RECOMMENDATIONS FOR PARENTS OF CHILDREN FROM 1–6 MONTHS OF AGE

STRENGTHENING REFUGEE AND MIGRANT CHILDREN’S HEALTH STATUS
IN SOUTHERN AND SOUTH-EASTERN EUROPE

unicef
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for every child
Life on the move leads to physical exhaustion and psychological trauma, and that in these circumstances many parents and children need health care and protection.

For this reason, this educational material with key advice on child health, nutrition and development, as well as information about the key abilities and skills expected to be developed by children at specific ages, is meant to provide parents with a single point of reference for their child’s progress.

If any problems occur upon entry into or during stay in the country, parents should seek assistance from specialised services.

### IMMUNISATION CALENDAR

<table>
<thead>
<tr>
<th>Timing</th>
<th>Vaccines</th>
</tr>
</thead>
<tbody>
<tr>
<td>At birth</td>
<td>▶ against hepatitis B – first dose;</td>
</tr>
<tr>
<td></td>
<td>▶ against tuberculosis;</td>
</tr>
<tr>
<td>At one month of age</td>
<td>▶ against hepatitis B – second dose;</td>
</tr>
<tr>
<td>At two months of age</td>
<td>▶ against diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b disease – first dose;</td>
</tr>
<tr>
<td></td>
<td>▶ against Streptococcus pneumoniae – first dose;</td>
</tr>
<tr>
<td>At 3.5 months of age</td>
<td>▶ against diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b disease – second dose;</td>
</tr>
<tr>
<td></td>
<td>▶ against Streptococcus pneumoniae – second dose;</td>
</tr>
<tr>
<td>At 5 months of age</td>
<td>▶ against diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b disease – third dose;</td>
</tr>
<tr>
<td></td>
<td>▶ against Streptococcus pneumoniae – third dose;</td>
</tr>
<tr>
<td>At 6 months of age</td>
<td>▶ against hepatitis B – third dose;</td>
</tr>
<tr>
<td><strong>At 9 months of age (no immunization in this age)</strong></td>
<td></td>
</tr>
<tr>
<td>Between 12 and 15 months of age</td>
<td>▶ against measles, mumps, rubella; against Streptococcus pneumoniae – revaccination;</td>
</tr>
<tr>
<td>At one and a half years (18 months) of age</td>
<td>▶ against diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b – first revaccination;</td>
</tr>
</tbody>
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## Timing

<table>
<thead>
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| **In the third year (between 24 and 36 months of age)**
  (no immunization in this age) |
| Before entering primary school (6-7 years of age) |
  - against measles, mumps, rubella – revaccination;
  - against diphtheria, tetanus, pertussis and polio – second revaccination; |

## HEALTH

The mother should take care of her health, have a varied diet, hygienically properly treated food, get enough sleep (coordinate sleeping time with the child); she should exercise and not skip the necessary health check-ups.

If the mother feels down, sad or very tired for longer than a few days, seek help.

During the first six months of the child’s life, plan to make appointments for preventive paediatric examinations and vaccination.

### Newborn (first month)

- Visiting nurse’s visit to the newborn and postpartum woman (five times for all children, and as per paediatrician’s orders for children at risk)
- Preventive examination by a paediatrician in the field (once within 15 days of birth, only for children at risk)

### Infant (from the second month to the end of the first year)

- Preventive examination (six times for all children, and as per paediatrician’s assessment for children at risk)
- Ultrasound examination for early detection of hip dysplasia
- Preventive dental examination
- Visiting nurse’s visit to the family (two times for all children, and four times for children with disabilities)

### Second year of life

- Preventive examination (two times, at 13 to 15 months of age and at 18 to 24 months of age)
- Dental examination
- Visiting nurse’s visit to the family (once)
### NUTRITION

While feeding your baby, stay patient, pay attention to how it behaves, what signs it sends when it is hungry, full or thirsty and react accordingly. Respect its natural feelings because by doing so you establish a relationship of trust and support the development of your child.

