

## CHAPTER 12

# Caring for your baby



The constant attention and care a new baby needs can be very tiring and frustrating. Almost all mothers rely on family, friends, neighbors, child-care workers, and teachers to help.

Some women with disabilities will learn quickly to take care of a baby. But if your disability means you need help with your daily work, you will probably also need help caring for the daily needs of your baby. Newborn babies need to be fed and changed often. So do not get discouraged if you need to ask for help. All new mothers get assistance if they can to help with the baby.

No matter how much help you may need, you are still your baby's mother. Allowing someone to help you care for your baby does not make you any less of a mother. Even when you ask another person to be your eyes, ears, arms, or legs, you are the one deciding about how to meet your baby's needs, her safety, and her well-being. That is what a mother does. Keeping the baby close to you, day and night, so she can see your face, hear your voice, and feel and smell your body, will assure that your baby knows who her mother is—you!

*My baby knows I'm his mother. He doesn't even notice I have a disability.*



## BUILDING A RELATIONSHIP FOR LIFE

The relationship a baby develops with her mother or main caregiver affects the baby's physical and emotional development. As a close relationship is formed, a baby learns to find security in it and it will be easier for the baby to form new relationships with other people later on. While other family members can help you look after the baby, it is important for you to be recognized as the main caregiver so you can form this deep bond with your baby.

### ***Women who have trouble learning or understanding***

Many women who have trouble learning or understanding are good mothers. You can discuss with your family what things you may need help with to be a good mother to your baby.

### ***Things to think about***

Small babies need to be fed and cared for day and night, and you will not be able to get much sleep. So even though your baby will probably wake you up several times during the night, and you will most likely feel very tired during the day, your baby will still need to be taken care of. Will you be able to ask for help to:

- keep the baby clean.
- know when the baby needs medical care.
- measure medicines, if necessary.
- make sure the baby is safe from:
  - falling.
  - getting burned.
  - animals.
  - poisons.
  - swallowing something and choking.
  - accidents that may break a bone or cut the skin.



If you can breastfeed, there will be no need to prepare formula. But if you do not breastfeed, you will need to make sure bottles are clean and the formula or alternative milk is prepared properly.

## Breastfeeding the baby

If possible, breastfeed your baby. Colostrum, the first yellow-colored milk that comes out of the breasts for the first 2 or 3 days after birth, is the best possible food for the baby. It is good for the baby's stomach, has all the nutrition a new baby needs, and protects against disease. Babies who breastfeed as often as they want **do not need herbs or teas or sugar water**. If possible, give your baby nothing but breast milk for the first 6 months. If it is too difficult to breastfeed your baby, remove the milk from your breasts by hand (see pages 257 to 258) so it can be fed to the baby by another method.



**Breast is best!**

Feeding a baby breast milk is important because:

- breast milk is the perfect food to help a baby grow healthy and strong.
- breastfeeding helps the mother's womb stop bleeding after birth.
- breast milk passes on to the baby the mother's defenses against illnesses such as diabetes and cancer, and infections like diarrhea and pneumonia.
- breastfeeding helps the mother and baby feel close and secure.
- breastfeeding can prevent some women from becoming pregnant again during the first 6 months (see page 199).
- breast milk is free.

Most women with disabilities can breastfeed their babies. Some disabled women need help holding the baby in a good position. Others may not produce enough milk. Some disabilities make women feel too weak and tired. You must decide for yourself whether or not you can breastfeed your baby.

### HOW TO BREASTFEED

Most babies are born knowing how to suck. But they may need help getting enough of the nipple in the mouth. The baby should have a big mouthful of the breast with the nipple deep inside.

This baby has a good mouthful of breast.



This baby does not have enough breast in its mouth.

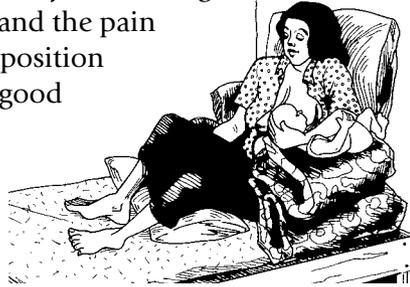


## HOW TO HOLD THE BABY

Breastfeeding can be painful at first. But if the baby is in the right position, you will get used to the baby's sucking and the pain should go away. If it does not, try changing your position or the baby's position. Make sure the baby has a good mouthful of the breast. If breastfeeding is still painful, talk with a health worker. There could be another problem.

Most women learn to breastfeed their babies by watching other women in the family and community. If another woman in the community has your disability and is already a mother, ask her for advice.

Many disabled women can breastfeed their babies if they find a comfortable position.



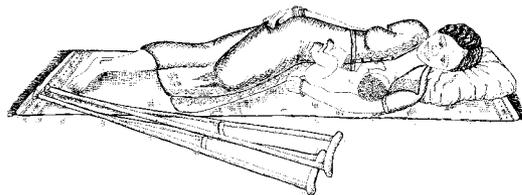
Some women find breastfeeding easier if they sit in a chair or bed where they can lean back a little and also support their arms. It also helps to rest your feet on something. Make sure the baby is well supported too.



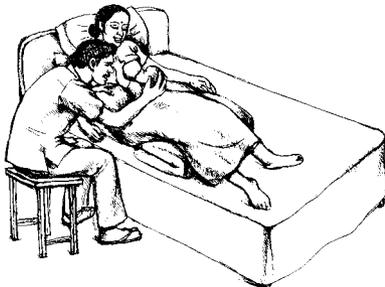
Use pillows or some rolled-up cloth under the baby.

