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Introduction


In this edition, we provide you with updated information that’s based on current evidence and guided by the real-life experiences of parents and caregivers. In addition, we’ve revised the book to reflect the incredible diversity of families in British Columbia. This edition also contains new information about how to nurture a loving and healthy attachment between you and your child – a bond that will be a lifelong gift to you both.

Your child’s early experiences lay the foundation for a life of healthy development and well-being. As a parent, you have a beautiful and powerful role to play in giving your child the best start possible. This doesn’t mean that you have to be perfect – it’s your warm and loving presence that your child needs most.

The joys and challenges of parenthood are influenced by many things, including our childhood experiences, our families and our culture. At the same time, we each have the opportunity to create our very own parenting journey. We hope this book provides you with the resources that will help you to create the journey you envision for yourself and your family.

*Toddler’s First Steps: A Best Chance Guide to Parenting Your 6- to 36-Month-Old* is the second of 2 books on pregnancy and early childhood development available from the Government of British Columbia. The first book, *Baby’s Best Chance: Parents’ Handbook of Pregnancy and Baby Care*, covers pregnancy and the first 6 months of a child’s life. Both books are available through public health units and online at healthlinkbc.ca.

*Toddler’s First Steps* aligns with criteria for the Baby-Friendly Initiative. 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. Established criteria for designation of Baby-Friendly hospitals, maternity facilities and communities outlines evidence-based maternal child care and supports all families.

This book is updated every 2 years. If you have suggestions for the next edition, please email us at healthlinkbc@gov.bc.ca.
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- Tanisi, Boozhoo. Elicia Munro-Sutherland is an Anishinaabe-Nehiyaw mother of two and photographer from Treaty 6 territory. She is based in Saskatoon. Elicia's photograph in this book is from her Indigenous Motherhood & Breastfeeding Project, which seeks to increase and expand Indigenous representations within health care settings and promote the creation of safe and inclusive space for breastfeeding within public areas. eliciamunrophoto.com
- Rebekah Nathan is a documentary and birth photographer and doula from Aotearoa New Zealand, working in Vancouver, B.C. and the unceded territory of the Squamish, Musqueam and Tsleil-Waututh people. Rebekah's photograph in this book is from her Fertile Ground series, a project aiming to explore diverse representations of fertility, pregnancy, birth and making family. rebekahnathan.com

The Ministry of Health gratefully acknowledges the many people who have contributed to previous editions of Toddler’s First Steps. Their work has made this edition possible.
How to Use This Handbook

*User-friendly.* That’s the goal we had in mind in creating *Toddler’s First Steps.* So whether you prefer to read a book cover-to-cover or to flip through for specific information, you can find what you need quickly and easily.

*Toddler’s First Steps* is divided into 5 main sections:

Section 1, *Toddler Development,* provides information on typical milestones and how you can support your child’s development in all areas – from his brain and language skills to his physical, social and emotional growth.

Section 2, *Feeding Your Toddler,* covers your toddler’s nutritional needs, with comprehensive information on everything from breastfeeding to picky eating.

Section 3, *Your Toddler’s Growth, Learning and Health,* details everything from sleep to using the toilet, with a focus on keeping your toddler safe and healthy.

Section 4, *Parenting Your Toddler,* helps you navigate the ins-and-outs of discipline, challenging behaviours and, of course, staying calm through it all.

Section 5, *Toddler Safety,* offers important information and helpful tips on keeping your child safe at home, at play, in the car and in the community.

You might notice throughout the book that we sometimes refer to your toddler as *she,* other times as *he.* In almost every case, the same information applies to all toddlers, regardless of sex.

We’ve also included a number of additional pieces that can help you navigate the book:

**Looking for insight into a particular topic or information on a key word?**

Turn to the *Table of Contents* on pages 1-2, or the *Index* on page 129.

**Need information on the services and supports available to help you and your family thrive?**

See the *Resources* section on page 115.

**Not sure what a word or concept means?**

Check the *What is…? boxes* that appear throughout the book.

**Interested in information on healthy eating?**

See the recently revised *Canada’s food guide* on page 112.

**Want to speak with a health care professional in person?**

Phone *HealthLink BC,* an invaluable free service of the Government of British Columbia. Call 8-1-1 toll-free, or 7-1-1 for the deaf and hard of hearing. Services are available in 130 languages, 24 hours a day. Speak with a registered nurse (anytime), a pharmacist (nightly, from 5 pm to 9 am), or a registered dietitian or qualified exercise professional (9 am to 5 pm, Monday to Friday).
Want quick info at a glance? Look for the coloured boxes.

Throughout this guide, you’ll find boxes in a variety of colours. Look to these for essential bits of information that will help you navigate life as a new parent – everything from ways to support your child’s brain development to tried-and-true parenting advice from other moms and dads.

Our **What is…?** boxes explain key words and ideas in easy-to-understand terms.

Our **Try This** boxes suggest simple first steps you can take to help you get comfortable with each new aspect of parenting.

Our **Key Takeaway** boxes sum up the section’s not-to-be-missed information.

Our **Partners** boxes suggest ways your support team can get involved.

Our **Did You Know** boxes offer handy bits of insider information that can help build your understanding.

Our **Family Story** boxes give you a peek into the experiences of other parents.

Our **Money Sense** boxes share tips on how to save money on everything from child care to vision care.

Our **Brain Builder** boxes offer simple ideas on how to support your child’s brain development through everyday activities.

Our **Be Aware** boxes draw your attention to common things that may be unsafe for your child.

Our **Danger** boxes alert you to hazards that can pose a serious risk to your child.

Our **Medical Emergency** boxes help you recognize whether a situation calls for immediate medical help.

Our **Seek Care** boxes point out things that warrant a call to your health care provider or HealthLink BC.
Attachment

What is attachment?
The close relationship between you and your child that gives her a safe place from which to explore the world.

A healthy attachment is one of the key factors in raising a happy and confident child.

When your child is attached well, she feels secure. She can try new things, knowing she can always return to her safe place with you.

Attachment grows over time through day-to-day actions and routines. When you respond to your toddler in a loving and accepting way time after time, she learns that she can rely on you to support and protect her.

Building a strong attachment with your child means:

- **Providing comfort every time she's sick, hurt or upset** by reassuring, rocking or holding her.
- **Paying attention and responding to her.** Show her that she’s important to you by spending one-on-one time with her and doing things that interest her. See Brain Development to learn more about “serve and return” interactions.
- **Talking with her about events that may upset her.** Things like the birth of a new sibling or a friend moving away can cause nightmares and other distress. Even very negative experiences can be made easier by the presence of a positive and caring adult.
- **Preparing her for any time you’re apart.** Only leave your child in the care of someone you trust. Then set up a goodbye ritual (a kiss, some special words and a wave from the driveway, for instance) and leave with confidence. Provide her with things to do, a photo of you and a favourite blanket or toy. Let her know when you’ll return, and make sure to come back on time.
- **Building good memories** by telling her family stories, looking at photo albums together, keeping a collection of her crafts and artwork, writing a diary of her achievements and making videos of her special events.
- **Creating a sense of belonging** by honouring family and cultural traditions.
- **Following daily routines** so she knows what to expect. Try to keep mealtimes and bedtime predictable and make rules that are clear and consistent.
- **Showing her you trust her** by letting her explore while you watch over her. Let her go off a short way when she’s learning to crawl or walk, for example, but stay nearby so she can return to you.

A healthy attachment is key to raising a child who’s happy and confident. Attachment grows over time through consistent, responsive and loving interactions between you and your toddler.

**KEY TAKEAWAY**

A healthy attachment is key to raising a child who’s happy and confident. Attachment grows over time through consistent, responsive and loving interactions between you and your toddler.
Temperament

What is temperament?
Your child’s unique character that makes her “who she is.”

Your child’s temperament may be obvious right from birth or show up over time.

Temperament includes:
• her general mood
• how active she is
• how she reacts to new situations
• whether she’s easily distracted or can focus well

Your toddler’s temperament may be similar to yours or very different. Home environment and the people around her will have some effect, but temperament is mostly just a natural part of who she is.

DID YOU KNOW
Accepting your child’s temperament doesn’t mean letting her do whatever she wants. It means helping her develop in a way that’s comfortable for her.

FAMILY STORY
A nurse suggested I get down on the floor with my son and watch what he was doing while trying to imagine what he was thinking. I learned a lot about him from this simple act of quiet watching.
Support your child’s temperament by:

• **Understanding her.** By watching her in a variety of settings, you’ll learn a lot about her, including her likes and dislikes and how she feels most comfortable dealing with others.

• **Not labelling her.** A child who grows up hearing that she’s shy or that she talks too much, for example, will tend to believe it and live up to those expectations.

• **Being open and accepting of who she is,** rather than expecting her to be a certain way. Let her take the lead in uncovering her talents and preferences.

- **Finding ways to direct her temperament into positive activities** in a way that’s comfortable for her.

- **If she’s shy** in a playgroup, for example, try letting her sit with you and watching until she’s ready to join in.

- **If she’s full of energy,** try giving her ways to move around – like dancing, running in the yard or helping with chores. If she has to sit still, give her something to hold that she can play with.

- **If she’s easily frightened,** let her know you have confidence in her to overcome her fears, and work with her to do so. Check the closet with her for monsters, for example, or hold her on your lap around dogs.

- **If she’s sensitive** to noise, light or things that touch her skin, try turning down the TV, dimming the lights or cutting the tags out of her clothes. By removing these distractions, you’ll help her focus on other things.

- **If she doesn’t like new situations,** try breaking them down into simple steps. Say, for example, “This is how you sit on your bike. This is where your feet go.” instead of “Jump on and let’s ride.” And give plenty of warning before any change in routine.

**BRAIN BUILDER**

Instead of scolding your toddler, help her understand what’s happening and show empathy toward her feelings. Rather than “Stop throwing your toys and calm down!” try “It seems like you’re really upset. I’m sorry you feel that way. I get upset sometimes, too.” As she grows, help her put words to how she’s feeling and to handle big emotions in a healthy way: “Can you tell me what you’re feeling? Is there a way you could tell me you’re angry without throwing your toys?”
The experiences your child has as a toddler will affect his health, well-being and coping skills for the rest of his life.

Early Experiences Build the Brain
During the toddler years, your child’s brain is making millions of new connections every day as he learns about the world around him. The way you respond to him can help teach his brain to build and strengthen the connections that will help him feel safe, trust others, be confident and live a healthy life.

KEY TAKEAWAY
Early experiences play a big role in shaping your toddler’s brain. And while every child develops at their own pace, a healthy brain supports development in all areas.

How Can You Build Your Toddler’s Brain?
You can help build your toddler’s brain through what experts call “serve and return” interactions.

What are “serve and return” interactions?
Showing attention and responding with warmth, support and enthusiasm to what your child communicates. Imagine a tennis game between a caregiver and a child. But instead of hitting a ball back and forth across a net, they send and get different types of communication, such as touch, sounds, words, smiles and eye contact.

Serve and return interactions help build a solid foundation for your toddler’s brain – and support all future development. Serve and return interactions also build attachment (see Attachment) between you and your toddler.

On their own, these moments may feel short and unimportant. But a lot of serve and return interactions throughout the early years help build new paths in your child’s brain and encourage him to learn.

Each positive interaction is another brick in a healthy foundation for all of your toddler’s later development. Together, they set him up for success in everything from learning to read to dealing with stress to forming good relationships.
TRY THIS
Put aside your cell phone when you’re playing with your toddler so that you can focus on him.

How Does Stress Affect Your Toddler’s Brain?
Stress also shapes your toddler’s brain development – in both positive and negative ways.

Good stress vs. bad stress
Some stress can help your child develop, while other stress can seriously harm him.

What is good stress?
Stress that’s healthy for a child’s development. Experiences like meeting new people, for example, prepare kids to cope with future challenges.

What is tolerable stress?
Stress that – with the support of a loving adult – a child can cope with. Difficult experiences may be painful to a child, but with love and adult care, they don’t have to be harmful to his development.

What is toxic stress?
Stress that harms the development of a child’s brain and body and can cause lifelong challenges. Toxic stress is the effect of serious, ongoing hardship, abuse or neglect on a child who doesn’t have adult support.

The effect of toxic stress
When a child experiences toxic stress, the basic structures of his developing brain may be damaged. And without a sturdy foundation to support future development, he’s at risk for a lifetime of health problems, developmental issues and even addiction.

What you can do
It’s possible to fix some of the damage of childhood toxic stress later in life. But it’s easier and more effective to build solid brain structure in the early years.

If you’re living through very difficult circumstances, you can turn toxic stress into tolerable stress and lessen the impact on your toddler by being a safe and loving person for him to turn to. At the same time, find the support you need to help you cope with the challenges you’re facing (see Parenting Issues and Violence and Other Abuse in the Home).

If you or your partner experienced toxic stress when you were children, you may benefit from extra support as you adjust to being a parent. Try talking to your health care provider and asking about programs that may help.
During the toddler years, your child will grow in 5 important areas:

1. physical – how he uses his body
2. social – how he deals with others
3. emotional – how he deals with feelings
4. cognitive – how he thinks and reasons
5. language – how he communicates

How your child develops depends on many things, including his natural genetic makeup, the support he receives and the things he experiences.

Physical Development
Your toddler will improve his **gross motor skills** (controlling the large muscles he needs to sit, crawl, walk and run) and his **fine motor skills** (controlling his hands and fingers and getting the hand-eye coordination to reach for things and pick them up).

**BRAIN BUILDER**
You can help your child develop in all 5 areas with “serve and return” interactions. Pay attention to him and show an interest in what he’s interested in. By “returning” what he “serves,” you’ll encourage his curiosity and spark his enthusiasm for practising things like speech and social skills (see Brain Development).

**DID YOU KNOW**
When you cuddle your child, his brain releases hormones that he needs to grow.

**HOW TO Support your toddler’s physical development**
- Create safe, interesting activities, and places for him to explore and be active in.
- Use screen time in a healthy way. (See Screen Time)
- Hug and cuddle him.
- Provide healthy foods. (See Eating Well)

**DID YOU KNOW**
By continuing to breastfeed, you’ll support your child’s development in all 5 areas.

Social Development
Your toddler will learn to make friends and get along with others.

**HOW TO Support your toddler’s social development**
- Help him learn to cooperate, trust and be confident with others.
- Respond to his behaviour in warm and consistent ways. (See Positive Discipline)

**DID YOU KNOW**
By continuing to breastfeed, you’ll support your child’s development in all 5 areas.
**Emotional Development**
Your toddler will learn to recognize, show and manage his feelings.

**Cognitive Development**
Your toddler will learn to think, remember, imagine, gather and organize information, solve problems and use judgment.

**Language Development**
Your toddler will learn to listen and talk – and can learn multiple languages if you speak more than one at home.

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**HOW TO Support your toddler’s emotional development**
✔ Help him learn to recognize and name his emotions.
✔ Help him learn to show his feelings in a healthy way.
✔ Comfort him.

**HOW TO Support your toddler’s cognitive development**
✔ Set up safe and interesting play opportunities.
✔ Play with him.
✔ Praise him.
✔ Talk to him.

**HOW TO Support your toddler’s language development**
✔ Talk to him.
✔ Listen to him.
✔ Read to him. (See Reading to Your Toddler)
✔ Tell him stories.
✔ Sing with him.

**BRAIN BUILDER**
Talk to your child all the time. By asking him questions, chatting about what you’re doing, and sharing rhymes, songs and stories, you’ll stimulate his brain and help him learn to speak and read.
Most toddlers develop at about the same pace. Sometimes, though, a child will progress more quickly or more slowly than expected. If you’re concerned, see If You Have Concerns About Your Toddler’s Development and talk with your health care provider.

### Physical Development

<table>
<thead>
<tr>
<th>6 to 9 months</th>
<th>9 to 12 months</th>
<th>12 to 18 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>• sits steadily without help</td>
<td>• stands by pushing off from a squat</td>
<td>• walks on her own</td>
</tr>
<tr>
<td>• stands firmly when held</td>
<td>• stands by pushing off from a squat</td>
<td>• crawls or walks up stairs, putting both feet on one step while holding onto a railing or your hand</td>
</tr>
<tr>
<td>• bounces and shuffles around on her bottom</td>
<td>• walks while holding onto furniture or your hands</td>
<td>• climbs on things (like chairs) and out of things (like strollers)</td>
</tr>
<tr>
<td>• rakes at tiny objects with her hands; picks up larger objects with her fingers</td>
<td>• crawls well, including up stairs</td>
<td>• drinks from a cup</td>
</tr>
<tr>
<td>• grabs, shakes and bangs things together</td>
<td>• feeds herself small pieces of food</td>
<td>• turns the pages of a book</td>
</tr>
<tr>
<td>• chews or gums finely minced foods</td>
<td>• uses the tip of her index finger and thumb to pick up small things</td>
<td>• stacks 3 or more blocks</td>
</tr>
<tr>
<td>• puts one block on top of another</td>
<td>• puts one block on top of another</td>
<td>• scribbles with a big crayon</td>
</tr>
</tbody>
</table>

### TRY THIS

- **Make lots of time for crawling and tummy time.** Give her something to hold and shake. And get down on the floor and roll a ball to her.

- **Hold her hand or stand behind her as she climbs stairs.** Show her how to stack blocks. Let her use activity tables or other toys where she can press buttons and make noises. And offer her foods with different textures.

- **Give her balls to play with.** Play music and dance together. Let her stack and nest plastic bowls and match lids to pots. Offer her big crayons and paper. And help her solve simple, large-piece puzzles.
**Toddler Development** • Typical Child Development by Age

### Toddler’s First Steps

<table>
<thead>
<tr>
<th>18 to 24 months</th>
<th>24 to 30 months</th>
<th>30 to 36 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>• kicks a ball</td>
<td>• walks backwards and sideways</td>
<td>• walks a few steps on a narrow beam</td>
</tr>
<tr>
<td>• squats while playing</td>
<td>• walks up and down stairs alone, putting both feet on one step</td>
<td>• climbs a slide’s ladder</td>
</tr>
<tr>
<td>• backs into a chair to sit down</td>
<td>• jumps in place, lifting both feet off the floor</td>
<td>• pedals a tricycle</td>
</tr>
<tr>
<td>• rides a small-wheeled toy</td>
<td>• moves on a riding toy using both feet at the same time</td>
<td>• copies circles, dots, lines and swirls</td>
</tr>
<tr>
<td>• takes off her own shoes, hat and socks</td>
<td>• holds a crayon in her whole hand and scribbles</td>
<td>• cuts paper with small safety scissors</td>
</tr>
<tr>
<td>• lifts a cup and drinks, then puts it down</td>
<td>• moves on a riding toy using both feet at the same time</td>
<td>• turns handles and doorknobs</td>
</tr>
</tbody>
</table>

**KEY TAKEAWAY**

Encourage your toddler’s physical development at every stage by:

- ✔ being active together
- ✔ spending lots of time playing outdoors and at playgrounds
- ✔ helping her practise walking
- ✔ cheering her on when she tries something new
- ✔ limiting screen time (see Screen Time)

**FAMILY STORY**

When our daughter was just starting to move around, I would lay on the floor with a toy just out of her reach. She would work hard to get to me. It kept her busy and active, and was a nice way for me to relax at the end of the day.

**TRY THIS**

Offer her shape-sorting activities and finger paints. Play with plastic containers in the bath. Run and kick balls together. Let her try a ride-on toy. And encourage her to dress and undress on her own.

**TRY THIS**

PLAY movement games where you stop and go, change directions and move fast and slow. Let her dress herself, helping with buttons and zippers only when needed. Give her markers, crayons and puzzles to play with. And let her help with simple kitchen tasks.

**TRY THIS**

Play tag and follow the leader. Roll down hills together. Pretend you’re animals. Let her turn the pages while you read to her. And offer her dress-up clothes with snaps, buttons and zippers.

**BRAIN BUILDER**

Tell her what she’s doing as she’s doing it (“You’re climbing the stairs!” “You’re drawing with a crayon!”)

**DID YOU KNOW**

Between ages 2 and 3, some toddlers will learn to walk up and down stairs, one foot after the other, while holding the handrail.
Social Development

6 to 9 months
- plays social games like peekaboo and patty cake
- wants to do things with others
- points to things for a reason
- tries to get attention
- watches others
- notices when people enter a room

9 to 12 months
- knows when you like or dislike his behaviour
- holds out his arms and legs while being dressed
- copies simple actions and other children
- repeats sounds or movements that make you laugh
- takes turns with you in simple games
- notices what others are looking at
- follows where you point, then looks back to you

12 to 18 months
- likes to be the centre of attention
- starts to show a sense of humour
- plays best by himself and doesn’t share toys
- copies adult activities, like reading and talking on the phone
- separates himself from you for brief periods
- calls for you

TRY THIS
Play seeking games (“Where’s Michael?”) to teach your toddler he’s not part of you. Invite others to join you as you play, or take part in a playgroup. Let him approach new people at his own pace.

TRY THIS
Talk to your toddler about what activities will happen next in the day.

TRY THIS
Make up a goodbye routine (a big kiss, a wave and some special words, for example). Offer him choices, like whether to put on his coat or his shoes first. And let him help with simple chores.

KEY TAKEAWAY
Encourage your toddler’s social development at every stage by:
✔ responding when he wants help or attention
✔ keeping to routines
✔ eating together at the family table
✔ using “please” and “thank you” to model good manners
✔ letting him be around people and play with other children
**Toddler’s First Steps**

**18 to 24 months**
- Likes playing alone for short periods
- Is better at playing beside, rather than with, other children
- Says “no” and “mine” often and has trouble sharing
- Likes to do things without help

**24 to 30 months**
- Has trouble sharing
- Knows the difference between boys and girls
- Likes to do more for himself
- Likes being near other children in parallel play

**30 to 36 months**
- Hugs, kisses and shows affection
- Uses social language like “thank you” and “bye-bye”
- Plays with others and takes turns more easily
- Plays make-believe games and creates imaginary characters

**TRY THIS**

**Let him know what to expect in new situations.** Talk to him about family and friends. Point out what other children are doing, and introduce him to a playmate.

**DID YOU KNOW**

It’s common for toddlers to be afraid of new people and act shy around strangers.

**What is parallel play?**
Playing beside or near other children.

**What is cooperative play?**
Playing with other children.

Most children prefer parallel play until they’re 30 to 36 months old.

**TRY THIS**

Give him chances to play one-on-one with another child. Let him do some things without help. Use his toys to model sharing (“Look! Dolly’s sharing her blocks with Teddy.”) Spend quiet time together reading, telling stories and cuddling. And give him lots of praise for positive behaviour.

**TRY THIS**

Give your toddler lots of affection and encouragement. Join him in imaginary play. Introduce him to neighbours and let him play with other children, but stay nearby to supervise and help him solve problems.

**DID YOU KNOW**

Around age 3, some toddlers will create an imaginary friend.
**Emotional Development**

6 to 9 months
- shows strong likes and dislikes
- laughs
- wants to stay with you or other trusted adults
- shows when she’s scared

**TRY THIS**
Smile at your toddler, make lots of eye contact and practise other serve and return interactions (see Brain Development).

**DID YOU KNOW**
It’s common for young toddlers to be scared by vacuum cleaners, banging and other loud noises.

9 to 12 months
- shows many emotions
- is upset when she does something wrong
- wants comfort when she’s upset
- needs to be within sight and hearing of a caregiver
- shows affection with hugs, kisses, pats and smiles

**TRY THIS**
Offer her simple choices, like which cup to use. And ask her for lots of hugs and kisses.

12 to 18 months
- likes familiar places
- takes risks if a trusted adult is present
- recognizes herself in mirrors and photos
- hugs and kisses you and other very familiar people
- likes being the centre of attention

**TRY THIS**
Let her play on her own. Talk about any upcoming changes to her routine. And find ways to help her feel successful.

**BRAIN BUILDER**
Starting when your toddler is about 9 months old, focus on helping her understand and deal with her emotions. Talk to her about how she feels (“I see you’re feeling sad”). Tell her how you’re feeling, too, (“I’m frustrated”) and about how you handle your emotions in a healthy way (“I’m going to take some deep breaths”).

**FAMILY STORY**
Whenever one of us left for the day, we had a special routine. We would all hug and say, “Let’s kiss Daddy,” “Let’s kiss Mommy,” and then, “Let’s kiss Taylor.” It was fun, took just a minute and made leaving easier for everyone.

**HOW TO**
Use praise to build your child’s self-esteem
- Save praise for things that take effort, rather than praising every small act.
- Be specific: “You did a great job cleaning up your toys,” for example.
- Offer encouragement and empathy when she’s struggling with something new: “I can see you’re trying hard to zip up your jacket. It can be tricky, but if you keep trying I know you’ll get it. If you need a break, though, I can help this time.”
<table>
<thead>
<tr>
<th>Age Range</th>
<th>Toddler's First Steps</th>
</tr>
</thead>
</table>
| 18 to 24 months | • shows concern for others  
• shows fear, but can be settled down  
• sometimes wants to do things on her own, sometimes wants help  
• is watchful around new adults  |
| 24 to 30 months | • wants to get her own way  
• likes routines  
• acts out emotions through play – roaring like an angry lion, for example  
• has strong feelings but trouble expressing them  |
| 30 to 36 months | • gets upset by big changes to routines  
• responds to other people's feelings  
• is more comfortable with new people  
• wants to do things for herself, but may fear new things  
• wants approval and needs praise  |

**TRY THIS**
Talk to her about how others feel and how her actions affect them (“I think John feels sad because you took away his toy.”) And offer her choices to help her cope with her own feelings (“You're feeling sad. Do you want to cuddle or be alone?”).

**TRY THIS**
Encourage her to show and talk about her emotions. Make transitions easier by letting her know what to expect (“In 5 minutes it will be time to pick up your sister from school”).

**TRY THIS**
Sing songs and read stories about emotions. Talk about how the characters are feeling and why.

**DID YOU KNOW**
Many toddlers like to have a security blanket or toy.

**DID YOU KNOW**
Your toddler may suddenly be frightened by situations that she was fine with before.

**KEY TAKEAWAY**
Encourage your toddler’s emotional development at every stage by:

- ✔ creating lots of structure and routines  
- ✔ holding, cuddling and comforting her – especially when she's upset, sick or hurt  
- ✔ practising “serve and return” interactions (see Brain Development)  
- ✔ using positive discipline (see Positive Discipline)
## Cognitive Development

**6 to 9 months**
- notices the size of objects
- knows if things are near or far
- searches briefly for an object that’s been taken away
- understands how things can be used – shakes a noisemaker or pushes a button, for example

**9 to 12 months**
- connects animals with the sounds they make
- has a better memory
- sees you as separate from himself, and points when asked, “Who’s Mommy?”
- recognizes his own name
- starts to understand cause and effect, like that things fall when dropped
- matches shapes, like putting a cube in a square hole

**12 to 18 months**
- realizes things still exist even when he can’t see them
- finds things in pictures
- learns by touching and moving things – fitting things into holes, for example
- expects events to follow routines
- follows simple directions, like “show me the ball”

### TRY THIS
**Play copying games, like clapping or sticking your tongue out at each other.** Hide things from him briefly, then reveal them. And play in-and-out games, like putting blocks in a container and taking them out again.

