

**DAD'S GUIDE**



**TO THE**



**FIRST YEAR**



# Dad's Guide to the First Year

**National  
Fatherhood  
Initiative®**

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Since 1994

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# Table of Contents

<b>Part 1 • Preparing for the First Year</b>	5
<b>Introduction to Preparing for the First Year</b>	5
<b>Preparing for the Well Child</b>	5
Temperament	5
Crying	7
Nutrition	10
<b>Part 2 • Providing in the First Year</b>	14
<b>Introduction to Providing in the First Year</b>	14
<b>Providing for the Sick Child</b>	17
What is a fever?	17
The Common Cold	19
Germs	21
Preventing Dehydration	22
<b>Providing for the Injured Child</b>	23
What is a burn?	23
Sunburns	24
Drowning	25
Cuts, Scrapes, and Bleeding	26
Head Injuries	27
Poisoning	28
Choking	30
First Aid Kits	31

<b>Part 3 • Practicing in the First Year</b>	33
<b>Introduction to Practicing in the First Year</b>	33
Months 1 and 2: Things to Know/Ways To Grow	33
Months 3 and 4: Things to Know/Ways To Grow	35
Months 5 and 6: Things to Know/Ways To Grow	36
Months 7 and 8: Things to Know/Ways To Grow	38
Months 9 and 10: Things to Know/Ways To Grow	39
Months 11 and 12: Things to Know/Ways To Grow	41
<b>Conclusion</b>	43
<b>Want More Resources on the First Year?</b>	44
<b>About The Authors</b>	45
<b>About National Fatherhood Initiative®</b>	46
<b>Contact National Fatherhood Initiative®</b>	48
<b>Give Us Your Feedback</b>	49

# Part 1 • Preparing for the First Year



## Introduction to Preparing for the First Year

Whether this is your first child or you need a reminder course in all things related to baby, this eguide contains great information to help you prepare for this first year of your child's life. In the sections that follow of Dad's Guide to the First Year, you'll learn helpful tips on preparing, providing, and practicing for your first year with your child.

Note: The medical information that follows was developed by medical professionals Yvette Warren, M.D. and Kyle Pruett, M.D. The information is timely and helpful, yet general by intention. Consult your doctor for your medical needs and questions.

## Preparing for the Well Child

The information contained in this section covers "the basics" on caring for a well child. You will learn information that helps you understand your child's temperament (style) and why your child might be crying. You will also learn about nutrition and immunizations (shots). Always consult your child's doctor if your child is younger than 3 months old or you have questions about your child's wellness. Remember, all children are different. You might need special ways to care for your child if your child has special needs.

## Temperament (Style)

### What is temperament?

A child's temperament is his or her inborn "likes and dislikes." It causes the child to respond in certain ways to the world. One child, for example, might become upset and

cry when hearing a loud noise, while another will merely startle to the same noise. Some people call this a child's "style."

## Why is it important to know your child's style?

Because an "easy going" baby will most likely become an "easy going" child and an "easy going" adult, knowing your child's style will give you a sketch of your child's personality for years to come.

### Knowing your child's style will help you:

**Know that your child might be getting sick even before you see the first snuffle.** Can you think of a child who is "easy going?" This child usually likes everything and eats everything, but then, suddenly, they just sit around and refuse to play or eat. This change in style can signal to you that an illness is on the way.

**Have healthy expectations about your child's behavior.** If you know, for example, that your child is "a difficult baby," and finds change stressful, you will expect your child to cry and fuss when he or she is in a new or unpleasant situation. You will understand why your child reacts that way.

**Avoid getting frustrated.** If you know your child's style, you will know your child's likes and dislikes. Knowing your child's style can help you avoid getting frustrated because you know what to expect from your child. Perhaps in some cases, you can just say, "That's just my baby's style."

### WARNING!

**The "difficult baby" can frustrate any parent. It's key for parents of children with this style to accept that style, to find ways to cope with it. Being able to accept and cope with your baby's style will lessen the risk for abuse.**

## What's Your Child's Style?

### The Easy Child

- This child can easily handle change. This child doesn't seem to mind a change in people or places.
- This child is "biologically" regular. This child seems to eat, pee, and poop on a regular schedule and without much fuss.
- This child's intensity level is mostly moderate. This child doesn't need much to entertain or comfort them.

### The Difficult Child

- This child is the reverse of the easy baby. This child is "strong willed."
- This child finds change difficult and is "biologically" irregular. This child seems to eat, drink, sleep, pee, and poop whenever he or she wants to or doesn't want to.

### The "Slow-to-Warm-Up" Child

- This child is shy and is slow to warm up and adapt to change.
- This child usually cries when faced with change. But the intensity is low and you can calm this child.

## Crying

### Crying is communication:

Every child will cry to communicate certain things (e.g. upset and hunger) until the child learns to talk. Generally, language (words you understand) does not start to develop until after age 1. Most children do not speak in sentences that you can understand until they are between 2 and 3 years of age. Babies cry when they need something. Babies learn to trust you when you help them stop crying.

**Critical Point: You can never spoil your child by picking him or her up when he or she cries.**

## The Period of PURPLE Crying

Starting at about two weeks of age, some babies begin crying more often and might be hard to soothe. The crying can last for hours. If your child is not sick and you have tried everything you can think of to soothe your child, it is okay if you can't stop your child from crying. Don't feel guilty and don't get angry with your child. Not being able to soothe an infant does not make you a bad parent.

Some babies are simply going to cry. It will end, and life will return to normal. The letters in PURPLE stand for the common parts of non-stop crying in infants:

P — Peak pattern (crying peaks around 2 months, then lessens)

U — Unpredictable (crying for long periods can come and go for no reason)

R — Resistant to soothing (the baby may keep crying for long periods)

P — Pain-like look on face

L — Long bouts of crying (crying can go on for hours)

E — Evening crying (baby cries more in the afternoon and evening)

**For more information on the Period of PURPLE Crying, visit the Shaken Baby Syndrome website at [www.dontshake.org](http://www.dontshake.org).**

**TIP!** If your baby seems to be in pain, take off all your child's clothes and take a close look at the fingers, toes, and diaper area for redness or irritation. Sometimes a hair can wrap tightly around a finger or toe and cause pain by cutting off blood flow. Call your child's doctor if you don't know why your child is crying. The doctor might need to check your child's eyes to make sure they're not scratched or that your child isn't sick.

