BRIGHT FUTURES HANDBOUT ➤ PARENT

9 MONTH VISIT

Here are some suggestions from Bright Futures experts that may be of value to your family.

HOW YOUR FAMILY IS DOING

▪ If you feel unsafe in your home or have been hurt by someone, let us know. Hotlines and community agencies can also provide confidential help.
  - Keep in touch with friends and family.
  - Invite friends over or join a parent group.
  - Take time for yourself and with your partner.

FEEDING YOUR BABY

▪ Be patient with your baby as he learns to eat without help.
  - Know that messy eating is normal.
  - Emphasize healthy foods for your baby. Give him 3 meals and 2 to 3 snacks each day.
  - Start giving more table foods. No foods need to be withheld except for raw honey and large chunks that can cause choking.
  - Vary the thickness and lumpiness of your baby’s food.
  - Don’t give your baby soft drinks, tea, coffee, and flavored drinks.
  - Avoid feeding your baby too much. Let him decide when he is full and wants to stop eating.
  - Keep trying new foods. Babies may say no to a food 10 to 15 times before they try it.
  - Help your baby learn to use a cup.
  - Continue to breastfeed as long as you can and your baby wishes. Talk with us if you have concerns about weaning.
  - Continue to offer breast milk or iron-fortified formula until 1 year of age. Don’t switch to cow’s milk until then.

YOUR CHANGING AND DEVELOPING BABY

▪ Keep daily routines for your baby.
  - Let your baby explore inside and outside the home. Be with her to keep her safe and feeling secure.
  - Be realistic about her abilities at this age.
  - Recognize that your baby is eager to interact with other people but will also be anxious when separated from you. Crying when you leave is normal. Stay calm.
  - Support your baby’s learning by giving her baby balls, toys that roll, blocks, and containers to play with.
  - Help your baby when she needs it.
  - Talk, sing, and read daily.
  - Don’t allow your baby to watch TV or use computers, tablets, or smartphones.
  - Consider making a family media plan. It helps you make rules for media use and balance screen time with other activities, including exercise.

DISCIPLINE

▪ Tell your baby in a nice way what to do (“Time to eat”), rather than what not to do.
  - Be consistent.
  - Use distraction at this age. Sometimes you can change what your baby is doing by offering something else such as a favorite toy.
  - Do things the way you want your baby to do them—you are your baby’s role model.
  - Use “No!” only when your baby is going to get hurt or hurt others.
9 MONTH VISIT—PARENT

SAFETY

- Use a rear-facing-only car safety seat in the back seat of all vehicles.
- Have your baby’s car safety seat rear facing until she reaches the highest weight or height allowed by the car safety seat’s manufacturer. In most cases, this will be well past the second birthday.
- Never put your baby in the front seat of a vehicle that has a passenger airbag.
- Your baby’s safety depends on you. Always wear your lap and shoulder seat belt. Never drive after drinking alcohol or using drugs. Never text or use a cell phone while driving.
- Never leave your baby alone in the car. Start habits that prevent you from ever forgetting your baby in the car, such as putting your cell phone in the back seat.
- If it is necessary to keep a gun in your home, store it unloaded and locked with the ammunition locked separately.
- Place gates at the top and bottom of stairs.
- Don’t leave heavy or hot things on tablecloths that your baby could pull over.
- Put barriers around space heaters and keep electrical cords out of your baby’s reach.
- Never leave your baby alone in or near water, even in a bath seat or ring. Be within arm’s reach at all times.
- Keep poisons, medications, and cleaning supplies locked up and out of your baby’s sight and reach.
- Put the Poison Help line number into all phones, including cell phones. Call if you are worried your baby has swallowed something harmful.
- Install operable window guards on windows at the second story and higher. Operable means that, in an emergency, an adult can open the window.
- Keep furniture away from windows.
- Keep your baby in a high chair or playpen when in the kitchen.

