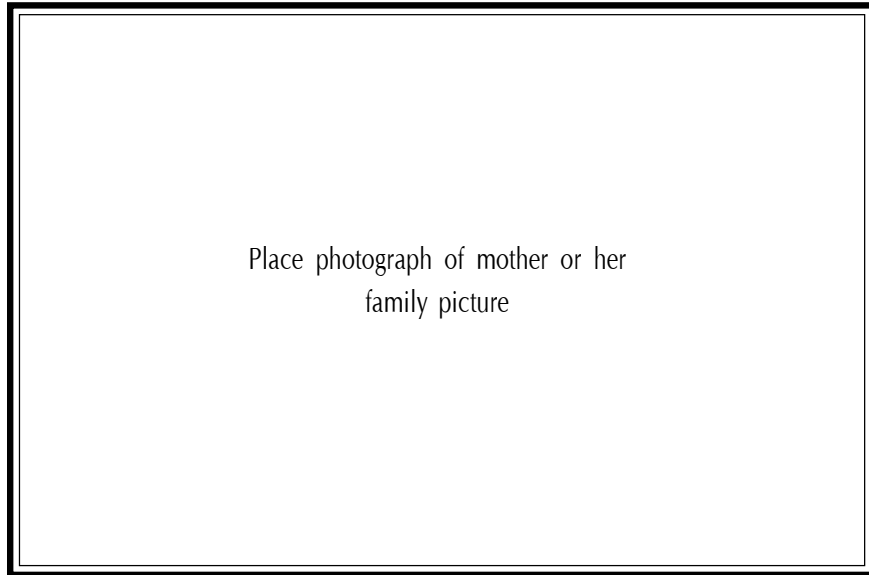


MOTHER AND CHILD BOOK



Family Serial no. _____



Place photograph of mother or her
family picture

Name of Mother: _____ Blood Type: _____

Educational level: _____ Occupation: _____

Name of Father: _____ Blood Type: _____

Educational level: _____ Occupation: _____

Name of Child: _____ Birth Date: _____

Address: _____
(House No. Street Purok Barangay Municipality/City/Province)



Health Record During Pregnancy

This pregnancy is special, so I will make sure that I get the best care for me and my unborn child.

Here are some important information regarding my health:

Age (yrs. old): _____

Weight (kgs.): _____

Height (cms.): _____

Body mass index: _____

Last menstrual period: _____

Expected date of delivery: _____

Age of pregnancy: _____

This is my : _____ pregnancy
(number)



Previous Pregnancies

No. of pregnancies/yr.	1	2	3	4	5	6
Normal (N) or Cesarean Delivery (CD)						
Miscarriage (Y/N)						
Stillbirth (Y/N)						
Bleeding during pregnancy or after delivery (Y/N)						
Assisted delivery (forceps, etc.). Specify						
*Y = Yes N = No						



Present Pregnancy									
Trimester	1 st			2 nd			3 rd		
Month	1 st	2 nd	3 rd	1 st	2 nd	3 rd	1 st	2 nd	3 rd
Date of Visit									
Age of pregnancy (months)									
Weight in kg.									
Blood pressure									
Temperature (C°)									
Height of abdomen (in cms.)									
Fetal Heartbeat (per minute)									
Vaginal bleeding (Y/N)									
Urinary tract infection (Y/N)									
Pallor or anemia (Y/N)									
Abnormal presentation (Y/N) (not head presentation)									
Swelling of face and hands (Y/N)									
Vaginal infection (Y/N)									
Lab. Test results (e.g. Hgb, urine, VDRL)									



Warning Signs During Pregnancy

If I experience any of the following warning signs, I should immediately seek consultation at a health facility. Put a check (✓).

