



# BRIGHT FUTURES HANDOUT ► PARENT

## 3 YEAR VISIT

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

### ✓ HOW YOUR FAMILY IS DOING

- Take time for yourself and to be with your partner.
- Stay connected to friends, their personal interests, and work.
- Have regular playtimes and mealtimes together as a family.
- Give your child hugs. Show your child how much you love him.
- Show your child how to handle anger well—time alone, respectful talk, or being active. Stop hitting, biting, and fighting right away.
- Give your child the chance to make choices.
- Don't smoke or use e-cigarettes. Keep your home and car smoke-free. Tobacco-free spaces keep children healthy.
- Don't use alcohol or drugs.
- If you are worried about your living or food situation, talk with us. Community agencies and programs such as WIC and SNAP can also provide information and assistance.

### ✓ EATING HEALTHY AND BEING ACTIVE

- Give your child 16 to 24 oz of milk every day.
- Limit juice. It is not necessary. If you choose to serve juice, give no more than 4 oz a day of 100% juice and always serve it with a meal.
- Let your child have cool water when she is thirsty.
- Offer a variety of healthy foods and snacks, especially vegetables, fruits, and lean protein.
- Let your child decide how much to eat.
- Be sure your child is active at home and in preschool or child care.
- Apart from sleeping, children should not be inactive for longer than 1 hour at a time.
- Be active together as a family.
- Limit TV, tablet, or smartphone use to no more than 1 hour of high-quality programs each day.
- Be aware of what your child is watching.
- Don't put a TV, computer, tablet, or smartphone in your child's bedroom.
- Consider making a family media plan. It helps you make rules for media use and balance screen time with other activities, including exercise.

### ✓ PLAYING WITH OTHERS

- Give your child a variety of toys for dressing up, make-believe, and imitation.
- Make sure your child has the chance to play with other preschoolers often. Playing with children who are the same age helps get your child ready for school.
- Help your child learn to take turns while playing games with other children.

### ✓ READING AND TALKING WITH YOUR CHILD

- Read books, sing songs, and play rhyming games with your child each day.
- Use books as a way to talk together. Reading together and talking about a book's story and pictures helps your child learn how to read.
- Look for ways to practice reading everywhere you go, such as stop signs, or labels and signs in the store.
- Ask your child questions about the story or pictures in books. Ask him to tell a part of the story.
- Ask your child specific questions about his day, friends, and activities.

**Helpful Resources:** Smoking Quit Line: 800-784-8669 | Family Media Use Plan: [www.healthychildren.org/MediaUsePlan](http://www.healthychildren.org/MediaUsePlan)  
Information About Car Safety Seats: [www.safercar.gov/parents](http://www.safercar.gov/parents) | Toll-free Auto Safety Hotline: 888-327-4236

# 3 YEAR VISIT—PARENT

## ✓ SAFETY

- Continue to use a car safety seat that is installed correctly in the back seat. The safest seat is one with a 5-point harness, not a booster seat.
- Prevent choking. Cut food into small pieces.
- Supervise all outdoor play, especially near streets and driveways.
- Never leave your child alone in the car, house, or yard.
- Keep your child within arm's reach when she is near or in water. She should always wear a life jacket when on a boat.
- Teach your child to ask if it is OK to pet a dog or another animal before touching it.
- If it is necessary to keep a gun in your home, store it unloaded and locked with the ammunition locked separately.
- Ask if there are guns in homes where your child plays. If so, make sure they are stored safely.

## WHAT TO EXPECT AT YOUR CHILD'S 4 YEAR VISIT

### We will talk about

- Caring for your child, your family, and yourself
- Getting ready for school
- Eating healthy
- Promoting physical activity and limiting TV time
- 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>.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



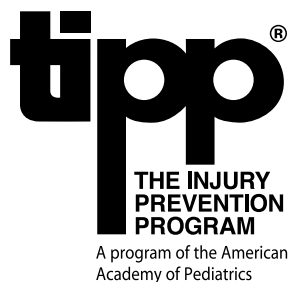
The information contained in this handout should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances. Original handout included as part of the *Bright Futures Tool and Resource Kit*, 2nd Edition.

Inclusion in this handout does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of the resources mentioned in this handout. Web site addresses are as current as possible but may change at any time.

The American Academy of Pediatrics (AAP) does not review or endorse any modifications made to this handout and in no event shall the AAP be liable for any such changes.

© 2019 American Academy of Pediatrics. All rights reserved.

# 2 to 4 Years



## 2 TO 4 YEARS

### Safety for Your Child

Did you know that injuries are the leading cause of death of children in the United States? Most of these injuries can be prevented.

