DID YOU KNOW?

- The 10 most commonly consumed foods among young children 2-5 are milk, bread, soft drinks, cereal, juice, cookies, French fries, bananas, peanut butter, and macaroni and cheese.
- Only 45% of children 2-5 consume the recommended minimum servings of fruits and only 22% consume the recommended servings of vegetables daily.
- Food commercials in the past 25 years targeting young children have routinely promoted foods that are high in fat and low in fiber.
- Children who eat with their family tend to eat more fruits and vegetables to get calcium fiber and iron than those who do not.
- Children who see their parent or caregiver eating or trying new foods are more likely to try them.
- Some vegetables and fruits are more healthful than others; generally the darker the color, the healthier the produce.
- Children may reject vegetables because they do not like the feel of them in their mouth.
- Many young children do not like meats because they are hard to chew.
- Well-nourished children are less likely to experience the toxic effects of lead poisoning.
- Meals and snacks at regular intervals keep little tummies full and not in fasting state for too long.
- When babies drink from a bottle lying down or a bottle that is propped, liquid can pool in the middle ear leading to ear infections.

How do you make decisions about the foods that you serve? Can you think of one food that contains all of the nutrients that is needed for optimal growth and development? If you were told when you were little to “Eat your vegetables” or “Eat your fruits,” why is it that many young children do not seem to like vegetables— are they born that way?

It turns out that taste preferences are in fact developed prenatally. Research shows that unborn babies may detect taste differences as early as the 12th week of pregnancy. The taste of the amniotic fluid changes with the foods that the mother eats. For example, if a woman who eats a variety of foods including vegetables, exposes their children to different tastes.

Proper nutrition is especially important during infancy because it is a time of rapid growth. A typical infant will triple his birth weight during the first year. His brain will develop an amazing number of connections, many of which will last throughout his life. He needs the proper balance of fats, proteins, carbohydrates, vitamins and minerals to support all this growth.

Infant feeding is not just about providing nourishment. It also helps form the strong attachment between parents and their baby, which is the foundation of his social relationships throughout life. When parents or caregivers respond to a baby’s hunger cries, they are helping him to develop trust and giving him the stimulation that is needed to produce the hormones needed for brain growth and development.

During the infancy period, food choices are limited—breast milk, formula or a combination of the two. During the first 12 months of life, the ideal food is breast milk. Breast milk changes over the weeks and months of feeding according to each baby’s unique needs. For instance, during the first few weeks the milk is less fat and more protein and minerals. As the infant matures, the reverse is true. The milk content varies over the course of each feeding, containing more fat at the end. Substances in breast milk make it easy for children to digest and aid in the absorption of nutrients.

Human milk also contains antibodies that help protect infants against many diseases. There is evidence that breastfeeding contributes to intellectual growth and vision. Research also shows it provides some protection against obesity although the reasons are unclear. It may be because the amount of breast milk produced is determined by the infant’s demand which may help him learn self-regulation of food at an early age.

Breastfeeding can help in the acceptance of solid foods. The taste of formula is consistent from bottle to bottle while the taste of breast milk varies. There is evidence that breast fed babies become familiar with the taste of a variety of foods since the flavors of the food their mothers eat can pass into the milk.

During the first year, babies are beginning to recognize feelings of hunger and fullness and to regulate their food intake according to those feelings. We can help them by watching the baby’s cues and responding to them. A baby may show hunger by crying, opening her mouth and moving toward the breast, bottle or spoon. He may also make excited movements with his arms and legs or attempt to pull food toward his mouth.

Signs of fullness may include fussiness, refusing or batting the bottle or spoon away, obscuring his mouth when the spoon approaches and distractibility.

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FOOD ALLERGIES, INTOLERANCE OR DISLIKES??

Many parents are concerned that their child may have or develop a food allergy. If one or both parents have a food allergy, the child is more likely to develop one than if there is no family history. A food allergy is a response by the body's immune system to a food that it mistakes as harmful. The immune system releases massive amounts of chemicals any time that food is eaten in order to protect the body. These chemicals can affect the digestive system, lungs, skin or heart.

