



PASTORAL CARE FOR CHILDREN

CNBB

For all Children to Have Life in Fullness

Leader's Guide of the Pastoral Care for Children



The 10 Commandments for peace in the family

1

Be faithful to the Word of God, **loving your neighbor** as you love yourself.



PEACE STARTS AT HOME

2

Love and trust in yourself and your family to create an environment of love and peace around you.

3

Take time to play with your children and to share wonderful moments with your family because **children learn best in an environment of fun and leisure.**

4

Educate your children **through conversation, affection and support**, and be careful: who beats to teach is teaching to beat.

5

Participate in the life of your family's community, avoiding dangerous company and entertainment that stimulates violence.

6

Try to solve your problems calmly and learn from difficult situations, **always looking at the positive side of things.**

7

Share your feelings with sincerity, saying what you think and hearing what others have to say.

8

Respect those who think differently than you because **the differences are a wealth** and will promote personal growth to the individual as well as the group.

9

Teach through good example because your words and actions are the truest witness to who you are.

10

Apologize when you offend someone and pardon from your heart when you feel you have been offended. **Forgiving is the greatest gesture of love** that we can demonstrate.



CNBB
Para que todos as crianças tenham vida
BRASIL
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Pastoral Care for Children

Leader's Guide of the Pastoral Care for Children

Curitiba

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TABLE OF CONTENTS

A Message from the Pastor.....	6
Cardinal Agnelo.....	6
Monsignor Joselito C. Asis.....	8
A History of Love for Life.....	10
Mission of the Leader of Pastoral Care for Children	14
The Pregnant Woman.....	23
Getting to Know a Little About the Human Body.....	24
Fecundation	25
Talking with the Pregnant Woman and her Family.....	26
Ties of Love.....	28
Home Visits	31
Healthy Foods.....	34
Breastfeeding.....	39
Hygiene.....	42
Dangerous Substances During Pregnancy.....	45
Urinary Tract Infection (UTI).....	46
Anemia.....	47
Obesity.....	48
The First Three Months of Pregnancy	51
Talking About the Pregnant Woman.....	52
Breastfeeding.....	55
Most Common Complaints.....	56
Prenatal Check Up.....	59
Disease Prevention During Pregnancy	61
Advice(s) on Dangers During Pregnancy.....	63
Signs of Danger in the First Three Months of Pregnancy	64
The Leader's Notebook.....	66
The Fourth, Fifth and Sixth Months of Pregnancy.....	71
Talking About the Baby.....	71
Talking About the Pregnant Woman.....	72
Breastfeeding.....	74
Most Common Complaints.....	75
Signs of Danger all Throughout Pregnancy.....	80
The Seventh, Eighth and Ninth Months of Pregnancy.....	83
Talking About the Baby.....	83
Talking About the Pregnant Woman.....	84
Breastfeeding.....	85
Task Force to Search for Pregnant Women	86
Most Common Complaints.....	87
Delivery Signs	88
Planning the Delivery	89
Visiting the Health Service Centers.....	91
Birth of the Baby.....	93
Labour Signs.....	94
Delivery	94
Keeping Mother and Baby Together.....	95
Observing (for) the Newly Born Baby	96
Breastfeeding – Colostrum.....	99
Low Weight Babies.....	101
Postnatal Care.....	102
Signs of Danger of a Newly Born Baby	103
Vaccines.....	104

The Baby's First Week of Life.....	106
The Baby's Arrival in the Community.....	106
Breastfeeding.....	112
Baby's Right Sucking Position.....	113
Common Problems While Breastfeeding.....	118
How the Baby can Learn and Grow.....	122
Hygiene.....	124
Signs of Danger for the Baby's Health until the 2 nd Month of life.....	127
The Baby's First Month of Life.....	130
Breastfeeding.....	130
How the Baby can Learn and Grow	132
Sleeping on their Backs is Safer for Babies.....	134
Hygiene.....	135
Organizing the Activities of the Leader.....	136
Creating a Favorable Environment for the Development.....	139
Indicators to Follow up the Child.....	140
Indicators of Opportunities and Achievements.....	142
End of Recovery Period (Puerperium).....	146
The Baby's Second and Third Months of Life.....	149
Breastfeeding.....	149
How the Baby can Learn and Grow	150
Touching the Baby's Body.....	154
Pneumonia.....	156
Hygiene.....	158
Signs of Danger for the Child from Two Months to Five Years Old.....	159
Vaccines.....	160
Four to Five Months Old Baby.....	162
Breastfeeding.....	162
Milking.....	163
How the Baby can Learn and Grow	166
Hygiene.....	170
Celebration of Life.....	172
Sixth to Eight Months Old Baby.....	179
Breastfeeding and Beginning of Regular Feeding	179
Anemia Caused by Lack of Iron.....	185
Vaccines.....	187
How the Baby can Learn and Grow	188
Hygiene.....	193
Diarrhea and Dehydration.....	194
Home Made Oral Rehydration Solution.....	196
Nine to Eleven Months Old Baby.....	200
Breastfeeding and Beginning of regular Feeding	200
How the Baby Learns and Grows	201
Hygiene.....	211
Intestinal Worms.....	212
MEBAs.....	213
The One Year to One Year and Five Months Old Child.....	217
How the Child Can Learn and Grow	217
Breastfeeding and Beginning Regular Feeding	220
Hygiene.....	221

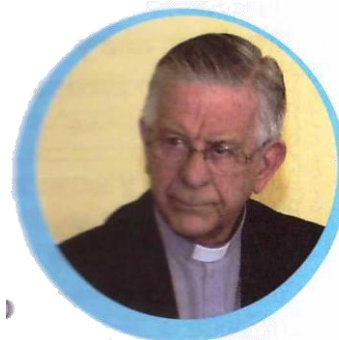
The One Year and Half to One Year and Eleven Months Old Child	223
How the Child Can Learn and Grow	223
Head Lice.....	227
Skin Diseases (Scabies).....	228
Breastfeeding and Regular Feeding.....	229
Evaluation and Reflection Meeting.....	230
The Two Years to Two Years and Eleven Months Old Child.....	235
How the Child can Learn and Grow	235
Caring for the Nourishment of the Child.....	241
Hygiene.....	242
Environment.....	243
The Three Years to Three Years and Eleven Months Old Child	244
How the Child Can Learn and Grow	244
Feeding.....	248
Intoxication, Poisoning and Asphyxia.....	249
Peace Begins at Home.....	251
Hygiene.....	253
The Four Years to Five Years and Eleven Months Old Child.....	256
How the Child Can Learn and Grow	256
Pre-School.....	262
Children Physically Challenged.....	265
Feeding.....	270
Vaccines.....	272
The Mission of Pastoral Care for Children.....	274
To Walk with Jesus.....	274
To Stay with Jesus.....	276
Mission Challenges.....	277
The Strength that Comes from Above.....	279
The Strength that Comes from our Brethren.....	280
Organization of Pastoral Care for Children.....	281
Sending Off Celebration.....	385

A Message from the Pastor

*Truly I tell you, just as you did
to one of the least of these who are members of my family,
you did it to me.”
Mathew 25:40*

Cardenal Agnelo

Reflecting about our children, inspired by the message of the Document of Aparecida no.441, we cannot forget the words of Jesus himself when he says, “Let the children come to me, and do not stop them; for it is to such of this that the kingdom of God belongs” (Luke 18:16).



Jesus in his wisdom sees the purity of heart and of mind of the children. Children are not arrogant or proud. Adults are mainly responsible for the formation of children. Adults are also responsible doing the evil that is planted in the heart of our children when they teach to lie, to be hostile, to discriminate -- in short, to become malicious.

Pastoral Care for Children teaches the importance of education and health care of the pregnant women and children below six years old. This work of faith and Life shows that the love that the mother gives to the child is the key for the quality of both psychological and physical development. From the maternal womb the little heart of a new being is beating to the rhythm of the heart of the mother. There starts a dialogue in the conversation with the baby, when s/he is caressed, when s/he is told that s/he is loved. This is necessary to communicate love. Even if the family is having financial difficulties, love is the greatest wealth and it is for free. It is enough to communicate it. Pastoral Care for Children wants to bring the experience of the true and greatest love to all families, especially to the poorest and neediest.

We want to be missionaries of love: to announce Jesus, to bring Jesus to our families. He is the Way, the Truth and the Life, "I came for all to have life and life in fullness," (John 10:10)

The health policies will be ineffective if they do not communicate love. Love is the soul of this work and effort.

By presenting this "Leader's Guide of the Pastoral Care for Children", we want to propose a challenge which is the Formation of community Leaders. The community volunteer leaders are the angels of the Pastoral who, after receiving formation, will bring to the families the meaning of love for God and for neighbour.

I wish that the Pastoral Care for Children continue doing so much good wherever it reaches as it is already happening in Brazil and in other countries of the world.

May God bless you all under the maternal protection of Our Lady.

Monsignor Geraldo Majella Agnelo
Cardinal Archbishop of Salvador- Bahia Brazil
Co-Founder of Pastoral Care for Children
Board Member of the Council of Pastoral Care for Children International



Monsignor JOSELITO C. ASIS

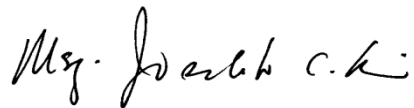
"Let the children come to me..."(Mark 10:14)

With these encouraging words, Jesus opens to everyone, including children, the richness of His heart. He marvels at the mystery of life that begins full of hope, and discovers the likeness of the Father in every unknown child. How could Jesus, who asks us to have hope, forget that the children are also our hope?

When the (*Pastoral da Criança*, originated from Brazil) was introduced in the Parish of the Holy Trinity (now Parish of St. Joseph) in the Diocese of Daet, where I was its Pastor, the first predicament among the parishioners was that, at last, the children were given special place in the pastoral plan of the parish. The children were given hope, thus they become also our hope. Indeed, the Church is a mother!

With the aid of this *Leader's Guide of the Pastoral Care for Children*, pastoral volunteer leaders will become instruments of hope and heralds of the Gospel. In their constant study of this manual, pastoral leaders will fulfill their tasks of taking care of the child's full development, the child's health and balanced nutrition, the child's education, as well as, mental, social and spiritual growth. Thus, they will lead the children towards fullness of life that Jesus Christ Himself offered to every child of God (cf. John 10:10).

It is my ardent wish that this book may become a source of inspiration and encouragement for all of us who are directly involved and supporters of the Pastoral Care for Children. May Jesus, the Good Shepherd, guide and protect us in our effort to build a better world for the service of life and hope.



Monsignor JOSELITO C. ASIS
Secretary General
Catholic Bishops' Conference of the Philippines
28 March 2012

A Story of Love for Life



"Give them some food yourselves." Mark 6:37

This Story of love began in 1982 in a conversation, during a UN meeting, between James Grant, Executive Director of UNICEF and Cardinal Paulo Evaristo Arns, Archbishop of Sao Paulo. James was convinced that the Church could save thousands of children if it would just teach their mothers some simple actions like the preparation of the home-made oral rehydration solution. This experience could start in Brazil.

Cardinal Paulo, my brother, called me on the telephone to tell me about the proposal of James Grant. I felt that I was being called by God to a great mission in Life. I explained to him, according to my experience in public health, as Pediatrician and Public Health Specialist that what was lacking the most in the mothers were basic knowledge and fraternal solidarity. Then, it was not enough to teach the mothers to use the home-made rehydration solution, but it was also necessary to teach them the importance of pre-natal care, integral development of children, human relationships, so they could know and feel enthusiastic to take better care of their children for them to grow in wisdom and grace (Cf. Luke 2: 52).

Once the proposal was approved, the Episcopal Conference of Bishops of Brazil (CNBB) presided by Msgr. Ivo Lorscheiter, assigned Msgr. Geraldo Majella Agnelo, at the time Bishop of Londrina and at present Cardinal Primate of Sao Salvador, Bahia, to accompany the development of the work, woven with the fraternal love of volunteers and full of love and life. The chosen motto was, *for all children to have life and life in fullness* (Cf. John 10:10).

The pilot project was implemented in Florestópolis, municipality of the archdiocese of Londrina, North of Parana, Brazil which had a high rate of infant mortality as in 127 deaths out of 1000 births. 74% of the families worked as temporal labourers in the sugar cane fields or others.

With the support of Bishop Geraldo, I developed a communitarian methodology inspired in the Gospel accounts of the multiplication of the two fish and five loaves of bread (John 6: 1-15) that satiated the hunger of five thousand men without counting women and children. In this way we would organize small communities to multiply the knowledge and the fraternal solidarity, giving witness of the greatest of all commandments, *“Love God above everything and your neighbour as yourself” (Mark 12:31)*.

Following the aforementioned Gospel, we implemented in the beginning a system of information to verify and accompany each child in his/her development, from conception until 6 years old.

Thus, thousands of leaders do simple and low cost basic actions of education, health, faith and citizenship with pregnant mothers and with children in their own familiar and communitarian context. These actions contribute also to the strengthening of the social fabric and the improvement of the public policies mainly in the areas of health care, education and other fundamental rights. The education and the encouragement towards solidarity that the families receive from the Pastoral Care for Children has promoted everywhere the decrease of infant and pregnant women mortality, malnourishment and violence in the family.

“The conquest of a more just and fraternal world is born in the heart of every person and of the positive attitudes that go to the encounter of the neighbour, especially children.”

Pastoral Care for Children since its foundation is inclusive, ecumenical; it goes beyond any religious and political belief. It works with love and without discrimination.

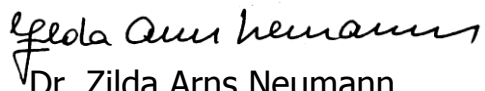
Its extraordinary results are due to a methodology that puts together faith and life, woman promotion, a system of training decentralized, a System of Information, quality of educative materials, credibility for its fidelity to the objectives and in a special way to the constant support of the Church.

The sum of efforts and collaboration is what guarantees the sustainability of the actions.

In Brazil, Pastoral Care for Children, counts on the financial support of the Federal Government through the Department of Health which continuously, since 1985, is its main financial supporter. For its credibility, Pastoral Care for Children conquered also the support of State and Municipal Governments, Enterprises, and others. In the same way that happened in Brazil, the UNICEF is the first organization to support and help the Pastoral Care for Children when it starts in a new country. To date, this communitarian methodology of faith and life is present in 19 countries of Latin America, Africa and Asia.

There is still a lot to do! The Millennium Declaration, approved by the United Nations in September of 2000 establishes eight objectives to achieve in 2015. Among them are to eradicate extreme poverty and hunger, to reduce 50% of infant mortality and increase the autonomy of women. These objectives will be achieved only with the cooperation of intersectoral efforts between religions, governments, NGOs, enterprises, mass media communications and society in general.

Pastoral Care for Children International contributes in order for these objectives to be achieved, by collaborating in the construction of a better world, more just and fraternal, to the service of life and hope for '*all to have life and life in fullness*' (John 10:10).



Dr. Zilda Arns Neumann
Pediatrician and Public Health Specialist
*Founder and National Coordinator
of the Pastoral Care for Children*

The Mission of the Leader of Pastoral Care for Children



"In the beginning God created heavens and earth...

He made the light...

He separated the land and the waters...

He created the air, the plants which give seed-bearing plants...

He created the living creatures of the sea, every winged bird to fly, the earth and the air...

And God created man and woman in His own image and likeness and

Said, 'Be fruitful and increase in number.'

And God saw all that He had made, and it was very good."

We are creatures of God!

In this world that we build together, is everything good?



The air we breathe needs to be pure.

The earth needs to have trees, plants, flowers and animals.

The water we drink and use needs to be good.

We need to work to have food, clothing and leisure.

We need health services to prevent and treat diseases.

We need schools to study and learn.

Are the people, especially the children, being taken care of, protected and raised up according to God's plan?



Observing the current reality of our countries, we just cannot say that everything is according to God's plan. Hence, it was in 1983 when Pastoral Care for Children was founded. Many children had died of diseases which could have been prevented such as dehydration caused by diarrhea. A challenge was launched at that time: How could the Catholic Church in Brazil, help to save thousands of children from death?

And the Church, through the work of the Pastoral Care for Children accepted the challenge!

Putting Faith and Life together as Jesus taught us to do. Pastoral Care for Children puts itself in the service of Life, Hope, Faith, Love, Joy and Peace. Pastoral Care for Children does not discriminate among religions, skin complexion, race or political choices; it is open to everybody.



Pastoral Care for Children promotes a life of respect, solidarity, appreciation of the differences among people and of care for the environment around us. It also seeks to denounce injustices and the lack of dignified living conditions for everyone.

"The promise that was made is for you and your children, and for all those who are far away, for all those whom the Lord our God is calling to himself."
Act 2:39



In order to face the challenge of saving the life of the small ones and to contribute to the creation of a favourable environment for their development, Pastoral Care for Children, follows up on the pregnant woman and children until they are six years old. Its work, as Jesus did, is for the neediest ones. Pastoral Care for Children seeks to work with the poorest families who are facing more difficulties as they live in very hard conditions.

Thus, with its work, Pastoral Care for Children is helping the families to fight for their basic human rights such as is written in the United Nations Universal Declaration of Human Rights 1948, Article 25: *“Everyone has the right to a standard of living adequate for the health and well being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.”*



The Social Rights guarantee for people the basic conditions so that all may have a healthy, dignified and joyful life.

Until today, not all have access to these rights; it is necessary to fight for them. Citizens are those people who fulfil their duties by helping each other, and by taking part in the effort to conquer the social rights in their own community.

Pastoral Care for Children is present in the communities to promote health care and integral development of pregnant women, children and their families. This action is possible because there are people who commit to voluntary work, in which they share knowledge, experiences and part of their time. They are people who live and witness the love for neighbour, with their example. It is a true work of Christian Charity!



Thus, in each community, people are called to become leaders of Pastoral Care for Children.

These people are prepared since the beginning through a training based on this *Leaders' Guide*, so they can improve their knowledge, exchange experiences and after that, they can share them with the families they follow up. The leaders also learn with the families who bring their knowledge and share their experiences.



Let us see how the leader's work is done?

The Pastoral Care for Children Leader visits each home following up on the pregnant women and the children who live nearby to her/his home. In doing that, he/she and thousands of Pastoral Care for Children Leaders are giving continuity to the project of Jesus here on earth:

"I came so that they might have life and life in fullness." John 10:10

The leader follows up on the pregnant women and a maximum of 15 children, performing the following activities:

- Home Visits
- Celebration of Life
- Monthly Meeting for Reflection and Evaluation



During the Home Visit, the leader has the opportunity to talk, without haste, with the pregnant woman, with the parents and the relatives of the children. By doing that, he/she has the opportunity to know the life conditions and the family needs better, so he/she can effectively help them and he/she may also help to strengthen the trust and friendship bonds among them.

Monthly, the leader holds the Celebration of Life where the families gather to celebrate their children's development and the leaders can talk with all the families together.



The third activity is the Monthly Meeting for Reflection and Evaluation. In this monthly meeting, the leaders evaluate the work done, dialogue with the families, learn more and celebrate.

*“And whatever you say or do, let it be in the name of the Lord Jesus, in thanksgiving to God the Father through him.”
Colossians 3:17*

The Pregnant Woman

Everyone has the right to live with dignity. This right begins from the conception of a new life. Therefore, Pastoral Care for Children begins its activities with the pregnant women who need to be assisted since the beginning of pregnancy.



Visiting community families is the best way to find pregnant women. Some women tell the leader right away that they are women who are pregnant. Others take a little more time and the leader will only get to know about their pregnancy on the following visit.

Some signs that can help a woman to find out that she is pregnant:

- Delay in menstruation;
- Sore and increased breasts;
- Mood swings: feelings change from happy to sad from one moment to another
- Nauseas and frequent dizziness.

*"Mary set out at that time and went as quickly as she could into the hill country to a town in Judah. She went into Zechariah's house and greeted Elizabeth. Now it happened that as soon as Elizabeth heard Mary's greeting, the child leapt in her womb and Elizabeth was filled with the Holy Spirit."
Luke 1: 39-41*

Getting to Know a Little About the Human Body

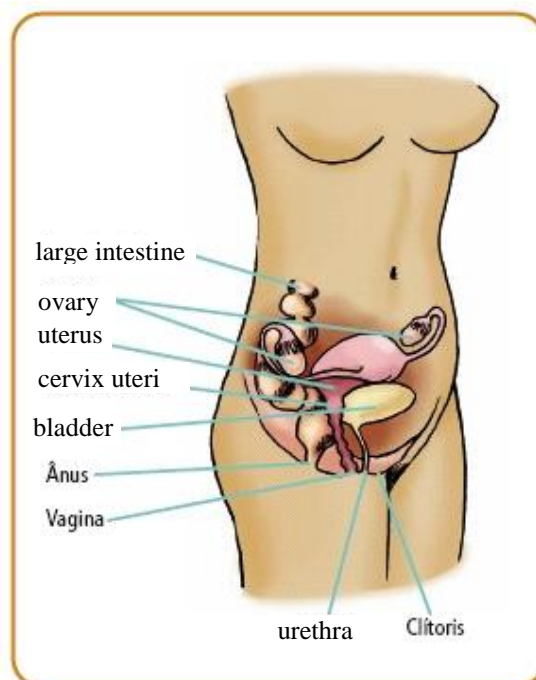
The male external genitalia are called penis and testicles. The female organ is called vulva. In both man and woman they are extended inside the body where it is not possible to see them. The testicles and the ovaries produce the reproductive cells that allow the conception of babies.

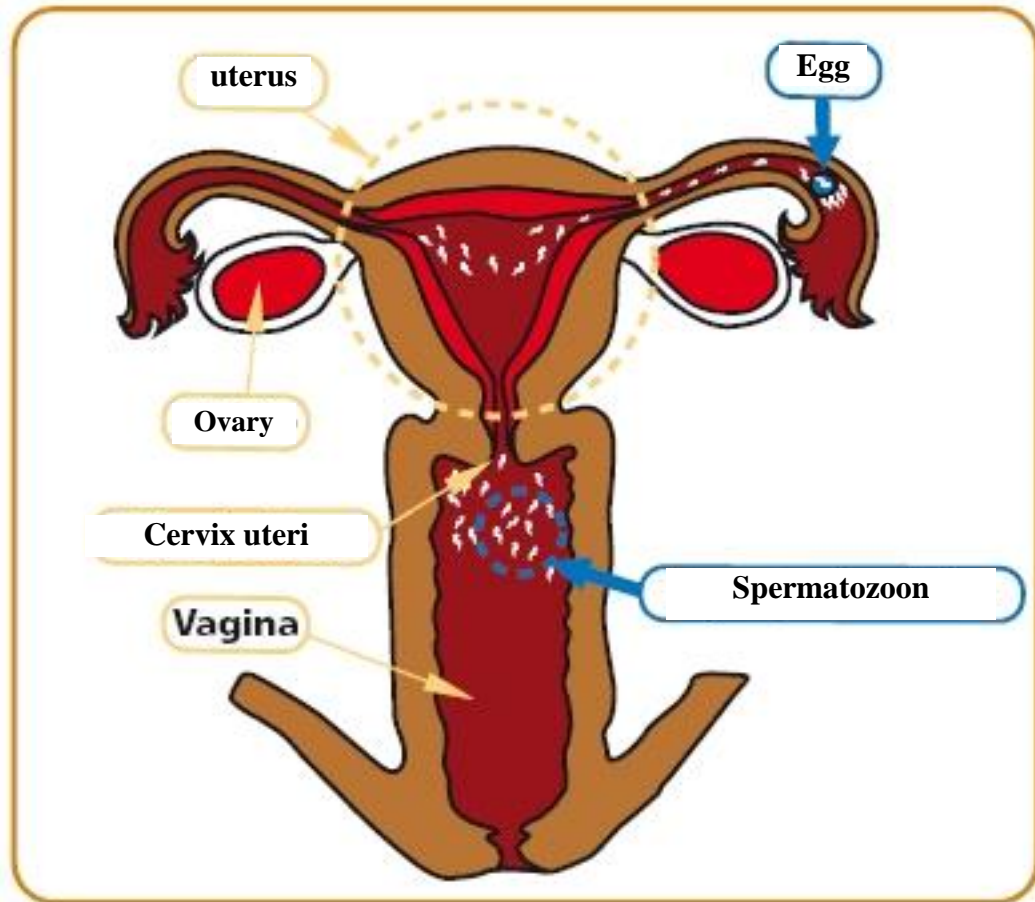
The male reproductive cells are called sperm. The female reproductive cell is the ovule.

The man's sperm goes out through the same canal as the urine. The woman's genitalia are separated from the urinary system organs.

When the girl releases the first ovule we say that she is no longer a child. Now she is able to conceive. The first ovulation usually occurs between 10 and 14 years of age.

The woman's uterus gets ready for pregnancy each month. In case she does not conceive, her body removes the "nest" prepared by the womb which goes out of the body in the form of menstruation. This occurs 14 days after the ovulation.





The sperm has to join an ovule in order to conceive a baby. The union of these two cells forms an egg or zygote, in other words, the first cell of the baby. At this instant a new being is born.

The ovule is fertilized two weeks before the expected date of the menstruation. Three weeks after conception, the baby's heart is already beating inside the mother's uterus. In this period, many women do not suspect that they are pregnant yet because the menstruation is delayed only for one week.

The baby grows day after day during 40 weeks, the time that pregnancy usually takes. During pregnancy the woman needs to be more careful with her health and nutrition.



Pregnancy is a time of many changes for the woman. She may be more sensitive because she is going through changes in her body and moods. Therefore, she should be treated with affection and tenderness.

When the partner and the other members of the family understand how the pregnant woman feels during this period, they can better help in whatever is necessary so that she has a healthy and happy pregnancy.

The first mission of the leader is to lend an ear to the pregnant woman and her partner, by listening to what they have to say about the pregnancy. Many couples become happy when they find out about the pregnancy, for they were already preparing themselves to have a baby. Other couples, however, can feel frightened, anxious and concerned because they had not planned the woman to become pregnant at that particular moment of their lives. Others still become concerned with the difficulties they might face or fear not being able to take care of the baby.

Leader, all the pregnant women need your assistance, even if they already have other children because each pregnancy is different from the other.

Some women, when they conceive for the first time, may feel embarrassed or think that the pre-natal check up is not important because they feel well. Pregnant women who already have children may think that it is not necessary to do the prenatal check again.

It is common that pregnant adolescents try to hide their pregnancy fearing the reaction of their partners, parents, relatives and friends. During the home visit, the leader should advise the family about the importance of their support and understanding so that the adolescent can live this moment with serenity, responsibility and love.

The well being of the pregnant adolescent is very important so that she can feel secure and confident for the good development of the pregnancy and for the baby's health. Therefore, she will need support from everybody to value the life she carries inside her belly and to feel responsible for it.

Leader, some pregnant women who do not have a partner, may need more help from you because they may feel the lack of someone to share their joys and difficulties with.

Researches indicate that in order to reduce the infant mortality rate - the number of deaths of children younger than one year old - more attention and support shall be given to the following pregnant women:

- The poor ones;
- The ones who have no partner;
- The ones with low education;
- The ones with two or more children;
- The ones under 20 years old;
- The ones with high blood pressure or diabetes;
- The ones that lost a baby in a previous pregnancy or a child who was younger than one year old;
- The ones who smoke.

The Ties of Love are a set of cards made for the pregnant woman. They are designed to increase the involvement of the pregnant woman and her family with the pregnancy in order to show her needs, her baby's needs and to encourage her to do the prenatal check up.

These cards have to be delivered to the pregnant women at the home visits every month. They are a great help for the leaders to give practical advice to the pregnant woman on how she can take better care of herself and on how to create a stronger bond with the coming baby.

Leader, it is ideal to accompany the pregnant woman since the first month of pregnancy. This way, you use a card every month to read and talk with her and also, when possible, with the father of the baby. In case that the accompaniment of the pregnant woman starts after the first month of pregnancy, it is necessary to use more than one card during the visit.

If the first visit takes place:

- 2nd Month: Use cards 1 A, 1 B and 2
- 3rd Month: Use Cards 1 A, 1 B, 2 and 3
- 4th Month: Read and talk first about Card 1 A, 4; and right after about Cards 2 and 3
- 5th Month: For the first visit, Cards 1 A, 4, 2 and 3; and during the second visit cards 5 and 6
- 6th Month: the leader must deliver the cards in the same order suggested for the 5th Month: During the third visit use Cards 7 and 8.
- 7th Month: Read and talk first about Card 1 A and 7; right after about Cards 3 and 5
- 8th Month: During the first Visit use Cards 1 A, 7, 3 and 5. In the second visit use cards 8 and 9.
- 9th Month: Read and talk about Cards 1 A, 7, 8 and 9 during the first visit.

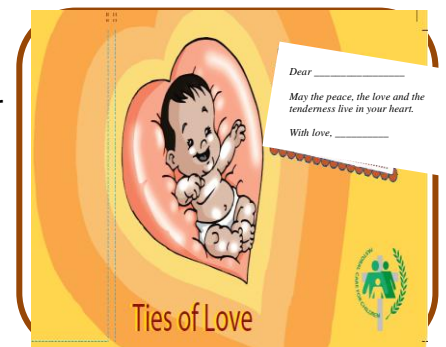
Important: From the 4th Month onwards not all the Cards shall be used during the visit. However you can give the Cards to the pregnant woman so she can read them later and keep them as a souvenir.

When the baby is born, use Cards 10 A, 10 B, and 11.

In the following visit, still during the first month of life of the baby, use Cards 12 and 13.

Continue visiting and when the baby completes three months, give Card 14; and when the baby is five months old, give Card 15.

The Ties of Love Cards should be given only to the mothers that were accompanied during their pregnancy.



*"Whatever house you enter,
first say, 'peace to this house'".*

Luke 10:5

Homework Suggestion for this Stage of Training:

Visit a pregnant woman you have already met, deliver and read with her the Ties of Love Cards regarding her corresponding pregnancy month.

To Evaluate and Celebrate

- How did the pregnant woman you had already met receive your visit?
- Was there any explanation about the Ties of Love that you did not understand or that was not accepted by the pregnant woman?
- Now that you know a little more about the Pastoral Care for Children, would you like to become a Pastoral Care for Children leader?
- Did we choose and share a message, a prayer or a Biblical quotation which celebrates the gift of life and the actions that we have performed for our neighbours, the pregnant women and their families?

One suggestion could be the following:

*"You formed my inmost being; you knit me in my mother's womb.
I praise you, so wonderfully you made me; wonderful are your works!
My very self you knew; Your eyes foresaw my actions;
in your book all are written down; my days were shaped,
before one came to be."
Psalm 139: 13-14.16*

To see

The pregnant woman

1. How do the women, that you know, react when they find out they are pregnant?
2. What are the feeding habits of the pregnant women you know?

Home Visits

Leader, the home visit is the moment when you become closer to the families you are following up on and you may:

- Show appreciation for the good things the families do to take care of their children
- Talk about pregnancy
- Talk about the care and education of the children
- Alert about the signs of danger to the pregnant woman and the baby's health;
- Identify unfavourable situations for the child's development
- Perceive the possible problems and difficulties they are facing
- Look for ways to solve these problems together



In each new visit you and the family become closer. The family begins to feel safer to talk about their happiness and difficulties, because they feel that you are discreet and would not comment on other families their private problems.

During the first visit to a family, where there is a pregnant woman or a child, you should introduce yourself, explain what the Pastoral Care for Children work is and ask if they accept to be accompanied. In the following visits, the family gets to know about your work better and you also begin to identify what the family does to take care of the pregnant woman and of the child.

During the visits, it is necessary to first listen to what the family members have to say and try to help them based on their own needs and always respecting what they think and believe. Thus, you, leader, become a companion that walks besides them and who is always nearby to support and guide them.

With the support of this guide, you can reinforce the family and pregnant woman's care and attitudes, which would help to build a favourable environment for the child development and for a good pregnancy.



To assist the family with the care of the pregnant woman and the children, sometimes just a simple orientation is enough. In other situations it may be necessary, besides that, to ask the help of other people from Pastoral Care for Children, the Church or public services such as: health, education and social services.

When you do not know how to answer a question, do not worry because nobody knows everything. Just tell them that you will look for the answer and bring it to them in the next meeting.



It is necessary to be tactful about delicate situations in order not to hurt the family or the child. The 10 Commandments for the Peace in the Family, a tool that will be studied later on, can also be helpful for these conversations.

It is good to agree on the best hour for the visits with the family in order not to disturb the housekeeping activities. During the visits, invite the families to participate in the Celebration of Life. Remember to inform the date, the hour and the place of the celebration and show how important the presence of the child and the parents on that occasion is.

