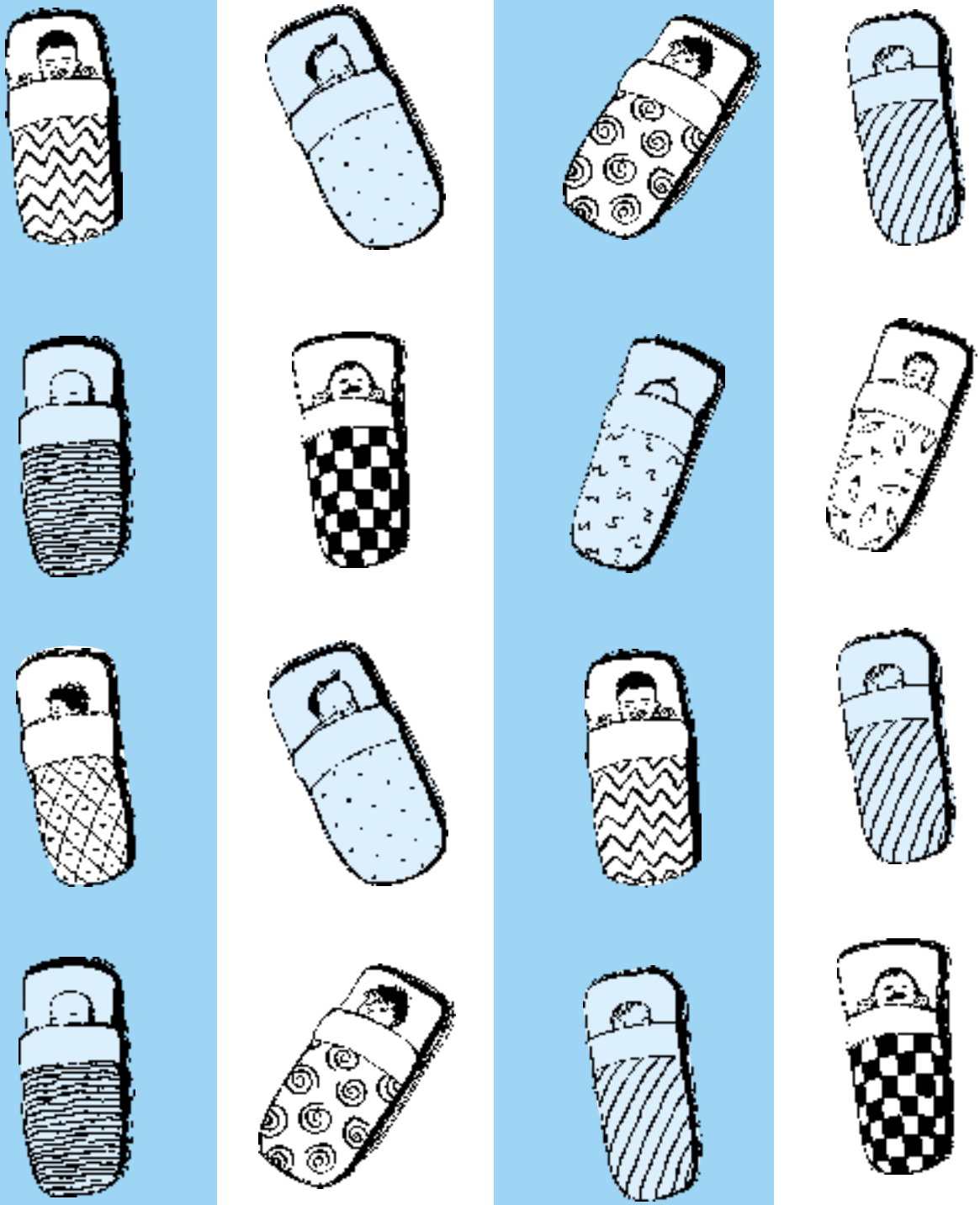
Having Children in Finland



MINISTRY OF LABOUR

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Vauva syntyy Suomessa / englanti
Having children in Finland

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Contents

5 For Our Readers

6 Signs of pregnancy

6 Your Pregnancy is Monitored at the Maternity Clinic
6 When is My Child Due?
6 Ultrasound Scan
8 A Girl or a Boy
8 Interpreting Services

8 Well-Being of Mother During Pregnancy

8 Exercise
10 A Well Balanced Diet
10 Fruit and Berries
10 Cereals
10 Vitamin D and Calcium
10 Cravings
11 Weight Gain
12 Your Teeth
12 Medicine, Alcohol Smoking and Drugs

12 Common Discomforts During Pregnancy

12 Fatigue
12 Nausea
12 Swelling
12 Vaginal Discharge
13 Vaginal Bleeding
13 Varicose Veins and Piles
13 Backache, Indigestion

13 Antenatal Classes

13 Maternity Hospital
14 Interpreting Services During Labour
14 How to Recognise When Labour Begins
14 When Do I Have to Go to the Hospital?
15 Support in Labour
15 Labour
15 Caesarean Section
15 Pain Relief
16 Primary Care of the Newborn

4

17 The First Days After the Birth

17 Breastfeeding

17 The Secretion of Milk
17 Feed When Your Baby Wants to Be Fed
18 The Sufficiency of Breast Milk
19 Breastfeeding While Ill

19 Bottle Feeding

20 Need for Vitamin D

20 Dosage

20 Maternity Clinic

20 Your Health: Postnatal Check
21 Annual Checkup

21 Infant Care

22 Dressing Your Baby
22 Equipment
22 Keeping Your Baby Clean
24 Naps

24 Vaccination

25 Solid Food

26 How to Make Purées?
26 Porridge and Gruel
26 Dairy Products
26 Convenience Foods or Homemade Foods?
27 Regular Feeding Hours
27 Digestive Upsets
27 Teeth
28 Diet During the First Year

29 Social Benefits

29 Maternity Benefit
29 Maternity, Paternity and Parental Allowance
30 Child Allowance
30 Home or Private Care Support

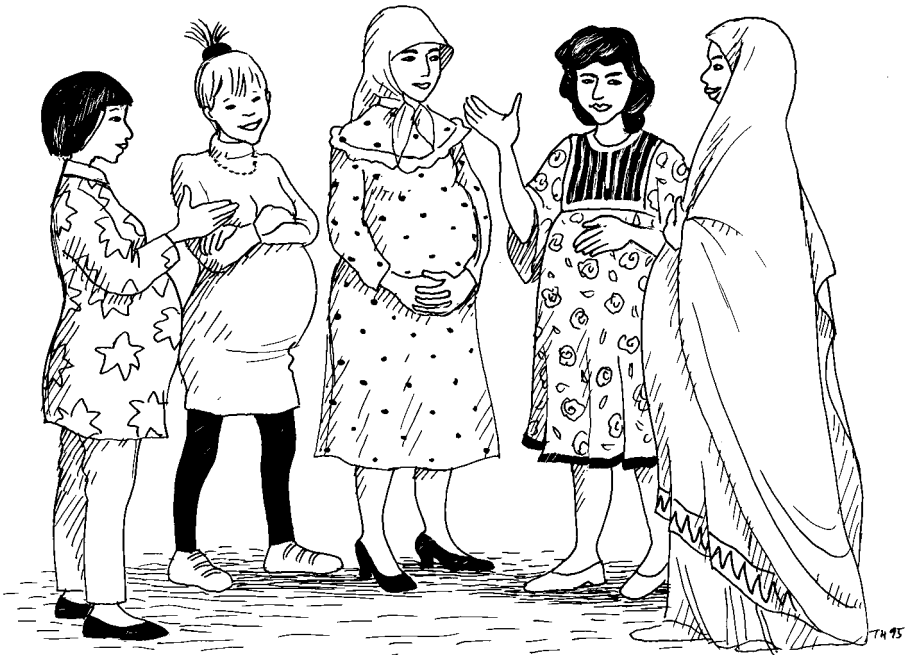
31 Literature

For our readers

This booklet provides information on issues concerning having children in Finland; for example, public health services available during pregnancy and childbirth, and for monitoring the further growth of your child. Views and opinions on childbirth and child care varies around the world. You may be unfamiliar with Finnish health services. There is no need to worry, however, because the well-being of pregnant women and their unborn babies are carefully monitored in Finland. It is safe to have children in Finland; stillborn babies are extremely rare.