## Soothing a crying child

How can you comfort a newborn (birth to 3 months)?

- **Offering pacifier:** If your child is full of milk or formula, offering a bottle can make your baby's tummy hurt. Offering a pacifier can satisfy the sucking reflex.



How can you comfort your baby who is 3 months old or older? As your child gets older, your child will become more coordinated and mobile. Your child will learn to reach and hold things, and will develop his or her own style. Your job will be more of a challenge as you try to figure out what your child's crying means.

To comfort an older child, try to:

- **Change your child's position:** Some children enjoy sitting up while others prefer lying down.
- **Move your child around:** Try a swing, a bouncy seat or, for an older baby with good head control, an exercise seat (a walker without wheels). Go for a walk in the stroller or a ride in the car seat.
- **Distract your child:** Turn a light on and off; show your child a mobile or a mirror, sing, or use music to occupy an older baby if he or she seems bored.

## Nutrition

Breast milk or formula is the ideal food for babies. Milk provides all the calories and nutrients that a baby needs to grow during the first 4-6 months of life. Your child should not get any cereal or other foods for the first few months of life, unless your child's doctor tells you otherwise.

### Breast Milk

#### What are the benefits of breast milk?

##### **When babies are breast-fed:**

- They are better protected against infections. Breast milk has “antibodies” (proteins that fight infections). These antibodies protect babies from certain sicknesses in the first few months of life.
- They might be less likely to develop asthma or allergies.
- The bond between mother and child is enhanced.
- Breast milk costs less than formula.
- Breast milk is always ready! There is no need for “middle of the night” bottle warming.
- Breast-feeding saves families money and helps mothers lose some of the weight they gain during pregnancy. There are many advantages to breast-feeding. It's important for you to encourage mom to breast feed so that everyone benefits.

##### **You can support and assist breast-feeding by:**

- Encouraging the mom to breast-feed.
- Offer to change the baby before or after a feeding, especially during the night.
- Bring mom a glass of water to drink with each feeding.
- If mom is pumping and expressing milk, you can give your baby the bottle.
- Burping your child after a feeding.
- Making meals and grocery shopping.

## Formula

### Are there different kinds of formula?

There are 2 kinds of formula: (1) modified cow's milk and (2) soy.

When moms don't breast-feed, their babies are started on cow's milk formula in the hospital nursery. Your child's doctor might suggest a soy formula if he or she is concerned that your baby does not tolerate cow's milk formula. Formulas come as "ready to feed" liquids or powders. Make sure the formula you use is iron fortified.



### Tips on Bottle Feeding

1. **Never "prop" a bottle.** Babies can get ear infections or swallow too much air if a bottle is propped. Hold your baby when feeding him or her. When you do that, the physical closeness you share builds the daddy-baby bond.
2. **Offer 2–3 ounces at a time.** Babies from birth to 3 months should be fed small amounts more often than an older child. A newborn's stomach can hold about 2–3 ounces, so you should offer no more than 3 ounces of milk at every feeding. New babies eat about every 2–3 hours.
3. **Burp your baby.** Most babies swallow air when feeding. Hold your baby leaning back in your arms and tilt the bottle up. Burp your baby after he or she drinks 2–3 ounces.
4. **Don't put cereal into a bottle.** You should only put cereal in your baby's bottle when your baby's doctor tells you to do so.

### Tips on Preparing Formula for a Bottle

- Check the expiration date.
- Wash off the top of the can.
- Use a clean can opener.
- Mix the formula exactly as directed.
- Store formula in the refrigerator for up to 24 hours.
- Throw away formula your baby does not finish after 1 hour.

## Starting Solid Food

How will you know when your baby is ready to start solid foods? Only when your baby is physically ready to take solid foods. Babies need to be able to:

1. Sit up.
2. Lean forward.
3. Open their mouth when a spoon is presented.
4. Keep food in their mouth.

If your baby pushes food out of his or her mouth, your baby is not ready for solid foods. Babies have a reflex called the “tongue thrust reflex” that tells them to push solid things out of their mouth. This reflex goes away at about 4 months. Most doctors will suggest that you start solid food at 4 to 6 months of age.

### Why shouldn't I give my baby solid food before 4 months of age?

- Babies have “baby stomachs.” They can't handle the kinds of foods older children and adults eat. Formula or breast milk is easy to digest. Some scientists think that babies can get allergies if they eat solid foods too early.
- Babies also have small stomachs. Solid food will quickly fill a baby's stomach.
- Breast milk and formula are “nutritionally complete”—they have all the nutrients your baby needs to grow. Filling a baby's stomach with solid food might keep them from getting the nutrients they need from breast milk or formula.

### Tips on Starting Solid Foods

1. Start with rice cereal. Rice cereal is the easiest to digest. Follow the directions on the box and mix one teaspoon of cereal with breast milk or formula.
2. If your baby does well with cereal after a week, you can try one new item a week.
3. Bland fruits (ones without a lot of taste) like unsweetened applesauce, pears, and bananas are good first foods. You can also add yellow and orange vegetables after you try a few fruits.

### Starting Other Liquids

When can I offer juice? You can start to offer small amounts of juice at 6 months of age. Babies need calories and nutrients from breast milk or formula. As a rule, it is best to offer only one or two ounces of juice a day.

When can I switch from formula or breast milk to regular milk? Start whole milk at 12 months and 2% milk at 2 years of age. Your baby needs the fat that is in whole milk for his or her nervous system to develop.

### **Tips on Foods to Avoid**

1. No honey, eggs, fish, peanut butter, citrus fruits (oranges, grapefruit), or whole milk before age 1.
2. Honey can have the germ that causes “botulism.” Eggs, whole milk, and fish have complex proteins that babies can’t easily digest. Peanuts might cause allergies. Citrus fruits have too much acid for babies.
3. Avoid low-fat or no-fat milk before age 2. Most children need whole milk from age 1 to 2 years, unless your doctor tells you otherwise.
4. Don’t add salt, sugar, or spices to foods.
5. “Low-fat” foods. Children don’t need the “additives” in these foods. Also, children under 2 years of age need fat to help their nerves grow.
6. Juice. Avoid more than 2–4 ounces of juice per day until age 1. Babies and toddlers need the calories from breast milk, formula, and food to grow. Too much juice can cause diarrhea, malnutrition, or low weight in your child.
7. Avoid sodas and chocolate milk. Babies and toddlers do not need the extra sugar and caffeine. It can decay teeth, upset stomachs, or make them hyperactive and hard to put to sleep.