Leader, each time you do your home visits, take this guide, the Leaders' Notebook, and other working tools of Pastoral Care for Children with you.

*"For the help provided by this ministry not only
Satisfies the needs of God's holy people, but also overflows
Into widespread thanksgiving to God."
2 Corinthian 9:12*

Healthy Foods



The woman needs the right nutrition in order to keep herself healthy and for her baby to develop and be born with an adequate weight. If the pregnant woman nourishes herself badly, she may become anemic and undernourished. Her baby may be born with a low birth weight, be more susceptible to illnesses and take more time to recover from them.

The right nutrition contains varied, clean, fresh food and in sufficient quantity. It is very important to be concerned about the food quality and quantity. Both the lack of food and food excess may harm their health.

For a healthier eating, it is necessary to give preference to fresh food and avoid processed food, which are mainly soft drinks and salty snacks. The way of preparing food is also very important: it is always better to eat roasted/grilled and boiled food rather than fried food.



Iron is an important nutrient for a healthy pregnancy and for the good development of the baby in the mother's womb.

Lack of iron may cause anemia, a disease very common in childhood, pregnancy and adolescence, phases in which the need for this nutrient is higher, because the changes in the body are more intense. Therefore, the pregnant woman should eat food rich in iron, such as:

- Beef, poultry and fish
- Visceras like: heart, liver, kidneys, spleen
- Grains: beans, green peas, garbanzos, lentils
- Cabbage, green beans, parsley, green onion, spinach
- Egg Yolks
- Sugar Cane, honeybee, casoy nuts, pili nuts and peanuts.

Iron is best absorbed by the organism when the pregnant woman eats foods rich in Vitamins C and A together in the same meal.

Vitamin C helps to prevent infections, muscle weakness, gum bleeding and is helpful to heal scars from injuries.

Some foods rich in C vitamin are:

- Fresh Fruits: lemons, oranges, pineapples, papayas
- Fresh Vegetables: dark green leaves, peppers, tomatoes.



Vitamin A helps to prevent diarrhea and infections, protects the vision, helps the baby to grow in the womb and also strengthens the body vitamin. Foods rich in Vitamin A are:

- Orange and red vegetables: squash, carrots
- Dark green leaves
- Milk, butter, cheese
- Egg yolk
- Yellow fruits: mangoes, papayas
- Fruits of palm trees



Iodine is important for the physical and mental development. Lack of iodine in the pregnant woman's body affects the brain formation of the baby. Foods that contain iodine are:

- Iodized Salt
- Fish and Sea foods;
- Greens, vegetables and fruits planted in soil rich in iodine, which means, soil near the sea.

Calcium is important for the pregnant woman and for the baby because it helps to form and strengthen the teeth and bones. Some foods rich in calcium are:

- Milk, cheese, curd, soymilk, (taho, tofu/tokwa) and yoghurt;
- Dark green leaves; (malunggay)
- Sesame;
- Small fish



Leader, guide the pregnant to prepare a maximum of food for two meals each time. Thus, she will not consume leftover food and will reduce the danger of eating spoiled food. Guide her to avoid fried foods and to value roasted/grilled and boiled food.

The Folic acid in foods like visceras, beans and dark green leaves, helps to prevent problems in the baby's brain and spine.

Leader, you can help the pregnant woman and the family to take better advantage of foods and to improve their nutritional conditions by sharing the following information:

- A dish with varied foods of different colours has more vitamins and minerals;
- The seasonal and regional fruits are fresh, tastier, nutritious and cheaper
- Each meal should have at least one rough food which can be a salad or a fruit;
- It is better to eat the food right after preparation. Reheated food or food boiled for a long time loses its nutrients;
- The leftovers of cooked food should be kept in the refrigerator or in a fresh place covered by sieves or cloths;
- The vessel where the water is kept should be covered;
- Coffee, tea, black tea, milk and derivatives, chocolate and soft drinks prevent the iron absorption and should be avoided up to two hours after the meals.



Everyone has the right to eat quality food and in the necessary amount to have good health. This is food security and nutrition.

Breastfeeding

Breastfeeding is very important for the mother and the baby's health. Let's see why?

The human milk is the most complete food for the baby. It is the only food that the baby needs up to six months of age. Therefore, it is good to talk to the pregnant woman, her partner and the whole family about the importance of breastfeeding. When the partner and other family members encourage breastfeeding, the mother relaxes and feeds her baby for a longer time.



The conversations about breastfeeding can be based on what the pregnant woman and her partner want to know. This helps for them to listen to and put into practice the leader's orientations.

A good start is to talk about the experiences of breastfeeding which the pregnant woman knows. What the sisters, grandmothers, mother-in-law, mother, friends and her partner say about breastfeeding can influence the pregnant woman on her desire to breastfeed.



Leader, encourage the mother to breastfeed, talk about the advantages of breastfeeding for the baby:

- The human milk protects the baby against diseases like allergies, diarrhea, colds, urinary and respiratory tract infections;
- It is easily digested
- Sucking develops and strengthens the baby’s mouth muscles, improving the chewing, swallowing and speaking skills
- It is a very special moment which strengthens the relationship between mother and child and communicates security, affection and the love the baby needs to develop well
- It is a complete meal



Advantages of breastfeeding for the mother:

- It helps to diminish the bleeding after childbirth making the womb and the breasts volume return faster to their normal size;
- It increases the affective bond with the baby;
- In the first months, breastfeeding prevents the ovulation, acting as a natural contraceptive. But, for the mother not to become pregnant again, it is necessary that the baby is breastfed whenever s/he wants without drinking tea or water;
- It is economic and is readily available to have;
- It reduces the risk of breast and ovarian cancer.

Breastfeeding: It is good for the mother and the best for the baby!

"A man never hates his own body, but he feeds it and looks after it; and that is the way Christ treats his Church..."
Eph 5:29

Hygiene



Pregnancy is a very special moment. It is important that the woman continues to take care of herself and to feel pretty in this stage of her life.

Leader, some tips help you to guide the pregnant women:

- A bath with running water is better: it could be of a spring, shower or with the help of a water container;
- A bath with the woman sitting in the bath tub (or a basin), or vaginal douches are not recommended because they can carry bacterias from the vagina to the womb where the baby is;
- Washing her hair does no harm to the pregnant woman or the baby;
- Clean and comfortable clothes provide a well being feeling;
- Tight stockings or socks may prevent the blood from circulating and may cause varicose veins;
- The best shoes are those with non-slip soles to avoid falls.

Oral Health



During pregnancy, tooth cavities may appear if the consumption of food with sugar increases and the teeth are seldom brushed. The pregnant woman should do the daily dental hygiene with dental floss, toothbrush and toothpaste calmly and carefully. In doing so the mouth is kept healthy.

Leader, guide the pregnant woman to clean her teeth as follows:

- First use the dental floss, even if the gum bleeds;
- Brush the superior teeth in an up-to-down motion and the inferior teeth in a down-to-up motion;
- Brush the teeth in their inner and outer part close to the tongue and also the exterior part, near the cheeks;
- Brush in a short circular motion the flat part of the back teeth or molars;
- Brush the tongue.



The dental floss should be glided carefully between the teeth and the gum in order to remove the food leftovers that are not removed with the brushing.

Leader, you can teach the pregnant woman and the family to prepare a homemade dental floss using a piece linen thread no.10 daubed in paraffin or bee's wax. Another material that can be used is the transparent raffia of packages; just make sure it is very clean. Even a strip of a plastic bag or of a milk pack can be used as a dental floss.

Dangerous Substances During Pregnancy



It is important that the leader teaches about the consequences of drug consumption during pregnancy.

Drugs, besides preventing the baby's development can create dependence since before birth.

Cigarette smoking causes the babies to be born with low birth weight, premature childbirth and increase the chances of the baby to be born with heart and respiratory tract problems.

When the pregnant woman consumes alcohol, besides the risk of abortion, she may have a baby with "Foetal Alcohol Syndrome". With this syndrome, the baby may have problems of growth and in the nervous system.

Some medicines also prevent the baby body's formation. Thus, during pregnancy, only medicines prescribed by the doctor who accompanies the prenatal health care shall be used.

Urinary Tract Infection (UTI)

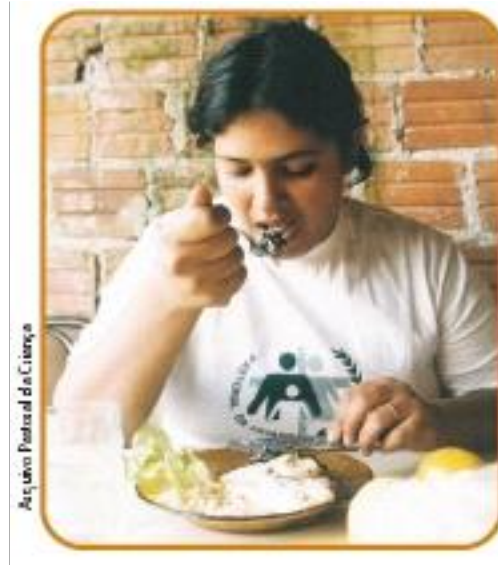


Along with the growth of the baby, the uterus begins to push the bladder down and that is why the pregnant woman needs to urinate very often.

As the size of the uterus grows, it starts to occupy more room and can also push the urine canal. This makes the urine to remain stagnated there causing urinary tract infection. It is important that the pregnant woman goes to the bathroom whenever she needs and empties the bladder well.

If the pregnant woman complains of belly pain or burning sensation while urinating, this can be a sign of infection. In this case, she should be taken to the health service center for a check up even if she has no appointment that day.

Attention: The urinary tract infection is frequent and easy to be solved during pregnancy. But, if it is not treated on time it can cause abortion, kidney infection and childbirth before time (premature).



Anemia is caused by lack of iron in the body thus decreasing the capacity of the body to take advantage of the oxygen from the air we breathe. Therefore, the main symptoms are tiredness, lack of desire to do things and low appetite.

Anemia is caused by inadequate nourishment, low in iron. The pregnant woman needs to eat food rich in iron because she is gestating a child. See the food rich in iron on page 35 (Healthy Foods).

Children of pregnant women with anemia have a greater chance to be born with a low birth weight and to die within the first days of life.

A pregnant woman with pale skin, weak, discouraged and with difficulty to gain weight may have anemia. It is important that she tells the doctor what she is feeling.

The World Health Organization (WHO) recommends that: every pregnant woman shall receive iron from the 5th month of pregnancy until the 3rd month after the birth even if she has no anemia.

Leader, please verify in the **Leader's Orientation** if there is a program of supplement of iron and folic acid for the pregnant women in the Health Center and how it can be accessed.

Obesity



Obesity is the weight that is over the ideal weight, with excess of fat in the body. It is caused, in the majority of cases, by the ingestion of much unhealthy food and as a result of lack of exercise. Obesity is a disease, which may cause other diseases such as diabetes, high blood pressure, heart attack and strokes.

For the pregnant woman, the excessive weight increases her risks in high blood pressure (hypertension), pre-eclampsia and bleeding after labour. These diseases will be mentioned later.

Leader, during your visits, talk about the benefits of a healthy nutrition. Good nutrition habits bring health to the mother and to the baby.

Leader, to guide your conversation with the families check and write below:

- Healthy food available in the community: _____

- Price of meat, fish, sea fruits, liver and other visceras: _____

- Places where fresh and cheaper food can be found: _____

- Suggestions on how to facilitate to the families the access to shops or markets where these fresh and cheaper food are sold: _____

- Recipes and cooking recipes as well as food combination to better benefit from sources of iron, vitamins and other nutrients for the pregnant woman _____

Homework suggestion for this Stage of Training:
Fill up the different points about healthy feeding on this page

To Evaluate and Celebrate:

- How is the liver and other viscera accepted, by the families in the community, as a source of nutrition?
- Is this food easy to find and do they have it in an affordable price?
- Is there any message, prayer or Biblical quotation, which celebrates the gift of life and the actions we have performed for our neighbours, the pregnant women and their families?

One suggestion is:

Prayer for the Pregnant Mother

We praise you Lord because you are the creator of all life.

The Pregnant woman is a nest of hope.

May all pregnant women make of this pregnancy,

A time for renewal, for peace, growth and self-esteem.

*And that in this period they may feel it as a time of blessing because
the Lord is acting and working inside each one of them.*

*During each woman's pregnancy, Lord, You work inside them,
because You are forming the baby's body with all Your divine wisdom.*

The true maternity comes from You, Lord.

To See

The pregnant woman in the first **T**hree Months of pregnancy

1. What is it that most pregnant women like to know in the beginning of their pregnancies?
2. Are there, in your community, many pregnant adolescents?

The First Three Months of Pregnancy

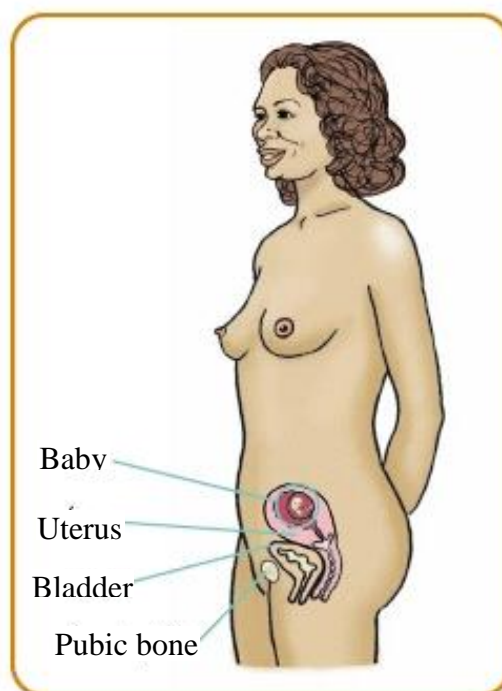
A baby has been conceived. The maternal womb is now a temple of peace and love. It is the place of the first encounter of the baby with the mother and the father.

At the end of the first month the baby is already the size of a grain of rice. The brain, heart, nervous system and the spine of the baby are being formed

In the second month of pregnancy eyes, the ears and the mouth appear.

In the third month, the brain, the stomach, the intestines, the bones and the muscles of the baby are more developed and are working together.

The body of the baby is almost ready. From that phase on, the baby is called foetus. But for the Pastoral Care for Children, it is already a baby since it was conceived and it needs love and care.



Talking About the Pregnant Woman



Besides the information on how the pregnant woman can better take care of herself, she, her partner and the family would like to know what happens during the pregnancy. This reduces the anxiety and encourages all of them to get involved with the baby since the early stages. If they know what a healthy pregnancy is, it is easier for the family to know if something is going wrong.

Leader, during your visit, which shall take place at least once a month, always give an opportunity for the pregnant woman to ask what she wants. Encourage the participation of the father and the family in the conversation. Upon reading the Leaders' Guide together with the pregnant woman, you will find a lot of important information about pregnancy.

In the first three months the woman notices few changes in her body. However, she knows it is already different: the miracle of life is happening. She is “full of Grace.”



The woman can feel that her breasts are bigger and sometimes painful. The areola, the darker part around the nipple of the breast, gets even darker and some small balls spring up. These small balls help to lubricate the areola.

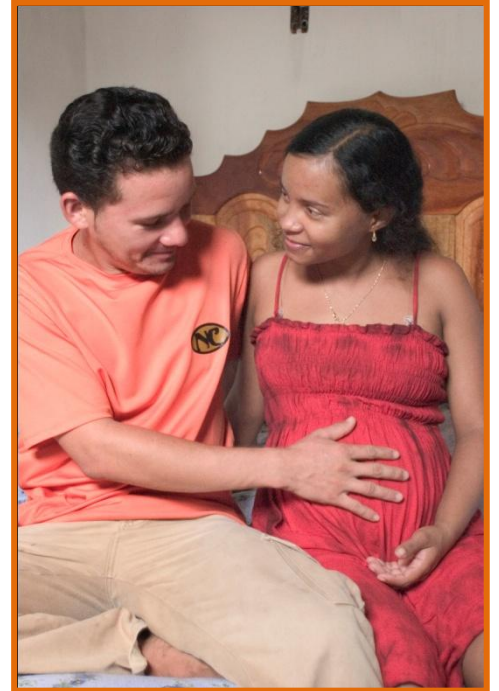
Most of the pregnant women keep on living a normal life. It is good for her to rest more, to be more conscious about proper nutrition, and to take walks during her pregnancy so as to improve blood circulation and breathing.

Also, doing activities while sitting on the heels strengthens the muscles, reduces the pains on the back, and prevents varicose veins.

It is recommended that you, leader, encourage the parents and the relatives to relate with the baby since the beginning of the pregnancy. We already know that the baby reacts to certain things of the environment he/she lives in.

The parents can talk to the baby about what they feel. It is good to talk about the happiness of being the baby's mother or father. This increases their bonds with the baby.

Leader, if this is the case, speak to the parents about the concern of an unexpected pregnancy. Talking about it will make the parents feel safer and accept better the pregnancy in order to welcome the baby.



The pregnant adolescent and the baby's father need to get involved with the baby since the beginning of the pregnancy and be encouraged to take care and raise the child that will be born. The grandparents, whenever necessary, must be oriented to support the parents, but they cannot take the parents' responsibility for the baby. As grandparents they have an important role for their grandchild.

Leader, it is very common that the pregnant adolescent quits school. In this situation, it is important that you encourage her to keep on studying.

*"All bitterness, fury, anger, shouting, and reviling must be removed from you, along with all malice. Be kind to one another, compassionate, forgiving one another as God has forgiven you in Christ."
Eph 4: 31-32*

Breastfeeding



When the pregnant woman prepares herself emotionally and mentally, understands that feeding brings benefits for both her and the baby, breastfeeding has more chances to work. Therefore, leader, it is good to talk to her about the changes in her body and about the importance of human milk.

Some women think their nipples are short to feed. It is important to tell them that the type of nipple does not interfere with breastfeeding. After all, it is under the areola (dark band of skin which surrounds a nipple) where the canals, which keep the milk, are located.

It is very difficult for a woman not to be able to feed her baby. In this case, the Health Service provides specific orientations to help her, so she can understand and accept the situation better.

Most Common Complaints

Leader, to avoid or to diminish pregnancy discomforts, you can teach the woman about the care to be taken with:

Sore Breasts

To reduce breast pain, it is necessary to wear a bra, preferably with large straps to give support to the breast which has increased its weight. The areolas' little balls should not be pressed because they can get swollen.

Dizziness

During pregnancy it is common that the blood pressure would be lower than normal and then the pregnant woman feels dizziness. Thus, it is recommended that she eats her meals in shorter intervals and always stands up slowly. When the pregnant woman feels dizzy, she should lie down and breathe deep and slowly.

Mood Swings

The hormones change, the anxiety and fear of something happening to the baby, makes the pregnant woman much more sensitive. She can cry or laugh about anything. It helps to talk with the pregnant woman and her family to explain that mood swings are part of the pregnancy and, therefore, it is necessary that they all be more patient with her.

Nauseas and Vomits

In order to reduce these discomforts, the pregnant woman should eat small amounts of food several times a day. Foods of more soft consistency and of warm or cold temperature are more appropriate in these situations.

Drinking cold water, eating more acid fruit and avoiding greasy and spicy food also helps. Drinking liquid during the meal is not recommended.



The need of vomiting usually appears when the pregnant woman wakes up, smells a strong aroma, such as gasoline, wax, or when she brushes her teeth. To reduce nausea it is recommended that she eats as soon as she wakes up – giving preference to dry food, avoiding long periods without eating. She can eat from six to eight small meals per day and avoid lying down right after meals. It is also helpful to brush the teeth only with water without toothpaste.

Some pregnant women may have a lot of nausea with frequent vomiting which prevents her from sleeping. This might also cause her loss of appetite and can dehydrate the body. To prevent dehydration, it is important to drink more liquids.

If the pregnant woman is vomiting more frequently than usual, she should go to the health center.

Weakness, Paleness and Excess of Saliva



Everything the baby needs to be formed and to grow comes through the blood of the mother. If the mother has little iron in the blood or was malnourished before becoming pregnant, she has a big chance of having anemia because of lack of iron during the pregnancy. The pregnant woman gets pale, weak and has no desire to do things. The craving (desire) to eat some specific food and weird things (not clear: does it mean *craving to do some weird things?*) shows that the pregnant woman needs some nutrients that are missing in her body.

To prevent anemia and malnutrition, the pregnant woman needs to eat food rich in iron and vitamins, according to the orientation on pages 34 to 38.

Weaknesses and fainting may happen after abrupt changes of body posture, and also when the pregnant remains without eating for a long period of time. Leader, to prevent these problems tell the pregnant woman to eat as soon as she wakes up and to avoid longer periods without eating anything. In cases when the pregnant woman feels weak, tell her to lie down on her left side and breathe calmly and deeply.

In the beginning of pregnancy it is common that the pregnant woman produces a lot of saliva. It is recommended that she swallow the saliva and drink two litres or more of water per day.

Prenatal Check Up



Leader, when you meet a woman who is not sure of her pregnancy, advise her to go to the health center. There she will take proper urine or blood tests to confirm the pregnancy. If the test result is positive, it is important that the pregnant woman begins the prenatal check up.

The prenatal check up is designed to protect both the baby and the mother during pregnancy through medical, nutritional, psychological and social assistance.

Each pregnant woman has a right to a prenatal check up and to have her labour assisted by attentive and well prepared professionals. It is important to be reminded that each pregnancy is different from the other, and the pregnant woman should do the prenatal check up in all pregnancies with a minimum of six (6) check-ups for each pregnancy.

Through the prenatal check up, it is possible to find out and to treat some diseases that may harm the mother and the baby. Knowing what a qualified prenatal check-up is, the pregnant woman can fight for her rights and do her part in taking care of herself according to the guidance received.

The pregnant woman is entitled to:

- Receive the Pregnant Card at the beginning of her prenatal check up. The data concerning the pregnancy shall be written down on it;
- Know for how many months she has been pregnant and the probable date of the baby's birth;
- Receive information on how to eat properly;
- Receive information on breastfeeding;
- Receive information on how to take care of her body;
- Be oriented on the vaccine against tetanus;
- Know her current blood pressure and weight;
- Be informed about the dangerous signs in pregnancy;
- To do a gynecological exam: breast exam, vaginal palpation (the "Touch")
- Have her belly measured to follow up the baby's growth;
- Know what the baby's position in her belly is and how the little heart beats;
- Make a blood test for anemia, diabetes, syphilis, hepatitis, AIDS and know her blood type;
- Make a urine test for infections or some other problems;
- Receive iron and folic acid supplementation.



The mother and baby's health depends on a good prenatal check up.

Diseases Prevention during Pregnancy

Prevention is the best way to avoid some diseases that can occur during pregnancy. Since such diseases may not present any signs or symptoms, it is important that the pregnant woman prevents herself from getting such diseases and does the prenatal examination. Some of these diseases are:

Toxoplasmosis

Also known as "Cat's disease", the toxoplasmosis can be transmitted from the mother to the baby during pregnancy.

Besides avoiding contact with the cat's feces, the pregnant women should do the prenatal check up because the test is done to detect if she already has this disease. It is also recommended to wash vegetables and fruits well and to avoid eating raw or not well-cooked meat.

Syphilis

Syphilis is a sexually transmissible disease easy to be treated. But, when it is not treated, it can seriously affect the pregnant woman and the baby. Therefore, the prenatal check up should begin as soon as the woman gets to know she is pregnant.

In case the doctor verifies through the blood test that the pregnant woman has syphilis, her partner should also undergo treatment.

AIDS

AIDS is a disease that attacks the body's defenses. When the disease is detected in the beginning of pregnancy, the treatment is easier and therefore there are good chances for the baby to be born without the virus that cause the disease (HIV). That is the reason that all the pregnant women should take the HIV test during the prenatal check up - to know if they have the virus.

Attention: Women carrying the HIV virus should not breastfeed because the illness could be transmitted to the baby through the maternal milk. The health professional should orient them on how to feed the baby.

Neonatal Tetanus

The neonatal tetanus (eight-day sickness) is an infection that occurs due to the contamination of the navel and can be avoided with a vaccine against tetanus. During the prenatal check up, the pregnant woman shall be informed about this vaccine. Thus apart from protecting herself against this disease, she will also protect the baby's health.

The vaccine doses to be taken by the pregnant woman will depend on her vaccine record, that is, if she has already taken some dosage of such vaccine or not.

Leader, look up the Leader's Orientation chart of vaccines in your country.

Advice against Dangers in Pregnancy



It is common to feel fear and anxiety at some moments during the first trimester of pregnancy. Generally it is from the fourth month of pregnancy onwards that the woman starts to feel more secure and talks about her pregnancy more comfortably.

Some pregnant women, even if they receive treatment, can lose the baby. When this happens, the woman needs to go to the hospital and have a *curettage* done. This is the process of scraping or removing the foetus in the womb. This procedure (curettage) prevents hemorrhage and infection.

The loss of a child in any circumstance always causes much suffering. The support from the family and leader will help the woman to bear the grief caused by the loss of the baby.

Leader, the weight gain starts in the beginning of the pregnancy. If the pregnant woman gains too much weight, she can have diabetes and high blood pressure. These diseases may provoke an premature childbirth or the birth of overweight babies.

If the pregnant woman feels a burning sensation when urinating or abdominal pain (belly pain), she should go to the health center and explain what she's feeling.



urinating

Burning Sensation when
Abdominal Pain



Signs of Danger in the First Quarter of Pregnancy

It is important that the pregnant woman and her family identify the danger signs in the first quarter of pregnancy.



Vomits all she eats or drinks



Bleeding

Instruct the family to take her immediately to the hospital in case she shows any of these danger signs.

Leader's Notebook



1st PART

CHILD AND PREGNANT WOMAN FOLLOW-UP SHEET

Child's name: _____

Pregnant's / mother's name: _____

1. The child was born on: ___/___/___ Weight at birth: _____ grams

2. Was the child born with low weight (less than 2.500 grams)? Yes () No ()

3. How old was the child when he/she began to drink: Water _____ months

Fruit Juice _____ months Tea _____ months

Powdered milk _____ months Kneaded fruit _____ months

Squashed greens/ vegetables _ _ months Rice and beans _____ months

Other types of food _____ months Meat _____ months

4. When the child reached six months of age, was he/she only breastfed?

() Yes () No, she/he also drank water, tea, juice, other milk or other types of food

Year 20_____	Month to which the data refers to								→
5. Child's age (age of the child this month)									
6. Did you visit this child this month?									
Is the child breastfed?									
7. Was the child weighed this month? (note the weight)									
8. Did the child gain weight this month?									
9. Is the child undernourished? (below the -2 curve)									
10. Is the child overweight? (above the +2 curve)									
11. Did the child have diarrhea this month?									
12. Has the child had diarrhea, taken home serum, and has the mother insisted on feeding the child during diarrhea period?									
13. Which opportunities and achievement indicators were reached this month?	1	2	3	4	1	2	3	4	
14. Do the indicators of question 13 denote an unfavourable situation for the child's growth (no indicator was reached)?									
15. Were all the opportunities and achievement indicators reached?									
In case the child has been sick this month, note down the disease									
16. Has the child been taken to the Health Center? (for vaccination, routine check-up or because he/she was sick)									
* 17. Was the child taken to the Health Center attended to?									
18. The children are complete with vaccine for their age?									
19. In which pregnancy month is the pregnant woman?									
20. Did you visit this pregnant woman this month?									
21. Did the pregnant woman go to the Health Center for a Prenatal check up this month?									
*22. Did the pregnant woman go to the Health Center for a Prenatal Check up this month and was she attended to?									
23. Has the pregnant woman had her fundal height measured in the check-up?									
24. Is the pregnant woman's fundal height curve under the 10th percentile?									
25. Is the pregnant woman's fundal height curve above the 90th percentile?									
26. Is the pregnant woman updated with the vaccine against tetanus?									

* Notes: If the child or the mother WAS NOT EXAMINED by the HEALTH SERVICE, fill in the data and the reasons in the 2nd PART of this Notebook.

Indicators of the Pregnant Woman's Accompaniment

The Leaders' Notebook is the material used for recording the data about pregnant women and children under six years old in their community. On this notebook, you, leader, shall record every month the answers of the indicators of the pregnant women and children whom you follow up.

The indicators are important because they warn you about things that must be taken care of. The indicators of Pastoral Care for Children are used to help the leaders, the families and all who work at the Pastoral program to know about the pregnant women's life condition, the children and who among them require special attention.

The indicators from questions 19 to 26 show what the health condition of the pregnant woman is and if she has access to health services.

Leader, when you begin to follow up on a pregnant woman, open the Leader's Notebook on one of the pages with the heading and record her name under the pregnant woman/mother's name. After that answer questions 19 and 20 regarding the month of pregnancy and the visit.

On the Leader's Notebook:

In **question 19** write the month of pregnancy.

In **question 20**, check [**Y**] (Yes) only if:

you have managed to do the activities of the Home Visit box according to the corresponding pregnancy month (page 68, 81 and 92).

Leader, in this Guide, at the end of each pregnancy quarter and of each age stage of the child, there is a box entitled: Home Visit. There is a list of subjects there which need to be discussed and cared for in every visit to the family. This list points out important subjects for a normal pregnancy and for the baby's health and development.

Home Visit

While doing these visits, it is important to:

- Deliver and read with the pregnant woman the Ties of Love Cards according to the guidelines on page 28 of this guide;
- Talk about the important cares during pregnancy, particularly those on pages 38, 45, 46 and 47;
- Talk about the signs of danger on page 64;
- Talk about the prenatal check up.

4th Stage of Training

70

To Evaluate and Celebrate

- How was the visit to the pregnant woman?
- Have you been able to talk to her about what we have seen/learned up to now?
- Is there any doubt that needs to be clarified now?
- Is there any message, prayer, or Bible quotation celebrating the gift of life and the actions we have performed for our neighbours, the pregnant women and to their families? A suggestion is:

*"And then he said to them,
'Anyone who welcomes this little child in my
name welcomes me; and anyone who welcomes me,
welcomes the One who sent me. The least among
you all is the one who is the greatest.'"
Luke 9:48*

To See

The Pregnant Woman in the Fourth, Fifth and Sixth Month of Pregnancy

- What would the pregnant women of your community like to know the most during this stage?
- Do the pregnant women in your community receive the Pregnant Woman's Card after they do the Pre-natal check up?

The Fourth, Fifth and Sixth Months of Pregnancy

Talking About the Baby



The baby moves more in the womb. At the end of the fourth month, s/he is about 10 to 12 centimetres in length and weighs approximately 220 grams.

In the fifth month, the baby sucks the fingers and makes faces. S/he opens and closes the eyes and moves the hands and feet. In this month, the baby grows a lot and may reach the 25 centimetres in length and weigh up to 500 grams.

In the sixth month, the hearing, the smell, the touch and the taste senses develop in the baby. The sight is the last of the senses to develop. The baby already reacts to the external stimulus such as light and music and also perceives the physical noises of the mother such as the beat of her heart.

The baby reacts to other voices besides the voice of the mother. The parents may pray and sing near to the baby. If they have other kids, it is good to encourage them to talk to the little brother/sister and cuddle the belly of the mother. This increases the bond between the family and the baby.

In this **trimester** the pregnant woman feels better and happier because her body is already used to the changes caused by pregnancy.

In this phase it is common **for the pregnant woman to have** the appearance of a dark line under the tummy that goes till the belly bottom. Some dark stains may appear on the face **too**. For these stains not to increase, it is recommended that the pregnant woman protect her face from the sun with a hat, cap or umbrella.

In the fifth month the future mother begins to feel that the movements of the baby are more intense. The baby begins to have longer periods of activity during certain hours of the day and also some periods of rest.





In the sixth month the belly is already quite visible. Every month the weight of the pregnant woman increases a little. If she gains too much, she may have pain on her back, besides having stretch marks on the breasts and the belly. When the stretch marks are itchy it is recommended that she make a paste with starch or cassava flour and a little water and apply it to her belly and breast.

It is advisable that the parents keep on talking to the baby. If this is not the first child, it is also recommended to let the other children get involved in the conversation. Thus, the kids will be able to understand and accept the arrival of the new brother/sister better – and this will help to prevent him/her/them from feeling rejected or abandoned once the baby is born.

During the pregnancy some couples feel their sexual desire increase and some others feel little or no sexual desire at all.

The couple can continue having sexual intercourse. But they should avoid it when the pregnant woman has bleeding, liquid loss or strong pains.

"Let love be without any pretence. Avoid what is evil; stick to what is good. In brotherly love let your feelings of deep affection for one another come to expression and regard others as more important than yourself."

