ELI KUCHAR, 19 months old, of Middlebury has found a great place to spend a summer morning — the sandbox at Mary Johnson Children’s Center.
You may have heard that Planned Parenthood had to close its health center in Middlebury. Our organizations are working together to make sure you have access to the care you need locally:

Addison County Parent/Child Center provides support and education to families, including pregnancy prevention.

Open five days a week, offers telehealth visits.
(802) 388-3171  |  www.addisoncountypcc.org

Mountain Health Center in Bristol provides full spectrum preventative and primary care to people of all ages, regardless of insurance status or ability to pay.

Open five days a week, offers telehealth visits.
(802) 453-5028  |  www.mountainhealthcenter.com

The Open Door Clinic in Middlebury provides free health care for uninsured and underinsured adults.

By appointment only, offers telehealth visits, language services available.
WhatsApp: (802) 779-4828 | (802) 388-0137  |  www.opendoormidd.org

Planned Parenthood continues to offer most of its services through telehealth, including abortion pills by mail. You can also visit a nearby health center in Barre, Burlington or Rutland.

Telehealth appointments available 5 days a week. Hours of operation vary by location.
(866) 476-1321  |  www.ppnne.org

Porter Medical Center offers full health care services for all ages, including reproductive and sexual health, contraception, screenings, STD treatment, OB/GYN support and abortion.

Porter Women’s Health is located in Middlebury. Primary Care has offices in Brandon, Middlebury and Vergennes. Pediatrics runs a clinic for students at Middlebury Union High School health center.

Offices open five days a week, offers telehealth visits. Emergency Department open 24/7.
(802) 388-4701  |  www.portermedical.org
Get your baby to eat

Transition is exciting, messy and confusing

By KATIE FUTTERMAN

Woooosh. Airplane coming in for a landing. It’s time to feed your baby solid food.

But when?

How?

Whether you’re a first-time parent or it’s not your first rodeo, fears about allergies, stress and the mess it will create are common and normal. But it’s important not to get lost in stress. The process can actually be very rewarding.

“The transition to solid foods is an exciting time. It’s messy, fun and an important benchmark in a baby’s development. They will let you know when they are ready,” said Marlee Malone, public health nutritionist at the Middlebury office of the Vermont Department of Health, told the Independent.

Babies typically begin to transition to foods other than formula or breast milk around six months, according to Malone. They do not need to have teeth to begin the process.

Jackie Prime, mother and caretaker at Mary Johnson Children’s Center, recently transitioned her fourth child, Amelia, to solid food.

“It’s wonderful to watch the process,” she said. “My daughter really, really enjoys raspberries, and she’s a very vocal eater, so she’s like ‘mmmmmm’ the whole time she’s eating. And so finding those foods, and seeing that develop for children, of their strong likes and dislike, it’s a really fun interactive time feeding children.”

Prime marveled at the development from her spoon-feeding every bite to simpler mealtimes, and even times when her daughter tries new foods off of her mom’s plate.

But reducing stress isn’t just advised. In fact, it may be essential to the process.

Prime encourages caregivers to be very mindful of what emotional state they are bringing to mealtime.

“If you’re stressed or worried and all those things, children feel all that. Coming to mealtime with an open-mind and introducing it in a positive way is really important,” she said.

Prime herself is a rather picky eater, but she makes a conscious effort to present foods that she may dislike with a positive attitude. Still, every child is different. Although she was consistent in presenting all four kids with a diverse array of foods when they were learning to eat solid foods, two still grew to be rather selective, while the others were a bit more adventurous.

READY TO GROW

There are some key signs that a baby is ready to transition to solid foods. For instance, they will often trace with their eyes each and every bite their parents or caregivers take, according to Malone. Other signs include the ability to sit up alone or with support; control their head and neck; open the mouth when food is offered; swallow food rather than pushing it back out onto the chin; bringing objects to the mouth; trying to grasp small objects, such as toys or food and transferring food from the front to the back of the tongue to swallow, according to the U.S. Centers for Disease Control and Prevention, or CDC.