- Swelling of the legs, hands and/or face
- Severe headache, dizziness, blurring of vis
- Vaginal bleeding
- Pallor or anemia
- Fever and chills
- Vomiting
- Fast or difficult breathing
- Severe abdominal pain
- Vaginal discharge
- Painful urination
- Watery vaginal discharge
- Convulsions
- Absence of/or reduced fetal movements
(less than 10 kicks in 12 hours in the
second half of pregnancy)





Past and Present Illness/Health Problems		
Please put a check (✓) on the appropriate column.		
Health Problems/Illness/Unhealthy lifestyle	Past (✓)	Present (✓)
Tuberculosis (14 days or more of cough)		
Heart diseases (shortness of breath)		
Diabetes (high blood sugar)		
Hypertension (high blood pressure)		
Bronchial Asthma		
Urinary tract infection		
Smoking		
Alcohol intake		
Malaria		
Parasitism		
Goiter		

Immunization Record		
Tetanus toxoid immunization	Date Given	When to return
1 st dose – as early as possible during pregnancy		
2 nd dose – at least 4 weeks later		
3 rd dose – at least 6 months later		
4 th dose – at least 1 year later		
5 th dose – at least 1 year later		



Be sure to get the complete 5 doses of tetanus toxoid for your lifetime protection against tetanus. This will also protect the baby in your womb (and your future babies) against neonatal tetanus.



Treatment and Other Services check (✓) if done									
	1	2	3	4	5	6	7	8	9
Date									
Iron folate (no. given)									
Vitamin A 10,000 I.U. (starting on the 4 th month, 2x a week)									
Malaria prophylaxis (endemic areas)									
Dental check-up									
Breast examination									
Sputum Exam (if with signs/symptoms of tuberculosis, cough more than 14 days))									
Advice on newborn screening, breastfeeding, proper nutrition and reduced work load									
Deworming									
Date of next visit									



Other Problems Identified and Actions Taken		
Date	Problems	Actions Taken



It is important to begin care as early in the pregnancy as possible. Visit the health center at least 4 times during the pregnancy, even if you do not have any problem.



Some Helpful Tips I Should Remember



I will eat foods that are rich in protein, iron and calcium.



I will practice oral and personal hygiene. I will visit my dentist regularly.



I will start breast care in preparation for breastfeeding.



I will not resort to self medication for this can harm me and my baby



I will make sure to receive tetanus toxoid immunization to protect myself and my baby.



I will prepare for possible emergency (money, blood donor, transportation).



My Development Inside My Mother's Womb



Mama, this is your month by month guide on how I am growing inside you. Anything you eat or do may affect my growth and development.



0-4 weeks

I already have the beginnings of my brain, a simple spinal cord and marks where my face will be. I measure about 2mm in length. **Look at beautiful scenes and pictures. Avoid any medications or drugs that can affect me.**

4-8 weeks

My heart begins to beat around six weeks, and all the other organs start to develop. Facial bones form, my eyes and eye color develop, and my fingers and toes appear. **Listen to sweet and soothing music. You need to eat food rich in protein, calcium, iron, zinc and folate. What you will eat also provides nutrients for me. However, do not eat more than you should or you may gain excess weight.**



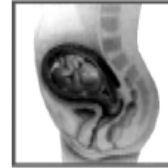
8-12 weeks

My major organs are now formed. My head is large compared to the rest of my body to accommodate the rapidly growing brain. I have a defined chin, nose and eyelids. I float in the amniotic fluid. I will be kicking gently. **Don't forget to take your iron with folate supplements daily. Take time to relax and have some fresh air. Avoid salty foods as this will cause swelling around your feet, ankles and fingers.**



12-16 weeks

My legs are longer than my arms. My lungs are developing and my heartbeat can be heard by ultra sound. I have facial expressions, and eyebrows and eyelashes grow. I can turn my head and open my mouth. The hair on my head coarsens and develops its color. **Consult a health worker right away if you have some health problem. Eat a well-balanced diet.**



16-20 weeks

I am more coordinated now, although my growth has slowed a little. I can suck my thumb and I respond to the sound of your voice. My taste buds develop and I can differentiate between sweet and bitter flavors. I am developing fingerprints and my body is covered with fine hair called "*lanugo*." **Talk to me. Play beautiful music and promise to give me breast milk. Take regular light exercises.**

