

CRAWLING

Not all children crawl. Some develop alternative methods of getting around, (like bum-shuffling, rolling, sliding on the knees and strange variations of crawling), others skip crawling altogether and go from sitting to walking. (Partly genetic - bum shuffling is often hereditary, will often find that the mother bum shuffled, also to do with the size/weight of the baby.

Crawling is one of the few times in human development when weight is borne through the arms. It's an important stage in strengthening the trunk, shoulders and arms and developing stability.

Babies will often go into a crawling position from sitting and may go backwards before they go forwards. The first forward movement most babies make is 'commando crawling', or creeping, where an infant creeps or shuffles on their tummy. Soon after, around 6-8 months, they manage to balance on their hands and knees and rock back and forth. Then they discover that by moving one hand ahead, they can move forward a little, and a sequence of arm and leg movements begins to emerge.

The average baby crawls 'properly' at around 7-10 months of age i.e. with a smooth cross-crawl motion where the opposite arm and leg move together. They work up to crawling for approx 1 km per day. Once they hit this stage, will usually start walking.

When babies first learn to crawl they have their legs and arms far apart with the weight on the inside legs and middle, quite slow and cumbersome. As the hips and pelvis strengthen, the legs come closer together and the weight is on the kneecaps. Much speedier! One way to encourage babies to crawl is by putting something he/she wants e.g. a toy, just out of reach.

According to international research, babies are beginning to crawl at a later age, and an increasing number do not crawl at all. (Two 1998 studies, one in the US and one in England, found crawling was occurring later than it used to. The researchers say they know why - it's an unexpected consequence of putting babies to sleep on their backs. In Britain the study began in 1990, just as Britain began its 'Back to Sleep' programme. In the early 1990s, when most babies slept on their stomachs, they turned over and crawled when the textbooks said they should. But by about 1995, when parents were almost universally sleeping babies on their backs to protect against cot death, the average age of crawling rose significantly.) Note: These studies emphasized that these late crawlers were normal in other respects. They sat up and walked at the expected times and were intellectually and developmentally normal.

Why? Babies on their backs are probably less motivated to get into the right position for crawling as they can see most of the world around them. This gives support to the theory that TUMMY TIME is essential when teaching babies to crawl i.e. put babies on their tummy for a short time every day. According to Plunket this can be done from as early as a couple of months old. More than half of babies don't like it, but if you keep it short - even for just one minute - and get down on the floor (offering gentle, loving encouragement) with them they will

eventually get used to it.

- Think little and often: preferably several times a day.
- Start on soft surfaces and give them some interesting toys to play with.
- Avoid tummy time straight after feeding especially if your baby is prone to indigestion or reflux.
- Nappy changing time (with baby on their back) is an ideal time for 'patterning' crawling movements. Hold our baby's lower legs and gently pump them back and forward in a bicycle motion.

ANNABELLE'S RECIPES

FRENCH TOAST

Serve glasses of Meadow Fresh Calci Kids milk with this popular breakfast choice.

3 tbsp Meadow Fresh Calci Kids milk
3 eggs
3 tbsp caster sugar
a generous pinch of cinnamon
about 80g (1/3 cup) Mainland butter
8 thick slices bread, cut in half diagonally
banana and Kiwi bacon strips to serve with toast.

METHOD:

Put the milk, eggs, sugar and cinnamon in a wide, shallow bowl and mix together. Soak the bread in the egg mixture, one slice at a time, shaking off any excess.

Melt half the butter in a frying pan. When it sizzles, add 3-4 slices of bread in a single layer and cook until golden brown on both sides. Cook the remaining bread in batches, adding more butter as needed, and keeping the cooked slices warm in the oven until all are done.

While cooking the French toast, place bacon and sliced bananas in a hot fry pan and cook until ready to serve.

Heat the maple syrup for great results!

Nutrition Fact: Meadow Fresh Calci Kids has 50% more calcium than Meadow Fresh Family Homogenised milk - and it has Vitamin D to help the body absorb the calcium. Just what kiwi kids need to help them grow up healthy and strong!

Go to www.meadowfresh.co.nz for more info

BOOK



"Shreve's Promise" by Jillian Sullivan (age 12)

Jillian Sullivan is the winner of the Tom Fitzgibbon Award for 2004, which is a New Zealand award to encourage new writers. The book, which won the award for Jillian, is "Shreve's Promise".