### TRY THIS
**Take turns doing things, like blowing kisses.** Ask him to help you find lost objects. And talk about cause and effect (“You dropped Teddy, so now he’s on the floor”).

### BRAIN BUILDER
It’s healthy for your toddler to feel a little bit of frustration when he’s trying to do something. By not rushing in to help, you’re teaching him problem-solving skills.

### FAMILY STORY
Whenever my friend, a teacher, would come over, she would pull things from her pockets to show our 10-month-old and say the names of them carefully. He would often try to copy her. It was a good example of what I needed to be doing every day.
Encourage your toddler’s cognitive development at every stage by:

- offering him a variety of toys, puzzles and art supplies
- reading with him and talking about the pictures (see Reading to Your Toddler)
- dancing and singing together
- counting together
- talking about the shapes and colours of things
- giving him plenty of praise as he learns new skills

See the Brain Builder boxes throughout this guide for ideas on boosting your toddler’s cognitive development.
Language Development

6 to 9 months
- says several sounds (“ma mu da di ba”) in one breath
- babbles and repeats sounds (“da da da”)
- responds to some words, like “Mommy” or “ball”
- turns to listen to familiar sounds, like a ringing phone
- looks when you say her name
- shakes her head to say “no”

9 to 12 months
- babbles in longer strings of sounds like “bababa” or “badagee”
- responds to simple instructions that include familiar words
- takes turns making sounds with you
- copies speech sounds

12 to 18 months
- says 5 or more words
- understands many more words than she can say – points, for example, when asked where her belly button is
- uses “no” correctly, often with a shake of her head
- tries to sing songs
- makes animal sounds and other sound effects
- uses gestures like clapping her hands, blowing a kiss or giving a “high 5”
- puts her finger to her lips to say “shhh”

TRY THIS
- Use simple sentences to talk about what you’re doing (“We’re looking at the dog”).

TRY THIS
- If you speak more than one language, use both from the start. One parent or caregiver can use one language while the other uses another. Read to your child in both languages, too.

TRY THIS
- Read to your toddler every day (see Reading to Your Toddler).

TRY THIS
- Read to your toddler using different voices and lots of expression. Sing to her. Give her books to look at and encourage her to point out things in pictures. And keep a diary of the words she says.

DID YOU KNOW
- Many toddlers leave out words like “the” and “in” and endings like “-ing” and “-s” when they’re learning to speak English.

DID YOU KNOW
- You don’t need to try to teach your toddler to read and write. By reading, talking and singing to her, you’ll build the language skills that form the basis of her later literacy.
**Toddler Development • Typical Child Development by Age**

**Toddler’s First Steps**

- uses 2- or 3-word sentences
- understands about 200 words
- says (clearly or not) about 50 words
- talks to herself or her stuffed animals
- names pictures in books
- copies new words and phrases
- asks “what” and “where” questions

### 18 to 24 months

- uses personal pronouns like “I,” “me,” and “you”
- says her name, based on what she hears herself being called
- answers simple questions like “What’s your name?”
- likes looking at books and talking about the pictures
- sings parts of songs
- asks lots of questions

### 24 to 30 months

- can often be understood
- asks lots of questions
- tells stories and sings
- may repeat 5-word sentences
- uses social words like “please,” “thank you” and “hello”
- names most body parts

### 30 to 36 months

- uses 2- or 3-word sentences
- understands about 200 words
- says (clearly or not) about 50 words
- talks to herself or her stuffed animals
- names pictures in books
- copies new words and phrases
- asks “what” and “where” questions

**TRY THIS**

Listen to her carefully and ask simple questions about what she’s saying. And take her to the library.

**FAMILY STORY**

I talked to my daughter about anything and everything we were doing. When crossing the street, for example, I’d say, “Is it safe to cross? Let’s look for cars. There are no cars. It’s safe. Let’s go.” All that talking really helped her learn words, and I wasn’t surprised when she spoke at an early age.

**TRY THIS**

Repeat what she says to show her you’re interested. And look at family pictures together, describing them in simple sentences.

**TRY THIS**

Ask about things she’s interested in. Use open-ended questions like “What did you see on your walk?” or “What do you think?” Sing number songs, too, and make up silly rhymes together.

**KEY TAKEAWAY**

Encourage your toddler’s language development at every stage by:

- talking to her about everything from what you’re doing (“Let’s wash these cups”) to what she sees (“What a fluffy cat!”)
- responding to her babbling with your own words, as though you’re having a conversation
- pointing out the names of things around you
- reading to her every day
- building on what she says (If she says “ball,” you can say, “Yes, that’s a red ball.”)
- using nursery rhymes to help her learn language patterns
- singing while doing daily tasks, like changing her diaper
Think about your own values and beliefs and what you want to communicate to your child about sexuality. Consider:

✔ using medical or scientific terms for all body parts, from nose to vagina
✔ remembering that curiosity about the body is normal
✔ thinking ahead about how you’ll answer your toddler’s questions, so you’re less anxious when they come up
✔ talking about the difference between what’s okay in public and what’s meant for private

KEY TAKEAWAY
The way you touch, care for and talk about your toddler’s body sends important messages.

Try This
Let your child decide who he wants to hug and kiss. This teaches him that he has control over his body.

Sexual Development by Age
From birth to 24 months, your toddler may:
• enjoy being naked
• like to touch parts of their body, including genitals
• get erections or vaginal lubrication as a natural reflex

From 24 to 36 months, your toddler may:
• touch their genitals or masturbate
• notice differences between boys and girls
• explore bodies (“play doctor”) with a same-age playmate
• be interested in body functions

DANGER
Although there can be many reasons for changes in your child’s behaviour, some changes may signal abuse. Talk with your health care provider if your child:
• develops a strong, constant focus on their own and others’ genitals
• doesn’t follow your rules around respecting and not touching others’ private areas
• has discharge, swelling or bruising in the genital area

Masturbating and Exploring With Other Children

DID YOU KNOW
It’s as normal for your toddler to touch their genitals as it is to explore their toes or fingers.

Toddlers are naturally curious about their bodies. And once they begin to explore, they quickly learn that touching their genitals feels good.

If your toddler is touching themself in public, remind them that genitals are personal areas, best explored in private spaces like their own bedroom. Offer a toy or other distraction.

If they’re exploring genitals with another child of similar age, calmly tell them their genitals are private and shouldn’t be touched or looked at by other people unless they have given them permission. Re-direct them to another activity, and ask them if they have questions.

If they’re exploring genitals with an older child, calmly talk with your child about what happened. Tell your child they haven’t done anything wrong but remind them that no one should touch or look at your child’s genitals without their permission. Talk with your health care provider if you have concerns.
Children usually begin to show interest in their gender early in life. At 2 to 3 years old, they see the differences between male and female bodies. Most children will call themselves either a “boy” or a “girl.” This may or may not match the sex they were assigned at birth, and it may change over time.

**KEY TAKEAWAY**
Most children will identify with the sex they were assigned at birth. Others may realize that their gender identity doesn’t match their assigned sex. Some children may switch between calling themselves a “boy” and a “girl,” or avoid being labelled at all. All children may express their identity in creative ways.

This exploration of gender identity is a normal and healthy part of every child’s development. And all children do best when they know they’re loved and accepted for who they are.

**DID YOU KNOW**
You can’t tell a child’s gender identity from their choice of toys or clothes. How a child expresses themself (gender expression) does not necessarily signal who they know themself to be (gender identity).

**What is assigned sex?**
The sex assigned to a baby at birth. When a newborn has a penis, the assigned sex is “male.” When a newborn has a vulva, the assigned sex is “female.” In rare cases, a child is born with external sex organs that are not clearly male or female.

**What is gender identity?**
Who a person knows themself to be. A child may identify as a boy or girl – or they may not identify as either.

**What is gender expression?**
How a person expresses themself to others. This can include how they act, what they wear, how they do their hair, and the name they choose to go by. Gender expression is not necessarily the same as gender identity. A boy may like to dress up in dresses, for example, but not identify as female.

**What is transgender (trans)?**
A person whose gender identity doesn’t match the sex they were assigned at birth.

**What is Two-Spirit?**
A term used by many Indigenous people who have diverse genders and sexualities. Two-Spirit people were historically revered in most nations, and may have different roles, gifts, language and appearances depending on the nation they’re from. Two-Spirit identity is very closely connected to Indigenous culture and spirituality, and this term can’t be personally used by someone who is non-Indigenous.

**HOW TO**
Support healthy gender development in your child

✔ Love your child and be proud of them for who they are. Don’t pressure them to change.

✔ Talk with your child about gender and read books with them that show the many different ways to be a boy, a girl, or someone who doesn’t identify as either boy or girl.

✔ Allow your child to wear the clothes and play with the toys they like.

✔ Show your child that people of all genders exist and live happy lives.

✔ Watch out for any bullying your child may face.
Finding Support

Many parents have a hard time accepting that their child’s gender identity may be different than their assigned sex. At the same time, a child who’s worried about their gender may be depressed, anxious or have trouble concentrating. Transgender children may be especially uncomfortable with their assigned sex at the start of puberty, when their bodies begin to change.

For support in parenting your transgender or gender-creative child, contact:

Trans Care BC at 1-866-999-1514 or phsa.ca/transcarebc

Pflag Canada at pflagcanada.ca

Support is also available through:

• mental health professionals who specialize in the care of transgender and gender-creative children (gendercreativekids.ca/providers)
• your family doctor or pediatrician
• Indigenous LGBTQ2S+ and Two-Spirit elders or leaders
• other parents of transgender and gender-creative children

DID YOU KNOW

There is nothing physically or psychologically wrong with your child if their gender identity doesn’t match the sex they were assigned at birth.
Between 12 and 36 months, your toddler will learn that she can control herself, her body and, sometimes, those around her. This is a healthy and important step in her development.

She’ll want to learn new skills, make choices and do things by herself. And she’ll show more willpower to do things “her way” rather than yours.

**What is independence?**
Your child’s growing ability to do things for herself.

**DID YOU KNOW**
It’s okay for your toddler to feel frustration. Letting her feel frustrated while she works on simple tasks is part of how she learns to problem solve.

**HOW TO**
Help your toddler become independent

✔ Let her do what she can on her own, from dressing to washing.
✔ Let her make simple choices, like choosing which cup to drink from.
✔ Encourage her to do things by herself, even if she needs extra time.
✔ Encourage new activities that she’ll likely do well.
✔ Give her time to repeat a skill as she’s learning, like letting her master stacking 2 blocks before giving her a third.
✔ Be positive about her efforts, whether or not she’s successful.
What is empathy?
Your child’s growing ability to understand and care about how others feel.

Learning to feel and show empathy is an important part of your toddler’s development into a responsible and caring person.

Your toddler can learn empathy by watching you. Try:
✔ responding to his needs and the needs of others in a caring and fair way
✔ helping him name his feelings and understand why they’re happening, and talking about what to do about them
✔ helping him understand how his actions can affect people in positive or negative ways
✔ using positive discipline to help him grow and develop (see Positive Discipline)
✔ showing him how to share and be kind
✔ showing him to apologize when it’s appropriate

BRAIN BUILDER
Point out when your child has done something kind (“Look how happy you made Jessica by sharing your toy”) or not so kind (“When you hit your sister, it made her sad”). By helping him understand how his actions affect others, you’re building his social and emotional skills.
Play is a key way that your toddler develops and learns about the world around her.

What Does Play Teach Your Child?
Play helps your child grow in all 5 major areas of development. It builds:

- **physical skills** like crawling, climbing, walking, running, using her fingers, seeing and hearing
- **social skills** like cooperating, sharing, being polite and leading and following others
- **emotional skills** like identifying and dealing with feelings
- **cognitive skills** like problem solving, using her imagination, figuring out how things work, and learning shapes, colours and numbers
- **language skills** like learning the names for things, forming sentences, telling stories and listening

**Play by Age**

**6 to 12 months: Explorer**
Your toddler may:
- grab at things
- search for things you hide
- enjoy dumping, stacking and pouring things

Try giving her:
- balls
- sturdy toys on wheels
- blocks
- nesting toys
- rattles
- bowls of different sizes

**12 to 24 months: Mover and Shaker**
Your toddler may:
- be able to handle smaller toys
- show her personality through play (active or quiet? focused or multi-tasker?)
- take part in “parallel play” (playing beside another child but not with them)

Try giving her:
- balls to chase and, later, to kick and throw
- pop-up toys
- sit-and-ride toys

**24 to 36 months: Dreamer and Connector**
Your toddler may:
- play with another child
- enjoy imaginary play

Try giving her:
- dress-up clothes and props

**DID YOU KNOW**
Outdoor play helps your child develop in all areas. She’ll use her imagination, learn to play with others, and build her confidence by trying new things, like going down a big slide for the first time.

**KEY TAKEAWAY**
Play is a big part of how your child learns about herself, others, and the world around her. Giving your toddler lots of time to play is good for her development. And it’s also a wonderful chance for you to show interest in the things that she likes to do.
HOW TO
Encourage your toddler to play
✔ Provide a variety of toys suited to her age.
✔ Offer her choices and let her decide what she plays.
✔ Set aside time to play with her each day.
✔ Encourage both active and quiet activities.
✔ Give her praise and proudly show her work.
✔ Take a break when she seems tired, hungry, uninterested or over-stimulated.
✔ Give her lots of free, unscheduled playtime for her to be creative and see where her imagination leads her.

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BRAIN BUILDER
Expand your child’s imaginary play by showing an interest, asking questions and playing along.

DID YOU KNOW
Many toddlers aren’t ready to play with other children until they’re 3 years or older.

TRY THIS
When time is short, sing or play word or guessing games while you’re doing other things.

TRY THIS
If your toddler is in child care, spend some time observing her there to see if you can pick up ideas for play at home.

5 ideas for playing together
1. Pretend to be animals.
2. Show her how to do something you enjoy, like puzzles or dancing.
3. Go outside to crawl over logs, look at bugs or pick stones.
4. Wash the dishes or tear the lettuce together.
5. Get out some paper, paint and glue and be creative.
The best toys encourage your toddler to learn, explore and use his imagination. They don't have to be fancy or expensive.

**Household items**
- plastic bowls for filling and dumping
- pillows for climbing and making caves
- old clothes for dress-up
- the bath for supervised water play

**Classics**
- blocks
- dump trucks
- stuffed animals
- play food
- garages and farms
- books

**Nature’s toys**
- dirt and sand
- water
- stones

**Safer Toys**
Reduce overall injuries by:
- ensuring toys are well-made and fit your child's age
- not using toys with broken, sharp or loose pieces
- ensuring your toy box lid can't trap your toddler inside or slam down on him
- making sure paint is non-toxic and not peeling
- reading the safety information on toy labels
- avoiding toys with small batteries and making sure your toddler doesn't take out any batteries

**TRY THIS**
See if the toy fits through a toilet paper roll. If it does, it's too small.

Reduce strangling hazards by:
- not using toys with strings, cords or ribbons more than 15 cm (6 inches) long
- being careful with things like pull toys and skipping ropes

Reduce suffocation hazards by:
- making sure that any toy that your toddler can climb into has a way out and air holes
- taking away all packaging from new toys

**BE AWARE**
Almost half of toy-related deaths are caused by choking.

Reduce choking hazards by:
- avoiding any toy that fits in your toddler’s mouth
- making sure all toys are at least 3½ cm (1½ inches) wide and 6 cm (2½ inches) long
- not letting your child play with things that can break into pieces, like styrofoam and egg cartons
- not letting him suck or chew on balloons

**TRY THIS**
When you put a toy out, put another away. Your toddler may be overwhelmed if he has too many to choose from. And rotating toys can be just as exciting as getting something new.

**DID YOU KNOW**
If you have to shout to be heard above a toy, it's too noisy and can damage your child's hearing.

**FAMILY STORY**
We worried about how to keep our toddler away from her 7-year-old brother’s small toys. He decided to play with them in his own room. We put a gate on the door so his sister wouldn’t feel shut out.
Toddler Development • Screen Time

Less is Better

The Canadian Paediatric Society recommends no screen time for children under the age of 2, and a maximum of 1 hour a day for older toddlers. Overall, the less screen time, the better.

Why?
- Screen time cuts into quality time for you and your toddler.
- It takes time away from active play and social time that can help your child develop and bond with others.
- Screens over-stimulate your toddler with too much colour, movement and sound.
- Although some types of content are better than others, most screen time teaches your toddler little or nothing. (See Safer Screens)
- Screens display ads showing unhealthy foods, violence and stereotypes.

What is screen time?
Time spent in front of a computer, smartphone, tablet, television or gaming device.

DID YOU KNOW
Toddlers who have too much screen time are more likely to act out, have trouble sleeping, be less ready to start school, and be an unhealthy weight.

Safer Screens
You may not be able to eliminate screens completely. After all, sometimes handing over your phone or turning on the TV may seem like the only way to get a few minutes to start dinner or gather your thoughts. But you can make screen time as healthy as possible by:

✔ thinking about when and why screens are in use, and not using them out of habit, for entertainment, or for background noise

✔ choosing TV shows for children that have familiar characters, use songs and repetition to teach, and encourage participation

✔ being nearby whenever your child uses screens or – better yet – watching together and talking about what you’re seeing

✔ making screen time positive time. Skyping with out-of-town relatives, for example, can actually benefit your child.

TRY THIS
Make a family screen time plan that you all agree to. Include:

- daily time limits for kids and parents
- no screens during mealtimes
- no screens in kids’ bedrooms
- no TV on as background noise

Ensure your child care providers know the rules, too.
Reading to your toddler helps him learn new words, build his imagination and develop listening, math and his own reading skills.

Try:
✓ reading to your child each day, from birth on
✓ making reading a part of your bedtime routine
✓ letting your child turn the pages, if he can
✓ keeping a book in your bag to pull out on the bus or in the grocery store line
✓ visiting the library together for story time and to pick out books to bring home
✓ leaving board books around for him to flip through
✓ re-reading favourite books often

DID YOU KNOW
You don't need to read every word. If your child has a favourite page or a favourite picture, let him linger on it or even turn directly there.

BRAIN BUILDER
• Run your finger along the words as you read them.
• Choose books with rhymes and repetition.
• Use different voices for characters.
• Point to the objects in picture books and name them, or ask your toddler to name them. For animals, ask him what sound they make.
• Talk about how the things in the book connect to your child’s world. If there’s a dog in the story, for example, talk about a neighbour’s pet.
What You Can Do

If you have concerns:

1. **Talk with your health care provider.**
2. **Find extra support** through your public health nurse, parent-and-child groups or a child care program.
3. **Call HealthLink BC at 8-1-1.**
4. **Ensure your concerns are followed up.** Follow-up might include watching your toddler play, completing a child development screening questionnaire or referring you to another child development or health professional. Your health care provider or child care provider may refer you to one of the Ministry of Children and Family Development’s support programs.

**KEY TAKEAWAY**
All children develop at their own pace, but most reach milestones by a set time. If you have concerns, help is available.

**DID YOU KNOW**
If your toddler was born early (preterm) or had serious health problems at birth, she may develop at a slower pace. Your health care provider can help you support her development.
Eating well is key to your toddler's healthy growth and development. Children who eat well from an early age have the best chance of becoming healthy eaters for life.

You can encourage healthy eating by:
- breastfeeding or giving your child expressed milk for 2 years or longer
- introducing solid foods at about 6 months
- working towards offering 3 meals and 2 or 3 snacks at regular times each day
- providing a variety of nutritious foods
- watching for your toddler's cues to see when she's hungry or full
- creating a calm eating environment
- eating together as a family
- offering attention, affection and playtime – not food or drink – as comfort
- modelling healthy eating habits

**Mealtime Roles**

You and your toddler each have a role to play in healthy eating.

Your role is to:
- ✔ offer a variety of healthy foods
- ✔ offer meals and snacks at regular times each day
- ✔ respond to your toddler’s hunger and fullness cues

Your toddler’s role is to:
- ✔ choose whether to eat
- ✔ choose what to eat from what she's offered
- ✔ choose how much to eat

**Hunger and Fullness Cues**

**What are hunger and fullness cues?**

Signs your young toddler gives you when she knows she's hungry or full.

She's hungry if, when food is offered, she:
- opens her mouth
- leans forward excitedly, kicks her feet or waves her hands

She's full if, when food is offered, she:
- pushes it away
- closes her mouth
- turns her head away

**When Your Toddler Says No to Food**

If your older toddler won’t eat, let her leave the table. She may not be hungry, or she may be tired, excited or sick. Wait until the next regular meal or snack time to offer anything more. And resist the urge to use desserts or other treats as bribes for finishing food.

**Did You Know**

By doing your job with feeding and trusting your toddler to do her job with eating, you’ll have less conflict around mealtime.

If your toddler is often not hungry at mealtimes, she may be filling up on drinks. More than 3 cups (750 ml) of cow’s milk per day leaves little room for food.

**BRAIN BUILDER**

By sitting down to eat together, you’ll build your toddler’s language and social skills while encouraging healthy eating habits.
Human milk is an important part of your growing toddler’s diet, even after he’s started solid foods. Breastfeeding also offers comfort and builds attachment, which helps your toddler grow into a more confident child.

It’s Important for Your Toddler

Human milk:
✔ is a natural and nutritious food for your toddler
✔ is all the food your child needs for the first 6 months, and continues to be important for 2 years or more
✔ supports your toddler’s immune system
✔ protects your toddler from some infections
✔ supports your toddler’s healthy growth

It’s Important for You

Breastfeeding:
✔ may lower your risk of diseases like breast and ovarian cancers
✔ is free and convenient
✔ helps you bond with your toddler

Can I Breastfeed my Toddler if…?

…I return to work
Yes. Try breastfeeding before you leave for work and when you return home. Or express your milk at work, store it, and have your caregiver give it to your toddler the next day.

…I take prescribed medication
Most medications are safe to take while breastfeeding, but talk with your doctor, public health nurse or pharmacist, or call HealthLink BC at 8-1-1 to be sure.

…I we’re in public
Yes. Under the Human Rights Code, you have the right to breastfeed anywhere, at anytime.

…I’m pregnant
Yes. Talk with your health care provider to help ensure you’re getting enough nutrition for your unborn child, your breastfeeding toddler and yourself. Take a prenatal supplement. And don’t worry if your milk looks a bit different and your supply decreases around your fourth or fifth month. This is due to the normal hormonal changes of pregnancy.

…I breastfeed my new baby
Yes. If you want to, you can “tandem nurse” – breastfeed a new baby and an older child at the same time. This can be a good way to connect with both children. In the first few days after giving birth, make feeding your newborn the priority to make sure she gets all the nutrition and antibodies in your colostrum. After that, continue to watch your newborn’s weight to ensure she’s getting enough to eat.

…I my child bites or is teething
Yes. If your toddler bites, remove him from your breast and firmly tell him that biting hurts you. Then try again. You may have to repeat this message a few times before the biting stops. Biting may mean that he’s teething (see Looking After Your Toddler’s Teeth), ill or finished feeding. He can’t bite if he’s properly latched and sucking, so remove him from the breast as soon as he’s done.

…I smoke
Breastfeeding is recommended, even if you smoke. In fact, human milk can lower some of the risks that smoking poses to your toddler.

If you smoke, though, you expose your child to second-hand smoke and to the nicotine and other substances that pass through your milk. Smoking can also reduce the amount of milk you produce and lead to earlier weaning. Quitting or cutting down is healthy for you and your baby. If you can’t quit, reduce your baby’s exposure by breastfeeding before you smoke, keeping your car and home smoke-free, and washing your hands after smoking. For information on how to quit or reduce the amount you smoke, visit quitnow.ca.

…I drink alcohol
The safest choice is not to drink alcohol while breastfeeding. Alcohol may decrease the amount of milk you produce and affect your

DID YOU KNOW

Toddlers that are breastfed or breastfed and given infant formula need a liquid vitamin D supplement of 400 IU every day. Talk with your health care provider or call HealthLink BC at 8-1-1 if you have questions.
DID YOU KNOW

Pumping or expressing your milk doesn’t speed up how fast alcohol leaves your body. Only time will get rid of alcohol from human milk. Any milk that you pump or express while drinking or in the 2 to 3 hours following drinking – or longer if you’ve had more than 1 drink – should be thrown away.

...I use cannabis (marijuana)
Cannabis use isn’t advised if you breastfeed. The THC in cannabis stays in your breastmilk for up to 30 days and can be passed on to your toddler. And because the THC remains for so long, expressing and destroying your milk (“pumping and dumping”) doesn’t work to make it safe for your child, either. It’s not yet known whether CBD is transferred into breastmilk, or what effect it might have on your toddler.

Cannabis may:
- leave THC in your breastmilk for up to 30 days
- lead to issues with your child’s motor development
- decrease your milk supply
- make you drowsy and unable to respond to your toddler’s needs

Lower the risks for you and your baby by:
- not using cannabis if you breastfeed. If you need help to quit, talk with your health care provider.
- using less cannabis, and using it less often
- not using cannabis with tobacco or other substances or with medications
- choosing lower-potency products that have higher levels of CBD and lower levels of THC. But be aware that even CBD-only products haven’t been proven safe while breastfeeding.

...I use street drugs
Street drugs can pass through your milk and affect your toddler. If you use street drugs and would like support and information about how to safely breastfeed your toddler, talk with a trusted health care provider.

FINDING HELP

To get the support you need to help you breastfeed your toddler with confidence, look to:
- your health care provider
- other moms who have breastfed toddlers
- breastfeeding support groups (see Resources)
- a public health nurse
- a lactation consultant (blca.ca)
- HealthLink BC (call 8-1-1)
- hospital breastfeeding clinics
- La Leche League (lllc.ca)
- the Breastfeeding section in Baby’s Best Chance: Parents’ Handbook of Pregnancy and Baby Care

FAMILY STORY

The best times of my day are when I get to breastfeed my toddler before and after a busy day at work. It’s a chance for us to connect, reinforce our bond and snuggle.

FAMILY STORY

When my toddler is pulled in close to my body to breastfeed, I forget about the rough-and-tumble kid. He’s my baby again, even if only for a moment.
Supplementing for 6- to 9-Month-Olds

Some families may need to supplement their breastfed 6- to 9-month-old for medical reasons, while others may choose to supplement for personal reasons.

What is supplementing?
Giving your 6- to 9-month-old your own expressed milk, donated human milk or baby formula, in addition to breastfeeding.

