

Chilliwack Child Development **GUIDE**

Encouraging healthy development during the early years





Together We Can

The Chilliwack Child and Youth Committee is a partnership of agencies whose purpose is to improve outcomes for children, youth and families in Chilliwack. The participating agencies recognize the need to work together and bring their expertise and understanding regarding issues surrounding children, youth and families to the committee.

The CYC sub-committees branch off from the main committee to more specifically serve the community of Chilliwack.



Early Years Committee

Focusing on the developmental needs of children 0–6 and supporting their caregivers.

Middle Years Sub-Committee

Identifying the unique needs of children 7–12.



Youth Matters Committee

The Youth Matters Committee concentrates on supporting youth between the ages of 12–19.

Clinical Sub-Committee

Pays close attention to the delivery and integration of services in our community and how they can most benefit children, youth and their families.

Member Agencies

Ann Davis Transition Society
Big Brothers Big Sisters
Chilliwack Addictions and Prevention Services
Central Gateway for Families
Child and Youth Mental Health
Chilliwack Community Services
Chilliwack Division of Family Practice
Chilliwack Hospice
Chilliwack Hospital & Health Care Foundation
Chilliwack Learning Community Society
Chilliwack Society for Community Living
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Fraser Health
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School District #33
United Way of the Fraser Valley
University of the Fraser Valley
YMCA

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This guide is not intended to replace medical diagnosis or care, but to encourage parents and caregivers to seek additional information and support from an appropriate medical facility, service provider, or program. Many are listed at the end of this guide.

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INTRODUCTION



As a caregiver, you have the most important job in the world. You will be the person making the most significant contribution to your child's life, providing the experiences and opportunities that will influence his or her entire development.

The time period from before birth to around age five is considered vital to a child's future success in life. Research has overwhelmingly shown that brain development occurs within a relationship; that is, the baby's brain relies on the parent's behaviour to provide the experiences that support brain development. This brain development includes not only cognitive skills such as paying attention in school, but physical as well as socioemotional skills such as empathy, perspective taking, cooperation and the ability to regulate emotional states. Thus, our role as parents and caregivers is to provide the kind of nurturing and attention that will have a lasting and positive impact on our children's lives.

This guide provides information about where to go in the community when you have concerns or want to connect with other resources for dental, nutrition, eye sight, hearing and language development. Early identification and intervention are the best approaches when a delay in development arises. There are many resources in Chilliwack which are available to help support you and your child. As a community we want to help you provide the best opportunities and support for your children.

This guide will help you recognize the different developmental stages that your child will go through. As each age is described, please remember that every child develops at a different pace. Important developmental skills are supported with



Temperament Reactivity

Activity Level	level of gross motor activity
Attention Span	duration of interest or orienting
Fearful Distress	Wariness and distress in response to new things, including time to adjust to new situations
Irritable Distress	Extent of fussing, crying and distress when desires are frustrated
Positive Affect	Frequency of expressions of happiness and pleasure
Self-Regulation	Effortful Control Capacity to voluntarily suppress a reactive response and execute a more adaptive response.

Rothbart (2004)

every day examples of how to help your child reach those skills. At the end of each developmental period is a section on what concerns to be aware of. If you have concerns you are encouraged to talk to your family doctor to assess the need for a community referral.

Understanding Your Child's Temperament

If you have ever been around more than one child you will quickly realise that individuals differ in some pretty fundamental ways. When we describe someone as outgoing, active and energetic and others as cautious and quiet or as negative and angry we are referring to **temperament**—*early appearing, stable individual differences in reactivity and self-regulation*.

Reactivity refers to a person's quickness and intensity of emotional arousal, attention and motor activity.

Self-regulation refers to strategies to soothe or calm oneself or to modify the reactivity and to execute a more adaptive response—also called **effortful control**.

Understanding that children are “born this way” can help parents adapt their behaviour to meet the needs of their children. Also, while there is a strong biological and genetic component to temperament, there is much that can be modified through the parent-child relationship. For example, irritable infants who fuss and cry frequently but are consistently responded to in a warm timely manner develop into calm and self-regulating toddlers. Likewise, effortful control can be developed through patiently teaching the child how to delay immediate gratification as well as parents modeling this behaviour.

If you try to understand and value your child's temperament it will have a positive

impact on his/her development and on their relationship with you. If you adapt to their style (rather than trying to get them to adapt to your style) you will build a closer relationship with your child and help them fit into their world more successfully. In fact, the fit between a parent's and a child's temperament is one of the most crucial aspects of forming a secure attachment.

Ways to help children who are more likely to respond with negative emotions:

- Create 'calm places' in the house where they can go to relax and unwind.
- Show you understand their feelings.
- Do not punish them for over-reacting.
- Give them plenty of warning before changing activities.

Ways to help children who respond with more fearful distress:

- Make the environment calm and predictable.
- Respect their pace.
- Use yourself as their safe base to explore.
- Model positive emotions when in a new situation or meeting new people.
- Prepare your child ahead of time if they are to meet new people.
- Establish routines so things are predictable.

Ways to help children who are very active:

- Offer lots of opportunity for safe, active exploration (child proof your home).
- Accept that children need to move.
- Give them opportunities for movement in busy times, just as putting them in a bouncy chair when you are preparing dinner or getting an older child to assist by setting the table.

Building a solid foundation with your child— The Attachment Relationship

Most of us have heard the term “attachment”, but what does it really mean? According to researchers *“attachment is the strong affectional tie we have with special people in our lives that leads us to feel pleasure when we interact with them and to be comforted by their nearness during times of stress”* (Berk, 2012).

All children need love, but attachment is more than love. Attachment is an internally sensed belief within a child that they can trust their primary attachment figure to keep them safe. This felt sense of trust which is largely developed within the first year of life has been shown to relate to many areas of child development, including:

- More organized and efficient brain function.
- Greater academic achievement
- Increased social and communication skills.
- Higher self-esteem.
- More friends, less aggression and less behaviour problems.
- Greater happiness and success on many levels into adulthood.



Given the strong relationship between early secure attachment and later positive development it makes sense that as parents we would want to develop this relationship as much as possible. Fortunately, it is fairly easy to do. Here are some tips:

1. **Eye contact** has been shown to relate strongly to the development of brain areas that influence effortful control, emotional control and empathy. Look into your baby's eyes; give your children all of your attention when they talk to you. Put down the iPhone and shut off Facebook!
2. **Children need gentle appropriate touching.** Cuddle, hug, stroke and massage your child to let them feel your love, attune yourself to their comfort with touch. Never force touch on your child. Some children may find touch uncomfortable.
3. **Be consistent.** Routines and structure provide predictability which helps a child regulate, know what to expect and makes them feel safe.
4. **Be warmly responsive.** If your baby is crying, pick him up. If your toddler wants to talk while you are on the phone, give them 30 seconds to tell you their news, make them feel they are the most important person in your life. If your preschooler comes home in a bad mood, sit down with them and find out how you can help.
5. **Spend time with your child.** It does not need to be all play you can garden and cook together as well as go to the park.

Being present with your child, being responsive, warm and consistent, enjoying their company, and attuning yourself to their needs will help develop a secure attachment relationship with your child.



Prenatal to Birth

Congratulations, you're expecting a baby! Here are some things you can do right away.

- 1. Choose a health care provider immediately.** Your health care provider can help you have a healthy pregnancy and a healthy baby. At the beginning you will visit your health care provider every 4–6 weeks. After about 30 weeks you will have visits every 2 weeks and in the last month every week. Your Medical Services Plan (MSP) will cover the cost of a family physician, a registered midwife or an obstetrician. If you do not have a family doctor you may go to a walk-in clinic where a doctor can refer you to receive maternity services.
- 2. Register your pregnancy with Fraser Health's "Best Beginnings" program.** By doing this you will be connected to supports and services during your pregnancy and after your baby is born. Once you register you will receive a package in the mail with information about healthy food choices, childbirth classes, free prenatal breastfeeding classes and feeding and caring for your new baby. You can register online at bestbeginnings.fraserhealth.ca or by phoning Chilliwack General Hospital Maternity at 604-795-4107 to make an appointment to receive the information package and meet with the Antepartum Nurse.
- 3. Eat a healthy diet.** Eating a healthy balanced diet will increase your chance of having a healthy baby and will keep you healthy after your baby is born. Eat from all the four food groups as outlined in Canada's Food Guide and choose foods that contain essential vitamins and minerals. Healthy weight gain while

you are pregnant can decrease the risks for gestational diabetes and can also decrease the chances of giving birth to an underweight baby.