The information in this booklet has been compiled from various current, professional sources. Although some of the material appears in shortened form, the most important issues are always included. We want to express our warmest gratitude to the Mannerheimin Lastensuojeluliitto which has offered expertise and made data available for our free use. There is plenty of material dealing with pregnancy, birth and child care, nutrition and breast feeding. Unfortunately this kind of material is mainly available in Finland's official languages, that is, Finnish and Swedish. You will find a short list of literature and publications containing this kind of information at the end of this leaflet. The places where you can obtain the books and publications are also included on the list. The information concerning the social security benefits for families with children are according to 1997 figures.

We hope this booklet - translated into your mother tongue - provides answers to the questions now occupying your mind so that you can focus on the most important issue for you at the moment without anxiety: giving birth to your baby and caring for her/him.



6

The Signs of Pregnancy

If your monthly period is two weeks late, you are most probably pregnant. During the first weeks of pregnancy many women feel sick after getting up in the morning. Breasts swell and milk trickles out of them. Abrupt moodswings, cravings for certain foods, and aversion to others are all symptoms related to pregnancy. Some women feel sick all through the pregnancy, some feel quite good.

You should contact the nearest health centre if your monthly period is two weeks late and if you think you are pregnant. Should you want to know the result before that, you can buy a do-it-yourself pregnancy testing kit from the local pharmacist. This gives you a chance to know whether you are pregnant or not immediately. Should your pregnancy be unwanted, contact the nearest health centre at once.

Your Pregnancy is Monitored at the Maternity Clinic

Once your pregnancy has been ascertained, regular monitoring at the MATERNITY CLINIC begins. A unit of the health centre, the maternity clinic is a place where you find public-health nurses who specialise in issues related to pregnancy and child development.

Expectant mothers visit the maternity clinic once a month at the very least. The public-health nurse conducts different kinds of check-ups in order to monitor the well-being of mother and fetus. All tests conducted at the maternity clinic, as well as the equipment used in examinations, are harmless to the expectant mother and the growing fetus.

Generally you will meet a doctor two or three times, or more often if necessary. If you wish, you may request a woman doctor. Visiting the maternity clinic and doctor during the pregnancy are free of charge. It is possible to come to the maternity clinic with the father of the child or someone else close to you.

The public-health nurse provides you with information, support and advice on matters pertaining to pregnancy. For example, the public-health nurse gives you advice about maternity leave and financial matters related to birth of the child.

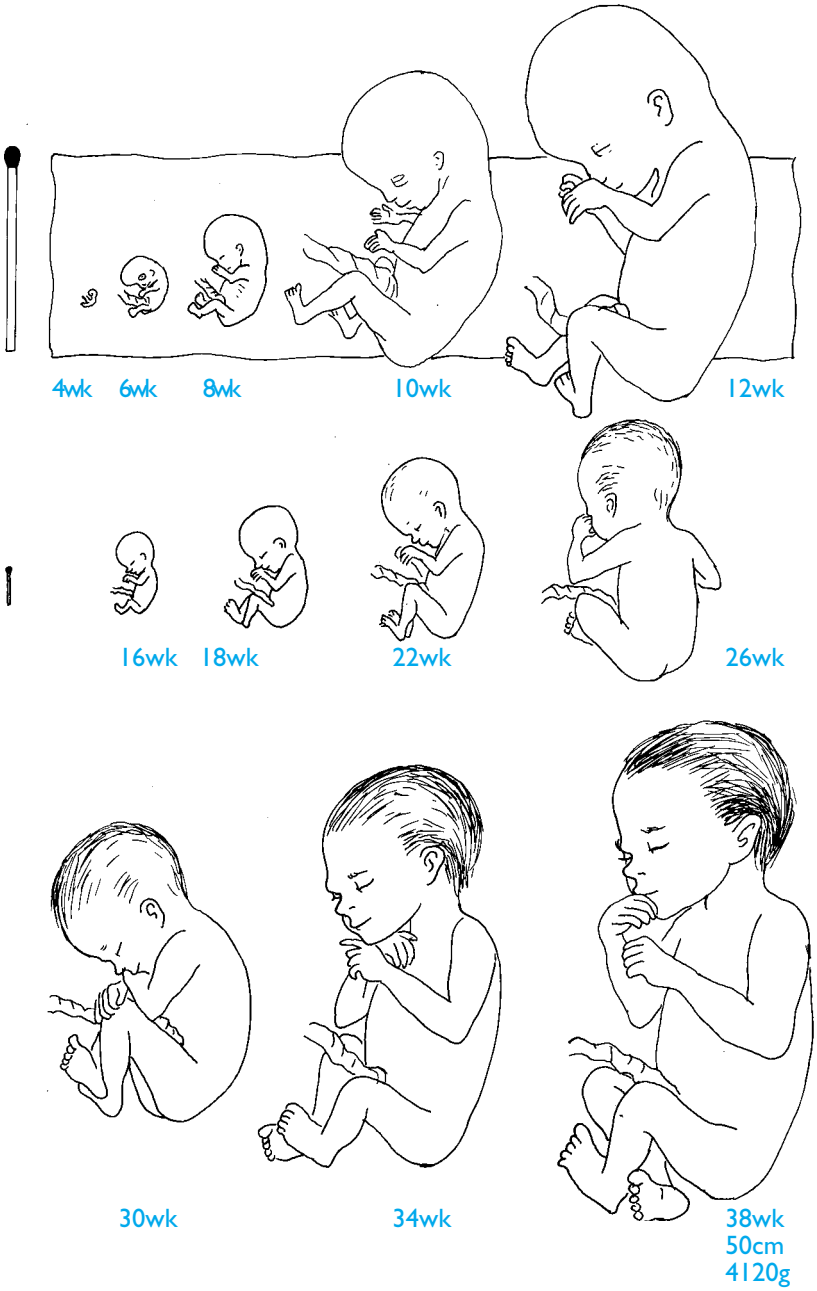
When Is My Child Due?

During your first visit to the maternity clinic, the public-health nurse calculates the most probable birth date. This is called the "expected date of delivery" (EDD). Pregnancy usually lasts for 40 weeks, and it is calculated from the date of the first day of the last monthly period. The duration is calculated to be 280 days, which makes 9 months. One way to find out the probable birth date is to calculate 9 months and 7 days from the date of the first day of your last monthly period.

Ultrasound Scan

The date of birth is further ascertained with ultrasound scan (sonography) during the early stages of pregnancy. The public-health nurse refers you to a

Monthly development of fetus. The size of fetus is compared to a match.



hospital where the ultrasound scan is conducted. The ultrasound scan is painless and perfectly safe for mother and baby. Thanks to the ultrasound scan, the state of pregnancy can be carefully monitored.

The child is rarely born on the expected date of delivery. It is perfectly normal for the child to be born two weeks before or after the expected date.

A Girl or a Boy?

The gender of the child is determined by man's sperm. Men have both female and male sperms.

Interpreting Services

If you think your knowledge of Finnish is inadequate, you can ask the public-health nurse to arrange for an interpreter to be present at the maternity clinic. If a civil servant - in this case the public-health nurse - arranges for an interpreter to be present, she/he will also take care of the expenses if you are entitled to have interpreting services free of charge.

If you wish, you may ask a Finnish-speaking friend to accompany you when you visit the maternity clinic or consult a doctor. Although a convenient solution, you should not use your own child as an interpreter. Even if the child's linguistic abilities are good, she/he does not always understand the issues one discusses at the maternity clinic, which can lead to misunderstandings. Issues that are too difficult for a child to comprehend may also frighten her/him. Using a child as an interpreter can also adversely affect family life and the upbringing process.

Well-Being of Mother During Pregnancy

Many women are fit and feel at ease throughout pregnancy. For some women, however, pregnancy may present some difficulties. Although pregnancy strains a woman physically, it is not an illness.