However, even after such signs, sometimes the baby is not ready, as all babies are different. A sign of this could be the baby pushing food off the spoon with their tongue. But fear not. You do not have to make these high-stress situations with lots of tears.

“Introduction to foods should be an exciting and calm experience so that the baby is interested and eager to learn,” Malone said.

It is important to follow the baby’s lead. In these cases, Malone recommends waiting and trying again at a later date. The CDC refers to the foods and drinks as “complementary foods,” as they complement the breast milk or formula that a parent should continue to feed their child.

“ Babies during this stage are still getting many of their nutrients from human milk or formula so it is OK if they aren’t in the mood for...
To begin the process, Prime started by introducing breast milk and cereal at about five to six months. She also chose to provide homemade baby food. Over the course of three months, Prime transitioned from “super purees” to thicker, more consistent food and eventually table food.

Babies show readiness cues for finger foods through a developmental landmark known as the pincer grasp, according to Malone. At this point, the baby can pick up food between their pointer finger and thumb and bring it to their mouth.

“There are many muscles involved with chewing and swallowing that develop as part of eating readiness. Starting with soft foods in small bites is recommended,” said Malone.

For solid food, there is no particular order, according to The American Academy of Pediatrics. By the time the child is seven or eight months old, they have evolved over time. When Prime’s daughter Jocelyn, now 18, was a baby, Malone said. Moreover, children might take time to adjust to new food textures, and cough, gag or spit up, according to the CDC. Caregivers should be prepared for this mess. Malone recommends having a mat, towel or shower curtain spread out below very young children while they are learning to eat.

It is also normal to notice changes in bowel movements during this introduction phase, according to Malone.

Allergies can be scary. Prime herself has an allergy, and there are significant allergies on her husbands’ side. She contacted doctors around concerns about allergies, and recommendations have evolved over time. When Prime’s daughter Jocelyn, now 18, was a baby, the message was to withhold peanut butter, for instance, though now parents are recommended to give children a little bit.

Experts recommend introducing one single-ingredient food at a time, waiting three to five days between each new food, in order to see if your child has any problems with that food, such as allergies. If a child has severe eczema and/or an egg allergy, caregivers should talk with the doctor about when and how to safely introduce foods with peanuts. Other potentially allergenic foods, such as fish, shellfish, tree nuts, wheat, soy and sesame can be introduced at the same time as other foods.

“It is really individualized for each child and family as this transition looks different for everyone,” she said.

There is also a difference in whether the parent breastfeeds or provides formula, mainly in the parent’s milk supply. Moreover, recent formula shortages have left some parents feeling that they need to introduce alternative feeding practices sooner than recommended due to the inability to find formula, according to Malone.

To find help with the process, local health offices have a special supplemental nutrition program for women, infants and children, also known as WIC, and other staff who can provide assistance, services and recommendations. Contact Marlee Malone in the Middlebury Department of Health office at 802-388-4644 or by email at als.vdh@hotmail.com.

“Every family has so many different values and customs and cultures that come into food,” she said. “I feel fortunate that I have my children in a place that respects my family values around food. I think that can be kind of tricky to navigate as well.”

Linda January, executive director of Otter Creek Child Center, has open lines of communication, and checks in regularly with families about what they are trying at home and what they want Otter Creek to try.

“It is really individualized for each child and family as this transition looks different for everyone,” she said.

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MIDDLEBURY — With the current infant formula shortages, more parents are exclusively breastfeeding their babies longer. For many new families, breastfeeding and returning to work can be hard.

Fortunately, The Vermont Department of Health is letting families know that its breastfeeding programs offer support for workers and their employers to help make breastfeeding the easy choice.

For parents, Vermont laws provide protection for people who breastfeed in public and support for when they return to work. Federal healthcare reform includes break time requirements so parents can express breast milk at work.