WHAT TO EXPECT AT YOUR CHILD’S 12 MONTH VISIT

We will talk about

- Caring for your child, your family, and yourself
- Creating daily routines
- Feeding your child
- Caring for your child’s teeth
- Keeping your child safe at home, outside, and in the car

Consistent with Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition

For more information, go to https://brightfutures.aap.org.
**PARENTS’ GUIDE TO SCREEN TIME**

**What Is Screen Time?**

Screen time is the **total** time spent by:

- Watching TV
- On a computer
- Playing video games
- Using a smartphone or tablet

**DID YOU KNOW?**

Toddlers exposed to more screen time had higher rates of speech & language delay. For every 30-minute increase in daily handheld screen time, there was a 49% increased risk of expressive language delay!

American Academy of Pediatrics (2017) Handheld Screen Time Linked with Speech Delays in Young Children

**How Much Screen Time?**

American Academy of Pediatrics Recommends:

- Birth to 2 years - NO screen time
- 2-5 years of age - Up to 1 hour daily
- School Age Children - 1-2 hours daily

**Set Guidelines**

Set device free zones and family rules for screens:

- No devices in bedrooms
- Turn screens off an hour before bed
- No devices during dinner time

**Stay Involved**

- Research games and apps to make sure that they are **appropriate** and **high quality** at [www.commonsensemedia.org](http://www.commonsensemedia.org)
- Watch videos with your child and talk about them
- Encourage hobbies outside the online world

**Prioritize Play!**

We know the best way to help children learn and grow is to **play and interact with them**! Children develop speech, language, and social skills through playing with peers and adults. Have fun during everyday interactions like bath time, meal time, and at the grocery store.

Screen time will not promote your child’s development, but we can’t ignore that, allowed occasionally, it can help you get through a busy day. Whenever possible, when your child watches media on your phone or tablet, talk about it or even re-enact it together!

**Sources:**


WWW.THESCHOOLSLP.COM
What Are ACEs?

And How Do They Relate to Toxic Stress?

“ACEs” stands for “Adverse Childhood Experiences.” These experiences can include things like physical and emotional abuse, neglect, caregiver mental illness, and household violence.

The more ACEs a child experiences, the more likely he or she is to suffer from things like heart disease and diabetes, poor academic achievement, and substance abuse later in life.

Toxic stress explains how ACEs “get under the skin.”

Experiencing many ACEs, as well as things like racism and community violence, without supportive adults, can cause what’s known as toxic stress. This excessive activation of the stress-response system can lead to long-lasting wear-and-tear on the body and brain.

The effect would be similar to revving a car engine for days or weeks at a time.

We can reduce the effects of ACEs and toxic stress.

For those who have experienced ACEs, there are a range of possible responses that can help, including therapeutic sessions with mental health professionals, meditation, physical exercise, spending time in nature, and many others.

The ideal approach, however, is to prevent the need for these responses by reducing the sources of stress in people’s lives. This can happen by helping to meet their basic needs or providing other services.

Likewise, fostering strong, responsive relationships between children and their caregivers, and helping children and adults build core life skills, can help to buffer a child from the effects of toxic stress.

ACEs affect people at all income and social levels, and can have serious, costly impact across the lifespan. No one who’s experienced significant adversity (or many ACEs) is irreparably damaged, though we need to acknowledge trauma’s effects on their lives. By reducing families’ sources of stress, providing children and adults with responsive relationships, and strengthening the core life skills we all need to adapt and thrive, we can prevent and counteract lasting harm.

Learn more about ACEs from the Centers for Disease Control and Prevention. For more information: https://developingchild.harvard.edu/ACEs
Choose the right dentist for your family. Make your child’s first dental visit a good one.

Ask a few questions:

1. Do you want to see the same dentist as your child? Pediatric dentists see kids and young people. Family and general dentists see kids and adults.
2. Does your child have special needs?
3. Will you be able to get to the office every 6 months for visits?
4. How big is the practice? Do you want to see the same dentist or hygienist at each visit?
5. How does the office handle dental emergencies?
6. What will happen at the first visit?
7. What will happen if your child is nervous or unable to complete the exam?