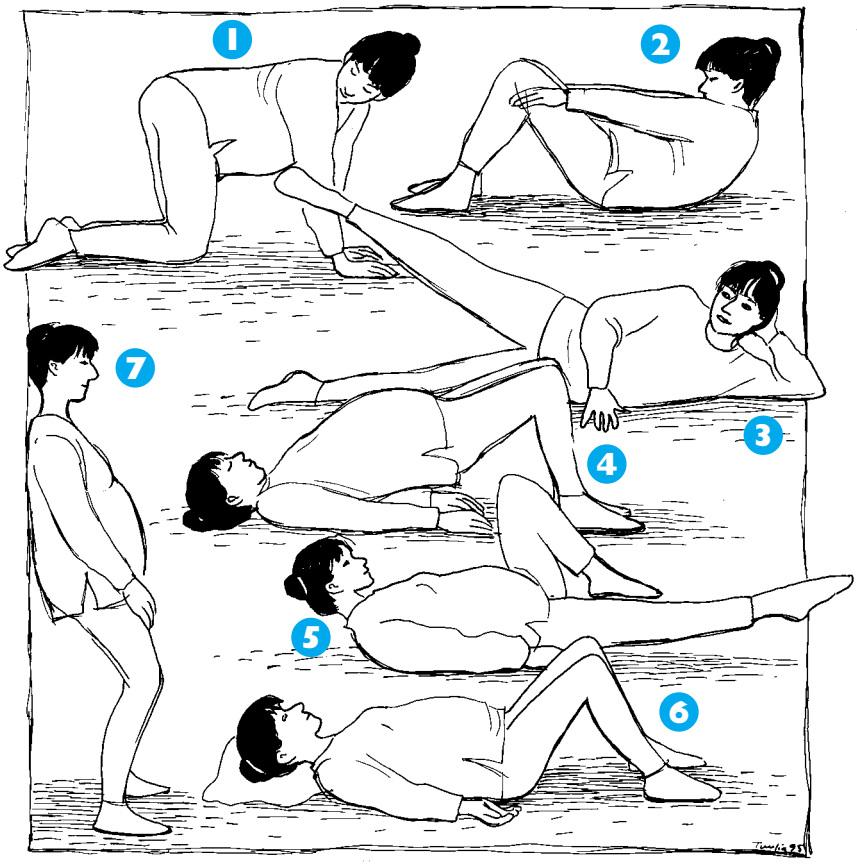
During pregnancy, your body prepares itself to the new situation. Hormonal activity increases, and this may result in abrupt mood swings. You may become tearful and over-sensitive, even when there seems to be little reason for this. Your spouse should know that mood swings are perfectly normal during pregnancy.

Exercise

Your growing belly will give you less discomfort if you watch your health and physical condition carefully. The well-being of your fetus and the labour depend on your fitness. Fitness helps you to recover quickly from labour, and hence makes you well equipped to take care of your child.

You should rest, do exercises and spend time outdoors. A brisk walk in fresh air is an especially good form of exercise for an expectant mother. Fresh air is the best cure for feeling sick.

Should you already have a favourite activity, pregnancy is no reason to quit. It is wise, however, to avoid abrupt or violent exercises.



Do these exercises a couple of times daily. Relax between exercises. Try to breath evenly while you exercise.

1. *Move your pelvis from side to side, push your hips forward in turns, and follow the hip you are moving with your eyes. Keep your back straight.*
2. *Abdominal muscles. Lie on your back. Lift the upper part of your body from the floor and try to touch your knees with your fingertips. Keep your feet firmly on the floor.*
3. *Buttocks and upper torso. Lie on your side. Lift your leg towards the ceiling with your heel first. Do not flex your hips.*
4. *Pelvic muscles. Lift your pelvis up so that your body is in a direct line from knees to shoulders.*
5. *Abdominal muscles. Keep your chin pressed against your chest and bend your knees in turns. During the change, your feet should not touch the floor.*
6. *Abdominal muscles. Contract your abdominal muscles and press your lumbar region against floor. Relax.*
7. *Abdominal and thigh muscles. Contract your abdominal muscles and press your lumbar region against the wall. Bend your knees slightly and keep this position for a moment.*

A Well Balanced Diet

A healthy diet is essential for the well-being to an expectant mother and her baby. Your diet should consists of diverse and healthy foods. During the first three months of pregnancy the food requirements do not change very much. During the last stages of pregnancy the baby's growth is most rapid, and then you need more food. The demand for additional energy, however, is not great. Therefore, an extra serving of rice, meat and vegetables will do. There is no need to eat twice as much as you normally eat.

Fruit and Berries

One should eat fruit, berries and vegetables daily. Besides imported fruit, try berries that grow in Finland; strawberries, blueberries, cowberries, raspberries and cloudberries. During summer you can buy fresh berries from market places and shops and super markets. In the winter frozen berries are available in shops and super markets.

Cereals

Besides fruits, berries and vegetables you are advised to eat wholemeal products, that is, cereals which are not completely white and contain every part of the grain. Eating these prevent indigestion. Dark and natural rice; graham, rye and barley flour; wheat, oat, rye and barley flakes are wholemeal products.

You should have dairy products every day (cheese, curd, yogurt, milk, sour milk) and meat, poultry, fish, eggs or pulses (beans, peas or lentils). Avoid using too much saturated fat and use unsaturated instead, such as vegetable oil and margarine.

Vitamin D and Calcium

Sunlight is the main source of vitamin D. The winter months being dark in Finland, you should ensure a sufficient vitamin D uptake. Pregnant women should have an extra amount of vitamin D (vitamin preparations). Calcium is important for bone formation. If you do not eat dairy products you should ensure your calcium uptake by eating calcium preparations. You can discuss the selection and dosage of suitable dairy and calcium preparations with the public-health nurse at the maternity clinic.

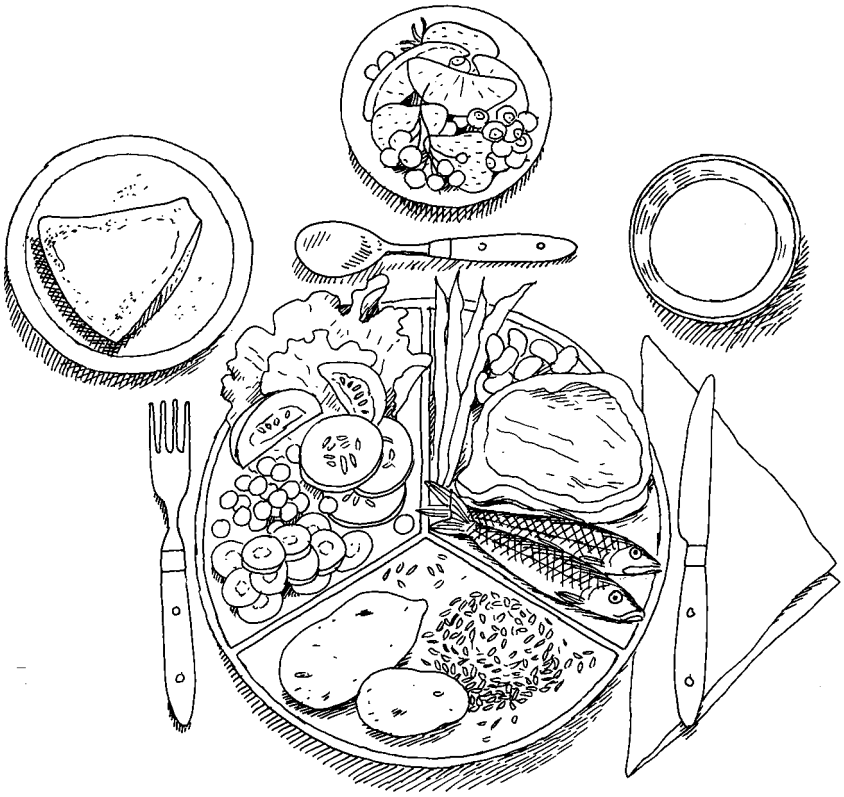
Cravings

It is not always easy to eat healthy food when you are pregnant: you may have cravings for certain foods or you may simply want to indulge in eating sweets. You should avoid eating sweet foods excessively: not only will your teeth suffer but you will also gain unnecessary weight. Eating strongly salted food makes your body swell. If you have craving for fruits, vegetables, meat, rice or bread feel free to eat them.

It is better if you can eat several small meals and snacks rather than two large meals a day. Having small meals regularly helps to prevent nausea and fatigue.

Weight Gain

Weight gain during pregnancy varies. It is normal and healthy to gain 8 to 12 kilos weight. Some women even lose weight during the first weeks of their pregnancy especially if they feel sick often. If you have lost your appetite try to eat food that you like and remember to drink enough.



A plate divided in three illustrates a balanced diet. The servings of vegetables; potatoes or rice; fish, poultry, meat or pulses (peas,beans, and lentils) should all correspond to each other. A well-balanced diet includes cereal (bread or porridge); fruits and berries, dairy products and a small amount of oil or margarine. It is not necessary to eat all these at every meal.

Your Teeth

Take care of your teeth properly during pregnancy. A baby in the womb absorbs fluorine and calcium through your organs for her/his teeth formation. Do not forget that your demand for calcium and fluorine for strengthening your own teeth increases in pregnancy. Daily use of fluoride toothpaste will strengthen your teeth.

Medicine, Alcohol, Drugs and Smoking

Do not take any medication during your pregnancy before you have asked your doctor whether they are harmful to an expectant mother. Ask a doctor or a public-health nurse about the safety of all medicine you regularly take. If you go to the dentist, inform her/him of your pregnancy.