For businesses, especially those struggling to fill vacancies, Department of Health officials say that becoming a breastfeeding friendly employer is a great way to support new and current employees — with tangible benefits for all. Data shows that policies supporting new parents in the workplace benefit employers through decreased turnover, reduced absenteeism and, critical to both employers through decreased turnover, and a reduced risk for chronic diseases. Breastfed babies also have a reduced risk of severe lower respiratory disease, ear infections and Sudden Unexpected Infant Death syndrome, known as SUID. Breastfeeding also offers important bonding opportunities for both.

In addition to the important nutrition and growth benefits, babies who breastfeed have improved cognitive development and lower health care costs.

World Breastfeeding Week was last week (Aug. 1-7), which prompted officials to suggest that local companies join the 24 businesses in Addison County that have already been certified by the Department of Health as breastfeeding friendly employers. All that’s involved is instituting several fairly simple practices:

1. Establish a policy stating your company’s support of a parent’s choice to breastfeed, allowing the use of flexible time and breaks for expressing breast milk.
2. Make a clean, private space (not a bathroom) available for expressing breast milk.
3. Provide lactation education through flyers or other resources.

The Vermont Department of Health supports and encourages breastfeeding because of its important health benefits for both the person who is lactating and the baby. For adults, breastfeeding reduces the risk of breast and ovarian cancers and postpartum depression.

In addition to the important nutrition and growth benefits, babies who breastfeed have improved cognitive development and a reduced risk for chronic diseases. Breastfed babies also have a reduced risk of severe lower respiratory disease, ear infections and Sudden Unexpected Infant Death syndrome, known as SUID. Breastfeeding also offers important bonding opportunities for both.

Vermont is a leader in breastfeeding initiation, with 91.5% of babies in the state receiving human milk shortly after birth, according to the Centers for Disease Control and Prevention. However, by the age of six months, the rate of babies who are exclusively breastfed drops to 36.8%. This coincides with the time many parents return to the workforce, which Department of Health officials said shows just how important employer support for breastfeeding friendly policies in the workplace is to people being able to make this healthy choice for their babies.

“Supportive work policies allow people the time and space to continue pumping and providing human milk to their babies,” said Deb Kitzmiller, a public health nurse with the department’s Brattleboro Local Health Office. “In addition to the significant health aspects, becoming a Breastfeeding Friendly Employer provides tangible benefits for businesses as well.”

Data shows policies that support new parents in the workplace can benefit employers through decreased turnover, greater productivity, reduced absenteeism, higher morale and staff loyalty, as well as through lower health care costs (average annual savings is $400 per breastfed baby).

For more information, help and resources, visit healthvermont.gov/breastfeeding-friendly-employers, or contact Marlee Malone in the Middlebury office of Local Health at 802-388-4644 or by email AHS.VDHO/LHMiddlebury@vermont.gov.
Fitness tips for new parents

Being a parent requires an ability to adapt to change. Newborns require around-the-clock care that often translates into little free time for their parents. When parents get opportunities to step away, exercise may be the furthest thing from their minds. But it could be in new mothers’ and fathers’ best interests to consider exercise even when their schedules are hectic.

Health experts at the Mayo Clinic advise exercise helps to tame stress, keep the mind sharp and boost the immune system. Staying fit and healthy with a new baby in the house may be easier when parents embrace certain strategies.

• Flexibility is key. New parents strive to maintain schedules, but newborns and infants don’t always comply. Therefore, committing to a workout at a specific time each day or even a specific duration can be foolish. It’s better to take what you can get when you can get it. Don’t get hung up on following a specific regimen right now.

• Exercise in bursts. Rather than devoting a set amount of time to a workout, fit in exercise when you have a minute. Run up and down the stairs while the baby is napping. Or do some bicep curls while preparing a bottle.

• Take a “baby-and-me” class. Gyms and fitness organizations often offer classes for new parents that build workouts around movements that can be done with baby in hand or in tow. Another option is Stroller Strong Moms, a workout group that incorporates kids and strollers. Seek out these programs for innovative ways to get exercise and spend time with your child and other parents.

• Ask for time off. Spouses can divide baby duties so that each gets equal time away to devote to personal needs. Factor exercise into some of the plan, even if you can carve out only a few minutes. Another tip is to multitask. Consider buying a stationary bicycle to use while watching a favorite television show.