## Part 2 • Providing in the First Year



### Introduction to Providing in the First Year

Being a dad is rewarding and exciting. At times, it will be challenging. The early days of fathering can be tough if you don't know what to do. The information in this section can help you provide for your little one's most important needs and get on the road to being a great dad!

#### 1. Get in the Game Right Away

Your baby is here, so get involved — even if you weren't involved during the pregnancy. Change diapers, give your baby a bath, and go to doctor visits. You should be just as involved in your baby's life as mom. By being involved from birth, you give your baby the best chance of succeeding!

#### 2. Touch, Hold, and Play with Your Baby

There is no better way to bond with your baby than to touch, hold and play with him or her. Don't worry—you won't hurt or drop your child! Even if it's a little uncomfortable at first—it will soon become easy. Support your baby's head by keeping one hand behind the back of the head, and let your baby see your face.

Touch helps babies stay healthy and thrive. Boys who get lots of touch and love from their dads grow up to have a healthy view of fatherhood. Girls who have the same kind of touch and love learn that the most important man in their life loves them no matter what.

#### 3. Respond to Your Baby's Needs

When your baby cries, go to them. This is especially important in the first three months of your baby's life as it helps your baby develop good emotional health. Your child will then learn there are two people they can rely on—mom and dad.

#### 4. Make Time for Your Baby

Before you were a dad, your time was pretty much your own. Not any more. Changing your schedule to provide for your baby's needs might not be easy, but it is important.

Review your typical week. Are there ways that you can make more time for your family? Can you avoid working late by bringing home work for after the baby goes to sleep? Or, can you change your work schedule, telecommute, or get a new shift? Give up one hobby to spend that time with your family.

#### 5. Make Time for Your Marriage

A strong and healthy marriage makes for happier, healthier parents and children. Don't let the changes that come with a new baby drive you and your wife nuts. Remember that mom needs your love and time, too. Discuss the joys and frustrations you feel as new parents. Have a date night once a week, even if its at home after the baby goes to sleep. Children can make your marriage stronger but you have to work at it.

#### 6. Get Some Sleep (Really!)

Sleeping can be a challenge with a newborn, but there are a few ways to help your baby go to sleep so you can, too.

A drive in the car will put almost any baby to sleep. White noise—such as a running vacuum cleaner, radio static, or a ticking clock (sounds like mom's heartbeat)—can also help. Don't over-stimulate your baby during the day and make sure your baby is taking naps and has quiet time all day long. Over-stimulated and over-tired babies have a tougher time going to sleep.

A bedtime routine (such as a bath and reading) can also set a pattern to cue your baby that it is time to sleep.

#### 7. Don't Think a Paycheck Equals Love

Providing for your family is very important, but being a dad means more than just bringing home a paycheck. Don't make the mistake of working all the time. You may look back one day and realize that you spent too much time at work and not enough time with your children. It is okay as a new dad to worry about money. Just remember that your children need you more than they need money.

## 8. Understand that Being a Dad Isn't Always Easy

Being a dad is the best experience you will ever have. Life with children has more meaning, love, and joy. Children are a blessing. But, sometimes, being a dad can be stressful, make you tired, and even make you wonder why you had kids at all!

Don't be surprised if you feel crazy at times—especially right after the birth. Talk with others who have “survived” the experience and talk with your child's mother. Don't feel guilty if you are sad, angry, or frustrated at times. These are all normal feelings.

## 9. Ask for Help

No man is a “natural” at being a dad. It takes work and you will always have more to learn. Ask for help. Ask your baby's doctor how to help you with the basics like feeding and sleeping. Ask friends who are fathers what they have learned. Or, find a Doctor Dad® Workshop or fathers' group in your city to get more support.

## 10. Study

National Fatherhood Initiative has created lots of great resources for you to use as you continue on your journey into fatherhood. Check out [www.fatherhood.org](http://www.fatherhood.org) for a great selection of tools that help fathers of all ages and stages.

## Providing for the Sick Child

The information contained in this section covers “the basics” of caring for a sick child when he or she has a fever, a cold, or vomiting and diarrhea. Always consult your child’s doctor if your child is younger than 3 months old or you have questions about your child’s sickness. Remember that all children are different. You might need special ways to care for your child if your child has special needs

### What is a fever?

- Fever is not a disease.
- Fever can’t harm your child by itself, but it can make your child uncomfortable, and in some cases it can trigger a febrile convulsion (a seizure that occurs with a fever). But you should call your child’s doctor immediately about a fever in babies that are younger than 3 months old and in children with sickle cell or a weakened immune system a fever is:
  - » A rectal (bottom) temperature higher than 100.4 degrees.
  - » An oral (mouth) temperature higher than 99.4 degrees.
  - » Axillary (armpit) higher than 99 degrees.

## Calling the Doctor

### Call right away when your child:

- Is younger than 3 months old and has a rectal temperature higher than 100.4 degrees. Sometimes a fever is the only signal that a baby has a serious infection.
- Always call your child’s doctor if you think your newborn (birth to 3 months) has a fever. Never assume that a fever in this age group is caused by teething.
- Has a fever higher than 104 degrees, no matter how old he or she is.
- Looks or acts very sick.

### Call within 24 hours if:

- Your child has a fever for longer than 24 hours and does not have clear signs of an infection, such as cold symptoms.
- Your child had a fever that went away for 24 hours and returned.
- You have questions or concerns.

## Treating a Fever:

### What should you know about giving acetaminophen (Tylenol®) to your child for a fever?

- Know your child's most recent weight. The amount of Tylenol® your child should have depends on your child's weight.
- You can give doses every 4-6 hours, if your child seems uncomfortable with a fever.
- If your child had shots in the past 24 hours, Tylenol® will relieve pain.
- If your child has or shows sign of seizures related to having a fever; talk to your child's doctor about using Tylenol®.



### Which tools can I use to give my child medicines?

- There are many tools that you can use to give your child medicines. The most helpful one is the "syringe" or "dropper" type. Many medicines taste awful, which means that your infant or toddler will spit them out.
- Hold your child snugly but gently, keeping his or her hands away from the face. An extra pair of hands always helps!
- Place the medicine dropper between the cheek and the tongue and as far back in the mouth as possible without gagging your child.
- Gently squeeze small amounts into the back of the mouth until all the medicine is out of the dropper.