4. **While you are pregnant it is important to avoid certain foods.** Some foods may contain bacteria which can cause miscarriage, stillbirth or a sick baby. Foods to avoid: sandwich meats and soft cheeses; raw or undercooked fish, meat, chicken, eggs and seafood; unpasteurized milk, juices and liquid eggs; refrigerated smoked seafood and shellfish; pates, meat spreads; raw sprouts; uncooked hotdogs. Also avoid fish which contains high amounts of mercury.
5. **Avoid alcohol and drugs.** Everything you eat, drink or take into your body, affects your baby. Any amount of alcohol in pregnancy could increase the risk of the baby developing Fetal Alcohol Spectrum Disorders, which could mean a lifelong disability for your child.

Stages of Pregnancy – Your Growing Baby

The First Trimester: 0–14 Weeks The first trimester is a critical time. It is the period of rapid growth and development of the fetus. It also the time when the fetus is most at risk from hazards such as smoking, alcohol, drugs, infections and X-rays. By the end of the first trimester, all of the organs will be formed and functioning.

The Second Trimester: 15–27 Weeks During the second trimester the brain develops a lot. Most of the brain's development begins now and continues after your baby's birth. You will start to feel your baby move. During the second trimester until about 24 weeks, the fetus cannot live outside your body because its lungs, heart, and blood systems have not developed enough.

The Third Trimester: 28 Weeks to Birth During the third trimester your baby continues to develop, gains weight, and begins to prepare for the birthing process. The closer to full term, the better your baby will be able to cope with the birth process and life outside the uterus. The earlier a baby is born, the greater need for special care to decrease the risks from a preterm birth.

Bonding with Your Unborn Baby

Research has discovered that unborn babies can see, feel, hear, remember, taste and think before birth. Massage your growing belly or let your partner massage your belly and see how the baby responds to your touch. By 23 weeks an unborn baby's hearing is developed enough for it to respond to outside noise. Talk to and sing to your unborn baby. The songs you sing pre-birth may be the ones that soothe your baby once they are born.

Ready, Set, Learn

Helping your
preschooler get
ready for school



ReadNowBC

**February is Ready, Set, Learn Month for 3 year olds.
Check your local school for open house dates!**

DEVELOPMENTAL MILESTONES



There are three domains of development that we will be discussing in the developmental milestones: socioemotional development, cognitive development, and physical development.

Socioemotional development refers to changes in emotional communication, self-understanding, knowledge of and relationships with other people, interpersonal skills, empathy, moral reasoning and moral behaviour. The ability to understand and express a full range of emotions as well as regulate them is perhaps the most important development in a child's life. Inability to emotionally regulate is related to mental health issues, academic failure, physical disease processes, substance abuse and poor relationships.

The ability to regulate one's emotional state is crucial for developing deeper qualities such as empathy, caring, resilience and self-esteem.

Cognitive Development is the ability to communicate, adjust oneself to environmental changes, think creatively, pay attention, solve problems and develop a lifelong desire to learn.

Physical Development includes both gross motor skills which allow the child to gain balance and bring large muscles under control in order to master such activities as sitting, crawling, walking as well as fine motor skills which relate to mastering precise and accurate small muscle movements of the fingers and hands in order to reach for things, grasp and manipulate small objects. Physical development also includes the functioning of the body systems, perceptual capacities and physical health.



Typical Socioemotional Skills

1. **Enjoys and needs a great deal of physical contact and touch.**
 - Gently rub and massage your baby's arms, back, legs and tummy.
2. **Fixes eyes on your face, studies faces and prefers social interaction.**
 - Get excited when you get eye contact, use different pitches in your voice and expressions on your face to show your attention.
3. **Demonstrates different moods (unhappiness and excitement).**
 - Respond immediately and warmly to baby's cries this will help develop a secure attachment. You cannot spoil a baby!
4. **Smiles and coos responsively, beginning to recognize familiar voices and faces and calms down in response.**
 - Talk to your baby, create routines to help him know what's coming next, pause and observe your baby's reactions, give them time to respond to you.
5. **Startles to loud noises.**

Typical Cognitive Skills

1. **Focuses on high contrast patterns and faces over bright or big objects.**
 - Place an interesting mobile above the crib.

2. **Can distinguish sounds from speech.**
 - Speak to your baby frequently; call out their name to help them locate sounds.
3. **Recognizes a few objects.**
4. **Starts to associate people with behaviours.**
 - Speaking to your baby while engaging in nurturing activities helps build associations with your voice and presence with positive experiences.

Concerns



If your baby most of the time:

- Does not respond to sounds, especially to loud unexpected sounds.
- Does not respond with a smile when smiled at by others.
- Does not make eye contact with caregiver.
- Does not like to be cuddled or arches her back when held.
- Has limp or floppy body posture.
- Holds hands tightly closed most of the time.

Typical Physical Skills

1. **Lifts head when held, supported against your chest.**
2. **Sits with support on your lap.**
 - Doing gentle knee bounces together will help baby learn to control her head.
3. **Movements are more deliberate.**
 - Place baby on tummy to help develop strength in neck, arms and shoulders.
 - Give baby a rattle to hold so they can learn to briefly grasp.
 - Dangle objects in front of your baby so they can learn to use eyes and hands together for grasping at objects.
 - Slowly move from side to side in front of your baby so they can learn to track objects.
4. **Learning some simple self-regulation skills.**
 - Let your baby suck on his fingers to learn to sooth or calm himself.
 - Babies also disengage eye contact when feeling overstimulated, let them turn away from you and re-engage when ready.



Typical Socioemotional Skills

- 1. Your baby is now able to express fear and anger along with happiness and unhappiness.**
 - Describe your baby's emotions to her to help her learn about feelings.
 - Learn to soothe your baby's upset emotions to help her feel understood and gain skill in self-regulation.
 - Enjoy cuddle time with your baby.
- 2. Your baby can tell strangers from familiar people, she may stop cooing or smiling when a new person moves towards him.**
 - Hold your baby around new people, this will give them a sense of safety.
- 3. Your baby is now able to 'read' facial emotions and can tell when their caregiver is upset, happy or mad.**
 - Babies watch adult's facial expressions intently during this time to learn about their important people as well as the world around them. Regulating your own emotions is very important.

Typical Cognitive Skills

- 1. Your baby will begin to babble strings of syllable-like sounds and try to imitate sing song quality of adult voices.**
 - Babble back the sounds she makes, take turns in 'talking' with your baby



Concerns

If your baby most of the time:

- Does not smile in response to other's voice or smile.
- Does not respond to friendly cuddles, care or initiation of play.
- Consistently has difficulty with soothing.
- Does not follow a moving object with his eyes.
- Does not engage in babbling or vocal play.
- Has difficulty lifting head off floor when on his tummy.
- Shows a preference for holding his head to one side, you may notice a bald spot or a fat spot on one side of his head.
- Moves one arm or leg more than the other.

2. **Your baby will explore things by putting them in his mouth.**
 - Let your baby experience different textures, smells and tastes.
3. **Beginning to understand the names for things by tone of voice and facial expressions.**
 - Use the name of objects while interacting with your baby.
4. **Babies of this age love to repeat interesting actions such as dropping their rattle on the floor from their highchair.**
 - Although a frustrating game for the caregiver, these repetitions are allowing the baby to see that their actions have an effect on others and should be encouraged.

Typical Physical Skills

1. **Reaches for objects and bring to mouth.**
 - Provide familiar soft objects that are easy to grasp and reach.
2. **Uses hands to grasp, bang and splash.**
 - Offer different toys to hold and explore.
3. **Turns head in all directions to follow a toy when laying on her stomach.**
 - Place colourful toys in front of her will encourage her to push chest up, lean on her forearms .
 - Pull baby up from lying down into a sitting position to strengthen arm, back and tummy muscles.



