

Guide for mothers and fathers



This publication is dedicated to new parents. It offers primary information on: caring for babies from birth to their first year of life, what is required for their first illnesses, where to go and what to do for assistance, the services offered by regional Health Services, and the presence of cultural mediators for foreign mothers and couples in Consultories and Reserved Areas.

The publication is available in Italian, English, French, Russian. Spanish, Arabic, Chinese, Romanian, Portuguese, Albanian, and Urdu.

The intention was that of offering a specific contribution to parents, so that the birth of a child can be a real moment of great joy and, in the event of any difficulty, immediate

responses can be given to any doubts and questions. However, the pamphlet is only an informational instrument. The occasion for confrontations and decisions regarding the health of your little one will still be your relationship with your child's pediatrician and with the health personnel present in the Consultories and Reserved Areas for immigrant women and their children: obstetricians, gynecologists, pediatricians, and health assistants. Mothers and couples can, therefore, contact these professionals and will not only find assistance, but also someone who is willing to listen and discuss any problems or doubts.

> Giovanni Bissoni Health Policies Assessorship

Breastfeeding

Breast milk Breastfeeding difficulties Nutrition, smoke related risks, medication Artificial milk

Caring for a baby

Umbilical cord

Baths

Eyes and Ears

Nails

Hair

Changing diapers

Clothing

Safe sleep

· How to make a baby's living environment safer

Falls

Burns

Suffocation

Drowning

Poisoning

Electrocution

Traveling with babies

Traveling by car

Traveling abroad

- What to do for fever, vomit, diarrhea
- Immunizations
- Preventing cavities
- Medical visits
- Registering with Health Services, Health assistance, Services for foreign families
- Who to contact for information on services

Breast milk

Breast milk is the best nutriment for the growth of your baby. It contains all that babies need in the necessary quantities: protein, sugar, fat, vitamins, and minerals. Breast milk protects from many infectious diseases, since it transmits many of the mother's defenses. Newborns must be breast fed very early, within the

first few hours after birth.



The first time a mother breastfeeds, she might have some

difficulty: the baby might have problems latching on, sucking might be painful, or the milk might be or seem insufficient. Do not worry: usually, this will pass after a few days. However, you should seek help or request information from expert personnel, such as the pediatrician, the ward obstetrician, or the family consultory. Up to 6 months of age, mother's milk is the only nutriment that a baby needs. You need not give your baby water or other liquids. Most babies are able to latch on, more often and for a longer period, at each single feeding, in relation to how hungry they are. Therefore, breastfeeding is at will, not at scheduled times, and the baby's requests should always be met.

Feeding time should usually last 15-20 minutes. Remember, there's no need to prolong feedings, since a baby finishes most of the milk available in the first 10-15 minutes. You can feed your baby from one breast, or both, but always begin from the fullest breast.



When breastfeeding, a mother establishes a very close relationship with her baby. Early contact, from birth, improves relations and well-being for both.

So that a mother is able to properly recuperate after childbirth, especially during the first few months of breastfeeding, she should rest frequently. Try to make up for your sleeping hours when your baby is sleeping.

Breastfeeding is recommended also when your baby is sick, for example, if your baby has diarrhea.

After 6 months of breastfeeding, other food can be introduced, according to the indications of your pediatrician: meat, consommés (ex. vegetable puree), grain flour, as well as fruits and vegetables. Whole cow's milk, even if diluted, can only be given after your baby's first year of life.

After birth, for the first few days, your baby's weight is subjected to a decrease, which is physiological, equal to 10% of the original birth weight. Usually, your baby's original weight is gained back within the first two weeks of life.

Afterwards, if weight increases on a regular basis - at least 120 grams a week - you can be sure that your baby is eating sufficiently.

Breastfeeding difficulties

During the months a mother breastfeeds, her breasts could sometimes become hard and red. Furthermore, breast sores, small painful cracks, can form on the nipples.