Cigarette smoke usually makes pregnant women feel sick. You and your partner should consider giving up smoking for the sake of your own and the health of your baby. You will receive support and specific advice on quitting smoking at your maternity clinic. Alcohol and other drugs are especially hazardous to the pregnant woman and her baby.

Common Discomforts During Pregnancy

Fatigue

Fatigue is a common experience during pregnancy, especially during the first three months and the last three months. Do not belittle your fatigue. If you feel tired you must rest. Even a short rest usually helps. If fatigue continues, contact your public-health nurse.

Tiredness may result from an iron deficiency. During the middle and last stages of pregnancy the need for iron increases greatly. If your diet is well-balanced, it contains enough iron. Fresh air, vitamin C in fruits and vegetables increases the absorption of iron. If necessary, a doctor or a public-health nurse may prescribe an iron preparation.

Nausea

Another common discomfort in the early weeks of pregnancy is nausea. Unfortunately there is no cure for even a case of bad nausea. If resting does not help, you should try to ignore nausea and go on with your normal duties. If you vomit frequently, try to drink much to ensure the fluid balance of your body. Water is the best drink. Drink 1,5-2 litres of water daily.

Swelling

Swelling is common in the last weeks of pregnancy. If swelling disappears while resting, it is a sign that you have strained yourself too much. Rest, drinking, and reducing salt from your diet helps to reduce swelling.

Vaginal Discharge

White discharge may increase during pregnancy. One may alleviate it by

washing the genital area daily with warm water. Soap is unnecessary; it only dries the surrounding skin. If white discharge feels itchy or smells unpleasant, it might be an indicator of infection, and one should see a doctor.

Vaginal Bleeding

You do not have periods when you are pregnant. In the beginning you may have some slight vaginal bleeding during those days when you normally had your monthly period. All other vaginal bleeding is not normal and you should therefore immediately go to the hospital or consult a doctor if this occurs.

Varicose Veins and Piles

Varicose veins (enlarged vein) and cramps usually become worse during pregnancy because of womb pressing on the veins. The growing womb also presses on the rectum and increases the chances of having piles (haemorrhoids) around the anus.

Constipation makes piles worse. A well-balanced diet and exercise is the simplest cure for this problem. Fruit, vegetables, bread and other wholemeal products boost the functioning of stomach and rectum.

Backache, Indigestion

Your back may become sore because the growing belly puts a strain on the muscles of the back. Exercises and trying to maintain a good posture usually help. The baby in the womb also reduces the space of your ventricle. This causes heartburn especially during the last weeks of your pregnancy. Coffee, tee, fried and strongly spiced foods make heartburn worse. Ask maternity clinic for harmless medicine to treat heartburn.

Antenatal Classes

Most public health centres arrange classes for parents to prepare them for child-birth and to discuss other related topics. Classes are meant for both the woman and her partner, or a friend. Participation is voluntary. You also get to practise for the delivery during the routine maternity clinic visits. Ask your public-health nurse for more specific information.

Maternity Hospital

Your public-health nurse will give you information on visiting the hospital where you will go to have the baby and how the visit can be arranged. When you visit the hospital, the staff will show you around the maternity ward and inform you on the pain relief available.

In Finland, a woman usually gives birth to her child in the municipal hospital in her area of residence. The public-health nurse will tell you well in advance in which hospital you are going to give birth. Women stay in hospital for approximately 3 to 4 days if everything has gone well and both the mother and the baby are in good condition.

In municipal hospitals you are not charged according to the operations and care, rather the charge depends on the days spent in hospital. The prices are reasonable, one day in hospital costs approximately 100 FIM (1997). You do not have to pay the bill when you leave the hospital, you can pay it later through the bank. If you are without means, you may apply for living allowance in order to be able to pay the hospital bill. You are free to choose the hospital where you want to have your baby, but remember that if you choose hospital besides the one maintained by the municipality, the financial costs will be substantially greater.

Interpreting Services During Labour

Because it is difficult to predict the exact point of time when the baby will be born, it might be difficult to have an interpreter present during labour. There are some centres, however, where interpreting services can be arranged at short notice. These centres are responsible for interpreting for refugees and other new immigrants. Some interpreting centres can provide services throughout the night and on the weekends. The public-health nurse will tell you more about interpreting arrangements. If no interpreters are available, inform the staff that a friend of yours who understands Finnish or your husband will help you during the delivery.

How to Recognise When Labour Begins

A slow trickle or sudden gushes of water usually indicate that labour has begun. Another indicator is contractions which grow stronger and gradually become regular and more frequent. Sometimes labour does not start on its own. If pregnancy has lasted much longer than estimated, it is possible to induce labour artificially at the hospital.

When Do I Have to Go to the Hospital?

If this is your first child, you should go to the hospital when

- the water breaks
- contractions last for more than half a minute
- contractions keep coming at 5-10 minute intervals
- contractions have been regular for two hours

If this is your second/third etc. child you should go to the hospital when

- contractions are regular
- contractions last for more than half a minute

You should go to the hospital immediately if you have a continuous sharp pain in your womb area or if there is a lot of vaginal bleeding. You are advised to use a taxi or some other private transport if the hospital is far away, or difficult to reach. You may apply for KELA (National Pensions Institute) for compensation for taking a taxi to the delivery hospital and back home with the baby. KELA will pay part of the bill. In order to get compensation,

ask the driver to give you a receipt and keep the birth certificate you were given at the hospital.

Support in Labour

Many Finnish fathers accompany their wives in labour. It is impossible to have hospital staff present all the time, especially if labour has not properly began. Because labour may last for several hours it is nice for the mother to have company and help.

The father may come and stay in the hospital with the mother as long as he likes and thinks suitable. Father can be present during labour in hospital. It is possible for the father to stay elsewhere in the hospital even if he did not want to be present during labour. A relative or a friend can likewise be present during labour. Usually one person (a husband or a friend) is allowed to be present during labour.

Labour

The muscles of the womb contract in order to open the cervix and to push the baby downwards the birth canal. When the cervix has opened about 10 centimetres, the passage is wide enough to let the baby out. The process of opening may take anywhere from a couple of minutes to several hours, or even a whole day. The contractions and the baby's heartbeat are monitored electronically; the wires go over the mother's abdomen.

The midwife - and a doctor if necessary - visit you regularly. When the cervix has opened enough and the baby has moved downwards, the mother will actively start to push each time she has a contraction and thus enables the baby to be born.

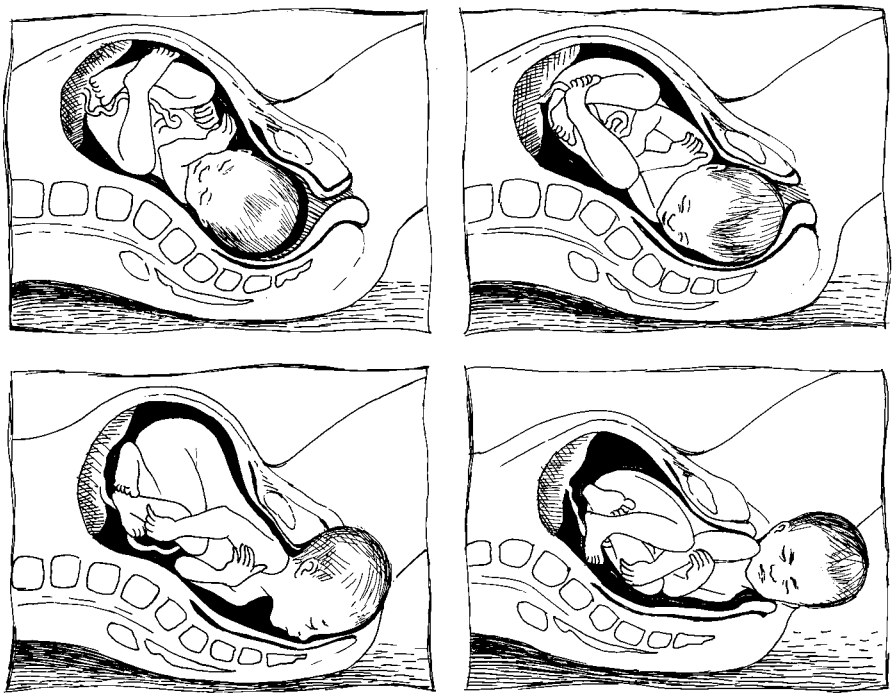
Caesarean Section

A doctor may decide to make a Caesarean section if labour is not progressing as it should, and if the baby is in danger to suffer from the deficiency of oxygen. Caesarean section is never made without a good reason, usually it is done to safeguard the health of the baby or mother. The decision to perform a Caesarean section is always made by the doctor and it is the doctor who operates.

