



4.8 Health: Protecting Health through Immunization

2023 Recommended Immunizations for Children from Birth Through 6 Years Old



FOOTNOTES



COVID-19** Number of doses recommended depends on your child's age and type of COVID-19 vaccine used.

Two doses given at least 4 weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

HepA* Two doses of Hep A vaccine are needed for lasting protection. The 2 doses should be given between age 12 and 23 months. Both doses should be separated by at least 6 months. Children 2 years and older who have not received 2 doses of Hep A should complete the series.

ADDITIONAL INFORMATION

1. If your child misses a shot recommended for their age, talk to your child's doctor as soon as possible to see when the missed shot can be given. 2. If your child has any medical conditions that put them at risk for infection (e.g., sickle cell, HIV infection, cochlear implants) or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.

Talk with your child's doctor if you have questions about any shot recommended for your child.

DEDICATED TO THE HEALTH OF ALL CHILDREN

AAFP American Academy of Pediatrics

https://www.cdc.gov/vaccines/parents/schedules/index.html

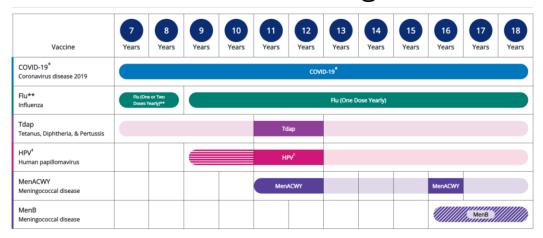
will be updated with 2024 guidelines

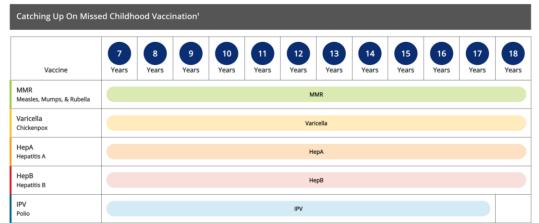






4.8 Health: Protecting Health through Immunization







https://www.cdc.gov/vaccines/parents/schedules/index.html ***Will be updated with 2024 guidelines***





4.8 Health: Car Safety

- Motor vehicle injuries are a leading cause of death among children in the United States
- Preventable
- Always read manufacturer instructions

Using the correct car seat or booster seat can be a lifesaver. Make sure your child is always buckled in an age- and size-appropriate car seat or booster seat.





REAR-FACING CAR SEAT

Birth until age 2-4

Buckle children in a rear-facing car seat with a harness until they reach the maximum weight or height limit of their car seat. Keep children rear-facing as long as possible. Never place a rear-facing car seat in the front seat. Front passenger air bags can injure or kill young children in a crash.



FORWARD-FACING CAR SEAT

After outgrowing rear-facing car seat and until at least age 5

When children outgrow their rear-facing car seat, they should be buckled in a forward-facing car seat with a harness until they reach the maximum weight or height limit of their car seat.



BOOSTER SEAT

After outgrowing forward-facing car seat and until seat belt fits properly

When children outgrow their forward-facing car seat, they should be buckled in a booster seat until the seat belt fits properly without a booster seat. Proper seat belt fit usually occurs when children are age 9–12.



SEAT BELT

When seat belt fits properly without a booster seat

Children no longer need to use a booster seat when the seat belt fits them properly. A seat belt fits properly when the lap belt is across the upper thighs (not the stomach) and the shoulder belt is across the center of the shoulder and chest (not on the neck/face or off the shoulder).

Keep children age 12 and younger properly buckled in the back seat.

*Recommended age ranges for each seat type vary to account for differences in child growth and weight/height limits of car seats and booster seats. Use the car seat or booster seat manual to check for important information about installation, the seat weight and height limits, and proper seat use.

Child passenger safety recommendations: American Academy of Pediatrics (AAP) 2018.

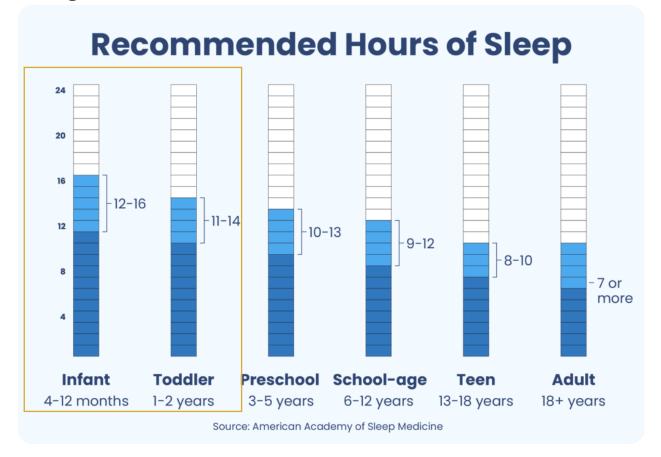
www.cdc.gov/transportationsafety/child_passenger_safety





4.9 Sleep

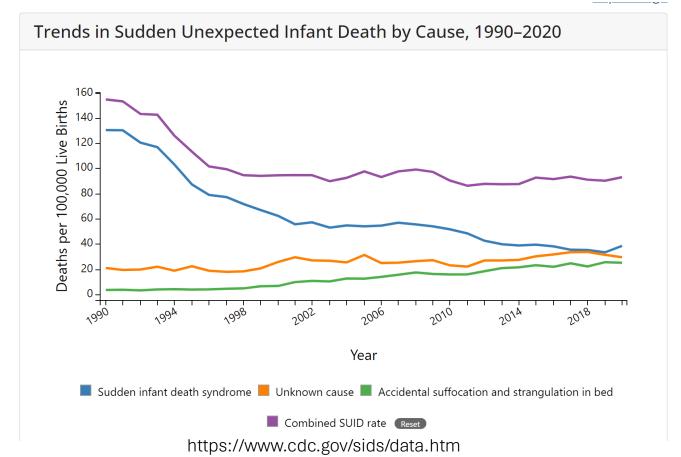
- About 16.5 hours in 24-hour period.
- By two-year-old, average of 10 hours.