**If you have good use of your arms and upper body,** you should be able to breastfeed the baby with no problems. Make sure the baby, especially the baby's head, is well supported and that you sit or lie in a position that is comfortable for you.

**If you have limited use of your arms and upper body,** try to find at least one comfortable position for breastfeeding. Ask someone to help you if necessary. Here are some suggestions:



Many women find it easier to lie on their sides with their babies beside them supported by pillows or rolled-up cloth.



**If you cannot use your arms and upper body,** you can breastfeed with help from family members or friends. Explain to them how to position the baby so that you can breastfeed. If necessary, ask them to hold the baby in position, especially the baby's head. Even though you are not holding the baby in your arms, the baby will still be able to see your face and feel the warmth and familiar smell of your body.

If it is difficult for you to hold your breast, wear a bra (brassiere) with a wide hole cut around the entire nipple. You may be able to buy a 'nursing bra' made to support the breasts and with a way to cover and uncover the nipple for breastfeeding. Or you can wrap some cloth around your chest and across your breast with a hole cut out to expose the nipple. You can also tie a length of rolled-up cloth around your upper body under your breasts.

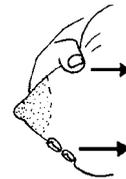


## If you cannot breastfeed

If you are unable to breastfeed your baby, you may be able to remove milk from your breasts by hand and feed it to your baby using a bottle or a cup. If you cannot remove the milk by yourself, ask someone you trust to help you.

### ***How to remove milk by hand:***

1. Wash a jar and lid with soap and clean water, and leave them in the sun to dry. If possible, pour some boiling water into the jar and then pour it out just before using it. This will kill germs in the jar and keep the milk safe for the baby.
2. Wash your hands well.
3. Put your fingers and thumb at the edge of the dark part of the breast (areola), and press in toward the chest.
4. Gently press the fingers together and roll them toward the nipple. Do not pinch or pull the nipple. Removing milk should not hurt.
5. Move your fingers all the way around the areola so the milk can come out of the whole breast. Do this with each breast until it is empty.



At first, not much milk will come out, but with practice, more will come. If possible, try to remove milk every 3 to 4 hours, at least 8 times in 24 hours to make sure there is a good supply. You can usually remove more milk if you are in a quiet, calm place and feel relaxed. Thinking about your baby while you remove your milk may help the milk flow for you. If it is hard to start the flow, try putting warm, moist cloths or towels on your breasts and massage them before trying to remove the milk.

You may be able to get a breast pump to help you remove milk more easily. Some clinics and medical centers loan or rent out electric pumps. They may also sell simple hand pumps at low cost.

### **Warm-bottle method to remove milk**

This method may work best if the breasts are too full or very painful. This may happen right after birth, or if you get a cracked nipple or a breast infection. If you cannot hold your breast or the bottle, ask someone you trust to help.



1. Clean a large glass bottle that has a 3 to 4 cm wide mouth. Warm it by filling with hot water. Fill it slowly so the bottle does not break. Wait a few minutes and then pour the water out.
2. Cool the mouth and neck of the bottle with clean, cool water so that it does not burn you.
3. Fasten the bottle mouth over your nipple so that it makes a seal. Hold it firmly in place for several minutes. As it cools, it will gently pull the milk out.
4. When the milk flow slows down, use your finger to loosen the seal around the breast.
5. Repeat on the other breast.

3 to 4 cm  
wide



### **How to store breast milk**

Keep your milk in a clean, closed container. You can store milk in the same jar used to remove the milk. Keep the milk in a cool place away from sunlight.

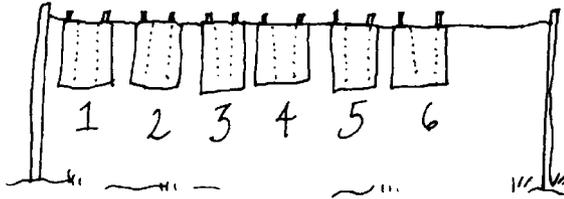
You can keep milk cool by keeping the container in cool water, or burying the closed container in wet sand, or keeping it wrapped in a cloth that is kept wet all the time. Cool breastmilk will keep for about 12 hours.

If you have a refrigerator, keep the milk there. Milk can be kept in a glass jar in a refrigerator for 2 or 3 days. The cream in the milk will separate, so before giving it to the baby, shake the container to mix the milk. Then gently heat the container with the milk by putting it in a pot of hot water. Test the milk to make sure it is not too hot by shaking a few drops onto your arm. The milk should not be hot, but should feel the same temperature as your skin.



The container can be stored longer in a cool place such as a clay pot with cool water in it.

**WARNING!** Milk that cannot be kept cold will spoil and should be thrown out. **Spoiled milk can make a baby very sick.**

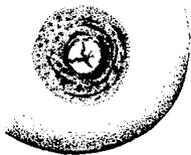


The baby is getting enough breastmilk if he gains weight and passes urine at least 6 times a day.

## Problems with breastfeeding

### PAINFUL BREASTS

Pain in the breast can be caused by a sore nipple or breasts that get very full and hard. The pain will often go away in a day or two. It is important to keep breastfeeding the baby even if it hurts, and to let the baby suckle often. It also helps to change the baby's position each time she nurses.