Often, injuries happen because parents are not aware of what their children can do. Children *learn quickly*, and before you know it your child will be *jumping, running, riding* a tricycle, and *using tools*. Your child is at special risk for injuries from falls, drowning, poisons, burns, and car crashes. Your child doesn't understand dangers or remember "no" while playing and exploring.

#### Falls

Because your child's abilities are so great now, he or she will find an endless variety of dangerous situations at home and in the neighborhood.

Your child can fall off play equipment, out of windows, down stairs, off a bike or tricycle, and off anything that can be climbed on. **Be sure the surface under play equipment is soft enough to absorb a fall.** Use safety-tested mats or loose-fill materials (shredded rubber, sand, wood chips, or bark) maintained to a depth of at least 9 inches underneath play equipment. Install the protective surface at least 6 feet (more for swings and slides) in all directions from the equipment.

Lock the doors to any dangerous areas. **Use gates on stairways and install operable window guards** above the first floor. Fence in the play yard. **If your child has a serious fall or does not act normally after a fall, call your doctor.**

#### Firearm Hazards

Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. It is best to keep all guns out of the home. If you keep a gun, keep it unloaded and in a locked place, with the ammunition locked separately. **Handguns are especially dangerous.** Ask if the homes where your child visits or is cared for have guns and how they are stored.

#### Burns

The kitchen can be a dangerous place for your child, especially when you are cooking. If your child is underfoot, hot liquids, grease, and hot foods can spill on him or her and cause serious burns. Find something safe for your child to do while you are cooking.

Remember that kitchen appliances and other hot surfaces such as irons, ovens, wall heaters, and outdoor grills can burn your child long after you have finished using them. Also, when you use the microwave stay nearby to make sure your child does not remove the hot food.



(over)

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



**If your child does get burned, immediately put cold water on the burned area. Keep the burned area in cold water for a few minutes to cool it off. Then cover the burn loosely with a dry bandage or clean cloth. Call your doctor for all burns. To protect your child from tap water scalds, the hottest temperature at the faucet should be no more than 120°F. In many cases you can adjust your water heater.**

Make sure you have a working smoke alarm on every level of your home, especially in furnace and sleeping areas. Test the alarms every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries at least once a year.

## Poisonings

Your child will be able to *open* any drawer and *climb* anywhere curiosity leads. Your child may *swallow anything* he or she finds. Use only household products and medicines that are absolutely necessary and keep them safely capped and out of sight and reach. Keep all products in their original containers. Use medications as directed and safely dispose of unused medicine as soon as you are done with it.

**If your child does put something poisonous in his or her mouth, call the Poison Help Line immediately. Add the Poison Help number (1-800-222-1222) to your phone contacts list. Do not make your child vomit.**



## And Remember Car Safety

**Car crashes** are the **greatest danger** to your child's life and health. The crushing forces to your child's brain and body in a collision or sudden stop, even at low speeds, can cause injuries or death.

**To prevent these injuries, correctly USE a car safety seat EVERY TIME** your child is in the car. It is safest for children to ride rear facing as long as possible, until they reach the highest weight or height allowed by the manufacturer. Many convertible seats have limits that will permit children to ride rear facing for 2 years or more. When they outgrow rear facing, children should ride forward facing in a car safety seat with a harness. Many of these can be used up to 65 pounds or more, and this will help provide the most protection possible.



The safest place for all children to ride is in the back seat. In an emergency, if a child **must** ride in the front seat, move the vehicle seat back as far as it can go, away from the airbag.

Do not allow your child to play or ride a tricycle in the street. **Your child should play in a fenced yard or playground.** Driveways are also dangerous. Walk behind your car before you back out of your driveway to be sure your child is not behind your car. You may not see your child through the rearview mirror.

**Remember, the biggest threat to your child's life and health is an injury.**

From Your Doctor

The information in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.



# Sleep Problems in Children

Sleep problems are very common during the first few years of life. Problems may include waking up during the night, not wanting to go to sleep, having nightmares, sleepwalking, and bedwetting.

Read on for more information from the American Academy of Pediatrics on common sleep problems and how parents can help their children develop good sleep habits. Remember that children differ in how much sleep they need, how long it takes them to fall asleep, and how easily they wake up. If you have any questions about your child's sleep habits, ask your child's doctor.

## Babies

Babies do not have regular sleep cycles until about 4 months of age. While newborns sleep about 16 to 17 hours per day, they may only sleep for 1 or 2 hours at a time. As babies get older, they need less sleep. Keep in mind that your baby's sleep needs and patterns may be different than those of other babies.