Typical Socioemotional Skills

- 1. Babies around this age show more resistance to do things they are not interested in such as pushing away the spoon during feeding and resisting going to bed.**
- 2. Babies feel strongly about what they want and do not want to do.**
 - Create routines for regular activities like naptime, playtime, diapering. This will increase predictability and lessen resistance. Create a calm bedtime ritual.
 - Watch and see what behaviours your baby engages in to soothe himself and encourage them. This will help them learn to cope with his emotions.
 - Follow your baby's lead rather than always choosing the game to play.
- 3. Shows preference for primary caregiver, may react to strangers.**
 - Never force your baby to go to someone new.
 - Observe your baby to understand her cues. Play with her when interested, let her take the lead.
 - Pick up your baby when she reaches up her arms.

Typical Cognitive Skills

1. **Baby will create long string of sounds such as mamamamama.**
 - Encourage first words “mama” “dada”, “hi”.
2. **Baby will start to recognize words of familiar objects (bottle) and respond with excitement.**
 - Use baby’s name in familiar songs.
 - Look at simple picture books and talk about what it is the pictures.
3. **Baby will start to show understanding of words through behaviour or gestures.**
 - Play games such as “show me the ball”.
 - Follow baby’s interests when he points to objects.

Typical Physical Skills

1. **Balances himself while sitting; sits alone steadily for longer periods.**
2. **Crawls while holding an object, may ‘bum’ shuffle or turn in circles when on stomach.**
 - Play on the floor with distance between you and your baby to encourage her to move towards you.
 - Holding your baby’s hand, walk short distances.
 - Rolling a ball back and forth between you encourages turn taking.
3. **Grasp is more refined, can pick up and manipulate objects.**
 - Begin to introduce small finger foods such as pieces of fruit, cooked vegetables, toast, crackers.
 - Give your child a container and objects to pick up and put inside to develop grasp and release ability.

Concerns



If your baby most of the time:

- Does not babble or make many sounds.
- Does not respond to words spoken to him.
- Does not seek comfort from main caregiver when unhappy.
- Arches back when sitting and legs seem stiff.
- Does not take weight through legs and cannot sit independently.
- Has difficulty moving from a sitting position to hands and knees or difficulty crawling.
- Prefers to stay in one spot.

Typical Socioemotional Skills

1. **Child is able to seek comfort when upset.**
 - Stranger anxiety is common among this age group, be patient and do not force your child to interact or go to unfamiliar people.
2. **Communicates preferences for people and things.**
3. **Expresses many emotions and recognizes them in others.**
 - Have your baby interact with other babies.
4. **Will react with anger or sadness to someone who takes their favourite toy or with frustration if they cannot do something.**
5. **Displays affection in hugs, kisses, pats and smiles.**
 - Ask your baby for hugs and kisses, they will feel loved and in control of their own body.
6. **Displays independent behaviour such as resisting bedtime.**
7. **Will start to understand predictable routines and know what happens next.**

Typical Cognitive Skills

1. **Understands simple sentences, questions and requests.**
 - Have child point to different parts of her body when asked.
 - Matches words and appropriate gestures.
 - Teach child to wave hands and say “bye bye”.
2. **Uses expressive words like “no” “baby”.**





Concerns

3. Searches for object if he knows it is hidden.

- Having child find a hidden object lets them understand that things still exist when they are out of sight.

4. Associates action and sounds with things (meow for kitten).

- Read interactive story books where child can point, imitate and name animals or objects.

Typical Physical Skills

1. Stands by flexing knees, pushing off from squat.

- Provide lots of encouragement when baby tries to stand holding furniture.

2. Walks when both hands are held.

- Go for “walks” to give chance to practice walking with support.
- Encourage walking with ride-on toys.

3. Holds spoons but needs help with use.

- Allow baby to experiment with feeding herself, she should be able to hold a cup with both hands.

4. Uses tip of finger and thumb to pick up small items.

- Provide small object such as Cheerios to eat, and provide toys she can sort and put into containers.

If your baby most of the time:

- Does not babble or imitate simple sounds.
- Does not take part in nursery games (peek-a-boo, pat-a-cake).
- Does not follow simple directions or respond to own name.
- Does not look where you are pointing to an object you named.
- Does not interact playfully with adults or siblings.
- Does not laugh or show any interest in social situations.
- Is not yet crawling or pulling to stand at furniture.
- Stands or walks mainly up on tip toes.
- Has trouble grasping small toys with fingers.
- Does not eat a variety of foods or food textures, i.e. prefers only smooth textures and has difficulty with rough-textured foods.

Typical Socioemotional Skills

- 1. Is more confident, exploring new things and taking risks when trusted adult is present.**
 - Make your house as toddler proof as you can so she does not hear “no” all the time.
 - Allow her access to a new cupboard or container to explore while you are safely within reach.
- 2. Identifies self in the mirror.**
 - Show her pictures of herself with familiar others will help her develop her sense of self as independent.
- 3. Begins to show sense of humour.**
- 4. Hugs and kisses very familiar people, and shows jealousy when attention is on others.**
 - Continue to teach your child simple words to express his feelings.
 - Use stories and songs to express emotions and solutions.
 - Provide opportunities for your child to play on their own as well as with others under supervision, learning what's expected and how to share.
- 5. May show some separation anxiety.**
 - Have good-bye routines when leaving the house and let your toddler know if there will be a change in routine.

Typical Cognitive Skills

- 1. Understands far more words than he can speak.**
- 2. Uses 5 or more words to express needs, desires or expressions.**
 - Expand on what your child says, ask questions.
- 3. Shows understanding of some colours and shapes, shows increased memory skills and can group objects.**
 - Enjoy playing puzzles, sorting shapes, count shapes in a book and look for

them in the house, have toddler help sort socks and underwear when doing laundry.

4. **Enjoys imaginative play during routines.**
 - Begin to introduce items that encourage imaginative play such as brooms, telephones, pots and pans.
5. **Follows simple directions without gestures.**

Typical Physical Skills

1. **Is walking independently and can squat to pick up toys from the floor.**
 - Stay close and supervise but take toddler out to playground or park often so they can practice their developing physical skills.
2. **Will walk up and down stairs holding your hand.**
 - Has equal use of both arms and legs (no hand preference noted yet).
3. **Turns pages of a book.**
 - Allow toddler to turn pages when reading bedtime stories.
4. **Feeds self with spoon and fork.**
 - Allow toddler to feed herself with finger foods at meal time and experiment with spoons and fork.

Concerns



If your child most of the time:

- Continues to prefer to mouth objects rather than use them in play activities.
- Does not respond to own name or recognize words for familiar objects.
- Is not yet talking or has lost previously acquired language skills.
- Does not show interest in other children or relate to others.
- Demands constant attention and refuses to leave caregiver's side.
- If not yet standing or walking independently.
- If walking, continues to stand or walk on tiptoes.





Typical Socioemotional Skills

1. **Your child has developed a full range of emotions now including shame, guilt, embarrassment, pride and envy.**
 - Continue to label feelings and help your child regulate feelings of distress. If your child has misbehaved make it clear that you don't approve of the behavior, not the child.
2. **Your child may continue to experience some separation anxiety and also some fears of strangers, animals, dogs.**
 - Children prefer routine so continue with leaving rituals for separation anxiety.
 - Give words to your child's fears such as "oh that is a big dog, that makes you scared".
3. **Shows ownership of possessions and has difficulty sharing.**
 - Teach your child sharing and turn taking within your relationship first.
 - When disciplining over peer or sibling interactions help your child understand the perspective of the other child to help develop empathy.

Typical Cognitive Skills

1. **Understands how familiar objects are used.**
2. **Understands some limited references to time.**
 - Prepare your child for transitions by counting them down (eg. In 5 minutes we are going to clean up).



Concerns

If your child most of the time:

- Gets extremely frustrated, upset with change in routine or when moving from one activity to the next.
- Is unable to calm themselves when upset or frustrated.
- Is unable to follow simple directions.
- Has a limited vocabulary and is not yet putting words together (“mommy go”).
- Does not use eye contact or gestures when communicating.
- Talks in their own invented language.
- Walks primarily on their toes.
- Falls often — seems unsteady, has poor balance when running.
- Is unable to walk up/down stairs independently.
- Focuses on repetitive activities and it is difficult to get her to change to other activities.
- Displays repetitive mannerisms (e.g flapping hands).