#### Sore or cracked nipples

Sore or cracked nipples can develop when the baby sucks only the nipple instead of taking the nipple and part of the breast into her mouth when she is breastfeeding (see page 255).

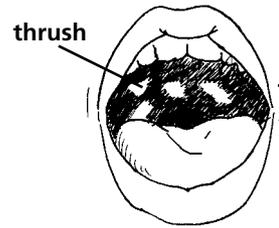
#### **Prevention and Treatment:**

- Let the baby feed as long and as often as she wants.
- When the baby has stopped feeding, squeeze out a few drops of milk and rub them on your nipples.
- Do not use soap or cream on your breasts, unless you have an infection. Your body makes a natural oil that keeps the nipples clean and soft.
- Avoid tight or rough clothing.
- If the pain is too great when the baby suckles, remove your milk by hand and feed the baby with a cup and spoon. A crack in your nipple should heal in 2 days.
- Do not let your breasts get hard and overfull. If you have more milk than the baby can drink, cover your breasts with warm cloths or towels and empty your breasts by hand (see pages 257 to 258) after the baby is full. After a few weeks your body will usually make just the right amount of milk, and your breasts will not get too full.



## Thrush

If a baby is in a good position while suckling and you still have pain in the nipples that lasts for more than a week, it may be caused by thrush (a yeast infection on the nipple or in the baby's mouth). Your nipples may itch or you may feel a stabbing, burning pain. The baby may have white spots or redness in her mouth. She will be fussy if her mouth hurts.



Thrush can lead to sore and cracked nipples and breast infection. Both mother and baby should be treated.

### *How to treat thrush*

Mix gentian violet (see page 344) and water to make a 0.25% solution. For example, if you have a solution of 1% gentian violet, mix 1 teaspoon with 3 teaspoons of clean water.



Use a clean cloth or a finger to paint your nipples and the white spots in the baby's mouth once a day for 5 days. Gentian violet will stain clothing and will turn the baby's mouth and your nipples purple—this is normal. You should keep breastfeeding. If the thrush does not get better in 3 days, stop using gentian violet and get medical advice.

## BREAST INFECTION (MASTITIS)

Painful breasts and sore or cracked nipples can lead to an infection inside the breast.

### *Signs:*

- Part of the breast becomes hot, red, swollen, and very painful.
- Fever or chills.
- Lymph nodes in the armpit are often sore and swollen.
- Abscess (painful lump in the breast) that sometimes bursts and drains pus.



**Treatment:**

Keep breastfeeding frequently, giving the baby the infected breast first, or milk the infected breast by hand, whichever is less painful. The infection will not pass to the baby.

- Rest and drink lots of liquids.
- Use hot compresses on the sore breast for 15 minutes before each feeding. To reduce pain, use cold compresses on the sore breast between feedings.
- Gently massage the sore breast while the baby is nursing.
- Take paracetamol for pain (see page 350).
- Use an antibiotic. Dicloxacillin is the best antibiotic to use (see page 341). Take 500 mg by mouth, 4 times each day, for 7 to 10 days. If you cannot find this or are allergic to penicillin, use erythromycin (see page 343). Take 500 mg by mouth, 4 times a day for 7 days.



## HIV/AIDS and breastfeeding

For general information about HIV/AIDS, see page 169.

Some mothers with HIV pass the infection to their babies through breast milk. Other mothers with HIV breastfeed their babies, and their babies do not become infected. No one knows exactly why HIV is passed to some babies and not others. HIV probably passes more easily during breastfeeding when:

- the mother recently became infected with HIV.
- the mother is very sick with AIDS.
- the mother gives formula or other fluids along with breast milk.
- the mother has cracked nipples or a breast infection.
- the baby has thrush in her mouth.

For most mothers, even mothers with HIV, breastfeeding is the safest way to feed their babies. In places where water is not always safe, many babies get sick and die from diarrhea. And when people cannot always afford enough formula, babies die from malnutrition.



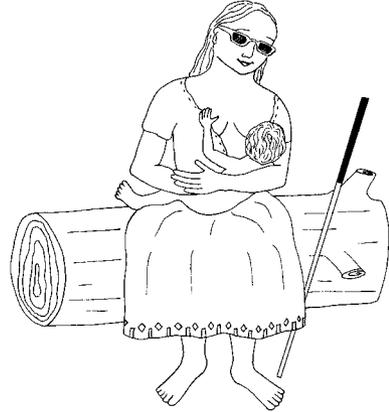
Whatever you choose to do, do not blame yourself if your baby becomes infected with HIV. At the moment, there is no way to know for sure how to protect your baby.

***Breastfeeding if you have HIV***

A woman who is being treated with medicines for HIV is less likely to pass the virus to her baby while breastfeeding. But even if you are not taking ART medicines, you can make breastfeeding safer:

- Give only breast milk for the first 6 months. Babies who also get formula, teas, or other foods or drinks are more likely to become infected than babies who drink only breast milk. Other foods or liquids are harder for a small baby to digest and may irritate the lining of the baby's stomach. This may help HIV to pass more easily.
- Stop breastfeeding after 6 months, but do not stop suddenly. It usually takes several days to wean a baby (see page 265).
- Position the baby correctly to avoid cracked nipples.
- Treat thrush, cracked nipples, and breast infections right away.
- Do not feed the baby from a breast that has mastitis or an abscess—instead, remove the milk and throw it away. Feed the baby with milk from the other breast, until the infection heals.