Although breast sores are often caused when the baby does not latch on correctly during feedings, feedings should not be interrupted, and a pediatrician or obstetrician should be contacted, as soon as possible.

To clean breasts and nipples, a special detergent is not required. Water and a mild soap are sufficient.



Nutrition, smoke related risks, medication

When breastfeeding, mothers should eat more, although not excessively, vary the kinds of foods eaten, and make sure to eat fiber and drink enough liquids. Meat, fish, cheese, vegetables, and fruit are excellent sources of nutrition for breastfeeding mothers. Water, fresh juices, fruit juices, and milk supply the required vitamins and minerals, important substances for both mothers and their babies.

Drinking liquids is important, also in preventing constipation, a problem that frequently occurs during this period. However, you must know that drinking more than is required, for example, more than 1 liter-1 $\frac{1}{2}$ liters a day, does not influence the quantity of milk produced.

During the breastfeeding period, exceeding with coffee, wine, and alcohol is not recommended.

As is well known, smoke is dangerous for the health of mothers and babies. Second-hand smoke, and especially smoking at home, is dangerous: babies who live with smokers are more often affected by coughs, bronchitis, and asthma. When in closed spaces where someone is smoking, bring your baby to another room, or ask the smoker to leave and smoke elsewhere.

When breastfeeding, medication should not be taken without having first spoken to your doctor.

Artificial milk

When a mother does not produce breast milk, or thinks she is not producing enough milk, she should consult a pediatrician and decide if artificial milk should be introduced.

Remember that a mother's milk is the best nutrient for babies: therefore, if breast milk is not sufficient, a mother can continue breastfeeding, but must integrate these feedings with artificial milk.



There are many types of milk, powdered or liquid, available on the market. Several are indicated for the first months of life, and others are indicated for use after the 5th-6th month.

Your pediatrician can recommend the one that is best for your baby, and instruct you on the amount of milk to give and the feeding hours to follow, in relation to your baby's weight and age. The types of artificial liquid milk available are ready for use and need not be diluted with water, but only heated.

Instead, powdered milk must be prepared by adding a 30cc measure of powder in the baby's bottle, with the amount of water the pediatrician recommends for each feeding.

When feeding your baby with artificial milk, whether liquid or powder, specific times and quantities should be followed, as recommend by your pediatrician.

Feeding babies, even with artificial milk, is still an important moment. During these feedings a baby can still receive a mother's contact, glances, and caresses: a stimulus for well-being and correct growth.

Baby bottles and nipples must be washed and sterilized after every feeding for the first few months of your baby's life.

In the months to follow, they can then just be washed thoroughly with soap and water.

For sterilization, two methods are recommended:

- 1) boiling the bottle, for 10 minutes, and the nipple, for 20 minutes, immersed in a pot full of water. The bottle and nipple should then be placed on a clean plate to drip dry;
- 2) wash, then immerse the bottle and nipple for about 2 hours in a cold disinfectant solution, which can be purchased in a pharmacy or supermarket. The bottle and nipple should then be placed on a clean plate to drip dry.



Umbilical cord

The umbilical cord stump that remains attached to the newborn's belly usually falls off after the first 7-10 days of life. During this time, it should be wrapped in a clean, dry gauze, better if sterile, and should be covered with an elastic bandage, changing it at every diaper change.

The stump should, however, be kept outside of the diaper with the bandage.

After the umbilical cord stump falls off, the belly-button should still be kept covered with a dry gauze until the wound is completely dry. This usually occurs after two or three days. If the area remains red for a longer period of time, or the wound does not heal, contact a pediatrician or obstetrician.

The umbilical cord can be touched. This will not harm the baby.

Baths

In order to give your baby a bath, the belly-button wound should be completely healed.

Before a bath, always check the water temperature with your elbow.

You can bathe your baby in a large plastic basin, with a sufficient amount of water, always remembering to support your baby's head carefully.

Never leave your baby alone in the basin, not even for a moment!

After bathing, never use talcum/baby powder, since babies can inhale this powder, causing



respiratory problems, or the powder can collect in the folds of the skin and cause irritation.