3. **Names some pictures in books and can observe things without touching.**
4. **Sings simple songs with correct words and actions.**
 - Use songs to assist in transitions such as “clean up, clean up”.
5. **Uses two word sentences and past tense.**

Typical Physical Skills

1. **Rides on small wheeled toys.**
 - Provide toys that allow child to push and pedal to learn to coordinate her eyes, feet and hands.
2. **Walks backwards or sideways.**
 - Enjoy taking walks to the library or park playing follow the leader taking different kinds of walking.
3. **Throws and retrieves objects.**
 - Play “target toss”; throwing rolled up socks or other laundry into laundry basket.
4. **Jumps in place with both feet.**
 - Play hopscotch with your child to help develop gross motor skills.
5. **Takes off shoes, hat and socks.**
 - Allow child to participate in dressing herself.
6. **Opens doors.**

Typical Socioemotional Skills

1. **Objects to major changes in routines.**
 - Try to maintain regular routines; tell him when changes are coming, acknowledge his feelings and talk about them.
2. **Recognizes and responds to other children's feelings.**
 - Find pictures of people showing different emotions, talk about what the person is feeling and why.
 - Continue to provide opportunities for peer interaction where you can supervise.
3. **Is becoming more comfortable with new people.**
 - Introduce your child to familiar people in their environment such as the librarian, store clerk, mail person.
4. **Plays make-believe games.**
 - Provide puppets, dolls, pretend food, play money and other items to help develop imaginative play.
5. **Uses manners such as “please” and “thank you” at appropriate times.**
 - Comment on his positive behaviours “that was so polite, thank you” to motivate them to be used again.
6. **May show fear of imaginary monsters or darkness, animals, along with strangers and separation.**
 - Allow your child to express his feelings of fear and problem solve together how to manage the fear. A flashlight or nightlight, checking under the bed and in the closet before bed, telling the monsters they are not allowed in the bedroom are some ideas.

Typical Cognitive Skills

1. **Asks frequent questions, using “who”, “what” and “where”.**
 - Take time to talk to your child about things that interest her, ask open ended questions such as “what did you like best about our walk?”

Concerns



If your child most of the time:

- Does not respond when you call, or responds inappropriately to simple directions or requests.
- It is difficult to get child's attention.
- Has a limited attention span or has difficulty attending to one activity.
- Is not yet putting 3–4 words together in sentences, or you cannot understand their speech.
- Avoids contact with other children, plays alone.
- Continues to trip or fall often when walking or running.
- Continues to rub genital region in public after being told many times not to do this.
- Shows a lack of empathy when others are hurt or sad.
- Prefers to play with children at a younger developmental level.

2. **Participates in storytelling and can recite nursery rhymes.**
 - Sing songs such as “Five Little Monkeys” to encourage memory and counting.
3. **Matches similar objects, sorts different ones.**
 - Provide simple puzzles and sorting games.
4. **Uses words indicating an understanding of time.**
 - Help your child understand time by mentioning sequences of events, such as after your bath we will read a story for 15 minutes and then it will be bedtime.

Typical Physical Skills

1. **Can participate in group activities that include running, crawling, rolling, climbing ladders and riding a tricycle.**
 - Take your child to a playgroup or StrongStart Centre.
2. **Imitates drawings, draws squiggles, can use scissors but not straight lines.**
 - Help develop fine motor skills by providing different things to write with (felt pens, crayons, chalk).





Typical Socioemotional Skills

1. **Enjoys playing with other children and has favorite games and playmates.**
2. **Understands simple rules in games and starting to grasp the concept of sharing.**
 - Provide many opportunities for social interactions with other preschoolers.
 - Encourage your child not to give up on games or tasks when he plays with others.
3. **Complies with requests from parents more often.**
 - Give simple choices (eg. what to wear or what to eat) between two options and honouring their choice.
 - Involve your child when making a decision about something that involves them. (eg. What should we wear when you leave your shoes at preschool?)
4. **Uses pretend play to gain control of frustrating and frightening experiences.**
 - Guide your child in how to handle challenging feelings.
 - Monitor and name things that may be negative to your child.
 - Continue to talk about different feelings, make masks of different feelings and use the masks to talk about times your child may be experiencing those feelings.

Typical Cognitive Skills

1. **Uses an average vocabulary of about 1500 words.**
 - Encourage your child to talk by asking simple questions “what do you think would happen if...”



Concerns

If your child most of the time:

- Is not understood by others or is still speaking in two word sentences.
- Is unable to follow two-part directions.
- Has difficulty holding a pencil or crayon or stringing beads.
- Avoids activities such as climbing, jumping, hopping.
- Hurts animals or others on purpose.
- Does not show any feeling when they hurt others.
- Has long periods of upset, or emotions are difficult to manage; child cannot calm themselves down.
- Has stronger than normal need to control others, including other children and caregivers.

2. **Loves to recite and chant jingles and rhymes.**
 - Play rhyming games. Say a word and have your child find a word that rhymes with it. Play “I spy” using rhyming words.
3. **Uses “yesterday” and “tomorrow” correctly, incorporating past, present and future tenses.**
 - Tell a story of your child’s life from birth to present.
4. **Shows interest in written words and letters.**
 - Teach your child to write her own name as well as words for important things to her.
 - Teach your child her name, phone number and address.
5. **Is able to work independently for up to 20–30 minutes at a time.**
 - Encourage your child not to give up on tasks or games.

Typical Physical Skills

1. **Walks up and down stairs independently.**
2. **Jumps, climbs, and stands on one foot.**
3. **Can catch a ball with two hands.**
4. **Provide lots of opportunity for outside play, with peers and with you.**
5. **Take child on a “bike hike” around the neighbourhood to teach them about their environment as well as safety rules.**

By the time your child is ready to start Kindergarten, they should be able to:

- Get dressed with minimal help.
- Go to the bathroom independently.
- Open lunch items.
- Ask for help.
- Share and take turns with other children.
- Follow routines.
- Communicate so a teacher and other students can understand them.
- Listen and follow directions.
- Understand basic safety rules.
- Feel good about trying new things.
- Take part in group activities.
- Stick at different tasks or come back to them later in order to finish them.
- Be curious.
- Run, catch, throw, climb, jump, and tumble.
- Paint, draw, sculpt, and construct items from their imagination.

Concerns may arise if your child:

- Has excessive temper tantrums.
- Has difficulty being around other children.
- Is clingy to parent or primary caregiver.
- Has difficulty transitioning between activities or routines.
- Has behavior affecting their ability to learn new things.

Activities to encourage school readiness:

- Encourage your child to make choices as often as possible. Let them choose between two or three different shirts when dressing, or give choices of foods for lunch.
- Play games with your child. Board games or card games that have three to five rules are great. Go Fish, Checkers, or Candyland are examples.
- Let your child know how special they are. Give them lots of love, praise, and hugs every day.

- Have a special time for reading every day. Before bedtime is a great time to read together.
- Let your child help you with small jobs around the house. Give them lots of praise when they do a good job, and tell them what a big help they are!

StrongStarts

StrongStarts offer a unique opportunity for children ages 0–5 and their parents/guardians to learn through play, music, crafts and stories. Children have the opportunity to participate in gym activities and are encouraged to sign out books from the school library on a weekly basis.

This is an initiative to help children feel welcome and comfortable in school settings by participating in early literacy activities. Providing readiness skills at an earlier age is a key to success in school... and it's FREE! Just drop in!

Below are the schools that offer StrongStart, and for more details,
<http://www.sd33.bc.ca/programs/strongstart>

Bernard Elementary

45465 Bernard Ave Mon–Fri, 8:30–11:30am

Cultus Lake Community School

71 Sunnyside Blvd Tues & Thurs, 8:15–11:15am

Little Mountain Elementary

9900 Carleton St Mon/Wed/Fri, 8:30–11:30am; Tues & Thurs, 12–3:00pm

McCammon Traditional Elementary

9601 Hamilton St. Mon–Fri, 8:30–11:30am

Rosedale Traditional Community School

50850 Yale Rd. Mon–Fri, 8:15–11:15am

Strathcona Elementary

46375 Strathcona St Mon/Wed/Fri, 8:30–11:30am

Unsworth Elementary

5685 Unsworth Rd. Mon–Fri, 9:00am–12:00pm

Watson Elementary

45305 Watson Rd. Mon–Fri, 8:30–11:30am

Elementary Schools

Some of the Elementary schools in Chilliwack are also Community Schools. Community schools offer a variety of programs for families. Contact them for more information about workshops, sports and recreation activities, summer camps, preschool, preschool programs and community computer access programs (CCAP).