To kill HIV in breast milk, you can also heat the breast milk almost to boiling (pasteurize), and then cool it and feed it to the baby through a cup or a bottle. This takes work, but it can be done if you have clean water, fuel, and support.

**To pasteurize breast milk**

1. Place a jar of breast milk in a pot of water.
2. Bring the water to a boil.
3. Immediately remove the pot from the heat.
4. Let the milk cool before feeding it to the baby.

The milk should be used within a few hours of pasteurizing.  
Breast milk should not be boiled.

## Using other kinds of milk

Breastfeeding a baby is best. But if it is not possible for you to breastfeed, formula (artificial milk) may be a safe alternative to breast milk.

If you cannot afford formula, perhaps a relative or friend who does not have HIV/AIDS can breastfeed your child, or you can give the baby animal milks.

### To feed a baby with animal milk

#### *For cow, goat, or camel milk,*

mix 100 ml fresh milk with 50 ml clean water and 10 g (2 tsp) sugar.

#### *For sheep or buffalo milk,*

mix 50 ml fresh milk with 50 ml clean water and 5 g (1 tsp) sugar.

Bring the mixture to a boil and then remove it from the heat. Let it cool and then feed immediately.

Animal milks do not have all the vitamins a growing baby needs—so the baby should be given a wide variety of mashed vegetables, fruits, and other foods starting at about 6 months of age.

## FEEDING A BABY WITH A CUP OR BOTTLE

If you cannot breastfeed, you can use a cup or bottle to feed a baby breast milk, animal milk, or a baby formula. If you cannot hold the cup, ask someone to help you while you support the baby.

### Feeding a baby with a cup

1. Use a small, very clean cup. If boiling is not possible, wash the cup with soap and clean water.
2. The baby should be upright or almost upright on your lap.
3. Hold the cup of milk to the baby's mouth. Tip the cup so the milk just reaches the baby's lips. Rest the cup lightly on the baby's lower lip. Let the edges touch the baby's upper lip.
4. Do not pour milk into the baby's mouth. Let the baby take milk into its mouth from the cup.



### Feeding the baby from a bottle

Feeding a baby with a bottle is never safe unless you can answer "YES" to all these questions:

- is there is a constant source of clean water in the community?
- is there is a constant supply of fuel to boil the water?
- do you or your family have enough money to buy several new bottles and nipples?
- do you or your family have enough money to buy enough infant formula, tinned milk, or clean animal milk for at least 6 months?
- do you or your family know how to properly clean the bottles and nipples, and prepare the other milks?



When you give formula or animal milk, everything must be kept very clean. The cup, spoon, bottle, rubber nipples, and any containers used for milk or formula should be washed thoroughly and boiled for 20 minutes before each use. Prepared formula, tinned milk that has been opened, and animal milk should never be left at room temperature for more than 2 hours. They will spoil and could make the baby very sick. Formula can sit in a cold refrigerator for up to 12 hours.

### HELPING THE BABY BURP (WIND)

During feeding, some babies swallow air, which can make them uncomfortable. You can help a baby bring up this air if you can hold it on your shoulder or chest and rub its back, or rub its back while it sits or lies on your lap.

If you have only one arm or limited strength in one arm, hold the baby on your knees with the baby facing away from you and your good arm across its chest. Then rock forward and backward until the baby burps and relaxes.



## Feeding an older baby

**When the baby is 6 months old**, you can start giving her other foods in addition to breast milk. Always give the breast milk first, and then the other foods. It is good to start with a gruel or porridge made from your main food (see page 87). These new foods need to be well cooked and mashed. At first they can be mixed with a little breast milk to make them easier for the baby to swallow.

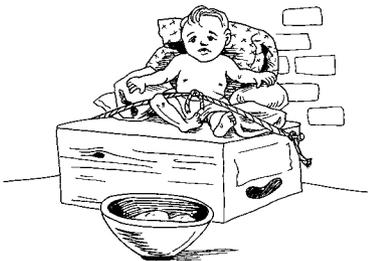
After a few days, start adding other helper foods (see page 87). But start with just a little of the new food, and add only 1 at a time or the baby may have trouble digesting them. Most important is to add foods that give extra energy (such as oil), and—whenever possible—extra iron (such as dark green leafy vegetables). For more information on feeding your baby healthy foods, see *Where There Is No Doctor*, page 107.

Remember, a young child's stomach is small and cannot hold much food at one time. So feed her often, if possible 5 to 6 times a day, and add high-energy helper foods to the main food.

The baby will be happier and calmer if you plan ahead and have everything ready when it is time for him to eat. If you wait until the baby is hungry and crying, it will be hard for you to stay calm while you get ready to feed him. When you get ready to feed the baby:

### If you cannot see well

Always remember to wash and rinse your hands with soap and clean water.



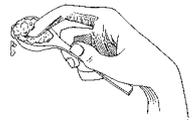
Sit the baby in a comfortable and safe place so he will not topple over. Put the food in a sturdy bowl or container and position it so the baby cannot kick it over.

### To feed a baby with your fingers

and without a spoon, give only a small amount each time that feels no larger than a pea or bean.