4.9 Sleep: Sudden Infant Death Syndrome

- When the death of a healthy infant occurs suddenly and unexpectedly, and medical and forensic investigation findings (including an autopsy) are inconclusive.
- Leading cause of death in infants 1 to 12 months old

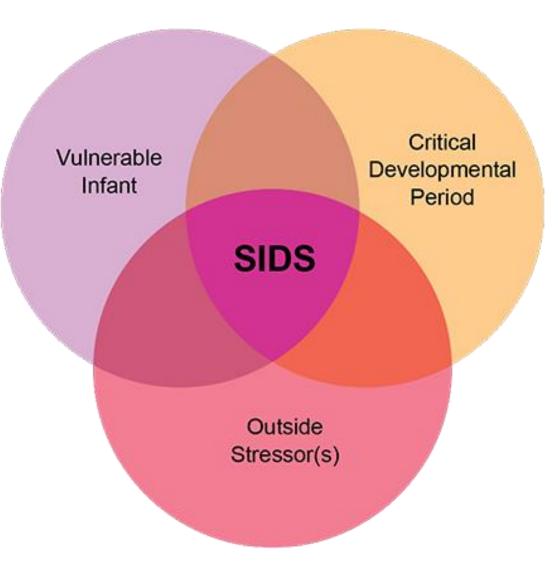




4.9 Sleep: Sudden Infant Death Syndrome

Risk Factors Babies are at higher risk for SIDS if they:

- Sleep on their stomachs
- Sleep on soft surfaces, such as an adult mattress, couch, or chair or under soft coverings
- Sleep on or under soft or loose bedding
- Get too hot during sleep.
- Are exposed to cigarette smoke in the womb or in their environment, such as at home, in the car, in the bedroom, or other areas
- Sleep in an adult bed with parents, other children, or pets; this situation is especially dangerous if:
- The adult smokes, has recently had alcohol, or is tired.
- The baby is covered by a blanket or quilt.
- The baby sleeps with more than one bed-sharer.
- The baby is younger than 11 to 14 weeks of age.





4.9 Sleep: Safe Sleep

Reducing the Risks

- Always place baby on his or her back to sleep (for naps and at night).
- Use a firm and flat surface.
- Use only a tight fitting sheet on the sleep surface; no other bedding or soft items in the sleep area.
- Breastfeed.
- Share your room with a baby, but on a separate surface designed for infants (not your bed).
- Do not put soft objects, toys, crib bumpers, or loose bedding under, over, or anywhere near baby's sleep area.
- Do no smoke during pregnancy or allow smoking around baby.
- Consider giving baby a pacifier.
- Do not let baby get too hot during sleep.
- Get regular health care (including vaccines).
- Avoid products that go against safe sleep recommendations, especially those that claim to prevent or reduce the risk of SIDS.
- Do not use heart or breathing monitors to reduce the risk of SIDS.

PROTECT THE CHILD FROM





ENSURE THE CRIB IS PROPERLY **ASSEMBLED**



ALWAYS PLACE BABY ON HIS/HER BACK TO SLEEP





REMOVE EVERYTHING OTHER THAN THE MATTRESS AND SHEET FROM THE CRIB WHEN BABY IS SLEEPING.