## Home Treatment of Fever:

### What other things can you do to treat a fever at home?

- Keep your child comfortable. Don't over dress or bundle your child.
- Encourage your child to drink fluids, but don't force your child to drink.
- Don't use alcohol baths or rubdowns. Your child's skin can absorb (take in) alcohol, which can poison your child. Alcohol can also lower a temperature too fast. A sudden, extreme temperature change can be dangerous to your child.

## The Common Cold

### Symptoms of the Common Cold

- Watery eyes
- Runny nose and post nasal drip
- Stuffy nose
- Loose cough
- Sore throat

### When to call the doctor about cold symptoms:

- Your child is younger than 3 months old and has other medical conditions (such as prematurity, sickle cell, or asthma).
- Newborns (babies from birth to 3 months) are looked at a little more carefully by your child's doctor.
- Your child has a cold and has a fever. Many colds start with 2-3 days of fever, but you also need to remember to use the guidelines that start on page 18 when thinking about calling your child's doctor.
- Your child is having trouble breathing. Look for "retractions": the skin being pulled in between the ribs when a child is working hard to breath. Sometimes a child's nostrils will also "flare" when he or she has trouble breathing.
- If your child has a cold and has trouble breathing, your child's doctor will want to check your child for an infection in the lungs, such as pneumonia.

- Your child has a cough that lasts more than a week. Although the most common cause for a cough with a cold is a runny nose, a cough that lasts more than a week might be a sign that there is an infection in the lungs or that your child is wheezing.
- Your child has ear pain. If your child can talk, he or she might tell you that his or her ears hurt. Your child's doctor might or might not put your child on an antibiotic. Remember, sicknesses caused by viruses (cold germs) are not cured by antibiotics.
- Your child is very sleepy or cranky. Until your child starts to talk, look for changes in your child's style or usual schedule, especially in newborns (birth to 3 months of age).

The main signs of a cold are a runny nose or a stuffy nose. You can loosen mucus in the nose with salt water nose drops. You can also use a bulb syringe to pull mucus out of the nose.

Don't forget about Vicks® VapoRub®, which you can put on your child's bib or shirt. The menthol vapors loosen mucus and open a stuffy nose.

1. Find a comfortable way to hold your child. If you have an infant, consider swaddling him or her.
2. Squeeze the bulb to let air out of the syringe before placing the tip in your child's nose.
3. Gently place the tip in your child's nose and slowly release the pressure from the bulb. Releasing pressure on the bulb will create suction that will remove mucus.

**Repeat if needed.**

4. Don't forget to wash out the bulb syringe with hot, soapy water after each use.

**What not to do when treating a cold:**

- Do not use a "child size" dose of an adult medicine.
- Do not use left over antibiotics.
- Do not share other people's medicines.

## Germs

**Kinds of Germs: There are 2 “families” of germs: viruses and bacteria.**

### Viruses

Viruses are germs that are not alive. Viruses are like small machines or computer disks that carry information to make you get sick. Once they are in the body, the body starts to fight the infection.

As the body fights infection, it makes fever and mucus. Antibiotics can't kill viruses because viruses aren't alive. You can't kill something that isn't alive. Our bodies use the immune system to get rid of viruses, which can take as long as 10-12 days.

### Bacteria

Bacteria are germs that are alive. You might have heard about common bacteria like streptococcus (strep) and staphylococcus (staph). In general, once bacteria cause an infection, their main symptoms are fever and pain.

Medicines like antibiotics can kill bacteria. It's extremely important that you give your child an antibiotic exactly as your child's doctor tells you to. If you don't (e.g. you stop giving your child the medicine before the number of recommended doses), the bacteria might not be killed, or it might become resistant to antibiotics.

## Preventing Dehydration

### What is “dehydration?”

Dehydration happens when the body doesn’t have enough water to function properly. If water is not replaced after a loss, it can cause decreased activity, weakness, and, in extreme cases, death.

### What can cause dehydration?

- **Diarrhea:** Diarrhea is a sudden increase in the number of bowel movements (BMs). It usually causes “runny” or “watery” BMs.
- **Vomiting:** Vomiting is a forceful emptying of the stomach through the mouth. This is different from “spitting up,” which is the release (regurgitation) of small amounts of formula or food from the mouth.
- **Improperly mixing formula:** Concentrated formulas must have the correct amount of water added to them. Adding too little water might cause dehydration over time.

### How can I tell if my child is becoming dehydrated?

- The best way to tell if your child is becoming dehydrated is to count diapers!
- The earliest signs of dehydration occur when your child urinates (“wets” or “pees”) less often than normal.

### Call your child’s doctor when:

- Your child wets less than 6 diapers in a 24-hour period.
- Hasn’t had a wet diaper in the past 6 hours.
- Your child isn’t eating.
- Your child is fussy or can’t be comforted.

# Providing for the Injured Child

## Introduction to the Injured Child

The information in this section covers “the basics” of caring for an injured child when he or she is choking or has been burned, cut, poisoned, or had a head injury. Always talk with your child’s doctor if your child is younger than 3 months old or you have questions about your child’s injury. Remember that all children are different. If your child has special needs, you might need to create special ways to care for your child.

## What is a burn?

A burn is an injury to the skin caused by heat from fire, hot liquids, chemicals, the sun, or electricity. Hot liquids are the most common cause of burns in children.

Hot foods, usually found in the kitchen, are very dangerous.

### Home Treatment:

1. If your child suffers a burn, run cool water over the burned area for at least 15 minutes. Skin damage can continue even after you remove the cause of the burn. Apply cool water to stop the damage.
2. **TIP: If the burn blisters, cover it with a non-stick gauze type dressing. Use a bowl of cool water to treat a burn.**

### WARNING!

- Do not use butter, grease, or ice to treat a burn.
- Ice can further damage the skin; freezing temperatures can also cause burns.
- Butter, ointments, or any grease/petroleum-based products can hold in the heat from the burn and continue to damage the skin.

## How long does it take a burn to heal?

A burn should heal in about 7–10 days.

## When should I call the doctor for my child's burn?

- Call a doctor if a burn looks infected. Look for redness around the burn that gets worse or fluid oozing from the burn that smells bad.

## Burns that need medical attention right away:

- Any electrical burn. It is hard to know how bad these burns are until a doctor looks at them.
- Burns on the hands, feet, mouth, face, or genitals. Swelling of burns in these areas can cause more injury.
- Burns that ooze pus or have a bad smell. These reactions are signs of a possible infection.
- Redness or swelling that gets worse for 3–5 days after the initial burn. These reactions are also signs of a possible infection.