Remember that newborns are very sensitive to changes in temperature.

If you cannot heat the room where you bathe your baby, you should, however, wash your baby everyday. In this case, the baby should be undressed and dressed in single parts, so as to prevent the baby from becoming sick.

Eyes and ears

To clean your baby's eyes, use a gauze or cotton handkerchief moistened with warm water, squeezing out any excess water. To reduce the risk of infection, use a different gauze or handkerchief for each eye, and wipe from the inner corner of the eye to the outer corner. To clean your baby's ears, use a moistened gauze or cotton handkerchief, but only for the outer part of the ear.

The inner part of the ear must not be touched. Never use "Q-tips" (cotton swabs).

Nails

Your baby's nails should always be kept short, in order to prevent scratching, and prevent dirt from accumulating under them. Round-tipped scissors should be used.

Hair

Oftentimes, little crusts can form on a baby's head (cradle cap). The crusts must first be moistened with oil (olive oil is fine), so that they can then be removed with warm water or a mild shampoo.



Changing diapers

Usually, when changing a diaper, applying cream is not necessary. A cream is necessary only if the baby's genital or anal area becomes red and irritated. If reddening is persistent, or worsens, contact your pediatrician.

Newborns should be changed and washed frequently, in relation to their specific needs.

In order to prevent infections from passing from the anal area to the vaginal area, baby girls must be washed and dried from front (vaginal area) to back (anal area).

In baby boys who are not circumcised, the foreskin (prepuce) physiologically protects the head of the penis (glans) during the first months. Therefore, always use great care when washing, only retracting the foreskin when actually needed, in order to limit this maneuver.

Clothing

Use clothing that is easy to put on and take off (ex. open on the back), adequate to the relevant environmental temperature, and that allows babies to move freely. Shoes are not required before babies begin to walk. To protect their feet from the cold, you can use woolen socks.

Safe sleep

The best sleeping position for babies is on their backs.

Babies should not sleep with a pillow, and a firm mattress should be used. Furthermore, you should avoid using bumpers around the crib that are overly padded.

Babies should not be excessively covered, especially if feverish, and should not be wrapped tightly in blankets.



Avoid smoking in the house, and babies should, however, be kept out of smoke filled environments.

During the winter, room temperature should be kept around $20\,^{\circ}\text{C}$ during the day and $18\,^{\circ}\text{C}$ at night.

Breastfeeding favors a safe sleep.





HOW TO MAKE A BABY'S LIVING ENVIRONMENT SAFER

Falls

In the first few months and years of life, never leave babies alone on the changing table, on beds without railings, on couches, or on chairs.

If you cannot directly watch or hold your baby in your arms, put your baby in a safe place: crib or playpen.

Remember that babies are able to move around alone already at 6 months. Therefore, always use gates for stairs, remove keys from doors, install window guards, and do not keep chairs (or other furniture on which babies can climb) near windows or balconies.

Immediately contact a doctor or Emergency Services (num. 118) if babies fall and hit their heads hard, then become sleepy and/or vomit.

Emergency Services (num. 118) should also be called immediately if, during a fall, your baby **does not respond** and **cannot move legs or arms.**

Burns

Preparing hot meals, liquids, or food that spatters can cause serious burns. Therefore, all necessary precautions should be taken, and babies should be kept away from sources of heat (ex. clothes iron, ovens), and fire (ex. oven burners). A good example is that of keeping pots and coffee pots on rear burners and not front ones.

Furthermore, remember that holding babies when managing hot food or drinks is very dangerous.

To prevent burns caused by hot tap water, the water boiler must be kept at a temperature between 50°C-55°C.

In the event of a burn, immediately place the burned area under **cold running water**, and immediately contact your pediatrician.



9

If the burn is serious or extensive, immediately contact Emergency Services (num. 118).

Suffocation

During the first months or years of life, babies explore their environment by bringing objects to their mouths. Therefore, avoid leaving objects around that can be swallowed, such as small-sized toys, chains, and pendants.