ZONE AROUND





USE A FIRM MATTRESS WITH NO MORE THAN TWO FINGERS WIDTH BETWEEN THE CRIB AND MATTRESS



DO NOT OVER-CLOTHE BABY WHILE SLEEPING, **BABY SHOULD NOT** BE HOT TO THE TOUCH



SLEEPER NEVER USE LOOSE BLANKETS



ONCE BREASTFEEDING IS ESTABLISHED AFTER A PACIFIER



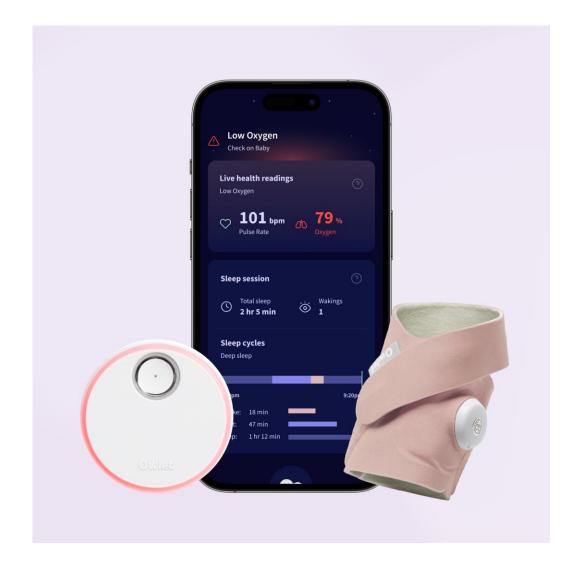
KEEP BABY IN MOM'S ROOM, BUT IN A SEPARATE SLEEPING AREA



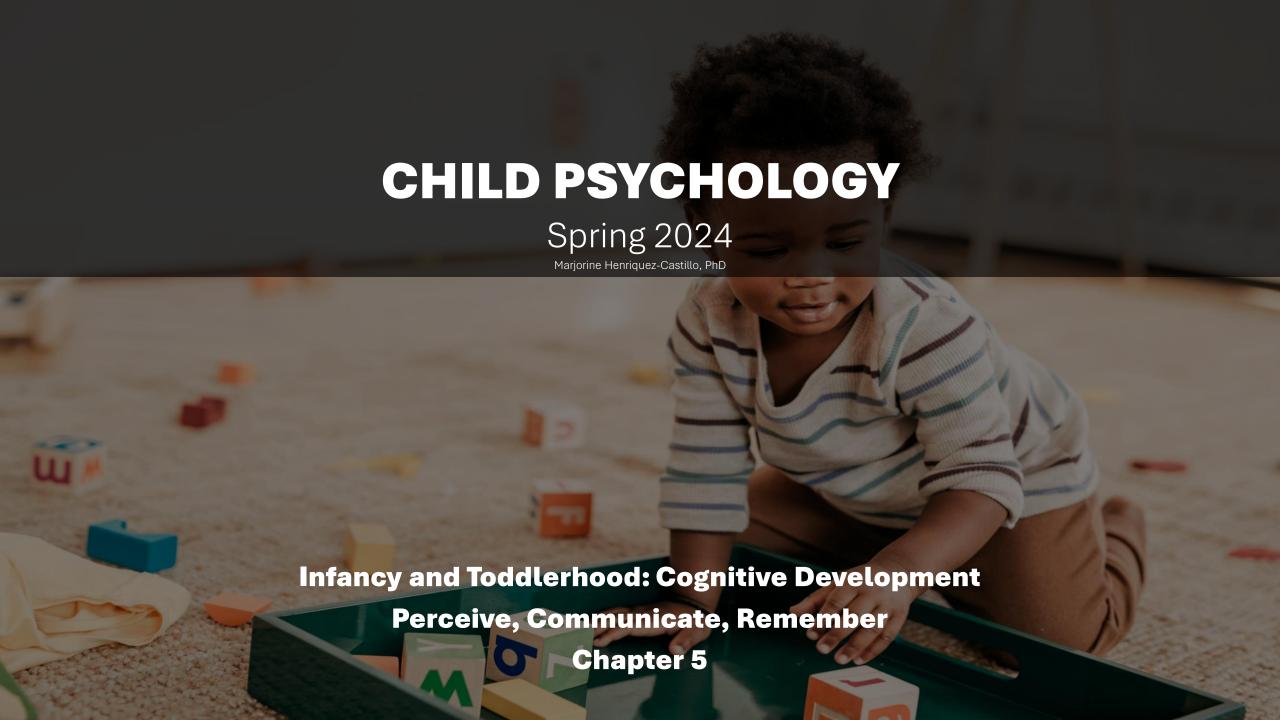