Sometimes the decision about Caesarean Section is already made during pregnancy if it seems it has to be done for the sake of mother's or child's health, or if the pelvis is small, or the child is in the womb with her/his head up. Already during pregnancy, the doctor might gently try to move the baby to the right position - head downwards.

Pain Relief

Although the pain threshold varies from person to person, labour is painful for most women. The pains cannot be done away with completely but there are several ways to relieve them. Pain relief is available if the woman in la-



The movements of the baby during labour

bour wants it. The pain can be relieved with laughing gas, safe painkillers, cervical or spinal anaesthesia.

Your feelings also have an impact on the extent of your pain. Stress and fear intensify pain. The best painkiller may be the presence of a friendly and secure midwife or someone close to you.

Primary Care of the Newborn

After months' of waiting and having known the baby as a growing belly, it is always a thrill to see the newborn for the first time. The pains of labour is quickly forgotten when the parents hold the little baby in their arms. After the baby has been bathed and measured, the parents can spend a moment together with the newborn. Usually the mother already begins breastfeeding the baby in the labour ward.

Mother and the child are then transferred to postnatal ward. While the mother recovers from labour, the nurses take care of the newborn in the nursery. You can start learning how to breastfeed and take care of the baby as soon as you feel well enough to do so. If you have no previous experience in babycare, and have no relatives or friends to ask advice, do not hesitate to ask about everything that comes to your mind.

The First Days After the Birth

Having a newborn is usually a miraculous experience for her/his parents. Getting to know a new human being is rewarding, but it also takes time.

Great changes take place in your body after you have given birth: the womb starts to return to its normal size, the stitches (if you have any) heal, and muscles strained by delivery begin to strengthen. Breastfeeding helps your body to get back to normal more quickly. The delivery and the newborn affect the mother's emotions. Some women may feel depressed and tearful. Giving birth may have exhausted you completely; yet the baby needs care 24 hours a day.

The supportive role of the father is even more essential if your relatives and friends are not close at hand. It is good if your husband can help with the housework and taking care of the baby. It is in the interest of the baby's well-being that mother can have enough time to recover from the delivery and need not take care of the baby all the time.

Breastfeeding

Breast milk is the best food for your baby. Breastfed babies feel happy and safe. Breast milk contains all the essential nutrients the baby needs. Breast milk is clean and always available, and contains antibodies which will protect your baby from illnesses. In Finland, mothers usually breastfeed their babies for 6 to 12 months but one can continue until the baby is one, even two-years-old. Because of the Finnish climate, vitamin D in breast milk is not enough, and one must give the baby vitamin D drops.

The Secretion of Milk

The secretion of milk starts when a baby sucks at her/his mother's breast. Usually the baby begins breastfeeding in the labour ward. It would be ideal if the baby and the mother could be in the same room in the hospital so that the mother could breastfeed her baby at any time.

During the first days after labour, the secretion of milk is scanty but usually there is no need for extra milk because a newborn has nutrients in storage. For the first few days after birth your breasts produce creamy, yellowish milk which is important to your baby because it contains many important antibodies and nutrients.

Feed When Your Baby Wants to Be Fed

Breastfeeding is a new skill, which demands patient practising. Breastfeeding is time consuming, and you need to find a comfortable position. Feed when your baby seems hungry.

Most babies want to feed 8-12 times a day. The more often you feed, the more your body produces milk. Gradually the mother will get used to feed-

ing and the baby will also become quicker and is able to get nutrition with fewer feeds.

Babies wake up to feed at night. Feeding at night also increases milk secretion. Baby will go back to sleep sooner if you just feed instead of doing other things with her/him. Nappies do not have to be changed all the time.

The Sufficiency of Breast Milk

Breast milk satisfies the baby's need for liquids; so water or juice is unnecessary. Do not offer the dummy all the time. The dummy is useful if the baby cries a lot or is restless. The dummy may make it more difficult for the baby to learn to take to the breast. The more baby suckles, the less she/he needs a dummy.

Sometimes you may feel that your breasts do not produce enough milk

but do not worry, the secretion of milk never stops abruptly. Feeding at shorter intervals usually stimulates milk secretion in a matter of days. Emotional stress and fatigue play a role in milk secretion, and therefore you should reserve time for rest and relaxation. Breast milk is enough for twins, too. If the baby does not gain weight, you should feed the baby more often. Do not hesitate to talk about feeding problems with your public-health nurse. Also, other mothers can give you support and advice.

Sometimes milk supplies exceeds the need of baby. One may express milk either by hand or by using a breast pump. You can freeze expressed milk for later use.

Breastfeeding While Ill

Very rarely does the medication or mother's illness prevent her from feeding her baby. You should not, however, start taking any medication without consulting a doctor or a nurse. Ask the health centre for safe medicine. If the baby falls ill, do not stop breastfeeding. Ill babies want to be near to their mothers and suckle even more than normally.

Eat well while you are breastfeeding. This will help you to recover from giving birth sooner and makes you feel good. Your nutrient demand is greater when you breastfeed, and therefore your diet should be well-balanced. Remember to drink enough.

Bottle Feeding

It may turn out that breasfeeding is impossible, or, eventhough everything has been checked, your body cannot generate enough milk for your baby. Then you can give your baby infant formula ("baby milk"). Should you decide to bottle feed infant formula, discuss it with your public-health nurse first. Every baby is different regarding their need for infant formula.

There are two kinds of bottle formulae in the market: infant formula which can be used as such and infant formula which comes in powder form, and is then dissolved in water. Boil water, let it cool for 5 minutes and then mix the powder. One spoonful is enough for one decilitre of water. Once prepared and if not used, powdered milk should be thrown away within 24 hours because it goes sour.

Infant formula should be lukewarm when given to a baby. It can be heated either in water (steaming) or in a microwave oven. Always taste and check the temperature before you give the milk to your baby. Do no reheat milk which has been been left over. Store prepared milk in the fridge. Keep bottles clean. During the first three months sterilise bottles by boiling them in water for at least 10 minutes.

Need For Vitamin D

Because there is so little sunlight during the winter in Finland, it is important for every child to take vitamin D. Vitamin D is essential for growth and bone formation. Vitamin D deficiency results in rickets, a disease which softens bones. Vitamin D is given every day all through the year, starting when the child is 2 weeks old until she/he is 2 years old. Especially dark-skinned children need vitamin D drops during the winter until they are 5 years. Their skin produces less vitamin D than does light skin.

Dosage

You can obtain two kinds of vitamin D from your pharmacist. If your baby feeds solely on breast milk, the dosage is 5 drops (Devitol) or 20 drops (Dee-tippa) every day. If your baby feeds on infant formula, you give less vitamin D (3 drops of Devitol or 12 drops of Dee-tippa). Do not be tempted to increase the dosage. Drops can be poured straight into the baby's mouth, mixed in food or given by spoon. Ask your public-health nurse for more information on the use of vitamin D.

Maternity Clinic

You continue to visit the maternity clinic after giving birth, especially during the first months. After you have settled in at home, inform the public-health nurse whom you visited before about the childbirth. You can ask her to come to your house or you can visit the maternity clinic yourself.

You will see the public-health nurse every month during the first few months. If the need arises, you can see her/him more often. The reason for this is to monitor the growth and development of the child and to get advice and learn how to take care of the baby. The public-health nurse weighs and measures the baby. The baby is usually vaccinated for the first time at the age of 3 months.

Do not hesitate to consult a public-health nurse if your baby falls ill, or if you have other problems. If such problems arise outside office hours, consult the outpatient department or the maternity ward of the hospital. Feel free to discuss your problems with the health care staff: giving advice is part of their job. Should you have difficulties with Finnish, find out about the interpreting services. An interpreter can be present during your meetings at the health centre, therefore make sure you talk about this with your public-health nurse in advance.

Your Health: Postnatal Check

The public-health nurse will arrange for you to see a doctor two-weeks after the child birth. The doctor will conduct a check to see that you feel well. The doctor will also do an internal examination. You can talk about contraception and make plans for the future. This visit is called a postnatal check, and the doctor will give you a certificate which shows you have

given birth. The certificate is important because you need it in order to receive parental benefit (see Social Benefits).

Annual Checkup

As the child grows, you need not visit the maternity clinic that often. The medical examinations of your child are arranged through the maternity clinic. The checkup will be annual until your child goes to school. When children reach school age, the school's public-health nurse examines and monitors their health and development.