Romans 12: 9-10

Breastfeeding



Leader, keep on talking to the pregnant woman and with her family about breastfeeding. Explain that breastfeeding is the healthiest, cheapest and simplest way to feed the baby.

The breast milk contains everything the baby needs to grow and also the substances (antibodies), which protect him/her from diseases. Feeding the child with cow milk or with canned milk may bring the risk of contamination and of a wrong dosage. This risk, plus the lack of antibodies, may harm the baby's health.

When the baby is only breastfed, s/he has more body defenses against pneumonia, diarrhea and ear pain.

Gases, Bad digestion and Heartburn

This occurs because the uterus grows and pulls back the stomach and the intestine so it makes it difficult to digest food. It is advisable that the pregnant woman pays attention to the food which causes her to have bad digestion in order to avoid it. Besides that, in order to avoid these disorders, it is important to have healthy eating habits with regular meals. Parsley, ginger and anise tea help to reduce gases.

For a good digestion, it is recommended to:

- Give preference to fresher food;
- Eat food rich in fiber: vegetables, fruits, oats, cereals among others;
- Avoid sweets, black tea, coffee, and soft drinks because they provoke gases and heartburn;
- Eat slowly, chewing the food very well;
- Avoid eating fatty foods or very dry food;
- Drink a lot of liquids between meals avoiding the very hot or icy fluids;
- Eat a little amount of food each time;
- Eat every three hours;
- Avoid remaining seated or lying down for too long.



Leader, if the pregnant woman has heartburn, instruct her not to drink cold milk as a medicine and avoid lying down soon after the meals. She also needs to sleep with a higher pillow.

Swollenness, Varicose Veins and Cramps

During pregnancy it is common that the legs get swollen. Some varicose veins may appear in the legs or in the vagina. This happens because the womb weighs more and prevents blood circulation.

To improve blood circulation, it is recommended that the pregnant woman wear loose clothes and eat food with little salt. The discomfort of varicose veins and swollen legs diminish when the pregnant woman walks and whenever she sits or lies down with the legs up. It is advisable to avoid socks, stockings or panties with tight bands and shoes with slippery soles.

Cramps appear when the pregnant woman moves little and when there is a lack of some minerals in her body. In order to reduce the cramps, the pregnant woman can sit down, stretch her legs and pull her toes up with her hands. Giving herself massages and avoiding staying for long periods in the same position also help.



Coconut water, banana, orange and beans help to prevent the cramps.

Hemorrhoids

Hemorrhoids are varicose veins that appear in the lower portion of the rectum or anus. The pregnant woman may also complain about constipation. If the bowels do not work properly every day, the hemorrhoids get worse and may bleed.

For a proper bowel movement, it is recommended to drink a lot of liquids, to take walks and to eat more fiber-rich foods like fruits and vegetables.

Vaginal discharge

The hormones of pregnancy may cause a white discharge. In order to clean this discharge, the pregnant woman needs to wash just the external part locally and dry it very well.

When the pregnant woman complains of a vaginal discharge with itch and odour, she needs to look for a doctor, do the physical tests and receive adequate treatment. Sometimes the doctor also prescribes medicine to the partner. When the treatment is correctly followed, the complaints soon stop.

Swollen Body and High Blood Pressure

If, early in the morning the pregnant woman has a headache or has the face, feet and hands swollen, it is necessary to take her to the Health Center immediately.



High blood pressure, loss of protein through the urine and swollen body are signs of *preeclampsia*. This problem may be solved with more care during pre-natal checkups, rest and medicines. Sometimes it may be necessary to be treated in the hospital.

If the pregnant woman does not receive proper treatment, this can get worse and she can start having convulsions. In this phase we call the disease *eclampsia*, a serious problem that may bring risk to the life of the pregnant woman and of the baby.

Diabetes

Diabetes occurs when there is an increase of sugar in the blood (Glucose). The most common signs are:

- Extreme thirst
- Increase in the amount of urine
- Fatigue, weakness, dizziness
- Blurred vision
- Appetite increase
- Weight loss

In pregnancy two situations may occur regarding diabetes:

- Either the woman already had diabetes when she got pregnant;
- Or it is gestational diabetes, which means that the disease has appeared for the first time during pregnancy.

In these situations more attention is required in the pre-natal check up. Taking care of the food intake and doing physical exercises help to control the disease. Sometimes it is necessary to take medicine.

The treatment for the control of diabetes is made through checkups throughout the pregnancy. After the baby is born, it is necessary to make new checkups to see how the health of the mother is.

*"Son, if you get sick do not overlook it, pray to the Lord and He shall heal you. And seek for the doctor for the Lord also created him. And he shall not go away from you for you are in need of his services."
Sirach 38:9-12*

In the Leaders' Notebook, please note down:

- **Question 21**, check [Y] (yes) if the pregnant woman has been to the Health Center for the prenatal check up;
- **Question 22**, check [Y] (yes) if the pregnant woman has been examined during the prenatal check up;

To answer the following questions, first consult the item, 'pre-natal' in the Leader's Notebook

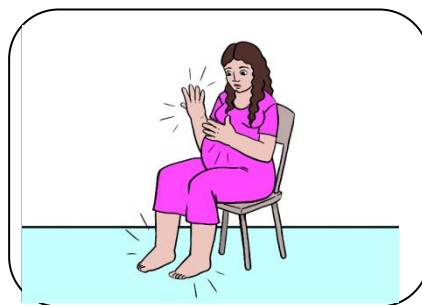
- **Question 23**, check [Y] (yes) if the uterine fundal height of the pregnant woman has been measured during the check up;
- **Question 24**, check [Y] (yes) after verifying on the Pregnant Woman's Card if her uterine fundal height was measured, if the baby is growing *under* what is expected;
- **Question 25**, check [Y] (yes) after verifying on the Pregnant Woman's Card, if her uterine fundal height was measured, if the baby is growing *above* what is expected;
- **Question 26**, after verifying the schedule of vaccination in your locality, write [Y] (yes) if the pregnant woman is up to date with her vaccines.

Signs of danger throughout pregnancy

It is important that the pregnant woman and her family know how to identify the signs of danger throughout pregnancy. Leader, instruct the family to look for a hospital immediately if the pregnant woman shows some of these signs:



She vomist everything she eats or drinks



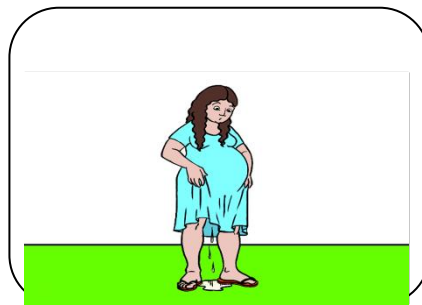
Very swollen arms and legs



High fever and headache



Bleeding



Loss of liquid



Attention: From the seventh month of pregnancy also observe:
If the baby does not move, or if the baby is too agitated.

Prepare an emergency plan together with the pregnant woman and her family in case some signs of danger are noticed:

How to take the pregnant woman with signs of danger to the hospital?
Write down the address and telephone number of the hospital.

Who can accompany the pregnant woman? How can her partner be notified?

Who can take care of the other pregnant woman's children until she can return home?

Home Visit

While doing these visits, it is important to:

- Ask if the pregnant woman has some complaints or concerns in this stage of her pregnancy and how you can help;
- Talk about the signs of danger;
- Deliver and read with the pregnant woman the Ties of Love Cards of her corresponding pregnancy month;
- Answer the Leaders' Notebook questions.

Homework Suggestion for this Training Stage:

Leader, visit a pregnant woman you have registered in your community:

- Ask the pregnant woman if her fundal height has been measured and what the health professional said about the growth of the baby.
- Fill out the emergency plan sheet for the pregnant woman.

5th Training Stage

82

To Evaluate and Celebrate

- How was the visit to the pregnant woman?
- How do you feel about your work in Pastoral Care for Children?
- Share with the group the emergency plan that you have made.

Is there any message, prayer or a Biblical quotation which celebrates the gift of life and the actions we have performed for our neighbours, the pregnant women and their families? A suggestion is:

*"Of all women you are the most blessed,
and blessed is the fruit of your womb."
Luke 1:42*

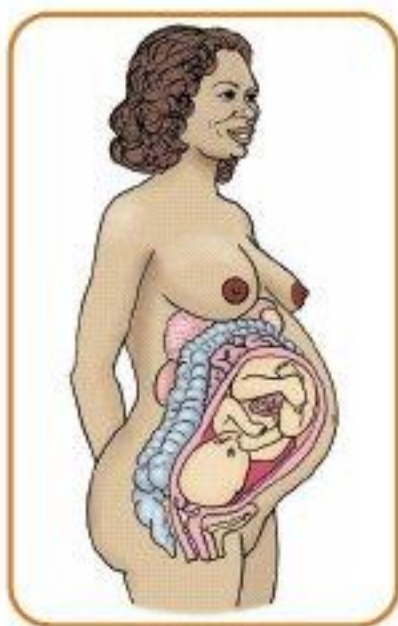
To See

The Seventh, Eighth and Ninth months of Pregnancy, the Labour and the Delivery

- What would the pregnant women of your community like to know about labour and childbirth?
- Does the health system of the municipality ensure a quality-assisted labour for pregnant women?

The Seventh, Eighth and Ninth Months of Pregnancy

Talking about the Baby



In the seventh month of pregnancy, the baby already measures around 40 centimeters and weighs more than a kilo. His/her brain is bigger; he/she feels pain and perceives a strong light when it is close to the mother's belly.

From the eighth month on, the space occupied by the baby is no longer as large as it was before and usually the child begins to position the head upside down preparing for childbirth. Thus, the mother's bladder is pressed down and she has more need to urinate/pee.

In the last month of pregnancy, the baby weighs approximately three kilos and three hundred grams (3.300 g) and his/her size may vary from 48 to 52 centimetres depending on the gender.

It is good that the parents talk to the baby, expressing how they are feeling now that the birth is closer. This will create love bonds with the baby and will strengthen the relationship between the child and the parents after the childbirth.

Leader, in this pregnancy stage, the baby will gain around two kilos; in other words, this is the greatest part of his birth weight. Therefore, it is very important that the mother also gains weight in these pregnancy months.

Talking about the pregnant woman

In this last trimester of pregnancy, the veins in the breasts of the pregnant woman grow thicker. The belly grows bigger, the belly bottom can pop out and the uterus pushes the ribs and squeezes the lungs.

Each pregnant woman has a different kind of belly: this varies according to the woman's body structure, to the weight increase during pregnancy and also to the size of the baby.

In the last three months of pregnancy, the pregnant woman should work less and rest more. If she does hard work and become very tired, the baby may be born ahead of time. Therefore, the pregnant woman needs to have more help from the partner and the family with the housekeeping or with whatever is necessary.



It is good that the pregnant woman sleeps on her left side. Thus the womb weight will not press the main belly veins.



Breastfeeding



The wish to breastfeed is the main factor for a successful breastfeeding. Other factors that influence the pregnant woman are: the mother's effort, the support she receives in the first days right after giving birth and finding the baby's right mouth sucking position on her breast.

The visits of these last months are ideal to explain to the pregnant woman about the baby's right mouth sucking position on her breast and how to extract milk from her breast through the milk extraction procedure. Thus, she gets more prepared and at ease for the first breastfeeding. The baby's right mouth sucking position is explained on page 113 and the milk extraction procedure on page 163.

During the conversations, besides encouraging the pregnant woman to breastfeed her baby, it is also good to know what she feels and thinks about breastfeeding in order to be able to help her according to her needs.

First time mothers may have a fear of not being able to breastfeed. And mothers, who did not have good results in breastfeeding her other previous children, will need support to be able to breastfeed their new baby. A good help is to promote the contact of the pregnant woman with mothers that have already breastfed or who are still breastfeeding.



Task Force to Search for Pregnant Women

Up to now we have seen how important it is to find and follow the pregnant women, as soon as possible, to help them to have a healthy pregnancy and a peaceful delivery.

To help the leaders even more in this task of searching for the pregnant women in their community, the Pastoral Care for Children suggests a task force every three months: February, May, August and November. In these months, the leaders choose one or more days to visit all the community houses to search for new pregnant women, to encourage them to be followed by Pastoral Care for Children and to start the prenatal check up.

If you do not find any pregnant woman in each house that you visit, you still must deliver the card of 1000 days to a person in the house and give orientation about this card for the unknown pregnant woman, who do not live in the Community or is not followed by the Pastoral Care for children.

Even if the mother does not want to be registered at the first visit, give the card of 1000 days and the Ten Commandments to achieve peace in the family.

Patently, commit yourself to continue to visit her and deliver the Cards, month after month, until she gets accustomed to your presence and accepts to be registered and accompanied. Then, celebrate each new pregnant woman conquered!

Attention: If the pregnant woman does not feel the baby moving inside the belly, or if the baby gets very agitated for more than half an hour, go to the hospital immediately.

*"And he said to them, 'Go out to the whole world; proclaim the gospel to all creation'".
Mark 16:15*

The Most Common Complaints

Back Pain and Tiredness

In the last months of pregnancy the woman becomes more tired and has back pain because of the spine position. The pain in the belly's lower part is caused by the baby's weight in the womb. In order to relieve these discomforts, she needs to rest with the legs raised up several times during the day.

Sleeping Difficulties and Anxiety

Sometimes it is difficult for the pregnant woman to find a comfortable body position to sleep because of the belly size. It is good to recommend to her to lie down on her left side and to put pillows as support, under the knees and under the belly, to reduce the discomfort. When the sleep is also disturbed by concerns about the labour, she should breathe slowly and deeply before sleeping. This will help her to relax and improve her sleep.

Leader, you may advise the pregnant woman to talk about her anxieties to her partner, to the family or to you, leader, because this usually helps to diminish her worries.

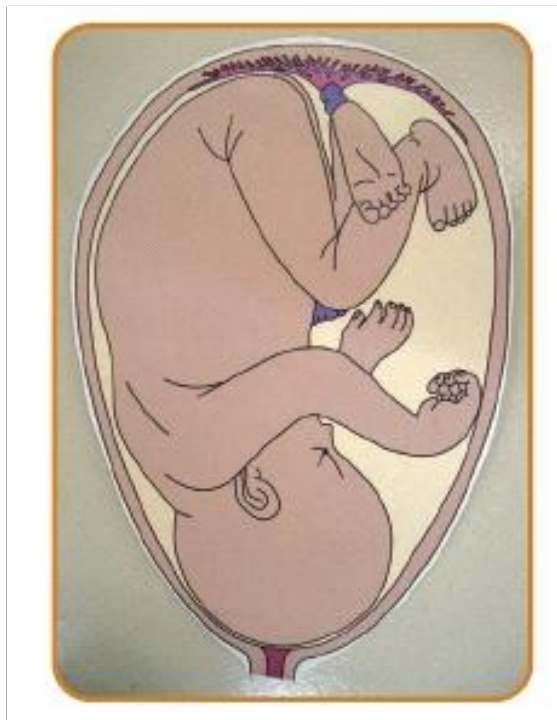
A Swollen Feeling Stomach

A feeling of swollen stomach usually tends to appear after the meals. Leader, in this case, suggest to the pregnant woman not to drink liquids during the meals, to eat little and more often as well as to change the way to prepare the foods, cooking them with more liquid or sauce. Thus, digestion will be easier.

(this note is similar to the one on the previous page.)

Attention: If the pregnant woman does not feel the baby moving inside the belly or if the baby gets very agitated for more than half an hour, go to the hospital immediately.

Delivery Signs



Some weeks before the labour, the pregnant woman's body goes through transformations to get prepared for the delivery:

- The baby gets to the lower part of the mother's belly. This is what causes pressure in the lower part of her abdomen, and sometimes this is followed by back pains;
- The belly becomes hard more often. It is due to the contractions, which until now were weak and with no pain, and are now more intense;
- Vaginal secretions come in larger amounts, sometimes in a pinker colour because of the rupture of some veins. This is caused by the baby who is moving down to the lower part of the abdomen taking the birth position.

Leader, in the last three months of pregnancy, the pregnant woman should avoid heavy work. When she does heavy work and gets very tired, the baby may be born ahead of time. However, doing light work and some exercise helps for the delivery.

Planning the Delivery

Leader, in the visits to the pregnant woman before the delivery, it is advisable that you talk more to her and her family about the arrangements for the day of delivery and about the baby's birth.



You may ask the pregnant woman if she has already a hospital for the delivery. If she lives far from the hospital, you should recommend her to stay in a place closer to it when the delivery date comes closer. If she already has other children, it is important to arrange with a relative or a friend of hers to take care of the other children while she is in hospital.

Also talk about the birth-giving methods. Explain that the best method for the baby to be delivered is the normal way, (through the vagina). When the baby is delivered this way, the baby is more active and wishes to already suck the colostrum (or first milk) in the first hours after the birth (see page 100).

The normal delivery is also the best method for the mother. She feels less pain after the childbirth and recovers faster. Thus she feels more ready to take care of herself and the baby. The Cesarian method, a surgical incision, should be done only if very necessary.



When the time comes to go to the hospital, the pregnant woman shall take with her:

- Her Pregnant Woman's Card or Home Based Mother's Record;
- A personal document – such as an identification (ID), work ID, marriage certificate or birth certificate;
- A bag with her clothes, the baby's diapers and some baby clothes;

The partner, the family members or the friends that live nearby must know about the labour signs (page 93) and where to take the pregnant woman. Thus they will feel safer to go to the hospital at the right time.

The signs announcing the time of delivery may vary from woman to woman and also from one pregnancy to another. In general the labour of a first child is slower than that of a second one.

Make a Delivery Plan for each pregnant woman and her family, according to the instructions on page 92.

Visiting the Health Centers

Leader, visit the health center of your community. Introduce yourself and tell a little about the service that Pastoral Care for Children does to the communities through the volunteers. Try to know and write down the information below to better guide the pregnant women whom you follow up:

- The name, address and telephone of the Health Center

- How is the prenatal check up done? (day/time/the check up procedure; name of the doctor/nurse)

- Where are the blood and urine tests done and collected?

- Is the Pregnant Woman's Card available? Has the fundal height of the woman been measured and written down on the Card?

- Will the doctor, who does the prenatal check up, be the same doctor that assists in the baby's delivery?

- How is the vaccination plan against tetanus performed in the municipality?

According to what has been seen, talk to each pregnant woman about her delivery plan:

- What is the hospital chosen by the pregnant woman to give birth?

- Who shall take the pregnant woman to the hospital when the delivery time gets closer?

- Who shall take care of the other children while the mother is in the hospital?

Home Visit

During the visits, it is very important to:

1. Deliver and read with the pregnant woman the Ties of Love Cards regarding her current month of pregnancy;
2. Ask the pregnant woman if she has any complaint or concern and how you can help her;
3. Talk about the danger signs (page 80);
4. In the 9th month of pregnancy:
 1. talk about the delivery plan;
 2. explain to the family the signs that the delivery is near (page 93);
 3. deliver and also talk about the card "The Baby is Born";
 4. Teach the pregnant woman how to start breastfeeding.
5. Answer the questions of the Leader's Notebook.

The Birth of the Baby

Labour Signs



Some signs indicate the labour is beginning:

- Release of the mucous plug, which is a type of elastic mucous closing the opening of the uterus and protects it against bacteria and fungi. Sometimes, the release of the mucous plug may happen some days before true labour;
 - Feeling of pain that starts in the back and goes towards the lower part of the abdomen;
 - Contractions, that start slowly, the tummy goes rigid for 30 seconds, and then relaxes. These contractions

usually come every thirty minutes.

The family must plan their trip to the hospital according to the distance from their home to the hospital. If it is very close, they can even wait until the contractions occur every 10 minutes.

Attention: In case the pregnant woman does not feel any cramps in the belly but begins to lose big amounts of water – to the point that it runs down her legs – this is a sign that the amniotic sac is broken. Then she has to go immediately to the hospital.

Delivery



The childbirth is the celebration of life and of hope. It is a miracle of God that has taken place.

Everything has to be done so that the birth of the baby is natural, with almost no risk or suffering for the mother and the baby. In a very well assisted labour, the mother and the baby are to be treated with respect, tenderness and attention.

They are to be accommodated in a room with good hygiene conditions and assisted by qualified health providers to prevent or to solve any problems that may arise.

If possible, it is recommended that the father attend the labour and be present soon after it has occurred. This will show his own commitment to the baby and it also helps in the relationship between them.

The presence of a companion or the partner is only not allowed in case of a high risk labour.

Keeping Mother and Baby Together



Right after birth, the baby shall be placed at the breast to suck. Thus, besides that the child receives the colostrum, s/he will also smell, feel the warmth, and listen to the voice of the mother. When doing so, the baby begins to get used, in a milder way, to the life out of the mother's womb.

If the mother and the baby are well, they may be accommodated in a joint room, that is, the baby should be put very close to the mother in the same room.

In the joint room, the baby may be fed whenever he/she needs and will be cuddled by the parents. When the baby is close to the mother, she can always watch whether there is something wrong with the child.

*"A woman in childbirth suffers, because her time has come;
but when she has given birth to the child she forgets the
suffering in her joy that a human being has been born into the world."
John 16:21*

Observing the Newly Born Baby



When the baby is born, the skin is smooth and covered by a layer of fat which protected him/her in the uterus.

Some babies come with thin and long hairs on their back, ears and face. In general they disappear within a week.

The baby may have some small red spots in the nose, which look like small pimples. These spots should never be squeezed because they may get inflamed. They will eventually disappear within one or two months.

The baby's head is proportionally larger than the rest of the body. The reason is that the skull bones are not yet united, so the crown of the baby's head have a diamond- shaped soft spot, which is called fontanel.

Some of the babies may be born with some bones over the others or overlapped. This is normal and it happens to allow the baby's head to move down to the narrow birth canal. It is not necessary to use caps to protect the fontanel. The fontanel closes as the baby grows.



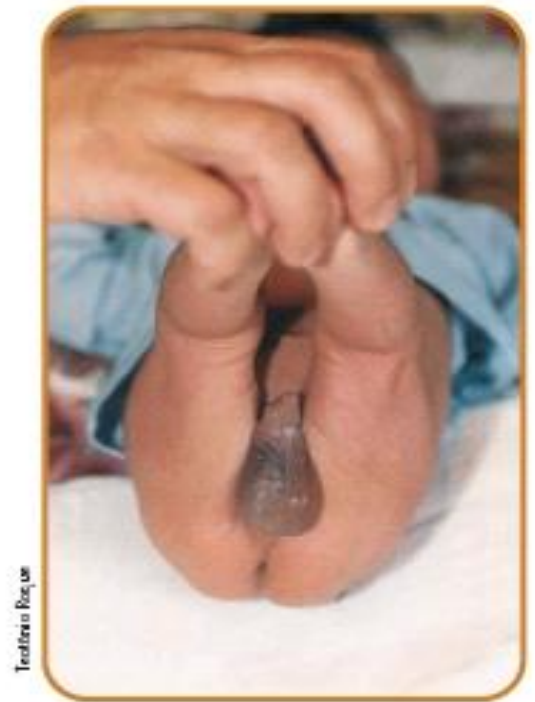
In a normal labour, the baby may be born with some swelling on the scalp. This happens because the baby's head makes pressure to expand the uterus' neck (cervix). In a few days the head recovers its normal shape.

The baby may also be born with the face swollen, with stains or birth signals. Some babies may have a stain on the buttocks, which will also disappear after some time.

Babies, boys or girls, may also be born with the mammary glands (nipples) swollen. This is caused by the transmission of the mother's hormones into the baby's body through the umbilical cord. The mammary glands shall not be squeezed. This may hurt the baby and cause them to be inflamed. This swollenness will soon disappear.

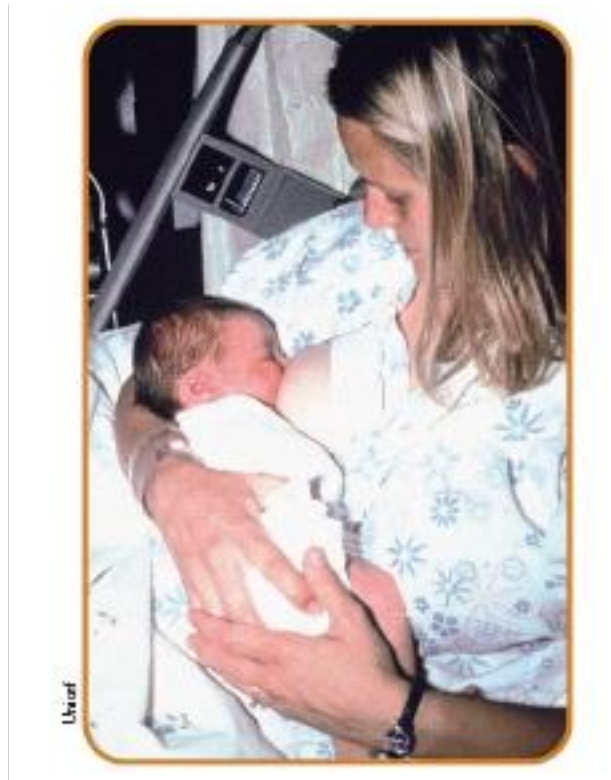
The baby's tummy is high and big. When the baby breathes, the tummy goes up and down. The umbilical cord is thick, whitish and humid. The baby's arms and legs are proportionally short in relation to his / her body.

The boys may be born with the scrotum big and full of liquid which also tend to diminish in the first months. They also may be born with the scrotum withered because the testicles have not yet come down from the abdomen. (Scrotum is the little sack that contains or surrounds the testicles.)



The girls may be born with their external genitals (the long inner lips) swollen and presenting some white discharge or even a dark blood discharge that goes out from the vagina. This is because the mother's hormones passed into the baby's body through the umbilical cord. The mother does not have to worry with that because it will disappear in a few days.

Breastfeeding: Colostrum



When the baby is put to suck at the breast soon after he/ she is born, this is beneficial for him/ her and the mother because the milk comes down earlier and the connection between the child and the mother becomes stronger. When the baby sucks the breast, this helps the placenta to be discharged sooner and the mother consequently loses less blood and her womb returns faster to its normal size. Therefore, breastfeeding is very important for the baby and for the mother.

Breastfeeding is an act that needs to be learnt by the mother and by the baby. That is why it is important that the mother knows she might need help from the health providers to learn how to breastfeed. All efforts to promote breastfeeding is blessed!

Attention: The mother shall breastfeed only her baby. She should never give her baby to another mother to be breastfed. Some diseases may be transmitted to the baby through the mother's milk.



In the first days, the baby sucks the colostrum, which is yellow transparent milk, much thicker, rich in protein and minerals which contains defences against certain diseases. Besides being a health source, the *colostrum* helps in the first faecal excretion of a newborn. This faecal excretion is called *meconium*, and is dark and sticky just like asphalt tar.

Some women, between the second and the fifth day after the delivery, feel their breasts heavier, a little sore and slightly hot. This is normal. It is very important that the mother keeps on breastfeeding, putting the baby in the right mouth sucking position (page 113). Thus the uneasiness disappears faster and breastfeeding occurs normally.

As time goes by, the woman's body itself changes the milk according to the baby's need. The mother's milk will have other nutrients for the baby to grow healthy. Therefore, the maternal milk is always fit for the baby's age.

Low Birth Weight Babies



Some babies may be born weighing less than two and a half kilos (21/2 kg). They need to remain in the hospital for a longer period to receive special care.

Ideally, the mother could stay with the baby during this phase, or that she or the father would visit the child whenever possible.

In those visits, it is important to breastfeed the baby and to have the baby's body close to the mother, so she/he can feel warm as if he/she were still in the mother's womb, receiving the touch on the skin and feeling the smell and the movements of the mother. The father may also hold the baby close to his body to strengthen his connection with the baby and to help the mother.

A low-birth-weight baby should be fed more times per day and also at night. If the child sleeps for 3 hours, he/she should be gently awakened to be breastfed. Doing so will help the baby to gain weight faster.

The Parents have rights and duties related to the birth of the baby. Please check that in the item Rights and Obligations of the Parents in the Leader's Orientation.

The Postnatal Period

The period of recovery after delivery is called puerperium or postnatal period.

The mother can take a shower every day and wash her hair even on the day of delivery itself.

After childbirth the mother will have a vaginal discharge similar to menstruation, which will stop little by little. It is important to be clean or hygienic. If this discharge increases, has bad odour or a secretion with pus, then she has to consult a doctor because this may be a sign of an infection.

In the puerperium the intestines tend to work slower and accumulate gases. The mother should move, be more careful about her food intake and drink a lot of liquids. She should not leave the hospital if she has problems to urinate or defecate.

At the time of being released from the hospital, she should keep in mind or remember the date of the next check up. It is important that the mother returns for this consultation because it is at that time the doctor checks if everything is all right with her health.

All women should take iron supplement during the first month after the delivery. Leader, remind the mother to request the doctor to prescribe iron to her.

Danger signs in the Newborn Baby

Soon after they are born, some babies may show some health problems which, if discovered on time, will save everybody from a great deal of suffering.

Attention: While still at the hospital, the mother should request assistance when the baby shows some of the following signs:

- Refuses eating;
- Does not have faecal excretion;
- If the rectum hole is closed;
- Low body temperature;
- Does not urinate;
- Fever;
- A lot of saliva;
- Purple lips, feet and hands;
- Breathing difficulty;
- Swollen tummy;
- Pale, yellow skin colour (jaundice);
- Not responsive, too weak;

6th Training Stage

To Evaluate and Celebrate

- How was the visit to the Health Center?
- Do you have any doubts about the pre-natal check up?
- How is the delivery plan you made?
- Is there any message, prayer or Biblical quotation that celebrates the gift of life and the actions we have performed for our neighbours, the pregnant women and their families? One suggestion is:

*Sweet is to feel
(song from the film Brother Sun, Sister Moon)*

*Sweet is to feel in my heart that love
humbly is being born.
Sweet is to know that I am not alone.
I am part of an immense life,
that generous shines around me
Immense gift of your endless love.
The Heaven you have given us and the bright stars
Our brother, Sun, our sister, Moon
Our mother earth with fruit, fields, flowers
The fire and the wind, the air, the pure water.
Source of life of your creature,
Immense gift of Your endless love.*

To See

The baby in her/his first week of life

1. Are the mothers of your community willing to breastfeed?
2. How do the families of your community get prepared for the baby's arrival in their home?



The Baby's Arrival to the Community

The mother and the baby go home! May their arrival be celebrated in the family and in the community!

*Oh God, the whole community thank You for the gift of life.
May this child be a symbol of the presence of the Lord our God.*

*May this child grow fed by the maternal milk,
in knowledge and in love of God, and to the neighbour.*

*May his/her parents give him/her the example of faith
and teach him/her the Word of God.*

*May the peace, the good, the love and the tenderness
dwell in his/her heart.*

Amen.

The parents have the responsibility to accept with love the task of taking care and raising their child. And they should do this according to their values, habits and faith.

One of the first demonstrations of faith is to introduce their child to their religious community. In Catholic families, Baptism is the sign of a person's entrance to the community of God's children.

Does the baby have a Birth Certificate?

Leader, ask the family if they have already registered the child’s birth and obtained the Birth Certificate, which is the first document of the child as a citizen. If they still have not done so, encourage the parents or one of the relatives of the family to register the baby as soon as possible.

But for the child to become a citizen, he/she also needs that her/his family, the community where he/she lives and the whole society, to ensure her/his rights.

In accordance with the principles proclaimed in the Magna Carta of the United Nations, it is written in *Article no. 7 of the Convention on the Rights of the Child*: "The child shall be registered immediately after birth and shall have the right from birth to a name, the right to acquire a nationality and, as far as possible, the right to know and be cared for by his or her parents."

Leader, inform the pregnant woman about the importance of the Birth Certificate and remind her that this registration should be done as soon as possible.



Leader, now that the mother and the baby have arrived home, the family may need your help very much. Your presence is very important, for it is at the home visit that you detect whether the mother and the baby are well. And you do this by talking to her, giving support and identifying situations in which you can be of help.

In the first seven days of the baby's life, it is recommended that you visit the family more times than before, mainly if the couple has no close relatives. This period is the most sensitive because diseases may appear very fast and often they may be very serious. Besides that, the mother is still recovering from the labour.

When the baby is the first child, the parents might feel insecure, because they are beginning to learn what it is like to be a father and a mother. But, the couple that already has other children also needs to be given support.

Leader, your support to encourage the mother to breastfeed is precious!



Does somebody help at home so that the mother can take care of the baby?

