

# Health is a Journey!!

## What to expect at 12 Months!! Tips from Gene



### Cruisin' On Up!!!

The Journey..... Is made of **Short Term Goals** that you choose or at least control somewhat. These will lead to **Long Term Goals**, like being **Independent**, to **Belong**, to develop **Skills**, and be **Giving** when your child grows up! How exciting is that? And it happens, almost before you know it, so watch those Short Term Goals, One Day at a Time!

**Genetically speaking**, Mom and Dad, **YOU**, have the prestigious title of **"Framework Builder" !!!**

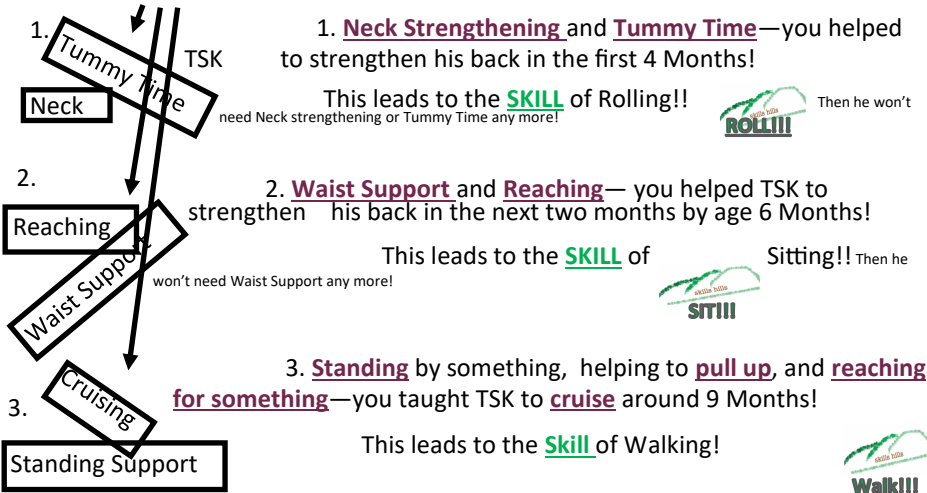
You **"built"** TSK from the inside out, **by giving your DNA**. Now you are **"building"** TSK **"up"** by helping him grow and mature!

You provide **"Supports of Learning"** for this **Framework**. TSK then learns **"Skills"** that will lead to

**"Independence"**! Take the example of Walking!

See Complicated Diagram Below—start at (Blue arrow) left lower corner.

The **"Learning Supports"** needed for TSK's **framework** to walk:



TSK has reached an **Independence** milestone, and is **"Passing"** to the next level!

### Keep in Mind (yes, you still have one)!

#### Developmental Milestones

- Cruises, taking a few steps.*
- One Step Commands.*
- Puts an object inside another.*
- One other word besides "Mama" or "Dada".*
- Social games; Bye-Bye, Peek-A-Boo, Pat-A-Cake.*
- Cooperates with dressing.*

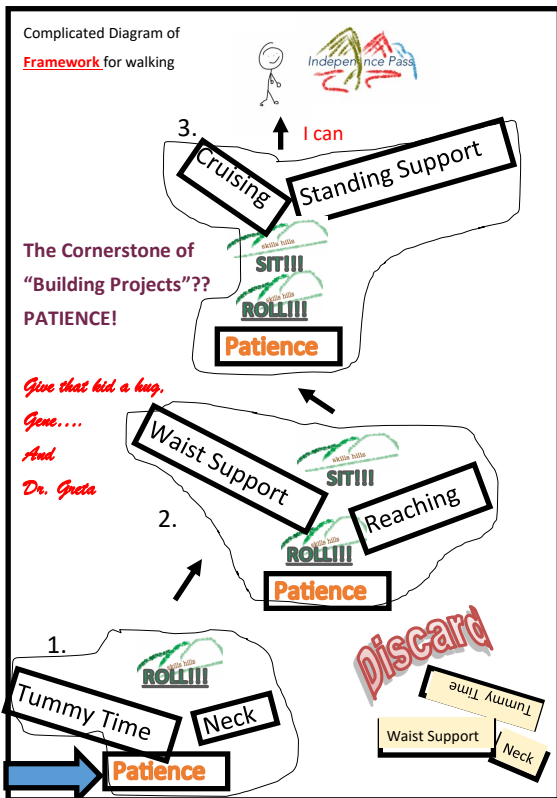
**Safety Issues** – Review Nine Month Visit  
 Water temperature should not be higher than 120 degrees F.