| 1<sup>st</sup> month of life | Responsive breastfeeding (8-12 times) is the highest-quality nutrition for the newborn.  
|                           | After leaving the maternity ward, in addition to breastfeeding, the child should receive 400 IU of vitamin D3, and in the first three months of life also 0.25 mg mg of vitamin K1 (if recommended by the paediatrician).  
|                           | If the baby sleeps for longer than two hours during the day, pat him/her, rock him/her gently, start taking off and changing his/her diaper to wake him/her up for feeding.  
|                           | Hold the baby in a way that allows you to look at him/her as he/she suckles. Encourage the baby to burp during a break and after breastfeeding.  
|                           | If you have any difficulties with feeding, contact the visiting nurse or paediatrician.  
|                           | A child who receives enough food during a day will wet 6-8 diapers. Initially, the child may defecate after each feeding, and later the frequency gradually decreases to 3-4 stools per day. |
| 2<sup>nd</sup> month of life | Continue breastfeeding the child when he/she shows that he/she is hungry: opens and closes his/her mouth, smacks his/her lips, puts his/her hands into his/her mouth, sucks his/her fingers, fidgets and clings to you in an agitated manner, and finally even cries.  
|                           | Continue giving the recommended vitamins to the child – 400 IU of vitamin D3, and in the first three months of life also 0.25 mg of vitamin K1 (if recommended by the paediatrician).  
|                           | Encourage the baby to burp during breaks in breastfeeding.  
|                           | If the infant is full after breastfeeding, and you still have breastmilk in your breasts, pump the breastmilk and save it for later use (24 hours in the refrigerator, 3 months in the freezer). |
| 3<sup>rd</sup> and 4<sup>th</sup> months of life | Continue breastfeeding the baby and giving him/her the recommended vitamins. While breastfeeding, hold the baby in a way that allows you to look at, read a children’s book, speak and cuddle him/her. |
| 5<sup>th</sup> and 6<sup>th</sup> months of life | At this age, breastmilk is still the best food. Towards the end of this period, you may start introducing non-milk food. |
CARE AND DEVELOPMENT SUPPORT – GENERAL RECOMMENDATIONS

Feeding, bathing, sleeping and play should represent a daily routine. Put the baby to sleep on his/her back. Create a safe environment for the baby to play with his/her hands, toys, and to explore. Body massage may help the baby fall asleep. Towards the end of this period, most children will start teething. When teeth appear, use a soft stick/cotton bud, and later a brush and water to clean them.

CARE AND DEVELOPMENT SUPPORT – HOW PARENTS SUPPORT THE CHILD’S DEVELOPMENT

1st month

Engage in physical contact with the child as often as possible – hold him/her, cuddle and play with him/her often. Enjoy skin-to-skin contact. Talk to him/her and smile at him/her while feeding, changing and bathing him/her. Watch your baby. When he/she has a need, he/she will initiate communication by a gesture, facial expression and voice, and if the need is not met, he/she will start crying.

If he/she cries, listen to the crying and try to gradually understand what the reason for crying is. A child may cry because he/she just wants to feel your touch, or because he/she is hungry or feels some kind of discomfort (position, wet diaper), is sleepy, has colic or feels some other kind of pain.

Comfort the baby by talking to him/her in a warm, soothing voice, take him/her in your arms, cradle and cuddle him/her. Never shake the baby. When the baby is awake, put him/her on his/her tummy and watch his/her actions and behaviour. Use every moment to exchange greetings, looks and motions – to play and connect.

2nd month

Carry the baby in your arms, cradle him/her, sing, talk, baby-talk to him/her, start to read children’s book and play with him/her often; pay attention to what feels good and soothing to him/her. Help the child learn to calm him/herself, e.g. to suck his/her fingers or hand. Talk to the child by pronouncing words clearly and slowly.

When the child makes a sound, show excitement with your facial expression and voice and repeat the sound. Offer different objects to the child to look at, touch and hold in his/her hand. While the child is lying on his/her back, hold a toy or rattle above his/her head, in front of his/her eyes, and encourage him/her to reach for it. While the child is awake, put him on his/her tummy, put a clear-coloured toy in front of him/her and move it from one side to the other.
3rd, 4th months

Respond to the child when he/she makes sounds – in order to stimulate his/her brain development. Hold the child, caress him/her, smile at him/her, baby-talk, talk and sing to him/her, shower him/her with attention every day. Pay attention to what feels good to the child, accommodate his/her needs and make him/her happy. Smile and show excitement when the child pronounces some sounds. Repeat after him/her. Crumple, rattle, make sounds both on the left and on the right, so that the child follows the sound source and turn his/her head towards it. Name the objects in the child’s immediate surroundings. Put the child’s favourite toy in his/her hands and help him/her hold it. Then put the toy next to him/her and let him/her try to reach it. Play hiding games. Let the child explore objects with his/her mouth. Encourage active play with the child when he/she is lying on his/her tummy or back. Use toys in clear colours and with contrast, with different saturation and texture, with pleasant sounds, as well as mirrors.