### To feed a baby with a spoon

1. Use one hand to put a small amount of food onto a small spoon. Hold the spoon close to the round eating end, and push off any excess food from the spoon with another finger of the same hand.



2. Place the thumb of your other hand on the baby's chin, just under the mouth. Using your thumb as a guide, put the spoon containing the food into the baby's mouth.



When the baby is old enough to feed himself, he will probably make a lot of mess at first. You may need to ask a family member, friend or neighbor to let you know where the food has been spilled so you can clean it up. Try to be patient. As the baby gets older and more sure of himself, he will spill less and less food

**If you have limited upper body strength and coordination**

You may be able to feed your baby if you sit to the side of the baby. This way you will not have to reach forward so much to feed him. But if you cannot feed the baby yourself, you can sit as close to him as possible and talk to him while someone else gives him food. This will help him think of you as one of the people who gives him food when he is hungry.



**When a baby is 1 year and older**

When your baby is 1 year and older, he can eat the same foods as adults, but he should continue to breastfeed or drink milk whenever possible.



Every day, try to give the child plenty of the main food that the people in your community eat, together with 'helper' foods that give added high energy, proteins, vitamins, iron, and minerals, so that he will grow up strong and healthy.

To make sure the child gets enough to eat, serve him in his own dish, and let him take as long as he needs to eat his meal.

**Comforting the baby**

For a baby to feel safe and close with its mother, it is important for the mother to comfort the baby when the baby is unhappy. If your baby starts to cry, and you cannot get to her quickly, someone else can bring her to you. Then your baby can see your face and hear your voice saying comforting words—even if you cannot pick up or hold the baby yourself.

**If you have no use of your arms or cannot hold your baby**

Here are two ways you can comfort your baby:



Someone can hold the baby close to you so the baby can hear your voice and recognize your smell as his mother.



Or someone can sit behind you and hold the baby in front of you so you can comfort him with your voice.

### If you cannot hear well

A healthy baby usually makes a lot of noise when he is hungry or not feeling well. So, if you do not hear well, you will need to stay close to your baby as much as possible so you will see when your baby needs your attention. At night, sleep with the baby as close to you as possible so that you can feel him move. And during the day, keep the baby close to you.

To know how he is feeling, you will probably carry your baby more than most women. He will quickly get to know how you smell and feel, and the sound of your voice. This will make him feel very close and secure with you.



If you use sign language and not a spoken language to communicate, use sign language with your baby, even if your baby is not deaf. This way you and your baby will be able to communicate throughout life. Also, let your baby spend time with family members and friends who are not deaf so the baby will learn to speak.

### If the baby is fussy

During the first few months, some babies can be very fussy, especially in the evening. This is less common with babies who have been breastfed, but it can still happen. You can help calm your baby by offering her the breast, burping her, singing or talking to her, and walking or rocking her. Babies love to move. A fussy baby can be exhausting and frustrating for any mother. The baby's father, or other family members or caregivers, can all help with the baby when she is fussy so you have more time to rest.

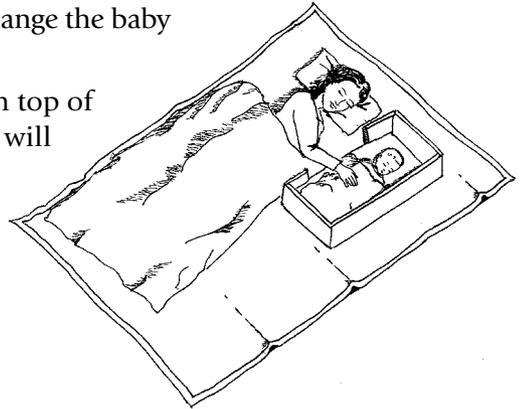
## Sleeping with the baby

Most mothers of small babies rest better sleeping with the baby next to them. It is easier to breastfeed when the baby wakes up hungry, and you can comfort the baby without getting up. If you cannot see or hear well, you will always know if your baby needs to be fed or changed.

**If you have difficulty walking,** keep a supply of nappies, diapers or cloth and clean clothes close by so you can also change the baby during the night without having to get up.

If your disability is such that you may roll over on top of the baby, or if you need to sleep sitting upright, you will need to do something else. Here is an example:

If you think you may roll on top of your baby, make a small wooden bed with sides that the baby can sleep in beside you. Leave one side partly open so you can easily reach inside. Smooth the wood or cover it with cloth so that you and the baby do not get any splinters.



## Changing and dressing the baby

A healthy baby becomes an active, wriggling baby very quickly. Changing his clothing can become more and more difficult as he grows. Try to use clothes that are easy to put on and take off. For example, zippers or strips of *Velcro* (a strong, fuzzy plastic tape that sticks to itself) are easier to fasten and open than buttons.

### If you have physical disabilities

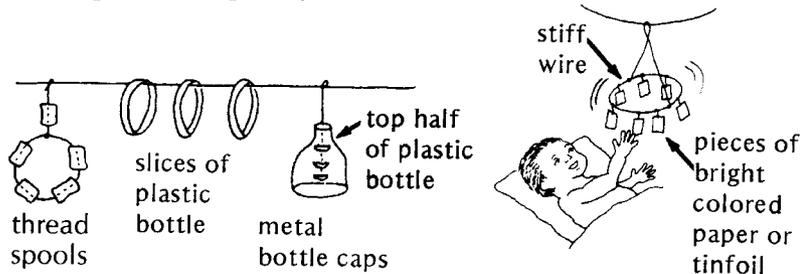
Many women with physical disabilities can safely change and dress their babies on a table or bed, especially if they can sit down. But some women do not have enough balance or body strength to do this. Here are 2 examples of simple wooden tables that will hold the baby safely, and will also not hurt your body. A table can be made to the height that you need.