THERE SHOULD NOT BE MORE THAN A SODA CAN WIDTH **ETWEEN BARS**



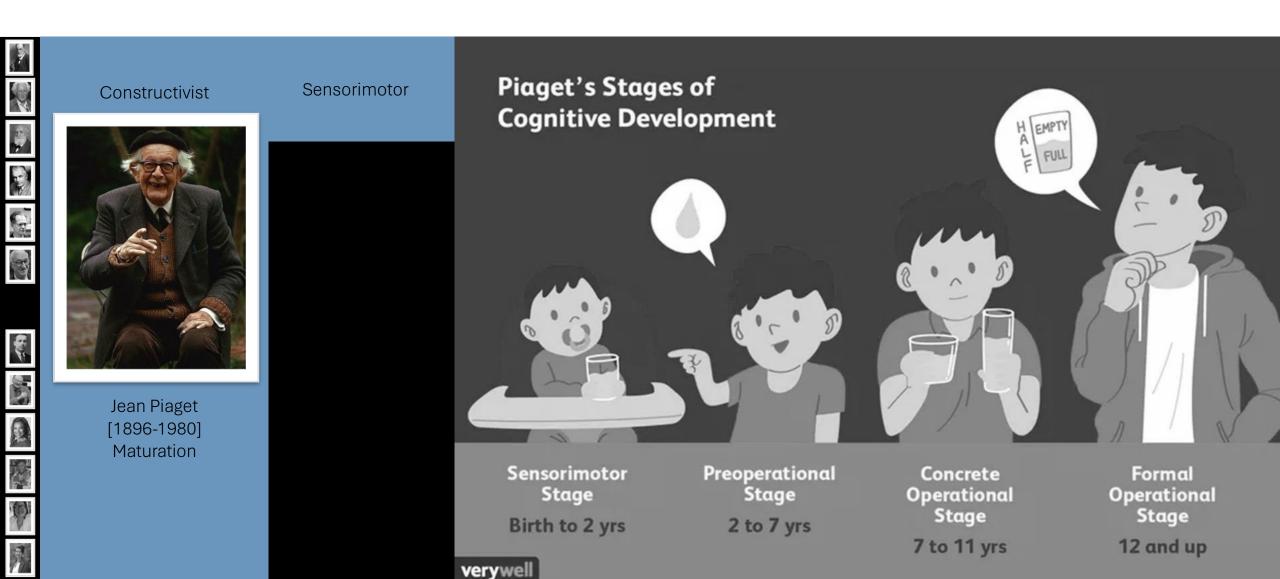
4.9 Sleep: Safe Sleep



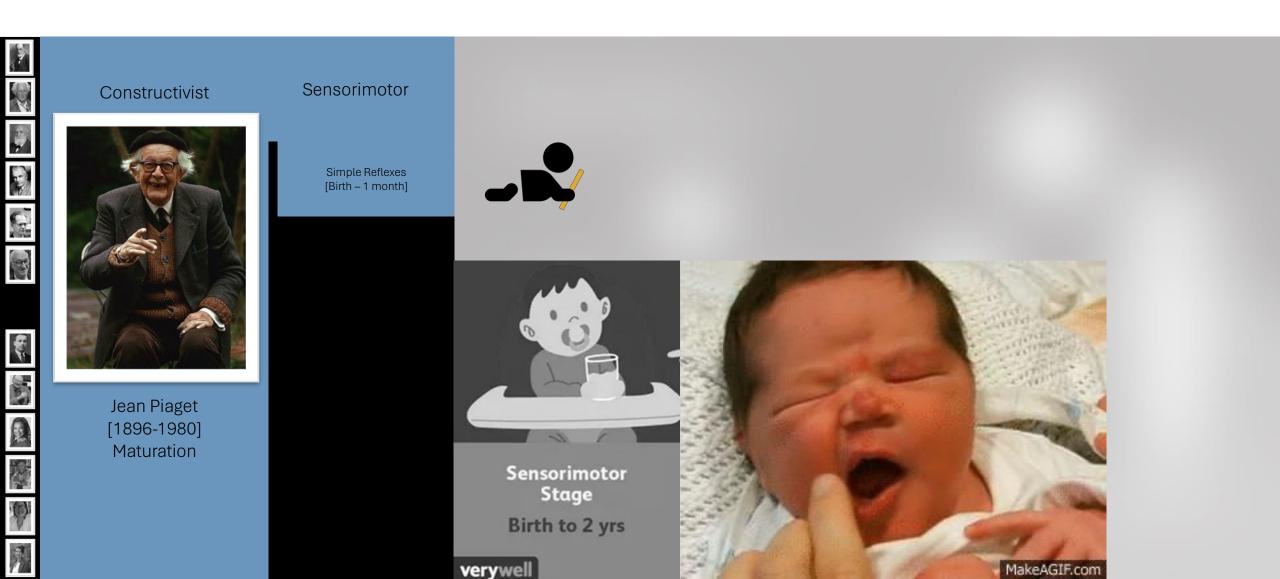




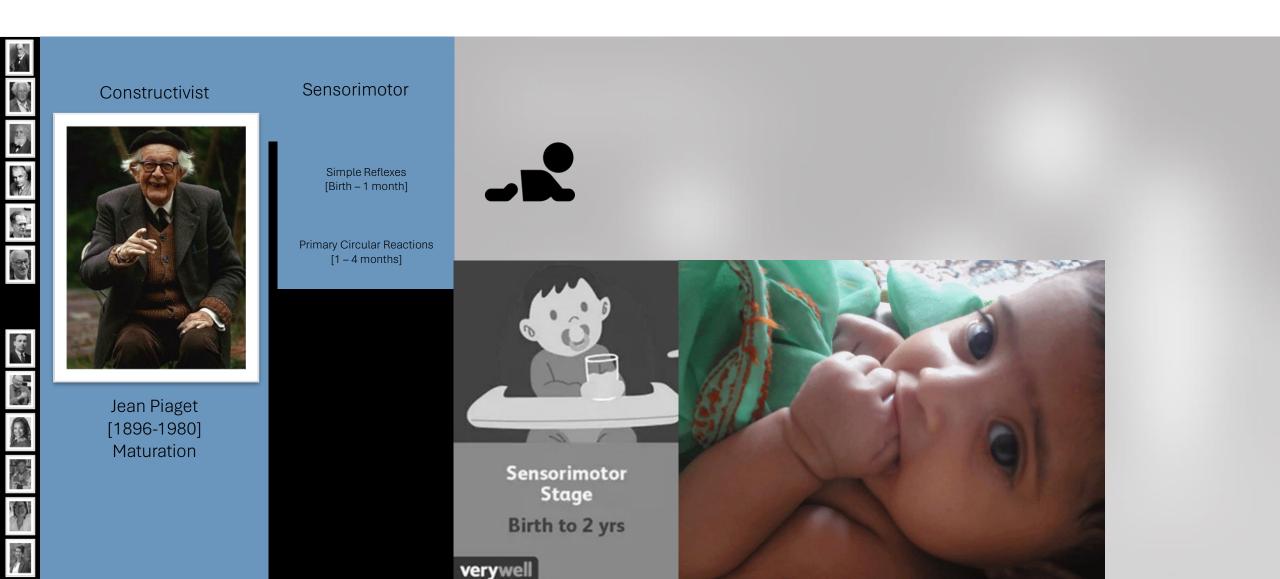




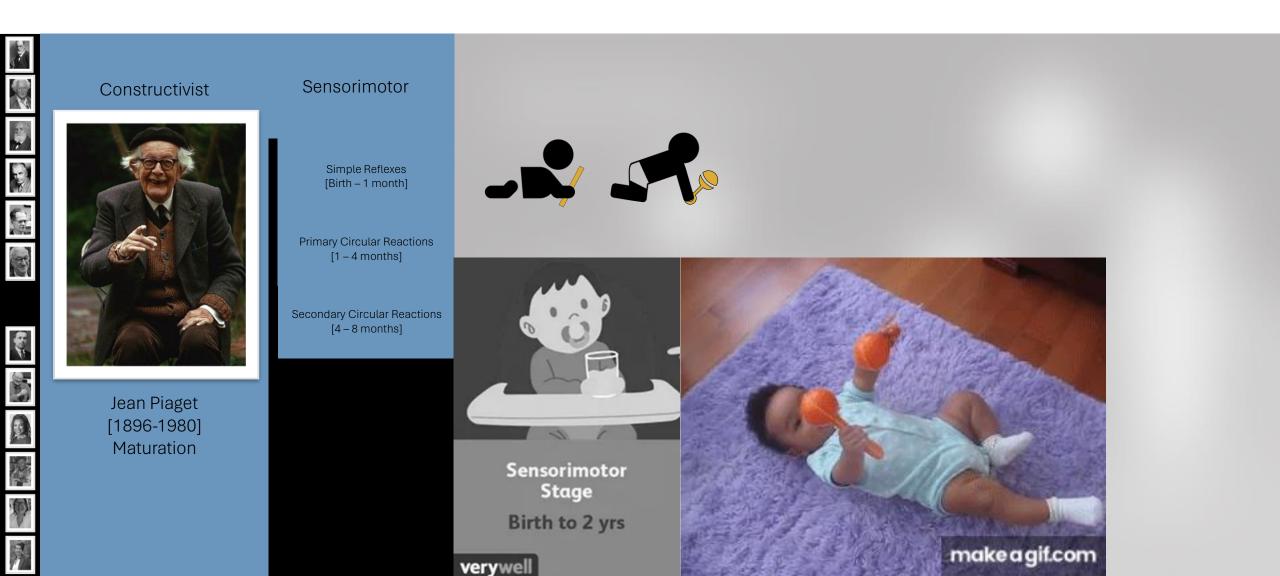




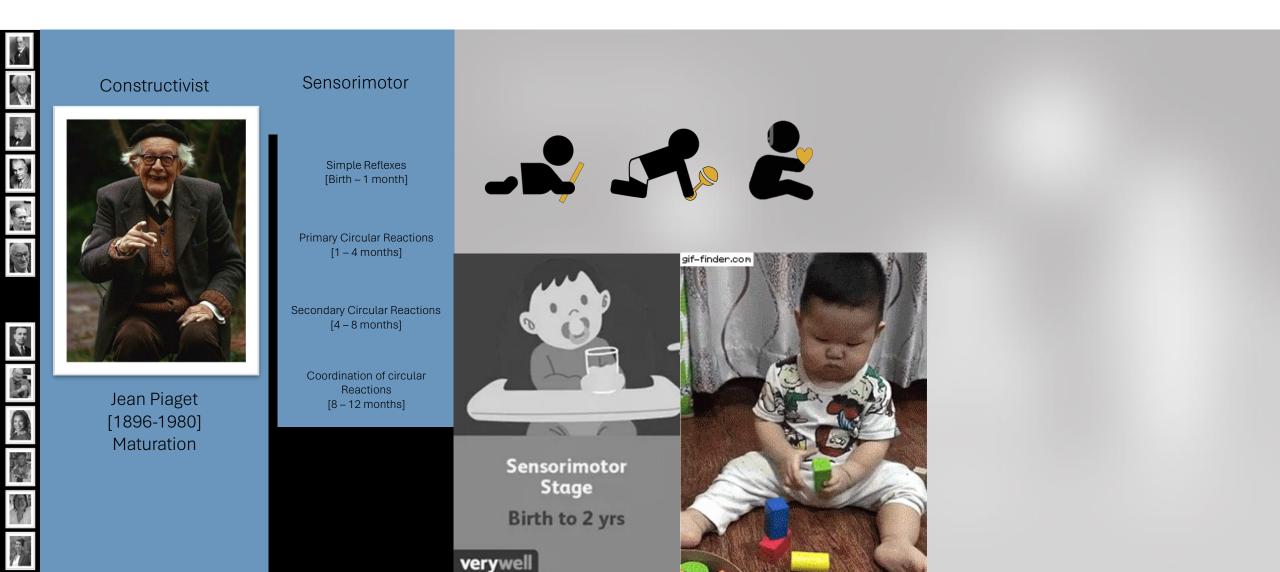




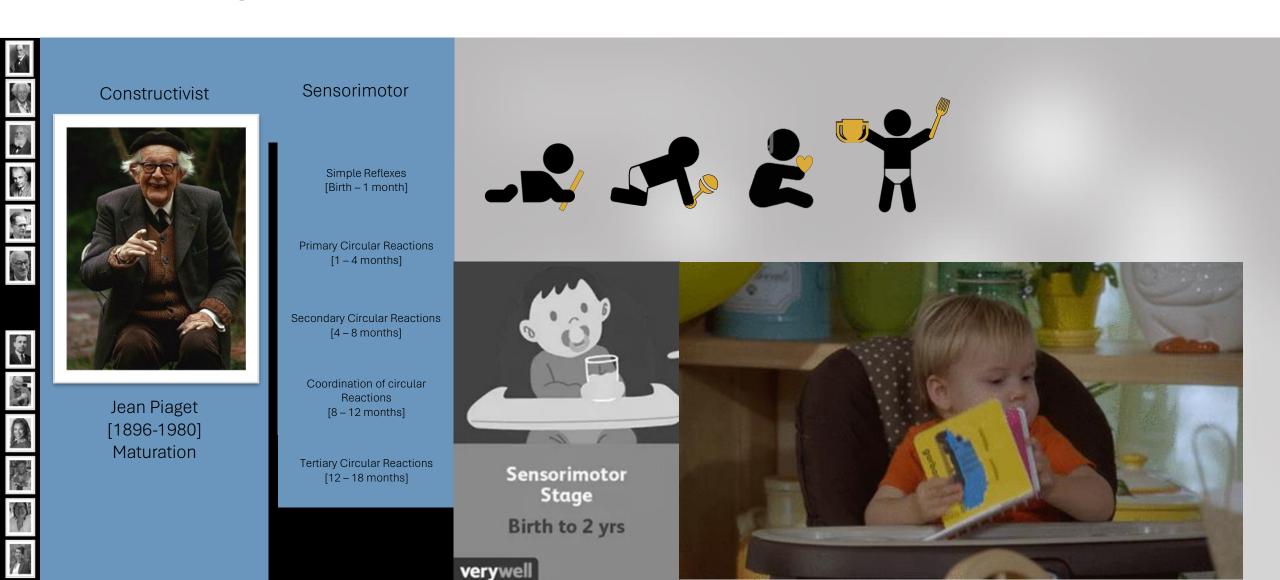




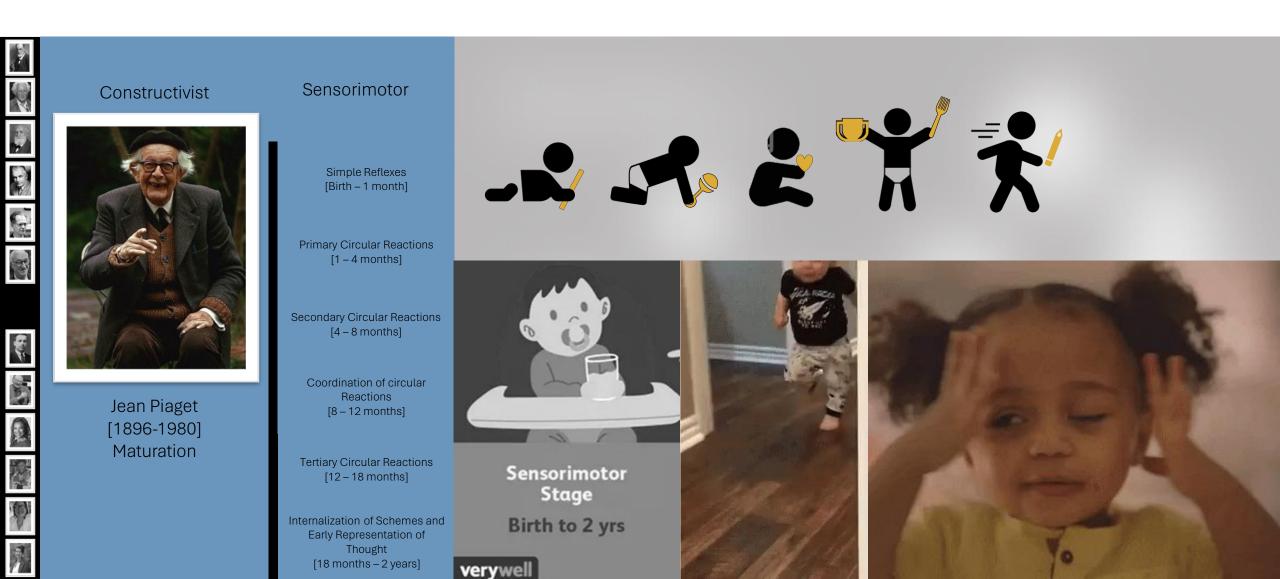




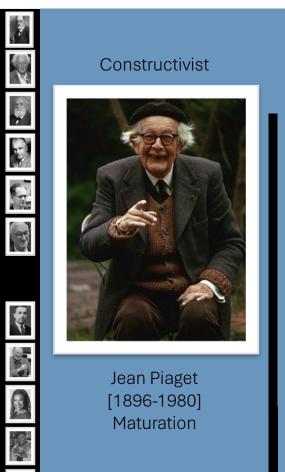












Sensorimotor