5th, 6th months

Interpret your child’s moods. When he/she is happy, continue with the activities. If he/she is agitated, take a break and comfort him/her. Use reciprocal play: when the child smiles, smile; when the child makes sounds, repeat them. Talk to the child every day, sing to him/her, look at images in magazines, shop windows, posters together with him/her and describe them, read picture books to him/her. When the child looks at a toy, show it to him/her and talk about it. Talk to the child while preparing to breastfeed or while preparing a meal; this will teach him/her to wait for a bit and to be patient. Reward the child with a comment when he/she babbles or makes other sounds. Show the child how to use toys in different ways: shift them from hand to hand, shake, bang, push and throw them. Try active games with a mirror. When the child drops a toy, pick it up and give it back to him/her; this is how the child learns about cause and effect, as well as to assess space. Play with the child on the floor every day, with the child lying on his/her tummy or back. Put the child’s favourite toy a bit further away, so that the child cannot reach it, and encourage him/her to come to it by rolling.
1st month
Relaxes when you take him/her in your arms. Gets excited when you talk to him, slows down his/her movement, listens, is present. Looks at you while you smile at and talk to him/her. Makes sounds. Opens and closes his/her hand when you touch him/her gently. Holds your finger tight in his/her hand. Freely moves arms and legs on both sides. While lying on his/her tummy, raises his/her head to free the airway.

2nd month
Makes different sounds when he/she is happy, agitated or hungry. Can calm him/herself briefly (sucks his/her hand or finger). Turns his/her head towards the sound source. Shows that he/she is listening by gazing at the parent who is talking, slowing down his/her motions, engaging in play. Coos, makes sounds. Follows the movement of objects and people with his/her eyes. Shows boredom or cries if the activity does not change. Occasionally keeps his/her hands open. Likes to watch his/her arms moving, brings them close to the mouth. Turns his/her head to one side, and then to the other. Makes fine motions with arms and legs. When lying on the tummy, lays his/her forearms on the surface and rests on them while raising his/her head.

3rd, 4th months
Smiles spontaneously when he/she sees a human face. Looks at people's faces more closely. Makes long eye contact. Likes to play with people and sometimes cries when play is interrupted. Shows that he/she is angry or happy. Recognises household members and objects from a distance. Follows the movement of a toy from one side to the other with his/her eyes. Pronounces the vowels a, e, i, o, u. Starts babbling. Starts copying some motions and facial expressions (vague, frowning), and play sounds. Responds by making sounds while a parent is telling him something. Establishes eye-hand coordination. Reaches for a toy with one hand, explores, shakes and bangs it. Puts hands in his/her mouth. Holds his/her head up, without support. When lying on the tummy, securely leans on his/her forearms and pushes him/herself up with the elbows.
5th, 6th months
Likes to play with his/her parents, laughs, makes sounds, looks happy. Expresses joy and anger out loud. Laughs out loud. Likes to look at him/herself in a mirror. Responds to the sound of human voice by making sounds. Articulates the sounds: a, e, u... Reaches for a toy with one hand while lying on his/her back. Uses his/her left and right hand equally. Picks up objects from one hand to the other. Puts toys in his/her mouth. Brings feet to his/her mouth. Shows interest in toys that are beyond his/her reach too. Rolls from tummy to back and from back to tummy over both sides. When held upright, can briefly support the weight of his/her body by resting on his/her feet.

WARNING SIGNS
Share any concerns about the child’s development with the visiting nurse or paediatrician. Inform them if you notice that the child:

<table>
<thead>
<tr>
<th>1st month</th>
<th>Does not react to loud sounds; cannot raise his/her head and free the airway when lying on his/her tummy</th>
</tr>
</thead>
<tbody>
<tr>
<td>2nd month</td>
<td>Does not react to loud sounds; does not follow moving objects; does not bring his/her hands to the mouth; cannot raise his/her head off the surface when lying on his/her tummy.</td>
</tr>
<tr>
<td>3rd, 4th months</td>
<td>Does not follow moving objects; does not respond to a human face by smiling; does not keep his/her head steady (does not control it); does not coo or make sounds; does not bring objects to his/her mouth</td>
</tr>
<tr>
<td>5th, 6th months</td>
<td>Does not try to reach objects that are within arm’s reach; does not show interest in people around him/her; does not react to sounds in his/her surroundings; does not pronounce the vowels (a, e, i, o, u), does not laugh or squeal; has difficulties putting a toy in his/her mouth; does not turn to either side; is either too stiff (tense) or too relaxed (limp).</td>
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</tbody>
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SAFE ENVIRONMENT AND CONDUCT

✔ The space in which the newborn stays and sleeps should be free from tobacco smoke. Before bathing, check the bath water temperature using a thermometer (35-37 °C) or your wrist. Do not use hot liquids while holding the child and do not leave hot objects: iron, hair iron/curler, or hot liquids close to the child. Keep plastic bags, balloons and small objects (under 2.5 cm) out of the child’s reach. Never leave the child alone on elevated surfaces (changing tables, beds sofas) or near water, in the bathroom. The child should be within your reach all the time.

✔ In all means of transportation, use a special safety seat, which should be placed in the back seat.
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