## Sunburns

### What should I know about sunburns?

Everyone is at risk for skin damage from the sun, no matter his or her skin color!

Even dark-skinned people are at risk of skin damage from the sun. Children are at the most risk for sun damage because they spend a lot more time outdoors than adults: **80 percent of a person's sun exposure comes within the first 20 years of life.** Also, children's skin is not as thick as adults, so it raises their risk of sun damage.

### Skin protection for children older than 6 months:

- Use sunscreen with an SPF (sun protection factor) of at least 30, and apply it every 2 hours.
- Keep your child out of the sun between 10 a.m. and 3:00 p.m.—this is when the sun is most intense.

- Avoid a false sense of safety from using sunscreen on your child.
- Limit your child's exposure to the sun.
- Use hats and umbrellas to protect your child from direct sunlight.

### How can I treat my child's sunburns?

- Give Tylenol® to relieve the pain. (Check the package for appropriate dosage for your child's age and weight.)
- Wet compresses or cool baths with 2 ounces of baking soda added to the water can also give some extra pain relief.
- Get your child to drink plenty of fluids and make sure your child stays out of the sun. If a blister breaks, remove the dead skin with fine medical scissors. Apply an antibacterial ointment twice a day for three days. If your child has a fever or acts sick, call your doctor.

## Drowning

### Who is at highest risk for drowning?

Children ages 1–4 and 15–20 are the two groups that are at highest risk. Children in these age groups tend to have “no fear.” Toddlers are too young to understand how dangerous water can be. Teens think that accidents can't happen to them.

### How fast can drowning happen?

It only takes a few minutes for a child or adult to drown. Sadly, most toddlers were seen less than 5 minutes before they drowned.

### Where do most young children drown?

Swimming pools are most dangerous, but it also depends on how old your child is.

- Children younger than 1 year old drown in 5 gallon buckets, bathtubs, and toilets.
- Babies can drown in less than an inch of water left in the bathtub.
- Children ages 1–4 years are at high risk of drowning in a swimming pool.

## Cuts, Scrapes, and Bleeding

You can expect your child to get cuts and scrapes the minute he or she starts to crawl and walk. Most injuries will be minor, but you will need to know basic first aid. The best treatment is to avoid having to treat at all! The key is to prevent injury in the first place.



- Take a fresh look at your home before your child becomes mobile.
- Remove all items from your home that are breakable or have sharp edges.

### Treating Minor Cuts and Scrapes

- Gently clean a minor cut or scrape with soap and water. Don't use iodine, Betadine®, or Mercurochrome because they destroy skin and cause more harm than good.
- Apply antibiotic ointment and cover the cut or scrape with a non-stick bandage.

### When do I need to get medical attention for my child's cut or scrape?

Is the cut or scrape bleeding? If the bleeding is slow and steady, and it slows with direct pressure, it's probably minor. But if the blood is pulsing (coming in spurts) from a cut or scrape, it's probably coming from an artery. This type of wound needs medical attention right away! **Call 911 or take your child to the nearest emergency room.**

You might also be able to look at a cut or scrape and tell whether your child needs stitches. If the wound is wide or "gaping," it probably needs stitches.

- **Apply pressure to the groin or armpit:** Use direct pressure on a wound to control bleeding, or apply pressure in the groin or the armpit if blood pulsates from a wound.

Applying pressure in the groin or armpit helps slow bleeding from an artery.

## Head Injuries

### What should I know about head injuries?

- 600,000 children go to emergency rooms each year for head injuries.
- Most head injuries are caused by falls.
- Most of these falls are preventable.
- The younger the child, the higher the chance of a serious injury.
- Headache, vomiting, or blacking out might not be good signs for telling whether a child has a serious head injury.

When should I be concerned about the possibility of a serious injury? When thinking about whether your child might have a head injury after a fall, you need to think about 3 things:

1. The height from which your child fell.
2. The type of surface fallen onto.
3. The age of your child.

### Seek medical attention right away if your child falls and is:

- Younger than 1 year old.
- Not acting him or herself. (A change in your child's style.)
- Unconscious (passed out) after a fall.

### When to call the doctor:

- The fall involves your child hitting his or her head on a hard surface.
- The fall creates a "hematoma" (goose egg). This could mean that your child has a skull fracture, especially if it is behind one of the ears.
- Your child develops bruises around the eyes or ears 24 hours after the fall.
- You have any questions or concerns after your child falls.

### What can I do to prevent injuries from falls?

- Don't leave your child alone where he or she can fall—not even in a high chair.

### **WARNING! Serious injury can occur from:**

- A fall onto any surface from a height of 3 feet or higher.
- A fall onto a hard surface from less than 3 feet.
- A hard surface is: concrete, wood, solid ground, and most surfaces that don't offer a cushion (such as tile floors).
- Keep a hand on your child at all times, especially when changing diapers.
- If your child can pull up to stand, insure safety around cribs.
- If your child crawls or walks, secure stairs with gates at the top and bottom of the stairs.
- Never use walkers that have wheels.
- Never put baby carriers on counter tops, tables, or car roofs.

## Poisoning

Children are most often poisoned by common household items. The most common items that children get poisoned with are vitamins, cosmetics (such as lipstick and perfume), and cleaning products.

Play “Daddy Detective!” Look a little closer! Your child won't tell you if he or she has gotten into something dangerous. Look for clues that suggest that your child might have gotten into something poisonous.

### **You should suspect that your child has been poisoned if:**

- You find an open or empty container or medicine bottle and you don't know why it's open or empty.
- Your child acts strangely or acts outside of his or her usual style.
- Your child has a stain around his or mouth or on clothes and you don't know how it got there.
- Your child drools or has burns on the lips or inside of the mouth.
- Your child says he or she has a stomach ache, but there isn't a fever.

## What should I do if I think my child has been poisoned? First, don't force your child to vomit. Then take these steps:

1. Take the substance you think poisoned your child away from him or her.
2. Ensure that your child is breathing and that his or her airway is clear.
3. Make sure that you have the container that had the substance to let poison control know the substance you think poisoned your child.
4. Call poison control at 1-800-222-1222. (Place the number where you get at it easily, such as on your refrigerator or in your mobile device.)
5. Do what poison control tells you to do. If they tell you to go to the emergency room, take the container with you.