Simple Reflexes [Birth – 1 month]

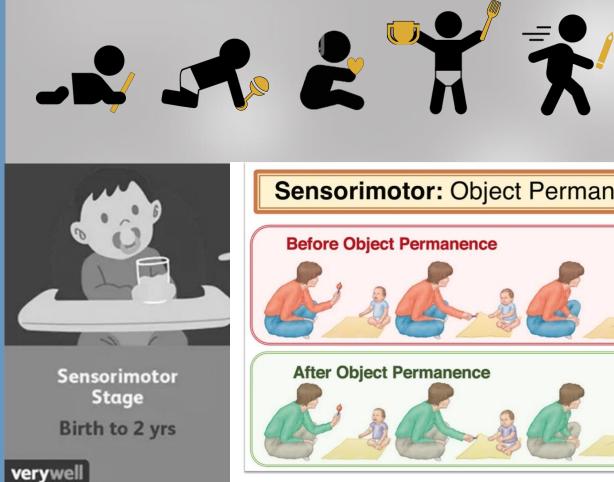
Primary Circular Reactions [1-4 months]

Secondary Circular Reactions [4 - 8 months]

Coordination of circular Reactions [8 – 12 months]

Tertiary Circular Reactions [12 – 18 months]

Internalization of Schemes and Early Representation of Thought [18 months – 2 years]



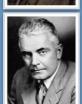


*Evidence that this happens earlier than Piaget suggested.