### How to Help Your Baby (and You) Sleep Better at Night

- 1. Try not to stimulate or wake her when you feed or change her during the night.** If you speak to her, speak softly.
- 2. Make daytime playtime.** Keep your baby awake longer during the day. This will help her sleep for longer periods during the night. Spend time talking and playing together.
- 3. Put your baby to bed when she is drowsy.** Do not wait until she is asleep. This will help your baby learn to fall asleep on her own, in her own bed. If you hold her or rock her to sleep, it may make it harder for her to go back to sleep if she wakes up during the night. Remember to place your baby on her back to sleep for every sleep until she is 1 year of age. Visit [www.HealthyChildren.org/safesleep](http://www.HealthyChildren.org/safesleep) to learn more about how to create a safe sleeping environment for your baby.
- 4. Do not rush right in to soothe your crying baby.** Give your baby time to put herself back to sleep. Your baby needs to learn how to fall back asleep on her own. It is normal for a 6-month-old to wake up during the night and then go back to sleep after a few minutes. Of course, you can attend to her, such as feeding her, changing a soiled diaper, or comforting her if she is sick, if needed.

## Toddlers and Preschoolers

Many parents find their toddler's bedtime to be the hardest part of the day. Children this age often resist going to sleep, especially if they have older siblings who are still awake.

### How to Help Your Toddler Develop Good Sleep Habits

- 1. Set up a quiet routine before bedtime.** This helps your child understand that it will soon be time to go to sleep. Use this time to read him a story, listen to quiet music, or give him a bath. Do not play with your child before bed, because active play may make your child too excited to sleep.
- 2. Be consistent.** Make bedtime the same time every night. This helps your child know what to expect and helps him establish healthy sleep patterns.

- 3. Let your child take a favorite thing to bed each night.** Your child may want to sleep with a teddy bear, special blanket, or favorite toy. These often help children fall asleep—especially if they wake up during the night. Make sure the object is safe and doesn't have any choking hazards, such as buttons or loose ribbons. Stuffing or pellets inside stuffed toys can also be dangerous.
- 4. Make sure your child is comfortable.** Take care of your child's needs before bedtime so he doesn't use them as reasons to avoid going to sleep. He may want a drink of water, a light left on, or the door left slightly open.
- 5. Do not let your child sleep in the same bed with you.** This can make it harder for him to fall asleep when he is alone.
- 6. Do not return to your child's room when he calls out.** Instead, try to
  - Make sure your child is safe and well before bedtime. If he is safe and well, there is no need to go in his room while he sorts out how to get himself back to sleep.
  - Keep in mind that your child's main goal is to get you to appear. So if you appear for any reason, even for "just checking," he will expect you to come each time he calls out.
- 7. Give it time.** Helping your child develop good sleep habits can be a challenge, and it is normal to get upset when a child keeps you awake at night. Try to be understanding. A negative response from a parent can sometimes make a sleep problem worse. Keep in mind that your child needs the time and opportunity to find out how go back to sleep on his own when he wakes up during the night.

## Common Sleep Problems

Children wake up during the night for many reasons. Most of the time it's because they are overtired or under stress. Keeping your child on a regular sleep schedule may help prevent many of these problems.

Common sleep problems include nightmares, night terrors, sleepwalking and sleep talking, bedwetting, and teeth grinding. If your child's sleep problems persist or get worse, talk with your child's doctor.

### Nightmares

Nightmares are scary dreams that often happen during the second half of the night, when dreaming is most intense. Children may wake up crying or feeling afraid and may have trouble going back to sleep.

### What You Can Do

- Go to your child as quickly as possible.
- Assure her that you are there and will not let anything harm her.
- Encourage her to tell you what happened in the dream. Remind her that dreams are not real.

- Allow her to keep a light on if it makes her feel better.
- Once your child is ready, encourage her to go back to sleep.
- See if there is something that is scaring your child, like shadows. If so, make sure they are gone.

## Night Terrors

Night terrors occur most often in toddlers and preschoolers and take place during the deepest stages of sleep. Deepest sleep usually happens early in the night, often before parents' bedtime. During a night terror, your child might

- Cry uncontrollably
- Sweat, shake, or breathe fast
- Have a terrified, confused, or glassy-eyed look
- Thrash around, scream, kick, or stare
- Not recognize you or realize you are there
- Try to push you away, especially if you try to hold him

While night terrors can last as long as 45 minutes, most are much shorter. Most children fall right back to sleep after a night terror because they actually have not been awake. Unlike a nightmare, a child will not remember a night terror.

## What You Can Do

- Stay calm. Night terrors are often more frightening for the parent than the child.
- Do not try to wake your child.
- Make sure your child cannot hurt himself. If he tries to get out of bed, gently restrain him.