School District 33	Address	Phone
Bernard Elementary	45465 Bernard Avenue	604-795-7840
Central Elementary Community	9435 Young Road	604-792-8537
Cheam Elementary	9895 Banford Road	604-792-1416
Cultus Lake Community	71 Sunnyside Avenue	604-858-6266
East Chilliwack Elementary	49190 Chilliwack Central Road	604-794-7533
Evans Elementary	7600 Evans Road	604-858-3057
F.G. Leary Fine Arts Elementary	9320 Walden Street	604-792-1281
Greendale Community Elementary	6621 Sumas Prairie Road	604-823-6738
Little Mountain Elementary	9900 Carleton Street	604-792-0681
McCammon Traditional Elementary	9601 Hamilton Street	604-795-7000
Promontory Heights Elementary Community	46200 Stoneview Drive	604-824-4885
Robertson Elementary	46106 Southlands Crescent	604-795-5312
Rosedale Traditional Community	10125 McGrath Road	604-794-7124
Sardis Elementary	45775 Manuel Road	604-858-7145
Strathcona Elementary	46375 Strathcona Road	604-792-9301
Tyson Elementary	45170 S Sumas Road	604-858-2111
Unsworth Elementary	5685 Unsworth Road	604-858-4510
Vedder Elementary	45850 Promontory Road	604-858-4759
Watson Elementary	45305 Watson Road	604-858-9477
Yarrow Community Elementary	4595 Wilson Road	604-823-4408



Private Schools	Address	Phone
Cascade Christian	46420 Brooks Avenue	604-793-7997
Chilliwack Adventist Christian	46024 Riverside Drive	604-792-8344
Highroad Academy	46641 Chilliwack Central Road	604-792-4680
John Calvin	4268 Stewart Road	604-823-6814
Mount Cheam Christian	48988 Yale Road East	604-794-3072
St. Mary's	8909 Mary Street	604-792-7715
Timothy Christian	50420 Castleman Road	604-794-7114
Unity Christian	9750 McNaught Road	604-794-4171

It is never too early to have your child's hearing tested. All newborns have their hearing screened soon after birth. Audiologists are trained to test hearing in different ways depending on the age of your child. It is important that parents be aware of their child's hearing from the moment their child is born. Hearing is the foundation upon which speech, language, reading, and writing are built.

The first few years of life are particularly critical for development. When a hearing loss exists, a child does not get the full benefit of communication experiences, which can lead to possible delays in speech, language, reading, and/or writing.

A child's hearing can be affected by many things. Some newborns run a high risk of hearing loss due to hereditary or prenatal complications including rubella, syphilis, low birth weight, and meningitis. Toddlers and preschool children may acquire hearing loss with earaches, colds, running ears, upper respiratory infections, or allergies. Older children may acquire a hearing loss with repeated exposure to loud noise from toys or music, or from certain diseases.

Hearing behaviors grow and change along with your child's other skills – as your child matures you'll see different kinds of responses to sound. Hearing development follows a predictable sequence of milestones.

Public Health Audiology welcomes referrals from the BC Early Hearing Program, health care professionals, parents/caregivers, schools, and interested professionals. We provide services for people aged birth to 19 years old, residing within the Fraser Health area.

Concerns



Warning signs for hearing loss:

- Stops early babbling.
- Does not say single words by 12 months.
- Has trouble locating sounds.
- Has frequent earaches, colds, running ears, upper respiratory infections, or allergies.
- Needs frequent repetitions of words or sentences.
- Confuses consonant sounds.
- Has unclear speech.
- Shows better understanding when he/she can see your face.
- Speaks loudly or turns up the volume of TV/radio.



Concerns

Vision problems are the most common disability in children yet most kids have never had an eye exam. Most vision problems in children are not obvious to parents. Optometrists who specialize in vision development recommend a routine eye exam at 6 months and yearly thereafter. Every Child, Every Year!

Vision development follows a predictable sequence of milestones. Eye doctors are trained to observe a child's reactions and abilities to compare them with those expected by age.

Kids do not need to speak or know the alphabet to have an eye exam.

While vision screening at health fairs, schools, and at the physician's office may detect certain problems, they are not a substitute for an examination by an eye doctor.

MSP covers one full eye exam annually for children 0–18 years. You do not need a referral for an eye exam but not all eye doctors see infants so ask when making an appointment for your baby.

While clarity of vision and eye health are important, a child must also be able to move the eyes easily, use them together as a team, control focusing, and understand what is seen. Problems in any of these areas can slow development and impair learning.

Please have your child checked regularly.

At any age, have your child checked immediately if:

- Eyes are unable to track a face or toy held close.
- One pupil is larger than the other.
- Eyes do not point at the same place.
- They have red eyes, excess tearing or discharge. Do not self treat.
- They have crusted or drooping eyelids.
- They have unusual reactions to light.

Other signs of vision problems may include:

- Avoidance of movement activities.
- Poor coordination such as tripping, falling and walking into furniture/walls.
- Lack of interest in surroundings.
- Difficulties controlling attention.
- Any delays in other areas of development.
- Eye rubbing, particularly after looking at books.
- Holding books or toys very close to examine.

By 6 months, does your baby:

- 1. Have their teeth brushed two times each day with a smear of fluoride toothpaste?**
 - Once teeth appear, it is important to make a habit of cleaning their teeth twice a day. You can clean your baby's teeth using a soft baby toothbrush with a smear of fluoride toothpaste. Don't worry if your baby doesn't have teeth yet.
- 2. Practice using a cup with no lid?**
 - Between six and nine months of age is a good time to introduce your baby to using a cup. If your baby is bottle-feeding, try to gradually decrease bottle-feeding so that by 12 months they are drinking most daytime liquids from a cup. This will help prevent a bottle habit or sip cup habit, where your child walks around, sipping throughout the day. This habit puts a child at risk for tooth decay, and may also make them feel full so they aren't hungry for food at mealtimes.
- 3. Finish their bottle before you put them to bed?**
 - If your baby is using a bottle, it is best to feed them before they go to sleep, not during sleep. Once they have teeth, babies that go to bed with a bottle (with anything other than water) are also at risk for tooth decay.

By 12 months, does your baby:

- 1. Have their teeth brushed two times each day with a smear of fluoride toothpaste?**
 - Once teeth appear, it is important to make a habit of cleaning your child's teeth twice a day. You can clean your baby's teeth using a soft baby toothbrush with a smear of fluoride toothpaste. Your child will need help with brushing their teeth until they are eight years old.
- 2. Use a cup?**
 - By 12 months, your child is drinking most daytime liquids from a cup. This will help prevent a bottle habit or sip cup habit, where your child walks around, sipping throughout the day. Remember that going to bed with a bottle (with anything other than water) also puts your child at risk for tooth decay.
- 3. Drink only water (not juice, milk or pop) between meals?**

- Constant sipping on anything other than water can cause cavities. It may also make a child feel full so they aren't hungry for food at mealtimes. Offer milk in a cup at mealtimes and only water between meals.

4. Visit the dentist?

- The Canadian Dental Association and BC Dental Association recommend that a child's first visit to the dentist take place about 6 months after the first tooth appears, usually around age one. This is a good time to talk to the dental professional about daily care, fluoride and eating habits. When you make your appointment with the dental office, you can talk about payment or your dental insurance coverage for this visit.

By 18 months, does your toddler:

1. Eat meals and snacks at scheduled times?

- When a child carries their snack or drink, it allows him or her to nibble or sip all day. This is a habit that may interfere with their nutrition by making him or her feel too full to eat well at mealtime. It also increases the risk for tooth decay.

By 24 months, does your toddler:

1. Visit the dentist regularly?

- Your child has probably had more than one dental visit by now. Your dentist will let you know how often they would like to see your child.
- Keep up the good work! Daily brushing with fluoride toothpaste, a routine for eating meals and snacks and regular visits to the dentist give your child a great start toward a lifetime of strong healthy teeth.