5.2 Vygotsky & 5.5. Theories of Cognitive Development, Learning, and Memory











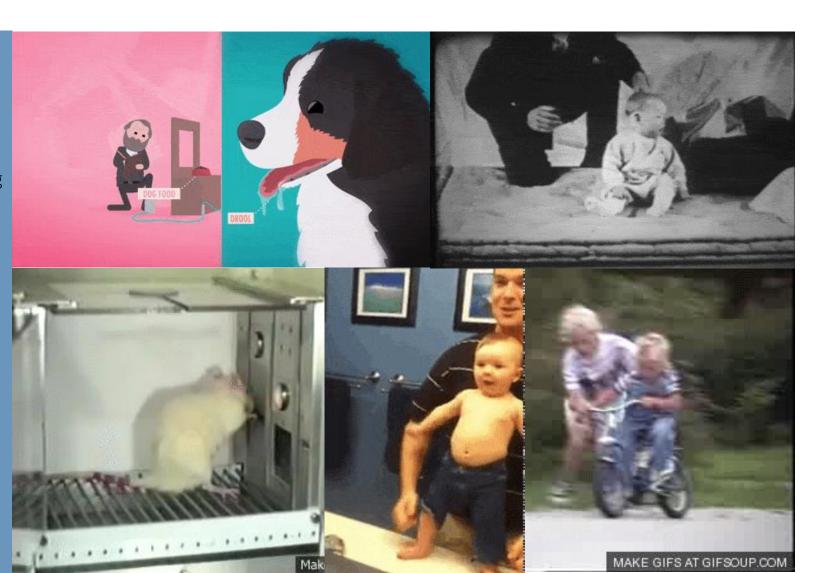
Conditioned Stimulus Response

Classical Conditioning Learned

Operant Conditioning
Reinforced

Social Learning

Influence of culture Scaffolding





5.3 Cognitive Milestones

• How children perceive and interact the world.



2 Months

- Pays attention to faces
- Begins to follow things with eyes and recognize people at a distance
- Begins to act bored (cries, fussy) if activity doesn't change



4 Months

- Lets you know if she is happy or sad
- · Responds to affection
- Reaches for toy with one hand
- Uses hands and eyes together, such as seeing a toy and reaching for it
- Follows moving things with eyes from side to side
- · Watches faces closely
- Recognizes familiar people and things at a distance



6 Months

- Looks around at things nearby
- Brings things to mouth
- Shows curiosity about things and tries to get things that are out of reach
- Begins to pass things from one hand to the other



9 Months

- Watches the path of something as it falls
- Looks for things he sees you hide
- Plays peek-a-boo
- Puts things in mouth
- Moves things smoothly from one hand to the other
- Picks up things like cereal o's between thumb and index finger



1 Year

- Explores things in different ways, like shaking, banging, throwing
- Finds hidden things easily
- Looks at the right picture or thing when it's named
- · Copies gestures
- Starts to use things correctly; for example, drinks from a cup, brushes hair
- Bangs two things together
- Puts things in a container, takes things out of a container
- Lets things go without helpPokes with index (pointer)
- Follows simple directions like "pick up the toy"



18 Months

- Knows what ordinary things are for; for example, telephone, brush, spoon
- Points to get the attention of others
- Shows interest in a doll or stuffed animal by pretending to feed
- Points to one body part
- Scribbles on own
- Can follow 1-step verbal commands without any gestures; for example, sits when you say "sit down"



2 Years

- Finds things even when hidden under two or three covers
- Begins to sort shapes and colors
- Completes sentences and rhymes in familiar books
- Plays simple make-believe games
- Builds towers of 4 or more blocks
- Might use one hand more than the other
- Follows two-step instructions such as "Pick up your shoes and put them in the closet."
- Names items in a picture book such as a cat, bird, or dog



• How babies communicate (verbal and non-verbal)

te.	Intentional Vocalizations
(11)	Intentional vocalizations
Blah Blah <i>Blah</i>	Babbling and Gesturing
	Understanding
Gurt	Holophrastic Speech
EKKHI E C C	Underextension
	First words and cultural influences
\bigcirc	Vocabulary growth spurt
	Two-word sentences and telegraphic speech





How babies communicate (verbal and non-verbal)



https://youtu.be/IYz6tE3XmHM

Intentional Vocalizations

- Infants coo (vowel sounds) in the first few months, practicing vocalization and enjoying the sounds they make.
- Cooing helps infants learn conversational turn-taking by alternating vocalizations with others.





• How babies communicate (verbal and non-verbal)



Blah Blah *Blah*

Babbling and Gesturing

- •Around 4-6 months, infants babble with a wider range of sounds (consonants, vowels, clicks) preparing them for spoken language.
- •Deaf babies use gestures to communicate, similar to babbling in hearing babies.

















https://youtu.be/SnZVpc3T60I?si=f-GGWpUzJMRpr730





• How babies communicate (verbal and non-verbal)



Understanding

At around ten months of age, the infant can understand more than he or she can say



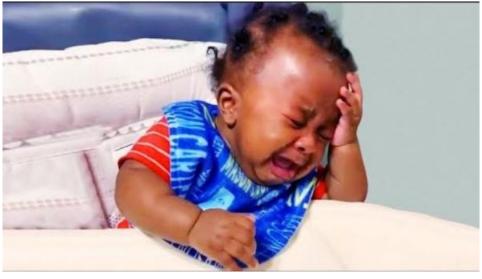
















https://youtu.be/SQL1hBP0M7I

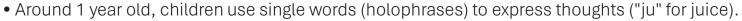




How babies communicate (verbal and non-verbal)



Holophrastic Speech





• Meaning of these words depends on context and familiarity with the child ("ju" might mean juice or milk depending on the situation). e.g. Andrew says "gurt" when he means "I want yogurt."















https://youtu.be/bHcXWNyxeTg?si=hA7Z-GDvU8CuOMQt

https://youtu.be/V_BJ-0EB_9s?si=fp9LLOGGjWMu960q



• How babies communicate (verbal and non-verbal)

















Underextension & Overextension

- Children initially misuse new words: "Doggie" might only refer to the family's specific dog (underextension).
- Or they might use a word too broadly: "Doggie" for all animals (overextension).