20-24 weeks

My body is still thin, but now in proportion with my head. My bone centers are hardening. My genitals are developed, my nostrils open, and I make breathing motions. I have developed sleep patterns. **Take a rest, as I would like to rest too. Talk to me at least 15 minutes daily. Let me feel your love for me. Listen to sweet and soothing music everyday.**





24-28 weeks

I am now preparing myself for birth. Fat builds up under my skin, my head hair grows, my eyelids open and my brain is more active. I can hear a lot now, including internal and external noises. I can recognize your voice, and my heartbeat will quicken when you speak. **Take care, cause I want to be born as a full term baby. Please reduce your work load and start eating calorie-rich food.**

28-32 weeks

I am now perfectly formed. I can see light through your abdominal wall, making me blink. I move around less as I put weight. My lungs are not fully mature yet, but I have a good chance of survival if I am born now. **Let Dad touch your abdomen and tell him to talk to me.**



36 weeks

I am ready for birth by practicing my breathing, sucking and swallowing. The fine downy hair on my body has gone. My intestines is filled with meconium (first bowel movement) which I will pass in the first two days after birth. My head has now dropped into your pelvis ready for birth. It could be any day now. **Be sure that you are prepared for my coming.**



Baby Care Routine

I am already advised on the following baby care routine:

- Keeping my baby warm, through skin to skin contact “kangaroo care” or wrapping him with a blanket immediately after delivery.
- I should wash hands thoroughly with soap and water before and after handling my baby especially after touching the bottom.
- Sponge bath my baby everyday until the cord falls off, then I give him full bath.
- Leave the cord uncovered until it dries. I will not put anything on the cord. The cord will come off at approximately 7-10 days.
- I should immediately bring my child to the Health Center or hospital if the cord smells or the navel turns red.
- I will keep my baby away from smoke and other hazardous substance.
- I should breast feed my baby frequently and for longer periods.
- I will bring my baby to the hospital if:
 - My baby refuses to feed
 - There is a foul smelling discharge in the cord
 - My baby feels hot when touched
 - Convulsions occur





Birth and Emergency Plan

I know that any complication can develop during delivery. I know that I should deliver my baby in a health facility.

I will be attended at delivery by _____
Name of doctor/nurse/midwife or others. Specify.

I plan to deliver at _____
Name of hospital/health center/clinic.

This is a Philhealth accredited facility _____ Yes _____ No

The estimated cost of the maternity package in this facility is P _____
 (inclusive of newborn care).

The mode of payment is _____

The available transport is _____

I have contacted _____ to bring me to the hospital/maternity clinic/health center.

I will be accompanied by _____
Name

_____ will take care for my children/home
Name while am in health facility.

In case of a need for blood transfusion, my possible donors are:

Name Address

Address

Name Address

Address

In case of complications, I will be referred right away to:

Contact person: _____

Address: _____

Tel. No.: _____



Preparations for Giving Birth

I already made necessary preparations for giving birth. These are the things I will be using during delivery.

I will not forget to bring this Mother and Child Book.

For Myself

- Set of skirt and blouse or loose dress with front opening
- Panties/bra
- Bathrobe
- One set of casual clothes
- Towel
- Brush/comb
- Maternity sanitary napkins
- Shampoo/soap
- Toilet paper
- Toothbrush/toothpaste
- Slippers

For My Baby

- Baby blanket
- Baby clothes
- Disposable diaper
- Bonnet
- Mittens or gloves
- Socks
- Safety pins
- Mild baby soap

These are the things I prepared for my baby at home

- Crib with mattress
- Baby pillows
- Mosquito nets
- Soft wash cloths
- Cotton balls
- Diapers (cloth/disposable)
- Baby blankets/sheets
- Socks
- Bonnet
- Waterproof sheets
- Baby tub/basin
- Safety pins
- Cotton buds
- Soft towel
- Mittens/gloves
- Baby clothes
- Bib



Labor and Delivery



Initiation of breastfeeding and immediate skin to skin contact within 30 minutes after delivery will help establish breastfeeding and mother-to-child bonding.