## Cleaning the baby

It helps to have a small toy for the baby to play with while you clean her so she will not move about so much. Try to collect about 10 playthings that the baby can touch and hold so you can give a different one to the baby each time you change her. A new toy will hold the baby's attention better. Many simple things in the home can be used as toys, or can be turned into them. For example, a noisy seed pod, a bell, a small cloth doll, a mirror, a bracelet of colored beads, or colored paper. When you have gone through all 10, start with the first one again so it will seem new to the baby. Here are some examples of simple toys:

Make sure the objects or toys have no sharp edges, and are not so small the baby could swallow them.



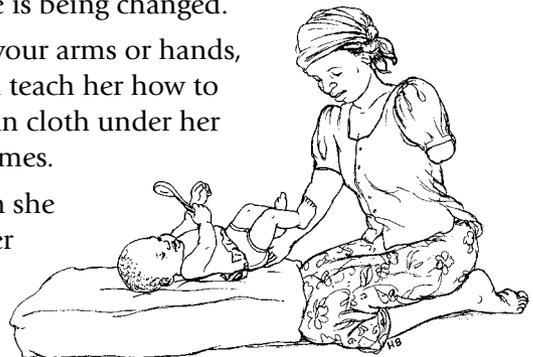
Always wash your hands after cleaning or changing the baby, and after helping a child use a latrine or toilet.

### If you have limited use of your hands

Many women who have limited movement in their hands can clean the baby's bottom and genitals. But often they cannot put on a nappy or diaper—especially if it needs safety pins to hold it closed. You may have to rely on a family member or helper to do this. If you cannot clean and change the baby yourself, make sure the place where the baby is changed is close beside you so that the baby can always hear your voice and see your face as she is being changed.

If you have only one arm or limited use of your arms or hands, when your baby is about 1 month old you can teach her how to help you put on her nappy. As you place a clean cloth under her bottom, lift or bounce her bottom up 2 or 3 times.

Do this each time you change her, and soon she will start to lift her bottom up herself whenever she feels you touching her there. This will make it easier for you to get the cloth placed underneath her.

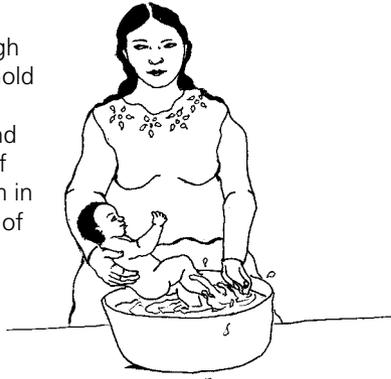


A nappy or diaper can be held on a baby without pins by putting panties over the top. The panties will probably get wet with urine too, so they must also be changed each time the baby is changed. Wash and dry them the same way that you clean the diapers. Also, strips of *Velcro* can be used to hold the baby's diaper closed.

### If you are blind or cannot see well

It can be hard to know if all the stool has been cleaned off the baby's bottom. Here are some suggestions:

If you have enough water available, hold the baby securely with one hand and wash the stool off the baby's bottom in a bucket or bowl of clean water.

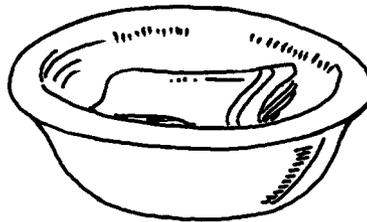


Hold the baby securely over the edge of a table and pour clean water over its bottom.



If you do not have much water, wipe off the baby's bottom with a thin, damp cloth. Do not use a thick cloth or you will not be able to feel where the stool is. Afterward, wash the cloth well with soap and water, and hang it in the sun to dry.

When you bathe the baby, put a piece of cloth inside the basin or bowl for the baby to sit or lie on. This will prevent the baby from sliding under the water.

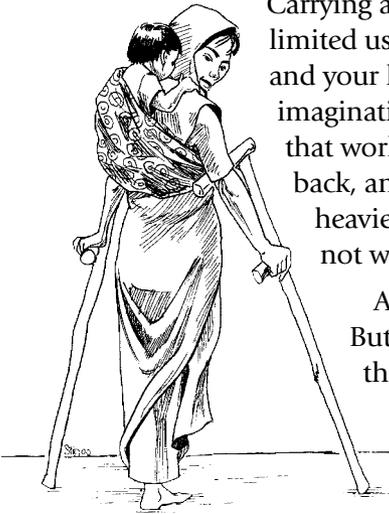


If your baby is constipated, put a little cooking oil up the rectum. Or you can also put some grease or oil on your finger and gently break up and remove the hard stool. Do not give oils, like castor oil, or vegetable oil, or laxatives to a baby or small child.

## Carrying and moving about with the baby

Carrying and moving about with a baby can be difficult if you have limited use of your arms and legs. It may be hard to keep your balance, and your lower back may hurt. You will probably have to use your imagination and try many different methods until you find something that works for you. Some women find it easier to carry their baby on the back, and others find it easier on the front. Your baby will be getting heavier and more active all the time, and what works one month may not work the next month.