Underextension



https://youtu.be/AgY7nkbYFaw?si=PnOFGzQarBnE3AAM



• How babies communicate (verbal and non-verbal)

















First words and cultural influences

- •First words in English tend to be nouns (cup, ball) reflecting a focus on object identification.
- •In verb-heavy languages like Chinese, early words might be verbs, possibly due to cultural emphasis on action and relationships between objects.

 The First Words Produced by Children

The First Words Produced by Children in Bilingual English/Mandarin Chinese Environments

Sandra Levey and Denise Cruz Lehman College, City University of New York



The first words produced by children in bilingual environments where English and Mandarin Chinese are spoken were investigated. The goal was to determine if verbs would appear in the children's early productions, which would be consistent with the findings for the first words produced by children in monolingual Mandarin Chinese environments. A greater number of nours than verbs were produced as children's first words in both English and Mandarin Chinese. Although nours were produced in both English and Chinese, verbs were produced only in Mandarin Chinese.

Children's first words have been a focus of interest to many researchers, in part to determine if there is a universal basis to lexical acquisition and if adults' verbal communication or input plays a role in the acquisition of early words. Nelson (1973) initiated this area of study with the finding that the first words of monolingual English-speaking children could be placed into four categories: nouns (naming objects or entities), verbs (requests for objects and/or actions), social terms (personal comments and greetings), and modifiers (descriptions). Nouns could be further divided into two categories: specific and general nominals. Specific nominals consisted of proper names (e.g., Mommy, Daddy). General nominals consisted of human terms (baby); food and drink items (juice, milk, cookie, water, toast, apple, cake); animals (dog, cat, duck, horse); clothing (shoes, hat); toys (ball, blocks); vehicles (car, boat, truck); furniture (clock, light); other common items (bottle, key, book); and action words (up, sit, see, eat, down, go). Social terms consisted of personal/social words (hi, bye-bye, no, yes/yeah, please, thank you).

Nouns were found to be the largest category of first words (Gentner, 1982; Nelson, 1973; Nelson, Hampson, & Shaw, 1993), and werbs were the second largest category; followed by modifiers and personal/social utterances. The dominance of nouns produced by children in monolingual English-speaking environments has been confirmed by the analysis of the first 50 words produced by English-speaking children out of a total production of 1,789 children (Fenson et al., 1994). In this sample, 549 of words were classified as nouns, but none could be classified as werbs. The remaining words were classified as entire hours not works.

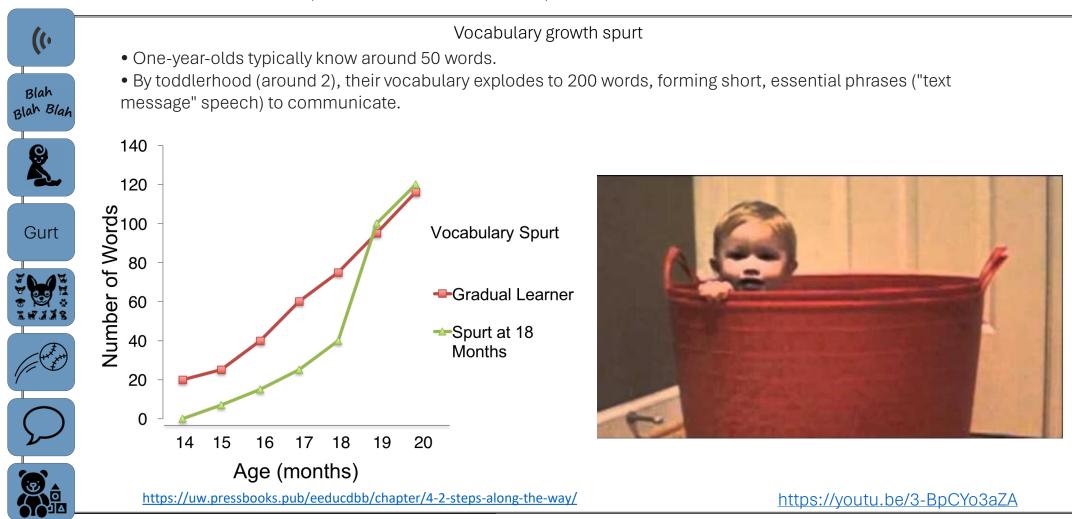
The predominance of nouns as first words in other monolingual language environments, such as French (Bassano, 2000). Hebrew (Dromi, 1988), Italian (Caselli et al., 1995; D'Odorico, Carubhi, Salemi, & Calva, 2001), and English (Goldfield, 1993; Nelson, 1973) lent support to the hypothesis that nouns comprise the first words of children across all languages (Golfinfoff, Mervis, & Hirsh-Paek, 1994). Contrary to these findings, verbs have been reported to appear to a greater degree in the first words produced by children speaking Mandarin Chinese (Tardif, 1995, 1996). Spranet (Clano, 1997). An explanation for the difference in the production of first words among different languages may be found in the environmental effects.

CARETAKER INPUT

The categories of children's earliest words appear to relate to the input of caretakers in children's language environments



How babies communicate (verbal and non-verbal)





How babies communicate (verbal and non-verbal)







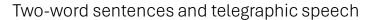












- •At 18 months, toddlers start using two-word phrases ("baby bye-bye") to communicate.
- •These early sentences focus on meaning, omitting articles and grammatical features, similar to text messages ("Give baby ball").





https://youtu.be/8hnmfi-8df0?si=P3Pd2j9N-kXf0gF_



5.2 Language Milestones

• How babies communicate (verbal and non-verbal)



2 Months

- Coos, makes gurgling sounds
- Turns head toward sounds



4 Months

- Begins to babble
- Babbles with expression and copies sounds he hears
- Cries in different ways to show hunger, pain, or being tired



6 Months

- Responds to sounds by making sounds
- Strings vowels together when babbling ("ah," "eh," "oh") and likes taking turns with parent while making sounds
- Responds to own name
 Makes as under a share.
- Makes sounds to show joy and displeasure
- Begins to say consonant sounds (jabbering with "m," "b")