## Poison Prevention Tips

As your child starts to get around and starts getting into things, look for things that can poison your child in your home, the home of friends or relatives, even at the child care center. Use the tips below to help make your child's world safer.

Remember, even when a container is marked "child safe," it doesn't mean that your child can't get into it.

- Keep all medicines, including vitamins, safely locked up, high, and out of sight.
- Never call medicine "candy."
- Check with poison control about "safe" houseplants.
- Don't smoke around children and keep tobacco out of reach.
- Never store cleaning products in food containers.

## Lead poisoning

Lead poisoning is one of the most preventable children's health problems in the United States. High lead levels in the blood can cause a number of symptoms in children, which include: headaches, delayed growth, hearing problems, behavioral problems, difficulty learning, and nervous system damage. Most children, however, don't have symptoms. A blood test screens for lead poisoning.

## How do children become exposed to lead?

Lead exposure occurs when children swallow or breathe it in. Lead can be in chips of peeling paint or in paint dust that comes from windows and doors opening and closing.

As your child goes through a stage when he or she puts everything in his or her mouth, your child is at risk for swallowing paint dust or chips that contain lead.

Your child can also absorb lead through the skin. If your child plays in dirt around older homes, he or she can be exposed.

### What are the sources of lead that I should be most worried about?

- Paint dust or chips around windows, doors, and soil in homes built before 1978. Most homes built after 1978 won't have lead in the paint because the government banned lead in paint.
- Lead paint on toys from foreign countries.
- Lead from fishing weights.
- Lead glazing on pottery.
- Lead from auto body repair work. (If dad does auto body repair, lead can be on his clothes when he comes home.)
- Lead from water pipes in older homes.
- Make sure that your child's diet has enough calcium and iron. These minerals make it harder for the body to absorb lead.
- Call the National Safety Council's Lead Information Center at 1-800-424-LEAD for other ways to reduce the risk.

## Choking

### Why are children more likely to choke than adults?

- Children are more likely to run, talk, or play with food in their mouths.
- Toddlers develop their front teeth, the cutting teeth, before they develop the back teeth, which grind food. So they can bite off small pieces of hard food but cannot chew them into a paste to make them safe.
- All children go through an "oral stage" when they put almost anything in their mouths.

### What is a choking emergency?

Choking emergencies are when a child can't breathe or turns blue. The child's airway is probably blocked.

## What can I do to prevent my child from choking?

Choking is the most preventable cause of death in children under 1 year of age. Children under 1 are at the greatest risk for choking. You can help prevent choking by:

- Being trained in baby and child CPR.
- Knowing the Heimlich maneuver.
- Knowing that the most commonly choked on items are round foods.

## What can I do to help a child who is choking? For babies (younger than 1 year):

1. Place your baby face down on your arm.
2. Give 5 back blows between your baby's shoulder blades using the heel of your hand.
3. Turn your baby on his or her back and give five upwards stomach thrusts using two fingers.
4. If you are alone, take your baby with you to the phone and call 911.
5. Repeat steps 1-3 until your baby coughs or starts to cry.

## For children older than 1 year:

1. 5 quick abdominal thrusts (Heimlich).
2. Call 911 and repeat an abdominal thrust until your child coughs or can speak.
3. Remove the object from your child's mouth only if you see it.

## First Aid Kits

Be prepared! A well-stocked first aid kit is a handy thing to have around before you need it. Keep the items in a box, safely stored out of reach from children. You can make smaller kits to keep in the car or to take on a trip. You can pack these items in a tackle box or any container. Even a large Ziploc® bag will do!

Most babies and toddlers will only sustain minor injuries. You can usually take care of these “ouchies and boo boos” with common sense, basic medical information, and the items suggested in the first aid kit.



You can start a “Baby Basic” kit. Items in a basic kit are used when your child is sick. Infants who are not crawling or walking won’t be getting cuts and scrapes, so you will not need other items right away. You can add to your child’s kit as he or she grows.

### **Baby Basic kit (Birth to 6 months)**

- Digital thermometer
- Vaseline® as lubricant for thermometer
- Bulb syringe nasal aspirator
- Saline nose drops
- Medicine dispenser—dropper type
- Liquid acetaminophen (Tylenol®)

### **First aid kit for older children**

- Band-Aids
- Antibiotic ointment
- Baby wipe packet
- Gauze roll; 2x2 gauze pads; 4x4 gauze pads
- Q-tips® to apply ointment
- Reusable combination hot and cold pack
- A list of important phone numbers
- Children’s Tylenol®

## Part 3 • Practicing in the First Year



### Introduction to Practicing in the First Year

Welcome to the first year of your child's life! Review the charts in this guide to learn about the physical, mental, emotional, and social changes your child will go through during her or his first year of life. This section will help you know what to expect and not to expect in terms of her or his growth. We've also included tips to help you help your child grow. Share the charts with your child's mother so she will know what to expect as well.

#### Keep in mind a word of caution about these charts.

1. They can worry some dads. Don't let them scare you. There is a lot to know about children's growth without looking to the charts for help. Even pediatricians (doctors for children) keep these kinds of charts to refer to in their work.
2. Don't use them like report cards. Don't compare your child to other children or siblings. The charts are only road maps to guide you on what most children should be able to do at a certain age. Children grow at different rates. The main thing is that your child is able to do these things at some point even if at a later age.

### Months 1 and 2: Things to Know/Ways To Grow

#### Physical Growth

- Gains about 1/4 to 1/2 pound of weight each week for the first 6 months.
- Height gain of about one inch each month.
- Breathes mostly through nose.
- Not able to hold head up in first month. Can turn head from side to side when lying on back. Lifts head by second month.

- Body will be limp at knees and hips when held standing by parent.
- When parent supports back, will round back by second month. Will also try to hold head up but will still bob forward.
- In first month will keep hands closed tightly. By second month will often open hands and grasp.

### Mental and Emotional Growth

- Watches object when held at a distance of 8–15 inches.
- By two months will follow toy from side to side.
- Likes when people respond with their face (e.g. smile back at them).
- Will quiet when hears parents' voice by two months. Knows familiar voices.
- Cries during first month to show when hungry, wet, or uncomfortable.

### Social Growth

- Closely watches parents' faces when they play with him/her.
- By second month can mimic parents' faces (e.g. smiling and sticking out tongue).