Supplementing Options
Recommended supplements in order of what to try first, if available:

1st choice: Your own milk, freshly hand-expressed or pumped

2nd choice: Your own frozen milk, thawed just before using

3rd choice: Pasteurized donor milk from a certified human milk bank

4th choice: Store-bought infant formula that is cow’s milk-based (see Formula Feeding for 6- to 9-Month-Olds)

Your own milk is best
Your own milk – fresh or frozen (when fresh isn’t available) – is the best way to feed your 6- to 9-month-old.

If you need to give your 6- to 9-month-old something other than your own milk

Option 1 – Pasteurized donor human milk from a certified human milk bank
Because certified milk banks have a small supply of milk, it’s usually only given by prescription to premature, very ill or high-risk babies.

What is pasteurized donor human milk?
Human milk that has been donated to a certified human milk bank. Donors are carefully screened to make sure they’re healthy and their milk is safe. The milk is pasteurized to kill harmful bacteria and viruses.

BE AWARE
To help ensure your child grows well and stays healthy, always follow the directions on the label when making and storing formula.

Option 2 – Store-bought infant formula
If you’re not able to get milk from a certified human milk bank, the next best choice is cow’s milk-based store-bought infant formula. This can provide your 6- to 9-month-old with complete nutrition. Formula is available in 3 types: ready-to-feed liquid, concentrated liquid and powdered.

If your 6- to 9-month-old weighed less than 2,500 grams at birth, use liquid formula – either ready-to-feed or concentrate. Powdered formula isn’t sterile and can make your child sick. Specialized formulas should only be used if recommended by your health care provider.

Before Supplementing
Talk with your health care provider before giving your 6- to 9-month-old anything other than your own milk. This will help you get all the information you need to feed her safely.

Supplementing with other milk or formula when it’s not needed can decrease your milk supply, cause engorgement and make breastfeeding more difficult. It can also affect your child’s health.

But sometimes it’s medically necessary to supplement to give your 6- to 9-month-old more food and energy. The most important thing is that your child gets enough food and that she’s fed safely – whether with human milk, formula or both. Talk with your health care provider if you have concerns about giving your 6- to 9-month-old formula.
If you supplement:

- Give your child as much of your own milk as you can.
- Get support from your health care provider or a lactation consultant to keep up your own milk supply. This may allow you to return fully to breastfeeding in the future.
- Use a spoon or a small cup without a lid, not a bottle. Or use a specialized feeding device if recommended by your health care professional.

Parents who want to give their child human milk but aren’t able to produce enough themselves sometimes consider informal milk sharing. But before giving your child milk from an informal donor, talk with your health care provider about the risks and benefits.

BE AWARE

Health Canada, the Canadian Paediatric Society and the Human Milk Banking Association of North America do not recommend sharing human milk with friends, family or milk-sharing groups. Milk shared informally is not tested or pasteurized to kill harmful bacteria and viruses.

What are the risks?

Because milk shared informally isn’t screened or pasteurized, it may carry risks:

- Viruses such as HIV and Hepatitis B and C can be passed to your child. Donors may not even know that they carry certain viruses and bacteria.
- If donors smoke or drink alcohol or if they take prescription or over-the-counter medications, herbal supplements or street drugs, harmful substances can pass into the milk and hurt your child.
- If the milk isn’t collected and stored safely, bacteria can grow and make your child sick.
- Unscreened donor milk may be mixed with water, cow’s milk, or something else that you don’t know about.

Lowering the risks

If you’re considering informal milk sharing, lower the risk by:

- not buying milk online
- finding out all you can about your donor’s health and lifestyle
- only using the milk of a close family member or friend
- limiting the number of donors you use
- having ongoing, face-to-face contact with your donor
- asking your health care provider what kinds of tests your donor should have, and asking your donor to share their test results with your health care provider
- ensuring that the milk is handled, stored and sent to you as safely as possible
- learning how to safely store and reheat human milk

Donating your extra milk to the BC Women’s Provincial Milk Bank

If you have extra milk you would like to donate, talk to your doctor or midwife, visit bcwomensmilkbank.ca or call 604-875-3743.

What About Sharing Milk Informally With Other Parents?

What is informal (“peer-to-peer”) human milk sharing?

Sharing unscreened, unpasteurized human milk with friends, family members, or through local or online milk-sharing groups.

DID YOU KNOW

In-home heat treatment of human milk (“flash heating”) has not been proven to remove dangerous bacteria and viruses that could make your child sick.

For more information on informal milk sharing, see perinatalservicesbc.ca/Documents/Guidelines-Standards/HealthPromotion/InformalMilkSharing_FamilyInfo.pdf.
Deciding how to feed your 6- to 9-month-old isn’t always easy. Breastfeeding is best for your child’s growth and development. But sometimes, for medical or personal reasons, store-bought infant formula is used instead of, or in addition to, human milk.

Make an Informed Choice
Make sure you have all the information you need to make an informed choice. Contact your health care provider or the public health nurse, or call HealthLink BC at 8-1-1. They can talk with you about the benefits, risks and costs of each option. And if you decide to use formula, they can help you choose the type that’s best for your child.

If You Use Formula

Breastfeed, too, if you can
Give your child human milk whenever possible. If you feed your child formula, try to give it in addition to your own milk (see Supplementing for 6- to 9-Month-Olds).

If you’re not currently breastfeeding but hope to breastfeed your child in the future, talk with your health care provider about how to keep up your milk supply. Or find a lactation coach through the British Columbia Lactation Consultants Association (bclca.ca).

Use formula safely
Talk with your health care provider or the public health nurse or call HealthLink BC at 8-1-1 to learn how to prepare and store formula safely.

Health Canada inspects all store-bought infant formulas for safety and nutrition. But it’s possible for formula to come into contact with bacteria or to be missing an ingredient. To check for product recalls and sign up for safety alerts, visit the Government of Canada’s Health Risks and Safety webpage at healthycanadians.gc.ca.

DANGER
If you use infant formula, choose only store-bought cow’s milk-based varieties (or store-bought soy-based formula, if your child can’t have cow’s milk-based). Other beverages don’t provide the nutrition your 6- to 9-month-old needs.

Never use these in place of infant formula for your 6- to 9-month-old:
✘ evaporated or condensed milk
✘ cow’s milk or goat’s milk
✘ nut “milks,” like almond, cashew and coconut drinks
✘ other “milks,” like rice, potato, soy and hemp drinks

BE AWARE
Using a home machine to prepare infant formula can be unsafe. The machine may not heat the water enough to kill any bacteria the formula might contain, and it may not dispense the right amount of powder.

DID YOU KNOW
The World Health Organization, Health Canada, Dietitians of Canada, the Canadian Paediatric Society and the B.C. Ministry of Health all recommend that babies be fed only human milk for the first 6 months. After your baby is eating solid family foods, human milk remains an important source of nutrition. If possible, continue to breastfeed until your child is 2 years or older.
**KEY TAKEAWAY**

Although human milk is best for your 6- to 9-month-old, sometimes formula is necessary. If you need to use formula but feel uncomfortable or guilty about doing so, talk with your health care provider. And remember that no matter how you feed your child, you can use feeding times to build a close and loving bond.

In areas where the level of manganese in drinking water is too high, use another source of water to make infant formula. Don’t drink or use discoloured water to prepare food or infant formula until your water’s safety is confirmed.

**DID YOU KNOW**

If you have concerns about your drinking water, contact your health authority. Visit gov.bc.ca/gov/content/environment/air-land-water/water/water-quality/drinking-water-quality/health-authority-contacts.
Keeping Everything Clean

All that equipment you use to feed your child needs to be kept clean.

Breast pumps should be cleaned according to the manufacturer’s instructions. Everything else – including artificial nipples, rings, caps, discs, measuring cups, can openers, storage containers and tongs – can be cleaned and disinfected simply in your kitchen.

DID YOU KNOW
Dishwashers aren’t recommended for disinfecting infant feeding equipment.

HOW TO
Clean and disinfect infant feeding equipment

First – clean everything:
1. Wash your hands with soap and warm water.
2. Wash the sink with a clean dishcloth, soap and warm water.
3. Sanitize the counter by mixing 1 teaspoon (5 ml) of bleach with 3 cups (750 ml) of water in a labelled spray bottle. Spray the counter and wipe it with a clean towel.
4. Fill the sink with hot, soapy water.
5. Wash all infant feeding equipment.
6. Scrub the inside of containers and artificial nipples with a clean bottle brush.
7. Rinse everything with hot water and set it on a clean towel.

Then – disinfect everything:
1. Fill a large pot with water. Add the clean items. Make sure everything is covered with water and that there are no air pockets.
2. Bring the water to a boil. Let it boil, uncovered, for 2 minutes.
3. Take out the tongs. Once cool, use them to remove the other items.
4. Set everything on a clean towel to air dry.
5. Once dry, use the items right away. Or store them in a clean plastic bag or on a clean, dry towel covered with another clean towel.

If you use a store-bought disinfector or sterilizer, follow the manufacturer’s instructions.
When you’re breastfeeding, try:
✔ eating a variety of foods every day (see Canada’s food guide)
✔ eating more if you’re hungrier than usual
✔ drinking plenty of healthy fluids like water, lower-fat milk and unsweetened fortified soy beverage
✔ continuing to take a multivitamin supplement with folic acid

DID YOU KNOW
Many of the foods you may have avoided during pregnancy are no longer a safety concern after the birth. Unpasteurized cheeses, herbal teas and sushi, for example, are all fine while breastfeeding.

Some foods and beverages, though, are still best avoided while breastfeeding. These include:
✘ fish high in mercury
✘ foods and drinks high in caffeine
✘ alcohol
Breastfeeding is recommended for up to 2 years — or longer if you and your child want to continue. But if you decide to wean your toddler before she naturally stops breastfeeding:

- **Start when no other major changes — like going back to work — are happening** in your family. This way, you won’t add stress to an already difficult situation.

- **Offer extra comfort and cuddles** to ensure that your toddler is getting as much attention and love as before.

- **Go slowly.** Weaning gradually gives you time to adjust physically, helping you avoid sore breasts. It also lets you and your toddler adjust emotionally, helping you get used to new routines and find new ways of feeling close.

**DID YOU KNOW**
As your child learns to feed herself solid foods, she’ll naturally begin to wean herself at her own pace.

**PARTNERS**
What You Can Do
When your toddler is down to one breastfeeding per day, take over that last feeding time. Your child may find it easier to take expressed milk or infant formula from you rather than from the parent who has been breastfeeding her.

**KEY TAKEAWAY**
Weaning is a personal and important time for you and your child. Do what works best for you both.

---

1. **To start**, replace one of your daily breastfeedings with expressed milk offered in an open cup. Before 9 months, you could use store-bought infant formula instead; after 9 months, you could use whole (3.25%) cow’s milk. You can also replace a feed with solid food.

2. **Every 5 to 7 days** (or once you and your baby are comfortable), replace another feed.

3. **Finally**, replace the last remaining breastfeeding. Save the feeding that provides the most comfort (usually the first one in the morning or the one at bedtime) for last.
Your toddler may be ready for solid foods when all of these are true:

✔ he's about 6 months old
✔ he can sit and hold his head up
✔ he can watch a spoon, open his mouth and close his lips around it
✔ he can keep most of his food in his mouth

First Foods
Your baby's first foods should be rich in iron—like meat, fish, chicken, eggs, lentils, tofu and iron-fortified baby cereal.

Meat, fish or shellfish will be easier for your toddler to eat if it's moist and in tiny pieces. Try:

• mixing small bits with water, human milk, mashed vegetables or gravy
• shredding it, or serving it ground up
• using dark meat rather than white-meat chicken
• being sure to take out any bones and shells from fish

Cook whole birds to 82°C (180°F), and all other meat (including game meat, fish and shellfish) until well done, to 74°C (165°F). The juices should be clear, with no trace of pink.

Homemade Baby Food
Your toddler can eat the same foods your family normally eats. Soft foods may be mashed, ground, minced or pureed. Or try finger foods like small pieces of well-cooked vegetables, soft fruits without skins, cooked pasta or grated cheese.
At 6 months, your toddler will likely be ready to start learning to drink from an open cup between breastfeedings.

Why Not Sip Cups?
Sip cups don’t help your toddler learn to drink from a cup because the valve to stop spills makes her suck rather than sip.

Why Not Bottles?
If you’re supplementing with expressed human milk or infant formula, your toddler can use a bottle until about 12 months. After that, bottles aren’t necessary. In fact, using a bottle to drink anything other than water can lead to tooth decay (see Looking After Your Toddler’s Teeth).

TRY THIS
If your child is used to drinking milk from a bottle, try slowly decreasing the amount of milk you put in each time. If she wants more to drink, offer a small amount of water in a separate bottle. Use an open cup with meals and snacks.

Making the Switch From Bottle to Cup
If your child is used to using a bottle, start making the switch to an open cup by about 12 months. She’ll likely be completely done with bottles by 18 months.
6 to 9 Months

Your toddler may:
- continue to breastfeed
- pick up food between her fingers and palms and put it in her mouth
- bite off food
- close her lips around a cup held for her
- chew by moving food from front to back and to the sides of her mouth, by munching up and down, and by grinding

Feeding tips:
- ✔ Start introducing soft foods and finger foods at about 6 months.
- ✔ Give her family foods made with little or no added salt or sugar.
- ✔ Offer solid foods before or after breastfeeding, depending on what works best. This may change over time.
- ✔ Start with iron-rich foods, then add more variety.
- ✔ Offer iron-rich foods 2 or more times a day.
- ✔ Offer her sips of clean water from an open cup, but don’t let her fill up on water.
- ✔ Introduce common allergens one at a time. These include milk and milk products, eggs, peanuts and tree nuts, soy, seafood (fish, shellfish), wheat and sesame. (See Understanding Food Allergies)
- ✔ Start with small amounts of food and give your toddler more based on her hunger and fullness cues.
- ✔ Give her lots of practice feeding herself.
- ✔ Be aware of choking hazards. (See Reducing Choking Hazards)

✘ Don’t give your child honey or food made with honey, even if it’s cooked or pasteurized. (See Safe, Healthy Foods and Drinks)
✘ Avoid fruit juice, or limit it to no more than ½ cup (125 ml) a day.

DID YOU KNOW
Human milk is still your child’s most important drink.

TRY THIS
Instead of jarred baby food, try mashing soft and cooked family foods with a fork. Add water or human milk to moisten, and try mixing different foods together.
9 to 12 Months

Your toddler may:
- chew up and down
- use her thumb and fingers to pick up small pieces of food
- hold a cup in 2 hands
- twist and turn her hand when using a spoon
- drop things from her feeding chair
- want to sit at the family table and try to feed herself

Feeding tips:
✔ Sit and eat with your toddler.
✔ Offer solid foods before or after you breastfeed, whichever works better. This may change over time.
✔ Offer iron-rich foods 2 or more times a day.
✔ Keep offering new family foods with different textures.
✔ Give her small amounts of clean water in an open cup.
✔ Be aware of choking hazards. (See Reducing Choking Hazards)
✔ Offer family foods that are made without added sugar or salt.
✔ Encourage her to feed herself.
✘ Don’t give your child honey or food made with honey, even if it’s cooked or pasteurized. (See Safe, Healthy Foods and Drinks)

12 to 24 Months

Your toddler may:
- feed herself – messily – with her fingers or a spoon
- eat very little or a lot, depending on the day
- put food in her mouth and take it out again
- throw food
- be easily distracted from eating

What are family foods?
Foods that your whole family normally eats at mealtime. Giving your toddler foods from the family table rather than store-bought baby food provides her with a wider range of textures, tastes and nutrients.

DID YOU KNOW
Fruit juice is a sugary drink, and children don’t need it. If you offer it, limit it to no more than 125 ml (½ cup) a day, and serve it at meal or snack time in an open cup.

BRAIN BUILDER
Include your toddler at the family table and eat together as often as possible. Sharing meals will help her learn language and social skills and get used to family foods. Use the time to talk to her about what she sees, tastes and feels.

Feeding tips:
✔ Include your toddler in regular family meals.
✔ Offer a variety of food textures, including finger foods.
✔ Give her family foods made with little or no added salt or sugar.
✔ Offer iron-rich foods 2 or more times a day.
✔ Include a new food with foods your child already eats, and offer it several times.
✔ Give her the same foods prepared in different ways.
✔ Include healthy higher-fat foods like salmon, avocado, cheese and nut butters.
✔ Be aware of choking hazards. (See Reducing Choking Hazards)
✔ Give her water to drink between meals and snacks.
✔ Give your child enough time to eat.
✘ Limit foods high in salt and sugar like chips, candy and cookies.
✘ Limit sugary drinks like fruit juice, pop, sports drinks, energy drinks and fruit-flavoured beverages.
✘ Avoid all foods and drinks with caffeine or artificial sweeteners.

KEY TAKEAWAY
Help your toddler get enough iron by offering iron-rich foods 2 or more times a day at meals or snacks. Include meat, poultry, fish, iron-fortified infant cereals, cooked eggs and tofu, and mashed, cooked beans and other legumes.
24 to 36 Months

Your toddler may:
• hold a cup (but spill a lot)
• feed herself cut-up family foods
• eat very little or a lot, depending on the day
• take a long time to eat
• show strong food likes and dislikes

Feeding tips:
✔ Include your toddler in regular family meals, and eat together as often as possible.
✔ Offer a variety of foods from Canada’s food guide.
✔ Serve 3 small meals and 2 or 3 snacks at about the same times each day.
✔ Consider switching from whole (3.25%) milk to lower-fat milk (1% or 2%).
✔ Continue to breastfeed for as long as you and your child want.
✔ Be aware of choking hazards. (See Reducing Choking Hazards)
✔ Offer water to drink between meals and snacks.

✘ Limit foods high in salt and sugar like chips, candy and cookies.
✘ Limit sugary drinks like fruit juice, pop, sports drinks, energy drinks and fruit-flavoured beverages.
✘ Avoid all foods and drinks with caffeine or artificial sweeteners.

Sample 1-day menu for a 24- to 36-month-old

Breakfast:
• oatmeal with blueberries or banana
• lower-fat milk (1% or 2%) or unsweetened fortified soy beverage

Snack 1:
• banana bread thinly spread with peanut or nut butter
• water

Lunch:
• salmon or egg salad sandwich on whole-wheat bread
• thinly sliced red pepper strips and cucumber slices
• lower-fat milk (1% or 2%) or unsweetened fortified soy beverage
• canned peaches

Snack 2:
• small cubes of cheese
• thinly cut apple slices
• water

Dinner:
• whole-wheat spaghetti with tomato and meat or lentil sauce
• bite-sized pieces of cooked carrot and broccoli florets
• lower-fat milk (1% or 2%) or unsweetened fortified soy beverage

FAMILY STORY
I was amazed at how much better my son ate when we sat together and had the same foods. I made meals we could both eat and cut his up into small pieces he could pick up. It was so cute watching him study – and copy – how I ate.

TRY THIS
Start each feeding with a small amount of food. Give your toddler more based on her hunger and fullness cues (see Eating Well). It’s normal for her appetite to change from day to day. Trust that she’ll eat the amount she needs.
### Daily Food Suggestions
Offer your toddler a variety of healthy family foods plus human milk every day. This table is based on the groupings in Canada’s food guide.

<table>
<thead>
<tr>
<th>Meals and Snacks per day</th>
<th>Vegetables and Fruit</th>
<th>Whole Grain Foods</th>
<th>Protein Foods</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6 to 9 months</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2-3 solid food feedings and 1-2 snacks.</td>
<td>- soft-cooked vegetables</td>
<td>- iron-fortified infant cereal</td>
<td>- well-cooked, finely minced or shredded pieces of meat, poultry, fish or shellfish</td>
</tr>
<tr>
<td>Continue to breastfeed. If your child isn’t breastfeeding, give store-bought infant formula – cow’s milk-based or soy-based (if vegan or for cultural or religious reasons).</td>
<td>- grated raw vegetables</td>
<td>- cooked rice and pasta</td>
<td>- mashed or diced cooked egg, tofu or legumes</td>
</tr>
<tr>
<td></td>
<td>- soft fruits like banana and kiwi</td>
<td>- oat ring cereal</td>
<td>- peanut butter or nut butter spread thinly on toast or crackers</td>
</tr>
<tr>
<td></td>
<td>- canned fruit</td>
<td>- crackers, roti, pita</td>
<td>- yogurt, cottage cheese, cheese</td>
</tr>
<tr>
<td></td>
<td>- peeled, pitted and cooked hard fruits like apple and pear</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>9 to 12 months</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 solid food feedings and 1-2 snacks.</td>
<td>- soft-cooked vegetables</td>
<td>- iron-fortified infant cereal</td>
<td>- small, well-cooked pieces of meat, poultry, fish or shellfish</td>
</tr>
<tr>
<td>Continue to breastfeed. If your child isn’t breastfeeding, you can start to offer small amounts of whole (3.25%) cow’s milk (see Safe, Healthy Foods and Drinks).</td>
<td>- grated raw vegetables</td>
<td>- whole grain toast, pasta, rice, crackers</td>
<td>- mashed or diced cooked egg, tofu, legumes</td>
</tr>
<tr>
<td></td>
<td>- soft fruits like banana and kiwi</td>
<td>- small pieces of bannock, tortillas, roti and other breads</td>
<td>- peanut butter or nut butter spread thinly on toast or crackers</td>
</tr>
<tr>
<td></td>
<td>- canned fruit</td>
<td>- yogurt, cottage cheese, cheese, whole (3.25%) cow’s milk</td>
<td>- yoghurt, cottage cheese, cheese, whole (3.25%) cow’s milk</td>
</tr>
<tr>
<td></td>
<td>- peeled, pitted and cooked hard fruits like apple and pear</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>12 to 24 months</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 meals and 2-3 snacks. Continue to breastfeed. If your toddler isn’t breastfeeding, offer 2 cups (500 ml) whole (3.25%) cow’s milk or soy follow-up formula with meals (see Safe, Healthy Foods and Drinks).</td>
<td>- small pieces of soft fruits and vegetables</td>
<td>- whole grain hot and cold cereal</td>
<td>- well-cooked ground, chopped or cubed lean meat, poultry, fish or shellfish</td>
</tr>
<tr>
<td></td>
<td>- cooked or grated vegetables</td>
<td>- brown rice, whole grain pasta, congee</td>
<td>- mashed legumes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- whole grain crackers and toast</td>
<td>- whole cooked egg</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- whole grain bannock, tortillas, roti and other breads</td>
<td>- cooked tofu</td>
</tr>
<tr>
<td><strong>24 to 36 months</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 meals and 2-3 snacks. Continue to breastfeed if you wish. If your child isn’t breastfeeding, offer 2 cups (500 ml) lower-fat cow’s milk (1% or 2%) or unsweetened fortified soy beverage each day with meals (see Safe, Healthy Foods and Drinks).</td>
<td>- small pieces of soft fruits and vegetables</td>
<td>- whole grain hot and cold cereal</td>
<td>- well-cooked ground, chopped or cubed lean meat, poultry, fish or shellfish</td>
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<td></td>
<td>- peanut butter or nut butter spread thinly on toast or crackers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- yoghurt, cottage cheese, cheese, lower-fat cow’s milk (1% or 2%) or unsweetened fortified soy beverage</td>
</tr>
</tbody>
</table>
TRY THIS
Offer your toddler the same healthy foods that the rest of the family enjoys. Eat vegetables, fruit, whole grains and protein foods regularly. Offer foods with different flavours and textures.

✔ baked beans on whole grain toast
✔ carrot or pumpkin bread with cream cheese
✔ chili, dahl or lentils with rice and vegetables
✔ congee or rice porridge with small pieces of meat
✔ dessert tofu with fresh fruit
✔ fish in a whole-wheat bun or bannock
✔ fresh fruit in pieces – with seeds and tough skins removed – and yogurt for dipping
✔ grated or small cubes of cheese with whole grain crackers
✔ macaroni and cheese
✔ meatballs with pasta
✔ milk or yogurt blended with fruit
✔ oatmeal or cream of wheat with milk
✔ pancakes or waffles with applesauce
✔ rice or pasta with meat and vegetables

✔ rice pudding made with milk
✔ scrambled eggs or mini omelette made with diced vegetables
✔ small muffin thinly spread with peanut or nut butter
✔ soft tortillas filled with beans or ground meat
✔ sandwich triangles made with egg, canned tuna or salmon, or easy-to-chew meat
✔ fish chowder and a breadstick
✔ spaghetti with tomato or meat sauce
✔ vegetable, split pea or bean soup with whole-wheat crackers, bannock or roti

✔ vegetables (cooked and cooled) with yogurt dip, hummus or dahl
✔ whole grain cold cereal with milk and fruit pieces or berries
✔ whole grain crackers or rice cakes with cottage cheese or mashed avocado
✔ whole-wheat pita or roti with hummus or dahl
✔ yogurt mixed with pieces of fruit or applesauce
✔ yogurt with crackers or roti
Drinks

Water

Water is the best drink for your child.

Starting at 6 months, give your toddler small amounts of water in an open cup between meals and breastfeedings.
✔   If your home was built before 1989, you may have lead pipes. Flush them each morning by running your water for 1 to 5 minutes or until it turns cold.
✔   If you have your own private water supply, have your water tested according to provincial guidelines. Learn more at healthlinkbc.ca.
✔   Always follow “boil water” advisories in your area.

Milk

Between 9 and 12 months, you can start offering your toddler pasteurized whole (3.25%) cow’s milk or fortified goat’s milk, as long as she also eats a variety of iron-rich foods like meat, fish, poultry, eggs, tofu, iron-fortified cereals, beans, peas and lentils. Offer her 2 cups (500 ml) of milk every day if she no longer breastfeeds.

At 24 months, you might choose to switch to lower-fat cow’s milk (1% or 2%). If your child is over 24 months and doesn’t drink cow’s milk or fortified goat’s milk, offer her unsweetened soy beverage fortified with calcium and vitamin D.
✔   Limit milk to no more than 3 cups (750 ml) per day, so your toddler has room for other healthy foods.
✘   Avoid letting your toddler sip milk between meals or snacks, which can lead to tooth decay.

Fruit Juice

Fruit juice is a sugary drink that children don’t need. Offer vegetables and fruits instead. If you do offer juice, serve it at meal or snack time.
✔   Limit fruit juice to ½ cup (125 ml) a day.
✔   Offer fruit juice in an open cup. Using a bottle can cause tooth decay.

Drinks to avoid

✘   Sugary drinks like fruit juice, fruit and fruit-flavoured drinks made from powders or crystals, pop, sports drinks, and slush drinks. These have too much sugar and not enough of the nutrients toddlers need.
✘   Drinks with caffeine like soft drinks, sports drinks, energy drinks, coffee, coffee-slush drinks, tea and hot chocolate. These can make your toddler excited and anxious and make sleep more difficult.
✘   Fruit juices labelled “unpasteurized” may contain dangerous bacteria.
✘   Toddler nutritional supplement drinks aren’t needed.