Infant Care

Despite moments of exhaustion, caring for your baby feels wonderful. Taking care of a baby includes talking and showing affection. When you talk to your baby in a friendly tone, the baby feels safe and secure. Use your mother-tongue: it is the language you know best and is easiest.

Dressing Your Baby

The Finnish state provides each new family with a box containing layette for your baby. It is called a maternity box. It contains clothes and other basic items your baby will need. The clothes are long-lasting and of good quality; you can judge from the contents of the box what kind of clothing babies need in Finland.

The contents of the box may vary slightly from year to year. No major changes, however, are made.

You will find the following items in the box:
shirts, rompers, stretch suits, headgear, pants, gauze nappies, socks, sleeping bag-quilt, zip-suit sleeping bag, a towel, sheet, quilt cover, quilt or blanket.

Equipment

You will find a changing mat, a cotton towel with plastic cover, cotton wool, moisturising cream, sanitary towels, a packet of condoms, a hairbrush, nail scissors, bath thermometer, a toy and a book in the maternity box.

You can make the first bed for your baby out of the box by upholstering it with cloth. You will find a matching mattress in the box.

Instead of maternity box, you can choose to accept a sum of money. The value of the maternity box, however, is much greater than the received sum of money (800 FIM in 1997). Many of the clothes and accessories of the maternity box can be used for the later children. Many take the benefit as money after the first child.

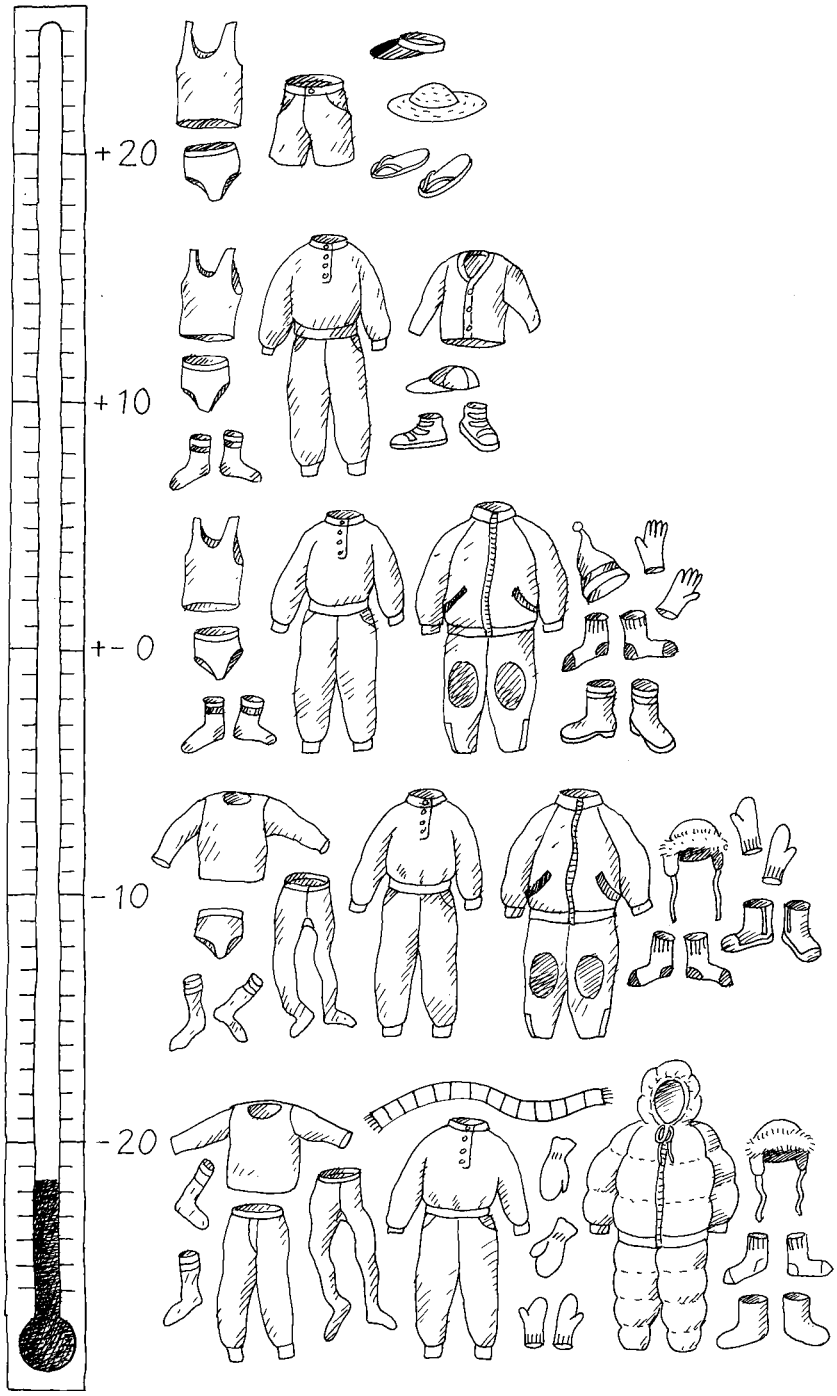
The maternity box contains all essential accessories crucial in primary baby care. It is good to buy additional clothes, though, because the laundry has to be done more frequently. If you use cotton nappies, make sure you have at least 20 of them. The same goes with knickers and plastic pants. It is easy to make clothes for babies. You can borrow clothes from your friends or buy them second hand from jumble sales or flea markets.

Keeping Your Baby Clean

A baby digests food quickly. The baby may urinate a dozen times during the day and pass stools rather often, too. Therefore the nappy has to be changed many times a day. It is good to wash the baby's bottom at least twice a day, and every time she/he has passed a stool. Wash the baby's bottom with warm water. You do not need soap. Dry the bottom very carefully and lightly apply some lotion.

If baby's nappy is changed often enough, she/he will not become particularly dirty during the day: a baby does not become messy while eating, and because she/he stays in the pram if outside. Do not bathe your baby every day, because it may dry the baby's skin. Two or three times a week is enough - otherwise bathe the baby when necessary.

Dress the baby according to the weather



There are many kinds of nappies available. There are gauze nappies in the maternity box which can be used with nappy pants in the beginning. A variety of disposable nappies can be bought as well. You can find the right nappy for your baby by testing different nappies and by asking the public-health nurse or families with children.

Naps

Irrespective of the season, many children have their evening naps outside in prams. Many babies sleep better outdoors in the fresh air than in the bedroom. Sleeping outdoors is not dangerous for a baby. One may gradually start going outdoors when the baby is two weeks old. If it is very cold or excessively warm, it is better to let the baby sleep inside.

If the baby takes her/his evening nap outside, make sure she/he is clothed according to the weather. It is not good for the baby to be either too hot or too cold. You can try the temperature of baby's skin from hands or neck when the baby is clothed. When the temperature is below zero, a baby must have woollen clothes, but woollen clothes should not be placed next to her/his skin. In summer, make sure that the sun is not shining directly into the pram, and protect the baby from insect bites. Protect the baby from rain and wind as well.

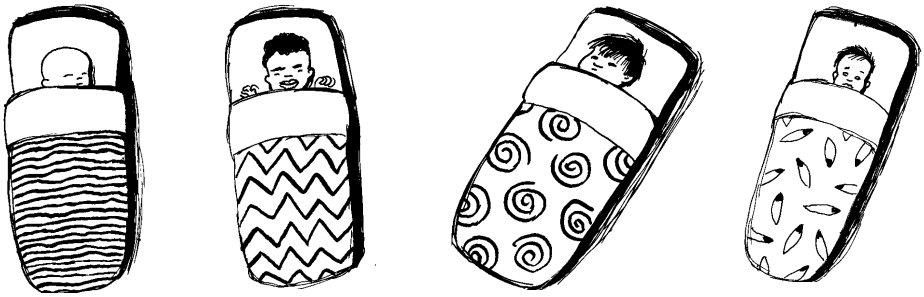
Vaccination

Vaccination is an integral part of health care in Finland. Vaccination prevents from infectious diseases. Some previous diseases have disappeared altogether thanks to vaccination. Vaccination protects against many a dangerous disease: diphtheria, whooping-cough, tetanus, tuberculosis and polio. Because of immunisation, there are very few cases of these diseases in Finland, although in neighbouring countries there have been recent outbreaks of the above mentioned diseases.

It is important for every child in Finland to receive immunisation against these diseases, otherwise the risk of catching the diseases will increase in the whole population. The maternity clinic takes care of vaccinations in Finland. Babies should be protected from other diseases as well. It is best to keep the baby away from anyone who suffers from any infectious disease.