It has a real New Zealand feel to it in terms of style and language, and it keeps you guessing with a number of twists and turns along the way. This book is many-layered: it's a ghost story, it's a tale of friendship, it's a contemporary picture of the breakdown of a family, and it's a quest featuring a brave and much-wronged teenager, Shreve.

The promise in the title is for Shreve to help an old lady who she fears might be in some danger, but the fingers of the promise stretch into many areas. This book is interesting and appealing on many levels, and has enough action in it to suit teenage boys and girls alike.

Books reviewed by the Children's Book Shop

WEBSITE

www.ology.amnh.org (7-15 yrs)

From the American Museum of Natural History comes this excellent site for children going through that information-vacuuming stage. They describe an ologist as someone who is so curious about something that he or she wants to know everything about it. Ologists will find plenty to satisfy their curiosity on this site.

Each ology has a similar presentation - you can meet ologists or find out specific information. When you get into the text there are asterisks on certain words, which lead you to collectable cards with a picture on one side, and information on the other. There are cool educational games to do online and the Stuff to Do away from the computer is equally awesome.

Websites reviewed by the Children and Teens department of Auckland City Library

CELLULITIS

Scratches, grazes, cuts and insect bites are fairly common occurrences among children. They trip, fall over, scrape their knee, the skin around the wound gets a bit red and sore, you rub in some antiseptic cream, pop on a plaster and in a couple of days it heals. No big deal, right? Well, not always, especially if the skin becomes infected and the person has an impaired immune system & in fact serious skin infections were the number one cause of admission to Starship Hospital last year. But with a little know-how you can protect your children from Serious skin infections and hospitalisation - Here's How:

Proper care of sores

Clean with warm salty water, and then dry the sore.

What is cellulitis?

It is an acute bacterial inflammation of the connective tissue of the skin. The infection spreads, causing the skin and the layers underneath to become red, swollen and tender.

What causes cellulitis?

The most common types of bacteria that cause cellulitis are group A streptococcus and staphylococcus aureus. If there is a break in the skin, bacteria can get inside the body and start an infection. Cuts and scrapes are the most common causes of breaks in the skin that can lead to cellulitis but insect bites and itchy eczema are also common causes. Chicken pox can also become infected with bacteria.

What are the symptoms?

The skin around the break starts to look red and swollen and the surrounding area might also feel warm and hurt, especially when you touch or move it. The redness usually spreads, sometimes quickly, and these other areas of skin can then get hot and swollen too. Sometimes warm red streaks appear on the skin around the infection.

How is cellulitis treated?

Antibiotics are usually prescribed. People who have become very ill may need to stay in hospital so they can be given these through a drip.

How can it be prevented?

Insect Bites

Skin infections often start with an insect bite (mosquito and fleas) so:

- Use insect repellent
- Mosquitoes are worse at dawn and dusk so wear clothing that covers the body- e.g. long sleeves and trousers
- Get rid of objects outside that hold water where mosquitoes could breed e.g. pot plant saucers, jars, old tyres
- Don't leave windows open and lights on - this will attract mosquitoes inside
- Avoid scratching bites

Hygiene

- Good hygiene - wash and dry hands thoroughly and regularly especially before eating & after toilet (wash time - one verse of happy birthday and then dry to Happy Birthday - this is a really effective way to get children to know how long they need to spend doing it.)
- Boost immunity: Get plenty of sleep and eat fruit and veges
- Keep fingernails short and clean - often starts with a mosquito bite which gets scratched and infected
- Wash all over daily with clean water
- Avoid sharing towels, clothing and bedding to prevent infection spreading

- Avoid sharing bath and swimming water when infected
- Wash linen weekly and clothes regularly (use a hot wash if someone has skin infections)
- Cover sores with a fabric plaster or clean cloth

Go to the Doctor if: (ANY ONE of the following)

- A sore on the body is bigger than a 5 cent coin
- A sore has pus
- If a sore gets bigger
- If a sore has red streaks coming from it
- If a sore is not getting better within 2 days
- A sore or redness is near the eye - needs to be seen urgently by a Doctor

Don't forget

- Complete the course of antibiotics you're given
- Don't share antibiotics around the family - each person needs their own.