At first your balance will be affected by the weight of the baby. But if you start while the baby is small, you will soon get used to the feel of your baby. As the baby grows bigger and heavier, your body and balance will adjust to the increase in weight.



**If you use crutches or a stick** to help with walking, it may be difficult for you to carry your baby in your arms. You can probably carry your baby best on your back.



**If you have limited use of your arms**



This cushion-sling will help distribute the baby's weight better so it does not put so much strain on your arms and shoulders. You can use it to carry your baby in front or on your back.

*Share ideas to help other disabled girls and women learn how to care for a baby.*



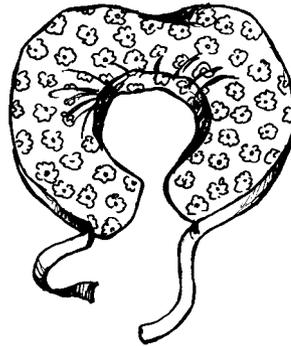
**If you use a wheelchair or a cart**

It can be difficult to hold a baby in your arms or on your lap if you use both your hands to push your wheelchair. But if you can wear a sling around your neck, you can hold the baby safely in it as you roll. Tie the sling to your waist with a strap so that the sling does not bump the baby around.



When the baby grows, you can use a harness that supports the baby while she sits on your lap.

A baby cushion like this, that ties around your waist, will help you to hold your baby safely in your lap.

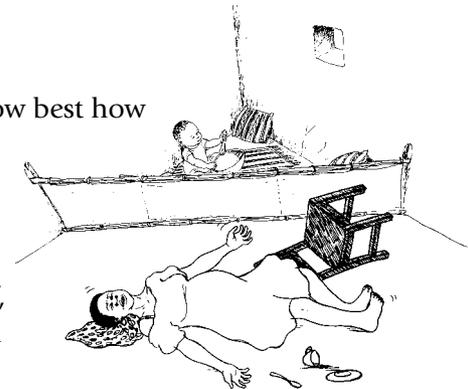


**If you use sign language**

If you are a mother who uses sign language to communicate, you can also use a sling to hold your baby so your hands are free to sign.

**If you have seizures ("fits," epilepsy)**

If you are someone who gets seizures or "fits," you will know best how often you get them and how severe they are. If you have a seizure while you are holding a small baby and you drop her, she could be badly hurt or even killed.



If possible, try to always have someone who does not have seizures with you and the baby. If you live by yourself, or are sometimes alone with the baby, make a safe space in the room or house and keep the baby there all the time. Do not walk around with the baby, and make sure there are no sharp edges on things like chairs or tables. This way, if you have a seizure while you and the baby are alone, the baby will be safe until the seizure is over. It will also be safer to put the baby on the floor when you feed, bathe, or dress her.

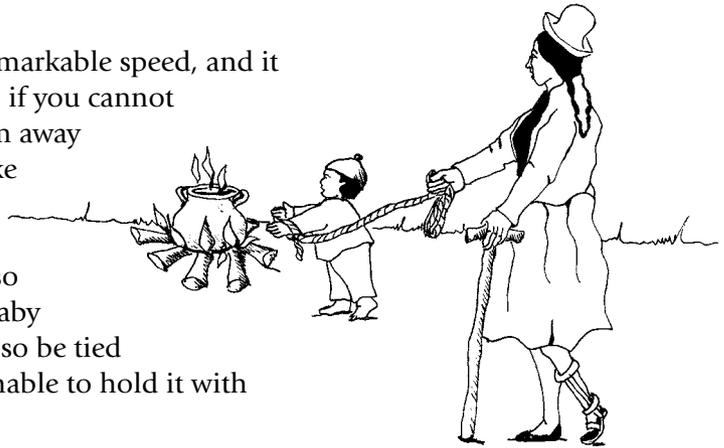
When the baby is a little older and can crawl or walk, put a gate or barrier across an open doorway or any steps, so that the baby is safe even if you have a seizure and are recovering.

## Keeping up with the baby

When babies first learn to crawl and walk by themselves, it can be difficult for any mother or father to keep up! Running and walking is a healthy thing for growing babies to do. And when they are first learning, they fall down a lot. Do not be concerned about this. It is a normal part of a young child's development.

### If you cannot move quickly

Small babies can move with remarkable speed, and it is easy for them to get hurt. So, if you cannot run after your baby to keep him away from dangerous situations—like running in front of a car or into the cooking fire—tie a string around the baby's wrist so that you can quickly pull the baby back to safety. The string can also be tied around your waist if you are unable to hold it with your hand.

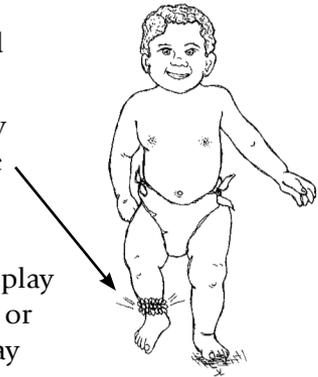


### If you have trouble seeing or you are blind

When the baby is very small, sleep together with him in the same bed. This way you will always know what he needs and where he is.

As the baby grows and starts to move about by himself, by crawling and then walking, tie something that makes a noise onto the baby's ankle or wrist (such as a small bell or a seed pod). Then you can always hear him and know where he is.