### Ways To Grow

1. Hold, cuddle, rock, talk, sing, hug, and kiss your baby often to make him or her feel safe.
2. Try to console and comfort your baby even though your baby may not always calm down.
3. If you can't spend a lot of time with your baby, play, talk, and sing during his alert stages (dressing, bathing, feeding, walking, driving) because it is more fun for you both.
4. Create routines and habits when you wash, feed, and put your baby to bed. Your baby will learn to rely on you and sleep better at night.
5. Use toys that are right for your baby's age.
6. Talk with your baby's doctor if you have any questions about how your baby is growing. Don't be afraid to talk about how you are doing as a dad.

## Months 3 and 4: Things to Know/Ways To Grow

### Physical Growth

- More control of movement in neck, arms, legs, and chest.
- Soft spot on top of head still open. (Careful!)
- Drooling begins.
- Holds head straight up more often.
- Sits up straight if propped up.
- Raises head and chest up. Bears weight on forearms.
- Briefly supports some weight on legs if held up.
- Inspects and plays with own hands.
- Grasps and holds a rattle.
- Brings objects to mouth. (Careful!)
- Clutches at blankets or clothes.

### Mental and Emotional Growth

- Locates sound by turning head and looking in same direction.
- Starts hand-eye coordination.
- Starts to cry less often. Cause of crying is easier to figure out.
- "Talks" a great deal when spoken to.
- Laughs, squeals, babbles, chuckles, and coos to show pleasure.

### Social Growth

- Social smile begins to appear. Enjoy!
- Shows lots of interest in surroundings.
- Knows familiar faces and objects and shows pleasure.
- Seeks attention by making sounds, moving, and fussing. Stops crying when a familiar face enters the room.
- Begins to show memory of routines.
- Doesn't like too much stimulation or excitement.

## Ways To Grow

1. Hold, cuddle, rock, talk, sing, kiss, and hug your baby often to make him/her feel safe.
2. Talk and sing to your baby to help with making sounds. Repeat the sounds your baby “says” to you.
3. Read and play simple games with your baby.
4. Help your baby to console him or herself. Give your baby the same comfort object at bedtime or in new places. Your baby will choose one (blanket, stuffed animal, etc.) at some point. This makes your baby more independent in the long run.
5. Create a bedtime routine. Help your baby to console him/herself by putting him/her to bed awake after you help your baby quiet down.
6. Use toys that are right for your baby’s age.

## Months 5 and 6: Things to Know/Ways To Grow

### Physical Growth

- Birth weight has doubled.
- Growth rate slows.
- May only gain 3 to 5 ounces and grow 1/2 inch each month for the next 6 months.
- Brain tissue growing fast, but still fragile. Don’t shake or play rough with your child.
- Gets lower center teeth.
- Able to sit for a longer time when back is well supported.
- Bears most of weight when held (briefly) standing by parent.
- Rolls from stomach to back. (Careful!)
- Puts feet to mouth.
- Sits in a high chair with back straight.
- Grasps objects on own.
- Takes objects straight to mouth.
- Holds bottle with both hands (briefly).

## Mental and Emotional Growth

- Looks for a dropped object. May start a game.
- Looks for a long time at an object.
- Turns head to side and then look up or down.
- Squeals and coos in delight or excitement.

## Social Growth

- Smiles at self in mirror.
- Pats bottle or breast with both hands.
- Starts more play.
- Holds up both arms to be picked up.
- Makes “upset” sounds when a familiar object or person is taken away /leaves.
- Mimics what he or she hears (cough, tongue noises, etc.).
- Changes emotions often.

## Ways To Grow

1. Help your baby to talk by copying sounds she/he enjoys making.
2. Read to your baby and play music (of all kinds).
3. Play social games (patty cake, peek-a-boo, hide and seek with people/objects).
4. Use toys that are right for your baby’s age.
5. Set limits on behavior (throwing) at this age using distraction, control of surroundings (e.g. lights not too bright and no loud noises), structure, and routine. Too early to use discipline.
6. Keep up bathing, feeding, and bedtime routines and other habits to keep your baby from getting tired and waking up at night.
7. Help your baby learn to console him/herself by putting your baby to bed awake.

## Months 7 and 8: Things to Know/Ways To Grow

### Physical Growth

- Gets upper center teeth.
- Shows a pattern in peeing and pooping.
- Sits leaning forward on both hands.
- Bears full weight on feet when standing and bounces.
- Moves objects from one hand to the other.
- Bangs objects together.
- Rakes with fingers at small objects.
- Begins to grasp small objects with fingers. (Careful! Can choke on small objects put in mouth.)
- Lets go of object at will (or not).
- Reaches for toys out of reach.

### Mental and Emotional Growth

- Responds to own name.
- Turns head toward sounds with a smile or frown. Looks at the people or things that make sounds.
- Starts to like or dislike foods with certain tastes.
- Makes vowel sounds and what sounds like words (baba, dada, kiki) but does not know what they mean.

### Social Growth

- Is aware of adults who are not his/her parents. More aware of and might have a fear of strangers.
- Mimics simple acts and noises.
- Coughs or snorts to draw attention to self.
- Keeps lips closed to show dislike of some foods.
- Might bite to show excitement or aggression.
- Looks briefly for toys that go out of sight.
- Starts response to word "no."

## Ways To Grow

1. Help your baby to talk by talking to him/ her and using his/her new sounds.
2. Increase your baby's social circle and involve your baby in your social things. Don't let too many strangers handle your baby.
3. Read and sing to your baby and play music (of all kinds).
4. Play games (patty cake, peek-a-boo, tickle bee, etc.).
5. Use toys that are right for your baby's age.
6. Keep small objects out of reach because your baby can choke on them.
7. To set limits for your baby, use distraction, stimulus control, structure, and routine.
8. Limit the number of rules and always enforce them.
9. Maintain the bedtime routine. Help your baby learn to console him/herself by putting him/her to bed awake.

## Months 9 and 10: Things to Know/Ways To Grow

### Physical Growth

- More teeth come in and might cause pain.
- Raises head while lying down or when sitting.
- Starts to crawl. Might crawl backward at first. Will pull self forward. (Careful!)
- Pushes up from lying to sitting on own.
- Sits on floor for longer amounts of time.
- Pulls up and stands holding onto furniture.
- Uses thumb and index finger to grasp small objects.
- Might start to show whether left- or right-handed.

### Mental and Emotional Growth

- Better able to judge distance (as between objects and people) but not height (as in how tall something is or how far from a chair to the ground).
- Turns head toward sound.
- Responds to simple commands.
- Says "dada" and "mama" and starts to know what those words mean.