Immunisation Schedule for Babies

vaccine		age
BCG	tuberculosis	at < 1 week
DPT	diphtheria, whooping-cough, tetanus	at 3 -24 months
POLIO	polio	at 6 -24 months
Hib	Haemophilus influenzas type B (e.g. meningitis)	at 4-6 months
MPR	measles, mumps, rubella (German measles)	at 14-18 months
HBV	hepatitis B vaccination (hepatitis)	at 0, 1, 2 and 12 months



Solid food

Small amounts of solid, puréed food is introduced to babies when they are approximately four to six months of age; depending on the sufficiency of breast milk and the baby's needs. Breast milk alone is not enough for a six-month-old baby. You can start weaning by introducing small amounts of solid food to your baby.

In the beginning, one teaspoonful of solid food when the baby feeds is enough. Later on you can gradually start giving more solid food to your baby. Give the same food for a week, and thus allow your baby to get used to different flavours. In the beginning the baby may spit everything out, but after a time she/he gets accustomed to solid food.

The table below illustrates what kind of diet a baby under 1 year old needs. If the baby develops allergic symptoms (rash, vomiting, diarrhoea) from some kind of food, leave it for a time, and try to give it later. Talk about suitable food with the public-health nurse.

First supplementary food for your baby include the following vegetables, fruits and berries:

- potato
- carrot
- cauliflower
- zucchini
- broccoli
- rice
- maize
- avocado
- aubergine
- tomato
- blueberry
- raspberry
- rose hip
- currants
- apple
- apricot
- mango
- plum
- banana
- pear
- papaya
- kiwi fruit

The following are not recommended for a baby less than one year:

- spinach, beetroot, swede
- Chinese cabbage, lettuce, head lettuce
- ordinary soya drinks, whole milk
- vegetable juice
- honey

How to Make Purées?

To make vegetable purée, wash vegetables carefully and cook until soft with a small amount of water. To make fruit purée, wash and peel fruits, remove the pips. In order to prepare purée, mash fruits or vegetables with a fork, use a masher, food press, pass through a sieve, or use a blender. You can slice soft fruits with a spoon. Apples and pears can be grated.

If needed, add a little water, breast milk or infant formula in purée. Do not add salt, sugar, cream or butter/margarine in puréed food. Prepare large amounts of purée at one time, divide them into small portions and then freeze them. When you are about to serve them, defrost portions, and reheat by steaming.

When the baby reaches five to six months of age, you may start serving meat, fish, chicken, eggs and cereals. In the beginning one portion of meat - that is one spoonful a day - is enough. Mash well-cooked meat or fish with a knife until very fine, or use a blender.

Do not offer liver or sausages to your baby. Meat and wholemeal cereals provide your baby with iron. The absorption of iron can be accelerated by vitamin C which one gets from fresh fruits and vegetables. Fresh fruits and vegetables are an essential part of the baby's daily diet in the future, too.

Porridge and Gruel

You can prepare porridge and gruel out of the following cereals. These cereals can be obtained in the form of flakes, grits and flour:

- rice
- maize
- rye
- millet
- oat
- wheat
- buckwheat
- barley

Press cooked rice through a sieve. You can serve macaroni and bread when your baby learns to chew. Use water, breast milk or infant formula to make porridge and gruel. Do not add salt, sugar or butter/margarine.

Dairy Products

Milk, sour milk and yogurt in addition with or instead of breast milk/infant formula can be introduced when a child is 10 to 12 months of age. Give the baby soured dairy products such as sour milk, yogurt and sour whole milk. Give the baby milk from a cup, not from a bottle. Approximately 6 decilitres of milk a day is enough. If a baby drinks too much milk, she/he will not eat solid food. Beans, peas and lentils and soya products should not be introduced until the baby is approximately one years old because these create wind troubles.

Convenience Foods or Homemade Foods?

You can buy many different brands of convenience foods which are safe, and easy to prepare. They are, however, more expensive than homemade foods.

There are instant porridge and gruel meal available. You can reheat uncovered jars of baby food in a microwave oven, or you can steam a jar of baby food. You will find the age recommendation, ingredients and amounts of nutrients from a jar.

Regular Feeding Hours

When a baby reaches one year, she/he will take interest to using a spoon and drinking from a cup herself/himself. Make your baby to get used to regular feeding hours. Because the baby's stomach is so much smaller than adult's, a baby needs food more frequently than an adult. In addition to three main meals, snacks are needed two to four times a day. When a baby eats regularly, it is easier to plan other activities in the family. If you introduce many different foods to your baby, it is easier to have meals outside home, too.

When a child is nearly two years old, she/he can eat the same food as the rest of the family. Before adding salt or spices to family meals, set aside a small amount for your baby. Do not add any salt when the child is under one year old and avoid any hot spices, and continue to limit these after that age. Avoid giving your child sweet drinks, lemonade, sweets, biscuits and ice cream. Sugar is not good for teeth, and spoils her/his appetite.

Excessive fat is no good either. Sweet and fatty nitbits make your baby fat. Foods made out of fruits and berries are good snacks. It is not wise to accustom the baby to drink sugary tea. If thirsty, water is best. Diluted pure fruit juice can be offered with snacks.

Digestive Upsets

If your child suffers from constipation, try giving her/him more fruits, vegetables, berries, and wholemeal bread. Fatty and sugary foods, foods containing white wheat flour, sweet drinks and too much milk make constipation worse. Plenty of water and exercise helps.

The need for liquids increases if the baby is vomiting or has diarrhoea. If the child has a temperature, the demand for liquids is likewise greater. Breast milk is the best cure for diarrhoea. There is no need to stop breastfeeding when the baby is ill. If a young baby has diarrhoea, consult a doctor or a public-health nurse.

Teeth

Take good care of your baby's teeth by brushing them every day. Brushing the teeth with fluoride toothpaste in the morning and before bed-time time prevents cavities. One can start to use of fluoride toothpaste after the baby is cutting her/his first molar teeth at one to two years. The amount of toothpaste should not be bigger than a pea. All children are individuals as comes to their need for extra fluorine. Discuss this with your public-health nurse.

Diet During the First Year

meal	Under 4 months	at 4 months	at 5 months	at 6-8 months	at 8-10 months	at 10 to 12 months
1.	BM	BM	BM	gruel or porridge BM	gruel or porridge and B M or infant formula	gruel or porridge and B M or infant formula
2.	BM	BM alternating: -puréed potatoes -puréed vegetab-les -puréed fruits -puréed berries	BM alternate: -meat -chicken -fish -egg +puréed potatoes or vege-tables	alternate: -meat -chicken -fish -egg +puréed potatoes or vegetables BM or water	potatoes, vegetables -meat -chicken -fish -egg chopped food -vegetable water, BM or infant for-mula	potatoes, vegetables -meat -chicken -fish -egg chopped food -vegetables water, BM or infant formula
3.	BM	BM	BM	BM puréed berries or fruits	puréed berries or fruits and BM or infant formula	fruits or berries and bread and BM or infant formula, yogurt or soured whole milk
4.	BM	BM alternate: -puréed potatoes or vegetables -puréed berries or fruits	BM alternate: -puréed potatoes or vegetables -puréed berries or fruits -gruel or porridge	alternate: -puréed potato-es or vegetables -puréed berries or fruits gruel or porridge BM or water	See 2. or potato-vegetable food. BM or infant formula.	See 2.
5.	BM	BM	BM	See 1.	See 1.	See 3. or gruel/por-ridge
6.	BM	BM	(B M if needed)	-	-	-

B M Breast milk. If no breast milk is available, infant formula should be given to a baby according her/his individual needs. Breast milk can be offered more often, also during the night. Breastfeeding can continue throughout the first year. If necessary, solid food can be offered at the age of 5 to 6 months instead of 4 months.
The table is directive. In practice, the baby should be fed when she/he is hungry. Observe! Vitamin D preparation from the age of 2 weeks to 2 years, see page 20 for details.
Source: Imeväisten Ravitsemus.(Nutrition of a suckling, in Finnish), Mannerheimin Lastensuojeluliitto 1995.

Social Benefits

This information has been compiled according to the situation in 1997. You can check the current amounts, restrictions on income and age from the local KELA office or social welfare bureau.

Maternity Benefit

- By maternity benefit one means the maternity box which includes layette for your baby or a compensating sum of money (800 FIM).
- One is entitled to the benefit depending on the number of babies born at the same time. For example, if you have twins, you will receive two boxes or twice the money, or one box plus the money.
- In order to receive the benefit, the pregnancy must have lasted 154 days at least, and the mother has visited a maternity clinic or medical examination before the end of the 4th month of her pregnancy.
- You can apply this benefit at the local KELA office.