The mother is more sensitive and needs to be available for the baby at all times. Her mood and her feelings swing: sometimes she is calm and suddenly she becomes nervous; she feels happy and immediately after, she feels sad. She might also become worried because she feels that she is not able to take care of the baby or restless because of the other children, if she already has.

She needs the help and understanding of the partner and of the other people, so she does not get tired and can take care of the baby. If people help her with the housekeeping and taking care of the other children, she gets less tired. Talking to someone about what she is feeling also makes her feel calmer and safer. Single mothers or women without partner need the support from other people even more.

Leader, in these first days, watch for the relationship between the mother and the baby. You can do that by observing how the mother takes care of the baby, how she changes the diapers, how she bathes and feeds the baby.

The mothers who take care of the baby willingly and happily, cuddling and smiling to the child show that the relation is beginning to work all right.

In the first days after the birth, some mothers may become sad and unwilling to take care of the baby for a while.



It is important to gently and tenderly encourage the mother to care for the baby. Talk also to her partner and to the family and motivate them to observe the relationship between the mother and the child. When the mother's sadness does not diminish or worsens, it is necessary to take her to the Health Center for the doctor to check her condition and prescribe her a proper treatment.



The father of the baby may also become more sensitive, anxious and feel abandoned. The reason is that all attention now is given to the baby and to the mother. And he may fear that he does not know how to help to take care of the baby.

Leader, talk to the father and show him that he is important, encouraging him to help with the baby's care. It is good to encourage the mother and the father to talk to each other about their doubts and concerns.

The support from the leader, from friends and the community strengthens the solidarity and helps the parents to create a safe, loving and healthy environment for the baby.

*"No foul word should ever cross your lips; let your words be for the improvement of others, as occasion offers, and do good to your listeners."
Ephesians 4:29*

Breastfeeding



Leader, in these first days, your help is of much value. Encourage the mother by showing her how to breastfeed better. Try to solve with her and the family the difficulties, which may arise.

Breastfeeding must be pleasant to the mother and to the baby. There are several good positions to breastfeed. In one of them:

- The mother holds the baby's buttocks with her hand;
- The baby's head is supported on the folded part of the elbow;
- The baby's tummy is put very close to the mother's body.

Baby's Right Sucking Position

Show the mother what is the right sucking position so the baby sucks well and does not hurt her breast. For this to happen:

- The baby has to be awake;
- The mouth of the baby must grab all the nipple and most part of the areola, which is the dark part around the nipple;
- The lower lip of the child should be turned out;
- The baby's chin should touch the breast.



The baby usually sucks, takes a break and then sucks again. The mother can hear the baby swallowing the milk.

Even when the baby sucks in the right position, the mother can feel some sharp pain in the beginning of breastfeeding; this is because the baby is pulling the nipple.



There is no right time for breastfeeding. Some babies "devour" the milk fast, while others suck it very slowly. The new born babies use to take 15 or 20 minutes to be fed. This time is enough for the baby to receive all nutrients from the milk.

In general babies do not manage to empty both breasts. It is important to let the child empty one breast very well before changing to the other. If the baby does not want to suck, it means he/she is already full.

When you take the baby from the breast, the mother should put the little finger on the corner of the baby's mouth. Doing this makes the baby let go of the nipple without hurting the breast.

After being breastfed, the baby should be put on a standing position on the lap with the back and the head well supported. If the baby swallowed some air he/she will burp. It is not necessary to pat on the baby's back or toss the child in the air.



Leader, teach the mother to start each new breastfeeding session:

- With the breast which the baby has not sucked before; or
- If the baby has sucked both breasts, to begin with the one he/she last sucked.

In order to keep the breast clean for the baby, it is enough that the mother takes a shower every day and changes her bra whenever it is wet.

After breastfeeding, in order to protect the breast, the mother should take one or two drops of her milk and apply on the areolas and on the nipples, then let it dry before getting dressed. The fat of the milk makes a protecting layer against the bacteria and lubricates the skin, protecting the nipples from getting cracked.

The mother's milk must be given whenever the baby asks. This makes the baby put on weight faster.



The baby who is breastfed does not need to take tea or water. Thirst is quenched with the milk alone even in very warm and dry places.

The baby who is not only breastfed is subject to suffer more from infections such as diarrhea and pneumonia.



When the mother says she has not much milk or that she is having difficulties to breastfeed, it is necessary to check what is happening:

- Is the baby put on the right sucking position?
- Is the baby having water, tea or any other type of milk besides the mother's milk?
- Is the baby breastfed whenever he/she asks for it?
- Is the mother going through any difficulty?
- Does her partner encourage and give her support so she can breastfeed?
- Have all other family members, friends and neighbours been helping the mother throughout this stage?

Difficulties may appear, especially when it is the first child and the mother has not had much experience or if the mother has faced problems to breastfeed her other children. These women need more support from the family and from you, leader.

There is no lazy maternal milk. When the mother becomes tired or irritated the milk may diminish a bit. Just tell the mother to drink more liquids, eat well and rest more.

It is recommended to explain to the parents that every baby loses a little weight in the first days of life. Then, through breastfeeding, the baby's weight will increase. The more the baby sucks the more milk the mother produces.

Every baby has his/her own feeding and sleeping rhythm. The parents can identify whether the baby is sucking enough when he/she pees or defecates several times a day. The babies pooh is usually soft, yellow, greenish yellow and in small quantities. And that is not diarrhea.

The father cannot breastfeed but he can give support to the mother. Thus, he strengthens his paternal connection with the baby. He can, for example, bring the baby to be breastfed, put the baby to burp, change the diapers, talk and sing to the baby.

Leader, it is important to be closer to the mother in the beginning of breastfeeding. Follow at least two breastfeeding sessions to see if the baby sucks in the right position and help the mother to be calm in this stage.

*"Blessed the womb that bore you and
the breasts that fed you!"
Luke 11:27*



Some mothers may have difficulties to breastfeed. When this happens, it is necessary to give them more support and guidance.

The breast congestion (hardened breasts) may happen in two situations: when the mother produces more milk than what the baby needs or when the baby does not suck enough amount of milk to empty the breast. This may occur during several days after the labour.

When the breast is hardened, the nipples become hard and full. The milk accumulates and gets thick. This makes it difficult for it to go out and some lumps may appear in the breast.

When the breasts are full, the baby is not able to suck in the right position, causing pain to the mother and irritation to the baby. Therefore it is important that the mother learns to extract the milk from her breasts (milk extraction procedure).

Leader, to prevent breast congestion, it is recommended that the mother:

- Begin breastfeeding as early as possible;
- Breastfeed the baby whenever he/she asks, emptying the breasts as much as possible, one at a time;
- Breastfeed with baby in the right sucking position;
- Do not give other food or liquid to the baby before the six months of age;
- Always wear a bra.

In case the breasts become hardened, you can help the mother to take the milk doing the milk extraction procedure (consult the Guide on page 163).

Leader, if the mother is nervous, find a way to quiet her down in order to help the milk to come down.

Cracked nipples

The cracked nipples are the most common cause of pain in breastfeeding. It happens when the baby is put in the wrong body position and also because of incorrect sucking.



In order to prevent cracked nipples, the mother should:

- Breastfeed with baby in the right sucking position;
- Pass her own milk on the nipples after breastfeeding and have the milk dry well on them before getting dressed;
- Not use any products on her breasts;
- Not leave any wet pad on the breast;
- Not use any nipple protection;
- Before breastfeeding, if the breast is too full, do the milk extraction procedure.

However if the mother still gets cracked nipples despite the cares mentioned above, it is necessary to:

- Put the baby to the breast as soon he/she asks for it, so that the baby does not suck with excessive strength;
- Massage the breast before offering it to the baby to facilitate the milk to come down;
- First offer the breast that is less painful to the baby;
- Change the breastfeeding position as it is shown in the pictures;
- Keep the breast always dry;
- Sunbathe the breast for a period up to 15 minutes daily in the morning or late in the afternoon, if possible.



Mastitis



Mastitis is an inflammation of the breasts that may or may not become an infection. It results from hardened breasts or from cracked nipples. In mastitis, the affected part of the breast gets painful, red and hot. When there is infection, the mother may have high fever (over 38° C) and chills.

Since mastitis is caused by breast congestion or cracked nipples, the main cares are:

- Breastfeed with the baby on the right sucking position;
- If the baby does not empty the breasts, empty the breasts by doing the milk extraction procedure.

When the mother has mastitis, it is advised that she visits the doctor and be guided to follow the correct treatment. If she takes too long to start the treatment, a wound with pus can be formed and then the treatment becomes more complicated.

Since the moment of pregnancy, the way the parents relate to the baby already shapes in him/her the way he/she is going to be. In the last pregnancy months, the baby listens to songs, reacts to strong light close to the mother's belly and may feel when she is very tired or nervous.

Before being born, the contact of the baby with the mother is direct. It is from her that the child receives food, heat and comfort in the womb. When the child is born, all these known sensations disappear rapidly, and the baby will have to get used to a new environment.



Tender look, sweet words, delicate touches and comfort in the arms of the parents makes the baby feel loved and protected.

The baby communicates his/her needs mainly by crying. S/he cries of hunger, of pain, for s/he feels cold or hot, asking for comfort and because s/he is wet. As soon as s/he is taken care of, the baby learns that someone cares for him/her. Little by little the parents learn to identify the baby needs and then can help him/her to develop better.

The baby spends most of the time with the arms and legs folded and the hands closed as s/he used to be in the mother's belly. It is also normal that the baby burps, hiccups, sobs, coughs a little and makes some little noises. These things are part of the baby's life.

The baby moves little and almost always reacts the same way to some stimulus. For example, when we put the finger in his/her hand, he/she grabs it with strength; when the baby is touched, listens to some noise or we take his/her clothes off, he/she makes a movement like she/he is embracing or is startled.



The baby sleeps most of the time. A sleeping baby accumulates the necessary energy to suck and grow. Some babies have a lighter sleep, while others a heavier one. The sleep of the baby that is more tenderly touched by the parents is usually more peaceful.

Hygiene

Hygiene is important because it protects the baby against diseases and makes the baby feel well. The mother's hands or those of whom takes care of the baby should always be clean and the nails cut short.

To facilitate the bath time, it is good to prepare everything before putting the baby in the water. It is necessary to check if the water is not too hot. This is done by putting your elbow in the water and feeling if the water temperature is comfortable. This prevents burns.

The face and the head shall be washed before putting the baby in the water. This prevents that the leftovers of pee and pooh contaminate the water and cause inflammation in the baby's eyes.

The baby needs to be held firmly so as she/he not to feel afraid. In order to facilitate the bathing, it is good to support the baby with one arm and wash him/her with the other.





The skin folds on the neck, the arms and the legs should be rinsed well to avoid rashes. It is advisable to separate a soft tissue or a towel only for the baby. Talc powder does not have to be used because it is not necessary. The baby has to be dressed with comfortable clothes that do not prevent his/her movements.

Each time the diaper gets wet, it needs to be changed. The baby's buttocks should be cleaned, washed and dried well each time the diaper is changed. This prevents rashes and infections.

To clean baby girls, a wet tissue should be passed on the vulva (the external genitals) from the front to the backside. This care avoids that the faeces contaminate the vagina and the small pee hole.

To clean baby boys, it is important to pull back the skin of the penis gently, cleaning well the leftovers of urine and faeces, which might be between the skin folds. This avoids infections.

The umbilical cord usually falls within 14 days from the childbirth. The bandage of the umbilical cord should be changed every day until the belly button falls off. The best product to use is alcohol 70%. This alcohol can be bought at the drugstore or obtained in the Health Center.



In order to make the bandage, it is necessary to dry the belly button well after bathing the baby and pass on a wet plaster dipped in alcohol 70% on it. It is not advisable to put on adhesive plaster, a band made of cloth or a soft belt around the umbilical area. They would prevent the baby from breathing well and the belly button from drying and falling off.

Attention: If after the belly button has fallen off, some bleeding, reddish skin or bad smell appears on that place, it is necessary to take the baby to the doctor immediately.


In some babies, some white spots in the mouth, which look like clotted milk may appear. This can be thrush (candidiasis oral). This can be treated as follows:

- One glass of very clean water;
- One pinch of bicarbonate of soda (baking soda);
- Wet a clean tissue in this liquid and clean the mouth of the baby before breastfeeding;
- Wet the other end of the tissue and clean the nipples and the areola before and after each breastfeeding;
- After the tissue has been used it should be thrown away.


It is recommended to take the baby to the doctor if the white spots in the mouth do not disappear.

Signs of Danger for the baby's Health from Birth until the Second Month of Life


Leader, it is important that the family members know how to identify the signs of danger for the baby's health. Instruct them to watch for them and to go to the hospital if the baby shows any of these signs.




The baby does not grab the breast or cannot suck



The baby is weak, sleepy and cries weakly or moans



High Fever (higher or equal to 38° C)




Low Temperature (lower than or equal to 35° C)




Attacks (convulsions)



Diarrhea



Red belly button or with pus



Many pimple-like appearances (blisters) with pus on the body

Home Visit

In these visits it is important to:

- Ask how the delivery was;
- Deliver, read and talk to the mother about the Ties of Love Cards, according to the guidelines on page 28 of this Guide
- Talk about breastfeeding and observe the baby’s right sucking position (page 113);
- Deliver, read and talk about cards 10, 11, and 12 of the Ties of Love , according to the guidelines on page 29 of this Guide

Leader, in the first visits, you can also ask:

- How the umbilical cord is being cared for;
- If the baby has been weighed in the hospital and, in case he/she has been not weighed, instruct the mother to take the baby to the Health Center to be weighed;
- If the baby has received the vaccine doses appropriate for his age

Register this baby in the Leader’s Notebook on the same page as the mother’s and answer questions 1 and 2, according to the explanations of page 141.

Homework Suggestion for this Training Stage:

- Visit one baby to observe breastfeeding.
- Think about ideas to encourage breastfeeding.

7th Training Stage

To Evaluate and celebrate

- How was the visit to the baby?
- Did you have the chance to observe the baby being breastfed? How was the sucking position of the baby?
- Has the mother told you of any difficulty in this stage?
- Share the ideas you had to encourage breastfeeding.
- Is there any message, prayer or a Biblical quotation which celebrates the gift of life and the actions that we have performed for our neighbours?

To See

The baby in the first month of life

- What do the mothers of your community give the baby to eat in this age?
- To whom do the mothers of your community talk to when they have difficulties to breastfeed?

The Baby's First Month of Life

Breastfeeding



While breastfeeding, is there any eye contact and exchange of tenderness between the mother and the baby?

Breastfeeding is very important to the mother and to the baby. Aside from the baby is receiving food specially made for him, this is the moment they are more connected to each other.

The eye contact and exchange of affection during breastfeeding strengthens the bond between the mother and her baby. In each breastfeeding the baby and the mother get to know and to love each other more. Therefore, it is important that you observe how the mother and the baby are connecting during breastfeeding.

Tell the mother that, when the baby looks at her while sucking, he/she will feel happy if she also looks at him/her. And this is very good for both. Try to encourage the mother to always talk to the baby, caress the baby's body and to look at him/her while she feeds him/her.

Until the sixth month, the baby only needs breastfeeding. It is good to explain to the mother that powdered milk does not have the same advantages as the mother's milk.

The babies who are fed with other types of milk run more risks of having pneumonia, diarrhoea, ear infection, allergy and urinary tract infections. Apart from the fact that babies suffer more from these diseases, they are also more severe for them. This happens because the defences of the baby's body are not strengthened with the protection that the mother's milk provides.

If other food or liquids are offered to the baby before the sixth month of age, this may increase the chances of him/her to abandon the mother's milk. This does not bring any benefit to the child's growth.

When the baby receives liquid or food, a lot of care about hygiene/cleanliness should be taken in its preparation and this should also be with the plates and spoons used to serve the food to the baby.

*"Whatever house you enter, let your first words be,
"Peace to this house!""
(Luke 10: 5)*

How the Baby can Learn and Grow



Every new day the parents and the baby get to know each other better. The baby is very attached to the mother. She is the source of the baby's safety and love. He/she likes to stay in her lap and to be rocked by her. When the mother puts the baby close to her heart he/she listens again to the heart beats that he/she knows so well. Thus, the baby remembers the feelings he/she had while she/he was still in the mother's womb. All this helps the baby to become calmer and safer.

The baby also likes to listen to the voice of the father. When the mother and the father speak or sing sweetly, they show the baby that he/she is loved.



Does the baby calm down when he/she hears the voice of the parents, or when is touched or rocked by them?

Having him in their arms meets the need of contact of the baby with the parents and it is a demonstration of love. If the baby is feeling some discomfort, agitated or crying, he/she gets calmer when the parents hold him close to themselves, speak, sing or rock him/her gently. Each baby has a different way to get soothed.

The cry is a communication means of the baby. To hold the baby and check why he/she does cry does not create a bad habit. The baby, who does not receive attention when he/she cries, usually cries more than usual. The baby who receives prompt attention feels that someone cares for him/her, so s/he remains calm.

The vision and hearing of the baby are still improving but he/she listens to and sees partially what happens around him/her. It is common that a baby may be a squint a bit until the sixth month of age.

Sleeping on their Backs is Safer for Babies

It is possible to reduce more than 70% of sudden deaths of babies. So you need to tell the parents to:

- Put the baby on his/her back for sleeping.
- Breastfeed him until six months of age
- Do not smoke and do not allow smoking inside their house, mainly during pregnancy and in the presence of children
- Do not cover the baby too much
- Leave pillows, toys and other soft objects outside the crib.

The baby needs his/her own place to sleep, preferably calm and ventilated.

If the house is located in a place with mosquitoes, it is recommended that the crib where the baby sleeps is covered with a curtain or a mosquito net.

It is good for the baby to be sunbathed every day before nine o'clock in the morning or after four o'clock in the afternoon. At those hours the sun is a source of health.



The baby needs to take a bath every day. In hot weather places it is possible to give a bath several times a day. In cold weather places, the best time to give a bath is in the warmer hours of the day protecting the baby from the currents of air to avoid her /him to get a cold.

The clothes and diapers of the baby need to be well washed, rinsed and, whenever possible, put under the sun to dry. The better way is to wash them separately. All this helps to prevent rashes, allergies and infections on the baby's skin.

The baby feels colder than the adult. Therefore it is good that he/she is dressed with light clothes in hot weather places. In the cold places it is important to keep the baby well covered.

Attention: If the baby who gets his/her feet, hands and lips purple after being fed, even though he/she is well covered, may have some heart problem and needs to be examined by the doctor as soon as possible.

Pastoral Care for Children is based on the Gospel of multiplication of the loaves and the fish applied to begin and organize the work in the communities.

1. The Gospel of Saint Mark 6: 30-31 tells us that Jesus listened to everything the apostles had done and taught:

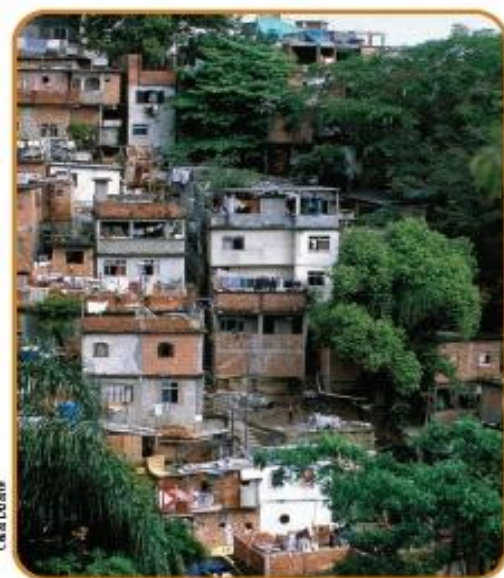
- Leader, how do you feel working in Pastoral Care for Children?

2. In this same Gospel, Jesus proposes to the apostles to rest a little. They left to go to the desert, by themselves. But the crowd remains behind, for they were like sheep without the shepherd:

- Leader, how many children and pregnant women of your community need Pastoral Care for Children?

3. The disciples would have liked Jesus to send away the multitude to seek for shelter and food, but Jesus orders them: "Give them something to eat yourselves."

- How can we face the challenge that Jesus presents to us today by being responsible to bring life in fullness to all the children and pregnant women in our community?



4. Jesus asked the disciples: "How many loaves have you? Go and see". One of Jesus' disciples said: "*Here is a small boy with five barley loaves and two fish; but what are they among so many?*" (John 6:8-9):

- What are the resources we can avail in our communities?
(Health Service, schools, churches, neighbourhood associations, etc.)
- Which people can help us in our mission?
- Is this enough to meet the needs of the people in our community?

5. Jesus then, asked the disciples to organize the people in small groups for the meal:

- And we, how can we organize our community in small family groups for each leader?

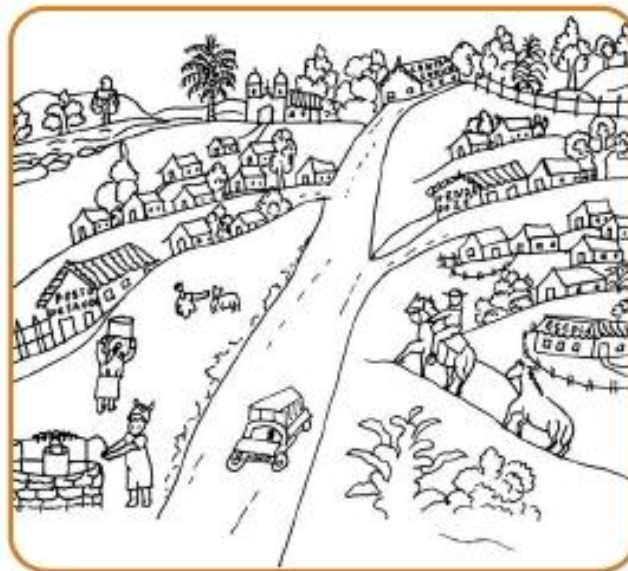
6. Then Jesus took the loaves and the fish, pronounced the blessing, shared the bread and the fish and gave to the disciples to be distributed:

- How do we share our gifts, our time, knowledge, life experience and love with our neighbour?

7. Everybody ate and became full and a lot of the food was still left:

- We believe that the little we have, when shared, with the blessing of Jesus, it becomes a lot.
- How do we know if what we share is helping to seek for life in fullness for the children and the pregnant women?

To organize the families, it is important that the leaders make the mapping of the community; that is, identify who are and where the families with the pregnant women and children up to six years of age are living. After that, it is necessary to organize the families per groups to be assigned to the leader who will follow them up.



When there are many families, it is necessary, at first, to assist those who are most in need. For example: the families who have pregnant women, babies or sick children. After that, the area coordinator, with the assistance of the leaders who are already trained and active, should look for other leaders to be able to follow all the families identified in the community.

*'Which one of you with a hundred sheep, if he lost one, would fail to leave the ninety-nine in the desert and go after the missing one till he found it?
Luke 15:4*

Jesus asked his disciples to see if all the community was fed. It is also necessary to see if all the pregnant women, children and families followed, are managing to improve their life situation. To evaluate the work performed, Pastoral Care for Children uses the indicators of the Leader's Notebook.

It is Jesus' miracle repeating itself today!

Creating a Favourable Environment for Child Development



When we speak of development, we are speaking of changes. These changes become possible through the care, attention, relationships and activities which are provided since the child's conception, and they continue throughout the lifetime of the person.

The adults, in the family and in the community, are responsible for creating a favourable environment for the development of the child; that is, they should provide conditions and opportunities for the child to develop.

Each child develops in his own way. This means each child has his own way of responding to the conditions and to the opportunities he/she receives.

Even the child who is born physically challenged – for example – a child who is deaf – has his/her own way to develop. The leader can help the family to accept and understand that the development of this child will be different, but that he/she has the right, like every child, to the opportunities to learn and develop.

Indicators to follow up the Child

140



In order to develop, a child needs to live in a favourable environment. In order to support building up and organizing this environment, the Pastoral Care for Children has indicators about Health and others which are called Opportunities and Achievement Indicators.

The health indicators refer to breastfeeding, weight, diarrhoea, vaccinations and access to health services.

The indicators of opportunities and achievements are designed to show if the child lives in situations, which promote his/her development in the family and in the community. The opportunities should allow the child to reach achievements -- to learn new skills and develop.

In fact, what makes a child to grow and develop are the care for his/her health, the love, the attention and the participation in the activities with his/her family and in his/her community. Therefore, if we want to follow and promote the child's development, it is important to observe how her/his life conditions are.

Verify in your Leader's Orientation what vaccines the baby should get according to his/her age and encourage the parents to bring the baby to be vaccinated.

Leader, as soon as the baby is born visit him/her and register him in the same follow up sheet where his/her mother's data are registered.

In the heading, on the top of the page, are found the questions number 1, 2, 27, and 28, which you should answer as soon as the baby is registered, when you are starting a new notebook, or when the child leaves the Pastoral.

Questions numbered 5 to 18 are about the child's development, and you are going to answer them every month, according to the age of the child followed.

In the Leader's Notebook:

- In **question 1**, write down the birth date of the child and the weight of the baby when he/she is born. **See** this weight in the Health Card or in the Birth Statement (yellow sheet or any other format to be delivered to the parents by the maternity). In case the child had not been weighed when he/she was born, weigh the child as soon as possible, preferably in the first week of life. In case the baby is older and you do not know which was his/her weight when he/she was born, write down **[?]** (question mark).
- In **question 2**, write a **[Y]** (yes) if the child was born with a low birth weight; **[N]** (no) if the child was born with an adequate or with the right weight.

Indicators of Opportunities and Achievements



The first indicator of opportunities and achievements appears on page 107 of this guide. Those indicators are organized in eight age ranges, which start in the baby's first month of life and continue till the child reaches six years old. In each age range there are four indicators.

Those indicators are designed to value and stimulate attitudes in the family and in the community to promote the development of the child. They do not serve to evaluate the child's development. They are, especially, a reason to talk with the family, a way to start and keep a dialogue. Through these indicators, you, leader, should converse and think together with the parents which family usual daily situations may become the opportunities that the child needs and what are the things that favour his/her development.

Leader, talk to and ask the child's family who completes this month:

1 month

- Does the baby have a birth certificate? (page 107)
- Does anyone help with the housekeeping so the mother can take care of the baby? (page 109)
- While breastfeeding, is there any eye contact and exchange of tenderness between the mother and the baby? (page 130)
- Does the baby calm down when he/she hears the parents' voice, when is touched or is rocked by them? (page 133)

2 and 3 months

6. When the mother or the father smiles to the baby, does he/she respond with another smile? (page 150)
7. When the mother or the father moves the face slowly before the baby, does he/she follow this movement? (page 151)
8. When the parents lay the baby on his tummy, does he/she raise the head and the shoulders, supporting him/herself on his/her arms? (page 152)
9. Do the parents take the baby in their lap to caress, speak and play, even when the baby is not crying? (page 153)

4 and 5 months

- Does the baby show he/she identifies the people who are always with him/her? (page 166)
- When someone makes noise behind the baby, does he/she turn the head around searching for the noise? (page 167)
- Do the parents encourage the baby to try to catch the things that are put close to him/her? (page 168)
- When someone puts the baby to sit with support, can he/she stay in that position? (page 169)

6 to 8 months

- Do the parents or who always take care of the baby give opportunity for him/her to relate to other people? (page 188)
- Do the family members encourage the baby to play with objects? (page 189)
- Does the baby catch objects and play with them beating, throwing and tearing them? (page 190)
- Do the family members communicate with the baby in several ways, using sounds, gestures, words? (page 191)

9 to 11 months

- Does the baby use gestures to communicate: pointing, clapping hands and giving good-bye? (page 202)
- Do the family members say the objects' name and speak about the activities they do with the baby? (page 203)
- Do the family members arrange space for the baby to learn to move on his own? (page 204)
- Does the baby walk with support? (page 205)

1 year to 1 year and 11 months old (12 months to 23 months)

- Do the family members speak and talk to the child? (page 217)
- Does the child understand when the people ask something to him/her? (page 218)
- Does the child communicate using small phrases? (page 223)
- Does the child have a safe space to walk, run and play? (page 226)

2 years to 3 years and 11 months old (24 months to 47 months)

- Do the family members encourage the child to play and do they play with him/her? (page 235)
- Do the family members teach, with no violence, what the child cannot do? (page 239)
- Does the child play make believe? (page 244)
- Does the child have the opportunity to play with other children? (page 246)

4 years to 5 years and 11 months old (48 months to 71 months)

Do the family members have the opportunity to read to the child? (page 257)

Do the family members give value and encourage the child to draw? (page 258)

Do the family members show or invite the child to participate in their activities? (page 259)

Does the child attend kindergarten? (page 262)

In the Leader's Notebook there is the following question:

13. Which indicators of opportunities and achievements were reached this month?

1	2	3	4

Question no. 13 is answered with the help of the indicators that are written on the edge of the cover of the Leader's Notebook as well as in this Guide. According to the age of the child, talk about the indicators to the mother or to the one who takes care of him/her. In each of the squares of question 13, check:

- [Y] (yes) if the indicator was achieved;
- [N] (no) if the indicator was not achieved;
- [?] (question mark) if you had doubt or were not able to observe the indicator.

If there is any difference between your observation and the answer of the mother or of the person who takes care of the baby, check [?] (question mark).

In the answers to the Indicators of Opportunities and Achievements, it is necessary to take into consideration that each family has its own way of taking care and raising the children, and each child has his/her own way and time to develop.



When the answer to an indicator is [N] (no), it is always necessary to investigate.

The answer may indicate, for example, that it is necessary to create the opportunities described in the indicators, and these are still not part of the family's custom yet. For example, in the case of a six-month-old baby, when the indicator was not reached, "Do the people of the family encourage the baby to play with objects?" You, leader, by talking to the parents, can investigate to know what is happening and then think about a way to help them.



Does the family have any objects for the baby to play with? Does the family know that it is important to offer objects to the baby?

When the opportunities exist, the majority of children reach the achievements pointed out in the indicators at the end of each age range.

The answer [N] (no) to an indicator referring to an opportunity and achievement may mean, at the same time, that the child has not had the opportunity or that the child is still achieving the skill. That is the case, for example, of the indicator: "When someone puts the baby to sit with support, can the baby remain in this position"?



Another situation is when the child has a different way to manifest his/her achievements like in the case of a physically challenged child, for example, the case of a child who is deaf. In this case, the response to the indicators related directly to the hearing would be [N] (no). One explanation for cases such as this can be seen on page 265.

Much attention is needed when one indicator has not been attained at the end of the age range; it means that it continues to have the answer [N] (no). In this case, it is necessary to watch the child and guide the parents in the following months. It is also important that you, leader, check with the area coordinator what else can be done.

The purpose of the indicators is to show the leader when the family needs more assistance.

End of Recovery Period (Puerperium)

The mother should go back to the hospital to have a check up; according to the appointment made on the date she left the hospital.

This check up should take place one month after the childbirth. It is good that the partner accompanies the mother. Thus they both can receive guidance about the time span between pregnancies.

The postnatal period lasts for forty days. When the wife is well, the couple can have sexual intercourse again soon after this period.

The doctor should prescribe Iron for the mother to take until the child reaches 3 months.

In the Leader's Notebook:

- In **question 5**, the age of the child can be written down in months or years.
- In **question 6**, check [**Y**] (yes) if these three situations occur at the same time:
 - You already went to the child's home;
 - You saw the child, even if he/she was sleeping;
 - You talked, during the visit, to the mother or with the child's caregiver, about the topics of the box "Home Visit".
- In the following question – **is the child breastfed?** Write down if the child is breastfed.

Home Visit

In these visits, it is important to:

- Observe if the baby is being breastfed and if he/she is put in the right sucking position (see page 113);
- Insist with the mother about breastfeeding as the only feeding for the baby;
- Observe and talk to the father and the mother about the indicators of Opportunities and Achievements;
- Deliver, read and talk with the mother about cards no. 13 & 14 of the Ties of Love, according to the guidelines on page 29 of this guide;
- *Answer the questions of the Leaders' Notebook.*

Homework Suggestion for this Training Stage:

- Organize a mapping (map) of the community.
- Try to identify where the pregnant women are and, at least, three babies younger than one year old.

The Baby's Second and Third Months of Life

Breastfeeding



Leader, in the conversations with the mothers and other family members, explain that the mother's milk continues to be the only food that the baby needs. Tell that it is common that the baby of this age does not defecate for one or two days.

The mother who breastfeeds should not smoke, drink alcoholic beverages or take other drugs. Medicines should only be used with medical prescription. Some cigarettes, alcoholic beverages and medicine substances go to the milk and can harm the baby. Thus, the mother who breastfeeds, needs to be more careful, for her own sake, for her baby's and also for the other family members' good.