Sometimes people confuse allergies with food intolerances. Food intolerances are abnormal reactions to foods but they do not involve the immune system. Food intolerances are more common, generally less severe and more short-lived than allergic reactions.

True food allergies in children can cause a variety of problems ranging from eczema to life threatening reactions.

In early childhood the main foods causing allergic reactions are milk and eggs. Peanuts, tree nuts, soybeans and wheat can also cause allergic reactions. A milk allergy usually first occurs when infants are given cow milk based formula. Sometimes nursing babies develop a milk allergy when they are exposed to cow's milk in the mother's diet. Milk allergies affect an estimated 2-3% of babies and toddlers. Most will outgrow the allergy by age 2.

Sometimes, parents mistake spitting up as a sign of a food allergy or intolerance. Spitting up is not caused by an allergy but by immaturity.

It is recommended that only one food be introduced at a time and only one new food about every 2-3 days. This way parents can identify and eliminate any foods that may cause a reaction. Signs of possible allergies or intolerances include diarrhea, rash or vomiting. It is also recommended to wait until a baby is 12 months old to add milk, wheat, corn, citrus fruits (such as oranges or orange juice) and soy to his diet. If food allergies run in the family it is best to wait until a child turns 2 before offering eggs. At 3 he may have peanut butter and fish.

When a child first tastes a new food, he may pucker up. That does not necessarily mean that he dislikes the food. It may just be a reaction to an unfamiliar or unexpected taste or texture. Some dietitians recommend offering new foods at the beginning of the meal when the baby is the hungriest. If a baby refuses a food, it can be tried again in a few days. We sometimes send unconscious signals about a particular food especially if it is one that we do not like. Try not to let your disfavors influence the baby that we take care of.

INTRODUCING SOLIDS TO BABIES

Regardless of whether a baby has been breast or bottle fed, she should not be given solid foods before she is ready. Guidelines from the American Academy of Pediatrics recommend starting solids at 6 months of age, but your child's healthcare provider may advise starting earlier. We now know that starting solids too early may have negative effects. Until babies are around 6 months of age, their digestive systems have difficulty breaking down solid foods. Immature digestive systems sometimes allow whole proteins to be absorbed which can lead to allergies. They are also more likely to choke. The introduction of solids before 15 weeks of age has also been shown to increase body fat, weight and respiratory illnesses in childhood. There is even some evidence that early introduction of solid foods may be linked to diabetes.

There is no evidence that solid foods should be introduced in any particular order or way. Most healthcare providers however recommend starting with rice cereal because it is less likely to produce an allergic reaction. It can be mixed with formula or breast milk, or warm water. At first a baby may only eat 1 or 2 teaspoons per meal. What is not used during that feeding should be thrown out. Remember not to feed your baby solids through a bottle, but use a small infant spoon that is mostly flat so she can put her lips around the spoon.

Next you can offer vegetables, fruits and proteins that are finely mashed or pureed or purchased in the grocery store's baby food section. As your baby shows signs of chewing up and down, you can gradually offer lumpier textures. During the first year, the main food should be breast milk or formula with solid foods as a supplement. Gradually start whole milk at 12 months. Your baby needs the fat in breast milk or whole milk until she is two. This extra fat and calories are important for brain development.

Your can offer an open cup around 6 months of age. It can be messy but it is an important skill for children to learn. You will need to help her hold the cup at first. Giving up the bottle will help prevent tooth decay and offers your baby the chance to develop coordination of the mouth and tongue as well as developing wrist control.

SNACKS: HEALTHY AND NUTRITIOUS

Snacks do not have to mean "junk food". Snacks can be nutritional and contain some fat, some protein and some carbohydrate just like a good meal does. Encourage fruits, vegetables, whole grains and water instead of high calorie juices, sodas, and processed snack foods. Remember any food that has value as a menu item for a meal is also a good choice for a snack.