When feeding, remember to always cut food in little pieces. Do not give candy, peanuts, or other food that babies are not yet capable of chewing.

Drowning

Babies should never be left alone during a bath, nor while filling a bath tub or a basin, or when emptying them. When outside, pay careful attention to containers of water, cisterns, wells, pools, etc.

Poisoning

Medication and cleaning products must always be kept out of sight and out of reach of babies and children. These products must be purchased and kept in their original containers with a proper safety cap.

Always check the expiration date of medication and food.

In the event of ingestion, immediately contact Emergency Services (num. 118), and on hand the container with the product and/or the medication swallowed.

Electrocution

External electrical wires, electrical sockets, and extension cords



left on the floor are very dangerous, since babies who start moving around alone can be attracted by these, wanting to touch them, put them in their mouths, or bite them, as well as stick their fingers in sockets.

Plastic plugs, which can easily be bought in stores, should be used to cover electrical sockets.

The use of electrical cords should be avoided. If not possible, place the cord up high, over furniture and doors, so that it can be kept out of reach. Always immediately repair any frayed or hanging wires/cables.



TRAVELING WITH BABIES

Traveling by car

During car trips, car seats are required by law, preferably positioned on the back seat. Positioning the car seat in back is required by law if the car is equipped with a passenger air bag in the front passenger seat.

Holding babies or children on your lap or in your arms is prohibited by law.

Traveling abroad

Before leaving for a trip to another country, you should bring your baby for a general check-up, then contact the Clinic for international travel of the Local Health Unit (Asl) to learn about all the required recommendations, which are different for every country and for every age.



WHAT TO DO FOR FEVER, VOMIT, DIARRHEA

Fever

A baby's temperature is considered fever when the underarm or inguinal temperature is over 37.3°C.

A temperature should be measured with the thermometer kept under the arm or in the inguinal fold for at least three minutes.

A fever is not an illness, but a symptom of an illness that can be more or less serious.

If the fever is high (38.5°C or higher), if it persists for more than 3 days, or if it is associated with other symptoms, contact the pediatrician as soon as possible.

Follow these indications while waiting for instructions from the pediatrician:

Do not excessively cover the baby.

Have the baby drink liquids, preferably with added sugar.

Put something cold on the baby's head, for example, a wet cloth or ice, when the temperature is very high.

If the temperature is over 38.5° C, give the baby fever medication.

Diarrhea

Diarrhea is recognizable when bowel movements are liquid and abundant, more than four times a day.

The younger the child, the more dangerous are bouts of diarrhea.

It's always best to contact your pediatrician if the baby seems out of sorts.

Follow these indications while waiting for instructions from the pediatrician:

Frequently give your baby liquids that are lightly sugared, or hydrating solutions, in little quantities.

Carefully observe your baby's feces: number of bowel movements, color, presence of blood or mucous. Frequently change diapers.



Vomit

Some babies vomit easily, perhaps when they have a cough or after a long cry. In these cases, a single episode is not a cause for concern, especially if they remain alert and continue their usual routine after vomiting.

Instead, if the episodes of vomit are continuous and repeated, therefore, the baby is not able to drink, or if the vomit is stained with blood, if the baby has as fever or headache, if the baby vomits after falling or getting hit on the head, immediately contact the pediatrician. If this is not possible, immediately go to the emergency unit at the hospital.

Follow these indications while waiting for instructions from the pediatrician:

Do not give medicine orally. If the baby has a high fever, administer a fever medication in suppository form.

Hold the baby, so that any possible vomit can be removed and is not swallowed.



Vaccines have contributed in debilitating and contrasting terrible diseases worldwide, such as smallpox, polio, tetanus, and diphtheria.

These act by stimulating the production of antibodies.

Generally, vaccines are well tolerated, and do not cause particular problems.

However, reactions may occur, such as reddening and swelling around the injection area, fever, agitation, and sleepiness, which usually pass in 48 hours.