Also, make a space where the baby can move around and play without hurting himself. Make sure there are no sharp edges or corners on anything in the space. Put a barrier in the entryway between rooms and at any steps or doors leading out of the house so the baby cannot leave his safe space by himself.



## Protecting children's health

In children, sicknesses often become serious very quickly. An illness that takes days or weeks to severely harm or kill an adult can kill a small child in hours. So it is important to **notice early signs of sickness and attend to them right away.**

**Diarrhea** (loose or watery stools) is more common and more dangerous in babies and small children than it is in adults. If your baby or small child gets diarrhea, **act quickly and:**

- keep giving breast milk—often.
- keep giving food.
- give lots of liquids to drink.

**Rehydration drink** helps prevent or treat dehydration, especially if the baby or child has severe watery diarrhea:

### There are 2 ways to make rehydration drink:

1. **With sugar and salt** (raw sugar or molasses can be used instead of sugar)

In 1 liter of clean **water**, put half of a level teaspoon of **salt**. Make sure it tastes less salty than tears. Then add 8 level teaspoons of **sugar**. Mix well and start giving the drink to the child.



2. **With powdered cereal and salt** (powdered rice is best, or use finely ground maize, wheat flour, sorghum, or cooked and mashed potatoes)

In 1 liter of clean **water**, put half a teaspoon of **salt**. Make sure it tastes less salty than tears. Then add 8 heaping teaspoons (or 2 handfuls) of powdered **cereal**. Boil for 5 to 7 minutes to form a liquid gruel or watery porridge. Cool the drink quickly and start giving it to the child.

Taste the drink each time you give it to make sure it is not spoiled. Cereal drinks can spoil in a few hours in hot weather.

**Add to either drink** one half cup of fruit juice, coconut water, or mashed ripe bananas, if available. This provides potassium which may help the child accept more food and drink.

**IMPORTANT** Adapt the drink to your area and adjust the quantities to your local forms of measurement. If you give cereal gruels to young children, add enough clean water to make it liquid, and use that. Look for an easy and simple way.

**There are 3 important ways to help children grow up to be healthy and protect them against many sicknesses:**

- Nutritious food
- Cleanliness
- Immunizations



### **Nutritious food**

It is important that children eat the most nutritious food they can get, so they grow well and do not get sick. Above all, children should get enough to eat—several times a day (see pages 265 to 266).

### **Cleanliness**

Children are more likely to be healthy if they and their homes are kept clean. Here are some guidelines:

- Wash children and change their clothes often.
- Teach children to always wash their hands when they get up in the morning, after they pass stool, and before they eat or handle food.
- Teach children how to use latrines or toilets.
- Where hookworm exists, do not let children go barefoot; use sandals or shoes.
- Teach children to brush their teeth every day and do not give them a lot of sweets or carbonated drinks.
- Cut fingernails very short.
- Do not let children who are sick or have sores, scabies, lice or ringworm sleep with other children or share clothes or towels.
- Treat children quickly for scabies, ringworm, intestinal worms, and other infections that spread easily from child to child.
- Do not let children put dirty things in their mouths, or let dogs, cats or other animals lick their faces.
- Keep pigs, dogs, and chickens out of the house.
- Use only clean, boiled, or filtered water for drinking. This is especially important for babies.
- To protect babies and children from malaria, if possible, have them sleep under mosquito netting or bed nets that have been treated with insecticide.



### Immunizations (vaccinations)

Vaccines give simple, sure protection against many dangerous diseases. If health workers do not give immunizations in your community, take your children to the nearest health center to be immunized. It is better to take them for immunizations while they are healthy, than to take them for treatment when they are sick or dying. Immunizations are usually given free. (Different countries use different schedules.) The most important vaccines for children are:



Immunization	When given	Note
<b>DPT</b> <i>for diphtheria, whooping cough (pertussis), and tetanus</i>	Given at 2 months, 4 months, 6 months, and 18 months.	In some countries one more injection is given when a child is between 4 and 6 years old.
<b>POLIO</b> <i>(infantile paralysis)</i>	In some countries 1 dose is given at birth, and 3 more doses are given at the same time as the DPT injections.	In other countries the first 3 doses are given at the same time as the DPT injections, the 4th dose between 12 and 18 months of age, and a 5th dose at 4 years old.
<b>BCG</b> <i>for tuberculosis</i>	At birth or anytime afterward.	
<b>MEASLES</b>	1 injection no younger than 9 months, and often a second injection at 15 months or older.	In many countries, a '3 in 1' vaccine called MMR (measles, mumps and rubella—German measles) is given between 12 and 15 months, and a second injection between 4 and 6 years.
<b>HepB (Hepatitis B)</b>	3 injections are usually given at the same time as DPT.	In some countries the injections are given at birth, 2 months, and 6 months.
<b>Hib</b> <i>for Haemophilus influenza type b, which is a germ that causes meningitis and pneumonia in young children</i>	3 injections given together with the first 3 DPT injections.	
<b>Td or TT (Tetanus toxoid), for tetanus (lockjaw) for adults and children over 12 years old</b>	1 injection every 10 years. In some countries this is done between 9 and 11 years (5 years after the last DPT vaccination), and then every 10 years.	Pregnant women should be immunized during each pregnancy so their babies will be protected against tetanus of the newborn (see page 251).

**Immunize your children on time.**  
**Be sure they get the complete series of each vaccine they need.**