If you’re concerned about your child’s food intake or growth, talk with your health care provider.

DID YOU KNOW

Plant-based drinks from rice, potato, almond, hemp and coconut milk don’t have enough calories, fat or protein for your growing toddler. Don’t offer them in place of human milk, cow’s milk, formula or fortified soy beverage.

DID YOU KNOW

Your toddler can continue to breastfeed or drink expressed human milk until she’s 24 months or older.

TRY THIS

With meals, offer milk. Between meals, offer water. And continue to breastfeed for as long as you choose.
Foods

Vegetables and fruit
All vegetables and fruit – fresh, frozen, canned and dried – are healthy choices when they’re prepared and stored safely.

Fish
Fish provides many nutrients including protein and omega-3 fats, which are important for brain and eye development. Offer it to your child regularly. Some fish, though, is high in mercury, and should be limited.

High-mercury fish – serve in limited amounts only:
• fresh and frozen tuna
• canned albacore tuna from outside of Canada
• shark
• marlin
• swordfish
• escolar
• orange roughy

If your child is 6 to 12 months, offer no more than 40 grams (less than 1 oz) a month.
If your child is 24 to 36 months, offer no more than 75 grams (2½ oz) a month.

Fish not high in mercury – serve regularly:
• all other fish sold in Canada
• canned light tuna including skipjack, yellowfin and tongol
• Canadian albacore tuna (fresh, frozen and canned). Look for “Product of Canada” on the label.

Meat, fish, poultry, seafood and eggs
Reduce the risk of food poisoning by cooking all meats until they’re brown (not pink) and the liquids run clear. Cook fish until it flakes with a fork. Cook eggs until yolks are hard. Try braising and stewing to keep meats soft enough for your toddler to chew.

Foods to avoid

X Honey can give your baby botulism, a food-borne illness. Never give honey or foods containing honey to a child less than 1 year old.
X Sprouts (like alfalfa and mung bean) can contain harmful bacteria. Only give them to your toddler if they’re thoroughly cooked.
X Unpasteurized cheese made from raw milk may contain harmful bacteria that can cause toddlers to become very sick or even die. Check the label, and choose only cheeses made from pasteurized milk.

Highly processed foods
Highly processed foods – store-bought and from restaurants – are high in salt, sugar and saturated fats. Offer them less often and in smaller amounts. Try:
• offering water instead of sugary drinks
• limiting processed meats like ham, bacon, sausage, hot dogs and luncheon meats
• reducing store-bought cookies, cakes, candy, chocolate, chips and salty snacks
• offering fewer frozen packaged foods like pizza and pasta
• choosing healthier menu options when eating out
• making homemade versions of favorite restaurant foods like fries, chicken strips and pizza

BE AWARE
Fish high in mercury can damage your toddler’s growing brain.
If your toddler eats a variety of foods and is growing well, she probably doesn’t need extra vitamins or minerals, with 2 possible exceptions:

**Vitamin D**

**Why your toddler needs it**
To build healthy bones and teeth.

**How much your toddler needs**
A total of **600 IU** of vitamin D each day for children 12 months and over.

**How to get it**
A portion is available from sunshine, and the rest comes from eating certain foods.
- egg: 1 yolk = 25 IU
- soft margarine: 1 teaspoon (5 ml) = 25 IU
- salmon: 30 grams (1 oz) = 100 IU
- formula: 1 cup (250 ml) = 100 IU
- cow’s milk (not recommended before 9 months): 1 cup (250 ml) = 100 IU

**When a supplement is needed**
**Until she’s 24 months old,** give your toddler 400 IU of liquid vitamin D each day if she:
- breastfeeds, or drinks both human milk and formula
- breastfeeds and drinks some cow’s milk or vitamin D-fortified goat’s milk
- doesn’t drink 2 cups of cow’s milk or eat a variety of other vitamin D-rich foods every day
- drinks goat’s milk that isn’t fortified with vitamin D

**After she’s 24 months old,** your toddler may need a supplement to reach the recommended 600 IU per day. Give her 400 IU of vitamin D each day if she doesn’t have 2 cups of cow’s milk or fortified soy beverage and a variety of other vitamin D-rich foods every day.

**Iron**

**Why your toddler needs it**
For growth and brain development.

**How much your toddler needs**
**2 or more servings** of iron-rich foods per day.

**How to get it**
From foods high in iron, including meat, poultry, fish, iron-fortified infant cereals, eggs, tofu, beans and other legumes.

**When a supplement may be needed**
Talk with your health care provider if your toddler:
- was premature
- doesn’t eat enough iron-rich foods
- drinks more than 3 cups (750 ml) of milk each day
- is vegetarian or vegan (see Vegetarian and Vegan Toddlers)

For more information about vitamin and mineral supplements, call a HealthLink BC dietitian at 8-1-1.
**Feeding Your Toddler**  
**Reducing Choking Hazards**

Toddlers are at greater risk for choking because their mouth muscles can’t yet control hard or slippery foods and their airways are narrow. Reduce the risk by:
- staying with your toddler while she eats
- not letting her eat while she’s walking or riding in a stroller or a vehicle

**TRY THIS**
Consider taking a first aid course – either online or in person – so you’ll know what to do if your toddler chokes.

**BE AWARE**
Whole nuts, whole peanuts, whole grapes, popcorn, gum, cough drops and hard candy are likely to cause choking. Don’t give them to children under 4 years old.

<table>
<thead>
<tr>
<th>If food is:</th>
<th>Like:</th>
<th>Make it safer by:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Round</strong></td>
<td>Whole grapes, small tomatoes, large berries, hot dogs, sausages</td>
<td>Slicing lengthwise into quarters</td>
</tr>
<tr>
<td><strong>Hard</strong></td>
<td>Fruit with pits or seeds</td>
<td>Removing pits and seeds</td>
</tr>
<tr>
<td></td>
<td>Raw vegetables like carrots that can break into chunks</td>
<td>Grating or chopping finely, or cooking and slicing into thin sticks</td>
</tr>
<tr>
<td></td>
<td>Whole nuts, whole peanuts, seeds</td>
<td>Chopping finely</td>
</tr>
<tr>
<td><strong>Sticky</strong></td>
<td>Peanut butter</td>
<td>Spreading thinly or mixing with human milk or water to thin it out</td>
</tr>
<tr>
<td></td>
<td>Marshmallows, dried fruit, raisins</td>
<td>Cutting into small pieces</td>
</tr>
<tr>
<td><strong>Stringy</strong></td>
<td>Celery, oranges, grapefruit</td>
<td>Removing large, stringy sections</td>
</tr>
<tr>
<td></td>
<td>Leafy vegetables</td>
<td>Cutting into small pieces</td>
</tr>
<tr>
<td><strong>Chunky</strong></td>
<td>Lumps of peanut butter, nut butter, or seed butter on a spoon</td>
<td>Choosing smooth varieties and spreading thinly</td>
</tr>
<tr>
<td></td>
<td>Chunks of meat or cheese</td>
<td>Cutting into small cubes</td>
</tr>
<tr>
<td><strong>Easy to eat by the handful</strong></td>
<td>Pretzels, chips</td>
<td>Serving small amounts onto a plate or bowl, not out of the bag</td>
</tr>
<tr>
<td><strong>Bony</strong></td>
<td>Chicken</td>
<td>Removing bones</td>
</tr>
<tr>
<td></td>
<td>Fish</td>
<td>Flaking and rubbing between fingers to feel for bones</td>
</tr>
</tbody>
</table>
Eat together. By sitting down together, you’ll build your toddler’s language and social skills while encouraging healthy eating habits.

Have meals and snacks at about the same times each day. Having a routine lets your toddler focus on trying a variety of foods and learning the skills to feed himself. “Grazing” between meals and snacks can become an unhealthy habit that’s also harmful to teeth.

Make mealtimes learning times. Mealtime can help your toddler develop fine motor skills (like picking up pieces of food with his fingers), language skills (like talking and listening), and social skills (like saying “please” and “thank you”).

Reduce distractions. Turn off the TV and keep toys and phones away from the table. This puts the focus on eating and conversation and helps you follow your toddler’s fullness cues. (See Eating Well)

Don’t worry about the mess. Exploring food with his eyes, hands and mouth is an important – and often messy! – part of your child’s learning. He may also drop food on the floor, by mistake or on purpose. Be patient, and have a wet cloth nearby for post-meal cleanup.

DID YOU KNOW
Studies show that children who have meals with family members eat healthier and feel better about themselves.

TRY THIS
When you’ll be away from home for meals or snack times, pack nutritious foods like dry cereal, sliced boiled egg, cheese and crackers, cut-up soft fruits, and soft vegetables with hummus. You’ll save money and eat better.

BRAIN BUILDER
Build language skills by turning off the TV and putting away other screens during meals. Use the time to talk as a family instead.
Toddlers are “eaters in training,” so it’s normal for them to go through periods of picky eating. With time and practice, your child will learn to enjoy a variety of foods. Be patient, and encourage her by:

✔ letting her smell, touch and taste new foods
✔ offering a new food along with at least one food she already likes
✔ letting her eat at her own pace
✔ offering foods with a variety of textures
✔ being a good role model by eating a balanced, healthy diet
✔ letting her help prepare meals and snacks
✔ trying not to put too much pressure on her to eat more, to eat less, or to eat foods other than those she’s willing to try

TRY THIS

Let your toddler choose a new vegetable or fruit each time you visit the grocery store. Or try growing a few vegetables together. Many children will happily eat foods they’ve chosen, grown or helped prepare.

DID YOU KNOW

Your toddler may need to taste a new food lots of times before she finally eats it. Keep offering new foods, and include ones she’s refused in the past.
With good planning, feeding your toddler a vegetarian or vegan diet can be a healthy choice. Help your child get the nutrition he needs by:

- ✔ breastfeeding for at least 24 months
- ✔ introducing iron-rich foods at about 6 months (see Introducing Solid Foods)
- ✔ giving him 400 IU of liquid vitamin D supplement every day (see Vitamin and Mineral Supplements)
- ✔ offering iron-rich protein foods like eggs (for vegetarians), cooked tofu, soy and veggie “meats,” beans, peas, lentils and nut and seed butters

See Feeding By Age for more feeding tips.

**Nutrients to Pay Special Attention to**

If your child doesn’t eat meat or other animal products, he could be missing some key nutrients. Choose alternate foods carefully to ensure he’s getting all the nutrition he needs.

**Omega-3 fats**

**Why they’re needed:** for brain development and vision

**Where they’re found:** human milk, store-bought infant formula with DHA and ARA, ground flax, chia, hemp seeds, ground walnuts, omega-3 enriched eggs and soft margarine, flaxseed oil, canola oil, soybeans

**Protein**

**Why it’s needed:** to build and repair cells and make enzymes and hormones

**Where it’s found:** human milk, store-bought infant formula (cow’s milk- or soy-based), tofu, lentils, beans, peas, nut butters, soy based “meats,” homogenized whole cow’s milk (3.25%), unsweetened fortified soy beverage (after 24 months), cheese, yogurt

**Fat**

**Why it’s needed:** for energy and brain and nerve function

**Where it’s found:** human milk, store-bought infant formula (cow’s milk- or soy-based), ground nuts and seeds, nut and seed butters, tofu, avocado, milk, vegetable oils, soft margarine

**Vitamin B12**

**Why it’s needed:** for healthy nerve and blood cells and to make DNA, the genetic material in cells

**Where it’s found:** eggs, fortified foods like veggie “meats,” Red Star nutritional yeast, store-bought infant formula (cow’s milk- or soy-based), unsweetened fortified soy beverage (after 24 months)
Iron

**Why it’s needed:** for red blood cells, growth and brain development

**Where it’s found:** iron-fortified infant cereal, enriched cereals, quinoa, beans, peas, lentils, tofu, blackstrap molasses

**DID YOU KNOW**
Iron is best absorbed when eaten with foods high in vitamin C like oranges, grapefruit, kiwi, sweet potato, sweet peppers and broccoli.

Calcium

**Why it’s needed:** to build strong bones and teeth

**Where it’s found:** human milk, store-bought infant formula (cow’s milk- or soy-based), unsweetened fortified soy beverage (after 24 months), calcium-fortified tofu, cheese, yogurt, baked beans, blackstrap molasses; smaller amounts in almond butter, sesame butter, oranges

**BRAIN BUILDER**
If you’re vegan, your milk may be low in vitamin B12. Help your toddler get enough of this brain-building nutrient by eating B12-fortified foods or taking a daily supplement.

For more information, talk with a registered dietitian at HealthLink BC at 8-1-1 and see Canada’s food guide.
What is a food allergy?
The body mistaking a food as harmful. Once a person has a food allergy, an allergic reaction occurs every time they eat that food.

Common Food Allergens
Foods that most commonly cause food allergy are:
- milk and milk products
- egg
- peanut
- tree nuts – like almonds, cashews and walnuts
- soy
- seafood – like fish, shellfish and crustaceans such as crab and lobster
- wheat
- sesame

Introducing Common Food Allergens
To reduce the risk of a food allergy developing, introduce the common food allergens when your baby has shown that she’s ready for solid foods – usually around 6 months.

After your child is eating a few other solid foods (see Introducing Solid Foods), start offering her the common food allergens one at a time. Begin with the common allergens your family eats most often. Try, for example:
- peanut and tree-nut butters blended into infant cereal or spread thinly on strips of toast
- well-cooked egg and seafood
- milk products like yogurt and grated cheese. Wait until 9 to 12 months to offer whole (3.25%) milk.

TRY THIS
See Reducing Risk of Food Allergy in Your Baby at healthlinkbc.ca to learn more.

Signs of Food Allergy
Allergic reactions usually appear within a few minutes of being exposed to a food, but can happen up to 2 hours later. The most common signs include:
- hives, swelling, redness or rash
- stuffy or runny nose with itchy, watery eyes
- vomiting
- coughing

MEDICAL EMERGENCY
Some allergic reactions – to food, insect stings, medications and other allergens – can be life threatening. Call 9-1-1 immediately if your child has any of the following:
- swelling of the mouth, tongue or throat
- hives that are spreading
- trouble breathing, swallowing or speaking, or a hoarse or rough voice
- repetitive coughing or wheezing
- pale or bluish face or lips
- faintness, weakness or has passed out

DID YOU KNOW
Food allergy and other allergic conditions – such as eczema, asthma and hay fever – tend to run in families. Talk about your family history with your health care provider to find out if your toddler is at risk.
Children come in different shapes and sizes. Your toddler may be shorter or taller, lighter or heavier than other children his age. But changes in his height and weight will generally follow a regular pattern that’s right for him.

**Typical Growth for a Toddler**

- **6 months**
  - weighs twice as much as at birth
  - 55 to 57 cm (21½ to 22½ inches) long

- **12 months**
  - weighs 2½ to 3 times as much as at birth
  - 25 cm (10 inches) longer than at birth

- **12 to 24 months**
  - gains 1½ to 2½ kg (3 to 5 lb)
  - grows 7 to 12 cm (3 to 5 inches)
  - has more muscle in her arms and legs
  - has less fat around her face and tummy
  - starts to look like a young child

- **24 months to 5 years**
  - gains 1½ to 2½ kg (3 to 5 lb) per year
  - grows about 8 cm (3 inches) per year

**What You Can Do**

Growing too fast or too slowly can be a sign of problems with feeding, stress or health.

You can help your toddler grow well by:

- ✔ breastfeeding until he’s 2 years or older
- ✔ giving him opportunities to be physically active every day
- ✔ having regular family mealtimes and regular snack times instead of “grazing” all day
- ✔ providing healthy food choices, then letting your toddler decide how much he wants to eat
- ✔ setting a good example by eating well and being active
- ✔ having him weighed and measured whenever he visits your health care provider

- ✘ limiting sugary drinks and other highly processed foods
- ✘ not pressuring your toddler to eat
- ✘ not using food as a reward
- ✘ limiting screen time
Benefits of Being Active
Regular physical activity is key to your toddler’s growth and good health. It:
✔ builds strong muscles and bones
✔ strengthens her heart and lungs
✔ teaches her new skills like throwing and running
✔ builds her confidence in walking, climbing and balancing
✔ gives her energy
✔ improves her posture
✔ lowers her stress

Activities to Try
From 6 to 12 months, play with your child on the floor several times a day. Try:
• putting toys just out of her reach so she has to work to get them
• holding and rocking her
• playing physical games, like peekaboo and patty cake
• choosing toys that get her to move

From 12 to 36 months, help your child get at least 3 hours of various activities throughout the day. Try:
• going outside to explore
• throwing a ball
• jumping
• chasing bubbles
• using the slide, swings and climbing gear at the park
• including her in active tasks like walking to the store, cleaning the house, washing the car and gardening
• having her walk rather than ride in a stroller
• swimming and doing other activities at your recreation centre

From age 3 on, give your child at least 3 hours of activity each day. Have her spend at least 1 of the 3 hours in energetic play.

HOW TO Encourage physical activity
✔ Try different activities together.
✔ Create safe spaces indoors and outdoors for her to crawl, roll and explore. (See Childproofing Your Home)
✔ Praise her efforts.
✔ Plan activities with other families.
✔ Limit her screen time. (See Screen Time)
✔ Spend time outdoors.
✔ Be physically active yourself.

FAMILY STORY
My husband and I knew our daughter would copy what we did. So we started walking together every night after work. When she was small, we would put her in the stroller. As she got older, she walked beside us. It was a great time to reconnect while getting fresh air and exercise.

FAMILY STORY
We lived in a small condo. By evening we were just too tired to take our son to the park again, but he needed more activity. So we set up a small slide in the living room. He loved it!
Healthy sleep habits are as important as healthy food when it comes to your child’s development.

Typical Sleep Patterns for Toddlers

<table>
<thead>
<tr>
<th>Months</th>
<th>6-12</th>
<th>12</th>
<th>12-18</th>
<th>24</th>
<th>36</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12 to 16 hours total, including naps</td>
<td>14 hours total, including naps</td>
<td>11 to 14 hours total</td>
<td>11 to 14 hours total</td>
<td>12 hours at night</td>
</tr>
<tr>
<td></td>
<td>2 naps (morning and afternoon) of 1 to 2 hours each</td>
<td>No morning nap</td>
<td>Afternoon nap of 1 to 2 hours</td>
<td></td>
<td>Short nap (an hour or less)</td>
</tr>
</tbody>
</table>

DID YOU KNOW
Many children continue to have a morning nap (as well as an afternoon nap) until 18 months or older.

TRY THIS
If your toddler has trouble going to sleep or isn’t sleeping well, keep a sleep diary. Over a couple of weeks, write down when she sleeps and for how long. Note any patterns, then experiment with changes in nap times and routines. Make any changes gradually – just 5 to 10 minutes every second day.

HOW TO
Develop good sleep habits

Babies and toddlers thrive on routine – and routines around sleep are especially important.

✔ Follow routines in the daytime, including regular meal and snack times.
✔ Keep a regular night-time and nap-time sleep schedule, even on weekends.
✔ Ensure your child get lots of physical activity during the day, but not right before bed.
✔ Set a before-bed routine including a bath, a book and a quiet cuddle of 20 minutes or less.
✔ Keep the sleep area quiet.

✘ Don’t give your toddler food or drinks with caffeine, like chocolate or pop.
✘ Be careful about too much screen time during the day (see Screen Time), and turn off screens well before bedtime.
Falling Asleep on Her Own

Your child may have gotten used to being breastfed or rocked to sleep when she was a baby. But by learning to fall asleep on her own, she’ll be able to settle herself when she partially wakes during the night.

Try:
- feeding her earlier in the bedtime routine (about 15 minutes before putting her into bed) so she doesn’t associate feeding with sleep
- setting a bedtime routine that includes singing a song or reading a story
- putting her into bed awake, patting her gently until she settles, then saying goodnight and leaving
- sitting in a chair chose by the bed with your hand on her if she has a hard time settling, and moving the chair further away each night
- using a nightlight in the corner or having a light on just outside her room if she doesn’t like the dark

DID YOU KNOW

If your child falls asleep somewhere other than her own bed, she’s more likely to wake during the night.

Waking in the Night

Your child may wake up during the night if she’s too hot or cold, if she’s wet, hungry, teething or sick – or for no reason at all. You can help her learn to go back to sleep on her own by:
- keeping the lights off when you feed or change her during the night
- not making nighttime a time for chatting or playing
- gradually shortening any nighttime feedings so she doesn’t fully wake up
- If she cries for no particular reason, you can help her learn to settle herself by:
  1. going to her, but not picking her up
  2. calmly tucking her back into bed and telling her it’s time to sleep
  3. leaving the room
  4. repeating as needed until she falls asleep

You may choose to wait a short time – 2 or 3 minutes – after she starts crying before going to her. If so, over several days you can slowly increase the amount of time you let her cry before going in. But always check on her right away if she sounds very upset and may be sick or injured.

BRAIN BUILDER

Give your toddler some choices at bedtime, like which story to read or which pajamas to wear.

DANGER

If your toddler is under 12 months old, always put her to sleep on her back to lower the risk of Sudden Infant Death Syndrome (SIDS).

Safer Cribs

Ensure:
- the crib is approved by Health Canada (ask your health care provider if you’re not sure)
- the mattress is in the lowest position if your toddler is able to sit up
- there are no items she could climb on to fall out of the crib
- there are no mobiles or other hanging objects that could strangle her

See Baby’s Best Chance for more information on safer sleep for your 6-month-old.

FAMILY STORY

We started reading to our daughter right before bed when she was a baby. It helped her slow down and understand it was time to sleep. When she was a toddler, she always wanted a story, so it got her into bed. Now, at 12, she’s old enough to read herself. But she still loves this close, quiet time with one of us.
Safer Beds

If your toddler is trying to climb out of the crib, it’s time to move her to a bed. Ensure your toddler’s bed:

- has a simple design
- has no spaces between the mattress and the headboard or walls
- has its headboard (not the side of the bed) against the wall
- is low to the floor
- has a carpet or quilt on the floor in case she falls out of bed
- has safety rails on all sides
- is the lower bunk if using a bunk bed set
- isn’t by a window, if possible, and that all windows in the room have locks

Bedsharing

What is bedsharing?
Sleeping in the same bed with your child.

Is it recommended?
Bedsharing can be risky, especially for some babies. Bedsharing is not recommended for infants under 12 month of age.

Why not?
Sharing a bed with your child – or even sleeping with her on a sofa or in a chair – puts her at risk of suffocation. She could get wedged against the mattress or between cushions, or you or your partner could roll on her and smother her. This risk increases if you’re very tired or have been drinking alcohol or using drugs. Even co-sleeper cribs that attach to the side of your bed are dangerous, as your child can get trapped between your mattress and the crib.

DID YOU KNOW
If you have more than one baby, it’s safest to have them in their own sleep spaces. If they share the same crib, put them head to head, not side by side.

When your child is between 6 months and a year old, the safest place for her to sleep is in her own Health Canada-approved crib. But many families prefer to bedshare for cultural or personal reasons. And some find that they end up bedsharing, even if they hadn’t planned to.

Talk with your health care provider about how to balance your family’s wishes with the risks of bedsharing. And if you do choose to share a bed, do so as safely as possible. Ensure:

- Your baby is far away from pillows, blankets and duvets.
- Your baby is on her back.
- She isn’t swaddled.
- The mattress is on the floor to reduce the risk of a fall.
- The mattress is firm. (No waterbeds, pillowtops, air mattresses or feather beds.)
- The child is on the outside of the bed, not between adults.
- There’s space around the bed so the child can’t get trapped between the mattress and the wall or a side table.
- The adults in the bed both know that the child is in the bed and are comfortable with it.

- Any long hair is tied back so it can’t get wrapped around your child’s neck.
- No older children or pets are in the bed.

DANGER
Never share a bed if:

- your baby was born prematurely or weighed less than 2½ kg (5½ lb) at birth, or
- you or your partner:
  - smoke, or if you smoked while pregnant
  - have taken any substances that might make you sleep more heavily, like alcohol, medicine, cannabis or other drugs

Have another adult available to look after your baby if you’re drinking alcohol or using any substances.

Sleep-Related Infant Death

Sleep-related infant death can happen by accident (usually when a child is smothered or suffocated) or by Sudden Infant Death Syndrome (SIDS or “crib death”) – the unexplained death of a healthy child while sleeping. Lessen the risks by:

- putting your baby down to sleep on her back on a firm surface in her own safe sleep space
- making your home smoke-free
- keeping your child warm, but not hot
- breastfeeding
- keeping pillows, toys, heavy blankets and pets out of your child’s bed
- carefully considering the risks of bedsharing
Is Your Toddler Ready?
Usually, children learn to use the toilet between ages 2 and 4.

Your toddler is likely ready if she:
• stays dry for a few hours at a time
• sometimes wakes up dry from a nap
• can follow simple directions
• knows when she’s peeing or pooping
• can let you know when she needs to use the toilet
• is able to pull down her pants and underwear by herself

Keys to Toileting Success
✔ Choose the right time. Wait until your toddler seems ready, and start when there are no other big changes going on in your family.
✔ Try not to pressure her. Most children take between 2 weeks and 6 months to learn. Be patient and try not to be upset over accidents.
✔ Make potty time a regular part of your routine. Have her sit on it as soon as she wakes up and regularly throughout the day.
✔ Praise her attempts. Try “Yay! You went pee on the potty!” rather than “Good girl!” This tells her that whether she succeeds or not doesn’t make her good or bad in your eyes.
✔ Talk about the benefits of using the toilet, like getting “big kid” underwear.
✔ Be ready when you’re away from home. Know where you can find public bathrooms. And bring along the potty chair if you’re going on a trip.
✔ Use the right words. Talk to your toddler about toileting so she’ll have the words to express her needs. Use the correct terms for body parts and functions, and cut down on embarrassment by not using negative words like “stinky.”

What You’ll Need
• A potty chair. Place it next to the main toilet. Or use a special seat that fits over the toilet’s seat, along with a solid step stool.
• Clothes with elastic waists that can be pulled down quickly. You may even choose to let your toddler go without pants while at home.

Steps Along the Way
Learning to use the toilet is a skill that takes time to learn. Staying dry all night often doesn’t happen until a child is 6 years old or older. Sometimes your toddler may even take a step backward. And even older children have accidents, especially when they’re sick, cold or very involved in play.

Using diapers
If your child is dealing with a big change or just won’t use the potty chair, you may need to go back to diapers for a while.

If your toddler doesn’t want to poop in a potty chair or toilet, let her continue to use diapers for part of the day so she doesn’t get constipated.

Using training pants
Pull-on training pants look like underwear but are made from diaper material. You may find them useful at night or when you’re away from home with your toddler.