When the mother has more milk than her baby can drink, she can donate that milk to a hospital that has a Milk Bank. This milk will then be pasteurised and given to a baby who is in need of it.

Leader, verify if in the hospital of your municipality there is a Milk Bank and encourage the donation. Donating maternal milk is an act of love!



When the mother or the father smiles to the baby, does the baby respond to them with another smile?

Each baby has his/her own way of communicating with people.

When he/she is hungry or wants to change the position, he/she can cry, get agitated or pull in the legs; when he/she feels well, he/she can smile or move the arms and legs with happiness.

A baby that responds to the smile of the mother or the father shows the good relation he/she has with them and how much of the adults' attention is important for him/her. What the baby likes and needs most is to stay with the mother or the one who always takes care of him/her, because of the trust bond which is established between them. If the father always stays with the baby, this bond will also be established.

When the baby is awake, he/she gets calm and happy if the mother or the father is close to him/her. When they work at home, the parents can put the baby close to them to talk or sing to him/her. Thus, he/she gets encouraged to make sounds like: "arg, arg, arg" or "grr, grr, grr".



When the mother or the father moves the face slowly before the child, does he/she follow this movement?

The baby likes to touch and play with the people's face and the hands. He already puts some effort in driving his/her attention and following with the eyes the movement of the parents.

The baby likes to look, to touch and to play with his/her small hands that at this stage remain open at longer periods of time. He/she can see and catch things that are put close to his/her hand like baby rattles and other colourful objects. He/she puts everything he/she grabs in the mouth, because the mouth for the baby is a source of pleasure and learning.

Attention: The family needs to be careful of not letting tissues or plastic stay close to the baby because he/she can get suffocated. Strings and cords close to the crib or the baby pacifier's cord around the baby's neck is also very dangerous for the baby may strangle himself/herself.



When the parents put the baby on his/her tummy, does he/she raise the head and the shoulders supported by his/her arms?

The baby needs to feel very comfortable to learn how to control the movements of his/her body. He/she still needs help to change body position: to turn to his/her side, to lie on his/her tummy or to lie back. Thus, he/she can see different things around him/her, so that every time he/she can have better movement of his/her head and increase the strength of his/her arms.

The majority of the babies still sleep a lot. But each baby has his/her own sleeping patterns; some are more sleepyheads than others.



Do the parents hold the baby in their lap to caress, talk and play, even when the baby is not crying?

The baby likes and needs the tenderness of a lap. He/she likes to be touched, kissed, to hear the parents talking and singing in a low voice to him. The baby should be held not only when he/she cries because then he/she will learn that only in crying can he/she have attention from the parents. Babies are smart and learn very fast.

It is important to continue sunbathing the baby without clothes. This helps to ventilate the skin and stimulate the absorption of Vitamin D. This vitamin helps to form bones and strong muscles, preventing the rachitis/rickets (inflammation of the spine) in the baby.

Attention: Small children should not hold alone the babies on their lap because they can harm him/her or let him/her fall down.

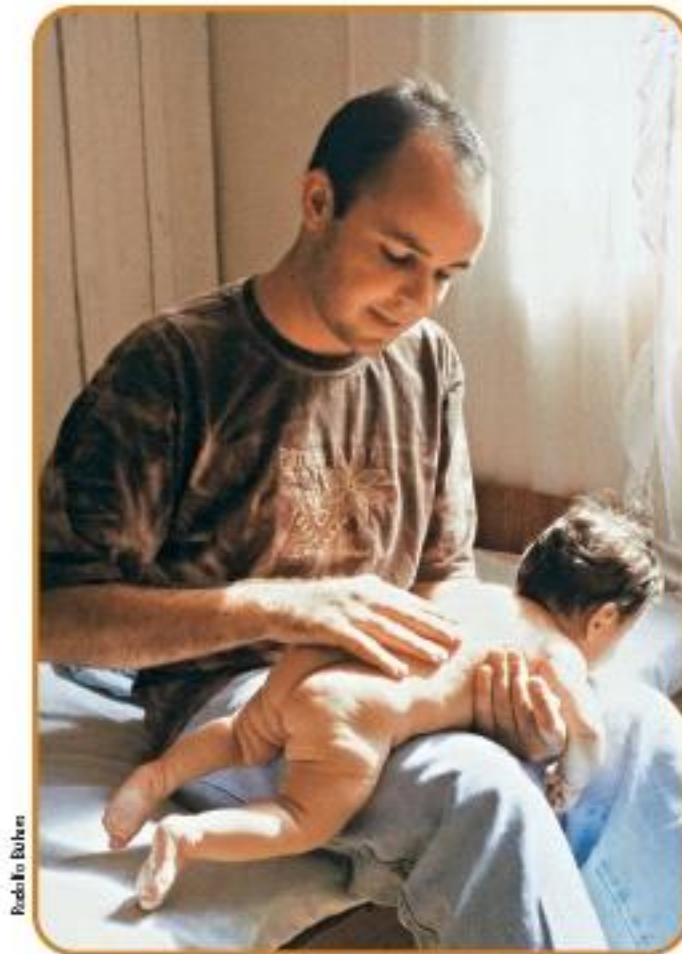
Touching the Baby's Body



A gentle and rhythmic massage in all baby's body provides him/her well-being, activates the blood circulation and helps him/her to perceive his/her own body. It is also another way to strengthen the bond between the baby and his/her parents.

They should massage:

- The tummy, in circular movements;
- The arms, starting from the shoulder towards the hand;
- The legs, starting from the thigh towards the foot;
- The back, up and down, from the neck towards the baby's legs.



It is necessary to observe if the baby is enjoying the massage, for in some moments he/she wants to be left alone.

The massage can be given before the bath or when the mother or father have available time and are calm to be able to enjoy this moment with the baby. It can be made in the open air provided that the temperature is pleasant and that there is no wind because the baby has to be naked.

*Upon you I was thrust from the womb;
since birth you are my God.
(Psalm 22:11)*

Pneumonia



Pneumonia is a serious respiratory tract infection. If the child does not receive the correct treatment on time he/she can die.

Pneumonia is more dangerous in babies:

- younger than 2 months;
- who were born underweight;
- who are not breastfed;
- who are malnourished;
- who are not up to date with their vaccines.

Some environment conditions make the air polluted and this facilitates catching this type of disease. There are houses in which the sun does not enter, where the air is not refreshed, where there is dust and smoke of cigarettes, where the stove is with wood or where there are cars or factory pollution or burning woods.

The habit of smoking near the child increases the chances of him or her having breathing problems such bronchitis, ear inflammation, sinusitis, asthma and pneumonia.



Here are some signs to watch out for:

- a difficulty to breathe;
- strange noise when he/she breathes (stridor)
- the ribs are visible when he/she inhales (subcostal indrawing)

Leader, when the baby shows some signs of respiratory tract infection, you have to instruct the mother to:

- Take the child to the doctor as soon as possible;
- Continue to breastfeed the child;
- Give the medications following carefully the schedule, length of time and doses prescribed by the doctor;
- Go back to the health center on the scheduled date or at any time, if the baby does not show any improvement or gets worse.

If you observe some signs of danger in the children you follow up, see that they go immediately to the hospital.

The Acute Respiratory Tract Infection (ARTI) is one of the main health problems among children younger than five years old. Recognizing the signs of danger and beginning the treatment soon can help to reduce the seriousness of the disease and can avoid death from pneumonia.

Therefore, the recommendation of WHO - World Health Organization – is that the child receives the first dose of the medication when s/he is still in the health service unit.

Attention: Any medication should only be given to the baby upon the doctor's prescription.

Hygiene

158



The daily bath protects the baby's skin from rashes that may infect and cause other diseases.

In order to prevent rashes, the mother can make a homemade paste with a little cold water mixed with cornstarch or cassava flour. This paste should be applied after the bath and every time diapers are changed, on the baby's buttocks which should be dry.

It is important that the parents begin to keep clean the baby's mouth even before the first tooth appears. This cleaning is made with a clean wet tissue that is rubbed on the gums, inside cheeks and tongue of the baby after every breastfeeding. The tissue should be used only for this purpose and should be kept clean.

Leader, check in the Leader's Orientation how to accompany the growth of the children in your community.

Signs of Danger for the Health of Children from the Second Month of Life to Five Years of Age

Leader, it is important that the family members know how to identify the signs of danger. Instruct them to be watchful and to go to the hospital immediately if the baby shows any of these signs:



the baby does not suck, drink or does not eat .



The baby is weak, cries a lot or with too much moaning



"Attacks" (convulsions)



*Great loss weight
paleness, legs swollen*



*She/he has difficulty breathing:
A strange sound is heard when s/he breathes (stridor) the ribs are visible when she inhales (subcoastal in drawing)*



The child vomits everything



*If he has diarrhea and is dehydrated:
-Test of the clip
-Sunken eyes*

The children need vaccines to be protected against some diseases. Therefore, leader, it is important that you encourage and instruct the mothers to get their children vaccinated. The vaccines also contribute to the decrease of infant's mortality.

The vaccination schedules may have small differences among the municipalities. It is good that the leader goes to the health center and gets informed about the schedule for children vaccination.

Home Visit

In those visits it is important to:

- Talk about breastfeeding/feeding;
- Talk about the vaccines appropriate for the age of the kids;
- When the baby completes three months, deliver, read and talk about card no. 15 of the Ties of Love according to the guidelines on page 29 of this guide.

Answer the questions of the Leaders' Notebook.

Homework Suggestion for this Training Stage

- Visit the children already registered and pay special attention to the indicators of opportunities and achievements.

Four to Five Months Old Baby

Breastfeeding



The mother's milk continues to be the best and the only necessary food for the baby. In the first six exclusive breastfeeding months, it is normal that the baby may be a bit chubby. Close to the four and five months, the tendency is for the baby to continue to gain weight, now more slowly. But the gain of health and love that breastfeeding brings continue to increase more each time!

The mother's milk is so appropriate for the baby that around the fifth month, it gets less sweet so that in the sixth month new food can be introduced for the baby's needs.

When the mothers have a job out of home, they should continue to breastfeed. While the mother is out, the person that takes care of the baby can give the mother's milk taken from the mother through milk extraction procedure. When the mother returns home, she can offer the breast to the baby.

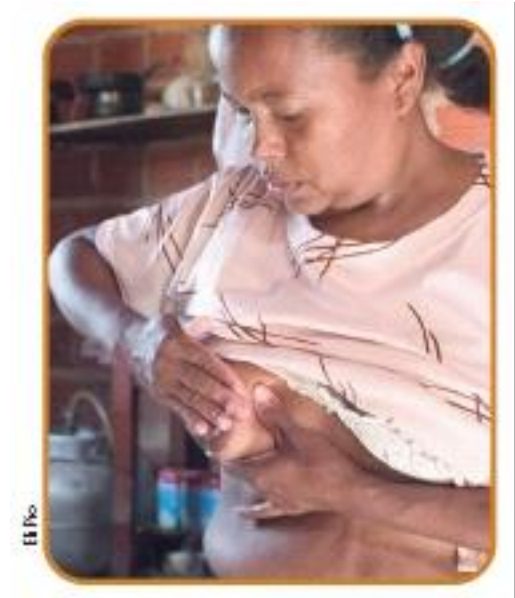
Milk Extraction Procedure

Before doing the milk extraction procedure, to keep its quality, some advice is to be followed:

- Wash and dry the hands with a clean tissue very well;
- Select a clean and boiled water container;
- Find a comfortable position and, if possible, in a quiet environment.

To extract the milk from the breast:

- Make a circular massage with the finger tips on the base of the breast towards the nipple;
- Put the thumb on the breast, above the areola, and the other fingers in the lower part of the breast, making a shell with the hand;
- Make the milking movement, gently squeezing in and out the breast rhythmically;
- Discard the first milk flushes because they may have bacteria located in the closer part of the breast's nipple. These germs can spoil the milk when it is stored but they do not harm the health of the baby when the mother breastfeed him/her directly.



When the mother returns home, she should offer the breast to the baby. After that, she can extract the milk to be used the following day. The amount and the appearance of the milk vary from one milk extraction procedure to the other.



- Repeat rhythmically the movement of milk extraction, turning the hand around the areola to empty all the milk from the breast.
- Alternate the breasts when the amount of milk diminishes or every five minutes, repeating the massage and the milking procedure till it reaches the expected amount of milk;
- After the milking procedure is done, apply a little milk on the nipples to avoid cracks.

How to store breast milk:

- Soon after the milking procedure, the breast milk needs to be cooled. The container with the milk should be covered and put in icy water for two minutes. Then the milk should be stored in one of the fridge shelves (never in the fridge door). It should be consumed within 24 hours;
- When offering the milk to the baby, use first the one that you milked first. To heat it, put the glass of milk inside a pot with warm or hot water (steam). This milk should be served to the baby with a spoon or straight from a glass.

When the mother is at home, it is necessary that she often offers the breast to the child. Thus she stimulates the production of more milk and extends the breastfeeding period. The use of the milk bottle, instead, encourages the baby to quit breastfeeding.

The person who takes care of the baby needs to serve this milk with a spoon or from a small glass. The baby gets easily used to the nipple from the milk bottle and this makes him/her thereafter refuse breastfeeding.

When the baby does not gain weight from one month to the other, talk to the mother to know what is happening. Maybe the baby is eating little, or the mother is tired or she is not eating

properly. In case the mother has already gone back to work, talk also to whoever is taking care of the baby.



When there is not enough milk from the mother, it is rather preferable to introduce baby foods, as early as the fifth month, than the milk bottle. Thus, beside breastfeeding, some food can be served with a spoon to the baby avoiding the competition with the nipple of the milk bottle.

How the baby can learn and grow



Does the baby show that he/she identifies the people who are always with him/her?

The baby begins to realize he/she has a name and shows this when he/she looks at the person who calls him/her. He/she already recognizes better the other family members and enjoys staying with them. The baby smiles, waves the arms around and moves the body in front of people. He/she likes to hold their hands and touch their faces. The intimate contact with the grandparents, uncles and the older siblings also helps the baby's development.

When put near strange people, the baby can become very shy, suspicious and can even cry. This shows that he/she already distinguishes who is not known to him/her or those people that are not always with him/her.

The baby reacts when separated from the mother, and usually cries when is left alone. The parents and the family members can find ways to do the housekeeping leaving the baby, whenever possible, close to them.



When someone makes noises behind the baby does he/she turn the head searching for the noise?

The parents and the family members can create several opportunities for the baby to hear and identify sounds. And they do so when they pay attention and repeat the sounds the baby does and when they put things with different sounds close to him/her. The baby grabs them, plays, shakes them, beats one object against the other and then hears the noise it makes.

The baby already has other ways to communicate. Before, he/she would only make sounds with the throat; now he/she makes sounds with his/her lips. He/she squeaks and says "m, m, mum; "p, p, pa, pa". He/she likes repeating and hearing his/her own voice. When the baby acts like that, he/she shows that is decided to learn to speak. If the family members repeat the sounds he/she makes, then they are helping the baby to learn to speak.

*"What I speak of is what I have seen at my Father's side, and you too put into action the lessons you have learnt from your father."
(John 8:38)*



Do the parents encourage the baby to try to catch the things they put close to him/her?

At this age the baby can start to be interested in objects. But, for this to happen, he/she needs help from the people around him/her. It is necessary that they put several objects close to the baby, encouraging him to pay attention to them.

Doing so, the people also help the baby to coordinate his/her movements with his/her senses, such as the sight, hearing and touch. He/she looks at them, puts them in the mouth, bites, licks and shakes them. This makes the baby feel how things feel like: hard, soft, light, heavy, rough and smooth.



When someone puts the baby to sit, with support, can the baby remain in this position?

The baby has to be put in the sitting position, with support, so as not to fall forward or sideways. Thus, he/she learns how to sit alone. This new position helps the baby to see and catch more things and get ready to stand up.

At this age it is necessary to put the baby on the floor, making sure it is clean, so that the child can move more. Thus he/she can learn to turn around and roll to both sides without the danger of falling.

Attention: The baby cannot be left alone in places where he can roll and fall. It is also necessary that dangerous things be not left close to him/her, such as plastic bags, for he/she may choke and get suffocated with them.



The baby enjoys bathing time more and more. He/she likes feeling the warm water on his/her skin, to play beating the feet and the hands against the water, and the sensation of wellness that being clean brings.

Each family has a way to take care of their babies, but it is necessary to follow a daily schedule with a fixed time for bathing, for feeding, for sleeping and also for playing. He/she can become nervous and insecure when there is a lot of change in his/her daily routine.

Before the first teeth appear, the gums become swollen and painful. Therefore, the baby may become irritated and restless. It is good to continue cleaning the baby's mouth. This cleaning is made with a clean wet tissue, after the baby has been fed, particularly after the last breastfeeding at night.

The appearance of the first teeth varies from child to child; there are children who are born with teeth and others who complete one year without teeth. In general the first tooth appears when the child is six months.



If the baby is already eating baby foods, it is recommended that they are not sweetened. The baby food should not be blown to cool it off or be fed with the same spoon that the adult is using to eat. This can transmit bacteria from the adult's mouth to the baby's. When the baby pacifier falls on the floor, some people usually put it in their mouth and return it to the baby; this can also transmit tooth decay to the baby – besides the fact that the dirt, which was on the baby pacifier, can contaminate the adult also.

Check if the Health Center of your municipality provides dentists for babies. If it does, encourage the parents to take the baby for a check up.

*"The Almighty gave to the men the science so that
they could praise Him for His wonders."
(Sirach 38: 6)*

Celebration of Life



The Celebration of Life is another important activity that you, leader, performs in Pastoral Care for Children.

On this day, that takes place once a month, the children are weighed, the families gather to celebrate the children's good health condition and to help each other when they are facing difficulties.

The chosen place for this celebration should be close to where the families live. It is recommended that the groups may not be very big so that the families can feel warmly welcomed, feel comfortable and have the opportunity to speak and the children can have some space to play.

The Celebration of Life is a living faith witness. It shows the solidarity and participation of a community in their common search for their citizenship rights. That is why this is a day blessed by God.



Leader, why do we to gather the families in the community?

It is the family that fulfils, in the first years of life of the children, their needs for health, food, play, communication, security and learning. It is also in the family where the children will begin to conquer his/her autonomy. Therefore the family needs to be valued in their possibilities to discuss, reflect and define their way to raise and educate their children.

When the families are gathered to celebrate life, they also celebrate their achievements with their children and they can notice that some difficulties are common and can be shared with the others. The parents of malnourished, obese, sick children or of those who are not finding the opportunities to develop will realize that they are not alone and that together they may find ways to face such difficulties.



When you, leader, observe that there is a child that shows some problem in relation to the indicators described in the Leader's Notebook, talk to the family during the home visit to see what they are doing or can do to improve the situation.

Even though we know that the parents want the best for their children, sometimes the problem continues and they may think that the child is in that situation because they do not know how to take care of him/her.

What to do?

In the talk with the families, it is better not to cite, for example, the name of the malnourished or obese children, but try to find out the causes and what can be done to solve the problem.

During the Celebration of Life, when the families gather, it is a good moment to talk about difficult situations; in this way, there may be a lot of ideas and suggestions and contributions to help the families that have difficulties.

In the conversation with the gathered families, it is better not to mention, for example, the name of the malnourished or obese children, or those who have no achievements as referred in the indicators; instead try to find out the causes and what can be done to solve the problem.



The Celebration of Life needs to be planned with a lot of love. It is advisable to count on the help of other leaders, of people from the families such as the mothers, the fathers and the grandparents from the community, so that together they can organize this day and can prepare:

- A warm welcome to the children and their families;
- A joyful spiritual moment that delights the children;
- A delicious snack enriched with regional food;
- A place with toys and games for the children;
- A person to play with the children, so the leaders can talk better with the parents.

The conversation with the mothers, fathers and family members is a good opportunity for creating a favorable environment for the development of the children. But to converse with the parents means to establish a real dialogue. This dialogue needs that you, leaders, have an open attitude towards people to perceive what they say and to respond to them. This way you will be facilitating parents and relatives to feel supported and strengthened.

After the activities of the Celebration of Life are over, it is important to gather the leaders to evaluate the result of that activity, observing if something lacked, what went all right and what can be improved on the next celebration.



Besides the Celebration of Life, it is necessary to find other occasions to talk to the parents. In these dialogues, the parents can exchange information about health, education and other situations that affect family life in the community.

They can see that some problems affect everybody and that they can be solved if taken to the local authorities. For example: the lack of day care centers, basic sanitation and health services, etc.

When the families get together to talk, everybody has more condition to discuss the problems, find out solutions, verify what are the people's duties and plan actions to be taken in order to ensure the children and the family rights. Informed and organized families know what their duties are and have more power to claim their rights!

*"These remained faithful to the teaching of the apostles,
to the brotherhood, to the breaking of bread and to the prayers."
Acts 2: 42*

The Six to Eight Months Old Baby

Breastfeeding and Beginning of Regular Feeding



During the first six months, the mother's milk is everything the baby needs to be nourished. After this age it is necessary to breastfeed and also to give the baby other baby foods. Little by little the baby learns to try new tastes, temperatures and ways of preparation: tender, hard, liquids or thick. This contributes to his/her development.

To give the baby new food will require attention, care and patience from the mother or from whoever looks after the baby. In the beginning the babies need more pasty and tender food, for they cannot chew the food yet.

The baby food has to be given in quantities that increase little by little each time. It is important to check that the baby accepts it, without hurrying up, till he/she is satisfied.

Many babies may refuse the food. It does not mean that he/she did not like it; he/she is refusing something he/she does not know. Another time, he/she may accept this same food that he/she refused before. It is necessary to offer it to him/her again but without forcing the baby to eat.



The first food to be offered is fruit and porridges.

Fruits are important because they are sources of vitamins, they can be served mashed or scraped with a spoon. Always prefer the regional fruits and the seasonal ones; they are fresher and cheaper. Giving fruits to the baby is better than giving juices.

It is important to wash the fruit very well before giving it to the baby.

The baby food (porridges) can be made of:

- Cereals, like rice, corn and oats;
- Legumes, like beans, green peas, chickpeas (garbanzos), lentil;
- Meat or eggs: cattle beef, chicken, visceras and egg yolks;
- Roots, like cassava, potato, and sweet potato;
- Vegetables like carrots, lettuce, and pumpkins;
- Seasonings like onion, parsley, green onion, garlic and a little salt. Apart from giving more taste to the food, condiments are important sources of vitamins.

Every new food, fruit or baby food should be introduced one by one and little by little. At first small quantities should be offered, one or two teaspoons per day. Increase the amount a little every day observing if the baby accepts it.



To be tender, the baby food should be well cooked. Use little water so that the food does not lose the vitamins and other nutrients like iron and calcium. Before serving it to the baby, the mother should mash the food well with a fork; never use the blender. Do not mash all the food mixed together for the child needs to know the taste of each food. By doing it this way, the food becomes pasty, firm and colourful, stimulating the chewing and the senses of the baby.

Start offering baby food at lunch time. The baby food served for dinner should only be offered when the baby is accepting well the food offered for lunch. Fruits can be offered as a snack, in the morning as well as in the afternoon.

The baby should be breastfed at least twice a day. The interval between the meals is different for each baby, but the average is from two to three hours.

The breastfeeding should be kept, at least, until the first two years of age, even after the introduction of new foods.



Other Important Foods for the Baby

Liver (beef or chicken) should be given from the sixth month of age onwards. It is a rich resource of iron and vitamin A. It should be very fresh, odourless and have a vivid colour. The chicken's liver should be boiled and added to the baby food twice or three times per week. The beef's liver may be served fried or boiled, with potato puree, etc. It is necessary to test which way of preparation is best accepted by the baby.

Egg yolks is a source of protein and vitamins A and D. It can be offered boiled, starting with one quarter or half of it until the full egg yolk can be offered. If there is no sign of intolerance, such as diarrhea, vomiting or allergy on the skin, two egg yolks can be offered per week, well mashed and always mixed with another food (puree, porridge).

Beans, after being boiled and lightly seasoned with (salt, onion, garlic, oil), they are to be mashed with a fork. It can be served plain or with rice, potatoes, flour.

Lugaw, is a dish made of rice. Normally it is well accepted by the baby, mainly if accompanied by eggs or meat gravy.

In the seventh month the baby can already have his/her first “piece of meat”. It has to be a big, firm and preferably roasted piece. This piece has to be placed in the baby’s hand for him to suck and taste it at ease, under the attentive eye of his/her caregiver.

When the baby reaches the eighth month, he/she can start eating the family food, for he/she has already tried different foods since he/she was six months old. At this age, rice, beans and meat stew with legumes still have to be mashed, but less than the first porridges s/he ate.

A varied, colourful dish, besides catching the attention of the baby allows him/her to get to know the taste of all the foods available and provides the baby several vitamins and nutrients he/she needs.

The fruits rich in vitamin C such as, orange, papaya, lemon/ kalamansi, guava and mango served together with the meals help the baby’s body to best absorb the iron from the food and prevent anemia. (See more details on page 36 of this guide).

A good conversation with the mother about the food variety available in the region can help her to choose healthy food. It is important that the mealtime is not transformed into blackmailing and a time of anguish. The baby should not be forced or spanked to eat.

Only food variety provides everything the baby needs and it favours the development of good eating habits.

It is important that the baby eats the amount he/she wishes, that he/she can explore the food with the hands, and that he/she tries to use the spoon and the glass if he/she wants. At this stage the baby likes to catch and touch everything and this will help him/her to better accept the new foods.

In the Leader's Notebook:

- In order to answer **question 3** of the Leader's Notebook, it is necessary that the leader asks, in each visit, what food the child had been offered lately. Based on the answers, it is possible to fill in the age the child started to receive each one of the foods listed in this question.
- In order to answer **question 4** of the Leader's Notebook, it is only necessary that the leader verifies in **question 3** if the child received any food or liquid before completing six months. In case the child has only eaten milk from the mother's breast, mark with an [X] the yes box. Note that this question will only be answered in the month that the baby completes six months.

The ideal is that the baby does not drink water, tea, juice or eat any other type of food before six months of age. In case the baby has taken this before six months of age, you, leader, should try to convince the mother to stop giving the baby any liquids or foods, following the guidelines provided in this Guide.

*"Who, then, is the wise and trustworthy servant whom the master placed over his household to give them their food at the proper time? Blessed that servant if his master's arrival finds him doing exactly that."
(Matthew 24: 45-46)*

Anemia Caused by Lack of Iron



Anemia, which is caused by lack of iron, is the biggest nutritional problem in the world and affects the great majority of babies. Iron is an essential nutrient for life and it acts mainly in the production of blood red cells and in the transportation of oxygen to all cells of the body. The lack of iron diminishes body resistance, leaving the baby more exposed to infections.

In children anemia or lack of iron is caused by its low intake and because the body needs are big. Anemia occurs more frequently in babies being fed with powdered milk or after the sixth month of age, even in those who have been breastfed.

Attention: The babies who were prematurely born or were born with low birth weight need more attention because they have low iron reserves.



Healthy babies that have been *only* breastfed until their six months of age do not need any type of iron supplement until the introduction of other foods.

When the child is fed with natural cow milk, the risk of lack of iron is higher, since in this type of milk, the quantity of iron is also low and the body absorption is also low.

Leader, you have more information about healthy foods on pages 34, 35, 36, 37 and 38 of this Guide.

The World Health Organization (**WHO**) recommends that all the babies above six months take iron supplement. Leader, check if the babies, that are older than six months, are receiving this supplement. This is very important for their development.

*"For they will also ask the Lord to lead them to the right diagnosis and to do the healing. Claim in the presence of their Creator those who do not submit to the medical treatment."
(Sirach 38: 14-15)*

Leader, according to what you have seen make a list of:

187

- The ways to make better use of iron sources, vitamins, etc. in the baby's foods:

- Recipes that the children accept well:

Vaccines

Leader, if some baby is late in taking the vaccines, instruct the parents to take the baby to the health center to avail the missing vaccines for that age.

Leader, in some countries the child needs to take Vitamin A supplement. Contact the local health center and get the information about your country on this matter.

In the Leader's Notebook:

In **question 18**, write **[Y]** (Yes) if the child has all the vaccines appropriate for his his/her age.

How the Baby can Learn and Grow



Do the parents or does the caregiver always provide Opportunities for the baby to meet other people?

The care, love and attention of the mother and the father make the baby know them well and feel safe with them. Thus, with the help of the parents, he/she can learn to trust and to relate with relatives and with close friends. But it is necessary to go slowly with this, respecting the fear some babies have towards people who are not with him/her daily.

The baby likes to play hide-and-seek - finding the face of the people or anything that is hidden right in front of him/her. Doing so, the baby can learn that people and things exist even if he/she does not see them. Thus, he learns to live with the absence of the mother, the father and of other people important to him.



**Do the family members encourage
the baby to play with objects?**

The baby continues to enjoy having someone around him/her. For the baby to show interest for objects, he/she needs to be helped by people. This help can occur when the person offering objects to the baby, also shows her/his interest in the objects being offered. When the baby plays with them he/she demands less presence from the adult and also learns other things.

Thus, the baby grows each time even more curious, begins to move and grabs everything that is close to him. He/she uses his hands better each time – learns to grab small things between the thumb and the index finger. He/she catches, bites, smashes, tears, plays, beats things experimenting and learning how they are made.

Whenever the baby wishes to get things which belong to the adult and which are dangerous, or wants to do what he/she can't do, the parents should distract him/her or take him/her to another place. The baby still does not understand explanations and is still beginning to understand the meaning of the word no. If he/she insists on doing something, he/she should be held firmly and distracted but *never* to be beaten.



Does the baby catch objects and play with them, beating, throwing and tearing them?

Playing with objects, the baby learns that when he/she does something another thing happens. For example, when he/she beats with a spoon on a pot, it makes noise; when he/she pushes the button of the radio, the radio plays music. Since he/she already knows how to get and to let go, he/she likes to play catching things and throwing them on the floor to see how they fall. In doing so, he/she learns that some objects fall faster, others fall slower; some make noise, others do not. Sometimes, it requires patience to return to the baby what he/she has thrown.

Attention: The family needs to keep buttons, nails, pins and seeds out of reach and in safe places because from this age onwards, the baby already can get small things and put them inside the mouth, nose and ears. The baby with bad smell or nose secretion may have put something in these body parts. It is necessary to take the child to the health Center to be examined, because to remove these objects at home can make the situation worse.

The baby needs to stay on the floor to try to move on his own.

The baby tries to catch everything that is put close to him: some babies will roll, others crawl or creep to fetch things. The parents have to make sure that all the places where the baby stays are safe because he/she still has not yet learnt that he/she cannot touch certain things or go to certain places.

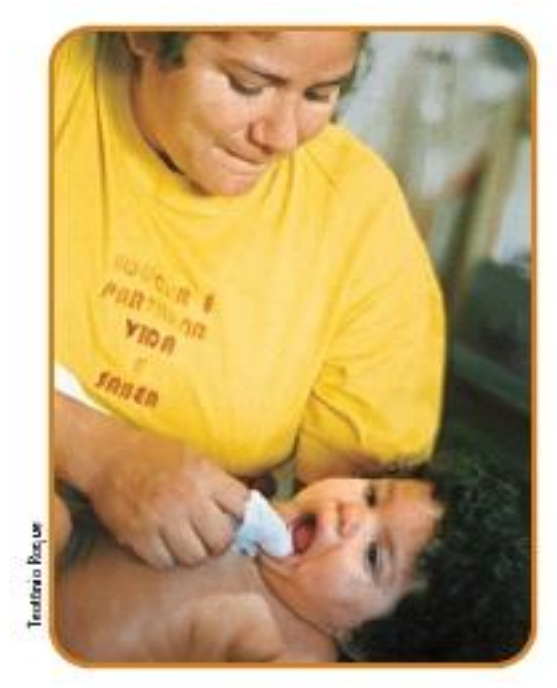


Attention: Electric sockets, staircases and iron wires are dangerous because the baby can reach them. It is also necessary to keep the cleaning products and medications locked and in a place where the baby cannot reach them. If the baby swallows the product or medicine, it is necessary to take him/her immediately to the health center.

At this age, besides a good night sleep, the babies still need to sleep during the day. The parents need to find out the way to quiet down the baby and the way s/he likes most to fall asleep again and try to do always the same thing and in the same way. This is because repetition is one of the best ways for the baby to learn and the routine also helps to make him/her feel secure.