More serious side effects, such as allergic reactions or neurological damage, are extremely rare. Parents can, however, request all necessary information from their pediatrician.

In Italy, all children are required to be immunized for polio, tetanus, diphtheria, hepatitis B, whooping cough, hemophilia, measles, German measles, mumps, pneumococcus, and meningococcus C.

Children with particular health conditions, which place them at risk of contracting serious illnesses, or who frequent crowded places or schools, should also be immunized for influenza, chickenpox, and hepatitis A.

In the Emilia-Romagna region, all immunizations are administered through the Community Pediatrician Clinic/Pediatric Consultory, or by the family pediatrician.

Immunizations begin to be administered around 2-3 months of age. Parents will be sent a letter home with the date of the first immunization appointment and all the relevant indications. Information regarding the various vaccines, and times expected for



administering them, are communicated by the Community Pediatrician/Pediatric Consultory when the first vaccination is required, or beforehand, by your family pediatrician.

Before administering vaccinations, parents will be given all relevant information regarding the vaccine used and the possible side affects that could occur after the child is vaccinated.

Parents will be asked permission to have their child immunized, oftentimes, also in writing.

When going for a vaccine shot, it is important that the doctor knows if the child:

- has any serious illness, is taking any particular medication, or has a fever:
- has had any recent blood transfusions;
- had any serious reaction after previously administered vaccines.

The document related to your child's immunization history must be properly kept and must be presented at each appointment.

For any information regarding the times and methods used for immunizations, parents should contact their family pediatrician or the resident Immunization Service of the Local Health Unit (Asl).

PREVENTING CAVITIES

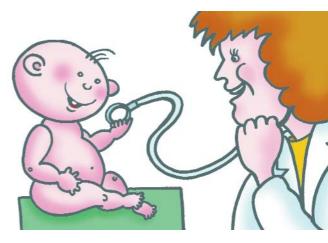
Cavities are the most common "ailment" that affects teeth, yet, can be prevented by following several simple rules:

- correct oral hygiene, by cleaning teeth after every meal: use a gauze for babies, and for older children, a toothbrush, as soon as possible;
- reduce sugary foods;
- take your child to the dentist at least once a year for a check-up.



The first pediatric visit is recommended within the 7th-10th day after birth, and is required to verify your baby's well-being. During your baby's first year of life, if there are no particular problems, remember to set up appointments with your pediatrician for the various check-ups required. However, a visit should be

set-up approximately every two months.



If necessary, and your baby does not have a pediatrician, contact the Pediatric Consultory.

The constant presence of a cultural mediator, in the area reserved for immigrant mothers and their children in the Pediatric Consultory, could be useful for foreign parents who have to confer with personnel and health operators, but also for information on the services offered.

New mothers should visit with a gynecologist at least once 30-40 days after childbirth. During this visit, consultation with a specialist, such as a gynecologist or obstetrician is important, in order to evaluate the physical and psychological well-being of the mother and is also the right time to receive information regarding contraceptive methods available during the breastfeeding period.

Obstetricians in the Consultories are also available during the postchildbirth period for checking a mother's perineum or sutures, and for consultations regarding problems with breastfeeding and neonatal care. A mother's well-being is also very important for a baby's well-being.



REGISTERING WITH HEALTH SERVICES, HEALTH ASSISTANCE, SERVICES FOR FOREIGN FAMILIES

Regional Health Services of the Emilia-Romagna region guarantee for health assistance, provided for by the Essential Levels of Assistance, to both Italian and foreign citizens registered with National Health Services.

Registration with National Health Services is free and gives the right to choose a family physician or pediatrician for children up to 14 years of age. Those registered will be given a health services card.

EC citizens residing in Italy or domiciled in Italy for work purposes, can register with National Health Services for the period of time they are residents or domiciled.

Non-EC citizens with a residence permit, or who have presented a request for renewal, can register with National Health Services. This registration has the same validity as the residence permit. Any payment for health services rendered (ticket) follows the same procedures as those reserved for Italian citizens.