Outside protection should be secure (fences, pool safety, stairs) and checked often.

Guns should be unloaded and locked away,

#### Check List

- Current on immunizations?
- Are appropriate vitamins given, is the child on whole milk/breast feeding, and off the bottle?
- Review Lead Poisoning—checking is recommended
- Review safety issues (poisons, fall – drowning – burn prevention, car seat, etc.).
- Review development issues in light of family stresses, and new ways of coping with behavior.
- Review the child's environment for any new violence sources.



Look for other **Frameworks** you **Build** every day for TSK's **Development!**

## One Day at a Time!!

1	2	3	4	5	6	7
<b>Healthy Child Calendar</b>						
8	<b>A Way to Stay "Up-to-Date" on TSK's Needs: Plan Ahead!</b>					
And it all happens each Day as you make choices! Consider these! Add your own!						
15	16	17	18	19	20	21
<b>Tooth/gum brushing– do daily</b>						
<b>"Toddlerfy" the house daily!</b>						
22	23	24	25	26	27	28
<b>Off the bottle?</b>						

# Health is a Journey!! One Day at a Time!!



Gene, Dr. Greta's Advisor

THANK YOU for sharing your journey with Dr. Greta and her advisor, Gene. Together, you will explore the wonders of your child's growth and development. We will explore how to use Short Term Goals to reach your Long Term goals... and how to enjoy the Journey... One Day at a Time! Under the tutelage of Gene, this material is developed by

Greta McFarland, MD FAAP  
Box 849  
Ashley Clinic  
Chanute, Ks 66720

**Toddlerhood... *HERE I COME!!!***

## **MORE INFO IN DEPTH.....**

**Child Care Provider Issues** – Any new changes? Visited with your Child Care Provider lately? Consistency at Child Care and Home make TSK happier!

### **Frustration Factors** – Parents

Your child understands the word, “No”, but doesn't seem to think much of the concept.

Temper is starting to show in hitting, screaming, breath-holding, maybe biting.

Mimicking abilities increase each day, the child learning cute, and not-so-cute things, often with only one exposure!

**Frustration Factors** – From the Child's Viewpoint (Could your child be thinking these thoughts?)

Your child's main job is to explore and experience as much as possible, the main goal being independence. His/her attention span is only about one minute, so since a lot can't be absorbed at one time, many different things need to be tried, repetitively and often. Parents have a tendency to want to do “their own thing”, which sometimes interferes with the child's learning and thinking processes.

Your child can understand more than he/she can express, but is still limited on understanding lots of words. He/she understands actions and emotions much more easily. Here is an analogy of what your child might be experiencing: Imagine what it would be like if you were suddenly taken to a place where most of the people were three times your size, and spoke a different language. They would pick you up and move you, whenever they chose. After a few months, you would begin to understand a few things they said, but you certainly would be able to tell about their moods and whether they were happy or angry at you. **Imagine how frustrating this would be, when you really wanted to do something that you thought was important!** Your child probably feels like this frequently!