TIPS ON HEALTHY FOODS

*Work fruits and vegetables into the daily routine aiming for 5 servings a day.
*Make it easy for your child to choose healthy snacks by having fruits and vegetables on hand. Other good snacks include yogurt, whole grain crackers, cheese and peanut butter.
*Serve lean meats and other good sources of protein such as eggs and nuts.
*Serves whole grain breads and cereals so your child gets more fiber.
*Limit fat intake by avoiding deep fried foods and choosing healthier cooking methods such as grilling, roasting, broiling or steaming.
*Limit fast food and other low nutrient snacks such as chips and candy. Don't completely ban favorite snacks from your home. Instead make them "once-in-a-while" foods so your child does not feel deprived.
*Limit sugary drinks such as soda and fruit flavored drinks. Serve water and milk instead.
AVOIDING FOOD FIGHTS

Feeding a toddler can be much harder than feeding an infant. You may wonder about how often, what and how much he should eat. For most parents, helping their child to develop a healthy relationship to food becomes more challenging when he becomes a toddler. Your child may be picky one day and eat everything you offer the next. His diet will balance out over several days if he is offered a variety of healthy foods that are high in nutritional value. There is no one food that contains all the nutrients that are needed for optimal growth and development. All foods that children eat should have nutritional value including the snacks that they eat.

As your child begins to try new foods, it is important to remember that he has to acquire a taste for the food. Don’t pressure him or force him to eat new foods. Keep offering the food and he will eventually come to accept it. It may take being exposed to the new food at least 10 times before a child actually eats a few bites.

Toddlers need to eat every 3-4 hours because of their high energy level and because they can only eat small amounts at a time. The serving size for children is a lot smaller than the serving size for an adult. A rule of thumb is that a serving size for a child up to age 5 is one level teaspoon of food for each year of life. For example, a 2 year old child should eat about 4 teaspoons of fruit and 8 teaspoons of veggies a day. When this is spread throughout an entire day, usually 3 meals and 2-3 snacks, this is not a large amount per meal or snack. Snacks should be offered at times that won’t interfere with mealtimes.

Offer your child foods from all of the food groups each day. The amounts below are a guideline for a full day’s serving. Try to offer at least 2 of each food group at snack times and all of the food groups at mealtimes.

- **Grains:** 3-5 ounces (1 ounce = 1 slice of bread, 1 cup cereal, 1/2 cup cooked rice or pasta)
- **Vegetables:** 1-2 cups (1 cup = 1 cup raw or cooked veggies or juice)
- **Fruits:** 1-1 1/2 cups (1 cup fruit or juice or 1/2 cup dried fruit)
- **Milk:** 2 cups (1 cup = 1 cup milk or yogurt 1/2 ounce natural cheese)

Meats and beans: 2-5 ounces (1 ounce = 1 ounce meat, poultry or fish, 1/4 cup cooked dried beans, 1 egg, 1 tablespoon peanut butter, 1/2 ounce nuts)

Children are unpredictable in the amount and types of food they eat from day to day even from meal to meal. The calorie intake of young children can vary daily. Each child’s calorie needs depend on their size, activity level, and temperament. Growth spurts can make children seem constantly hungry for a few days while hot weather or minor illnesses may turn big eaters into ones that pick at everything.

Children will usually eat when they are hungry and stop when they are full. Children should be able to decide how much they need to eat to satisfy their hunger. You want your child to learn to eat when they are hungry and stop when they are full. Obesity is a leading cause of death in the US and one way that we can assist our children to avoid this danger is by letting him follow his own hunger cues.

EATING BEHAVIORS

The way we as parents feed our child when they are infants and toddlers will help them to develop opinions about food and eating. If they had a pleasant and enjoyable experience eating, they are more likely to have a healthy relationship throughout life.