*"Let dawn bring news of your faithful love, for I place my trust in you;
show me the road I must travel for you to relieve my heart."
(Psalm 143: 8)*

Hygiene

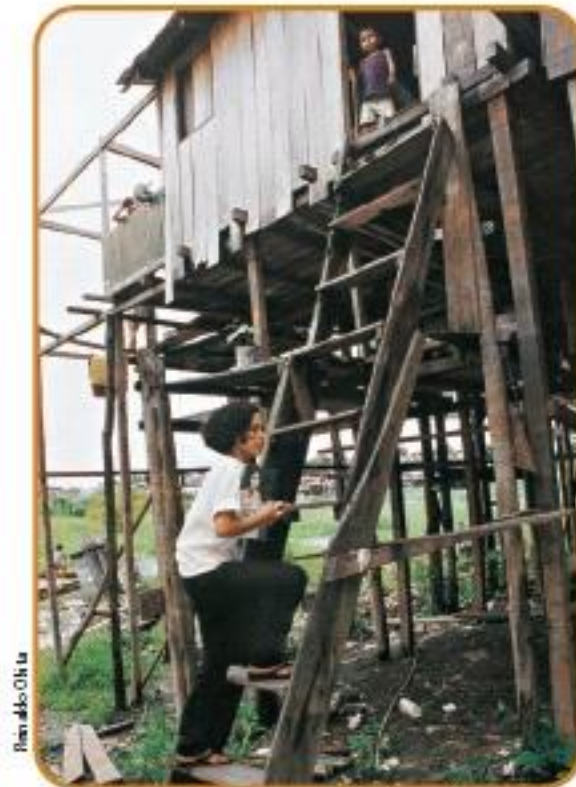


The leaders should instruct the parents to always keep the baby's mouth clean, mainly after he/she starts eating new foods. It is not necessary to sweeten the baby's food. Sugar is one of the main causes for tooth decay. Thus, the later the child receives sugar, lesser are the chances for the baby to have tooth decay.

When there is hygiene or cleanliness in the preparation of the food, we avoid diseases such as diarrhea. Therefore, it is necessary to wash hands before cooking the food, to be careful as where to keep the food, avoid contact with mosquitoes and always give purified, boiled or filtered water to the baby.

Since the baby needs to go to the floor to start moving on his/her own, he/she then gets much dirtier. Therefore, the daily bath has a great importance. It is also a good moment to talk to the baby and to touch him/hertenderly. Thus, apart from cleaning him/her, the bath quietens the baby.

Attention: The baby cannot be left alone in the bath tub/basin, not even for one minute. There is a big risk for him/her falling down or drowning!



Diarrhea is a soft, watery poop (stools) and it comes more times than the normal. Diarrhea can be accompanied by vomits. Diarrhea, as well as vomits, is the way the body reacts to get rid of something that does it harm, such as poisons, spoiled or contaminated food. Therefore, you should not give medicines to stop diarrhea.

Medication should only be given upon medical prescription. Medication for diarrhea, in general, is only prescribed when the faeces of the child have blood or mucus.

Diarrhea is a disease which can be caused by bacteria that contaminate the water, food, containers, the hands of people and things they use to prepare food. Mosquitoes, cockroaches, rats, among others, carry germs from the garbage inside the house.

Diarrhea spreads easily in places where basic sanitation is inefficient: when there is no clean water, the garbage is located in an improper place or there is no pit or toilet. When the baby starts eating other foods, putting objects into the mouth, moving around on the floor, he/she has more chances to have diarrhea.



When the baby has diarrhea it is common that his/her appetite diminishes. However, it is advisable to keep on offering him/her the regular food. The seasonings and the oil should be kept. Rice porridge is a good food for children with diarrhea.

When the baby vomits or has diarrhea he/she loses a lot of liquids and mineral salts of the body, and may become dehydrated. To avoid dehydration, it is necessary to replace the quantity of what was lost. This can be done by offering the child more liquids and also homemade rehydration oral solution or the one ready in small sachets but always in small amounts and several times a day.

Attention: If the baby vomits, the rehydration solution soon after he/she has taken it, it means that the baby is not replacing what he/she has lost. Thus, it is necessary to take the baby to the hospital as soon as possible.

Babies who are not breastfed have more serious diarrheas and die more easily because of diarrhea and pneumonia. The family needs to be more careful with the baby who is not breastfeeding or who has not been breastfed.

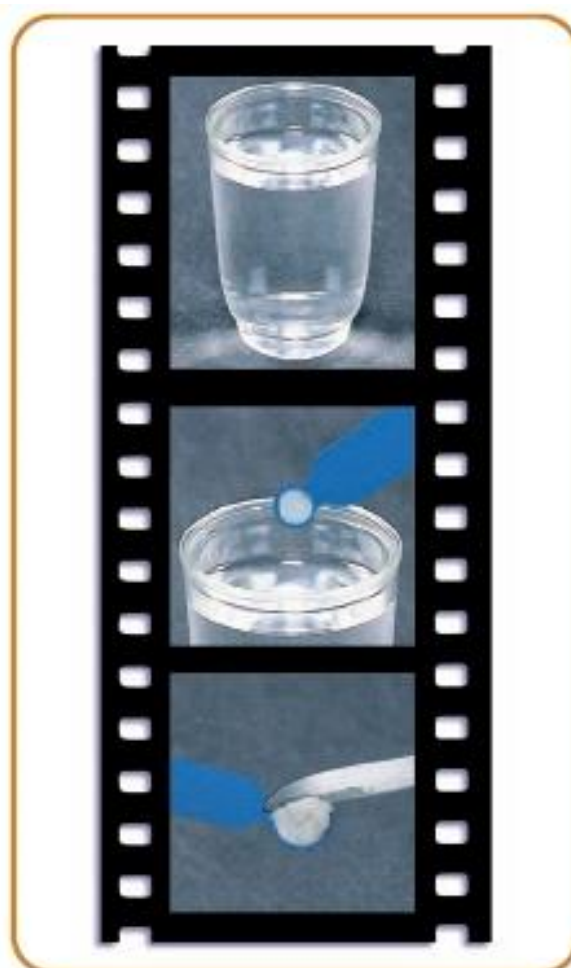


The homemade oral rehydration solution is prepared with water, salt and sugar. In order to avoid mistakes with the amounts, Pastoral Care for Children uses a measuring spoon to prepare it. It should be offered to prevent dehydration or as soon as the initial symptoms are shown. The homemade oral rehydration solution does not stop diarrhoea, it just replaces the liquids lost in the faeces and by vomiting.

In order to prepare the homemade oral rehydration solution the following things are necessary:

- a big glass (with 200 ml of water);
- a measuring spoon;
- salt and sugar.

After washing your hands very well, fill a glass with clean, boiled or filtered water (200 ml). With the measuring spoon put 1 small and shallow measure of salt and 2 big and shallow measures of sugar, stirring them very well until salt and sugar are dissolved.



Besides teaching the parents to make the homemade oral rehydration solution, it is also necessary to give it in small quantities to the child with diarrhea, watching for some recovery signs.

The homemade oral rehydration solution should be served with a spoon or in the glass, and the amount prepared should be taken within 24 hours. If it is necessary, that the child take the homemade oral rehydration solution for more days, the recipe should be prepared again every day.

Some children do not want to take the homemade oral rehydration solution. It is necessary to explain to the mother to insist on it without forcing the child. She can talk to the child, explaining to him/her that the homemade oral rehydration solution will do him/her good and that he/she will recover sooner and that because she loves the child very much, she does not like to see/him/her sick.

Besides taking the homemade oral rehydration solution, the child should continue eating normally. When the child keeps on eating she recovers faster from diarrhea, has less complications and does not lose weight.

In the Leader's Notebook:

In **question 11** (did the child have diarrhea this month?), check **[Y]** (Yes) if the child has had diarrhea).

In **question 12** (when the child has had diarrhea, has he/she taken the ***Homemade Oral Rehydration Solution*** and did the mother insisted that the child continue eating?) check **[Y]** (Yes) only if he child has had diarrhea, has taken the ***Homemade Oral Rehydration Solution*** and if the mother has insisted on feeding the child even if the child did not eat. The ***Oral Rehydration Solution*** to be used can be the homemade one or the one that could be obtained from the Health Center.

Home Visit

It is important to:

- Talk about breastfeeding/ regular feeding.
- Talk about the importance of preventing dehydration by means of the *Homemade Oral Rehydration Solution* when the children have diarrhea.
- Talk about the Signs of Danger, reminding the Ties of Love Card, already delivered to the family, about the Signs of Danger "Children from two months to five years old."

Answer the questions in the Leader's Notebook.

Homework Suggestion for this Training Stage

- Visit the registered children, deliver the measuring spoon and instruct the mothers on how to prepare the *Homemade Oral Rehydration Solution*.
- Fill in the food list on page 187.

11th Training Stage

To Evaluate and Celebrate

- How were the home visits to the families with babies from 6 to 8 months?
- Which facilities did you find?
- Which difficulties did you feel?
- Was there any explanation from the Leader's Guide which was not accepted by the mothers? Which one if yes?
- What else would you like to learn or talk about the babies from 6 to 8 months in your community?

Based on what you have seen and felt, what would you like to share?

Do you remember any Biblical quotation, prayer or message that could illuminate this moment?

To See

The Nine to Eleven Months Old Baby

- Do the mothers continue to breastfeed, even after the introduction of other types of food?
- How do the families handle the baby's need to move around at this stage?

The Nine to Eleven Months Old Baby

Breastfeeding and beginning of regular feeding

At this age, besides the breast milk, the baby needs three meals a day. If the baby is not being breastfed, he/she needs five meals a day. The food should be rich in iron, vitamin A and calcium. The baby's body absorbs more vitamin A when a little vegetable oil or olive oil is added into his/her food.

The baby is already eating the egg yolks but the white of the egg should only be offered only when s/he has completed one year of age as it can cause allergy in some children.



Fish is a very nutritious food. And fresh fish is the best option. The fish meat should be firm, elastic and the scales should be adherent, the skin and the gills bright. The fish should have bright eyes and should not smell like ammoniac.

The baby likes to try eating alone. It is good to put some food in the dish and leave it there for the baby to try to use the spoon. At the same time, the adult serves her/him most of the food from another plate. It is good that the baby have his/her own plate and eat during family mealtimes together with the others. Then it is possible to know how much the baby has eaten and the baby learns that the meals are a family gathering time and that he/she belongs to the family.

How the Baby Can Learn and Grow

The baby still depends a lot on the mother or on the caregiver. He/she continues to enjoy staying always close to the parents. Since he/she cannot stay with them all the time, he/she likes to play with things that the parents use such as: combs, brushes, saucepans, hammers, radio.

When the baby plays with boxes, cans, pots, brushes, spoons and toys, he/she learns two important things:

- The purpose of the objects: the glass to drink, the saucepan to cook, to comb the hair, the ball to play.
- How the objects are like: hard or soft; big or small; rough or smooth; light or heavy.



The baby also learns when the parents and the family members talk to him about how the objects are like and what they are used for.





J. R. Pappas

**Does the baby use gestures to communicate?
Pointing, clapping hands and saying good-bye?**

When the family gives attention and tries to understand what the baby wants to communicate, he/she learns to use gestures to say and ask for what he/she wants. When the baby points asking for something, it is good that the parents say the name of what was pointed at, so the baby can learn the name of the things he/she sees.

He/she better understands each day what people say to him/her. Even if the parents can distract the baby for him//her not to do what is not allowed, he/she will try to do it again. When the parents say "no", the baby stops what he/she is doing, even though later he/she does the same thing again. When the baby acts likes this, he/she shows that he/she is beginning to understand what is not allowed to do and to have an idea of what is to have boundaries.

The parents have to decide how they will face the beginning of the baby's disobedience. They both have to act firmly, without using violence but keeping up with the prohibitions made or with the boundaries set.



I. R. Bypen

Do the family members say the name of the objects, and talk about the activities they do with the baby?

The baby tries to imitate the sounds he/she hears from the family and can already repeat some words on his/her own way. The baby says “da” when he/she wants something; and calls after the mother and the father saying “mommy – daddy”. But he/she can also start to speak only later. The important thing is that people speak to him about the ordinary things of every day, so that, at his/her own time, he/she starts to use language as his/her main instrument to communicate what he/she feels.

When a person asks the baby for someone that is out, for example: “Where is daddy?”, and he/she looks around, looking for him, this shows that he/she does not need to see the father to know that he exists. This shows that he/she already keeps some things in his/her memory.



Do the families make space in the house for the baby to learn to move on his/her own?

In this phase the baby does not keep quiet, for he/she is learning to stand up and move on his/her own, especially while standing up. Therefore, he/she needs a safe space which allows him/her to try to move in several ways. If there is any person, a table or a chair, for example, that he/she can hold/grab, he/she will try to stand up. But he/she may fall many times because she still lacks balance. Most of the time he/she does not get hurt when she falls.

For the baby to move with safety, it is good that the parents arrange a place in the house. Instead of forbidding the baby to move in some places, it is better to find a way or provide a place where he/she can do that. They should, for example, put out of his/her reach dangerous objects and block the access to the kitchen or to other dangerous places with a wood panel or a chair.



For the baby to learn how to walk, it is also important to count on the help from other people. He/she likes when his/her parents or siblings help him/her and encourage him/her to walk because he enjoys having their attention. Like everything he/she learns, first he/she will walk with the help of others before being able to walk by himself/herself.

The baby already shows his/her feelings. He gets jealous when the mother holds another child in her lap. He/she gets sad when people scold him/her. He/she feels happy when the parents show appreciation for what he/she does. The baby likes a lot to play with his/her brothers and sisters but he/she does not like to lend or share the toys.

Sunbathing, playing outside the house and breathing fresh air help the baby to eat and sleep better. He/she can also learn more, for he/she sees other children, people and different things. When the baby goes out with the parents on a bicycle, bus, horseback or car, the baby should be tied very safely to avoid any accidents.

*"You have given me your protecting shield;
your right hand has upheld me;
you stooped to make me great."
Psalm 18:36*

Home Accidents

The baby tries to move around in the house and the kitchen is the place that catches more his/her attention. It is there that the mother or the caregiver spends most of the time, and where he/she finds interesting things to play with. Thus, it is in the kitchen that accidents usually happen to the child.

The family has to be careful to turn saucepan handles on the stove. It is necessary to watch for hot ovens so that the baby does not touch it and gets burnt.



If the baby gets burnt, the parents should apply cold or icy bandages on the burnt spot to reduce the pain. They should not apply anything else on it without medical prescription or perforate the blisters so as to prevent infections.

It is necessary to remove from the baby's reach things such as glasses, scissors and knives that he/she may grab on to and get harmed.

Things such as medicines, kerosene, sanitary water, caustic soda, etc. that the baby can take or put into the mouth and get poisoned are also very dangerous. Therefore, the cleaning products should not be stored in soft drink bottles. If the baby ingests any medication or cleaning product, he should be immediately taken to the Health Center unit.

Analysis of the Child's Situation According to the Indicators of Opportunities and Achievements

We shall see now how to interpret the responses to question 13, examining the answers to questions 14 and 15 of the Leader's Notebook, which complete the registration of Indicators of Opportunities and Achievements. It is not necessary to answer the questions at the moment of the visit. Choose a quiet moment to do so.

To answer **question 14**, see first the answers to question 13:

- Check **(Y)** (Yes) if all the indicators of question 13 are marked with **N** (No). In this case, the situation is unfavourable for the child's development, since no indicator was achieved. Look at the example below.

	1	2	3	4
13. Which indicators of opportunities and achievements were reached this month?	N	N	N	N
14. Do the indicators of question 13 denote an unfavourable situation for the child's growth (no indicator was reached)?	Y			

- Check [N] (no) when at least one of the indicators of question 13 was reached.

Whenever you find a [?] (question mark) in any of the indicators of question 13, the answer to the question 14 is **[N]** (No).

Let us think about the meaning of the answers to question 13 and 14.

When in a certain month none of the indicators to question 13 is reached, we say that this is an unfavourable situation for the child's development. This can mean that the family and the community are not managing to provide opportunities for the child's development, and therefore, the child has not presented the achievements pointed out by the indicators. Like all situations, this can also change but it requires that you, leader, investigate it. The family might be going through a difficult period that has been disturbing the family harmony. Talk to the family and help them to find solutions.

If, in the following months, the indicators are still not reached, this shows that the family continues to be unable to overcome the hard situation they are going through, even with your support, leader.

We know that it is not only up to the family to meet all the child's needs. In cases of extreme poverty, the parents need to look for where they can live, for support from the Health Center, education and from the social services. The help from other family members, from their neighbours and friends to form a solidarity and love network to create a favourable environment for the children's development may also be needed.

It is important that you, leader, study with your area coordinator what else can be done when, for several months in a row, the indicators have not been reached.

It is important to think about the unfavourable situations for the development of the child, for example:

- When the family has no access to health, education, proper housing or the parents cannot find a job; this can bring about problems such as discouragement, violence or alcoholism. The difficulties are so many that the family members end up giving little attention, encouragement and love to the child in the way and amount he/she needs to be able to grow and develop;
- When the child gets sick and this disease repeats itself or takes a long time to be healed, the child gets weak, loses weight and also loses the desire to learn, play and the people in the family do not seek for other ways to encourage the child;
- When the child suffers from some kind of violence such as abandonment, spanking, sexual abuse; this indicates that there is a problematic situation in the family.

Therefore, the basic attitude that you, leader, need to have in view of the indicators should always be that of investigating. The indicators are the first clue for you to find, together with the family, the other leaders and with the coordinators what is going on. The indicators should not be used to label the family as negligent, uninformed or as one that has no interest in taking care of their children, or less even to label the child as sick, retarded or deficient.

When all the indicators are reached, the leader should celebrate with the family and be appreciative of the opportunities which are provided to the child. But you must continue observing, even if the child is still at the same age rate, because the indicators show the life situation of the child, and this can change: if the opportunity is not provided, the child would not be able to reach that achievement.

Therefore, the answer [Y] (Yes) to an indicator is to be celebrated. The answer [N] (No) should always be investigated.

To answer **question 15**, observe see the answers to question 13:

- check **(Y)** (Yes) if all the indicators have been reached.

	1	2	3	4
13. Which indicators of opportunities and achievements were reached this month?	N	N	N	N
14. Do the indicators of question 13 denote an unfavourable situation for the child's growth (no indicator was reached)?	Y			

- Check **[N]** (No) if some indicator has not been reached.

	1	2	3	4
13. Which indicators of opportunities and achievements were reached this month?	N	N	N	N
14. Do the indicators of question 13 denote an unfavourable situation for the child's growth (no indicator was reached)?	Y			

Whenever there is a **[?]** (question mark) in some of the indicators of question 13, the answer to question 15 should be **[N]** (No).

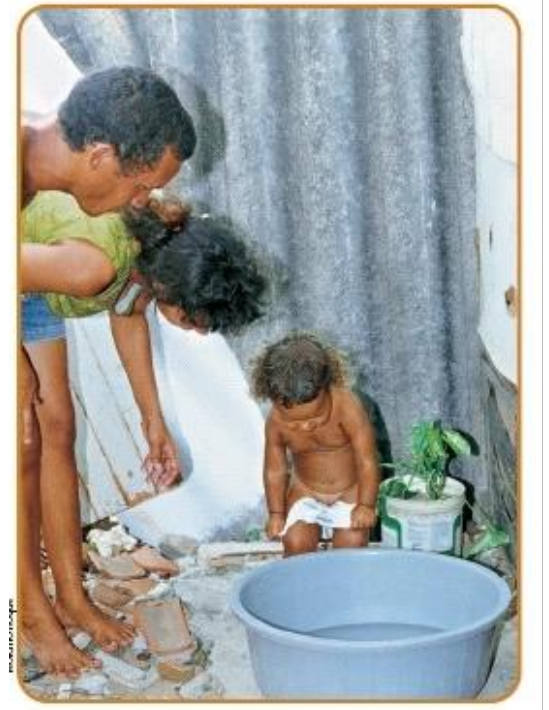
The question below question 15 ("in case the child got sick this month") has the purpose of you having recorded the child's diseases.

The hygiene of the body and of the house is important for the health of the whole family but mainly for the baby's, for it can prevent many diseases. Since the baby likes to touch everything, his/her hands should be very well washed always before eating.

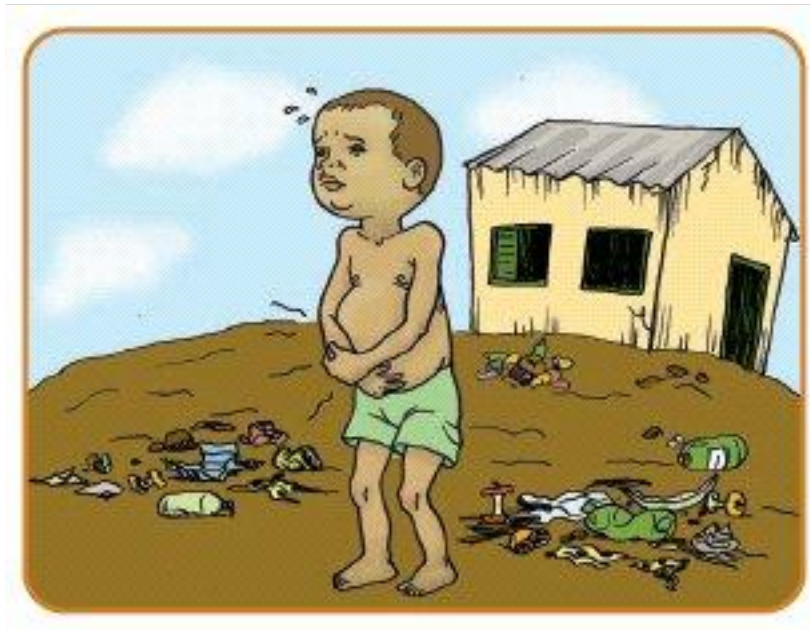
During bathing time, the babies like to rub the soap on their bodies. When the parents tell them the name of the parts of the body while they do that, like head, hands, feet... the babies soon learn the body parts' names.

The baby might now have up to eight teeth, which need to be brushed to avoid tooth decay caused by food leftovers. The tooth decay is a disease caused by bacteria which can pass from one person to another. The baby can also catch these bacteria through the use of spoons, plates and cups used by other people or when sucking a dirty or badly washed baby pacifier.

It is necessary to instruct the family not to blow or chew the food before giving it to the baby. Tooth decay bacteria can also be transmitted in this way.



Intestinal Worms



Intestinal Worms provoke intestine infections and there are various types of worms. The commonest way to catch worms is from drinking contaminated water or eating contaminated food.

When the child has worms, he/she can complain of stomach ache, cramps, colic, nausea, s/he can present symptoms like vomiting, diarrhea, weight loss, anaemia and fever. When intestinal worms are not treated, it can cause grave complications, since intestinal worms prevent the body from absorbing the food nutrients, leaving the child more vulnerable to infections and anemia for lack of iron.

In order to prevent the baby from getting intestinal worms, it is necessary to take care of his/her personal cleanliness and also the house and food hygiene/cleanliness. It is also important that the community fights for adequate sanitation conditions and for quality health services.

When the baby has intestinal-worm symptoms, it is necessary that the family brings him/her to the Health Center to receive proper treatment.

MEBAs – Monthly Evaluation Sheets



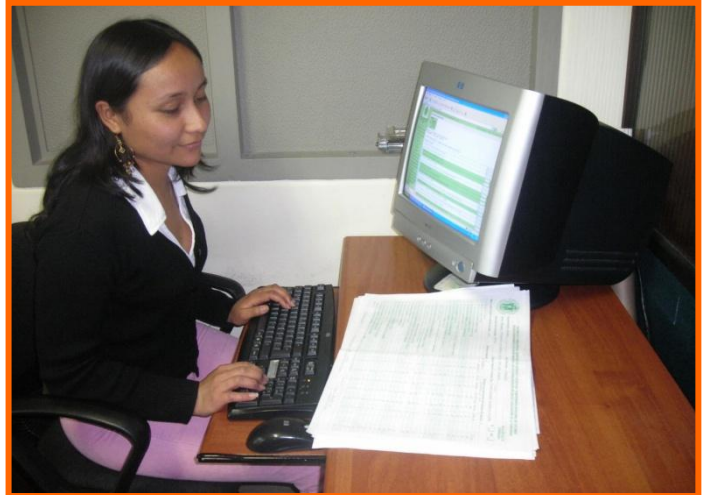
The Monthly Evaluation of Basic Actions of Health and Education in the Community Sheet is the tool in which all the data, about the pregnant women and the children followed up by the leaders of one community, is registered.

Once a month, in the meeting for Evaluation and Reflection, you and your co-leaders get together with your Community Coordinator to fill in the “MEBA” sheets together. These sheets should be signed by the Community Coordinator and then revised and approved by the Area Coordinator.

With the “MEBAs” filled out, it is easier to SEE and JUDGE how the situation of the children and of the pregnant women is. This makes possible to plan the ACTIONS to try to change that situation. It is also possible to EVALUATE and CELEBRATE any progress already achieved.

The "MEBAs" of each community should be sent to the National Coordination of Pastoral Care for Children. There, the MEBAs data is encoded into the Information System of the Pastoral Care for Children. Thus, it becomes easier to know:

- About the health of the pregnant women and children that the Pastoral Care for Children follows up;
- How the children are growing, learning and developing;
- What is working well in the different Pastoral Care for Children groups and what actions are need to be strengthened; and
- The results obtained.



When there is a mistake in any of the MEBAs, the sheet is returned to the community where it belongs to be reviewed, corrected and sent again to the National Coordination as a Second Correction. Each MEBA done by the leaders is of great importance for Pastoral Care for Children.

The data of the MEBAs is encoded in the System of Information of Pastoral Care for Children. This way people inside and outside the Pastoral Care for Children can see and acknowledge the work done by the leaders in each community. The data of each community can be seen on the internet:

Brazil- <http://www.pastoraldacrianca.org.br/pastacri-dev/>

Colombia- <http://www.pastoraldacrianca.org.br/colombia/>

Paraguay- <http://www.pastoraldacrianca.org.br/paraguay/>

12th Training Stage

To Evaluate and Celebrate

- How was the Celebration of Life?
- Are there still any doubts about this activity?
- What other suggestions do you have for this activity?

Based on what you have felt and seen, what else would you like to share?

Do you remember any message, reflection or prayer that celebrates this moment?

*"There are many different forms of activity, but in everybody it is the same God Who is at work in them all. The particular manifestation of the Spirit granted to each one is to be used for the general good."
(1Corinthians 12: 6-7)*

To See

- The **Child at** One Year to One Year and Eleven Months Old
10. What do the children of your community like to do at this age?
 11. What in your view is a good way to react to the child's stubbornness?

The Child at One Year to One Year and Five Months Old

How the child learns and grow



Do the family members speak and talk to the child?

The child is everyday more and more interested in getting to know everything that he/she sees: objects, plants, animals. He/she likes that people show and speak to him/her about the things that he/she sees and touches. He/she is also interested in drawings and pictures in magazines and books. Saying the name of what the child is looking at, encouraging to repeat it and talking to him/her about the daily activities, help the child to learn how to speak.

The child can already speak some words such as: mom, water, and ball. But he/she still uses gestures to communicate: sends kisses and swings the head to say *no*. To learn how to speak, children need that people speak to them. They like when the family speak to them asking for help. For example: "Take daddy's shoes from under the bed". This is one of the ways for children to start having a notion of space: *under, above, close to, far from*.



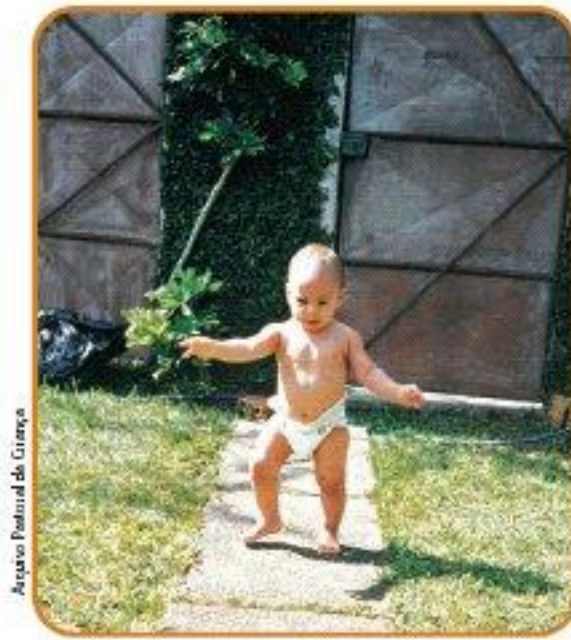
Does the child understand when people ask him/her something?

The child can understand some orders such as: "Let us go out.", "Take your shoes". It is not always that the child replies to the orders she is given. Generally the child only obeys when she/he is interested in doing what he/she is asked to do.

The child shows what he/she wants and what he/she does not want to do. When he/she does not want to do something, sometimes the child throws a tantrum. To keep on saying "no", scaring the child or beating her/him, does not stop tantrums. Leader, instruct the parents that the best thing to do is to wait until the stubbornness is over, not to give much attention to the child while he/she is acting stubborn and be firm regarding the prohibition made. When the child realizes he/she does not manage what he/she wants, the child gives up that state and starts doing something else.

When playing with boxes, cans or pots, the child learns to better use the hands. When the child takes something out and puts one thing inside the other, the child is also learning the notion of size. The family can take advantage of this interest in taking out and putting in things to teach the child how to put away his/her toys in a bag or box.

The child likes to go in and out of boxes, basins and open cabinets. He/she is learning about sizes, shapes and is gradually controlling his/her movements more and more.



The child is learning to walk without the help of another person. This is a great achievement!

Even though the child falls sometimes, he/she will try walking because he/she has the wish to learn and do a lot of things. With the help of the family, the child is going to feel safe and walk better each time in her/his everyday environment. Since the child can walk around the house and is very curious, he/she touches everything that he/she manages to reach. If the child falls and gets hurt, it is recommended to make cold or icy bandages to reduce the pain and the swollenness.

Attention: The family needs to watch over for the safety of the child by keeping the doors closed, windows protected, holes, deep wells and water containers covered and medicines and cleaning products out of the child's reach.

It is also necessary to watch for the child not to put toxic plants inside the mouth because they can poison him/her.

Leader, explain to the parents and family members that the child at this age eats the same food that the family does, just in lesser quantity. Since the child has already more teeth, he/she manages to chew better. The child already likes to try to eat and drink holding the spoon and the glass with his/her own small hand. In doing so the child starts to learn to eat on his/her own.

In order to avoid waste of food, it is recommended that the parents put small quantities of the food on the child's plate. As soon as the child has eaten the food that was put there, the parents put a little more till the child leaves the rest on the plate or refuses more food.

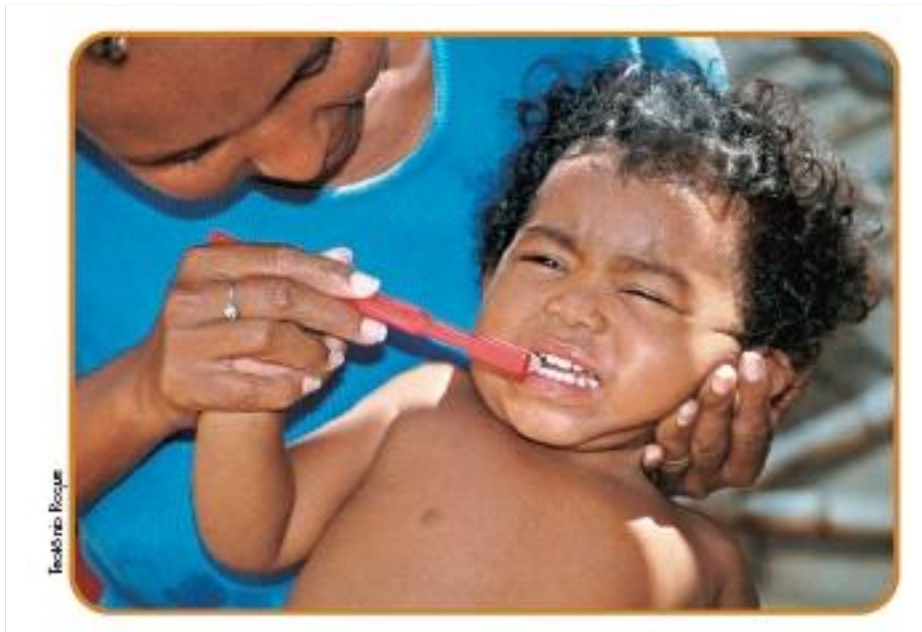
Besides eating other types of food, it is advisable for the child to be breastfed in between meals. The mother's milk continues to be a source of health for the child!