Key Takeaway
Rushing toilet learning can make it frustrating for you and your child. By waiting until she’s ready, you’ll make it easier and she’ll feel more successful.

Did You Know
Many children are scared by the flushing of a toilet, so be sensitive when you empty the potty. Toilets that flush automatically and any toilet that’s unfamiliar can be scary, too. Try packing the potty along until your child is comfortable using the bathroom away from home.

Try This
Encourage your toddler to teach her stuffed animals to use the potty chair.
TRY THIS
If you’re comfortable, let your toddler watch you or another same-sex parent, brother or sister use the toilet. Seeing what you’re doing can help her figure it out for herself.

FAMILY STORY
Right from birth, I said things to my son like, “Doesn’t it feel good to be dry?” So when it came time to start toilet learning, he already understood the idea of “wet” versus “dry.”

BRAIN BUILDER
Give your child a book to look at while she sits on the potty chair. Check the library for books about toilet learning.
Taking good care of your toddler’s first teeth means better health overall. “Baby teeth” are important for:
- eating
- learning to speak
- jaw growth
- helping adult teeth grow in properly

In addition, untreated decay in baby teeth can be painful, spread to adult teeth and cause serious infection in the rest of the body. It can interfere with your child’s ability to play, learn, sleep and eat, and lead to poor growth and development. And tooth decay is the main reason young children need day surgery.

### How Teeth Usually Grow

**Upper Jaw**
- 7-12 months
- 9-13 months
- 16-22 months
- 13-19 months
- 25-33 months

**Lower Jaw**
- 20-31 months
- 12-18 months
- 16-23 months
- 7-16 months
- 6-10 months

**When teeth come in**
- 7-12 months
- 9-13 months
- 16-22 months
- 13-19 months
- 25-33 months

**When teeth fall out**
- 6-8 years
- 7-8 years
- 10-12 years
- 9-11 years
- 10-12 years

**Months**
- 6-12
- 12-20
- 20-36

First tooth appears

20 teeth – 10 on the top and 10 on the bottom
Teething

Some toddlers aren’t bothered by teething while others are uncomfortable and fussy. Most children will drool.

You can help ease your toddler’s discomfort by:

✔ letting him chew on a clean teething ring or wet cloth that’s been chilled in the fridge (not the freezer)

✔ wiping and massaging his gums with a clean finger, cloth or toothbrush

✔ using a bib to catch drool and wipe his face

Don’t use:

✘ teething gels or ointments, which can numb your toddler’s throat and make it hard for him to swallow

✘ teething necklaces, which can strangle or choke him

✘ food like teething biscuits or frozen fruit, which can lead to tooth decay

DID YOU KNOW

“Baby teeth” aren’t just for babies. The molars at the back of your child’s mouth won’t fall out until he’s about 12 years old.

Keeping Teeth Healthy

Brush

Once the first tooth comes in, it’s time to start brushing your toddler’s teeth. Use a soft brush with nylon bristles. (Silicone and rubber bristles don’t remove plaque as well.) And replace the brush often – about every 3 months or after the bristles lose shape, and after your child has been sick.

How to Brush your toddler’s teeth

1. Put a grain-of-rice-sized amount of fluoride toothpaste on a child-sized toothbrush twice each day. Increase to a pea-sized amount at age 3.

2. Have your child lie in your lap, on the change table or on the floor.

3. Brush gently. Sing or chat while brushing.

4. If he’s able (likely by about age 3), let him spit as needed.

5. Put the toothpaste away out of reach.

6. Repeat twice a day – once in the morning and again after the last evening feeding.

Use fluoride

Fluoride makes tooth enamel stronger and better able to fight decay. Check with your health department to see if there’s fluoride in your local water. If not, be doubly sure that your child’s toothpaste includes it. Teach your child to spit the toothpaste out, but don’t worry if he’s not always successful. Even children under 3 can use (and swallow) small amounts of fluoride toothpaste safely.

Floss

Once your toddler’s teeth touch each other, floss them for him once a day. Don’t let him floss his own teeth, because he could damage his gums.

Protect teeth from damage

✔ Use the right size car seat, booster seat and seat belt.

✘ Don’t let your toddler chew on hard things.

✘ Don’t let him walk around with anything in his mouth.

✘ Don’t offer your toddler pop or other sugary drinks.

✘ Don’t put him down to sleep with a bottle.

Offer healthy food and drinks

✔ Offer your child meals and snacks at regular times.

✔ Offer milk with meals, and water between meals and with snacks.

✔ Limit fruit juice to ½ cup (125 ml) per day.

✔ If you offer fruit juice, use it as part of a meal or snack and put it in an open cup to avoid the tooth decay that constant sipping can cause.

✔ At 6 months, start helping your child drink from an open cup instead of using a bottle or sip cup.

See Safe, Healthy Foods and Drinks to learn more.

DID YOU KNOW

Although teething may be uncomfortable for your toddler, it doesn’t cause fever. If he has a fever, treat it as you normally would (see When Your Toddler is Sick).
What About Soothers and Thumb-Sucking?
If your child continues to suck a soother or his thumb after his permanent teeth start to come in, he could be at risk for dental problems, speech problems and ear infections.

Don’t share germs
Germs from your mouth can lead to tooth decay in your toddler’s. Don’t put his soother in your mouth, share toothbrushes or spoons, pre-chew his food, or use your teeth to bite pieces in half for him. And keep your own teeth clean and healthy by brushing and flossing daily and visiting the dentist regularly.

Safer soothers
Look for:
• one-piece design
• firmly attached nipple
• no cord (use a clip with a short ribbon instead – but only when your toddler isn’t sleeping)
• no toy or stuffed animal attached
Keep it safe by:
• boiling it in water for 5 minutes, then cooling it completely before the first use
• cleaning it regularly in warm, soapy water
• replacing it every 2 months, or sooner if it’s sticky, cracked or torn
• replacing it or boiling it for 5 to 10 minutes each day if your child has thrush

HOW TO Help your toddler use a soother less
• Start when no other big changes are going on in your family.
• Slowly limit soother time until you get it down to 1 use per day – probably naptime or bedtime.
• Once he’s asleep, gently remove the soother from his mouth.
• If he wants the soother when he’s awake, check if he’s hungry, bored, tired or if he needs comfort. Offer a cuddle, a blanket, a toy, breastfeeding or a story instead.
• Praise him for using the soother less, but don’t punish him for using it.

DID YOU KNOW
Cleaning a soother in your own mouth or dipping it in honey or syrup can lead to tooth decay.
How Vision Typically Develops

<table>
<thead>
<tr>
<th>Months</th>
<th>6-8</th>
<th>8-12</th>
<th>Over 12</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Sees things of interest and moves toward them</td>
<td>• Uses vision to help her move between things</td>
<td>• Interested in books and stacking toys</td>
</tr>
<tr>
<td></td>
<td>• Eyes appear straight and work together</td>
<td>• Can climb and throw</td>
<td></td>
</tr>
</tbody>
</table>

Remember – all children develop at their own pace.

Keeping Eyes Healthy

Protec ting eyes from injury
- Don’t let her play with anything sharp, or walk or run while carrying pencils, popsicle sticks or other pointy things.
- Childproof your home. (See Childproofing Your Home)
- Limit screen time to 1 hour per day. (See Screen Time)
- Keep her at least 3 metres (10 feet) from the TV.

Protect eyes from the sun
Give your toddler a hat and sunglasses. Lenses should fully cover her eyes and offer 99 to 100% UVA and UVB protection. Any cords or strings should come off easily when pulled to avoid strangulation.

Offer healthy food
A healthy diet helps your child develop in many ways, including vision (see Eating Well).

Help develop her vision
Show her colourful pictures, patterns and mobiles. Encourage her to look at books, climb and run, and play with balls, puzzles and blocks.

Have her eyes checked
The Canadian Association of Optometrists recommends that you get your child’s eyes checked for the first time at 6 months, again before the age of 3, and every year once she starts school.

FAMILY STORY
I thought my daughter might be having problems seeing because when something was handed to her, she would move her hand around until she hit it. Since she got glasses, she’s so much happier and more active.

WARNING SIGNS
Your toddler may have vision problems if she:
- has trouble following things with her eyes or making eye contact
- brings things very close to her eyes to see them
- squints, frowns, blinks or rubs her eyes often
- has headaches
- closes 1 eye or tilts her head when looking at something
- has trouble finding small objects on the floor (after 12 months)
- has red or watery eyes or discharge
- has crossed or turned eyes after 6 months

Talk with an eye doctor (“optometrist”), your health care provider or a public health nurse if you have concerns.

MONEY SENSE
If you get premium assistance through the Medical Services Plan (MSP) – or if, as of January 2020, you get supplemental services – your child may be eligible for the Healthy Kids program. This can help with the cost of eye care. See Dental Care, Vision and Hearing in the Resources chapter for more information.
How Hearing Typically Develops

<table>
<thead>
<tr>
<th>Months</th>
<th>8</th>
<th>9</th>
<th>12</th>
<th>24</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Tries to copy changes in voice pitch</td>
<td>• Tries to copy speech sounds</td>
<td>• Understands simple requests like “open your mouth”</td>
<td>• Points out objects or body parts when asked</td>
</tr>
<tr>
<td></td>
<td>• Babbles (“gaga”)</td>
<td>• Understands simple words like “bye-bye”</td>
<td>• Likes to repeat sounds</td>
<td>• Uses several simple words</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Tries to say a few words</td>
<td>• Follows basic directions like “get the ball”</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Knows the names of people and common things</td>
<td>• Puts 2 words together like “my teddy”</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Hears when you call from another room</td>
<td></td>
</tr>
</tbody>
</table>

Keeping Hearing Healthy

Check hearing early and often

Your baby’s hearing will be checked at birth, either in hospital or at a public health office. Have your child checked again anytime you have concerns. When hearing loss is caught early, more can be done to help.

Protect his ears

• Clean only the outer ear with a clean cloth. Don’t use cotton swabs or put anything inside the ear.
• Keep music and TV volumes low.
• Have your toddler wear ear protection if he’s around a lot of noise, like loud music or fireworks. Don’t give him earplugs, which he can choke on.
• Have him immunized. (See Preventing Sickness)

Reduce ear infections

Frequent ear infections can damage hearing. You can help your toddler avoid infections by:
• breastfeeding (see Breastfeeding Your Toddler)
• not putting him to bed with a bottle
• keeping him away from second-hand smoke

WARNING SIGNS

Your toddler could be at risk of developing hearing problems if he has:
• fluid or a bad smell coming from his ear
• pain in the ear
• redness around the ear
• wax blockage or an object in the ear

He may already have hearing problems if he:
• talks very loudly or softly
• doesn’t respond when called
• always turns the same ear toward sounds
• has trouble understanding what you’re saying (after 36 months)
• isn’t startled by loud noises

If you have concerns, contact your health care provider or public health nurse, or call HealthLink BC at 8-1-1.

MONEY SENSE

If you get premium assistance through the Medical Services Plan (MSP) – or if, as of January 2020, you get supplemental services – your child may be eligible for the Healthy Kids program. This can help with the cost of hearing aids. See Dental Care, Vision and Hearing in the Resources chapter for more information.

Remember – all children develop at their own pace.
You can help your toddler stay healthier by doing 3 simple things:

1. getting her immunized
2. washing her hands
3. keeping surfaces clean

**Immunization**

**What is immunization ("inoculation"/"vaccination")?**
Protecting your child from a disease before it has a chance to make her sick.

**How it works**
Immunizations protect against diseases caused by germs such as bacteria and viruses. Immunizations help your child's body make antibodies to fight diseases.

Immunizations are usually given by injection, by nose ("intranasal") or by mouth ("oral").

**Why immunize?**
Immunization is the best way to prevent your child from getting serious diseases including:

- chicken pox ("varicella")
- diphtheria
- flu ("influenza")
- Haemophilus influenzae
- hepatitis B
- measles and German measles ("rubella")
- meningitis
- mumps
- polio
- rotavirus
- tetanus
- whooping cough ("pertussis")

Thanks to immunization, some of these diseases are now rare in Canada. But the germs that cause them still exist and can make any child who isn't immunized very sick.

**When to immunize**
Different vaccinations are given at different ages. Children in British Columbia usually receive vaccinations at:

- 2 months
- 4 months
- 6 months
- 12 months
- 18 months
- 4 to 6 years
- 11 years (Grade 6)
- 14 years (Grade 9)

The flu shot is given each year.

**DID YOU KNOW**
When you immunize your child, you're also protecting the wider community. When more people are vaccinated, disease can't spread as easily and those most at risk – the elderly and babies too young for vaccination, for example – are safer.

*YOUR TODDLER’S GROWTH, LEARNING AND HEALTH*

**Preventing Sickness**

*DID YOU KNOW* Vaccines included in the routine immunization schedule are free for B.C. children.

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How to Prepare Your Toddler for an Immunization

1. Just before you leave, calmly tell her she’s getting an immunization that will help her stay healthy. Answer her questions honestly but soothingly. Use words like “poke” or “squeeze” instead of “pain” or “hurt.”

2. Try not to let her sense any anxiety you’re feeling.

3. Consider putting on a numbing cream or patch before your appointment. If your child is over 12 months old, ask your health care provider in advance where the immunization will be given so you’ll know where to apply it.

4. Dress her in clothes that let you easily uncover her arms and legs.

5. Bring a comforting toy or blanket.

6. Hold her on your lap while she’s getting the immunization. Comfort her by cuddling or breastfeeding her.

7. Try distracting her with a toy or by helping her do deep breathing.

Is it safe?

Immunization is very safe. Some may cause soreness or slight fever, but these side effects are minor and usually last only 1 or 2 days.

DID YOU KNOW

Serious side effects to immunizations (such as high fever) are very rare. Choosing not to immunize is much more dangerous, since the risks of the disease are far greater than the risk of side effects.

The flu shot

The influenza vaccine protects against the viruses expected to cause influenza in the next cold and flu season. It doesn’t protect against the germs that cause colds. A flu shot is only effective for 1 year.

The flu shot is recommended for all children each year. It’s free to those 6 months to 5 years old, for older children with serious health problems, and for children living with people at risk and those who visit health care facilities. Parents, babysitters and other caregivers of young children should also get a flu shot.

If your toddler is getting a flu shot for the first time, they’ll need 2 doses, given 4 weeks apart.

Try this

Use the Child Health Passport (available through your public health nurse) or the immunizebc.ca app to keep track of your child’s immunizations. Contact your public health unit or check immunizebc.ca for updates to the immunization schedule, too.
**Hand Washing**

Hand washing is the best and easiest way to help prevent your toddler from getting sick. Wash your hands and your child’s often, especially:
- after changing a diaper or using the toilet
- after blowing your nose or your child’s
- after touching animals, tidying up after them or cleaning the litter box
- when caring for a sick child
- when preparing food
- before eating

**HOW TO**

Wash hands properly

1. Use plain soap and warm water.
2. Wash for 15 to 20 seconds – about the time it takes to sing *Happy Birthday* or a favourite song of the same length.
3. Rinse.
4. Dry well with a clean towel.

**TRY THIS**

If you can’t wash your hands, rub alcohol-based hand sanitizer between your hands (and your toddler’s) until the gel dries.

**DID YOU KNOW**

Antibacterial soap and cleaners help grow “superbugs” – germs that are too strong to treat with antibiotics. Use plain soap instead.

**Keeping Surfaces Clean**

You can help keep your toddler healthy by regularly cleaning surfaces including:
- kitchen counters, cutting boards and utensils
- high chairs, bibs and dishes
- strollers, cribs, changing tables and toys
- garbage bins
- pet toys, beds and litter boxes

**HOW TO**

Make cleaning easier

1. Keep cleaning supplies handy, but locked away from your toddler.
2. Clean the most important areas first.
3. Use plain soap and water. To save time, try paper towels or disposable wipes.
4. Clean up vomit, diarrhea, blood and pet waste using 1 part bleach in 9 parts water. Wear rubber gloves.
5. Wash cleaning cloths often, and don’t use them to wipe your child’s face.

**PARTNERS**

What You Can Do

Split up the household cleaning tasks with your partner. Have older children help, too.
Toddlers can get sick very quickly. You may suddenly notice glassy eyes or pale skin. Or your child might cry more or be extra clingy. If you’re unsure of what to do, you can get advice through:

- your doctor or pharmacist
- a public health nurse
- HealthLink BC at 8-1-1. Free information from registered nurses in 130 languages anytime – day or night. You can also speak to a pharmacist about medications from 5 pm to 9 am nightly.

### Fever

**What is a fever?**

A temperature of **38°C (100.4°F) or higher** when measured in the armpit. Fever is a way for the body to fight infection. It’s not usually dangerous, especially if there are no other symptoms and if it goes away in 3 or 4 days. But it can make your toddler uncomfortable and dehydrated.

**HOW TO Check your toddler’s temperature in the armpit**

1. Put the tip of a digital thermometer high up in the centre of your toddler’s armpit. Make sure it’s touching bare skin on all sides.
2. Tuck his arm snugly against his body.
4. Wait at least 3 minutes, or until the thermometer beeps.
5. Gently remove.

**Don’t** use mercury (glass) thermometers (which can be dangerous), forehead strips or pacifier thermometers (which are less accurate), or mouth thermometers (which are hard for toddlers to keep under the tongue).

**Method** | **Normal temperature range**
---|---
Armpit | 36.5°C to 37.5°C (97.8°F to 99.5°F)
Mouth (not recommended for toddlers) | 35.5°C to 37.5°C (95.9°F to 99.5°F)
Ear (2 years and older) | 35.8°C to 38°C (96.4°F to 100.4°F)
Rectum (bum) | 36.6°C to 38°C (97.9°F to 100.4°F)

**What you can do**

✔ Let him rest.
✔ Breastfeed more, and offer him more to drink between feedings.
✔ Take off any extra clothes he’s wearing.
✔ Give him a lukewarm bath.
✔ Give him extra attention.
✔ Practise good hand washing. (See Preventing Sickness)
✔ Give him acetaminophen (Children’s Tylenol). Read the label carefully to find the right amount.

**DID YOU KNOW**

Fever doesn’t necessarily tell you how sick your child is. A simple cold may cause a high fever of 39°C (102°F), while a serious infection may cause a mild fever or none at all.
Cough and Cold

What is a cold?
A virus that can cause runny nose, cough, fever, sore throat and fussiness. Most children get several mild colds every year. These usually improve within a week and go away within 2 weeks.

What you can do
✔ Let him rest.
✔ Give him plenty of fluids like water or your milk, if you’re still breastfeeding.
✔ Keep the room comfortable but not hot.
✔ Use a cool air humidifier, if you have one.
✔ Put saline drops in his nose.
✔ Use an extra pillow to raise his head by 2½ to 5 cm (1 to 2 inches).
✔ Give him extra attention.
✔ Practise good hand washing. (See Preventing Sickness)
✔ Give him acetaminophen (Children’s Tylenol). Read the label carefully to find the right amount.

DANGER
Never give your toddler aspirin or anything else containing acetylsalicylic acid (ASA), which can damage his brain and liver. Don’t give him decongestants or antihistamines unless recommended by your health care provider. And avoid cough and cold medicines, which don’t usually work for young children and can be harmful. Always check with your health care provider before giving your toddler any new medication.

Cough and Cold Flu

What is the flu (“influenza”)?
A virus that can cause more serious fever, headache, muscle pain, runny nose, sore throat, tiredness, cough, nausea, vomiting and diarrhea. Flu can be life-threatening to very young children and those with other illnesses.

What you can do
✔ Call your doctor or HealthLink BC at 8-1-1 if you think your toddler has the flu.
✔ Let him rest.
✔ Breastfeed him often and give him plenty of water and other fluids.
✔ Keep the room comfortable but not hot.
✔ Give him extra attention.
✔ Practise good hand washing. (See Preventing Sickness)
✔ Give him acetaminophen (Children’s Tylenol). Read the label carefully to find the right amount.

SEEK CARE
Call your health care provider if your toddler has signs of dehydration:
• peeing less (fewer than 4 wet diapers in 24 hours in infants and fewer than 3 wet diapers in 24 hours in older children)
• being extra thirsty
• no tears when crying
• dry skin, mouth and tongue
• faster heartbeat
• sunken eyes
• greyish skin
• sunken soft spot on the head (if 18 months or younger)

HOW TO Help prevent the spread of colds and flu
✔ Get the flu vaccine each fall. (See Preventing Sickness)
✔ Wash hands regularly. (See Preventing Sickness)
✔ Throw away tissues right after use.
✔ Cough and sneeze into shirt sleeves, not hands.
✔ Avoid touching the face.
✔ Disinfect doorknobs, light switches, keyboards and other shared items.
✔ Eat well and stay active.
Visiting a Health Care Provider

**HOW TO**
Make health care visits easier

Before you go:
- ✔ Try to visit when your toddler is well-rested and fed.
- ✔ Show him what the health care worker might do, like look in his ears.
- ✔ Encourage him to play “doctor” or “dentist” with a toy.
- ✔ Read him books about doctor or dentist visits.
- ✔ Pack a favourite blanket or toy.

At the visit:
- ✔ Talk to him about what’s happening and why. “The nurse is going to give you an immunization in the arm to keep you healthy. I’ll hold you the whole time.”
- ✔ Answer his questions simply and directly.
- ✔ Find ways to praise his efforts, even if he cries the whole time.

**FAMILY STORY**
My toddlers played with their doctor kit a lot. They used the stethoscope and pretend needles to make each other “feel better.” I think that’s why they were never scared of the doctor.

**DID YOU KNOW**
Antibiotics (which attack bacteria) can’t cure colds or flu (which are caused by viruses). And taking antibiotics means risking side effects, killing good bacteria, and adding to the growth of superbugs.
Being a parent is one of the most important and rewarding things you can do. It’s also hard work.

How you parent will be affected by the way you were brought up. Some people want to parent the way they were parented. Others want to do the opposite, while some want to do a bit of both. Your style will also be guided by what you read and what you see others do. And, of course, you’ll learn as you go.

To help you along the way, try:

- learning new parenting skills – like using positive discipline (see Positive Discipline) – by taking classes, talking with other parents and reading books
- finding the extra support you need – from child care to help for special needs – by talking to your health care provider and seeing the Resources section
- staying healthy by being physically active, eating well and seeking help if you’re depressed or overwhelmed (see Parenting Issues)
- thinking about how you were parented and how that affects the way you care for your toddler
- building a support team of family and friends. Remember, it takes a village to raise a child.

There are many places to go for help. See the Resources chapter for information.
Your toddler will often do things you don’t like. But there’s usually a reason for why she’s behaving the way she is:

- **Does she have the ability to do what you expect?** (See Temperament)
- **Is the way she’s acting a normal stage in her development?** It’s natural for your toddler to see herself as the centre of the world. Toddlers have very big emotions, which they haven’t yet figured out how to deal with or communicate. This can feel overwhelming.
- **Is she feeling okay, or does she need something?** She may be hungry, tired or over-stimulated by too many activities.
- **Has something changed in her life?** Toddlers do best with routine. Knowing what to expect gives her a feeling of control and security.
- **Is she getting the connection she needs?** You’ll help her feel secure by responding to her warmly and consistently.
- **Is the setting suitable for her?** Some things – like a long sit-down meal or a crowded event – may require more control than she has.

**Remember that we all – parents and children – feel all kinds of emotions, including anger, frustration, sadness and excitement.** The key is to learn to handle our emotions in healthy ways.

**KEY TAKEAWAY**

When your toddler acts in a certain way, she’s trying to tell you that she needs something, like rest, food, comfort or connection with you. By watching her closely, you’ll start to learn what each behaviour means, and how to respond in a way that builds your bond and helps her learn and grow.
Learning to be independent is an important part of your toddler’s development. Sometimes this means he’ll do things that you don’t like. Rather than punishing him, though, you can use positive discipline to guide him.

**DID YOU KNOW**
Discipline doesn’t need to be negative to be effective. By showing rather than training your child, you can help him learn to understand his feelings and act in healthy ways. At the same time, you’ll build a strong and loving bond between parent and child.

### Positive Discipline vs. Punishment

**What is punishment?**
A focus on training that uses harsh consequences to make a child obey. May be physical (like spanking), verbal (like shouting) or emotional (like shaming). Punishment isn’t effective and doesn’t help your child develop healthy life skills.

**What is positive discipline?**
A focus on showing your child how to act in positive ways.

Positive discipline:
- is built on love and trust
- shows respect for your child and his feelings
- is fair
- suits your child’s age
- is consistent
- occurs right when the problem behaviour happens
- is explained in a way the child can understand

### Step 1: Set the stage for positive behaviour
You can help set your child up to behave his best – and avoid problems before they start.

**Communicate with your toddler:**
- Get his attention before you speak.
- Get down to his level and make eye contact.
- Use simple words to tell him what you want him to do.
- Make only 1 request at a time.
- Listen to what he’s saying.
- Help him learn to name and express his feelings.
- Tell him what to do instead of what not to do: “Please ride on the sidewalk,” for example, instead of “don’t ride on the street.”

**BRAIN BUILDER**
By responding to your toddler’s behaviour in a warm and consistent way, you’ll help build his brain to handle big emotions and make healthy decisions (see Brain Development).
Provide a safe and stimulating environment:
- Spend lots of time with your toddler doing things he likes.
- Offer interesting toys and activities. (See Play, Toys)
- Childproof your home so you can say “no” less often and your toddler will be more free to explore. (See Childproofing Your Home)
- Give him room to explore while supervising him closely.

Focus on routines:
- Keep to a schedule for naps and mealtimes.
- Follow a bedtime routine.
- Tell your toddler about any upcoming changes to the routine.
- Set limits and stick to them so he knows what’s expected.
- Put healthy limits on screen time. (See Screen Time)

Set a good example:
- Model sharing, taking turns and using good manners.
- Be calm and patient in dealing with him and others.
- Name your own feelings so that your toddler learns what to call them and sees how you handle them in a healthy way: “I’m feeling very frustrated. I’m going to take some deep breaths so I can calm down and think about what to do.”

Praise good behaviour:
- Focus on what he did, not on whether he’s “good” or “bad”: “How wonderful that you went pee in the potty!” for example, instead of “good boy.”
- Tell him right away when you see him behaving well: “Wow! You shared your toy with that boy so nicely. That’s hard to do and you did it!”

Use cooperation instead of control:
- Let him make simple choices, like which colour shirt to wear. Limit choices to 2, so you don’t confuse him.
- When you say no, offer alternatives: “No, that paper is for Daddy, but you can play with this book.”
- Negotiate with him: “I’ll read you a story after you’ve picked up the blocks.”
- Talk about conflicts so he can learn empathy and problem-solving skills (“I can see you’re angry at Tim for taking the ball”), let him know that other children have needs, too (“Tim also wants to have a turn”), and offer solutions (“Maybe you can let him have a turn and then he’ll give you a turn”).