Remember, after a short time, your child will probably relax and sleep quietly again. If your child has night terrors, be sure to tell his babysitters what they are and what to do. If night terrors persist, talk with your child's doctor.

## Sleepwalking and Sleep Talking

Like night terrors, sleepwalking and sleep talking happen when a child is in a deep sleep. While sleepwalking, your child may have a blank, staring face. She may not respond to others, and it may be very difficult to wake her up. Most sleepwalkers return to bed on their own and do not remember getting out of bed. Sleepwalking tends to run in families. It can even occur several times in one night among older children and teens.

## What You Can Do

- Make sure your child doesn't hurt herself while sleepwalking. Clear the bedroom of things your child could trip or fall on.
- Lock outside doors so your child cannot leave the house.
- Block stairways so your child cannot go up or down.
- Do not try to wake your child when she is sleepwalking or sleep talking. Gently lead her back to bed, and she will probably settle down on her own.

## Bedwetting

Bedwetting at night (also called *nocturnal enuresis*) is very common among young children. Sometime in the first years of life, most children stop urinating in their sleep. Bedwetting usually disappears as children get older. However, for some children (mostly boys), bedwetting can occur throughout grade school and even middle school.

If you are concerned about your child's bedwetting, talk with your child's doctor. There are treatments available.

## What You Can Do

- Do not blame or punish your child for wetting the bed. Reassure him that it will get better in time.
- Keep in mind that bedwetting is not your child's fault. Urinating while asleep often involves your child's maturing brain.
  - Like sleepwalking and sleep talking, bedwetting just happens.
  - Even if your child urinates before going to bed and drinks very little in the evening, the kidneys continue to produce urine.
  - Enuresis occurs randomly through each sleep stage, so waking your child up at random or set times to use the bathroom in the middle of the night is usually unsuccessful.
  - Enuresis may occur if there is a family history of bedwetting. Many boys experience enuresis until the same age their fathers did.
- Whether your child needs to change his training pants or change the sheets, invite your child to help with the task. This task shouldn't be used or seen as a punishment.
- Set a no-teasing rule in the family for bedwetting.

## Teeth Grinding

It is common for children to grind their teeth during the night. Though it makes an unpleasant sound, teeth grinding is usually not harmful to your child's teeth, but you may want to check with your child's dentist to make sure. It may be related to tension and anxiety and usually goes away in a short while. However, it may reappear when your child is stressed.

## What You Can Do

- Try to help your child deal with stress.
- Talk with your child's doctor to rule out any medical problems that may be causing the problem. Your child's doctor may ask you to keep a sleep diary to track your child's sleep habits.

## From Your Doctor

The American Academy of Pediatrics (AAP) is an organization of 66,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

The persons whose photographs are depicted in this publication are professional models. They have no relation to the issues discussed. Any characters they are portraying are fictional. Listing of resources does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication. The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

© 2017 American Academy of Pediatrics. All rights reserved.

2 of 2

American Academy of Pediatrics

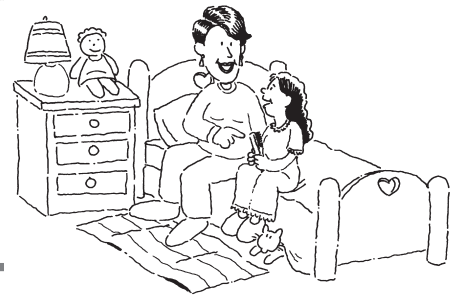
DEDICATED TO THE HEALTH OF ALL CHILDREN®



healthychildren.org

Powered by pediatricians. Trusted by parents.  
from the American Academy of Pediatrics

# Healthy Communication With Your Child



Healthy communication with your child is one of the most important and rewarding skills that you can develop as a parent. It also makes the tough parts of parenting (such as disciplining your child) much easier and more effective. Good communication is a two-way street, meaning that listening to your child is just as important as talking to him.

When you talk in a calm and caring manner, you let your child know what you expect of him and give him information that he needs. You also show him that when you ask him to calm down and control his temper, you are practicing what you preach.

Listening to your child helps you learn more about what is going on with your child. You can learn his thoughts about a subject, how he is getting along socially, what problems he may be having, and whether your child is getting the message that you are trying to communicate.

Good communication is needed so that you can be a good teacher for your child and know what is happening in your child's life.