9 Months

- Understands "no"
- Makes a lot of different sounds like "mamamama" and "bababababa"
- Copies sounds and gestures of others
- Uses fingers to point at things



1 Year

- Responds to simple spoken requests
- Uses simple gestures, like shaking head "no" or waving "bye-bye"
- Makes sounds with changes in tone (sounds more like speech)
- Says "mama" and "dada" and exclamations like "uhoh!"
- Tries to say words you say



18 Months

- Says several single words
- Says and shakes head now
- Points to show others what is wanted



2 Years

- •Points to things or pictures when they are named
- •Knows names of familiar people and body parts
- •Says sentences with 2 to 4 words
- •Follows simple instructions
- •Repeats words overheard in conversation
- •Points to things in a book



5.2 Language Milestones

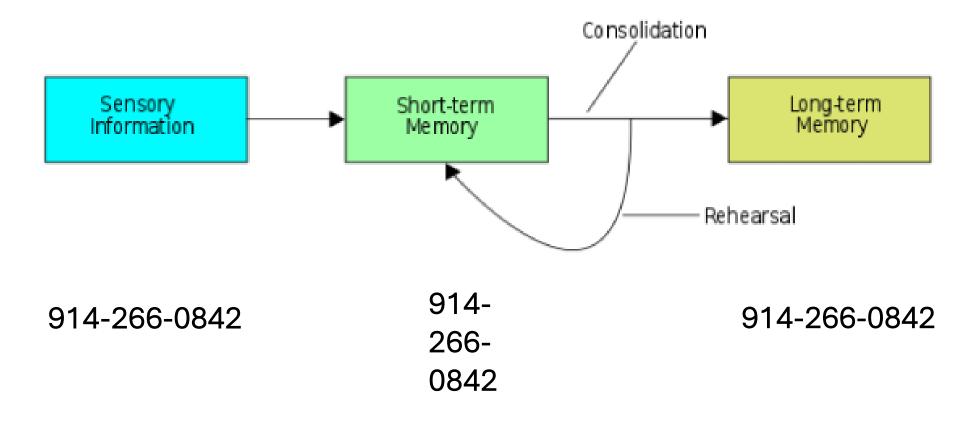
- How babies communicate (verbal and non-verbal)
- Child-Directed Speech: exaggerating the vowel and consonant sounds, using a high-pitched voice, and delivering the phrase with great facial expression



https://www.youtube.com/watch?v=hTqtGJwsJVE&t=1424s

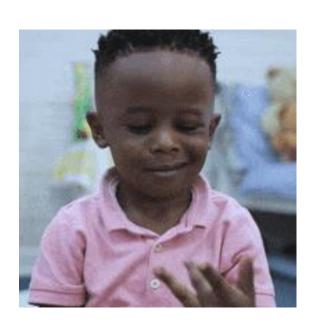


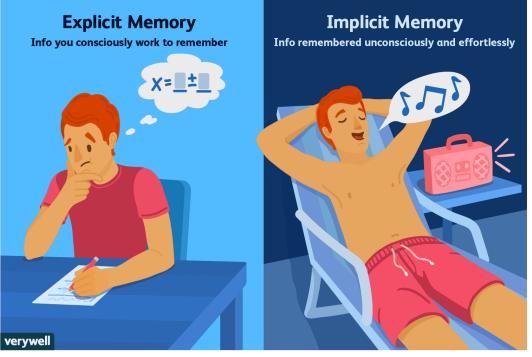
- How babies remember the world.
- **Memory Stages**: Our memory has 3 stages: Sensory (fleeting), Short-term (seconds), and Longterm (potentially permanent).





- How babies remember the world.
- Explicit Memory: This includes details about events (episodic) and general knowledge (semantic). Flashbulb memories (vivid snapshots of shocking events) are a specific type of episodic memory.
- Implicit Memory: This handles procedures learned through practice, like riding a bike or playing a sport. We access these skills automatically without even thinking.

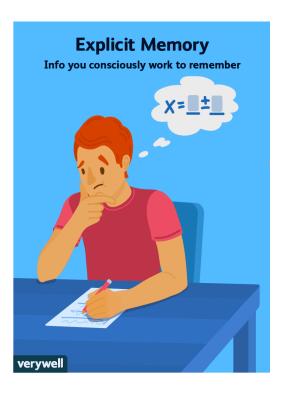








- How babies remember the world.
- Explicit Memory: This includes details about events (episodic) and general knowledge (semantic). Flashbulb memories (vivid snapshots of shocking events) are a specific type of episodic memory.



Semantic memory: which concerns facts

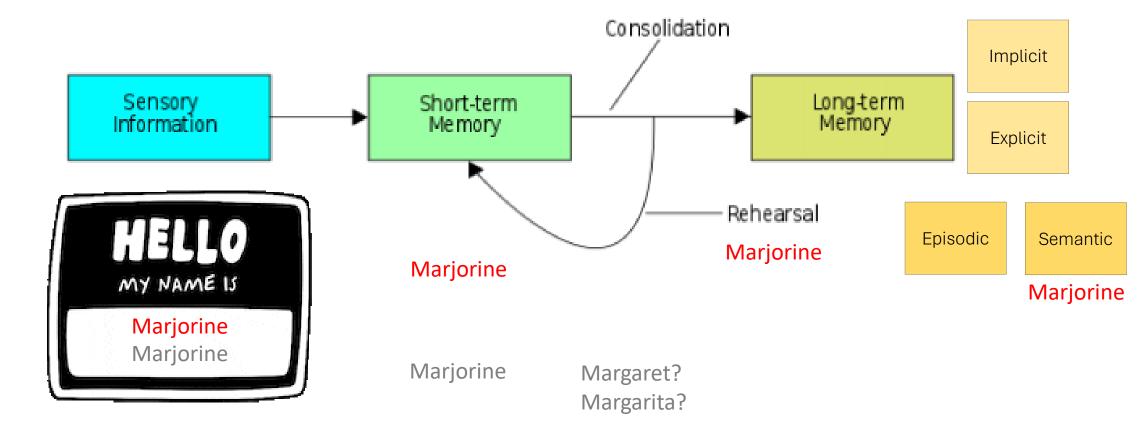


Episodic memory: which concerns primarily personal or autobiographical information





- How babies remember the world.
- **Memory Stages**: Our memory has 3 stages: Sensory (fleeting), Short-term (seconds), and Longterm (potentially permanent).





• Understanding memory and attention in babies/toddlers has been difficulty, but progress has been made.