I started to experience labor pains _____ (time) on _____ (date)

I delivered my baby alive on: _____

Date of delivery: _____ Time: _____

Type of delivery: _____ Place of delivery: _____

Attended by : _____

Partograph use: _____ (attach)

What I observed with my baby after delivery

	Action Taken
<input type="checkbox"/> Spontaneously cried out	_____
<input type="checkbox"/> Did not cry at once	_____
<input type="checkbox"/> Body, hands and feet are pink	_____
<input type="checkbox"/> Body, hands and feet are blue	_____
<input type="checkbox"/> Strong	_____
<input type="checkbox"/> Weak/no movement	_____
<input type="checkbox"/> Normal breathing	_____
<input type="checkbox"/> Abnormal breathing/not breathing	_____

My baby is:

Sex: _____ Birth Weight: _____

Length: _____

Head circumference: _____ Chest circumference: _____

Abdominal circumference: _____ APGAR Score: _____



MOTHER AND CHILD BOOK



You can become pregnant within several weeks after delivery, if you have sexual relations, and is not breastfeeding exclusively.

Talk to a health worker with your husband/partner, about choosing a family planning method, which best meets you and your partner's needs.

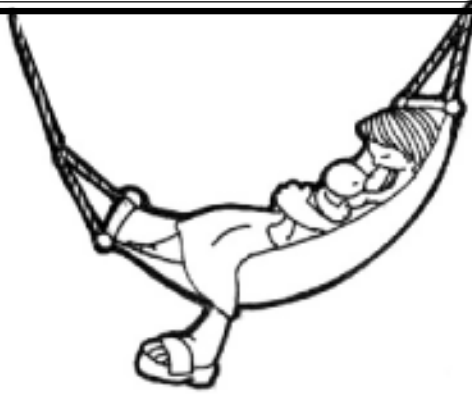
Family Planning				
Date of follow-up	Date of visit	Method	Quantity given	Remarks



Postpartum Care Within 42 Days				
	24 hours	1 week	2-4 weeks	Beyond 4 weeks
Date of visit				
Exclusive breastfeeding (with no other food or water up to 6 months) (Y/N)				
Fever > 39 (Y/N)				
Foul smelling vaginal discharge (Y/N)				
Excessive bleeding (more than 500 cc of blood) (Y/N)				
Pallor (Y/N)				
Baby's cord OK?				
Vitamin A 200,000 IU (once within 60 days after delivery) (Y/N)				
Iron/Folate tablet Date/quantity (up to 3 months)				



Take a bath daily. Change sanitary pad every 4 to 6 hours. You should be seen by a health worker 4 times after delivery based on the schedule above.



A Mother's Glory

***The greatest gift a woman can have
is to experience what is to be a mother.***

***The throbbing of a new life in the
womb bring mixed emotions of
excitement, fear and anxiety.***

***After a nine-month journey comes
the ecstasy of giving life to a
beautiful bouncing baby.***

***Alas, the pains are gone.
And the glory of
being a mother begins...***



My Birth Record

Place your baby's picture here

Name: _____ Nickname: _____

Type of delivery: _____

Place of delivery: _____

Attendant at birth: _____

Birth weight: _____ Length: _____

Head circumference: _____ Chest circumference: _____

Birth registered on: _____ at: _____
(date) (place)



This is my personal diary. It contains record of the essential health services I need for survival and growth. Important events and milestones in my growth and development should be recorded here.

***I have a right to a name
and nationality.***

***Register my birth at the
Local Civil registry.***





What I Need During the First Few Weeks after Birth



Always keep me warm. The best way is through skin-to-skin contact by placing me on your abdomen (before cutting the cord or on your chest after the cord has been cut) after birth for at least two hours. Cover me with soft cloth.

Make sure that eye prophylaxis is applied to my eyes to prevent infection and subsequent blindness.



To keep me warm, immediately wipe and wrap me and delay bathing for at least 24 hours.

Keep me always at your side or within your reach. Always keep me warm by wrapping me with a blanket. I love the way you keep me in your arms.

Start to breastfeed me within the first thirty minutes after birth. This will help you produce more milk. I know that your breast milk alone is the best food for me up to six months of age.