The dentists listed on the back of this page will see your child for a well-baby dental visit.

If you have HUSKY Health, please call CT Dental Health Partnership. They will help you find a dentist. Hearing impaired clients, please dial 711 for Relay Connecticut assistance.

1-855-CTDENTAL (1-855-283-3682).
Monday through Friday, from 8:00 a.m. to 5:00 p.m.
These dentists will see your child for the “Well Baby Dental Visit” around the time your child turns 1, when his or her teeth first come in.

<table>
<thead>
<tr>
<th>Dentist Name</th>
<th>Address</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>Central Ct Pediatric Dentistry</td>
<td>828 Newfield St</td>
<td>(860)613-0553</td>
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<tr>
<td>Robert R Gatehouse, Tiffany Haim,</td>
<td>Middletown CT 06457</td>
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<tr>
<td>Amy O’Callahagan, Z Christopher Religa, Daniel J Shoemaker</td>
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<tr>
<td>Sweet Tooth Pediatric Dentistry</td>
<td>583 Saybrook Rd</td>
<td>(860)347-4681</td>
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<tr>
<td>Erica Pitera (Pediatric Dentist)</td>
<td>Middletown CT 06457</td>
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<tr>
<td>Arborview Dental Care</td>
<td>195 S Main St</td>
<td>(860)346-2470</td>
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<tr>
<td>Apollonia Dental</td>
<td>200 Main St Ext.</td>
<td>(860)704-8000</td>
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<tr>
<td>Nicole M Cambria</td>
<td>85 Church St Ste 400</td>
<td>(860)344-0004</td>
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<tr>
<td>Community Health Center, Inc.</td>
<td>675 Main St</td>
<td>(860)347-6971</td>
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<tr>
<td>Laurence K Levy</td>
<td>193 Main St</td>
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<tr>
<td>Middletown Dental Associates</td>
<td>547 Main St</td>
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<tr>
<td>Peter Gletzakos, Shashi Ghodake</td>
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<tr>
<td>Michele S Salonia</td>
<td>955 South Main Street</td>
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<tr>
<td>Nova Dental</td>
<td>136 Berlin Rd</td>
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<tr>
<td>Asma Ijaz, Paul Chen (pediatric dentist)</td>
<td>Cromwell CT 06416</td>
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<tr>
<td>Gloria Perry</td>
<td>75 Berlin Rd, Suite 106</td>
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<tr>
<td>Jeffery M Shuster</td>
<td>28 Shunpike Rd, Ste 7</td>
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<tr>
<td>Glazer Dental Associates</td>
<td>16 Main St Ste 303</td>
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<td>Middletown Dental Associates</td>
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<td>Peter Gletzakos, Shashi Ghodake</td>
<td>East Hampton CT 06424</td>
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<tr>
<td>William J Lema</td>
<td>6 Way Rd Ste 210</td>
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<td>Portland Dental Care</td>
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<tr>
<td>Peter Gletzakos, Shashi Ghodake</td>
<td>Portland CT, 06480</td>
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<td>George M Mantikas</td>
<td>142 E High St</td>
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<tr>
<td>Keith E Campbell</td>
<td>212 Saybrook Rd</td>
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<td>George M Mantikas</td>
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These dentists will see children who are at least 2 years old and older.

| Gentle Dental Care                 | 414 S Main St                 | (860)346-9601 |
| Cromwell Dental                    | 30 Country Squire Dr          | (860) 635-6445 |
| Durham Dental Associates           | 360 Main St Po Box 177        | (860)349-1123 |
| George M Mantikas                  | 142 E High St                 | (860)267-6666 |
| Keith E Campbell                   | 212 Saybrook Rd               | (860)345-2282 |

*This is not a specific endorsement or recommendation for any listed dentist. We hope it will be a helpful tool for your family to find a dentist who will see your child early.