Feeding and eating involves both the child and the parent. Both are responsible for developing and maintaining a positive feeding relationship. Parents are responsible for providing food for their child at reasonable intervals daily while the child is responsible for deciding what and how much they eat. We help our children by providing a variety of nutritional foods in a form that is appropriate for your child’s age and by respecting him to give us the cues for hunger and fullness.

Two important milestones in a young child’s life are self-feeding and developing a positive relationship with food. To develop that relationship children need a calm, supportive and interactive environment. Emotional or physical stress such as an illness may result in refusing food. We can place a variety of foods on our child’s plate without any pressure to eat them. This will give them the opportunity to try the food if he wants to especially if he sees other family members eating it. If a child experiences pressure to try new foods or to eat, he may avoid eating. The more we pressure him to eat, the worse the situation becomes. It is best to resist the urge to pressure him to eat, including threats, bribery or begging.

If a child tries a new food give him lots of smiles but if he refused to try a new food, ignore it without saying anything. If every time he refuses to try new foods we prepare him something that he likes as a replacement, we are reinforcing that refusal behavior. This could lead to short order cooking and making a special meal for each child. Often when a child refuses a food once, we respond by not offering it again which will limit the foods that are offered to the child. We may assume that any new food that is offered will be refused so we don’t offer any new foods in order to avoid any confrontation. We sometimes require that he take a bite of each new food offered. This could lead to increased food refusal and a battle of wills between the parent and child. Remember that it takes up to 15-20 exposures to a new food before a child may take a bite of it.

Mealtimes with toddlers can be more enjoyable if we have realistic expectations. It is typical for young children to refuse foods and have little interest in eating at times. They may turn down foods that they have previously eaten and like. They will spill and make a mess especially if they are learning to feed themselves. Meals will get neater as his fine motor skills are refined. Unless the mess is made deliberately, ignore it. Meals should last anywhere from 10-25 minutes. If it lasts less than 10 minutes we may be rushing our child to eat.

Feeding your child is not just about providing the nourishment he needs. It includes you being a role model when snacking or at mealtimes for good eating habits. Fill your plate with a variety of nutritious foods including those vegetables. Let your child see that you enjoy or at least willing to taste new foods. Mealtimes are also a good time to help your child learn appropriate table manners such as not talking when food is in their mouth, chewing food with their mouth closed, using napkins, and placing hands in lap.

Thore healthy eating habits which are established in early childhood will last a lifetime.

The Hoke County Library offers programs for children throughout the year. Call (910) 875-2502 for more information.
10 WAYS TO GET YOUR CHILD TO EAT BETTER

1. Make a schedule. Children need to eat every 3-4 hours: three meals, two snacks and lots of fluids.

2. Plan dinners. A good meal does not have to be fancy, but it should be balanced.

3. Don’t become a short order cook. Prepare one meal for everybody and serve it family style.

4. Introduce new foods slowly. Children are new-food phobic by nature.

5. Dip it. If your kids won’t eat vegetables, experiment with different dips.

6. Make morning count. Start the day off right by eating breakfast.

7. Get kids cooking. When children are involved in choosing and preparing meals, they are more interested in eating their creations.

8. Limit the junk foods. You and not your child is in charge of what foods enter the home.

9. Be creative with the meal.

10. Be a good role model.

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Growing up is hard to do ... As a child grows up during the preschool years, he may seem unpredictable and hard to understand. He may get very excited about an activity only to leave it suddenly without explanation. Sometimes you have to tell him the same thing a hundred times it seems. Still he forgets to do as you ask. He can be adorable one minute and whiny or petty the next. He may for no apparent reason begins to be afraid of all sorts of things that have never bothered him before. In other words, your child is experiencing some rough spots on his journey to growing up. Your preschooler is no longer a baby. You have expectations of him taking some responsibilities for himself. This is good. Most of the time he is probably ready to do things for himself. But there are times when he wishes someone else would take care of his responsibilities. This shows up particularly if there is a younger sibling in the home from whom less is expected. Try to understand how your child feels. Let him know you understand his feelings. By putting yourself in your child’s shoes, you can help him get through the occasional rough spots in his young life.