Foreigners who are temporarily present in Italy, and not legalized for entry and stay, are issued a health services card that is valid for six months (STP card - Temporarily Present Foreigner), which can be renewed.

The STP card gives the holder the right to the following health assistance: urgent or essential clinic or hospital care for illness or accidents, interventions for safeguarding pregnancy, maternity and the health of minors, mandatory immunizations for mass prevention, interventions for international preventive treatment, general preventive treatment, diagnosis and care of infectious diseases (including AIDS), and interventions for drug prevention, care, and rehabilitation. Payment for services rendered (ticket) follows the same procedures as those reserved for Italian citizens.



Foreign citizens present in the Emilia-Romagna region, with or without a residence permit, and without request from a family physician, can directly access Family Consultories, Pediatric Consultories or Community Pediatricians, as well as Areas Reserved for immigrant women and their children.

Those who can contact services for immigrant women and their children are: recently immigrated women or those who, however, have difficulty in accessing health services. Furthermore, a cultural mediator is always present in all health structures and services, and the personnel present is prevalently female.

Assistance that is guaranteed to women through these services relates to: pregnancy, voluntary interruption of a pregnancy (IVG), menopause, contraception, sterility, infertility, gynecological visits, prevention of uterine cancer (Pap-Test), as well as sexrelated and psychological assistance.

Instead, children are guaranteed check-ups, immunizations, TB prevention or prevention of other infectious diseases.

Foreigners without a residence permit who access health services will not be reported to the authorities (police).



WHO TO CONTACT FOR INFORMATION ON SERVICES

For information regarding services, call the Health Services toll-free number for the Emilia-Romagna region:

800 033 033

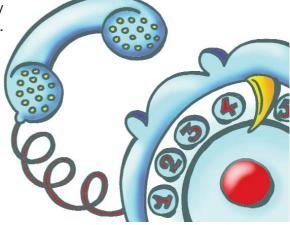
every weekday: 8:30am-5:30pm, and Saturday: 8:30am-1:30pm.

For the province of Bologna, a toll-free number for foreigners is also active, with a multi-lingual service:

800 663366

active: Monday and Wednesday afternoon: 2:30 pm - 4:40 pm,

and Wednesday and Saturday morning: 9:00 am -12:30 pm.



For further information, consult:

the Health Services portal for the Emilia-Romagna region: www.saluter.it

the Social policies portal for the Emilia-Romagna region:

www.emiliaromagnasociale.it

the website for the Council on Emigration and Associations for citizens of the Emilia-Romagna region worldwide

www.emilianoromagnolinelmondo.it



Edited by:

Gruppo di lavoro regionale (Regional Labor Group): Maria Giovanna Caccialupi, coordinator (Local Health Services (USL) of Bologna) Antonella Bazzocchi (Local Health Services (USL) of Cesena),

Maria Rosaria Certosino (Local Health Services (USL) of Ferrara),

Rossano Fornaciari (Local Health Services (USL) of Reggio Emilia),

Laura Gaspari (Local Health Services (USL) of Forli),
Achilla Gorni (Local Health Services (USL) of Parma),
Irene Ghirardini (Local Health Services (USL) of Ravenna),
Mara Manghi (Local Health Services (USL) of Reggio Emilia),
Laura Menegatti (Local Health Services (USL) of Ferrara),
Ines Pini (Local Health Services (USL) of Forli),
Isa Ruffilli (Local Health Services (USL) of Bologna),
Giulio Sighinolfi (Local Health Services (USL) of Modena),
Gabriella Tritta (Local Health Services (USL) of Modena).

Contributing editorial staff:

Silvana Borsari, Michela Bragliani, Elena Castelli, Angela Paganelli, Vittoria Pastorelli, Diana Tramonti (General Management – Health and Social policies - Emilia-Romagna Region).

The publication was produced by: Local Health Unit (USL) of Bologna - Public Relations and Communications (graphic project: Marco Neri – illustrations: Bruno Pegoretti)

Printed: 2008