Do not give me any artificial milk or water.



If you have difficulty in giving me your breast milk, consult a health worker nearest you.



Take care of my cord.
Wash your hand before and after cord care.

Wash the cord only when soiled. Use boiled water that has been cooled and mild soap for cleaning. Allow it to air dry. Do not wipe with any cloth to avoid infection.

Do not bandage my stump or abdomen. Do not apply any substance or medicine to my cord stump.

You should seek immediate care if my umbilicus is red with pus or blood.



On the 2nd day, bring me to the hospital for newborn screening.

Date: _____ Health facility: _____

Result: _____



Have your newborn screened for congenital metabolic disorders to prevent mental retardation and possible death.



My Immunization Record

Immunization protects me against several infectious diseases. If I am not immunized, I am more likely to get sick, become undernourished, become disabled, or die. All immunization should be completed before my first birthday.



Bring me to a health facility on the scheduled dates.

	At birth	6 weeks	10 weeks	14 weeks	9 months
BCG					
DPT					
OPV					
HBV (Hep B)					
AMV (Measles)					

Vitamin A Supplementation

I should start Vitamin A supplementation when I reach 6 months and have Vitamin A supplementation every 6 months thereafter.

My deworming should start when I am 12 months old and be regularly dewormed every 6 months thereafter.

There are many services that the health center should give me. Please bring me there regularly.



Feeding Recommendations



From birth to 6 months of age, I should only have breastmilk with no other food, including water. Newborns like me should be breastfed 10 to 12 times a day, or as often as I want, for around 15 minutes on each breast at each feeding.

From 6 months up to 12 months, I should be breastfed as often as I want, and to be given complementary foods to satisfy my needs. Give me adequate amount of *lugaw* with added oil or select from any of the following variety of foods:

- Mashed vegetables, *monggo*, potato or camote
- Pulverized roasted dilis or flaked fish
- Chopped meat or chicken
- Egg yolk
- Steamed tokwa
- Fruits like banana, mango and avocado with added oil or mayonaise



Give me these foods 1 or 2 times per day after breastfeeding, gradually increasing to 3 times per day. I also need nutritious snacks like *tabo*.

**From 12 months up to****two years, I still want to be**

breastfeed often. Give me

adequate amount of family

foods like rice, camote,

potato, fish, chicken, meat,

monggo, steamed tokwa,

pulverized roasted dilis, eggs, dark green vegetables (malunggay,

squash) fruits (banana, papaya). Add oil or margarine. Please

feed me 5 times per day. I would prefer my own serving in a

separate plate or bowl. Make my eating a pleasurable and

learning experience by being there with me.

**From two years onwards, I can eat a variety of foods. Give**

me three meals per day from the prepared family food. Give

me nutritious foods between meals, such as boiled yellow

camote, boiled yellow corn,

peanuts, boiled saba banana,

taho, fruits, fruit juice twice

daily. Don't forget to give me

at least a glass of milk daily.





Tips



Here are some tips for making eating time a learning time for your child.

- *Name the utensils, foods and colors*
- *Show your child some things that are small and some things that are big*
- *Talk to your child about how to tell the taste of the food*
- *Let your child touch and pick up the food*





Checking My Growth and Development

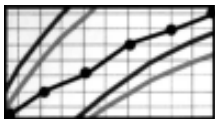
I am a growing child. Please make sure that I grow and develop the way normal children of my age do.

Keep track of my growth by having me weighed regularly—that is every month from birth up to 2 years of age and quarterly from 2 years to 6 years of age.

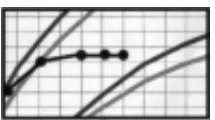
My weight as well as other important events should be plotted on the growth chart because these events may contribute to my losing or gaining weight.

On the growth chart you will see these events with their corresponding codes.

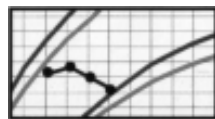
How to interpret my growth chart



My weight should be between the “line” curves. The plotted growth curve should go in an upward direction. This means I am growing well.