### **Answers through Understanding Development**

**Cognitive** – Further categorizing and trying to understand goes on with each experience. Memory is being fine tuned, both short term and long term memory. Short term memory occurs when lots of stimuli come into the brain. The brain has to decide what to “keep” and what to discard. As an adult, you remember a phone number only until you dial; then your brain discards the number, for more important things. The child's brain works the same, but he/she has to pick and choose what to remember. Parents don't have much control of what any child of any age chooses to

remember! The more repetition for an activity, however, the better chance it will be remembered, and will probably be placed in a part of the memory that can be recalled and implemented by muscular activity (a good example of this is brushing your teeth, or tying your shoe; these become so automatic, you may do them some days without even remembering!) If you can make the activity to be learned fun, then leaning occurs faster and is remembered in a positive way. Activities to approach in a “fun” way to make life easier, include, bath time, dressing, and starting to learn activities such as putting things away. One year olds can do one step commands, and usually enjoy these games! (For example, “Please bring me your shoes, so we can get ready to go to Grandma's!” ) Attention span is only one minute per year, so don't expect any interaction to last much longer; anything you say longer than one minute will be ignored!

**Motor** – You child should be cruising and starting to take a few steps, can easily drink from a cup, picks up objects with thumb and forefinger well. You child has more mastery over everything and will start copying!

**Language** – Your child can say one other word besides “Mama” or “Dada”. Babbling is more precise.

**Social-Emotional** – Discipline (this means to teach!) – See above. Your child may still have Stranger Anxiety (see Nine Month Visit). He/she will also start copying behaviors. Biting is a good example. Most biting starts as the child's way of kissing. If the child gets a stronger emotional response (even if it is negative!) from biting, he/she will try it again, to try to understand the response. The time to interact, is with the first bite; immediately help the child put the lips together and put to your hand or arm, praising the child when he/she kisses gently. Do that several more times very soon after the first biting incident. ( You are replacing the unacceptable behavior of biting with the acceptable behavior of kissing.) Most behaviors at this age are purely copying efforts, to try to understand what others are doing. Rarely, if ever, is a one year old going to do something out of spite, or to make someone angry, or to hurt them; this is behavior that is learned later, if the child is repeatedly exposed to the anger of others. It develops as a defensive mechanism, and once it is well patterned, is hard to change. The secret is to watch your child VERY closely during this next year. The second you see a behavior that may cause problems later, you need to IMMEDIATELY find a way to either ignore and change the subject, or show the child an alternative way of acting. This will best be done from a positive approach, if possible (change the child's interest, giving an explanation of why the activity is undesirable, etc.), but, of course, using a negative approach,

“No”, or a firm pat on a little hand may be needed to get the child's attention. Giving too many “firm little pats”, however makes the child less sensitive to the approach, and can lead to more extreme measures. The most effective method at this age is to ignore the child's behavior, if possible. (This can't be done with biting, or an activity like reaching for a light socket.) Ignoring often works with temper tantrums; just walk away! Have you ever wondered why children learn cuss words so fast? It's because they are said with emotion by the adult, AND when the child says them, everyone responds to the child, usually with “What Did You Say?!?!”, and so, of course, the child will say it again, and again, and again! If everyone had totally ignored the child at the first utterance, and also NEVER said the word around the child again, probably the child would have not put the word in long term memory. The best approach is a quiet, but firm, mater-of-fact approach, not a screaming, accusatory response; your child will learn which ever you teach!

### **Body Functioning**

**Feeding** – Your child can have whole milk, and needs a vitamin with iron (and fluoride, if your water supply is deficient). Watch all solids for choking hazards (cut hot dogs in small pieces, no grapes unless finely cut, no gum, popcorn, hard candy), and child should always be seated while eating. He/she should be off of the bottle by now. Appetite will decrease dramatically, due to decreased growth needs!

### **Respiratory/Cardiovascular System**

Breath-holding spells often start when the child starts screaming and having temper tantrums. The child will hold the breath so long, he/she may pass out. Consciousness will return within a few minutes. The child is completely alert after the event and there is no jerking. This is not a seizure, but a response of the Vagus nerve. The child needs to be evaluated, and in certain situations a medication given.