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GOOD MOOD, BAD MOOD

Preschoolers can sometimes be moody when things do not go their way. A child’s mood can change quickly from joy to anger. Often you may not know why they are upset. For example, it may be that no one is paying them any attention or she can not make her new toy do what she wants it to do. When her expectations are not met she may stomp her feet or pout without ever letting you know why. Try to put yourself in her shoes. See if you can figure out what the problem is. Be sympathetic, even if you think her reason for being in a bad mood is not important. If she feels that you understand, she’ll get over her moodiness quicker.

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CHILDREN LIKE TO HELP

Beginning very early, children show us that they can be kind to others and help them. Even toddlers like to help. Children really enjoy helping out and will continue to do so if they are taught how they can help and then encouraged to do so. Fostering kind thoughtful behavior in the first place can help to prevent a lot of the hurtful aggressive behavior that is seen in some children as they develop and grow older. Some guidelines: 1) plan “nice to do” activities, 2) verbally label thoughtful and cooperative behavior, and 3) model cooperative, helpful behavior for your child to see.

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PROTECT YOUR EYES

Did you know that your child’s first routine eye exam should be around six months of age? Eye exams for children are extremely important. Five to ten percent of preschoolers have vision problems. Early identification of a child’s vision problem can be crucial because young children often are more responsive to treatment when they are diagnosed early. Early eye exams are also important because children need good eyesight including near and distance vision, perceptual vision, peripheral awareness, focusing, binocular (two eye) coordination and eye-hand coordination to learn many basic skills. The early eye examinations help to make sure that children have the normal healthy vision that they need in order to perform better in school and play.

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GIVE CHILDREN WORDS

Since children learn new words by hearing and seeing, parents and caregivers can do much to add to a child’s vocabulary. For very young children, this can be done by naming objects that they see and come in contact with on a daily basis. Identifying and naming objects does sound a lot like talking to oneself especially when doing this with a very young child, but it is a worthwhile endeavor.

Many children may not pronounce words correctly when they are just learning to talk. Instead of always correcting them, simply repeat the word in a sentence using the correct pronunciation. Don’t be afraid of introducing new words in your conversations, but make sure that those new words are words you would not mind hearing your child say.

Other ways to help children learn new words include reading stories aloud to them. Remember to turn off the television and just interact with your child through reading, play and games. Teaching children to be curious about their world and the words that describe their world can start them on a journey of discovery on their own.
FEBRUARY IS DENTAL HEALTH MONTH

The month of February is Dental Health month. It is very important to give your child a good start in dental health habits so that they are able to maintain healthy teeth and gums.

Avoid baby cavities by not giving your baby a bottle at bedtime or naptime. If you must give him one, make sure it contains plain water not formula, milk or juices.

After each feeding, gently wipe your baby’s gums with a soft damp cloth or gauze pad. When the first teeth appear, begin using a soft-bristle toothbrush and water to clean them on a daily basis.

Brush teeth with toothpaste once a child is able to spit it out and not swallow it.

The American Dental Association recommends that parents take their babies to a dentist by their first birthday for their first dental exam, but some pediatricians say that the first visit can wait until the child is age 3 as long as you practice good home dental care.

LEAD AWARENESS

According to the Centers for Disease Control and Prevention, almost 900,000 children in America have elevated levels of lead in their blood. Lead poisoning happens when a person gets lead in their body. Anyone at any age can be poisoned by lead, however lead is the most dangerous to pregnant women and children who are under the age of seven.

Lead can be found in cracking or peeling lead-based paints that were used in many homes that were built before 1978. Lead can also be found in soil that is in yards, gardens or playground that are near lead painted buildings or busy streets. Some toys, crayons, lead crystal, pottery, vinyl miniblinds and antique furniture may also contain lead.

Lead poisoning can be treated, but prevention is the best.