I am not gaining weight if plotted growth curve “flattens off” like this between the “line” curves. My growth follows this pattern, if I have been sick or not getting or eating enough food.



A plotted growth curve that goes downward or declining looks like this. This is a serious matter, so please bring me to a health facility or hospital.



MOTHER AND CHILD BOOK

growth chart





My Baby Teeth

My baby teeth are important because:

- These act as guide for the growth of my permanent teeth
- These help me to eat well
- These stimulate my jaw to grow
- They play a major role in my proper speech development especially the FRONT TEETH

Caring for My Teeth

Please check if my tooth eruption meets the schedule below:

UPPER TEETH



TEETH	AGE	(✓)
Central incisor	6 months	<input type="checkbox"/>
Lateral Incisor	10 months	<input type="checkbox"/>
Cuspid	18 months	<input type="checkbox"/>
First Molar	14 months	<input type="checkbox"/>
Second Molar	24 months	<input type="checkbox"/>

LOWER TEETH



During the First 6 Years:

- Clean my gums and tongue with clean cloth, gauze or cotton soaked in cooked boiled water at least once a day.
- Teething starts at 5-6 months. Give me hard biscuits to relieve the pain and discomfort caused by teething.
- As soon as my first tooth erupts, start brushing it using a soft bristled toothbrush and toothpaste with fluoride.
- As I grow, teach me to brush my teeth properly after every meal.
- Encourage me to eat vegetables and drink fruit juices and milk.
- Don't let me use teethingers or pacifiers for these can cause mal-alignment of my teeth or deform my jaw.
- Give me sweets occasionally but always make sure that I brush my teeth after eating to prevent dental caries.
- Discourage thumb sucking, lip biting, teeth grinding, nail biting and tongue thrusting as this develop into undesirable habits and improper growth of my teeth.
- Bring me to the dentist when all my temporary teeth have erupted.

6 Years Onwards:

- My milk teeth starts to loosen and fall out giving way to the eruption of the permanent teeth starting at 6 years old.
- Let me continue proper brushing of teeth after every meal.
- Let me continue eating nutritious foods and avoid junk food.
- Bring me to the dentist 2 times a year for check up and treatment. If available, the dentist will put sealant on my teeth when I am about 5-6 years old.
- At age 12, all my milk teeth are replaced with permanent teeth.
- My set of permanent teeth is completed when I reach 17-22 years of age.



Proper Toothbrushing



It is important to teach your child proper tooth brushing techniques to prevent tooth decay. You may teach the following techniques:

1. Brush outer part of the upper teeth from the gums downward.



2. Brush outer part of the lower teeth from the gums upward.



3. Brush inner part of the upper teeth from the gums upward.



4. Brush inner part of the lower teeth from the gums upward.



5. Using the short back-and-forth stroking "scrubbing" motion, brush the upper chewing surfaces of the teeth.



6. Brush the lower chewing surface of the teeth.



7. Brush the tongue.



8. After brushing, use dental floss to clean in-between the teeth.





An Early Childhood Screening Tool

(Adopted from Coordinator's Notebook, an International Resource for ECD)

- **You and your husband or other caregivers who are part of the child's daily life can do this level of screening.**
- **Your child may have a problem in these areas when he or she presents any of the following behaviors.**
- **If your child is identified to have problems, you should immediately see a health worker.**



The following is a simple screening tool which you, your husband or any caregivee can use. Place a check (✓) mark in the appropriate box if you observe the child yo have this difficulty. Remember to immediately consult a health worker if a problem has been identified.