## Why is healthy communication important?

Healthy communication is important because it helps your child

- Feel cared for and loved
- Feel safe and not all alone with her worries
- Learn to tell you what she feels and needs directly in words
- Learn how to manage her feelings safely so that she does not act on feelings without thinking
- Talk to you openly
- Learn to listen to you

Healthy communication also helps *you*

- Feel close to your child
- Know your child's needs
- Know you have powerful tools to help your child develop and grow
- Manage your own stress and frustrations with your child

## What are the building blocks of healthy communication?

Here are a few important ways to build healthy communication

- **Be available.** Make time in everyone's busy schedule to stop and talk about things. Even 10 minutes a day without distractions for you and your child to talk can make a big difference in forming good communication habits. Turn off the television or radio. Give your undivided attention to your child. Sit down and look at your child while you talk. Those few minutes a day can be of great value.
- **Be a good listener.** When you listen to your child, you help your child feel loved and valued. Ask your child about his feelings on a subject. If you are not clear about what your child is saying, repeat what you are hearing to be sure that you understand what your child is trying to say. You do not

have to agree with what your child is saying to be a good listener. Sharing his thoughts with you helps your child calm down, so later he can listen to you.

- **Show empathy.** This means tuning in to your child's feelings and letting him know you understand. If your child is sad or upset, a gentle touch or hug may let him know that you understand those sad or bad feelings. Do not tell your child what he thinks or feels. Let him express those feelings. And be sure not to minimize these feelings by saying things like, "It's silly to feel that way," or "You'll understand when you get older." His feelings are real to him and should be respected.
- **Be a good role model.** Remember, children learn by example. Use words and tones in your voice that you want your child to use. Make sure that your tone of voice and what you do send the same message. For example, if you laugh when you say, "No, don't do that," the message will be confusing. Be clear in your directions. Once you get the message across, do not wear out your point. If you use words to describe your feelings, it will help your child to learn to do the same. When parents use feeling words, such as, "It makes me feel sad when you won't do what I ask you to do," instead of screaming or name calling, children learn to do the same.

## Keys to healthy communication

### Do

- Give clear, age-appropriate directions such as, "When we go to the store I expect you to be polite and stay with me." Make sure your child understands what you have said. Sometimes children do not fully understand the meanings of words they hear and use.
- Praise your child whenever you can.
- Calmly communicate your feelings.
- Be truthful.
- Listen carefully to what your child says.
- Use your talking times as teachable moments – do not miss opportunities to show your child healthy communication.
- Model what you want your child to do – practice what you preach.
- Make sure that when you are upset with your child, she knows that it is her behavior that is the problem, not the child herself.

### Don't

- Give broad, general instructions such as, "You'd better be good!"
- Name call or blame. "You are bad" should be replaced with "I don't like the way you are acting."
- Yell or threaten.
- Lie or tell your child half-truths.
- Use silence to express strong feelings. Long silences frighten and confuse children.

## Discipline is not punishment

Part of a parent's job is to discipline a child. Discipline is not punishment. Discipline is actually a form of communication. It means teaching children appropriate behavior and correcting inappropriate behavior.

How do you change a child's behavior? The most effective way is through healthy communication. Make sure to teach your child what positive behavior is and praise him when he behaves the way you want him to. Focus on the things he does right and he will be less likely to do things you do not want him to do.

No matter how old your child is, he needs you to calmly and clearly explain (in language that he can fully understand) what you expect from him and what the consequences will be (for example, taking away a privilege) if he acts inappropriately. Then, if the child does misbehave, follow through on the consequences you and he have already discussed. This way, you are not reacting purely out of anger or frustration.

## Keeping your cool

There are times when all parents feel that they are out of patience. However, it is always important to find ways to help your child to behave without hurting her feelings. Here are a few ways to calm yourself when you feel stressed, before you try to talk with your child.

- Take a few deep breaths very slowly.
- Wait 5 minutes before starting to talk to your child.
- Try to find a word to label what you are feeling (such as "disappointment"). Say it to yourself and be sure that it is appropriate for you child.
- Share your feelings of frustration with your spouse or a friend.
- Do not hold grudges. Deal only with the present.
- Seek professional help if you feel that you have lost control.

## Quick ways to offer praise

A smile and a short phrase can communicate valuable information. Here are just a few phrases that will go a long way.

- Outstanding!
- Nice work!
- Terrific!
- You made my day!
- You are so responsible.
- Good for you.
- You are really growing up!
- I like the way you share.
- Awesome!
- You figured it out on your own.
- I like the way you took care of that.
- What a good listener you are!
- You are so important to me.
- I love you so much!
- Bravo!

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

## From your doctor

American Academy  
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

The American Academy of Pediatrics is an organization of 60,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.  
American Academy of Pediatrics  
Web site—[www.aap.org](http://www.aap.org)

Copyright © 2003  
American Academy of Pediatrics, Updated 9/03