Maternity , Paternity and Parental Allowance

- The aim of maternity, paternity and parental allowance is to safeguard the economic status of the person who takes care of the baby for the first 10 months, so that this person would not have to go to work elsewhere.
- Maternity allowance, as the name suggests, is paid to the mother of the baby for 105 weekdays. One starts to receive payments approximately one month before the expected date of delivery.
- Paternity allowance is paid to the father of the baby if he does not go to work, but stays at home and takes care of the baby. Father can be away from work for 12 days during the period of the maternity allowance, and also 6 more weekdays. KELA pays allowance for these days.
- One starts to receive the parental allowance after the period of maternity allowance has expired. The period is 158 weekdays. The allowance can be paid to either of the parents who stays at home to look after the baby.
- If more than one child is born at the same time, the period of parent's grant extends by 60 weekdays.
- One has to apply for every allowance (maternity, paternity and parental) separately from the local KELA office.
- The amount of the allowance depends on one's income. However, the minimum allowance is independent of income.
- One pays taxes from the maternity, paternity and parental allowance.
- A person who has lived in Finland for 180 days before the child is born is entitled to maternity, paternity and parental allowance.

Child Allowance

- Is paid to every child who lives in Finland
- Child allowance continues until the child is 17 years of age
- The amounts according to the system were in force in 1997:

first child	535 FIM
second child	657 FIM
third child	779 FIM
fourth child	901 FIM
fifth child and the following child	1 023 FIM

- For example, the monthly amount of child allowance for a family with four children receives 2 872 FIM monthly.
- Child allowance is not taxed.
- One applies for child allowance at the local KELA office.

Home or Private Care Allowance

If either of the parents stays at home to take care of a child/children under 3 years old after the parental allowance is no longer paid or the child is at day care not organised by the municipality, she/he can apply for home care support at the KELA office. The basic sum is same for all, but low-income families and those with many children receive a larger sum.

If the child is at private day care, the family can, as an alternative, apply for private care allowance at the Kela office. This allowance can be paid to the producer of the day care until the child goes to school.

Literature

Available at the maternity clinic or social welfare bureau

- We are going to have a baby (Meille tulee vauva). Available in Finnish, English and Russian.
- Tuplaonni (Double luck, in Finnish)

Maternity Box:

- Food for a suckling (in Finnish)

Mannerheimin Lastensuojeluliitto

These leaflets cost. Orders: Mannerheimin Lastensuojeluliitto, Keskustoimisto, Toinen linja 17, 00530 Helsinki.
Tel. 09 - 3481 1480, fax 09 - 3481 1508.

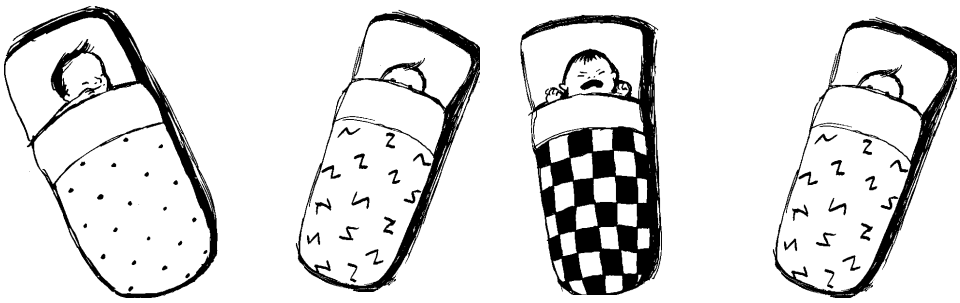
- Imetysajan ravitsemus (Nutrition during breastfeeding, in Finnish)
- Imeväisten ravitsemus (Nutrition of a suckling, in Finnish)
- Koliikkivauva perheessä (Our baby has colic attacks, in Finnish)
- Lasten kasvisruokavalio (A vegetarian child, in Finnish)
- Neuvolan rokotusopas (Immunisation Guide of the Maternity Clinic, in Finnish)
- Raskausajan ravitsemus (Nutrition during pregnancy, in Finnish)
- Raskausajan liikunta (Exercise during pregnancy, in Finnish)
- Savuton raskaus (Non-smoking pregnancy, in Finnish)
- Vauva - huolto, hoiva, hellyys (Baby - care, protection and affection, in Finnish)
- Guide to Giving vitamin D to a small child. Available in English, Russian, Somali, Arabic, Serbo-Croatian, Persian, Vietnamese. Cards are free of charge, the recipient pays the handling and postage charges.

In special, simplified Finnish

Kehitysvammaliitto ja Mannerheimin Lastensuojeluliitto:

- Odottavalle perheelle (To Expectant Family, in Finnish)
- Vastasyntyneestä yksivuotiaaksi (Newborn to One Year Old, in Finnish)
- Yksivuotiaasta kouluikäiseksi (The years from 1 to seven, in Finnish)

Orders: Mannerheimin Lastensuojeluliitto.



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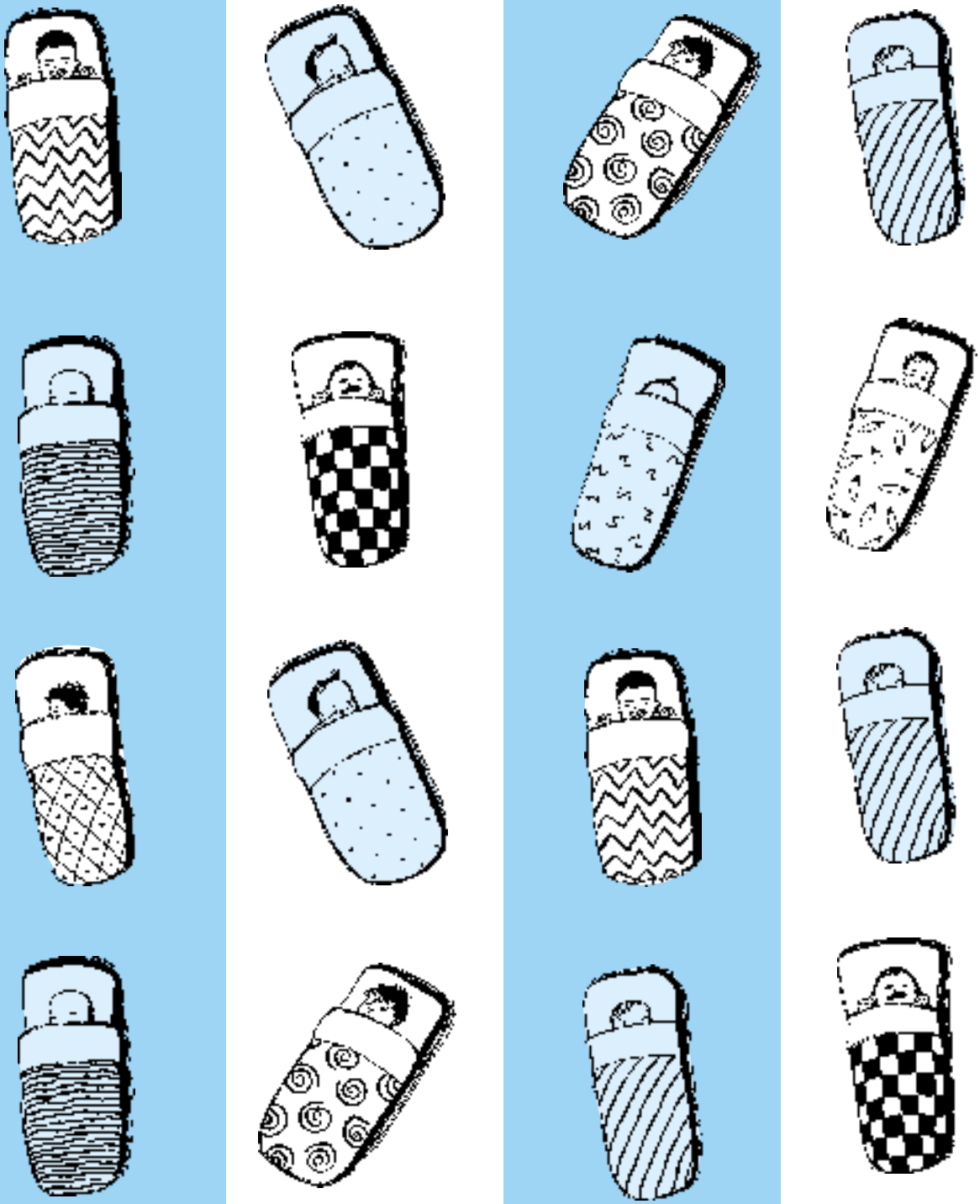

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