• Go swimming. Swimming works many muscles of the body, and the buoyancy of the water relieves pressure on joints and other areas of the body. When baby is old enough, you can even enjoy time in the pool together.

• Prioritize sleep. Do not compromise sleep for exercise, which can adversely affect your overall health. Sleep is essential for human development, says The Sleep Foundation. During sleep, the brain experiences intense activity, building the foundations for how people learn and grow — including the development of our behavior, emotions and immune systems. Adequate sleep is vital for new parents to maintain their health and the health of their babies.

As infants grow, parents will find they have more time to devote to exercise. Until then, new parents can be flexible and make time for exercise when their schedule allows.

— Metro Creative

Mother’s walk

MARIAH NORTH OF Middlebury, who knows a thing or two about babies, pushes a stroller with two little kid-size bikes piled on to it one morning last week. North said her two-and-a-half-year-old, Chascha, loves to start out the morning riding her bike to daycare but after half a mile tuckers out and travels the rest of the way in the stroller. Big brother Ansel could ride his bike forever, his mother says, but she still ends up having to tote it back home after morning drop off. 

Independent photo/John S. McCright
Make your home safe for babies

New parents face a host of new and unique challenges when they bring their babies home for the first time. Lack of sleep and dirty diapers are two well-known challenges parents must confront when caring for newborns. While those hurdles must be cleared after babies are born, other potential issues can be dealt with while parents are awaiting the arrival of their children.

Prior to getting pregnant, parents expecting for the first time may not have given much thought to how safe their home is for children. But with a baby on the way, safety must be the utmost priority at home. Home injuries pose a bigger threat than expecting parents may realize, as Stanford Children’s Health reports that many children are seriously injured each year at home.

Thankfully, many home injuries can be prevented. Expecting parents can get a head-start on being moms and dads by taking various steps to make their homes safer before their babies are born.

• Conceal cables and cords. Cables and cords pique kids’ curiosity. Pulling on cables and cords can put young children in the path of falling objects or increase their risk for injuries involving electrical wires and outlets. Cable and cord concealers are inexpensive and easily installed. Often used to cover cords hanging down from mounted televisions, concealers also can be used to hide cords coming from computers, lamps and other items that can pose a threat to young children.

• Avoid hand-me-down kids’ furniture. When furnishing a children’s nursery, it’s best for parents to avoid hand-me-down furniture. The older a piece of furniture is, the less likely it is that the item will meet current safety guidelines. Some parents may be tempted to let their children sleep in the same crib they slept in as kids decades ago, but it’s safer to eschew nostalgia in favor of products that meet the latest safety standards.

• Get rid of potential choking hazards. The National Safety Council (NSC) and the National Center for Injury Prevention indicate that airway obstruction injuries are the leading cause of unintentional injury-related deaths among infants less than 12 months old. Prior to bringing their babies home, expecting parents can remove all small trinkets and other items that curious children may want to put in their mouths. When buying toys for kids, read the packaging to make sure each item is safe for babies and avoid buying or accepting any gifts with small pieces.

• Store all medicines on high shelves behind cabinet doors. Vitamins and medicines should be stored on high shelves behind cabinet doors. If kids can see them, they’ll likely try to grab them. In fact, the NSC reports that children ages 19 and under account for roughly 8,000 fall-related emergency room visits every day. Hiding medicines on high shelves behind closed cabinet doors reduces the risk that kids will be poisoned and suffer a fall-related injury.

— Metro Creative
**Fun in the shade**

SOME VERY LITTLE children enjoy the summer weather last week in the comfort of the shaded play area at Middlebury’s Mary Johnson Children’s Center. Pictured, clockwise from left, are 19-month-old Emlyn Turo of Middlebury, Hudson Otis (also 19 months) of Middlebury and teacher Courtney Otis snuggling in the sandbox with Emlyn Turo and 14-month-old Amelia Prime of Bridport.

Independent photos/Steve James

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**Q: How Young is Too Young?**

**A: There is no “too young.”**

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