Some ways that you can help to prevent your child from getting lead poisoning include: wash cradles frequently and wipe window ledges and other areas where children play with a damp cloth weekly; and, especially, keep lead-based paint from being rubbed on bedding, utensils, or other surfaces that are frequently touched.

Two of the most important ways to prevent lead poisoning are washing your hands and having your children wash their hands frequently especially before eating meals or snacks and making sure that you and your child eat balanced diets. There is research about good nutrition and the absorption of lead in children. Well nourished children are less likely to experience the toxic effects of lead poisoning. Meals and snacks at regular intervals keep the stomach full and not in a fasting state for a long time. It has been found that lead absorption increases after fasting. Diet also need to have sufficient iron, calcium, protein, and vitamins in them. A well nourished body will not absorb lead as easily as one that is malnourished.

Long term effects of lead in a child can be severe. They may include mental retardation, learning disabilities, decreased growth, hyperactivity and reduced attention span. The signs of lead poisoning may not be noticeable until the level is dangerous. The only way to know for sure is to have a blood test.

IMMUNIZATIONS ARE IMPORTANT

Immunizations are preventative measures that we can take to protect our children from diseases that are infectious and which may lead to disabilities or even death. If children are not vaccinated, complications such as deafness, pneumonia, blindness, brain damage, paralysis or kidney damage may occur.

Childhood diseases can be prevented. The occurrence of many childhood diseases that were prevalent years ago has been reduced dramatically in the US as a result of children being immunized. When other children are vaccinated there is a reduced risk in the environment to other children who are unable to be or have not been vaccinated.

Some parents do not want their child vaccinated for cultural, philosophical or religious reasons. In recent years, some parents have expressed concerns about the safety of the vaccines that are given to children. However, available scientific research supports the argument that children should receive the immunizations as recommended by the American Academy of Pediatrics, American Academy of Family Physicians, and the Advisory Committee on Immunization Practices.

It is important to remember that your child is not fully protected if they have only received part of the recommended shots. Diseases are not prevented by partial immunizations. If your child misses a shot, make them up as soon as possible. If your child has not yet received any immunizations, it is not too late to start. Check with your health care provider and follow their recommendations for your child's immunizations.

It is never too early to start practicing routines with your child. A positive learning environment is necessary and the interactions that occur during those daily routines are critical to building your child's self-esteem and confidence. No matter what the age of your child, the development of routines will help him to grow and learn.

DAILY ROUTINES HELP CHILDREN LEARN

Children are born to learn. The first two years are very important for growth and brain development in young children. Parents and other caregivers play an important role in that process. Any interaction can be a learning opportunity for children. Children learn through watching and interacting with their environment using all of their senses.

Children do many activities during the day. As schedules change, children sometimes wonder what is next in their day. They need to have a predictable schedule that gives them the opportunity to do the activities that they enjoy and need to do. A routine that is consistent will help to accomplish that. Routine tasks are wonderful learning activities which provide the repetition that children need to make the pathways and connections in the brain permanent and smooth. A routine may be boring to adults but it helps a young child's world have order and organization.

It is never too early to start practicing routines with your child. A positive learning environment is necessary and the interactions that occur during those daily routines are critical to building your child's self-esteem and confidence. No matter what the age of your child, the development of routines will help him to grow and learn.
If you are the parent of an infant you probably wish that you could get a single night of uninterrupted sleep. You are not alone. Sleep problems are one of the most common concerns that parents will bring to their pediatrician.

Some children may fall asleep immediately when they are placed in their crib or bed while others may need a transition time. Get to know your child's cues to let you know when he is getting tired. If at all possible place him in his crib or bed while he is still awake. This will help him to begin developing a healthy sleep and self-calming pattern. Develop and follow sleep routines for both bedtime and naps. Try to avoid getting children used to sleep-nap associations such as falling asleep with a blanket or bottle, being rocked or having their back rubbed.