BRAIN BUILDER
Allowing your toddler to make simple choices gives him some control and will help him learn to think for himself.

FAMILY STORY
Once I started letting my toddler make some decisions (“Do you want to eat your carrots first or your tomatoes first?”), he was happier. And I knew I was helping him learn to be independent.

Step 2: Deal positively with problem behaviour
When your child does misbehave, try using a positive discipline strategy:

Strategy 1
Connect with him. Make eye contact and let him see that you’re calm, loving and there to help him.

Strategy 2
Help him name his emotions. When your toddler learns to understand his feelings, he’ll be able to deal with them better. Instead of “What’s wrong with you?” try, “I can see you’re angry. It’s normal to feel angry when we can’t do what we want. But Mommy is trying to keep you safe.”
Strategy 3
Use a “time-in” to calmly comfort your toddler in a quiet space. Remove him from the situation, listen to him and help him name his emotions and figure out another way to react. When he’s ready to return, remind him of what you just talked about.

Strategy 4
Redirect him when he’s doing something that’s okay, but the way he’s doing it isn’t. If he’s throwing a ball in the kitchen, for example, offer him some safe utensils to play with, or give him a job to do.

Strategy 5
Distract him – with a toy or a book, for example – when he’s doing something you don’t want him to do.

Strategy 6
Explain the consequences of what he’s doing. If he’s pouring out his bubble-making soap, for example, tell him, “There won’t be any bubbles left if you pour that out.” If he decides to pour it out anyway, say, “That’s too bad – the bubbles are all gone now.” He may be upset (and it’s okay to comfort him), but he’ll have learned that choices have consequences.

Strategy 7
Find a compromise that works for both of you. Of course, some things – like playing with matches – are unsafe and aren’t open for compromise. Use those times to teach, too – “I can see you’re angry. But I can’t let you do that because I love you and I want to keep you safe.”

Positive Discipline by Age
As your child grows, you’ll need to adapt the way you discipline him.

6 to 12 months
At this age, your toddler isn’t being naughty on purpose, and he’s not able to understand the consequences of his actions.

What works?
• routine – a regular schedule of rest, feeding and play
• redirecting
• distracting
• lots of quiet time spent together
• a comfort toy

What doesn’t?
• consequences

12 to 24 months
As he grows, your toddler will want to test limits, explore, and have more control. He may be demanding and easily frustrated, but he isn’t misbehaving on purpose. Safety is key; toddlers at this age should be given space to explore, but shouldn’t be left alone.

What works?
• childproofing, so you won’t need to say no as often
• supervision
• offering choices
• redirecting
• distracting
• consequences: “If you throw your food off the table, then no more food.”
• communication and empathy; helping him name his emotions and understand how his actions affect others

What doesn’t?
• time-outs – which can increase separation anxiety or fear of being abandoned

24 to 36 months
At this age, your toddler is going between independence and dependence. He may be possessive and demanding and have outbursts and temper tantrums.

What works?
• connection and empathy; helping him name his emotions and understand how his actions affect others
• patience
• childproofing
• routine
• supervision
• setting limits
• offering choices
• redirecting
• distracting
• time-ins that are short, boring and start right away
Challenging behaviours can be stressful to deal with. As a parent, you may feel that you’ve done something wrong. Or you may be reminded of a difficult situation you faced as a child.

But as your toddler grows and seeks more independence, it’s normal for her to act out. She’s learning about the world and what she can and can’t do. Her behaviour is also her way of telling you that she needs something, like rest, food, comfort or connection to her parent or caregiver.

When your toddler’s behaviour is challenging, your job is to help her understand what she’s feeling and how to handle her emotions in a healthy way. It’s also your chance to respond to her needs in a way that builds a strong and respectful bond with her.

**Biting**

✔ State the limit clearly and simply: “No, please don’t bite. It hurts.” Then move on.

✔ If she bites while breastfeeding, firmly tell her no and remove her from the breast. Then try again. (See Breastfeeding Your Toddler)

✘ Don’t bite her back. It may frighten and confuse her, and will tell her that biting is okay.

✘ Don’t laugh.

**Tantrums**

**Before a tantrum happens:**

✔ Keep to routines around rest, activity and meal and snack times. Take healthy snacks and water with you when you go out.

✔ Let her know ahead of time what’s going to happen and what you want her to do: “We’re going to the store for milk and fruit. You can help me choose the bananas.”

✔ Find ways to help her deal with her feelings, like running fast or using words.

✔ Try not to say no to every request. Give her control over little things.

**If you see a tantrum coming on:**

✔ Redirect her, distract her, or try to change what’s bothering her: “I see you’re getting frustrated. Can I help you?”

✔ Give her quiet time if she’s tired.

✔ Give her food if she’s hungry.

**If she’s having a tantrum:**

✔ Take some deep breaths and stay calm. Don’t scream or spank her.

✔ Try to comfort her: “I’m here and I love you.” But don’t try to talk about her feelings until later, when everyone is calm.

✔ Try holding her firmly but lovingly, but stop if it seems to make the tantrum worse.

✔ If you’re in public, remember that most people will understand.

✔ Make sure that she won’t get hurt, hurt others or damage anything.

**When the tantrum is over:**

✔ Cuddle and comfort her.

✔ Praise her for regaining control.

✔ Help her name the feelings she had before, during and after the tantrum.

✔ Talk about what she could do next time – like telling you she’s upset or hungry before the feelings get too big to handle.
DID YOU KNOW
Like many parents, you may be uncomfortable when your child shows big emotions like anger or sadness. It might remind you of hard times in your life, or you may just be less comfortable sharing feelings. Understanding why you feel uncomfortable with your toddler’s emotions can help you respond to your child in a healthy and helpful way, instead of reacting out of your own sadness, anger or frustration.

BRAIN BUILDER
By staying calm when your child is having a tantrum, you’re showing her how to respond to stressful situations.

Fighting With Other Children
✔ If you’re worried about safety, step in right away.
✔ If safety’s not an issue, stay back for a minute to see if they can solve the problem themselves.
✔ Suggest fair solutions, like sharing: “Amy really likes the truck you’re playing with. When you’re done with it, can you give her a turn?”

Whining
✔ Check if she’s hungry, tired or uncomfortable.
✔ Help her find the words to express what’s bothering her.
✔ Praise her when she’s not whining.

Dawdling (Moving Slowly)
✔ Give her plenty of notice before changing activities.
✔ Build in extra time to do things, especially when you know that switching activities will be hard, like putting toys away to get ready for bed.
✔ Tell her what you need her to do clearly and simply: “Put on your coat now, please.”
✔ Put away toys, turn off the TV and get rid of other distractions when you’re in a hurry. And give her some control over the situation by giving her a job to do.
Parenting is challenging, and staying calm can be hard for anyone. All parents need support, and it doesn't make you a bad parent to ask for it. Remember that your toddler will learn how to handle stress by watching you. Learning to stay calm will be good for you and help your toddler develop in a healthy way.

What you can do:
✔ Stick to routines to help your toddler feel and act his best.
✔ Learn about what kinds of behaviour are typical at different ages. (See Typical Child Development by Age)
✔ Get as much rest as you can.
✔ Eat well.
✔ Make time for yourself, even a moment here and there.
✔ Spend time outdoors.
✔ Accept that you may not always be able to soothe your child, and that letting him cry for a few minutes won’t harm him.
✔ Talk with someone about your feelings, and to other parents about your experiences.
✔ See the Resources section for services and supports.

TRY THIS
No parent stays calm all the time. If you lose your temper, apologize to your toddler. This will model the kind of behaviour you expect from him.

DID YOU KNOW
Staying calm as a parent can be even harder if you grew up with a caregiver who had a temper or who was easily upset. Think about how your toddler’s behaviour makes you feel and about how your parents responded to you when you were little. This can help you understand your reactions and make it easier to stay calm and respond to your child in healthy ways.

What is Shaken Baby Syndrome?
The possible effects – brain damage, blindness or even death – of shaking a young child, even for a few seconds.

DANGER
Never shake your toddler. If you’re feeling overwhelmed and afraid you might hurt your child, put him in a safe place and get help immediately. Call a family member, a friend, a public health nurse, your health care provider or HealthLink BC at 8-1-1.

HOW TO React if you feel you’re losing control
1. Gently put your toddler down in a safe place, like the crib.
2. Leave the room for a few minutes.
3. Take some deep breaths and count to 10, cry into a pillow or run on the spot. Or call a friend or relative to ask for help.
4. Wait until you’re calm to try comforting him again.
Toddlers like routine. So when change happens, it can be hard on them.

**Signs Your Toddler is Upset**
Your toddler may not be able to tell you in words how she’s feeling. Instead, she may:
- not want to eat
- cry
- have nightmares or problems sleeping
- have temper tantrums
- be clingy
- be very quiet
- go back to old habits like sucking her thumb

**Dealing With Planned Changes**
With some changes – like a new baby or moving house – you can prepare your toddler in advance. Try:
- using positive words to talk about the upcoming change
- listening to her worries
- answering her questions simply and honestly
- telling her everything will be okay
- reading books on the subject to her
- giving her toys that let her act out the change – a toy truck if you’re moving, for example
- not taking on more than one big change at a time
- making extra time to connect, and giving lots of love and attention
- making time for her usual routines and favourite activities

**A new baby**
A new baby changes routines and takes time and attention away from your toddler. So it’s normal for her to be upset.

Help your toddler prepare by:
- letting her feel the baby kick
- reading her books about babies and big brothers and sisters
- showing your toddler her own baby pictures and talking about what she was like as a baby
- giving her a baby doll to care for
- making any big changes – like toilet learning – as early as possible before the birth, or waiting until after the birth, when your toddler has had time to adjust
- talking to her about what babies do or visiting friends with babies, so she knows what to expect
- planning for her care during the delivery. If you want her to be at the birth, arrange for someone other than your partner to take care of her. And tell her about the medical equipment she might see.

**KEY TAKEAWAY**
When change happens, tell your toddler that she’s loved, that she’ll always be taken care of and that the change isn’t her fault.

**DID YOU KNOW**
When faced with big changes, it’s normal for toddlers to temporarily return to old habits (like using diapers) or challenging behaviours (like throwing tantrums). Be patient and provide extra love and support.
On the day of the birth, try:
✔ keeping your toddler’s day as normal as possible
✔ having her visit the baby when no other visitors are there
✔ letting her hold and talk to the baby
✔ talking about how much the baby looks like her or how much the baby seems to like her

At home after the birth, try:
✔ keeping up your previous routines
✔ making time to do the special things you used to do together
✔ being extra patient with her, even if she returns to old habits
✔ including her in your time with the baby, like having her sit with you while you breastfeed
✔ not using the baby as a reason for not doing something. Instead of “I can’t play with you because I have to feed the baby,” for instance, try, “When I’ve finished feeding the baby, let’s play!”

As your children grow, try:
✔ valuing their differences, instead of comparing them
✔ encouraging them to play together and also giving them time apart
✔ letting each one know they’re special
✔ not giving them labels like “the baby”
✔ setting clear rules for how they treat each other
Dealing With Loss and Grief

Death

Your toddler doesn’t understand that some things are final. So she may have little or no reaction to someone’s death. Or she may cry, be angry, or worry that someone else will die.

Before facing a loss, prepare your toddler by:

☑ teaching her that death is a part of life by talking about things like the changing of the seasons
☑ answering questions truthfully without creating new fears. If she asks, “Will you and I die?” you can say, “Yes, we all die, but Mommy won’t die for a very long time and neither will you.”

When a loved one or a pet dies, try:

☑ using simple words
☑ giving details only if she asks
☑ talking about your cultural and religious beliefs about death
☑ letting her express her feelings
☑ showing her that grief is normal and will change over time
☑ keeping daily routines so she feels secure
☑ talking about the person or pet and looking at pictures
☑ giving her extra love and attention

DID YOU KNOW
Even if you don’t tell your toddler about a serious loss, she’ll sense that something is different. And not telling her may make her more afraid.

TRY THIS
When a loved one dies, don’t say he’s “gone to sleep” or “gone away” or your toddler may get scared of sleeping or travelling.

FAMILY STORY
When my brother died unexpectedly, I gently explained to our 2-year-old that his uncle had died and wouldn’t be back again. He just said “OK” and that was it. A few weeks later, though, he asked when he was coming to visit. He didn’t understand that it was final.

Finding emotional support

When you’re going through difficult times, it’s okay for your child to see that you’re upset. Explain to them what’s going on and how you’re feeling in a way that they can understand. But remember that your child is not the right person to go to for emotional support. Find another adult – a friend, health care provider or counsellor – to talk to.

Family breakup

If your family breaks up, your toddler needs to feel safe and secure.

Help your toddler by:

☑ being calm and patient, despite your feelings
☑ giving her lots of love and attention, and telling her you won’t leave her
☑ keeping to your usual routines and rules
☑ letting her ask questions, even if she asks the same ones over and over
☑ giving direct and simple answers
☑ telling her it’s not her fault
☑ letting her talk happily about her other parent, and not speaking negatively about them to her
☑ making sure any new home she’ll be spending time at is comfortable and welcoming

See Family Resources in the Resources chapter for more information.

TRY THIS
After a separation, think of yourself and your ex-partner as co-workers with the shared job of caring for your toddler. If you’re not ready to talk to each other calmly, use email or texts, or write information in a book that you send back and forth. And ask a friend or relative to help with pickup and drop-off.
Emotional Upset
As a parent, it’s normal to experience emotional ups and downs. But it’s important for you and your loved ones to be able to recognize when you might need some extra support.

MEDICAL EMERGENCY
If you have thoughts of hurting yourself or your toddler, get help right away. Call HealthLink BC at 8-1-1 (24 hours a day, 7 days a week) to speak confidentially with a registered nurse.

KEY TAKEAWAY
Asking for help when you need it is a sign of strength, not weakness. After all, taking care of yourself is good for both you and your child.

DID YOU KNOW
Perinatal depression can affect women or men, and can occur during pregnancy or at any time in the year after giving birth, adopting, miscarrying or having a stillbirth.

Perinatal depression
What is perinatal depression?
A serious, long-lasting depression that can happen during pregnancy or after the birth.

While many people experience the “baby blues” right after giving birth, some experience more serious, longer-lasting distress. You may feel like you can’t cope or that you might harm yourself or your child.

Signs and symptoms:
Do you:
• cry uncontrollably?
• feel guilty, worthless or unfit to care for your child?
• think about harming yourself or your child?
• have panic attacks or severe mood swings?
• feel unable to enjoy your child or your usual activities?
• have trouble sleeping or extreme fatigue?

People who have had depression or anxiety before are more likely to have perinatal depression. Those with added stress in their lives – health or money problems, unstable or unsupportive relationships or a sick child, for example – are also at higher risk.

Perinatal anxiety
What is perinatal anxiety?
Recurring intense worry or disabling fear that can happen during pregnancy or after the birth.

Some parents worry more than usual that something bad will happen, or have uncontrollable thoughts about harming their child, either accidentally or on purpose. Anxiety disorders may also cause you to feel physically unwell.

Signs and symptoms:
Do you:
• feel dizzy, sweaty or shaky?
• have gas, constipation or diarrhea?
• feel short of breath, panicky or like your heart is racing?
• get easily startled?
• feel restless or moody?
• avoid family, friends and activities?
• have trouble sleeping?

Anxiety may cause you to check on your toddler all the time or to avoid doing day-to-day things, like driving, with her.

If you’ve had anxiety or depression or gone through trauma in the past, or if there’s someone in your family who has had mental health issues, you may be at greater risk. Lack of sleep and not enough support may worsen anxiety.
Getting help

Perinatal depression and anxiety are common and treatable. You’re not alone, and there are many ways to find support. Getting help early can mean feeling better sooner.

Health care providers – Talk with your doctor or public health nurse. Or call HealthLink BC at 8-1-1 anytime, day or night, to speak confidentially with a registered nurse.

Friends, family and community – Tell the people close to you how you’re feeling, and listen to their concerns. Sometimes it’s our friends and family who first see that we need help.

PARTNERS

What You Can Do

• Encourage your partner to talk about their feelings. Listen and take them seriously.
• Let them know they’re loved and valued, without expecting sex.
• Take on household chores and child care.
• Offer to go with them to see the doctor.
• Take care of yourself, too. Remember that you can also be affected by perinatal depression and anxiety.

Taking Care of Your Relationship With Your Partner

Toddlers need so much focus that it can be easy for parents to neglect each other. But it’s important that you take care of your relationship.

Try:
✔ going on dates and leaving your toddler with a babysitter
✔ making time for sex
✔ travelling to and from work together
✔ making meals together
✔ finding a few minutes to connect before your toddler wakes up or after she’s in bed

TRY THIS

If your child is in child care, make a mid-week date to meet for a walk or coffee and reconnect with your partner.

DID YOU KNOW

It’s normal for a toddler to prefer one parent over another at different stages. Try not to take it personally or let it cause bad feelings between you and your partner.

Differences in Parenting Style

Most parents follow 1 of 3 basic styles:

Authoritative

The most successful style. The parent is gentle but firm and consistent. He explains the reasons for decisions and models good behaviour. The child will likely feel secure, have self-respect and grow into a responsible, thoughtful adult.

Permissive

The parent has a relaxed attitude and usually lets the child do what she wants. The child will likely feel loved, but may not learn consequences.

Authoritarian

The parent is strict and expects the child to obey. The child behaves to avoid punishment, but may not learn to understand her emotions and to act in a healthy way.

Sometimes your parenting style may not match your partner’s. But your toddler will do best when you and your partner work together by:
✔ respecting the differences in your parenting styles
✔ giving consistent messages

The “NESTS” approach to self-care

• Eat Nutritious food.
• Get some Exercise each day.
• Try to get enough Sleep.
• Find a bit of Time for yourself. Hire a babysitter or ask family to help with child care.
• Seek out Support. Tell your partner, friends and family what you need. Contact the Pacific Post Partum Support Society (postpartum.org) or join a postpartum support group.
✔ talking about your disagreements in private
✔ making compromises and negotiating
✔ getting help when you need it from friends, family, a counsellor, parenting courses or books

Remember – your parenting style and your partner’s will change and grow as you learn about yourselves and your child.

What you can do

• Combine the best of your two backgrounds. Celebrate the holidays, speak the languages and cook the traditional foods from both cultures.
• Make new family traditions that focus on your shared core values.

Parenting on Your Own

No matter how small your family, you can make it strong by:

✔ spending quality, loving time together
✔ focusing on routines
✔ building a team of friends and family that can provide emotional support, companionship, emergency help and child care
✔ using positive discipline (see Positive Discipline)
✔ taking care of yourself by eating well, exercising and getting enough sleep
✔ finding ways to spend more time with your toddler, like asking for flexible hours at work

See the Resources section for more information on supports and services.

TRY THIS

Trade babysitting time with other single parents.

BE AWARE

Try not to treat your toddler as an adult. Talk over serious issues with other adults. And when you feel overwhelmed, ask for help from friends, family members or professionals.

DID YOU KNOW

About 20% of Canadian children live in single-parent families. About 80% of these families are headed by women.

DID YOU KNOW

In some cultures, grandparents and other family members discipline a child. In other cultures, only parents do. It’s important that you and your partner agree on how you want to discipline your child and that you can support one another in explaining your wishes to others in your family.

Cultural Differences in Parenting

Cultural beliefs and traditions can enrich a toddler’s life. But when you and your partner have different cultural backgrounds, conflicts may come up.

Talk with your partner about what cultural values are most important to them. Tell your partner what’s important to you. Then find the core values that you share. Use these to create your own family traditions.

FAMILY STORY

My mother couldn’t read English and didn’t know any of the English nursery rhymes. So I took her to the library to pick out picture books. She used them to tell her own stories to my son in Mandarin.

FAMILY STORY

It was important to us that our toddler was exposed to Hindi. I sang her a traditional nursery rhyme about 10 birds sitting on a tree. Soon, she could count to 10 in my native language and knew the Hindi names of birds and trees.
Parenting a Toddler with Special Needs

Parenting a toddler with special needs brings both joys and challenges. It may not be what you expected, but it can still be an amazing and wonderful journey.

You can help make the challenges easier by:

✔ joining a support group
✔ talking with your health care provider about your toddler’s needs and about services available to help you
✔ talking openly with your family and setting boundaries if you need to
✔ asking for help from professionals, family, friends and organizations
✔ taking care of yourself by exercising, eating well, getting enough sleep and taking breaks from child care
✔ enjoying your toddler and celebrating his strengths and abilities, rather than just focusing on difficulties and tasks
✔ knowing that it’s normal to feel emotional about your child’s needs

Building a supportive team

Parenting a toddler with special needs usually means working with a team of specialists and professionals.

**HOW TO Build a strong health care team**

✔ Work with your health care provider to get support as soon as possible.
✔ Make sure all members of your team know what others are doing.
✔ Ask a lot of questions.
✔ Take notes during meetings.
✔ Bring a friend or family member to meetings.
✔ Get support from a case coordinator or social worker to keep things organized.
✔ Keep a journal about your toddler’s progress.
✔ Trust your instincts. Speak up if you think something is being overlooked.

**FAMILY STORY**

When our son was diagnosed with Down syndrome, we were devastated. As we moved through the process of grieving 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’ve 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.

**DID YOU KNOW**

Like all children, toddlers with special needs want to play, try out new skills and get love, attention and praise. And they go through many of the same stages of development as other children, just at different rates.

**KEY TAKEAWAY**

You’re the expert in your toddler’s needs. You understand him better than anyone else. Use this knowledge to help the professionals develop the best treatment plan for him.
It can be challenging to balance parenting with the demands of work. You can make it easier by:

✔ choosing the best child care you can
✔ making mornings run smoothly by following routines, preparing things the night before, and taking time for yourself before your toddler wakes up
✔ taking a few minutes for yourself after work before re-joining your toddler
✔ sharing household chores and spreading them out over the week
✔ having a child care plan for when your toddler is sick

Choosing Child Care
The child care you use will depend on what’s available in your community and what you can afford. Consider, too:

• What hours and days do you need child care?
• Does your toddler like large groups, small groups or one-on-one attention?

Whatever type of child care you use, ensure:

• your toddler will be safe
• you’re comfortable with the caregiver’s qualifications
• you agree with their approach
• they’ll encourage your child’s development
• you trust them with your toddler

Types of Child Care
Outside your home: licensed vs. licence-not-required child care

What is licensed child care?
Programs that are monitored and regularly inspected by regional health authorities. Licensed child care programs must meet specific requirements for health and safety, staffing qualifications, record-keeping, space, equipment, child-to-staff ratios and programming.

What is licence-not-required child care?
Providers that aren’t monitored or inspected. Licence-not-required providers can care for up to 2 children (or 2 groups of siblings) who aren’t related to them. Parents are responsible for overseeing the care and safety of their own children.

In your home
In-home care can range from having the help of a grandparent to hiring a live-in nanny. With in-home care, your toddler is able to stay in the place he knows best. There’s no travel and no special arrangements to be made if he gets sick. And if your in-home caregiver is from your own cultural group, holidays and traditions can be honoured and family languages can be taught.
Babysitters
When you need a casual babysitter, remember – the younger your child, the older the babysitter should be. Most children under 12 aren’t old enough to deal with problems and emergencies.

Before you leave your child with a new caregiver – whether a friend, family member or babysitter – prepare by:
• watching them hold and play with your child
• asking how they would deal with crying or fussiness
• watching as they feed and diaper him
• explaining your safe sleep routines (see Sleep and Your Toddler)
• asking if they’ve taken a babysitting course
• being clear about your Dos and Don’ts:
  ✔ Follow your bedtime and safer sleep routines.
  ✔ Check your child often while he’s sleeping.
  ✔ Contact you if there are problems.
  ✘ Never hit or shake a child.
  ✘ Don’t heat his bottle in the microwave or on the stove. Use a container of warm tap water instead.

When the babysitter arrives, show them where things are kept – including the list of emergency numbers. Tell them where you’re going, when you’ll return and how you can be reached.

Helping Your Toddler Adjust to Child Care
Before leaving your child with a child care provider, try:
• talking to your toddler about it
• reading books together about child care
• letting him spend time with the caregivers and the other children with you there

Make his first days easier by:
• staying as long as you need to
• asking the caregiver to give him extra attention
• letting him bring a blanket or toy
• telling him when you’re leaving and assuring him that you’ll return at a certain time
• creating a routine in which you say and do the same things each time you leave

Make every day easier by:
• letting the caregiver know if you’ll be late
• giving your child lots of extra attention when you return
• talking to him about what he did while you were away and telling him what you did
• asking the caregiver about your child’s day

FAMILY STORY
My mother, who grew up in Iran, took care of my child. She and my daughter regularly attended a drop-in held in Farsi. My mother was able to meet with mothers and grandmothers and speak her native language, and my daughter was able to play with other children.
Dealing With Unhappiness

DID YOU KNOW
Many toddlers go through a “honeymoon phase” in which they’re happy with their child care for several weeks, then unhappy.

If your toddler seems unhappy, try:
• talking to his caregivers and asking if they’ve noticed anything, like not eating or not napping
• calling to check how he’s doing or dropping in to see for yourself
• finding out if he stays upset after you leave
• listening to him about what he likes and what he doesn’t like

If his unhappiness continues, think about other child care options.

Learn more about choosing child care in the Guide to Selecting and Monitoring Child Care in BC (see Child Care in the Resources chapter).

MONEY SENSE

The Affordable Child Care Benefit (ACCB) pays up to $1,250 per month to help with the cost of child care. Visit the ACCB website to estimate your benefit amount and apply for funding. For more information, contact the Child Care Service Centre, Child Care Resource & Referral centres, Immigrant Services Society of BC or Service BC (see Child Care in the Resources chapter).

If you have a toddler with special needs, you can apply for extra financial help through the Supported Child Development Program (see Special Needs in the Resources chapter).
During her toddler years, your child will begin to crawl, walk, run and jump. She’ll use these new skills to explore – climbing on, touching or tasting just about anything. As she does, it will be almost impossible to protect her from every scrape and bump.

But you can reduce the chance of injury by making her world safer, and by continuing to do so as she grows. Always ensure that you’re:

✔ supervising her closely
✔ childproofing your home (see Childproofing Your Home)
✔ following the manufacturer’s instructions on equipment (see Equipment Safety)
✔ using a properly installed car seat (see Car Safety)
✔ staying within arm’s reach when she’s near water (see Water Safety)

**KEY TAKEAWAY**

As parents, we want to protect our children from everything. But toddlers also need the chance to run, play and test their personal limits. You can find balance by providing a safe environment and keeping a close eye on your child while still giving her the freedom to explore and have fun. Try stepping back while she plays in the sandbox at the park or makes a mess with her toys on the living room floor.
Your toddler is learning so quickly. One day, she's not able to get onto the couch. The next, she's found her way up on the couch and is climbing the bookcase beside it. As a parent, all this change is exciting. But it can also feel scary. You can create a safer environment for her to explore by childproofing your home.