- Mimics real speech.
- Speaks gibberish. Sounds like a sentence but isn't yet.
- May fear going to bed or being left alone.

### Social Growth

- Parents important for play and comfort.
- Wants to please parents a lot.
- Puts arm in front of face to avoid being washed.
- Mimics looks on people's faces (frowns, smiles, etc.).
- Likes attention. Repeats actions or pulls at clothes for attention.
- Cries when scolded or scared.
- Starts to show independence in dressing, feeding, and testing parents.

### Ways To Grow

1. Your baby is in motion so baby proof your home to keep your baby from harm.
2. Provide an area where your baby can explore and practice new skills.
3. Talk with your baby and respond to his/her vocal efforts.
4. Read to and sing to your baby and play music (of all kinds).
5. Play social games (patty cake, peek-a-boo, etc.).
6. Use toys that are right for your baby's age.
7. To set limits on aggression and discipline, use distraction, stimulus control, structure, and routine.
8. Limit the number of rules and always enforce them.
9. Maintain a bedtime routine.

## Months 11 and 12: Things to Know/Ways To Grow

### Physical Growth

- More teeth come in.
- Birth weight has about tripled and birth height has doubled.
- Soft spot on head is almost closed.
- Crawls well.
- Walks holding onto furniture or your hand.
- Can sit down from standing.
- When sitting, turns to reach backward to pick up an object.
- Holds a crayon.
- Explores objects more closely. (Still uses mouth—careful!)
- Drops objects into a box, bowl, cup, etc.
- Can turn pages in a book often many at a time.

### Mental and Emotional Growth

- Can follow objects that move fast.
- Knows meaning of hundreds of words even though may only speak two or three words.
- Knows objects by name.
- Knows simple commands.

### Social Growth

- Feels joy and self-esteem when masters a task.
- May get frustrated or angry when kept from doing something.
- Shows emotions of all kinds.
- Fears strange places or settings.
- May further develop habits with comfort objects like a blanket.

## Ways To Grow

1. Praise your baby for doing good and learning new skills and knowledge.
2. Help your baby to talk by reading books, singing, and talking about what you do and see. Use books with stiff pages (like cardboard) that your baby can turn by him/herself.
3. Help your baby to follow simple commands by playing a game where he/she points to the right body part when you say "Where is your eye? Where is your nose?" etc.
4. Help your baby to safely explore and take risks.
5. Allow your baby to play by himself/herself for a short time while you watch. But never leave your child out of your sight.
6. To set limits, use distraction and gentle restraint. Take objects away and use time out if needed.
7. Limit number of rules and use structure. Head off trouble before it starts to prevent conflict.
8. Maintain a bedtime routine to help your baby sleep through the night.
9. Your baby probably is not ready to potty train. Feel free to talk with your baby's doctor about when to start.
10. Limit the amount of TV your baby watches, even "educational TV." It is not nearly as good as time spent with you.

## Conclusion

Being a dad is a great thing when you know what being a dad is all about and are equipped with the skills to better feel prepared and provide as a parent. Remember, being a dad takes practice. It's critical that you know what to do as well as what options you have. You can be a great dad by being involved, responsible, and committed to your child. You're well on your way by finishing this eguide.

## Want More Resources on the First Year?

[NFI's Countdown to Growing Up™ Growth and Development Tracking Tool](#)

[More free resources on parenting from NFI](#)

### [National Parent Helpline®](#)

If you have a challenging parenting issue with your child or with the mother of your child that you can't handle, call the National Parent Helpline® at 1-855-4A PARENT (1-855-427-2736) or visit [www.nationalparenthelpline.org](http://www.nationalparenthelpline.org). The hotline is operated by Parents Anonymous®. You can talk with trained “Advocates” who can help you to become a better parent.

[Tips from ParentFuther®](#)

[Tips from Psychology Today](#)

[Parents.com/Baby](http://Parents.com/Baby)

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## About National Fatherhood Initiative®

National Fatherhood Initiative (NFI) helps dads be the best dads they can by connecting fathers to their children, heart to heart. Our mission is to increase the well-being of children by increasing the proportion of children growing up with involved, responsible, committed fathers.

### To accomplish our mission, we use a “3-E Strategy”:

#### 1. Educating and Inspiring

We educate the nation, especially fathers, about how vital a dad’s role is. There are three key tools we use:

- **Traditional Media:** We have appeared in TV, radio, and print media, including The Today Show, Fox News, The New York Times, The Washington Post, Parenting Magazine, and CNN.
- **Research:** We produce a wide variety of research on the effects of father absence and the benefits of father involvement. This research is contained in [Father Facts 6](#), the largest summary of fatherhood research available.
- **New Media:** through our [website](#) and our [blog](#), we are the go-to resource for fatherhood and families

#### 2. Equipping Organizations and Fathers

By working with local, state and national organizations across the country, we reach fathers at their points of need with skill-building resources to help them be the best dads that they can be. Our fatherhood resources are used by a wide variety of non-profit and for-profit organizations in all 50 states in the following key sectors:

- **Community-Based:** organizations that are the backbone of our local and state communities, including YMCA’s, schools, Head Starts, family resource centers, and more.
- **Military:** all branches of our nation’s military are using our resources, globally.
- **Corrections:** our programming is used in pre-release centers, long-stay facilities, youth programs, and prison ministries in all 50 states

We also equip fathers directly through a variety of programs and initiatives including:

- **Double Duty Dad®**: our mentoring program [encourages experienced dads to mentor fatherless children or less-experienced fathers](#).
- **FatherSOURCE™**: our Fatherhood Resource Center is the online hub of NFI's equipping efforts at [www.fatherSource.org](http://www.fatherSource.org).

### 3. Engaging Culture

We partner with a variety of companies and organizations to raise awareness, create unique and groundbreaking programs, and reach as many fathers and families as possible.

We've partnered with hundreds of high-profile organizations, companies, associations, and entertainment media including: FranklinCovey, Disney, National PTA, NBA, NFL, Lockheed Martin, Boeing, FedEx, National Head Start Association, YMCA, Universal, Sony, Twentieth Century Fox, and others.

You can help us with our important work by [donating today](#).

## Contact National Fatherhood Initiative®

Web: [www.fatherhood.org](http://www.fatherhood.org)

Email: [info@fatherhood.org](mailto:info@fatherhood.org)

Phone: (301) 948-0599



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