HEARING – If your child:

- Does not turn towards the source of new sounds or voices
- Has frequent ear infections (discharge from ear, earache)
- Does not respond when you call unless he can see you
- Watches your lips when you speak
- Talks in a very loud or soft voice
- Does not talk or talks strangely

SEEING – If your child:

- Often is unable to find small objects which he or she dropped
- Has red eyes or chronic discharge from eyes, a cloudy appearance to eyes, or frequently rubs eyes and says that they hurt
- Often bumps into things while moving around



- Holds head in an awkward position when trying to look at something
- Sometimes or always crosses one or both eyes (after 6 months of age)

TALKING – If your child:

- Does not say *mama/mommy/nanay* by 18 months of age
- Cannot name a few familiar objects or people by age 2
- Cannot repeat simple songs or rhythms by age 3
- Is not talking in short sentences by age 4
- Is not understood by people outside the family by age 5
- Is talking differently from other children of the same age

UNDERSTANDING - If your child:

- Does not react to own name by age 1
- Cannot identify parts of face by age 3
- Cannot answer simple questions by age 4
- Cannot follow simple stories by age 3
- Seems to have difficulty in understanding things you are saying, when compared to other children at the same age

PLAYING – If your child:

- Does not enjoy playing waving games by age 1
- Does not play with common objects (e.g. spoon and pot) by age 3
- Does not join games with other children by age 4 (e.g. catch: hide and seek)
- Does not play like other children of the same age

MOVING – If your child:

- Is unable to sit unsupported by 10 months
- Cannot walk without help by age 2
- Cannot balance on one (1) foot for a short time by age 4
- Moves very differently from other children of the same age



Developmental Milestones



At 4 Months of age

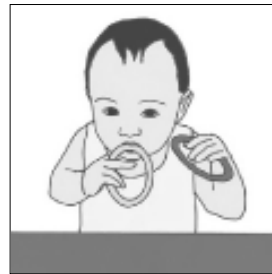
I am able to appreciate bright colors, follow moving objects with my eyes, smile and recognize your voice and your face.

I am fond of gurgling and making vocal sounds, lifting my head and laughing. My smiles are special for Mommy and Daddy.

Show me bright colored objects, talk to me, give me more space to play to stretch my arms and legs.

At 8 Months

I can turn over, hold my head erect and sit up-right. I can reach for objects and put these in my mouth. I am starting to learn about the people and things in the space around me. I can differentiate between family members and strangers.



Let other members of the family hold and carry me. This is the best time for me to learn to talk to another person.

Let me reach for and touch clean, safe and colorful objects.

Give me safe colorful toys in different sizes and shapes that I can play with.



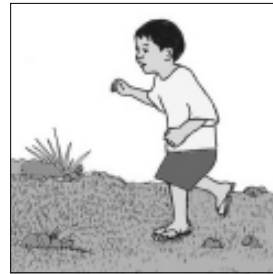
12 Months

I recognize and search out people. I can sit alone and stand up without help. I can say meaningful words. Talk to me and teach me the name of things around me. Speaking to me will encourage language acquisition.

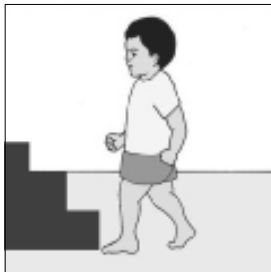
Give me the chance to walk and run actively around but under your watchful eyes. Please be more patient and understand that this is my way of learning.

At 24 Months

I may stumble at first but wait till I am 20 months old when I can run and steadily climb up the stairs. I can enjoy stories and experimenting with things.



Read to me stories. Spend some time talking to me. I can now understand what you are saying and I can follow simple directions.



At 2-4 Years

I can walk up and down the stairs, pedal three-wheeled bicycles, gain control of hands and fingers. This is the right time I want to do everything by myself. I will prefer encouragement even if I don't do well. Don't be too negative about my likes



and dislikes, insistence or egoistic demands, but listen to me first. I will appreciate it if you will explain to me your reasons for your decisions. This is the best opportunity for me to learn sharing, cooperation and helping.

Enroll me in the day care center nearby where I can socialize with friends.



Around 5-6 Years old:

I can draw pictures using my own imagination and can distinguish colors. I can button my shirt and tie my own shoe laces. Let me dress myself even if takes time. I will begin to pronounce words more clearly and smoothly by listening and talking to me with slow and correct

pronunciations. I will probably have close friends and acquire social skills. Help me to play with friends on good terms, keeping promises and rules. It will be good for me to have a housework. I will assert my independence and therefore I will need help in learning how to control my own behavior.