Leader, when the child is gaining too much weight, it is good to talk to the parents about the family's eating habits. Children that are breastfed have less chances of being overweight when they are grownups.

Obesity can cause respiratory problems, high blood pressure and diabetes.



*"...disease comes with a lot of food, and intemperance leads to crumps. Through gluttony many passed away; however, though, who is sober, prolongs his/her life."
(Sirach 37, 30-31)*



The child now has already several teeth and it is necessary to have them all very well brushed. To do that, a soft and small toothbrush without toothpaste, is needed. Instruct the parents to:

- Brush in circular movements the external side of the teeth close to the cheeks;
- After that, brush the inner part of the teeth close to the tongue;
- Brush with a back and forth motion the flat part of the molars;
- Brush the gums and the tongue well.

It is important to brush the child's teeth after every meal, after eating sweet food and before going to bed. This avoids the formation of bacterial plaques which can cause the development of dental caries, which then becomes cavities.

The baby's oral health depends on healthy food and of teeth hygiene/cleanliness.

The appearance of a white stain on the teeth is the first sign of alert, because this stain means that there is caries but that there is no cavity yet. Then, it is necessary to take the child to the dentist.



The child still cannot control the muscles that hold the urine and the poop. When the child or someone notices that the child is willing to wee or poop, it is recommended to put the child on the potty or toilet and stay with the child until he/she is done. Never force the child, because he/she is young and, little by little, she/he is going to understand that there is a proper place to wee or to poop.

It is necessary to teach the child to wash the hands before meals, like all the family members do.

Using latrines or toilets prevents the intestinal worms of the faeces from contaminating other people and causing diseases. To avoid the appearance of rats, cockroaches, flies and insects that bring diseases, the garbage should be kept in closed plastic bags and should not be thrown on the street or on empty unoccupied lands. Hygiene, inside and outside the house, is important for the health of the whole community.

Leader, if a child does not have the vaccines updated or has lost the Health Card record of his/her vaccines, instruct the family to go to the Health Center. There the health professionals can solve that situation.

The Child at One and a Half Year to One Year and Eleven Months Old

How the child can learn and grow



The child now learns easily many new words. If the child has been taught, he/she can show and say the name of the body parts: head, belly button, hand, foot.

If the family talks to the child, he/she can also learn to join two or three words to make up small sentences: "daddy ball" (daddy, give me the ball), "mommy go out" (mommy let's go out). It is good that the family members seek to understand what the child wants to say. Thus they are encouraging him/her to learn to speak better.

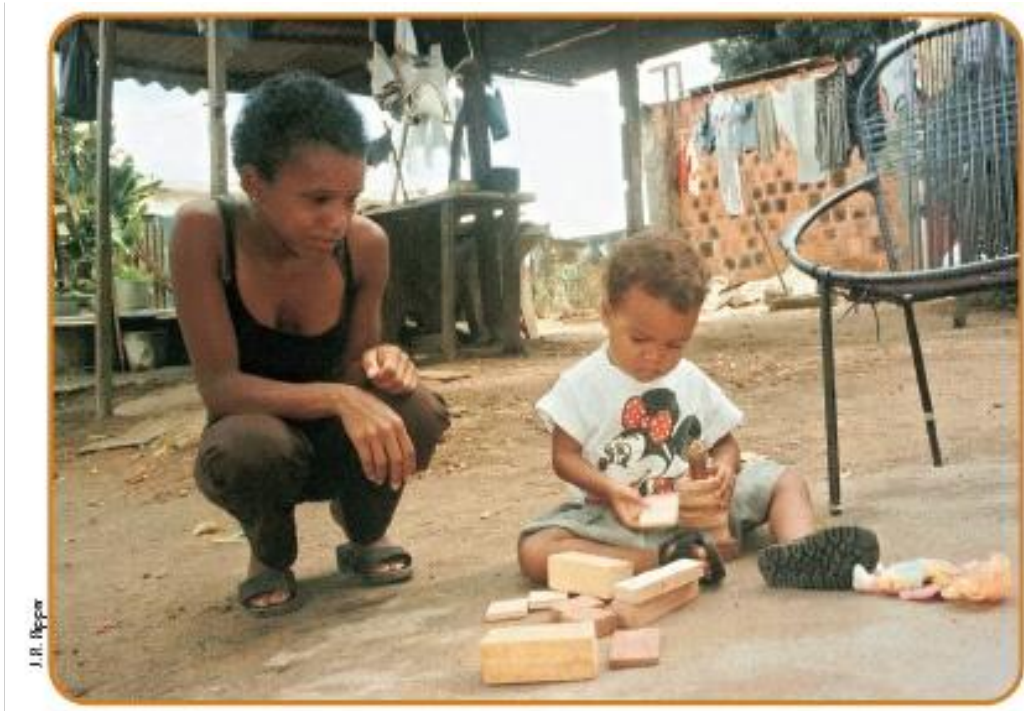
The child keeps on being very interested in learning and knowing everything that she/he sees around her/him. The curiosity helps the child to learn better. The child does things that he/she sees people doing: uses the mother's shoes, puts on the father's belt.



The child's mind is already more developed and he/she shows this in the activities he/she does. For example, when he/she wants to get something that he/she cannot reach, the child does not wait for someone to give it to him/her, but uses something else to reach what she/he wants. He/she, for example, takes a piece of wood to pull the ball that is under the bed.

The child learns to say "no". If the adults leave dangerous things close to him/her, or many things that she cannot touch, they will have to say "do not touch it" and "do not take it" all the time. Since the child imitates the adults, he/she will say "no" to everything people ask him/her. In order not to say "no" to everything, it is better that the parents put the things he/she should not touch out of his/her reach. Then, the child will learn what he/she can and what he/she cannot touch, but does no longer have to hear "no" to everything.

It is important not to leave dangerous things out of reach of the child and show the child what he/she can play with. To establish boundaries is very important for the child's development.



The child's skill with the hands has increased. He/she already manages to open bottles and jars with different kinds of covers. He/she also scribbles on paper or on the floors and walls.

The child likes to play piling up, putting down, mounting and dismounting things. The family can provide him/her with pieces of wood of different sizes and shapes and with smooth surfaces. This kind of toys awakes her/his interest very much, for he/she can play with the wooden pieces in several ways.

In this age, the child, in general, is interested in knowing about his/her genitalia. He/she does it the same way he/she does to get to know other things: looking at it and touching it. When the child touches these organs, he/she will have good sensations. If the parents do not scold the child when she/he touches the genitalia, and at the same time he/she has the opportunity to get distracted with other plays/toys, his or her curiosity will decrease little by little.



**Does the child have a safe place to walk,
run and play?**

The child walks better every day, starts to run a little and loves to go up on top of everything. He/she crawls up the staircases and goes down in a sitting position. If someone holds the child's hand, he/she is able to go up the staircase standing. The child who is helped to do things, learns better.

The child likes to walk pulling things tied with a cord or pulling toys. He/she also likes to play imitating animals: walks like a dog, rides on a piece of wood like riding a horse, etc.

At this stage, the child enjoys more playing with other children, but still can fight for his/her toys. The parents' patience is very important at these times. Beating does not educate the child and only worsens the situation.

Playing with water, sand and earth calms down the child. He/she spends a long time exploring, learning how they are like and what can be done with these materials. But, the places where the child plays have to be clean.

*"He has given his angels orders about
you to guard you wherever you go."
(Psalm 91:11)*

Head Lice

227



The **Head Louse** is a parasite that lays eggs (nits) in the hairs. These eggs are white, small and do not get loose easily. They cause itching.

If the child has head lice, instruct the mothers to comb the child's hair with a thin comb every day, after washing it, and use the medicine prescribed by the doctor. It is also necessary to take care of the child's towel, bed sheets and verify if the people who are taking care of the child also have head lice.

To avoid head lice for spreading, it is necessary to:

- Maintain hygiene and take a bath/shower every day;
- Keep the hair clean;
- Change clothes every day;
- Never use someone else's comb; and
- Prevent the child from wearing hats, caps or clothes from someone else.



Attention: It is *NEVER* recommended to:

- Use insecticide to kill head lice because it can cause serious intoxication to the child;
- Put a plastic bag on the child's head because this can cause asphyxia.

Skin Diseases (Scabies)

Scabies appear in the form of small red bumps or blisters that make up a tunnel underneath the skin. They come up on the whole body, especially between the fingers, armpits, waistline, buttocks, and on the genitalia, causing a lot of itching.



The contamination occurs through the skin contact with objects of people with scabies, such as clothes, towels or bed sheets.



It is necessary to take proper medication to heal scabies. During the treatment, the clothes, including the bath towels and bed sheets have to be washed and ironed in very hot temperature aside from being changed every day. Leaving these sheets, clothes and towels to dry under strong sun also helps.

It is good to clean the children's nails in order to take out the parasites that remain there when the children scratch their skin and also to avoid contamination. If anybody else in the family has scabies, it is necessary that everybody undergoes the treatment at the same time.

The daily bath/shower with soap and water, washing the hair and wearing clean clothes help to prevent the contamination by head lice, scabies and other skin diseases.

Attention: If the child bathes in a bath tub or deep basin, it is necessary that someone stays always nearby to prevent the child from drowning.

Regular Feeding and Breastfeeding



The child already knows how to eat on his/her own. When the child eats together with the family, he/she eats better. It is necessary that he/she has a snack in between meals, for his/her stomach is small and cannot take much food. In these snacks it is advisable to offer him/her regional fruit. The child who since early age eats different kinds of fruits, vegetables and legumes gets bigger quantities of vitamin, iron and fiber, besides acquiring healthy eating habits.

It is recommended that in the first years of life, the child is prevented from eating food with sugar, coffee, canned food, fried foods, soft drinks, candies, caramels, salty snacks and other kinds of cake, biscuits etc. They are not healthy and they take away the appetite of the child to eat nutritious food.



Leader, the Evaluation and Reflection Monthly Meeting is a very important activity of your work. In these meetings, apart from celebrating the success stories of Pastoral Care for Children, it is possible to discuss the difficulties that you encounter in your daily work. Many of these difficulties can be solved with actions that you can take after an interchange of ideas and experiences with other leaders.

In this meeting, which shall be held on the first 10 days of every month, you can study the situation of the families that you are following up, discuss the monthly results and encourage each other with the solutions found.

The same methodology of study and reflection used in this Guide helps also to organize and stimulate the Evaluation and Reflection Meeting. Thus, the meeting begins with the evaluation of the actions of the previous month and the celebration of the achievements. After that, we shall See, analyzing the results of the MEBAs, the reality experienced by the followed up families; The Judging, that is, thinking about the reality of these families in the light of the Bible, of the *Leader's Guide* and of other materials available and, then, plan the Actions to be implemented together with the families.

We now shall see in details about this methodology: to See, to Judge, to Act, to Evaluate and to Celebrate.

Organizing an Evaluation and Reflection Meeting

In the beginning of the meeting it is important that you, leaders, warmly welcome each other and that you have a moment of prayer to strengthen your friendship, union and faith.

To See

After the welcoming moment, you should See and Evaluate the previous month. The questions below may help with that:

- Which of the actions proposed in the last meeting were accomplished?
- What are the achievements obtained?
- What problems came up?
- How are the children and the pregnant women of your community doing?

In order to help to answer these questions, it is important to fill up the MEBA sheets. To facilitate this, it is good that each leader comes to the meeting with the fourth part of her/his notebook already filled out.

After having filled out the MEBA sheets, you can talk about the families who you follow up, answering the following questions:

- According to the MEBA's result, what other problems appear in your community?
- Which, among the followed up families, are going through more difficulties?

You can choose the situation of a followed-up child or of a pregnant woman that needs more attention at the moment. The leader that follows up this family can give more details about the difficulties that she/he faces. It is important that the other leaders ask questions to better understand the situation.

To Judge

For the moment of judging it is important to read the *Leader's Guide* regarding the pregnant woman or the child, depending on the case chosen to be analyzed. If the group is discussing, for example, the case of a pregnant woman who is in her 5th month of pregnancy, then you should read in the Leader's Guide about this stage of pregnancy, trying to verify the problems that the pregnant woman is facing and identifying their causes.

If the group chose, for example, the case of a one-year-old child, they should read about this age in the *Leaders' Guide*, verifying which of the health care and development opportunities the child has.

In this study session it is also important to have the Bible and the Ten Commandments of Peace in the Family at hand, since they can bring the necessary light or understanding to help that family even more.

To Act

For the moment to decide about the actions to be done, the group can plan the following points:

- What actions require continuity with this family?
- What other actions should be introduced for this or for other families?
- Who else can help?
- The day of the Celebration of life;
- The next meeting: who is going to receive the people, lead the prayers, prepare the place, coordinate the meeting, etc.
- The celebration of the achievements obtained by the families. It can be a community moment in the Mass, church services or in other community gatherings.

Many events can be celebrated such as: the birth of a child, a father of a family that has got a job, improvement of sanitation and of the water quality, a new school in the neighbourhood, etc.

It is important to give value to the capacity of the families for transforming the difficult situations of life in victories and accomplishments.

To end the meeting, the leaders should evaluate what they have learnt, verify what can be improved for the next meeting, and thank God for that union, for the learnings, for the strength received and for the friendship among them.

In the Evaluation and Reflection Meetings, the leaders should find ways to solve some problems. To solve problems that affect several families, it may be necessary to invite the area coordination and the community entities.

*"We must consider how to rouse one another to love and good works. We should not stay away from our assembly, as is the custom of some, but encourage one another, and this all the more as you see the day drawing near."
(Hebrews 10: 24-25)*

Home Visit

In these visits, it is important to:

- Talk about the child’s development;
- Talk about breastfeeding/regular feeding;
- Remember the signs of danger.

Answer the questions of the Leader’s Notebook.

Homework Suggestion for this Training Stage

Prepare an Evaluation and Reflection Meeting.

13th Training Stage

To Evaluate and Celebrate

To evaluate and celebrate the child from one year to one year and eleven months old;

- How was the visit to the followed up pregnant women and children?
- How was the Evaluation and Reflection Meeting?
- Are there any doubts that can be solved now?

Based on what you have felt and seen, what else would you like to share?

Do you remember any message, prayer or a child song that celebrates this moment?

To See

The child at two years to three years and eleven months old

- Do the children have a clean and safe place to play together in your community?
- Why is it important for the children to play together?
- Do the families try to support and exchange ideas about bringing up and educating their children?

The Child at Two Years to Two Years and Eleven Months Old

235

How the child can learn and grow



At this age the child still enjoys always staying with the parents. If he/she stays away from them, he/she misses them very much. Therefore, he/she looks for object that they wear/use and imitates what they do when he/she plays of '*imagine that.*' The child also starts to like to do everything alone, including what he/she is not yet able to do. The '*imagine that*' game is important because it allows the child to do, through play, what he/she cannot do in reality. And, thus, the child starts to learn to acknowledge and to deal with his/her own limitations and with the parents' absence.

To play '*imagine that,*' the child still needs his/her own objects or toys similar to the objects of the parents. The parents and the family members can make/provide toys for the child such as dolls, small pans, furniture, small cars, and drums. It is also necessary to play with the child, for he/she still enjoys playing a little with the adults.

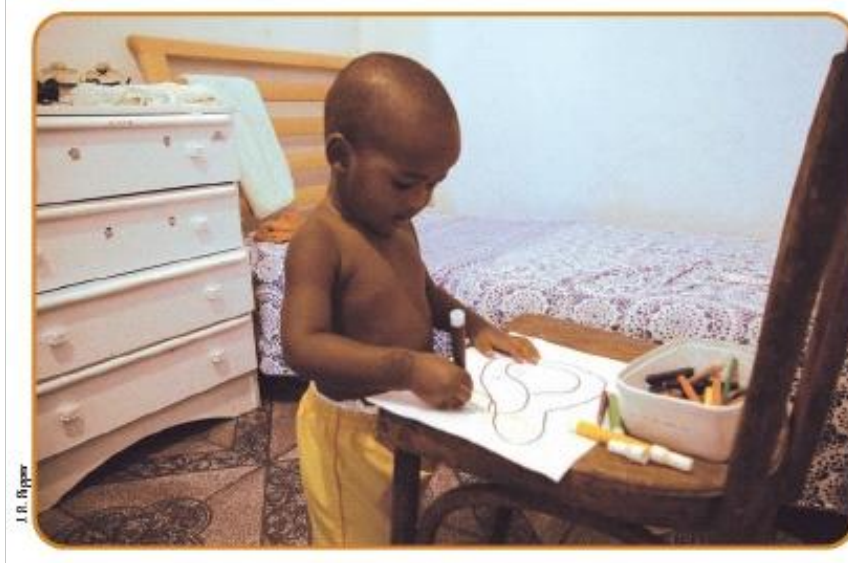


At this age, the child asks for the name of everything, for he/she has discovered that each thing has its name. Knowing the name of the things helps the child to think about things that he/she does not see. For example if the child says "Ball", he/she knows what she/he is talking about without seeing a ball.

If the family acquires the habit to talk to the child and to listen to what he/she wants to say, he/she learns to speak better every time, using phrases with more words such as: "Look at the beautiful dog, daddy."

The child can learn short prayers and pray together with the parents at the meals, before sleeping, when waking up. He/she can also learn his/her name, the name of his/her parents and of the siblings.

The child already manages to pay attention for longer periods of time. The parents, the grandparents and uncles can tell stories from the Bible, from magazines; they may tell stories about the family. These activities interest the child and develop his/her language and thought. The child learns many things from the pictures, from the photographs and looking at written words.

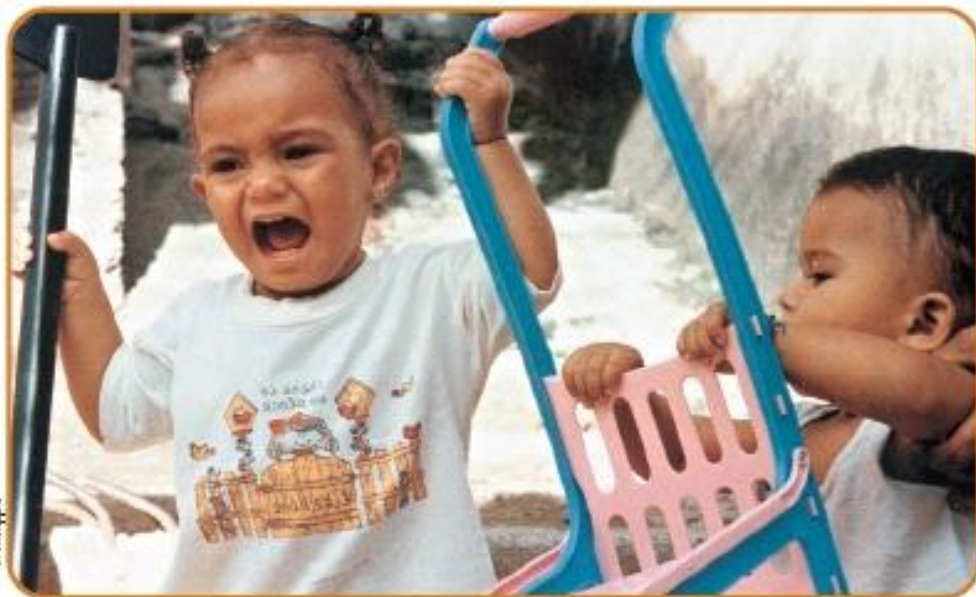


The child is already interested in using another type of language: drawing. He/she discovers that certain materials like pencils, chalk, stone pieces or bricks can make scribbles or markings on the paper or on the floor. He/she begins to scribble.

He/she already has the skill to get and play with smaller things and also remains doing one activity for a longer time. The parents can give pots and boxes for the child to play, taking the chance to teach about sizes, shapes, colors and to count how many objects there are.

The child does not like that people make fun of him/her when he/she cries, is scared or does not manage to do something. He/she needs to feel that she is understood.

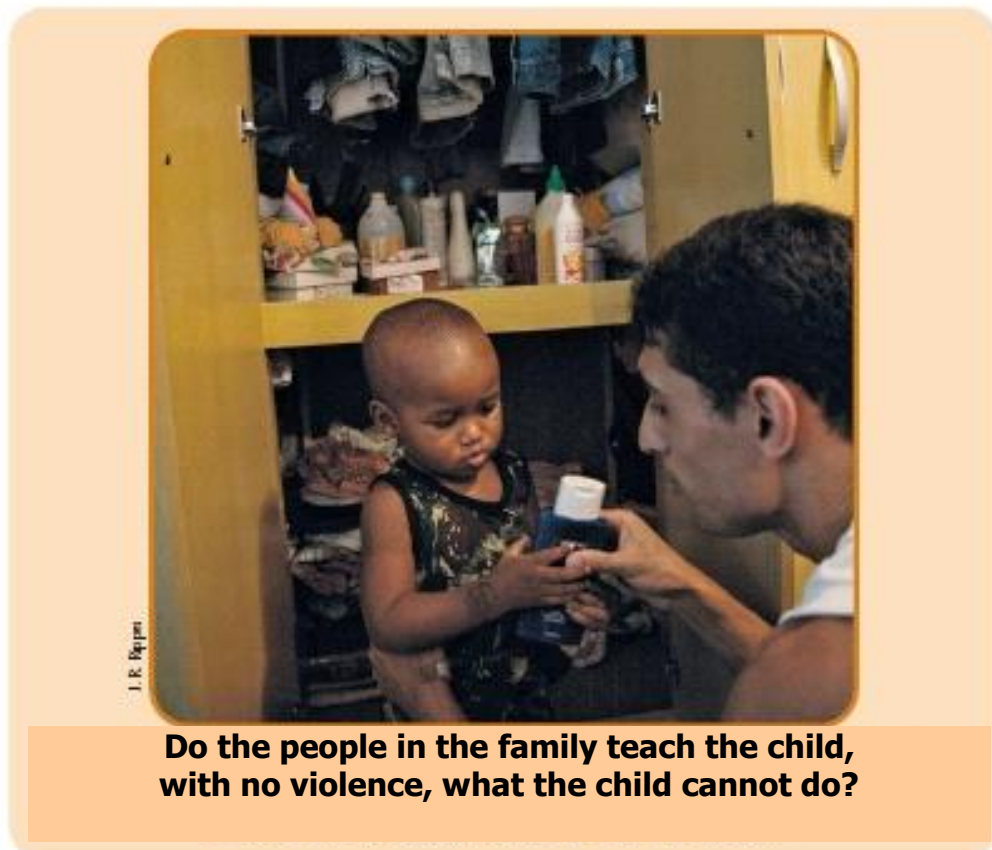
Talking and asking her/him why he/she is sad or happy helps the child to know his/her feelings and also to understand what other people feel. She continues to enjoy being cuddled, kissed, staying on the lap of the parents, especially when another brother or sister is born.



The child likes more and more to play with other children, but still fights for the toys, for he/she still thinks everything is his/hers. He/she says, "It is mine." to everything and gets angry when he/she does not manage to get what he/she wants. Talking to him/her to try to convince to change this way of acting/attitude is the best way to help the child to accept limitations.

The child needs space, for he/she is always moving around. He/she goes up and down from low heights, jumping with the two feet at the same time. She/he also likes to go out with the family, to play in the backyard or in the park with other children.

Attention: It is necessary to watch the children, at this stage, so they will not go out alone on the street. When the parents go out with them, they should hold them by the hand, to prevent accidents.

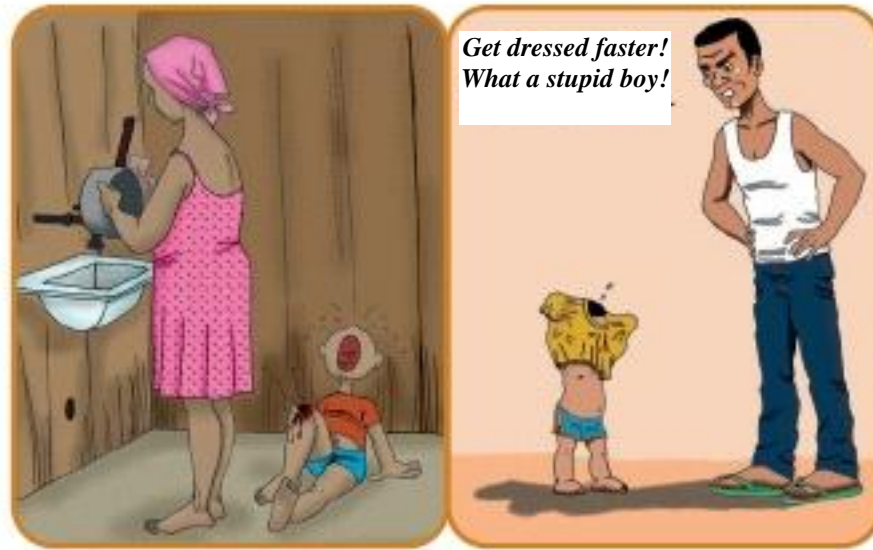


T

he child has already learnt to do many things and now wants to show that he/she has his/her own will. Therefore he/she says "no" to almost everything. His/her favourite answers are: "I do not want." "I do not go." He/she is also curious, asks a lot, wants to touch everything and go everywhere. Having to deal with all these situations, adults may lose their patience.

But the child needs to know his/her limits and to learn that certain things he/she should not touch, for he/she can get hurt, break, or because they belong to someone else. The adult should explain to him/her, calmly and firmly, but without violence, what he/she can and what he/she cannot do.

The child that learns by being spanked, also learns to spank and to beat. Beating is violence and shows that the adult has lost control of the situation.



Other forms of violence are also: not taking care of the child, not giving him/her attention when the child is crying, not talking to the child and frightening or threatening the child. Neglected, sexually abused or spanked children lose their confidence in people; they become shy, quiet or aggressive. When a child is raised with violence, he/she learns to live with violence.

The greatest part of aggression against children takes place at home and is done by members of the family. Many times violence happens because the family is going through a difficult situation; other times, because children get very naughty for lack of opportunity to play or because he/she does not receive much attention.

In each family, in each community, the people have, above all, the obligation to find together, through dialogue, solutions to protect their children from any type of violence. But, in very serious cases, of abuses and bad treatment, you should report it to the social service assigned to the area where you live or to any institution for child protection nearby.

*"Teach your child through dialogue, love and support
And be careful: for he who spansks to teach, is teaching to spank."*

4th Commandment for Peace in the Family.

Caring for the Nourishment of the Child

During meal times, the child also wants to show that he/she has his/her own will, choosing what he/she wants to eat. But the parents should encourage the child to eat a variety of foods, and give an example to the child by eating the same food too. Mealtimes should be celebrated. Therefore, it should be a quiet moment without fights/quarrels.

The child needs to be fed with all types of food:

- Grains such as rice, lentils, beans;
- Pastas, such as bread, macaroni;
- Varied vegetables;
- Fruits;
- Eggs and meats;
- Milk and its by-products (butter, curdled milk, yoghurt), for breakfast and at snack times.

Calcium prevents the absorption of iron. Therefore, it is better that the milk and its by-products are not offered to the children at lunch and dinner. Thus, the child can better absorb the iron contained in the meat, in the viscera and other foods, such as beans.

The families have more conditions to have a healthy eating lifestyle when they know better ways to take advantage of food, without wasting it. It is not always true that food that is bought already cooked, have more nutritious value than the homemade food.



At this age, most children have all their primary teeth (deciduous teeth or baby teeth). Now the child can already brush his/her teeth, but always with the help of an adult. He/she can use toothpaste, but in small amounts, for until the three years of age, he/she does not manage to spit all the toothpaste. The excess of toothpaste, when swallowed, can cause problems to the permanent teeth that still are going to appear.

Attention: Keep the toothpaste out of the child's reach, for there are children that eat the whole toothpaste tube at once.

During the day, the child can already control his/her wee and poop, but still can wet the bed at night. Therefore, it is good that someone always take the child to pee before going to bed.



The child learns to take care of the environment observing the example from the people he/she lives with. When in the community, there is portable water, proper drainage system or ditches and also right places to discard garbage, it is much easier to maintain a healthy environment.

The government also needs to offer clean and safe places, where people can walk, stroll and have leisure. The families have the duty to keep and take care of these places.

The care for plants and trees helps to keep the air pure and to protect water springs. To avoid water waste and fires, there should be environmental care actions and this responsibility also depends as much on the people, as on the public authorities.

Each one can contribute to the care of the environment. The daily small caring actions make the world a better place for everyone.

"Praised be You, My Lord, for our sister, mother Earth, which sustains and rules us, and produces diverse fruit and colorful flowers and herbs."

St. Francis of Assisi.

The Child at Three Years to Three Years and Eleven Months Old

How the child can learn and grow



Every time the child plays 'imagine that' s/he imagines situations in a different way. This type of play is very important because it comes from a basic need of the child: that of wanting that the parents always stay with him/her.

Through the play 'imagine that', the child imitates and speaks about what he/she sees. When he/she imitates the adults, s/he tries to speak like them and do what they do. Thus he/she starts to have attitudes and behaviours that are more advanced than those proper to her/his age, and this make him/her to develop.

Playing '*imagine that*' helps the child to develop his/her imagination and also to understand and learn values, the family habits and those of other people in the place where he/she lives.



Claudia Benfalia

The child likes to sing children songs and to learn songs that are taught to him/her or that he/she hears in the radio or in church. The child is also very interested in playing with musical instruments: drums made of cans, bamboo flutes and rattles. With the music, the child hears other types of sounds, learns a little about rhythm and melody.

The child also has to be given the opportunity to draw with pencil, charcoal on brick, paper or on the floor. Thus, he/she can learn how to hold the pencil and his/her drawing begins to show forms, such as small balls or squares.

The child also likes to look at books with pictures and to listen to stories that people tell and read to him/her.

Organizing a space during the Celebration of Life with toys and materials provides the child the chance to play and do activities together with other children.



Does the child have the opportunity to play with other children?

In plays with other children, the child already speaks in order to exchange or borrow toys, instead of fighting for them. These plays are good because the younger child imitates what the older child does and also teaches what he/she already knows to a child younger than him/her. The children playing together are always developing.

The child also learns, more and more through language. When the family members talk and reply to his/her questions, they are helping the child to speak better and to understand the daily things in life. At this age, the child asks the “why” of everything. “Why does it become night?” “Why do the church’s bells ring?”

The child can notice and also ask about the differences between boys and girls. “Why do the boys pee standing up?” “Why do the girls not have a “wee-wee”? Every family should try to answer according to their culture and values, without cheating or scaring the child.



While the child plays and takes part in his/her home activities, the child observes and asks about things. He/she learns that the objects can be equal and different. When the parents are, for example, separating the clothes to be washed, sewing, cleaning legumes and fruits, it is good to let the child help. Thus he/she can learn about sizes, shapes, quantities and colours.

Taking the child to church is part of his/her Christian education and shows that the family belongs to a group of people united by faith; such people are friends and help each other.

The family needs to have leisure, take the children to stroll and play, visit relatives and friends. It is good that the child has the opportunity to listen to storytelling, watch puppets shows, theater plays for children and participate in the community feast days. Thus, the child is able to learn and give value to what the people from the place he/she lives know how to do.

"Reserve moments to play and have fun with your family, for the child learns through playing and fun activities make people become closer to each other."

3rd Commandment for Peace in the Family



The child's appetite usually diminishes at this age. For the child to eat better during meals, it is necessary to avoid offering him/her biscuits, candy, salty snacks and soft drinks before the meals. A dish with varied food, besides being more nutritious and tasteful, is more colourful, beautiful and awakes in the child the desire to eat.

The child likes to go shopping with the parents, collecting the vegetables in the garden and preparing the food. In these opportunities the child also learns to appreciate healthy foods more.

A well-nourished child has better health and learns better.

The family provides good nourishment to the child when it:

- Arranges for varied, fresh and clean foods;
- Encourages and helps the child to eat;
- Gives example by eating a variety of foods.

Intoxication, Poisoning and Asphyxia

Children are very curious and accidents during childhood, mainly home accidents, are common and require a special attention from the parents or from those who take care of the child. Leader, it is recommended to talk to the family about safety measures to be taken to prevent those accidents from happening. A very important recommendation is to tell the parents that a child should not take care of another child, since the risk of an accident is much higher in this situation.

Some tips to avoid intoxications or poisonings are simple and can be applied daily. Instruct the family to:

- Keep cleaning products and medicines out of the child's reach;
- Never change the cleaning products from their original package to another package, such as plastic bottles. The child can get confused;
- When it is necessary to give medicine to the child, do not say that it is a candy or chocolate;
- Watch for plants that could be toxic.