By 6 years, does your child:

1. Have any adult (permanent) teeth?

- The adult teeth start to come in around age six. The first adult teeth to come in are called the "first molars" and they come in at the back of the mouth, behind the last baby tooth. Ask your dentist about plastic sealants for these teeth.
- Also around age six, your child may start to lose their baby teeth. Children lose baby teeth until they are about 12 years old.

Why Breastfeed

Breastfeeding is the normal way to feed your baby and is pleasurable for both the mother and baby. It's your right to feed anytime and anywhere your child wishes to eat. Breastfeeding helps to protect babies against obesity, as well as ear infections, gut infections, lung infections, SIDS, asthma, allergies, childhood cancers, and diabetes. Breastfeeding helps to protect mothers against some cancers, Type 2 diabetes, and postpartum depression.

Breastmilk:

- Provides all of the nutrition your baby needs.
- Carries antibodies that will protect your baby from infections and diseases.
- Is easy for your baby to digest and always at the right temperature.
- Is easy to provide and always handy.
- Is adaptable and changes as your baby grows.
- Is free!

The World Health Organization recommends that no other foods besides breastmilk be given to your baby until approximately six months of age. In addition to breastmilk, all breastfed babies and toddlers require 400 IU of vitamin D once a day (before or after a feeding).



A breastmilk substitute, such as infant formula, is not recommended because:

- It doesn't contain antibodies, living cells, enzymes or hormones that protect your baby.
- It may cause problems for your baby going back on the breast after using a bottle nipple.
- Your breasts may become hard and sore (as the milk is not being removed).
- Your milk supply could eventually go away.
- Your baby doesn't receive all the neurological and emotional benefits of breastfeeding.
- It's an added expense: \$60–\$150 per month.

With the addition of nutritious, complementary table foods, continue to breastfeed until your baby is two years old and beyond.

Skin-to-skin cuddling

In an ideal situation, skin-to-skin

cuddling would not be interrupted for the first two hours after birth. It helps with breastfeeding, develops the brain, builds emotional bonds, and regulates your baby's temperature, breathing and heart rate. Long term breastfeeding maintains this vital intimacy.

Breastfeeding support and help

Breastfeeding is natural, but not always easy at first. Our public health nurses offer support 7 days a week for:

- proper latching and positioning
- feeding issues or concerns
- sore breasts and nipples
- assessing your milk supply

Le Leche League Chilliwack also offers support to breastfeeding families. For more information call 604-824-1732 or 604-823-4323.

Donor Milk

If a mother's own milk is not available, the next best choice for feeding her baby is pasteurized donor breastmilk, which is available by doctor's prescription and prioritized for children with the greatest need.

We are fortunate to have a local milk depot here in Chilliwack where screened donors can drop off their milk. The more donated breastmilk we receive, the more

What is a Baby Friendly Community?



The Baby Friendly Initiative is a global campaign of the WHO and UNICEF to reduce infant illness and death by increasing breastfeeding. A Baby Friendly Community protects, promotes, and supports the breastfeeding baby and mother. A community that embraces Baby Friendly keeps mothers and babies together, helping them to breastfeed anytime, anywhere!

babies in our community and across the province that can be helped. If you are interested in becoming a donor, please contact our local Public Health Unit.

Alcohol and Drugs

Remember what you intake can affect your breastmilk. It's important to know what is safe for you and your baby. It's best not to drink alcohol or smoke when you are breastfeeding. Consult your Family Physician before taking over the counter or prescription drugs.

For support or more information please visit Fraser Health Best Beginnings, <http://www.fraserhealth.ca/best-beginnings/>, or contact the Chilliwack Public Health Unit, 45470 Menholm Road, 604-702-4900.

Birth to six months

The healthiest food for babies is breastmilk and most healthy, full-term babies need no breastmilk substitutes (formula). Breastfeeding is a skill that is learned through practice. Respond to your child's cues and feed on demand, as often as every hour when newborn. Newborns will feed at least 8 times a day. They are done eating when they appear satisfied and content, you will have heard swallowing when feeding.



If you are using breastmilk substitute, use a milk-based commercial infant formula unless advised otherwise by your doctor or health care provider. Do not microwave the formula mixture. When feeding the baby keep her head higher than her body and NEVER prop the bottle as it may cause choking. Some babies will take 30min or longer to eat.

Babies will return to birth weight at 2–3 weeks of age and will gain 15–30 grams or 0.5–1 ounce a day. They are getting enough to eat if they have 5–6 wet cloth or 4–5 wet disposable diapers a day, with pale yellow odorless urine. Your baby will have at least 2–3 stools and as many as 8 a day. After the first month, stools will be less frequent.

Six months and beyond

When your baby sits and holds her head up, watches and opens her mouth for a spoon and closes her lips around the spoon, and does not push food out of her with her tongue, she is ready for her first foods. Amounts in the table are guidelines only. Some babies will eat less and others more.

When feeding baby, remember:

- Let your baby decide how much to eat. When feeding your baby, look for signs or cues of hunger and fullness.
- Babies will shut their mouths, turn their heads or push food away when they have had enough to eat or are showing dislike.
- Do not force your baby to eat more when she has had enough.
- Honey is not recommended for the first 12 months because it may cause infant botulism.
- Always use pasteurized milk and cheese.
- Avoid choking hazards of nuts, hard candies, and hard vegetables. Slice grapes and hotdogs lengthwise.
- After one year, babies will be eating table food cut up in very small bits.

Age 6–8 months

Liquids:

- Breastmilk on demand is the best option.

Solids:

- Start with well-cooked, finely minced meat, poultry or fish, single-grain iron-fortified infant cereal, mashed cooked egg, lentils, beans or tofu. Offer high iron foods at least twice daily.
- Offer cooked well mashed vegetables and fruit.
- Offer solids 2–3 times per day.
- Start to offer finger foods such as small pieces of cooked vegetables and soft skinless fruits, pieces of toast or roti, cooked pasta, and “oat rings” cereal.

Age 9–12 months

Liquids:

- Breastmilk on demand is the best option.

Solids:

- Offer water in a cup.
- Offer solids 3 to 4 times a day. Offer solids before breastfeeding.
- Your baby can eat the same meals —soft and diced foods—as the rest of the family. Offer iron-rich foods such as meat, fish, poultry or iron-fortified infant cereal twice a day.
- Offer unsalted cottage cheese, plain yogurt, small pieces of hard cheese like cheddar or gouda, and pasteurized soft cheese.

Toddlers:

- Choose water to quench thirst, limit juice to 60–90 mL (2–3 oz) and limit milk to 2–3 cups daily. Children who drink too much milk may not get enough iron from food and they may become iron deficient.
- Choose mostly whole grain breads, cereals, pasta and rice.
- Choose a variety of fruits and vegetables.
- Choose meat and meat alternatives like chicken, fish, beans and lentils, tofu and eggs.
- Try vegetables in soups, stews, salads.

Parents are responsible for:

1. **What food to serve:**
 - A wide variety of healthy foods even if your toddler doesn't like them.
 - The same foods as the rest of the family.
2. **When your child eats:**
 - Serve meals and snacks at regular times, every 2–3 hours.
 - Between scheduled meals and snacks offer only water .
3. **Where your child eats**
 - Have your baby eat at the table with the rest of the family.



Children are responsible for:

1. How much they want to eat

- Trust your child to eat the amount she needs.
- Never force her to eat more than she wants.
- Continue to offer her more food if she is giving signs that she wants more.

2. Whether or not to eat

- Sometimes your baby may not want to eat a meal or snack. Or your child may refuse to eat certain foods. Do not force a child to eat or punish a child for not eating.

Making Mealtimes Enjoyable:

- Serve meals and snacks at regular times.
- Serve small portions, let children help themselves to more.
- Serve familiar and new foods together. Remember it may take up to 12 times trying a new food to like it.
- Do not cater to your child's dislikes. Continue to serve the foods he dislikes and eventually he will learn to like them.
- Let your child be part of the food preparation process.
- Eat with your child and don't let mealtime be rushed; children eat much more slowly than adults.
- Make mealtime quiet family time—turn off the TV. Get into a relaxed mood before sitting down. Talk about happy things while eating.