Give me more opportunities for play and exploration and help with some tasks. These are skills that I should learn to help me get ready for formal school.

Encourage me to be independent but set limitations to prevent untoward incidents. Doing this early in life will make me healthy and disciplined.



Practical Tips to Ensure My Safety



I am a growing child. I need proper care and guidance to achieve optimum health. Nevertheless, sometimes accidents may happen no matter how careful you are. These may often lead to trauma, both physically and emotionally, or death. Prevention plays a very important role in promoting my safety. It is certainly much cheaper and relatively easier to undertake. Follow these simple guidelines to minimize the occurrence of accidents.

- Never leave me alone without an adult supervising me.
- Let me sleep on my crib.
- Let me sleep in a prone position or on my side.
- Never leave me to bathe alone until I am 6 years old.
- Never toss me around.
- Keep me out of direct sunlight to avoid skin burn.
- Keep matches, lighted candles, and hot liquids away from me.
- Keep kerosene, medicines, caustics and insecticides away from me.
- Never smoke or allow someone to smoke near me.
- Keep small and sharp objects away from me.
- Keep plastic bags away from me to avoid suffocation.
- Keep me away from electrical outlets and cords.
- Never leave water on a bucket or tub.
- Install safety locks on cabinets, drawers and wooden cribs.
- Install side guards on beds.
- Always let me use a seatbelt when in a car.
- Never allow me to play on street.
- Never leave me alone inside a vehicle.
- Never allow me near swimming pool, ponds, rivers without adult supervision.



I am a Healthy Growing Child

I:

- was exclusively breastfed up to 6 months and continued to be breastfed up to 2 years of age
- started eating complementary foods at the age of 6 months
- am fully immunized
- received Vitamin A supplementation regularly every 6 months
- received my first deworming at age 12 months and have my deworming every 6 months.
- eat nutritious food
- have good set of teeth because of my regular visits to the dentist
- have weight which is within normal range
- have no delays in my growth and development
- do not have any form of disability (specify if with disability)
- can express myself freely
- play and interact with other children
- attend a day care school/pre-school

***I am now ready for School.
Please enroll me in Grade 1.***



My Rights as a Child



- To be born, to have a name and nationality
- To have a family who will love and care for me



- To live in a peaceful community and a wholesome environment
- To have adequate food and a healthy and active body
- To obtain a good education and develop my potential



- To be given opportunities for play and leisure
- To be protected against abuse, exploitation, neglect, violence and danger



- To be defended and given assistance by the government
- To be able to express my own views.



Promote the Convention on
the Rights of the Child.
Build Child-Friendly Communities !





A Child's 10 Commandments to Parents

1. My hands are small. Please don't expect perfection whenever I make bed, draw a picture or throw a ball, My legs are short. Please slow down so that I can keep up with you
2. My eyes have not seen the world as yours have. Please let me explore safely, don't restrict me unnecessarily
3. Housework will always be there. I'm little for such a short time – please take time to willingly explain things to me about this wonderful world.
4. My feelings are tender; please be attentive to my needs. Don't nag me all day long (You wouldn't want to be nagged for your inquisitiveness). Treat me as the way you want to be treated.
5. I am a special gift from God. Please take care of me as God intended you to do—holding me accountable for my actions, giving me guidelines to live by and explaining to me in a loving manner. Please go easy on the criticism. Remember, you can criticize the things that I do without criticizing me.
6. I need encouragement and praise, but not your criticism to grow. Please go easy on the criticism; remember, you can criticize the things that I do without criticizing me.
7. Please give me freedom to make decisions concerning myself. Permit me to fail so that I can learn from my mistakes. Then someday I'll be prepared to make the kind of decisions life requires me.
8. Please don't do things over for me. Somehow that makes me feel that my efforts didn't quite measure up to your expectations. I know it's hard, but please don't try to compare me with my brother or my sister.
9. Please don't be afraid to leave for a weekend. Kids need vacations from parents, just as parents need vacation from their kids.
10. Please take me to church regularly, setting a good example for me to follow. I enjoy learning about God.