What is childproofing?
Creating a safer place for your child to explore by removing dangers from your home.

Everyday Objects to Watch Out For

- **Cords, ribbons and strings** longer than 15 cm (6 inches) can get wrapped around your child's neck. Remove drawstrings from her clothing. Take cords off blinds and drapes, or tie them up to where your toddler can't reach them, even if she climbs on the furniture.
- **Purses** can contain coins, mints or medications that don't belong in your toddler's mouth.
- **Recycling bins** can contain sharp lids and inky newspapers and magazines that your child might suck on.

Preventing Falls and Bumps
- Keep stairs clear and install gates at the top and bottom. (See Equipment Safety)
- Use corner guards or cushioned strips to soften corners and edges on furniture, counters and fireplaces.
- Install window locks.
- Don't allow your toddler to walk around with anything breakable or with a sucker or Popsicle in her mouth.
- Make glass doors visible by adding decals or your toddler's artwork.
- Secure bookcases, TV cabinets and other furniture to the wall with safety screws.

Preventing Poisoning
Most homes contain about 250 substances that can poison a child. Keep these and all dangerous products out of reach:
- alcohol
- cannabis (marijuana)
- medications and vitamins
- plants
- moth balls
- diaper pail deodorant disks
- lead (from paints, mini-blinds)
- cleaning products including laundry pods
- personal-care products

Preventing Fires and Burns
- Press the test buttons on your smoke detectors or alarms monthly.
- When you change your clocks in the spring and fall, replace the batteries in your smoke detectors or alarms.
- Completely screen fireplaces and inserts.
- Set the water temperature in your hot water tank to 49°C (120°F). If you live in an apartment, attach an anti-scald guard to your faucets. Test the temperature of bath water before your child gets in, and make sure she can't turn the taps.
- Create a smoke-free home. Visit quitnow.ca.
- Don't have a hot drink while holding your child. And when you put your drink down, make sure she can't reach it.

TRY THIS
See things how your toddler sees them. Get down on the floor and crawl around. Are there small objects she could choke on? Cords she could get caught in? Heavy items she could pull down?

HOW TO
Be prepared for an emergency
- Keep emergency numbers by every phone. Include 9-1-1, poison control and your doctor. You may know these numbers, but other caregivers may not.
- Learn basic first aid. Contact your local St. John Ambulance, Red Cross or community centre to sign up for classes.
In addition, be sure to:

- Keep all cleaning and personal-care products, alcohol, medication, drugs and vitamins in original containers.
- Don’t tell your toddler that medicine or vitamins are candy, and don’t take them in front of her.
- Lock liquor cabinets and clear away leftover drinks promptly.
- Store visitors’ purses and bags where your child can’t get them.
- Use child-resistant packaging, but remember that it’s not foolproof.
- Install carbon monoxide monitors.

Get more information from the Drug and Poison Information Centre. (See Poison Control Centre under Safety in the Resources chapter.)

**DANGER**

Teach your toddler that these warning symbols mean “Danger! Don’t touch.” But don’t expect her to remember. Keep all poisons locked up and out of reach.

If you think your toddler has been poisoned:

1. Call the BC Poison Control Centre immediately at 1-800-567-8911.
2. Tell them what your child took, the amount she took, and when she took it.
3. Follow the first aid instructions on the label of the product taken.
4. Call 9-1-1 or go to your hospital Emergency. Take the container with you.

**BE AWARE**

Help protect your family from carbon monoxide poisoning by installing a carbon monoxide detector, making sure that appliances, chimneys and vents are regularly maintained, only using charcoal grills outdoors, and not using kerosene or propane heaters in enclosed areas.

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**Preventing Kitchen Mishaps**

- Store knives out of reach.
- Make the area near the stove an off-limits zone.
- Turn pot handles inward and use back burners rather than front.
- Keep a fire extinguisher handy.
- Be careful when cooking with hot oil.
- Unplug small appliances.
- Place beans, nuts and other choking hazards out of reach.
- Secure tablecloths.
- Keep the dishwasher locked and the soap container empty until ready for use.
- Lock your chest freezer.

**PREVENTING BATHROOM MISCHAPS**

- Supervise your toddler every moment he’s near or in water.
- Keep all medications, cosmetics, cleansers, hair appliances and personal-care products out of your child’s reach.
- Lock low cupboards.
- Use non-skid bath mats in the bathtub and shower.
- Install a toilet seat lock and keep the lid closed.

**FAMILY STORY**

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!

**DID YOU KNOW**

Most child poisonings occur just before lunch and dinner, when children are hungry and less supervised.

**PREVENTING BATHROOM MISCHAPS**

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Child Car Seats
Your child must be in a car seat every time he travels in a car, no matter how short the trip.

Ensure your car seat has:
• a CMVSS label
• at least 2 sets of slots for shoulder harness straps and 2 sets for crotch straps

Infant seat, child seat or booster seat?
Step 1: Infant seat – Use from birth until your child reaches the seat’s weight limit.
Step 2: Rear-facing child seat – Use until your child is at least 1 year old and weighs at least 9 kg (20 lb).
Step 3: Forward-facing child seat – Use until your child weighs at least 18 kg (40 lb).
Step 4: Booster seat – Use until your child is 9 years old or 145 cm (4 feet 9 inches) tall.

Rear-facing or front-facing?
A rear-facing seat is safest for your child, and must be used until he’s at least 1 year old and weighs at least 9 kg (20 lb). Continue to keep your child facing the back of the car – even if he has to fold his legs a bit – until he reaches the rear-facing weight limit of the seat or his head is within 2½ cm (1 inch) of the top of the seat. At that point, it’s time to either find another model that he can use rear-facing, or switch his current seat to face the front of the car.

New or used?
Second-hand seats aren’t recommended. If you do use one, inspect it carefully and check for recalls and for its expiration date. Don’t use a seat that’s been in a crash.

3-point or 5-point harness?
If possible, use a more-secure 5-point harness, which holds your child at his shoulders and hips.

DANGER
If an airbag inflates and hits your child’s seat, he could be seriously hurt or killed.
• Never place a rear-facing car seat where there’s an airbag.
• If you have to put your toddler in the front seat, turn off the airbag and put the seat as far back as it will go.
• Keep your toddler’s seat away from side airbags.

HOW TO
Install a rear-facing car seat
1. Place it facing the back window in the back seat following the manufacturer’s instructions.
2. Tilt it back a maximum of 45°. If your child’s head falls forward, the seat needs to be tilted back more.
3. Secure the seat with its universal anchorage system or with the car’s seat belt. Check your car’s owner’s manual to see if you need to use a locking clip.

HOW TO
Put your child in the car seat
1. Fasten the harness snugly so that only 1 finger fits between it and your child’s collarbone.
2. Raise the chest clip to your child’s underarms.
3. Ensure the harness straps are at his shoulders or slightly below. Raise the harness straps when his shoulders are level with the next highest slot.
4. Dress him in clothes that have sleeves and legs and aren’t too heavy.
5. If he needs a blanket, put it on after he’s strapped in.
General Car Safety

DID YOU KNOW
The safest place for your child in the car is the centre position of the back seat.

✔ Hold hands in the street and in parking lots.
✔ Use the appropriate car seat for your child, and wear your seat belt.
✔ Pull over and stop if you need to focus on your toddler.
✔ Remove any loose objects that could fly around and small objects that could roll under the brake pedal.
✔ Put pets in carriers or behind screens.
✔ Lock power windows.
✔ Before raising or lowering windows, check that your toddler’s fingers, head and arms are inside.

✘ Never leave your toddler alone in a car, even for a few minutes. Your child can quickly get too hot if left in a parked car, and this can cause serious injury or even death.
✘ Never leave your child alone when he’s sleeping in a car seat – in or out of the car.
✘ Don’t place your child in his car seat on a counter, on the car or on any raised surface.
✘ Don’t drive while texting or talking on your phone.
TODDLER SAFETY

Equipment Safety

Toddlers may be small, but they need a lot of stuff. You can keep it all safe by:
✔ choosing equipment that’s right for your toddler’s height, weight and age
✔ supervising your toddler whenever she’s using it
✔ ensuring it’s in good condition by checking often for sharp edges, loose wheels, broken brakes and upholstery tears
✔ using safety straps and a helmet as appropriate
✔ following manufacturers’ instructions for assembly, care and use

Safer Chairs

High chairs
Look for:
• wide base
• strong tray locks
• proper locking device on folding chairs
• no moving parts for your child to get caught in when you’re changing the position of the chair or tray

Ensure:
• safety strap is done up
• chair is placed away from appliances, windows, blind cords, mirrors and sharp corners

Booster chairs
Ensure:
• booster is safely strapped to a chair, and child is securely strapped in
• no shoulder straps are tangled around child’s neck

BE AWARE

BE AWARE
Chairs that hook on a table can fall. If you need to use one, be sure to attach it to a strong table away from table legs. Before putting your child in, pull on it to check that it’s solidly attached. If your child is over 13½ kg (30 lb) or is very active, don’t use a hook-on chair.

BE AWARE
Keep the chair away from walls and counters. Your child might be strong enough to push against them and tip herself over.
Safer Playpens
Look for:
- fine mesh that you can’t fit your little finger through
- no more than 2 wheels
- at least 48 cm (19 inches) high
- no rough or sharp edges or loose parts
- no drilled holes between 3 and 10 mm (⅛ and ¾ inch)
- no hinges that can pinch or accidentally collapse
- no tears in rails or mattress pad
- no scarves, necklaces or cords
- no toys strung across the top
- all sides fully raised and firmly fixed

Safer Strollers
Look for:
- 5-point harness
- good brakes
- secure wheels
- no sharp edges or loose folding parts

Ensure:
- no purse or heavy packages on handle

Safer Child Carriers
Front carriers
Look for:
- firm, padded head support
- leg holes your child can’t slip through
- made for your child’s weight

Back carriers
Look for:
- wide, solid base
- padding near your child’s face

Ensure:
- straps and buckles are done up
- carrier isn’t used as a car seat
- carrier is used only for a child who can sit up by herself (5 months or older)
- carrier is never placed on a table or counter with your child in it

Refer to Baby’s Best Chance for information on safer car safety.

Safer Gates
Look for:
- manufactured after 1990
- safety-approved label
- right size for the space being blocked
- smooth finish, with no splinters, cracks or snags

Ensure:
- gate is mounted close to the floor so it can’t be crawled under
- gate is installed early so you’re ready when your child starts moving around on her own

For stairs, use swing gates that screw into the wall. Use one gate at the top of the stairs and another at the bottom. Don’t remove them until your toddler can climb stairs without help.

BE AWARE
Accordion-style or expandable gates can trap your toddler in their openings. Pressure gates (gates that press against the wall but don’t screw in) can be pushed over, so shouldn’t be used for stairs.

Safer Playpens

Safer Strollers

Safer Child Carriers

DID YOU KNOW
It’s best for your child’s development to let her walk whenever possible.

BE AWARE
Don’t jog with your child in a stroller until she’s at least a year old and her neck muscles have strengthened. And always use the 5-point harness.

BE AWARE
Don’t use a carrier while skiing, jogging, biking, cooking or doing any other risky activity. Your child could be bumped, burned, thrown out or crushed under you.

Safer Beds and Cribs
See Sleep and Your Toddler.

Toddler’s First Steps

Toddler Safety  •  Equipment Safety
Safer Cycling

Only ride with your child if you’re a skilled cyclist. And only go in safe areas like parks, bike paths and quiet streets when road conditions are good.

**BE AWARE**

Children under 12 months shouldn’t ride with you on a bicycle. Their back and neck muscles can’t support the weight of a helmet and can be damaged by the bumping.

**TRY THIS**

Before riding your bike with your toddler in a carrier or trailer, practise turning, stopping and climbing hills with a bag of flour.

**DID YOU KNOW**

Bicycle trailers are more stable than child seats mounted on a bike. In either case, you can be thrown off balance if your child moves suddenly.

**Bicycle-mounted child seats**

Ensure:
- child weighs 18 kg (40 lb) or less
- harness is buckled snugly
- toddler’s feet, hands and clothes aren’t near spokes or other moving parts
- toddler is never left alone in seat

**Bicycle trailers**

Look for:
- bike flag, tail light and reflector
- solid connection between trailer and bike
- secure harness

Ensure:
- used with 1 or 2 children weighing no more than 45 kg (100 lb) total
- toddler can’t reach the wheels
- toddler is protected from dirt thrown by tires

**Tricycles, scooters and push/run bikes**

Ensure all are:
- sized so your toddler can pedal while sitting comfortably
- used only with supervision
- never ridden near cars, swimming pools or stairs

**Helmets**

Look for:
- child-sized
- covers the upper forehead
- adjustable strap with quick-release buckle
- bright colour so she’s easily seen
- not purchased second-hand
- never been in a crash, dropped or damaged
- round, not aero-shaped
- approved by CSA, Snell, ANSI, ASTM, BSI or SAA

Ensure:
- sits straight – not tilted – on her head
- expiration date is checked regularly, and helmet is replaced at least every 5 years

**Safer Toys**

See Toys.

**KEY TAKEAWAY**

Your child must wear a helmet whenever she’s playing on a riding toy, bike, scooter or tricycle, or when she’s riding in a trailer or bike seat.

**TRY THIS**

Before riding your bike with your toddler in a carrier or trailer, practise turning, stopping and climbing hills with a bag of flour.

**TRY THIS**

Store your child’s helmet on the handlebars, ready for the next ride. Don’t leave it in the sun or in the back window of the car, where it can be damaged by heat.

**DID YOU KNOW**

Baby walkers are banned in Canada. They move too quickly and can cause head injuries. Try an activity centre instead.
In the Heat and Sun

Safer sun
✔ If your toddler is 12 months or younger, keep him out of the direct sun.
✔ Once he’s older, stay out of the sun in the middle of the day, when rays are the strongest.
✔ Offer him plenty of water to drink.

What to wear
✔ loose clothes with a close weave
✔ sunglasses
✔ hat with a large brim, a neck cover and no ties
✔ sunscreen, even on cloudy days

DANGER
Never leave your child alone in a car. The inside of a car heats up quickly, even on a day that’s not very hot. And children overheat more easily than adults. They can be seriously hurt or even die.

DID YOU KNOW
Sunburns put your child at risk for skin cancer later in life. Don’t wait until he’s red to get your child out of the sun. Burns don’t usually show up until hours later.

HOW TO
Apply sunscreen
1. Use water-resistant sunscreen approved by the Canadian Dermatology Association with SPF 30 or higher.
2. Use 1 tablespoon (15 ml) or more.
3. Apply to all uncovered skin.
4. Use lip balm with sunscreen.
5. Repeat every 2 hours.

MEDICAL EMERGENCY
Heat Exhaustion
If your toddler is fatigued, weak, confused, nauseous or has headache, muscle cramps or cool, damp, pale skin, he may have heat exhaustion. Bring him indoors or into the shade. Take off his clothes and give him a cool bath and a drink of water. If he doesn’t improve or if he vomits, contact your health care provider.

BRAIN BUILDER
Find safe places outside where your child can play. Exploring the outdoors, playing on playgrounds and being around other children will help him build his imagination and learn new physical and social skills.
In the Cold

Safer cold
✔ Let your child warm up every 30 minutes.
✔ Keep him indoors if the temperature is below -25°C (-13°F) or if the wind chill is -28°C (-18°F) or more.
✔ If you take your toddler sledding, tobogganing, skating or skiing, be sure that he wears the right helmet for the sport (not a bike helmet) and that he wears it correctly.

What to wear
✔ layers of loose clothes
✔ warm coat that will stay dry, with sleeves that are snug at the wrist
✔ warm, non-slip shoes that will stay dry
✔ mittens
✔ warm hat without ties
✔ the right helmet for the sport

BE AWARE
If your toddler’s cheeks, nose, ears, fingers or toes are white or numb, he may have frostbite. Bring him indoors right away. Take off any wet clothes, then put his frostbitten areas into warm water until feeling returns. This may cause stinging.

On the Playground

Safer playgrounds
✔ Ensure equipment, surfaces and sandpits are free of garbage, needles and broken glass and plastic.
✔ Use equipment that’s no more than 1½ m (5 feet) high.
✔ Ensure equipment has guardrails and barriers, is in good condition and well-anchored, and has no sharp edges.
✔ Make sure the surface under equipment is sand, wood chips or rubber.

BE AWARE
If your toddler’s cheeks, nose, ears, fingers or toes are white or numb, he may have frostbite. Bring him indoors right away. Take off any wet clothes, then put his frostbitten areas into warm water until feeling returns. This may cause stinging.

What not to wear
Avoid any clothing that can get caught on playground equipment and choke your child, like:
✘ very loose clothes
✘ drawstrings
✘ dangling scarves or bike helmet straps

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BE AWARE
Always ensure that a trusted adult stays with your child and watches while he plays. He can fall or get caught – or even strangled – in playground equipment.
Playing in and around water is fun, soothing and good for your toddler’s development.

You can make it safer by:

- supervising and staying within arm’s reach whenever your child is around water
- holding hands when you’re at the beach or near a pool or pond
- having your child wear a well-fitting, government-approved life-jacket when he’s around water or in a boat

DANGER

It only takes seconds for a toddler to drown, so stay within arm’s reach – even if he’s wearing a life-jacket.

DID YOU KNOW

A life-jacket is safer than a personal floatation device (PFD). Life-jackets float better and will keep your toddler’s mouth out of the water.

Safer Baths and Bathrooms

✓ Turn your water heater down to 49°C (120°F) to help prevent burns.
✓ Check the water temperature with your wrist or elbow before putting your child in the tub.
✓ Use warm water, not hot.
✓ Teach him to sit, not stand, in the tub.
✓ Use a toilet seat lock.
✗ Don’t let your toddler play with sink or tub taps.
✗ Don’t use a bath ring or bath seat as a substitute for supervision.
✗ Never leave your toddler alone in the bathroom.

Safer Pools and Garden Ponds

✓ Empty your toddler pool when you’re not using it. Turn it upside down so it won’t collect rain.
✓ Cover and lock a hot tub that’s not being used.
✓ Ensure any nearby pool is fenced and covered, and that pool chemicals are locked away. Be sure there’s nothing your child could climb on to get into the pool area.
✓ Teach your child to play safely around water – no running, pushing, diving or unsupervised swimming.
✗ Don’t let your child use a hot tub, which can overheat him.
✗ Don’t rely on toys like water wings or air mattresses to keep your toddler safe.
✗ Don’t rely on a pool cover to keep a child out.

DID YOU KNOW

Swimming lessons don’t mean your toddler is safe in the water. Always supervise him and stay within arm’s reach.
Your toddler needs fresh air and outdoor space where she can run and play, get dirty and make noise. And you need to be with her to share her fun and keep her safe.

**KEY TAKEAWAY**

You can help your toddler learn to be cautious, but she’s too young to protect herself. You must take responsibility for her safety:

✔ Always know where she is.
✔ Only leave her with people you trust.
✔ Be aware of the dangers in your community.

**Streetproof your toddler**

**What is streetproofing?**

Helping your toddler learn and practise the skills she’ll need if she’s in traffic, around strangers or lost.

You can help streetproof your toddler by teaching her:

- her first and last names
- your first and last names
- the name of your street
- your phone number
- the proper names for genitals (see Sexual Development)
- how to use her “big voice” when she needs help

**Keep instructions simple**

Be as clear as possible by:

- stating your rules and the reasons in simple words
- using the same words and ideas over and over
- being specific – “look up the driveway when you ride,” for example, instead of “be careful on the tricycle”
- reminding her of the instructions often

**Show your toddler what to do**

Don’t just use words. Clearly show your toddler what she needs to know. Try:

- walking her around the neighbourhood, showing her neighbours’ houses and landmarks
- pointing out police officers and explaining that police help people
- acting out situations and letting her practise using her “big voice”
- physically pointing out the limits. In the yard, for example, say, “You can play anywhere in front of this big tree, but you can’t go past it.”

**Set a good example**

Your toddler learns by copying you. Teach her by:

- acting how you want her to act – always using a crosswalk, for example
- talking to her as you do things together – “we’re carefully looking both ways before we cross,” for example

**Developing Your Toddler’s Skills**

**Use the “check with me first” approach**

When young children are harmed, it’s usually by people they know. So it’s not enough just to tell your toddler not to talk to strangers.

Help your child learn trust while staying safe by teaching her to check with you or a caregiver before:

- going anywhere with anyone
- taking a gift or treat

**What is your child’s “big voice”?**

The loud, powerful voice your child can use to express important boundaries (like “Don’t touch me!”) and get help when she needs it (“I’ve lost my mom!”).

**TRY THIS**

Sing your phone number as a little song to make it easier for your child to remember.

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Getting a Pet
A pet can be a good friend to your toddler and teach her valuable social and emotional skills. Prepare your child by:
- showing her how to be gentle and speak quietly to animals
- teaching her how animals look when they’re irritated
- teaching her to wash well after touching animals
- keeping dry pet food out of your child’s reach
Prepare your pet by:
- getting it immunized
- training it not to bite or scratch
- not keeping wild animals, including ferrets, as pets

TRY THIS
Wait until your child is 5 or 6 to get a pet so she’ll be old enough to be gentle with it.

Being Around Other Animals
Teach your child to stay away from animals she doesn’t know, and to ask if it’s okay before going near someone else’s pet. Stay close by, even if you trust the animal. And don’t be afraid to ask dog owners to use a leash.

VISITORS
What You Can Do
Start with your dog on a leash when you’re visiting a home with a toddler.

HOW TO
Deal with animal bites and scratches
1. Clean the wound well with soap and water.
2. See your doctor or call HealthLink BC at 8-1-1 if:
   - the animal isn’t yours and it could be sick
   - the wound is serious
   - it doesn’t heal well

MEDICAL EMERGENCY
Call your doctor or HealthLink BC at 8-1-1 if your child has contact with a bat, even if there’s no bite. Although it’s rare in B.C., some bats can carry rabies.

FAMILY STORY
My 11-month-old was scared of dogs after a big one knocked him down. I asked a friend to bring over his small, quiet dog while I kept my son on my lap. Over time, his fear went away.
How Does Abuse Affect Children?
Abuse, including violence and neglect, has a strong negative effect on children. Children may themselves be injured, or they may be affected by hearing fighting, seeing a parent’s injuries or being blamed. Even if a child doesn’t actually see the abuse, he will feel the tension and fear in the home.

A child may not show he’s upset. But violence does affect him. He may:
• have behavioural and mental health issues, like aggression, learning problems, depression, anxiety and, later in life, addiction
• not trust his parents to keep him safe, and be fearful of the world
• learn unhealthy ways of solving problems and treating others
• be more likely as an adult to choose an abusive partner or become abusive
• be at greater risk for chronic illness like diabetes and heart disease

What You Can Do

If you’re living in an abusive relationship:
✔ Keep your wallet, keys and phone easily accessible.
✔ Teach your toddler to call 9-1-1.
✔ Plan where you’ll go if you leave.
✔ Tell trusted neighbours to call 9-1-1 if they hear something concerning.
✔ Practise getting out of your home safely and quickly.

If you’ve left an abusive relationship:
✔ Keep a recent picture of your toddler and one of your ex-partner.
✔ Have the phone numbers and addresses of your ex-partner’s family and friends.
✔ Know the make, year and licence plate number of your ex-partner’s car.

This information will help the police if your ex-partner takes your child.

What is abuse?
Physical, emotional, mental, verbal or sexual mistreatment. Abuse can take many forms, including violence, neglect, isolation, financial control and threats. It can be directed at a partner (male or female) or a child.

What is toxic stress?
The effect of serious, ongoing hardship, abuse or neglect on a child who doesn’t have adult support. Toxic stress harms the development of a child’s brain and body, and can cause lifelong challenges (see Brain Development).
Getting Help
Help is available if you’re living with violence or other abuse.

Contact:
• VictimLinkBC toll-free at 1-800-563-0808 or VictimLinkBC@bc211.ca for confidential help in 110 languages 24 hours a day
• crisis lines
• women’s shelters
• child protection social workers
• your health care provider
• the public health nurse
• the police

See Abuse and Neglect in the Resources chapter for more information.

DID YOU KNOW
If you grew up with abuse as a child, it can affect the decisions you make as an adult. You may be more likely to enter into abusive relationships and find it harder to know what to do. But you can build a healthy, safe life. If you need help, contact VictimLinkBC at 1-800-563-0808 or VictimLinkBC@bc211.ca.

DID YOU KNOW
In Canada, about 100,000 women and children seek shelter from family violence every year.

FAMILY AND FRIENDS
What You Can Do
If you think a child is being abused or neglected, you must report it to a child welfare worker. Phone 1-800-663-9122 anytime, day or night. If you think the child is in immediate danger, call 9-1-1.

Child Sexual Abuse

What is child sexual abuse?
Abuse that may include intercourse, fondling, touching, exposing genitals, inappropriate watching of a naked child or showing pornography to a child. Child sexual abuse is a crime. Normal experimenting between children of the same age is not sexual abuse (see Sexual Development).

You can help keep your toddler safe by:
✔ always knowing where he is
✔ only leaving him in the care of people you trust
✔ being aware of who’s around him when he’s in someone else’s care
✔ encouraging him to tell you if he’s not comfortable with someone
✔ paying attention when he avoids someone

EMERGENCY
If you think you’re in immediate danger, leave with your toddler and call 9-1-1.
Eat well. Live well.

Eat a variety of healthy foods each day

Have plenty of vegetables and fruits

Eat protein foods

Make water your drink of choice

Choose whole grain foods

Discover your food guide at
Canada.ca/FoodGuide
Eat well. Live well.

Healthy eating is more than the foods you eat

- Be mindful of your eating habits
- Cook more often
- Enjoy your food
- Eat meals with others
- Use food labels
- Limit foods high in sodium, sugars or saturated fat
- Be aware of food marketing

Discover your food guide at Canada.ca/FoodGuide
Healthy eating is more than the foods you eat. It is also about where, when, why and how you eat.

Be mindful of your eating habits
- Take time to eat
- Notice when you are hungry and when you are full

Cook more often
- Plan what you eat
- Involve others in planning and preparing meals

Enjoy your food
- Culture and food traditions can be a part of healthy eating

Eat meals with others

Make it a habit to eat a variety of healthy foods each day.