All children go through deep and light sleep cycles during the night. During these cycles babies may briefly become aware without fully waking up and others may completely wake up. Often many children will return to sleep without even knowing that they have been awake. Children need to learn how to go back to sleep on their own. Sleep patterns and needs change as young children get older. Because they are growing and developing, their sleep needs will begin to decrease. Other causes which may cause a change in their sleep patterns include changes in the environment, illness, birth of a sibling, travel or their temperament. There is no set rule about how much sleep a child needs. Every child is different. The child's physical needs, temperament and metabolism all play a part in determining how much sleep the child needs and what their sleep pattern will be.

If your child is in day care, talk with the provider about your child's sleep routine. If it is possible, the child care provider should try to follow the same sleep routine that you have at home. When the same routine is followed at home and day care setting, the child learns what is expected and feels comfort in the consistency.

Here are some tips to help children settle to sleep:

- Put baby in bed when sleepy but awake so he can learn early on to get himself to sleep
- Establish a bedtime that is predictable—bath, getting into pajamas, having a quiet bedtime story, getting a hug and a kiss—will help your child to feel a sense of security and well-being
- From the beginning, help your baby learn that night-time feedings are for eating. Keep lights low and interactions quiet and soothing
- During the night, give your child a chance to settle himself back to sleep. He may not need your help.

### HEALTHY LIFE STYLES START YOUNG

As parents, our eating and fitness habits impact our health. It is widely known that with healthy eating and exercise we can live longer and have a lesser chance of having major illnesses. We look and feel better as well as helping to save on some medical costs. When we are healthy and fit, we have more energy, strength, and a more positive outlook on life. One of the biggest nutritional concerns that our young children face is obesity. Children whose parents have overweight have a tendency to be overweight as well. Research has shown that since 2000, the number of preschool children who are overweight has increased by 38%. Obesity can lead to future long term health problems which may include diabetes, high blood pressure, sleep apnea, and even some cancers. It can also lead to low self-esteem and depression. As parents we tend to feed our children the same foods that we are eating. Some parents, especially teen parents, are overfed but undernourished because many times we eat at fast food restaurants. Young children love to imitate their parents and others who care for them, so we should let them see us eating fruits and vegetables that are more like to eat those instead of French fries and hamburgers. Those parents who are obese tend to have obese children. Just like children who are born to learn, they are born to move and be active. Activity helps a child to develop in an aches and emotionally, socially and cognitively. We sometimes think that because our child is not eating everything, that they are too skinny; however, they may not be as active as we think they are. We often confuse "busy" with "being active". Try to include your children into your activities. If you spend time outside doing something exciting, then your child will enjoy being outside and doing activities. It is recommended that children have at least 60 minutes of physical activity daily. Let’s remember to set a positive example for our little ones by eating healthy and being physically active.

### Sudden Infant Death Syndrome

Sudden Infant Death Syndrome (SIDS) or “crib death" is the leading cause of death in infants in the first year of life. When SIDS occurs, an infant dies suddenly during sleep. SIDS is not hereditary or a rare disease. It is a medical disorder. SIDS is not caused by child abuse or neglect, immunizations, or minor illnesses like a cold. SIDS can strike any family at any time. It does discriminate between race, religious economic or ethnic groups. It does appear to affect more males than female infants. The rate of SIDS is higher for African American and American Indian babies and is more likely to occur in colder months. About 1 in 5 SIDS deaths will occur while someone other than their parent is caring for the infant. There is no one specific cause of SIDS. Research has shown that some infants who died from SIDS were born with brain abnormalities. The brain which controls breathing and waking during sleep may have a defect. Premature exposure to toxic substances such as alcohol, second hand smoke or nicotine may also cause the baby to be more susceptible to SIDS. Other factors may include higher levels of carbon dioxide in the blood, overheating or lack of oxygen. Normally when a baby does not get enough oxygen while sleeping, the brain will send a signal to interrupt his sleep to change position or he begins to cry to alert his parents.

