLink BC. HealthLink BC gives you quick and easy access to non-emergency health information and services.

You can speak with a nurse about your symptoms, talk to a pharmacist about your medication questions, get information about physical activity from a qualified exercise professional or get healthy eating advice from a dietitian. You can also find the health services and resources you need that are close to you.

Dial 8-1-1 or visit [www.healthlinkbc.ca](http://www.healthlinkbc.ca)

For deaf and hearing-impaired assistance (TTY), call 7-1-1.

Translation services are available in over 130 languages on request.