Eat plenty of vegetables and fruits, whole grain foods and protein foods. Choose protein foods that come from plants more often.
- Choose foods with healthy fats instead of saturated fat

Limit highly processed foods. If you choose these foods, eat them less often and in small amounts.
- Prepare meals and snacks using ingredients that have little to no added sodium, sugars or saturated fat
- Choose healthier menu options when eating out

Make water your drink of choice
- Replace sugary drinks with water

Use food labels

Be aware that food marketing can influence your choices
Resources

Key Resources for Parents

9-1-1 Emergency

BC Poison Control Centre
Phone toll-free: 1-800-567-8911
Website: dpic.org

HealthLink BC gives you 24-hour access to non-emergency health information and services in more than 130 languages – just a phone call or click away.
Call 8-1-1 to:
• speak with a nurse about your symptoms
• talk to a pharmacist about your medication questions
• get healthy eating advice from a dietitian
• find nearby health services and resources
• get information about physical activity from a qualified exercise professional
For deaf and hearing-impaired assistance (TTY), call 7-1-1.
Website: healthlinkbc.ca

Public Health Offices/Community Health Centres offer a wide range of services to promote physical, emotional, social, communication and cognitive development for infants and children. Their 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.

Abuse and Neglect

Helpline for Children offers help for anyone under the age of 19 suffering from physical, emotional or sexual abuse, including abandonment, desertion, neglect, ill treatment or failure to meet the physical, emotional or medical needs of a child. Anyone can call, 24 hours a day, including parents who are afraid they might hurt their child or anyone who knows a child is being abused. You can call anonymously.
Phone: 310-1234 (no area code needed)

Alcohol, Tobacco and Drug Use

To learn about programs for people with alcohol or other drug problems, talk to your health care provider or contact any of the following resources:

HealthLink BC offers support 24 hours a day in more than 130 languages.
Phone: 8-1-1
For deaf and hearing-impaired assistance (TTY), call 7-1-1.
Website: healthlinkbc.ca

The Alcohol and Drug Information and Referral Line offers confidential, free information.
Phone toll-free: 1-800-663-1441

Sheway operates in Vancouver and provides comprehensive health and social services to women who are either pregnant or parenting children less than 18 months old and who are experiencing current or previous issues with substance use. The program consists of prenatal, postnatal and infant health care; education and counselling for nutrition, child development, addictions, HIV and Hepatitis C, housing and parenting. Sheway also assists in fulfilling basic needs, such as providing daily nutritious lunches, food coupons, food bags, nutritional supplements, formula and clothing.
Website: vnhs.net/programs/sheway
**Herway Home** operates in Victoria and provides primary health care and social supports to pregnant women and parenting women who have a history of substance use and may also be affected by mental health issues, violence and trauma. Services include drug and alcohol counselling, parenting support, pregnancy and post-natal information, nutrition, infant and child services, advocacy, housing and income assistance information, and outreach.

Phone: 250-519-3681  
Email: herwayhome@viha.ca  
Website: islandhealth.ca/learn-about-health/pregnancy-birth-babies/herway-home

**Heartwood Centre for Women** is a 30-bed residential facility located in Vancouver that provides integrated treatment for women (19+), including trans women, across British Columbia who struggle with severe substance use and mental health challenges.

Phone: 1-888-300-3088 ext.2032  
Email: heartwood@cw.bc.ca  
Website: bcmhsus.ca/our-services/heartwood-treatment-centre

**National Native Alcohol and Drug Abuse Program (NNADAP)** currently funds 10 residential treatment centres. Services are offered to adults, youth and families.

Phone: 1.866.913.0033  
Website: fnha.ca/what-we-do/mental-wellness-and-substance-use/treatment-centres

**Provincial Substance Use Treatment Program** offers residential substance use treatment programs that provide structured, supportive residential treatment services for individuals. Clients are 19 years of age or older and have a primary concern of substance use and show patterns of substance use that have not been successfully addressed at the community level. The program is 90 days, with 6 to 12 months of aftercare support.

Website: bcmhsus.ca/our-services/provincial-substance-use-treatment-program

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**Breastfeeding**

**La Leche League Canada** encourages, promotes and provides mother-to-mother breastfeeding support and information.

Website: lllc.ca

**British Columbia Lactation Consultants Association** is an organization of international board-certified lactation consultants (IBCLCs) and others who wish to protect, support and promote breastfeeding.

Website: bclca.ca

**Dietitian Services, HealthLink BC** is a helpline staffed by registered dietitians who can answer general and medical nutrition questions. Translation services available in 130 languages.

Phone: 8-1-1  
For deaf and hearing-impaired assistance (TTY), call 7-1-1.  
Website: healthlinkbc.ca/dietitian-services

**Public Health Offices and Hospitals** may offer additional breastfeeding services such as lactation consultants, support groups and phone consultation. Contact your local health authority for more information.

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**Child Care**

Your local Ministry of Children and Family Development office or public health office can give you information to help you select a child care facility. You can also go online to HealthLink BC for tips and information on choosing child care providers.

Website: healthlinkbc.ca/health-topics/aa43308

**Affordable Childcare Benefit** helps families with the cost of child care, depending on factors like family size, type of care and household income.

Website: gov.bc.ca/gov/content/family-social-supports/caring-for-young-children/child-care-funding/child-care-benefit
The Canada Revenue Agency administers tax laws for the Government of Canada and for most provinces and territories, as well as various social and economic benefit and incentive programs delivered through the tax system.
Website: canada.ca/en/revenue-agency/services/child-family-benefits/canada-child-benefit-overview

Child Care Service Centres provide information in more than 350 languages on all B.C. Ministry of Children and Family Development child care programs, 8:30 to 4:30, Monday to Friday.
Phone toll-free: 1-888-338-6622
Website: gov.bc.ca/gov/content/family-social-supports/caring-for-young-children/child-care-funding/child-care-benefit

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

Child Care Map includes information about licensed child care providers in B.C.
Website: gov.bc.ca/gov/content/family-social-supports/caring-for-young-children/search-for-child-care

Child Care Licensing Regulations describe what’s required of child care operators in British Columbia.
Website: health.gov.bc.ca/ccf/child_care

Child Care Resource and Referral Program (CCRR) offers information on child care in your local community.
Phone toll-free in B.C.: 1-888-338-6622
In Victoria: 250 356-6501
Website: ccrr.bc.ca

B.C.’s Ministry of Children and Family Development has information for parents on how to select child care and local child care options.
Website: gov.bc.ca/gov/content/family-social-supports/caring-for-young-children

Parents’ Guide to Selecting and Monitoring Child Care is a brochure from the government of British Columbia that can help you make decisions about child care.
Website: gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/child-day-care/parents_guide_to_selecting_and_monitoring_child_care_in_bc_june_2016.pdf

Child Development

The Infant Development Program of the Infant and Child Development Association of BC offers home-based prevention and early intervention services to infants and children up to 3 years old. Consultants assess children and help families get the tools, skills and community connections they need to promote optimal child development and support developmental challenges. To find a program in your area, ask your public health nurse or health care provider.
Website: icdabc.ca/programs/infant-development-program

DECODA provides children from birth to age 5 with a strong foundation in literacy, physical activity and healthy eating through fun activities and play. This program values the learning and bonding that happen when children and caregivers play together.
Website: decoda.ca/resources

Ready, Set, Learn is a British Columbia government initiative that helps families connect with the school system and community agencies.
Website: gov.bc.ca/gov/content/education-training/early-learning/support/programs/ready-set-learn

Strong Start is a registered Canadian charity that helps children learn to read.
Website: strongstart.ca
Child Support

**Family Justice Services** has information about government support for families.
Website: gov.bc.ca/gov/content/life-events/divorce/family-justice

**Ministry of Attorney General: Family Maintenance Enforcement Program** has information on government financial support for families.
Website: fmep.gov.bc.ca/about-the-program

Dental Care

**British Columbia Dental Association**
Phone toll-free: 1-888-396-9888
Lower Mainland: 604-736-7202
Website: bcdental.org

**BC Dental Hygienists’ Association**
Phone: 604-415-4559
Website: bcdha.bc.ca

**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 with your public health unit.
Phone toll-free: 1-866-866-0800
Website: 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 and the British Columbia government to help parents, guardians and other caregivers learn more about caring for the oral health of young children.
Website: 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.

**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: frpbc.ca

**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: bccf.ca

**British Columbia 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 the rights of those who are most vulnerable, including 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: 1-800-476-3933
Website: rcybc.ca
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: vanierinstitute.ca

Family Violence

When violence happens, there is help.

In case of emergency, call 9-1-1 and ask for the police. If your community does not have 9-1-1 service, look for the local police emergency phone number on the first page of your phone book under “Emergency.”

VictimLinkBC can provide immediate support 24 hours a day, 7 days a week.
Phone toll-free: 1-800-563-0808

BC Women’s Hospital Woman Abuse Response Program
Phone: 604-875-3717
Website: bcwomens.ca/our-services/support-services

Ending Violence Association of British Columbia
Website: endingviolence.org

BC Society of Transition Houses is a member-based provincial umbrella organization that provides leadership, support and collaboration to enhance B.C.’s range of services focused on responding to, preventing and ending violence against women, children and youth.
Website: bcsth.ca

Gender-Based Violence Knowledge Centre is an information and resource hub on gender-based violence.
Website: cfc-swc.gc.ca/violence/knowledge-connaissance/index-en.html

Kids Help Phone is Canada’s only toll-free, 24-hour, bilingual and anonymous phone counselling, information and referral for young people.
Phone toll-free: 1-800-668-6868
Text HOME to: 686868
Website: kidshelpphone.ca

Stop Family Violence is a one-stop source for information on family violence.
Website: phac-aspc.gc.ca/sfv-avf/index-eng.php

National Clearinghouse on Family Violence is a resource centre for information on violence within relationships of kinship, intimacy, dependency or trust.
Website: cleoconnect.ca/organization/national-clearinghouse-on-family-violence

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, 7 days a week, and provides service in 110 languages. A victim service worker will help you find information on the victim services closest to you.
Phone toll-free: 1-800-563-0808
For deaf and hearing-impaired assistance (TTY): 604-875-0885
Text: 604-836-6381
Email: VictimLinkBC@bc211.ca
Website: victimlinkbc.ca

Fathering

BC Council for Families provides educational resources on 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 are also available for purchase.
Website: dadcentral.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, available from 5 pm to 9 am nightly. It also includes dietitian services. Registered dietitians are available Monday to Friday 9 am to 5 pm. 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: healthlinkbc.ca

**HealthLink BC Files** are a series of easy-to-read fact sheets on a variety of environmental, public health and safety topics. Several HealthLink BC Files are available on topics related to parenting your toddler, including HealthLink BC File #68d, *Iron Contents in Food*, and HealthLink BC 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, including employee health and wellness services, native health centres and physicians' offices and clinics.

Website: healthlinkbc.ca/services-and-resources/healthlinkbc-files

**Health Authorities**

**Northern Health**
Phone: 250-565-2649
Website: northernhealth.ca

**Interior Health**
Phone: 250-469-7070
Website: interiorhealth.ca

**Island Health**
Phone: 250-370-8699
Website: islandhealth.ca

**Vancouver Coastal Health**
Phone toll-free: 1-866-884-0888
Lower Mainland: 604-736-2033
Website: vch.ca

**Fraser Health**
Phone: 1-877-935-5669 toll-free or 604-587-4600
Website: fraserhealth.ca

**Provincial Health Services Authority of BC**
Phone: 604-675-7400
Website: phsa.ca

**Hearing**

**British Columbia Early Hearing Program** is the first province-wide screening program to check hearing in babies born in British Columbia.
Website: phsa.ca/our-services/programs-services/bc-early-hearing-program

**Immunizations**

**HealthLink BC Files** contain information on many vaccination-related topics.
Website: healthlinkbc.ca
ImmunizeBC has information about immunizations in British Columbia, including common questions.
Website: immunizebc.ca

BC Pediatric Society helps advocate for improved health for infants, children, youth and their families.
Website: bcpeds.ca/families/immunization

Vaccination and Your Child is an online resource of the Canadian Pediatric Society that answers many common questions about having your child vaccinated.
Website: caringforkids.cps.ca/handouts/vaccination_and_your_child

Indigenous Services

Aboriginal Head Start Association of BC includes 12 urban Aboriginal Head Start preschool sites that provide early childhood education and services to Aboriginal children and their families.
Website: ahsabc.net

Aboriginal Health Services can be found in the Blue Pages of your phone book under Health Authorities. For other Aboriginal and Métis organizations, see the Yellow Pages of your phone book.

BC Aboriginal Child Care Society is a non-profit provincial organization offering Aboriginal early childhood programs throughout British Columbia.
Website: acc-society.bc.ca

Aboriginal Infant Development Program offers culturally relevant home-based prevention and early intervention services for Indigenous infants. It is a parallel organization to the BC Infant Development Program. For information on local programs, contact the Office of the Provincial Advisor for Aboriginal Infant Development Programs or your public health unit.
Phone toll-free: 1-866-388-4881
Website: aidp.bc.ca/home
Aboriginal Supported Child Development is a community-based program that offers a range of consulting and support services in a culturally relevant and meaningful way to children, families and child care centres to allow children with extra support needs to participate in fully inclusive child care settings. To find a program in your area, talk to your public health nurse or visit the website.
Website: ascdp.bc.ca

BC Association of Aboriginal Friendship Centres aims 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: 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: hc-sc.gc.ca/fn-an/pubs/fnim-pnim/index-eng.php

First Nations Health Authority (FNHA) is responsible for planning, managing and delivering services and funding health programs, in partnership with First Nations communities in B.C. Guided by the vision of embedding cultural safety and humility into health service delivery, the FNHA works to reform the way health care is delivered to B.C. First Nations through direct services, provincial partnership collaboration and health systems innovation. When it comes to maternal, child and family health, FNHA’s approach is health and wellness now and into the future for the whole family.
Phone: 1-866-913-0033
Website: fnha.ca/what-we-do/maternal-child-and-family-health/healthy-pregnancy-and-early-infancy

Métis Nation British Columbia – Children & Families develops and enhances opportunities for Métis chartered communities and Métis people in B.C. by providing culturally relevant social and economic programs and services.
Website: mnbcc.ca/documents-resources/children-families

Doulas for Aboriginal Families Grant Program is offered by the BC Association of Aboriginal Friendship Centres and First Nations Health Authority. The goal of the program is to increase healthy birth outcomes for Indigenous families by removing the cost barrier to accessing doula services. The grant program provides Indigenous families living in B.C. up to $1,000 of coverage for doula services with each pregnancy.
Phone: 1-800-990-2432 toll-free or 250-388-5522
Email: doulasupport@bcaafc.com
Website: bcaafc.com/dafgp

KUU-US Crisis Line is a culturally safe crisis line available 24/7, regardless of where individuals reside in B.C. KUU-US services are for First Nations, by First Nations, and all crisis response personnel are certified and trained in Indigenous cultural safety.
Phone toll-free: 1-800-588-8717
Youth Line: 250-723-2040
Adult Line: 250-723-4050

LGBTQ2S

BC Children’s Hospital Gender Clinic provides treatment with puberty blockers and/or gender-affirming hormones for transgender and gender-questioning youth up to the age of 18. The website offers resources for transgender and gender-questioning youth and their loved ones.
Email: bcchgenderclinic@cw.bc.ca
Website: bcchildrens.ca/our-services/clinics/gender
Trans Care BC connects transgender, Two-Spirit and gender-diverse parents to supportive, gender-affirming care providers.
Phone toll-free: 1-866-999-1514
Email: transcareteam@phsa.ca
Website: phsa.ca/transcarebc

Pflag Canada offers peer-to-peer support, striving to help all Canadians with issues of sexual orientation, gender identity and gender expression. They support, educate and provide resources to anyone with questions or concerns. They offer local, practical and emotional peer-to-peer family support for individuals and their loved ones challenged by gender/sexual identity.
Website: pflagcanada.ca

QMUNITY is a non-profit organization based in Vancouver that works to improve queer, trans and Two-Spirit lives. They provide a safer space for LGBTQ2S+ people and their allies to fully self-express while feeling welcome and included. Their building serves as a catalyst for community initiatives and collective strength, and they provide personal support, information and referrals for queer, trans and Two-Spirit people of all ages to live healthier, happier lives. Programs include free and low-cost counselling, an STI clinic, free legal advice through Access Pro-Bono, and an employment drop-in clinic.
Phone: 604-684-5307 ext. 100
Email: reception@qmunity.ca
Website: qmunity.ca

Medical Resources

BC College of Family Physicians
Phone: 604-736-1877
Website: bccfp.bc.ca

BC College of Nursing Professionals maintains an online directory of nurses and nurse practitioners (NPs). NPs can provide primary care to individuals and families in need of a primary care provider.
Website: registry.bccnp.ca/ElasticSearch/Search

Canadian Pediatric 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 pregnancy, immunizations, safety issues and teen health.
Phone: 613-526-9397
Website: cps.ca

Caring for Kids is a website that provides parents with information about their child’s health and well-being. Developed by the Canadian Paediatric Society.
Website: caringforkids.cps.ca

Oak Tree Clinic at B.C. Women’s Hospital & Health Centre provide specialized, interprofessional HIV care for women across the lifespan. This includes care from birth, throughout childhood, adolescence and adulthood – including reproductive health, pregnancy, menopause and beyond – in a safe environment.
Phone: 1-888-711-3030
Website: bcwomens.ca/our-services/specialized-services/hiv-care-for-women-families or bcwomens.ca

Mental Health

For information about perinatal depression support groups, contact your public health unit.

BC Reproductive Mental Health Program offers resources on maternal mental health, including tools that you can use yourself. Through referral from your health care provider, the program offers counselling for depression in pregnancy and after birth.
Website: reproductivementalhealth.ca
Pacific Post Partum Support Society is a non-profit society dedicated to supporting the needs of postpartum mothers and their families. Support is available by phone, text and through a guide, Postpartum Depression and Anxiety: A Self-Help Guide for Mothers.
Phone toll-free: 1-855-255-7999
Phone: 604-255-7999
Website: postpartum.org

BC Crisis Line provides emotional support to youth, adults and seniors in distress, 24 hours a day, 7 days a week.
Phone toll-free: 1-800-784-2433
Website: crisiscentre.bc.ca

Canadian Mental Health Association – Confident Parents: Thriving Kids offers strategies to support you and your child that may be struggling with anxiety or behaviour changes.
Website: cmha.ca

HealthLink BC provides information on mental health and a variety of other health topics.
Phone: 8-1-1
Website: healthlinkbc.ca/mental-health

KUU-US Crisis Line is a culturally safe crisis line available 24/7, regardless of where individuals reside in B.C. KUU-US services are for First Nations, by First Nations, and all crisis response personnel are certified and trained in Indigenous cultural safety.
Phone toll-free: 1-800-588-8717
Youth Line: 250-723-2040
Adult Line: 250-723-4050

Mental Health and Substance Use Service Map is a searchable listing of mental health and substance use resources and services, organized by community.
Website: gov.bc.ca/gov/content/mental-health-support-in-bc/map

British Columbia Association for Living Mindfully (BCALM) is a non-profit society dedicated to facilitating increased mindfulness and reduced stress in homes, schools and workplaces throughout B.C. They offer mindfulness-based stress management programs across the province, some of which are covered through MSP with a referral from a primary care provider.
Email: info@bcalm.ca
Website: bcalm.ca

New Immigrants and Refugees

The Interim Federal Health Program (IFHP) covers certain pre-departure medical services for refugees coming to Canada for resettlement and provides limited, temporary coverage of health-care benefits to some people who aren’t eligible for provincial or territorial (PT) health insurance.
Website: canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program/coverage-summary

Nutrition

Canada’s food guide is available through the Health Canada website.
Website: food-guide.canada.ca/en

Dietitian Services – HealthLink BC can answer your questions about healthy eating, food and nutrition. Registered dietitians are available by email and phone from 9 am to 5 pm, Monday to Friday. Services are available in more than 130 languages.
Phone: 8-1-1 (or 7-1-1 for the deaf and hard of hearing)
Email: healthlinkbc.ca/healthy-eating/email-healthlinkbc-dietitian
Website: healthlinkbc.ca/dietitian-services
Parenting

Support groups, such as Parents without Partners, Mother Goose! and Nobody’s Perfect, as well as the family resource program (Family Place), are available in many communities. Contact your local public health unit, mental health agency or family resource centre.

**BC211** connects people to the community, government and social services they need. Help is confidential and available in many languages. Call, chat online or text 2-1-1 every day between 8 am and 11 pm.

**Website:** bc211.ca

**Parent Support Services Society of BC** provides self-help parenting support to parents, grandparents raising grandchildren, kinship care providers and caregivers throughout British Columbia through their Parenting Support Circles program.

**Website:** parentsupportbc.ca/support-circles

Physical Activity

**Physical Activity Services – HealthLink BC** is staffed by qualified exercise professionals who provide general physical activity information and professional guidance to help British Columbians be more physically active and lead a healthier lifestyle. Translation services are available in 130 languages.

**Phone:** 8-1-1 (or 7-1-1 for the deaf and hard of hearing)

**Website:** healthlinkbc.ca/physical-activity

**Canadian 24-Hour Movement Guidelines** show that there is an important relationship between overall health and how much sleep, sedentary behaviour and physical activity children get in a 24-hour period.

**Website:** csepguidelines.ca

**HealthyFamilies BC**

**Website:** healthlinkbc.ca

Postpartum Support

**DONA International** is a global doula certifying organization. On their website you can learn about the types of support doulas provide and search for doulas working near you.

**Website:** dona.org

**Doulas for Aboriginal Families Grant Program** is offered by the BC Association of Aboriginal Friendship Centres and First Nations Health Authority. The goal of the program is to increase healthy birth outcomes for Indigenous families by removing the cost barrier to accessing doula services. The grant program provides Indigenous families living in B.C. up to $1,000 of coverage for doula services with each pregnancy.

**Phone:** 1-800-990-2432 toll-free or 250-388-5522

**Email:** doulasupport@bcaafc.com

**Website:** bcaafc.com/dafgp

**Doula Services Association of BC** promotes doula support for families in British Columbia. Their mission is to raise awareness about the role of Perinatal (fertility, birth, postpartum, loss) Doulas within B.C., to provide a referral service to B.C. families and to deliver continuing education to members, health care professionals and the public at large. Their referral program offers volunteer doula support to low-income families.

**Website:** bcdoulas.org/find-a-doula

**Nurse-Family Partnership** is a free public health program for parents who are having their first baby that ensures that the birthing parent and baby receive support during pregnancy, after the child is born and until the child is 2 years of age.

**Website:** healthyfamiliesbc.ca/nurse-family-partnership
Prescription Drugs

**PharmaCare** subsidizes eligible prescription drugs and medical supplies.
Phone toll-free: 1-800-663-7100
Lower Mainland: 604-683-7151
Website: gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents

Safety

**BCAA Child Passenger Safety Program** provides information and resources to keep children safe while travelling on B.C. roads.
Phone toll-free: 1-877-247-5551
Website: bcaa.com/community/child-car-seat-safety

**BC Injury Research and Prevention Unit** provides useful fact sheets by email.
Website: injuryresearch.bc.ca

**Canada Safety Council** is a national, non-government charitable organization that provides safety information, education and awareness covering traffic, home, work and leisure.
Phone: 613-739-1535
Website: canadasafetycouncil.org

**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: redcross.ca

**Environmental Working Group** is a non-profit organization that provides information to support consumer choice and civic action. They publish consumer guides in order to help individuals and families reduce their exposure to pesticides and toxins, and promote healthy households and environments.
Website: ewg.org

**Health Canada: Consumer Product Safety**
Phone toll-free: 1-866-662-0666
Website: hc-sc.gc.ca/cps-spc/index-eng.php

**National Highway Traffic Safety Administration** is a U.S. website that provides information on child car seat recalls.
Website: nhtsa.gov

**Poison Control Centre** provides 24-hour poison information services.
Phone toll-free: 1-800-567-8911
Website: dpic.org

**PreparedBC** offers help with emergency planning and creating emergency kits.
Website: gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/preparedbc

**Parachute** provides information on keeping children safe and preventing injuries.
Phone toll-free: 1-888-537-7777
Website: parachutecanada.org

**Safe Start** is an injury-prevention program of BC Children’s Hospital that provides information to parents and caregivers on how to make homes and cars safer.
Website: bcchildrens.ca/health-info/healthy-living/child-safety
Shaken Baby Syndrome

Prevent Shaken Baby Syndrome British Columbia
Phone: 1-888-300-3088
Website: dontshake.ca

The Crisis Intervention and Suicide Prevention Centre of British Columbia provides free, confidential, non-judgmental emotional support 24 hours a day, 7 days a week to people experiencing feelings of distress or despair.
Phone toll-free: 1-800-784-2433
Website: crisiscentre.bc.ca

Special Needs

If you think your baby has a developmental problem or a disability, your public health nurse can help. Most communities have an infant development program that can help you find support services and activities for your baby that will encourage development.

Ministry of Children and Family Development: Early Childhood Intervention services are provided to infants and young children who show signs of - or who are at risk of having - a developmental delay or disability. These services are tailored to the specific needs of each child and family. Visit the website or contact your local public health nurse or physician, or local service provider.
Website: gov.bc.ca/gov/content/health/managing-your-health/child-behaviour-development/assessing-child-development-38610

Supported Child Development of the Infant and Child Development Association of BC is a community-based program that offers a range of consulting and support services to children, families and child care centres so that children with extra support needs can participate in fully inclusive child care settings. To find a Supported Child Development Program in your area, ask your public health nurse or health care provider, or contact your local Ministry of Children and Family Development office.
Website: icdabc.ca/programs/supported-child-development

Speech Therapy

British Columbia Association of Speech/Language Pathologists and Audiologists
Phone toll-free: 1-877-BCASLPA (222-7572)
Website: speechandhearingbc.ca/public

Vision

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 unit.
Phone toll-free: 1-866-866-0800
Website: gov.bc.ca/gov/content/health/managing-your-health/healthy-women-children/child-teen-health/dental-eyeglasses

BC Doctors of Optometry offers a tool to find a Doctor of Optometry.
Website: bc.doctorsofoptometry.ca/find-a-doctor

BC Doctors of Optometry Eye Health Library
Website: bc.doctorsofoptometry.ca/eye-health-library

We are always looking for new and helpful resources for families. If you have any suggestions, please contact us at healthlinkbc@gov.bc.ca.
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Your child will go through amazing changes between 6 and 36 months of age. *Toddler’s First Steps* is packed with practical information on child development, nutrition, health and wellness, parenting and safety – all of which will help you provide the environment and support that contribute to your toddler’s healthy growth and development.

You can access more information at:

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HealthLink BC gives you quick and easy access to non-emergency health information and services. Speak with a nurse about symptoms, talk to a pharmacist about your medication questions, find information about physical activity from a qualified exercise professional, or get healthy eating advice from a dietitian. HealthLink BC will also direct you to other health services and resources available in your community.

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