For more information call Healthlink BC at 8-1-1 to speak to a registered dietitian.

SAFETY TIPS FOR CHILDREN

Not everything can be mentioned in this guide. Please see other resources at end of booklet for more information.

Car Seat Safety

- Babies and children need a car seat every time they ride in a car. Never hold your child on your lap.
- Read car seat instructions carefully for proper installation procedures. Never place your child's car seat in the front seat if it has an airbag.
- Use a Canadian Standards Association approved rear-facing car seat until your child is at least 1 year old AND weighs at least 20 pounds (9 kg). Then you can switch to a CSA approved forward-facing car seat.
- When your child reaches the maximum height or weight for this seat, move him to a booster seat until he reaches 80 pounds (36kg).



Bathroom Safety

- Always stay with your child when she is in the bath.
- Test the water before you put your baby in. Water should feel warm, not hot. Lower water tank temperature to below 120 degrees F or 49 degrees C. Children's skin is much thinner than adults' and hot water will burn a child's skin more quickly and at lower temperatures than an adult's.
- Always keep medication locked away and far out of the reach of children. Children may eat and swallow substances even if they have bad tastes and smells.

Kitchen Safety

- Always check temperature of liquids and solids before serving.

- Keep all poisons (cleaning products, cigarettes, alcohol, medicine) locked up and/or out of reach of children. Many toddlers can open child-resistant containers.
- Cook on the back burners of the stove.

Falls

- Keep a hand on baby while diapering.
- Do not use baby walkers with wheels.
- Stationary exercisers are safer.
- Use safety straps on high chairs, strollers and shopping carts. Never place bouncy chairs or car seats on tables, counters or beds.
- Use anchored gates at top and bottom of stairs—pressure gates can easily be pushed over.
- Teach children the rules of the road and simple traffic safety.
- Ensure your child wears a helmet when biking, skating, skateboarding, scootering, and rollerblading. Helmets absorb the blow and minimize violent movement of the brain within the skull.
- Do not place furniture near windows or balconies. Climbing may lead to falls. Place window guards on second floor windows and above, or fasten windows so they will not open more than 10 cm (4 inches).

Choking

- Always put baby to sleep on her back. Do not use a pillow.
- Keep small pieces and toys out of baby's reach.
- Keep latex balloons away from children. Pieces of balloon can cause fatal choking.
- Check pacifiers regularly for stickiness or cracks. Throw away if found.
- Tie up curtain/blind cords.
- Cut food into very small pieces. Avoid nuts, popcorn, gum, hard candy, and whole hotdogs until your child is over 4.

Many resources are available at the Sardis and Chilliwack Public Libraries, Health Unit or bookstores on the topic of childproofing.

Websites include: www.safekidscanada.ca or phone 1-888-SAFE-TIPS.

WHERE TO GET HELP

Chilliwack Public Health Unit

Public health offers services including immunization, communicable disease control, maternal and prenatal health, breastfeeding, early childhood development, speech therapy, audiology, nutrition, dental health, and more. Call 604-702-4900 or visit www.fraserhealth.ca for more information.

Family Doctor

Visit your family doctor, bringing a list of your questions or concerns to discuss. Provide as much background and information about your child as you can. If you do not have a family doctor, but want one, call the Primary Care Clinic in Chilliwack General Hospital at 604-702-2850.

Fraser Valley Child Development Centre

Provides services that enhance the quality of life for children with developmental needs and their families. Multidisciplinary teams work with families to provide them a better understanding of their child's growth and development and are given the tools to support their child's individual success. The Early Intervention Program is for children 0-5 years who are at risk or have an identified developmental

delay or a diagnosed disability. Services may include: parent education, consultation, individualized or group therapy, supports in day care and preschool. Call 604-824-8760 or visit www.fvcdc.org for more information.

Hearing

Contact the Chilliwack Public Health Unit to get a hearing test for your child. Testing is performed age appropriately in the testing booth, often with the use of interactive games. Call 604-702-4900 or visit www.fraserhealth.ca for more information.

Vision

For vision and eye exams look in the yellow pages of the local phone book under 'Optometrist'. Age appropriate testing is done; children do not need to know the alphabet.

Sto:lo Nation

Aboriginal Infant Development Program

AIDP works with Aboriginal infants 0-3 who may have or be at risk of having some developmental delay. The AIDP consultants work with families to monitor the infants development, assist with necessary referrals, provide support and strategies to parents to help their child develop to the best of their

potential. Call 604-824-3276 for more information.

Aboriginal Supported Child Development Program

ASCD is designed to specifically meet the needs of children who require additional support and is developed with cultural values, beliefs, and traditions in mind. ASCD provides culturally appropriate support services to children, 0–18, with special needs in the following domains: physical, cognitive, emotional, communicative, social, and behavioral. Call 604-824-3276 for more information.

A:Imelháwtw Early Education Centre

Provides a quality, holistic, traditional, and safe environment for Aboriginal children 0–6 years of age. Blending Sto:lo culture, traditional teachings, and the Halq'emeylem language with Early Childhood Education fundamentals to support and foster social, emotional, physical, and cognitive development. **Daycare** — family centered care for children 0–6 years. **Head Start** — for children 0–6 years, their parent/caregivers, family members, and expectant parents too! This program is free and transportation is provided. **Preschool** — for children 3–4 years to prepare for Kindergarten. Call 604-824-6505 for more information.

For a complete listing of services and programs for children and families, visit www.childandyouth.com.

Childcare

Chilliwack Child Care Resource & Referral Program

“Your community’s best source of childcare information and resources.” CCRR offers free consultation, support, and referral services to parents seeking child care. Child care providers are supported through information, outreach, resource library, networking and learning opportunities. Call 604-792-4267 or visit www.childcarechoices.ca for more information.

Education

Free Tutors for Adults, Chilliwack Learning Community Society

How often do you read? Parents play an important role in showing children how important reading is. If you need help with your reading or writing skills, you can have help from a free tutor who will meet with you weekly. This is a one-on-one program, not a classroom program. Call 604-701-9794 or visit www.chilliwacklearning.com for more information.



Chilliwack Learning Community Society

Spot a ladybug book bin and read! There are red wooden ladybug book bins in over 29 lobbies and waiting rooms across the community where you and your child can read together while you wait for service. Don't worry if you don't have time to finish a book – just take it home and return it when you're done. Call 604-392-2404 or visit www.chilliwacklearning.com for locations or more information.

Family Literacy Program, Chilliwack Community Services

Families in Motion is a free, fun family learning program that runs three days a week from September to June. Adults attend classes in life skills, goal setting, time management, communication skills, basic computer skills, and parenting instruction. In the Literacy Upgrading Program a UFV Instructor teaches Math and English up to a grade 10 level. Both programs provide free childcare in a literacy rich environment and a nutritious breakfast and snack. Call 604-845-0379 for more information.

Parenting Programs

Better Beginnings, Chilliwack Community Services

A weekly program for pregnant mothers that continues to offer support until baby is six months old. Focus is on building a healthy baby through support around nutrition, healthy lifestyle and infant care. Breastfeeding support is available. Call 604-701-4978 for more information.

Families First, Chilliwack Community Services

A ten week program with group and individual support offered to help parents and children build healthy connections to each other. Some child-minding & transportation assistance provided. Call 604-793-7225 for more information.

Families in Motion and Literacy Upgrading, Chilliwack Community Services

Classes are held three days a week from September to June. In Families in Motion, adults attend classes in life skills, goal setting, time management, communication skills, basic computer skills, and parenting instruction. Our Family Literacy Upgrading classes are taught by a University of the Fraser Valley instructor. Adults can work on high school upgrading in math or English. During the programs,

the participants' infant/toddlers and preschool aged children are provided free childcare in a licenced, literacy rich environment. Breakfast and a nutritious snack are provided. Call 604-845-0379 for more information.

Family Place Network, Chilliwack Community Services

Welcoming neighborhood drop-in centres for parents and care-givers with children under 6 years old, offering play based learning activities, parent conversation areas, parenting workshops and community information. We can be your home away from home! Call 604-701-4978 or visit www.comserv.bc.ca for more information.