Leader, if intoxication occurs, the family should go to the hospital immediately, taking together with them the product packaging of what caused the intoxication. Thus, the treatment is given faster and is more efficient. The family should not encourage the child to vomit, for there is the risk that the child may breathe it in and this may cause pneumonia.



In order to prevent asphyxia (suffocation), the parents should be instructed not to leave their kids unattended without an adult watching over them.

At home, soon after water is used, it is necessary to throw out the water from the buckets and all other containers. The washing machines or basins for washing clothes are also dangerous, as well as rivers and ditches. Therefore, it is necessary that the parents, or those who take care of the child, be very careful.

Leader, it is also recommended to talk to the family about the risk for the child to swallow objects or little bites of food, because if they go to the lungs, they can cause serious pneumonia. It is also recommended that the family watch for the ingestion of chewing gum, popcorn, candy, lollipops, and coins.



Jesus was very close to the smallest and the excluded ones, and always defended them. He was against those who cause scandal to children. He received and blessed them, touched them, hugged them and requested: *"Let the little children come to me; do not stop them; for it is to such as these that the kingdom of God belongs."* (Mark 10: 13-16)

Jesus also asked the disciples to become like children to enter the kingdom of God. He saw the children as an example for the adults. *"Anyone who welcomes a little child such as this in my name welcomes me; and anyone who welcomes me, welcomes not me but the one Who sent me."* (Mark 9:37). He confirmed that the small ones understood about the Kingdom even more than the wise doctors, because they are always open to welcome the others and learn more.

When the child is treated with love and respect, seeing good examples at home and in the community, he/she develops important attitudes and values for a true fellowship with other people in the community, such as solidarity, kindness, respect and responsibility.

In order to help the families to educate their children for peace, besides the *Leader's Guide*, the leaders of Pastoral Care for Children can count on a material called the "10 Commandments for Peace in the Family". This material is printed behind the cover page of this Guide and brings important reflections about how the parents and family members can act to build up an environment of love and peace around themselves.

Leader, this leaflet should be delivered and read with each followed up family.



*"And you parents, never drive your children to resentment but bring them up with correction and advice inspired by the Lord."
Ephesians 6:4*



The oral health depends on a good nutrition and on teeth hygiene. The parents need to take care of the child's mouth cleaning, brushing his/her after meals and after eating food with sugar and before going to bed.

The child needs to be taught to brush his/her teeth as follows:

- Brush the superior teeth in a up to down motion and the inferior teeth in a down to up motion; same should be done for the teeth in their inner and outer part close to the tongue and also the exterior part, near the cheeks
- Brush in a short circular motion the flat part of the back teeth or molars;
- Brush also very well the gums and the tongue.

The daily hygiene of the teeth can prevent the formation of caries and tooth decay, which cause pain and infections, affecting the health and the normal life of the child.

Now the child already knows how to take better care of his/her hygiene, but the parents' follow up is always very important. The nails also require attention. They need to be kept short and clean since if they are dirty they transmit germs when the child scratches himself/herself.

At this age, the child already knows how to take a bath and get dressed on his/her own. He/she learns hygiene habits when the family keeps the house clean, encourages the child to do his her own hygiene, verifies him/her and compliment him/her for doing so.

Children like pets. The contact with and care for pets can be a way of learning to have responsibility. But it is necessary to take some care with the hygiene of the animal and not let it sleep together with the child. Pets can also transmit diseases.

Home Visit

In these visits it is important to:

- Talk about the children’s development;
- Talk about food variety;
- Talk about the risks of accidents by intoxication/Asphyxia.

Answer the questions of the Leader’s Notebook.

14th Training Stage

To Evaluate and Celebrate

- What do the families think about the 10 Commandments for Peace in the Family?

Do you remember any message, prayer or a children song that celebrates this moment?

A suggestion is:

St. Francis of Assisi's Prayer:

*Lord, make me an instrument of your peace.
Where there is hatred, let me sow love.
Where there is injury, pardon.
Where there is disharmony, union.
Where there is doubt, faith.
Where there is error, truth.
Where there is despair, hope.
Where there is darkness, light.
Where there is sadness, joy.
O Master, grant that I may not so much seek
To be consoled as to console,
To be understood as to understand;
To be loved as to love;
For, it is in giving that we receive;
It is in pardoning, that we are pardoned;
It is in dying that we are born to eternal life.*

To See

The Four to Five Years and Eleven Months Old Child

- Do the families of your community consider important for their children to attend pre-school?
- When the municipality does not provide preschool for children, what can the families do to obtain this service?

The Four to Five Years and Eleven Months Old Child

How the child can learn and grow

At this age the child already manages to play, *'imagine that'* without using toys that are miniatures of the objects used by adults. For example: the girl says that she is going to give food to the her child, then imagines that she has a small plate in the hand and gives food to her doll. Or the boy imagines that he is the father in a truck. He catches something round, for example, and begins to drive.



The 'imagine that' game helps to develop the child's thought, which now is based on ideas and words. The child learns that he/she can think about something when he/she is speaking about it. For example, the child can say "car" and can think many things about it without seeing the car: its colour, the number of wheels, how to drive the car.

Imagination and thought based on ideas and words are important because they help the child to read and write.



Do the family members have the Opportunity to read to the child?

Reading, writing and counting are important knowledge for a citizen. The child begins to learn this in conversations, games and activities performed together with his/her family. When someone reads to him/her the Bible stories, stories from books, magazines or letters from relatives, he/she is helping the child to understand that written things communicate ideas and news. This can help the child to get interested in learning how to read.

The child keeps on being curious. He/she can, for example, ask where the babies come from, mainly when the mother or someone that she knows is pregnant. It is good to answer only what is asked in a very simple way and with no lies.

The child likes to listen to the parents telling stories about the family and friends. He /she likes when they speak of things they give value, like their work, their religion, and their dreams. Thus, s/he learns also to tell his/her stories and talk about his/her things and have his/her own dreams.



Most children like very much to draw. When the parents value their drawing, the child feels capable, happy and encouraged to draw more.

Almost always the child does not draw what he/she sees, but what he/she knows about things and what he/she thinks is more important about the objects.

Now, the child can already draw forms that look like the sun, dolls and houses. The child learns that, through drawing, he/she can tell something to another person. Therefore, drawing also helps him/her to learn to read and write.

The child now knows how to speak, think, and feel, using many words and longer phrases. Answering to the child's questions and listening to the child's opinions is a way to show your attention and respect for her/him.



Do the family members show or invite the child to participate in their activities?

The child continues to do certain home activities together with the adults such as: playing of sweeping the floor or washing some clothes, giving food to the animals. The child likes very much to learn what the parents do at work. When the child can participate in the activities together with the parents and older siblings, he/she learns to help the others, feels more capable and begins to understand the value of work for people.

When the child is about five years old, he/she likes to take part in games in which rules have to be followed. For example, the dominoes – in which the domino pieces have to be grouped in equal quantities; in the hopscotch – in which one has to wait for his/her turn to play and cannot jump stepping on the line. It is recommended that the adults play with the child. Thus they can, for example, teach the child to respect others and get along well with them.

The contact with plants and animals make the child learn and respect nature. But the family needs to teach the child about dangerous animals, such as snakes, spiders, scorpions and show the plants which are poisonous so that the child protects him/herself from them.



Attention: In case the child is attacked by an animal, the spot injured should be washed with water and soap and the child checked to know if it is necessary to take oral rehydration salts or a vaccine. If the child ingests a poisonous plant, he/she should be taken immediately to the doctor.

The family should be cautious with strangers in the community, trying to know who they are and what they do. It is necessary to teach the child not to follow or go to the home of people that the family does not know.

It is recommended that the family teach the child the name of the place where they live and the full name of the parents. In doing so, in case the child gets lost, he/she does not get so scared and can show where her house is.

It is necessary that the family watch the child so he/she will not play with fire or run out on the street. When the child is away from home he/she can be run over by a vehicle, can get drowned in lakes, rivers, ditches, pools and can also be kidnapped.



Nowadays, most of the families have television sets at home. The children, since very early, watch not only programs made for them, but also the adult programs. This varies from family to family. The television is therefore, one of the sources from which the children receive information and examples of behaviour.

To understand to what he/she is watching, the child needs to find in the family, moments to talk and play about what the television shows.

Is still not known in what the television helps and in what it does not the child development. What is known is that watching TV many hours a day may bring harm to the child: it is not recommended that the TV replaces playing and talking with the child.

PRE-SCHOOL



Does the child attend the pre-school?

As a four years old, it can be important that the child attends pre-school. A good pre-school should have a pedagogic approach that takes into account how the child lives, learns and develops. It should allow the child to learn to live with the others practising dialogue and respect among people. For that the school needs to provide:

- Teachers and other well qualified professionals;
- Proper food, hygiene and resting places;
- Places for open air activities;
- Toys of various types, different games; musical instruments, sound system, cd players, cds, books, story books, magazines, newspapers;
- Materials such as pencils, paints, glue, scissors, paper, modelling clay, recycled material.
- Pedagogic activities;
- Building with proper premises for the children to do the educational activities, to eat, do their hygiene and rest.

The pre-school should give the opportunity to the child of sharing his/her activities and knowledge with other children and adults and to participate in activities in which reading and writing are used.



When the family takes part of the activities, attends school meetings and has meetings with the pre-school professionals, it is contributing for the pre-school education to meet the real needs of the children.

The pre-school is part of the basic education and is the municipality's duty to provide it.

In places where there are no pre-schools, the Pastoral Care for Children Leaders and other community organizations, together with the families, can get organized to try to obtain from the municipality government this service, which is important for the children's learning and development.



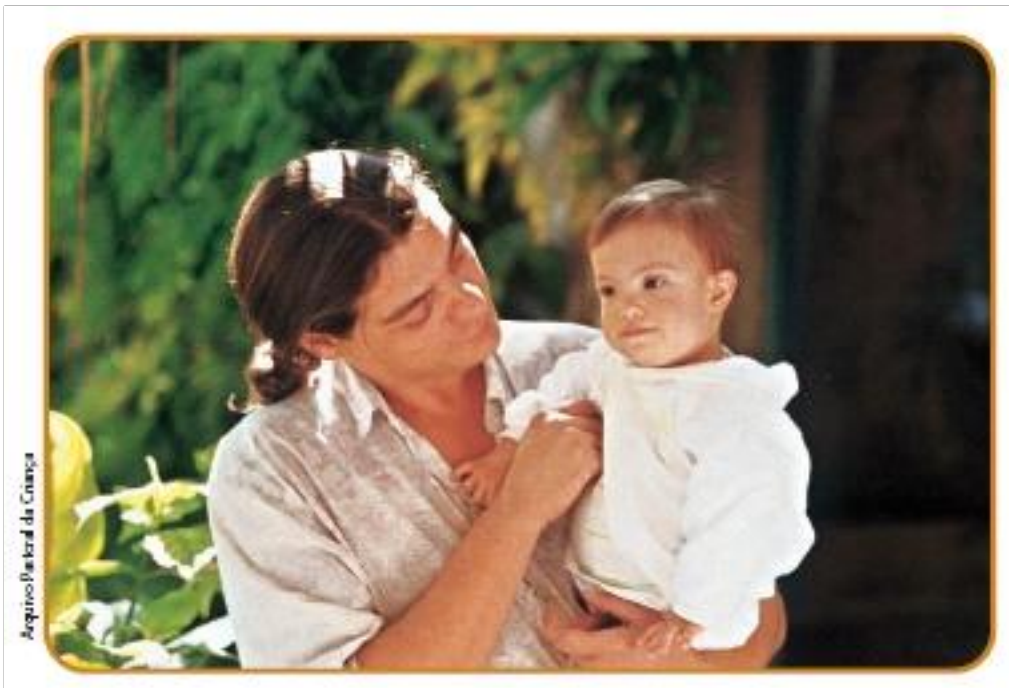
When there is a favourable environment for development, the child can develop because he/she participates in the activities done together with the people he/she likes and who like him/her. These are day to day activities and are done where he/she lives. Therefore, they make sense to him/her and are important for his/her life.

If the child lives in the countryside, he/she has more opportunity to learn to how to take care of animals, to ride on horses. If the child lives in the city, he/she has more opportunity to learn to watch TV, to ride on a bus. If the child lives in a family of faith, he /she learns to love and respect God and her/his neighbour.

Every child will learn, on his/her own way and pace what the people teach him/her. When the child is encouraged and helped by the adults and by other older children to do what he/she still does not know how to do, he/she learns it. The child does not develop alone.

*"My child, pay attention to what I am telling you,
listen carefully to my words; do not let them out of
your sight, keep them deep in your heart."
(Proverbs 4: 20-21)*

Physically Challenged Children



Leader, on the follow up you make of the families, you can also meet some children physically challenged. For example, they may not see, listen, speak or not manage to move. You can also find children with serious diseases, such as cancer, diabetes, among others.

Above all they are children, with the same needs that every child has; to be loved, to communicate, to play, and to learn. Therefore, the persons who take care of them need to find different ways to meet the needs of these children.

You, leader, can help to find in the community, people that can instruct the families and, if necessary, provide special treatment. The sooner this is done, the better it will be for the child. But the best treatment does not replace the love and acceptance from the family.



The family of a child, bearer of a serious disease or physically challenged, needs to learn how to deal with this situation. Leader, you can support the parents and the family members, helping them to accept and love the child as he/she is, encouraging them to create the proper conditions and opportunities for the child.

When a family receives a child with some malfunction in is/her body, it should not only turn exclusively to what the child cannot do, but also to what he/she can do. For example, the child may not be able to speak, but can communicate by gestures. In this case, the important thing is to meet the child's need to communicate.

Likewise, a child that is in bed because of a serious disease can have his/her need of playing met if people play with him/her in bed.



Parents and family members should take advantage of the home activities to create ways of including the child in these activities: the bathing time, change of diapers, food preparation and washing of clothes. Taking into consideration the characteristics that the child presents, act with him/her not in his/her place.

But this is not enough. The family needs to truly commit to live with the child. Apart from the home routines, it is necessary to include the child in all social activities of the family; for example, going shopping, going to church, going to parties or festivities. In these activities it is necessary to stimulate the child to take part, but, mainly, to encourage other people to invite the child to participate in the activities, making him/her feel challenged to do the things on his/her way and feel integrated in the group. When you, leader, encourages that, you are contributing for this child not to be excluded.

What makes a child deficient is to withdraw him/her from the intimacy of the family, from other children and from the people of the place he/she lives.

Year 20____	Month and that the data refer to	→				January	February		
5.	Child's age (age of the child this month)					2 months	3 months		
6.	Did you visit this child this month?					Y	Y		
	Is the child breast-fed?					Y	Y		
7.	Was the child weighed this month? (note the weight)					4,900	5,700		
8.	Did the child gain weight this month?					Y	Y		
9.	Is the child undernourished? (below the -2 curve)					N	N		
10.	Is the child overweight? (above the +2 curve)					N	N		
11.	Did the child have diarrhea this month?					N	N		
12.	Has the child had diarrhea, taken home serum and has the mother insisted on feeding the child during diarrhea period?					—	—		
13.	Which opportunities and achievement indicators were reached this month?	1	2	3	4	1	2	3	4
		N	N	N	Y	N	N	Y	Y
14.	Do the indicators of question 13 denote an unfavourable situation for the child's growth (no indicator was reached)?					N	N		
15.	All the opportunities and achievement indicators reached?					N	N		
	In case the child has been sick this month, note down the disease					—	—		
16.	Has the child been taken to the Health Center? (for vaccination, routine check or because he/she was sick)					Y	N		
*17.	Was the child taken to the Health Center attended?					Y	—		
18.	The children are complete with vaccine for their age?					Y	Y		
19.	In which pregnancy month is the pregnant woman?								

Regarding the Indicators of Opportunities and Achievements, differences will also be noticed. For example, in the case of a blind child or one who have lost his sight, the indicators directly referring to the sight cannot be reached. In this case, the leader shall always answer [N] (No) to the indicators of achievements that depend on the sight.

This child may also have some difference in the way he/she walks in comparison with other children. Then he/she can also reach other indicators in an age and in a way different from the other children who do not have any sight problem. This happens because the organs and functions of our body depend on each other. A blind child will learn to walk, to touch and use objects in a different manner from other child that can see.



The indicators are important because they give us clues to help in the promotion of the child's development. But, as any other indicators, they have limitations; they cannot handle all the situations. You, leaders, will have to find the best way to talk about the indicators and help the families in the specific case of these children. One way can be by indicating a specialized assistance. The area coordinator can give you support on that.

Many people say they do not feel prepared to interact with physically challenged children. But this preparation happens when the parents and the family members try to find out and experiment the best ways to live and help the child so that he/she can develop. This is a challenge. And, to face such a challenge, it is very important for the parents to know that they can count on the support from other people like you, leader.

It is the mission of everyone who works in Pastoral Care for Children to give value to the families so they acknowledge their own capacity to take care and educate their children. It is necessary, above all, to try to understand each family, comment on their good practices, improving their knowledge about the cares and the upbringing of their children, trying to support them whenever they need. This is a concrete manifestation of Love!

Feeding



The care with the food should continue throughout the child's development. Then it is important that the family eats properly, for the child will eat what the parents eat.

Feeding is also part of the child's upbringing, and his/her life will know more happiness and health when he/she learns to eat at a proper meal time, not to leave food on the plate, to share the food, to chew properly and to eat fruits. And all this he/she learns together with the family.

The children can participate in the food preparation helping in the easy and non dangerous tasks such as that of washing vegetables, getting condiments from the garden or helping to choose fruits in the market. Thus, they get to know more about the regional foods where the family lives and naturally learns to like healthy food.

For a good eating education, some tips can help, such as:

- Talk in the home visits how important and educational is to set up a time for the meals, but without being too rigid not to transform these moments, which should be pleasant, into a moment of agitation and stress;
- Remember that the healthy food is also more tasty when prepared and served with love;
- Prepare colourful dishes which can catch the children's attention and awake their appetite;
- Encourage the mother not to give up at the first, "I do not like this" or fear the child's grimaces and disapproving faces. Patience and dedication are precious in teaching eating habits. The child has all the right to refuse, like he/she has of trying again;
- Remember that there is no need to add sugar in the juices, milk and teas. The taste the child feels on the tongue is not the same of the adult's taste;
- For mothers of children who need to follow a diet, instruct them on how educational is to agree with the child the food he/she is going to have and talk to him/her about the reasons in avoiding some types of food and eating others.

Leader, encourage the family to make use of some small spaces in their garden/backyard to grow seasonings and green leaves.



At this age, it is possible that the child is missing some of his reinforcing vaccines (booster doses). These are very important to provide a complete protection against diseases.

See in the Leader's Notebook if there are booster doses for children at this age

Home Visit

In these visits it is important to:

- Talk about the child's development;
- Encourage a food variety;
- Talk about accidents prevention.

Answer the questions of the Leader's Notebook

Homework Suggestion for this Training Stage

Organize a sharing group with the families to interchange experiences about the cultivation of condiments and green leaves, which are the ones giving taste to the food at home.

15th qualification stage

To Evaluate and Celebrate

- How was the sharing with the families of experiences on cultivation of condiments and green leaves?

Do you remember any message, reflection or prayer that celebrates this moment?

A suggestion is:

Prayer of the Pastoral Care for Children Leader

Here I am, Lord, for You have called me to do the arduous but beautiful work of community leader of Pastoral Care for Children, in the church, in the communities,

in the families, for most needed of attention, love, tenderness,

Welcoming and zest for life.

Lord, You have entrusted me with the mission of proclaiming Your word of life and denouncing the signs of death, of witnessing with my own life the Gospel values for all " to have life and life in fullness."

Great is my responsibility, but I trust in the grace of the One who chose me and is Faithful. Bless o Lord, my hands, my feet, my eyes, and all my senses.

Make me an expression of Your love, of Your patience, of Your goodness, humbleness and mercifulness, so that I learn to see beyond the appearances, of situations and human realities and find You in every mother, in every child, in the family, in the community and in every defenceless being

Who cries for more life, justice and dignity.

Walk with us, Lord, so we can make of Pastoral Care for Children a live and permanent memorial of Your presence and mission close to the children, and the poorest of the poor.

Amen.

The Mission of Pastoral Care for Children

To Walk with Jesus



In the beginning of our training we thought about the reality of our country and we saw that not everything is according to the will of God.

Together we studied the proposal of Pastoral Care for children to face the challenge to save lives and contribute for the creation of a favourable environment to all children's development, particularly to those who come from the poorer families.

Each one of the participants of this training program is already part of the great family of Pastoral Care for children.

How did that happened?



A person becomes part of the family of Pastoral Care for Children when he/she puts into practice his/her faith and goes after the children and the pregnant women of the community. Just like St. James says: *"How does it help, my brothers, when someone who has never done a single good act claims to have faith? You see now that it is by deeds, and not only by believing, that someone is justified."* (James 2:14-24)

In the beginning of the training program, we went to the encounter of pregnant women. With them we learnt and also shared what we had learnt during the training program. Like this we continue our training following Jesus and always putting together Faith and Life.

But it is not good that the leader works alone, for Jesus *"summoned the Twelve and began to send them out in pairs"* (Mark 6:7).

Two by two indicates that the mission is a community service and that Jesus' followers should help each other in their tasks. In Pastoral Care for Children, each leader should search for a support person in the community to accomplish her/his mission with the families.

To Stay with Jesus

Jesus gathered a group of twelve apostles *"they were to be his companions and to be sent out to proclaim the message, with the power to drive out devils."* (Mark 3: 14-15)

Stay with Jesus means to be united with Him, committed to Him and to His project of Life for all.



To preach is to proclaim the good news of Jesus: He came to bring life in fullness to all people. In Pastoral Care for Children we announce the good news by helping the pregnant women and their families to perceive their dignity of children of God. Inasmuch as we create conditions for the children to develop, they acquire dignified conditions of fullness life and make Jesus project come true.

In the Bible the expression expel demons means to release the people from all alienation; that is, help them to think on their own. In Pastoral Care for Children we help the families to think and act everyday more and more by themselves and to perceive that they are capable of renewing their own community.

Mission Challenges

Jesus knew about the difficulties that His apostles had to understand His proposal, His mission. The Gospel of Mark tells, that after the miracle of the loaves, the disciples "*had not understood what the miracle of the loaves meant; their minds were closed.*" (Mar 6:52).

Still in the Gospel of Mark we see that the disciples: do not know who Jesus is, do not understand His work, do not understand His new Ethics and still discuss among themselves to know who among them would be the greatest.

There were moments in which Jesus' words found a great resistance. Many disciples said "*This is an intolerable language. How could anyone accept it? After this, many of his disciples went away and accompanied him no more.*" John 6: 60-66

But all these problems of Jesus with His disciples, in a certain way, were not as grave as their abandoning Him on the occasion of his passion and death: we know how Peter denied Christ three times (Luke 22:61).



After His death, Jesus appeared to the disciples and “*He reproached them for their incredulity and obstinacy, because they had refused to believe those who had seen Him after he had risen.*” (Mark 16.14).

In some moments, we can have the same temptation of the disciples: quit following Jesus because we find it too difficult to implement His plan. Those are the moments of dispersion and discouragement. In those moments we need to think and talk about the causes of our discouragement.

Many can feel insecure to do the work and think that it is above his/her strength. Others can get discouraged because the work in the community does not progress and some leaders are already abandoning their tasks. It is there that they can be tempted to abandon Jesus: maybe this is the time in which He and other leaders most need you.

There can still be discouragement among the leaders because they are doing a work without noticing God’s presence, like the disciples that did not understand the purpose of Jesus’ mission as Messiah.

How to overcome these challenges? Where can you find strength to face these challenges?



The Strength that Comes from Above

In Pastoral Care for Children, the strength for our journey comes, mainly, from the Christian Spirituality, which is based on:

- Faith in God One and Triune, that is, in God the Father, in His son, Jesus, the Saviour and Redeemer, and in the Holy Spirit;
- the constant communion with the Church, the family of God's children;
- a continuous process of conversion and following of Jesus Christ.

The spirituality that puts together action and prayer, faith and life, in the work of Pastoral Care for Children, helps us to perceive the wonders God does in our environment. We can praise and thank God with prayers, psalms, and hymns and also with the achievements obtained in the service of Christian Charity.

God is love. In Him we find the strength to continue the journey!

Like the disciples, many of us may not feel completely prepared to act in favour of the families of our community, to fulfil the mission of bringing life in fullness to everyone. But is it necessary to feel sure that Jesus is present among valuable people, who make themselves available to continue His project. Jesus accompanies us still today, like He accompanied His disciples during the time he was with them. (Cf. Mark 16,20).

The Strength that Comes from our Brethren

To do is to know. At the Home Visit, in the Celebration of Life and at the Evaluation and Reflection Meetings we learn more every day.

In performing the activities and continuing with the training, that is, going deeper and getting updated, exchanging experiences about family situations, we get every day more confident and prepared. Thus, we have more chances to find out how to contribute to the families' promotion, because the reality we find is very challenging and requires continuous updating. Action and qualification help us to feel more capable and efficient.

The continuous updating is a right of the leaders of Pastoral Care for Children. This training updates happens, privately, by means of area coordinators, and of trainers of Pastoral Care for Children. The training updates can also be done during the Meeting for Reflection and Evaluation and in other moments. In this training update is included the study and deepening of topics from the Leader's Guide, trying to tackle specially those subjects where the leaders have more doubts. In the webpage of Pastoral Care for Children www.pci.org.br you can find texts available for the study of the leaders.



Thus, Pastoral Care for Children's Work, weaves a network, in each community, among the people who are involved in it: leaders, families, coordinators and trainers. All of them form a community network of support, solidarity and love to neighbour.

How is this solidarity network organized?

Organization of Pastoral Care for Children

The mission of Pastoral Care for Children is to continue Jesus' project who with His transforming presence, announced hope for a world more human and filled with solidarity:

"I came for all to have life and life in fullness." (John 10:10)

According to the Statute, the Child's Pastoral has as objective to contribute to the promotion of children's development from the moment of their conception, and because of them, also for their families and communities promotion.

Thus, Pastoral Care for Children mission is the same mission of Jesus which is also the Church's mission, the mission of all Christians and also that of people who want to journey with it and help to promote better life for many children and their families.

The to do its work, Pastoral Care for Children organizes itself into several coordination levels, making use of the Catholic Church structure, formed by dioceses, parishes and communities.

Let us see which are these coordination?

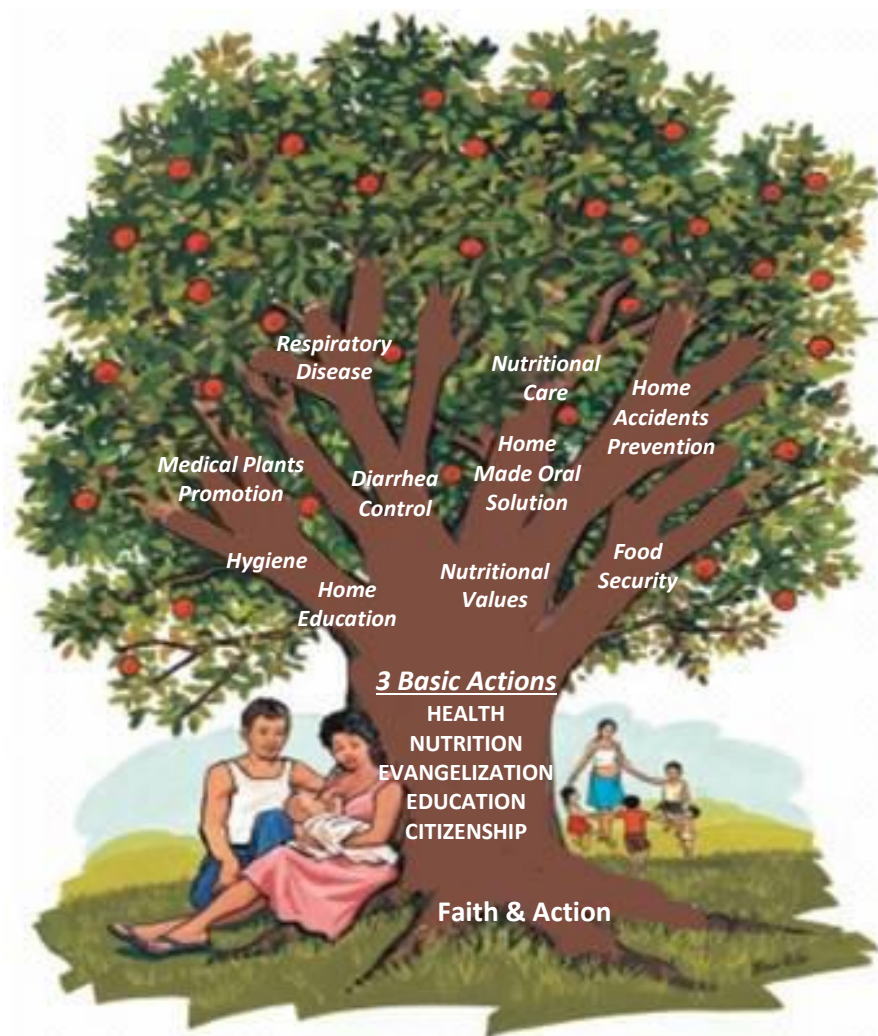
- Community Coordination, exercised by one of the community leaders;
- Area/Parish Coordination, responsible for several communities of the same parish. In big parishes, there can be two or more areas;
- Diocese/Sector Coordination, responsible for several areas. It is always connected to a diocese. In big dioceses, there can be one or more sectors;
- National Coordination, created to give support to the Pastoral Care for Children work in the whole country.

In Pastoral Care for Children, The Catholic Church, has a responsible person for the Pastoral Care for Children in each coordination level. In the community coordination and in the area/parish coordination the responsible is the priest of the parish where Pastoral Care for Children work is implemented; in the sector/diocese Coordination, the responsible is the Bishop of the Diocese; and in the national coordination it is a bishop whom we call Pastoral Director.

The coordination work in Pastoral Care for Children is a service, like Jesus taught us, when He spoke to his disciples: "*You know that among the gentiles those they call their rulers lord it over them, and their great men make their authority felt. Among you this is not to happen. Anyone who wants to become great among you must be your servant, and anyone who wants to be first among you must be the slave of all.*" (Mark 10: 42-44)

Leaders, with your work, you are united to the people who work and have already worked in Pastoral Care for Children. Thus, you make grow the seed that was planted in 1983 and that was transformed into a big tree.

In this tree, the root that sustains it is the union of Faith and Life; the trunk is formed by the Basic Actions of Health, Education, Nutrition and Citizenship; the branches are the Complementary Actions and the Optional Actions; the fruits are the results achieved in the communities.



*"... if the root is holy, so are the branches think:
it is not you that sustain the root, but the root that sustains you."
(Romans 11:16-18)*

Leader, you are already finishing your training program on the Leader's Guide. You are a special person. You have chosen to do a work that requires commitment, dedication and a great love for your neighbour. But, you and the other leaders of your community are not alone. You are part now of the great network of love, solidarity, citizenship and peace of Pastoral Care for Children!

You are Jesus' disciples, because you have accepted his Word, his Person, and his Project.

The performance of everyone, in Pastoral Care for Children, and especially of you, leaders, is a continuous option for bringing life in fullness for children and pregnant women.



*"They praised God and were looked up to by everyone.
Day by day the Lord added to their community those destined to be saved."
Acts 2:47*

Sending Off Celebration

In Pastoral Care for Children we celebrate Jesus presence in the sacraments, in the spreading of the Word, in the service of fraternal charity to our brothers and sisters. We celebrate His Word that comes to us through the Bible, prayer and commitment to work with children, pregnant women and their families.

The Celebration is like the sun that spreads light and hope, illuminating and stimulating all those who are united in the same Mission: *"I came for all to have life and life in fullness."* (John 10:10)

The creativity of each group that gets together to celebrate makes the celebration of faith to be renewed every day, always generating new fruits of peace, justice, solidarity and fraternal charity through dialogue among everybody.

You, who are a leader of Pastoral Care for Children, with your knowledge and courage to work, you are sent to help the children and the families of your community. Together with the parents and other people of good will, you can change and improve the life on the children and pregnant women in your country.

You, leaders of Pastoral Care for Children, are of great worth before people and before God!

*"I heard the Lord's voice, saying,
"Whom shall I send, and who will go for us?"
Then I said, "Here I am. Send me!"
(Isaiah 6:8)*

Homework Suggestion for this Training Stage

Organize, together with your community, a Sending Off Celebration, according to the experience and reality of the leaders of this Training Stage.



PASTORAL DA CRIANÇA

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