SIDS also tends to affect babies who were born premature, had low birth weight, had young teen mothers, or had mothers who had late or no prenatal care. If you are pregnant you can lower the risk of SIDS by getting good prenatal care early, avoid exposure to alcohol, tobacco, drugs, and second-hand smoke.

After your baby is born, place him on his back to sleep so he does not breathe carbon dioxide. Let him sleep on a firm and smooth mattress and avoid pillows, stuffed animals or quilts in the crib as these can obstruct the baby's airway even while sleeping on their backs. Keep the room at a comfortable temperature and close the baby warm but not overheated so that he becomes overheated and falls into a deeper than normal sleep. If you do use a blanket make sure that your baby's feet are not at the top of the crib with the blanket, which should be lightweight, is no higher than the infant's chest and tuck it along the sides and foot of the crib. Do not use bumper pads or wedges or place your child to sleep on waterbeds, sofas, pillows, or comforters. Remember to always check with your baby's medical care provider about which sleeping position is best for your baby as some medical conditions may affect the position your baby needs. Also consult him if your baby has trouble breathing or becomes ill.

Even with all the research, SIDS cannot be identified in advance but preventive measures can help lower the occurrence of SIDS.

The Hoke County Extension Office provides information and offers many programs to the residents of the county. These include 4-H programs for youth ages 5-18, nutrition, horticulture and agriculture. For more information call (910) 875-3164 or 875-2162.
Parents As Teachers is a free and voluntary family support program for parents with children ages 0-3 in Hoke County. PAT has certified parent educators, both English and Spanish speaking, who provide individualized personal visits, group connections, developmental screenings, and is a resource network. We are located beside Burlington School. PAT is funded by Smart Start and administered by Hoke County Cooperative Extension.

Cooking Corner
Here are some snack ideas that are sure to please

**Apple stuff**—core a small medium size apple and fill it with low sugar peanut butter

**Ants on a log**—spread low sugar peanut butter on celery stalks and sprinkle with raisins

**Frozen grapes**—wash and freeze seedless red or white grapes

**Banana smoothie**—blend a cup of vanilla yogurt, one ripe banana and ice for delicious smoothie

**Sweet-n-sticky wrap**—dip a spoon in honey and allow to drip off spoon on tortilla, shake cinnamon sugar onto honey, roll up tortilla with honey on the inside

**Hit the trail mix**—mix 1 cup each of dry cereal, raisins, small pretzels, cheez-it crackers (can add dried fruits if you like)

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**ART CORNER**

**Paper Heart Wreaths**

Materials: paper plates, glue, scissors, construction paper of various colors, crayons

-Cut the center out of a paper plate to leave a round donut shape. This is the base of the wreath. Fold construction paper in half or in fourths and cut out a half heart shape along the fold of the paper. Unfold your cut out shapes and glue onto wreath base. Shapes can overlap to make the wreath appear fuller.

**Pine Cone Bird Feeder**

Materials: pine cones, bird seed, peanut butter or shortening such as Crisco, pie pan, yarn, butter knife

-Pour some bird seed in the pie pan. Spread the peanut butter or shortening on the pine cone and then roll in the bird seed. Hang in the yard in a tree using the yarn to feed the birds.

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**WORD SEARCH**

| A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z |

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**CALENDAR OF EVENTS**

- **January**
  - Bath Safety Month
  - New Year’s Day 1/1
  - Three Kings Day (Dia de los Santos Reyes) 1/6
  - Martin Luther King, Jr. Birthday 1/16
  - National Hugging Day 1/21

- **February**
  - Dental Health Month
  - Black History Month
  - Groundhog Day 2/2
  - Valentine’s Day 2/14
  - President’s Day 2/20
  - Leap Day 2/29

- **March**
  - Save Your Vision Month
  - National Poison Prevention Month
  - Read Across America Day/Dr. Seuss’s Birthday 3/2
  - Daylight Savings Time Begins 3/11
  - St. Patrick’s Day 3/17
  - Spring Begins 3/20