Broadway Family Place:

46551 Chilliwack Central Road,
Th 9:30–11am

Downtown Family Place:

46361 Yale Road,
M–F 1–3pm; Tu 9:30–11:30am;
W 5–7pm

Greendale Family Place:

6550 Sumas Prairie Road,
W 9–11:30am

Kekinow Family Place:

45555 Knight Road,
2nd & 4th Tu 5–7pm

Sardis Family Place:

7112 Vedder Road,
M–Th 9–11am; M & W 12–2pm

Yarrow Family Place:

4595 Wilson Road, M 9–11am

Nobody's Perfect, Chilliwack Community Services

For parents with children birth to 5 years to learn new parenting skills and ways to encourage their children. Call 604-792-4267 for more information.

Nurturing Fathers, Chilliwack Community Services

A weekly ten week support program for fathers and other significant adult males in a child's life to work towards more nurturing, rewarding relationships with children and partners. Call 604-793-7228 for more information.

Prenatal Classes, Douglas College

Prenatal classes are offered as a series of classes or in a one-day session through Douglas College. Financial support is available. Call 604-527-5472 or 1-866-930-5472 for more information.

Relatives Raising Relatives, Chilliwack Community Services

For grandparents, aunts and uncles significantly involved in a child's life. Call 604-793-7210 for more information.

Right from the Start

RFTS is an 8-session parenting course designed to enhance parents' skills in reading infant cues and responding sensitively. The course uses attachment theory as a framework and active adult learning principles. RFTS is

appropriate for any parent or caregiver of an infant under 24 months. Call 604-824-8760 for more information.

Sardis Doorway for Mothers & Children Society

Offers support to single and high risk mothers who have preschool aged children (prenatal to Kindergarten entry). Physical, emotional, intellectual and spiritual support is offered through friendship, mentoring, workshops and practical support. Children are cared for in small groups by loving and trained caregivers in a literacy rich, play based program. Sardis Doorway works closely with other services, programs and supports so that every child has the opportunity to reach their full development potential. Call 604-819-6556 or visit www.sardisdoorway.ca for more information.

Systematic Training for Effective Parenting

STEP is a four week course to raise happy, positive and caring adults who have a sense of belonging to the community. Call 604-792-1631 for more information.

Triple P Parenting Program

Positive Parenting Program has many different ways to get you parenting help so that you may choose what will best suit you and your family. For parents of children birth to 12

years. Call 604-824-8760 for more information.

Young Hands Parenting Program, Chilliwack School District #33

This program allows young parents to continue to work towards high school graduation and promotes the capacity of young parents to support their child's development. Call 604-701-4978 or visit alt.sd33.bc.ca/programs/yp for more information.

Young Parent Prenatal Classes, Chilliwack Public Health Unit

Available for Moms who are 22 and younger. Call 604-702-4900 for more information.

Support Services

Ann Davis Transition Society

Providing shelter and support for women and their children who are leaving abusive situations, The Transition House offers 24 hour emergency shelter for women and children. Call 604-792-3116 for help.

Ann Davis offers individual counseling to women, children and men, couples, and families. They also have men's group, Caught in the Middle groups, Children Who Witness Abuse groups, mom and child emotional resiliency play & art therapy, supervised access visits, Attachment Parenting, youth mentors, and other supports and education. Call

604-792-2760 or visit www.anndavis.org for more information.

Chilliwack Churches

Many of Chilliwack's churches and places of worship offer opportunities to celebrate and strength your family. Many also offer educational and support programs as well as recreation programs for all ages. Call the church in your neighbourhood for specific information.

Chilliwack Hospice Society

A community based volunteer organization which accepts death as a part of life. We support individuals and families during the dying and grieving process. Group and one-on-one grief support is available for children, parents, friends and family members who know someone who is passing away, or has passed away, and well as for pregnancy/infant loss, and suicide bereavement. Call 604-795-4660 or visit www.chilliwackhospice.org for more information.

Social Coaching Plus Inc.

Providing Social Thinking therapy to children and youth who have social thinking deficits as a result of Autism, PDDNOS, ADHD, and other related disabilities. Social group sessions are created and led by a certified teacher with over 10 years of classroom teaching experience and extensive training in the area of special education and Autism.

Groups sessions are held weekly for one hour and follow the school calendar year although students may join at any time. Groups are kept to a maximum of four carefully selected participants. For more information call 604-798-8727, email socialcoachingplus@gmail.com, or visit the website www.social-coaching-plus.com.

Wilma's House

(Formerly known as Xolhemet Society)

Wilma's House provides temporary shelter and support for women and their children, who are victims of family violence. The Transition House staff are available 24hrs a day and can be reached at 604-858-0468. Our Second Stage offers longer term housing with programs for women and their children. For more information call 604-824-0939.

Recreation

Financial assistance for memberships are available, contact the individual centres for more information.

Chilliwack Family YMCA,
45844 Hocking Avenue, 604-792-3371

Cheam Leisure Centre,
45501 Market Way, 604-824-0231

Chilliwack Landing Leisure Centre,
9145 Corbould Street, 604-793-1811



Thank you Kiwanis for the supporting the Baby Start, Read to Me, and Super Reader programs!

www.drpatriciaackland.com
info@drpatriciaackland.com
604-819-2673



Dr. Patricia Ackland
registered psychologist

Building Healthy Relationships

Workshop for Couples:
Couple Communication Handling Conflict
Enhancing Connection

www.buildinghealthyrelationships.net

Funding for this book has graciously been provided by:



Kiwanis Club of Chilliwack



**Chilliwack
School District**



Chilliwack
Division of Family Practice
A GPSC initiative



References: Best Beginnings, Fraser Health, www.fraserhealth.ca/best-beginnings/
Baby's Best Chance: 5th Edition, BC Health Care; Toddler's First Steps: 2nd Edition, 2nd revision



Chilliwack Division of Family Practice

A GPSC initiative

The Division is a non-profit society that represents Family Doctors in Chilliwack, Agassiz-Harrison, Seabird Island and Hope. We strive to optimize health care services to community members through a cohesive, cooperative and engaged community of family primary health care providers.

Here are some of the initiatives the Division is working on to help improve primary health care in our communities.

Healthy Kids Initiative



Framed by a health promotion message that is used around the world, Live 5-2-1-0 is solution oriented (we have tips on how to follow it!) and evidenced-based (it works!). Led by the Chilliwack Division of Family Practice, in partnership

with SCOPE, a project of the UBC Department of Pediatrics, BC Children's Hospital and the Childhood Obesity Foundation, we are working with community partners to make the healthy choice, the easy choice for children in the community.

One way we are doing this is working with local family doctors to make the discussion of healthy living, using the Live 5-2-1-0 message a regular part of family practice with children 2 to 18 years. In partnership with SCOPE we developed a Physician Toolkit, as well as resources for families, to help them Live 5-2-1-0 every day. Visit our website to access those resources today!

A GP for Me

A GP for Me

This program aims to strengthen the continuous primary health care provider-patient relationship, better support the needs of vulnerable patients, enable patients that want a family doctor to find one, and increase the capacity and improve the delivery of primary health care in our community. When we conducted a community survey in Fall 2013, over 3000 community members shared their voice as partners in their health care. We listened, and are working on initiatives to improve your access to primary health care, including the Chilliwack Primary Care Clinic.

Chilliwack Primary Care Clinic

In the CPCC, Nurse Practitioners work with Family Doctors in a multidisciplinary setting to support unattached patients and provide ongoing primary care for complex patients, including those with mental health and addiction problems. We also aim to get you attached to a primary health care provider in the community. If you are currently unattached and looking for a primary health care provider, please call the CPCC at 604-702-2850 or visit our website for more information and a registration form for unattached patients.

www.divisionsbc.ca/chilliwack
www.facebook.com/cdofp

Family physicians working together
to improve health care.





Chilliwack

Division of Family Practice

A GPSC initiative

Live **5 2 1 0**

**four simple guidelines to remember
for raising healthy children**



Enjoy-

FIVE or more vegetables & fruits
every day

Power down-
no more than **TWO** hours of
screen time a day



Play actively-

at least **ONE** hour each day

Choose healthy-
ZERO sugar-sweetened drinks



In partnership with:

SCOPE
www.scopebc.ca