

Health of Parents and Children in North-Rhine Westphalia

Keep healthy through early diagnosis,
health promotion and prevention

Das Gesundheitsprojekt
Mit Migranten
für Migranten



A guide for migrants in North-Rhine Westphalia
Available in 15 languages



Impressum

Gesundheit von Eltern und Kindern in Nordrhein-Westfalen:
Gesundheit erhalten durch Früherkennung, Förderung und Vorsorge
Ein Leitfaden für Zuwanderinnen und Zuwanderer in Nordrhein-Westfalen

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Lektorat und Satz: Bernd Neubauer, Waake bei Göttingen
Übersetzung: Dolmetscherdienst – Ethno-Medizinisches Zentrum e.V.
Gestaltung: eindruck (Gestaltung und Werbung), Hannover
Titel: EMZ. Bildquellen Seite 9, 10, 13, 15, 17, 18, 19, 21, 28, 33,
34, 36, 37 © Fotolia.com, Seite 24 © Pixelio.de

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Stand: Juni 2009

Foreword

Dear readers,
dear parents,

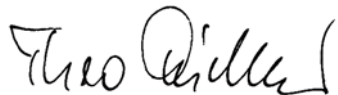
The health and behaviour of parents have a great influence on the development of a child. This applies for the pregnancy and the birth, but also for growing up. Only those who are well informed can take advantage of the varied services provided by our health system. With this guide you receive important information about the possibilities offered to you by the German health service, the checkups and screening tests that are available for early diagnosis of illness, and also about what you yourself can do for your health and that of your child.

With the health project, "With migrants for migrants – intercultural health mentors in North-Rhine Westphalia", health promotion takes account of different cultures and languages. Together with our many partners, we take very seriously our commitment to provide all people in North-Rhine Westphalia with access to health sector services.

We trust that the intercultural health project and this guide will help to ensure that you and your children lead a healthy life.



Karl-Josef Laumann
Minister of Labour, Health and
Social Affairs of the State of
North-Rhine Westphalia



Theo Giehler
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Introduction

Dear parents-to-be, dear parents,

The German health service offers very good conditions to ensure that your child is born healthy and remains healthy. There are hospitals with modern maternity wards. Gynaecologists and midwives accompany you through the pregnancy and the birth. Paediatricians support you in the following years with advice and help. Vaccinations protect against infectious diseases, which can also be treated with medicines and drugs.

That is all very helpful. Yet the services of our health system alone are insufficient to protect children against illness. The health of a child also depends on the behaviour of its parents. During pregnancy, the expectant mother, in particular, bears a great responsibility. Whether a woman smokes, drinks alcohol or eats healthy food – it all has an influence on the health of the child. There are things that parents should do for the well-being of their baby and themselves, and risks that they should avoid. This requires that they inform themselves about these matters in advance.

This brochure provides you with the information you need, so that you will know what you can do for the health of your child during the pregnancy and in the early months of its life. You get tips for a healthy pregnancy, advice on what to eat, information on a healthy sleeping environment as well as on those things that are good for your baby in day-to-day life. In addition, you will find a review of medical checkups that parents and children can and should make use of during this period.

Each section concludes with a summary of the most important information and advice on a particular topic. At the end of the brochure you will find a list of addresses of the most important organizations and institutions in North-Rhine Westphalia that provide individual support concerning the "Health of Parents and Children". This list, however, makes no claim to completeness, but rather draws the attention of the reader to the range of services and provides initial orientation.

1. Healthy before pregnancy

Health services for parents and children

In Germany there is a wide range of structures to support the health care of parents and children.

Couples can inform themselves about family planning at advice centres; for example, at local health authorities or charitable institutions.

In the case of medical questions and problems, specialists should be consulted. Medical checkups for women before, during and after pregnancy are conducted by gynaecologists. Antenatal classes provide useful information for parents-to-be. Midwives play an important role with the mother before, during and after the birth. The birth itself mostly takes place in hospitals, but also in maternity (or birthing) clinics. Births at home are rare. In the case of mental problems during or after pregnancy, women can seek the help of psychotherapists.

In order to relieve and protect women before and after the birth of a child, the Maternity Protection Act in Germany lays down that expectant mothers may not work during the six weeks before and the eight weeks after a birth.

Following the birth, parents can choose from an extensive range of courses (for example, regeneration courses for mothers and baby massage).

A paediatrician should be visited when the child has health problems, or for regular "U" checkups.

In some cases services are free of charge (for example, advice at the local health authority); in others, costs are covered by the health insurance body (for example, medical checkups and urgent medical treatment).

Diet

Couples who wish to have a child can contribute to fulfilment of their wish and at the same time increase the chance of giving birth to a healthy child. A varied diet with a lot of fruit and vegetables plays an important role. This way, women

who weigh a few pounds too much or too little can approach their ideal weight and thus increase their chance of becoming pregnant. Coffee, on the other hand, lowers fertility; so do not drink more than three cups a day.

Review of health insurance services in the case of pregnancy and motherhood

The health insurance bodies offer medical checkups for mother and child already at the beginning of a pregnancy. They also pay the costs of care by the contracted doctor and the midwife, expenditure on necessary medicines, dressing material and medicinal remedies as well as the contracted costs of the stay in hospital (without a patient's contribution) when admission is for delivery. If, due to pregnancy or delivery, an insured woman is unable to run her household, the health insurance bodies will under certain circumstances cover the reasonable costs of a home help.

In addition, female employees and women of equal status (women who work at home, and women who have lost their jobs during pregnancy or maternity leave) receive maternity allowance equivalent to their average net income in the three months prior to commencement of maternity leave. Statutory health insurance bodies pay up to 13 euros per day; amounts in excess of 13 euros are paid in the form of an allowance by the respective employer. Certain other members of health insurance schemes receive maternity allowance at the level of sickness benefit, when this is included in their insurance cover. Maternity allowance is paid for six weeks before and eight weeks after delivery; with multiple and premature births it is paid for twelve weeks following the birth of the child/children, and in the case of premature birth also for the period by which maternity leave has been reduced prior to delivery. Maternity allowance is a particular benefit of statutory health insurance. Private health insurance does not offer maternity allowance.

Already at this stage you should consume sufficient folic acid. Folic acid is contained, for example, in wholemeal products, vegetables (among others, in spinach, broccoli, carrots, asparagus, Brussels sprouts and tomatoes) and nuts.

This vitamin is important for the development of the cells, organs and nervous system of the unborn child. Research has shown that a sufficient supply of folic acid at the time of conception reduces the risk of malformation (such as spina bifida).

Doctors recommend that folic acid tablets (0.4 mg daily) be taken already before pregnancy, since the folic acid content of food, as a rule, is insufficient to cover a person's daily requirement. The tablets can be obtained without a prescription in pharmacies and stores (for example, in a *Drogeriemarkt*).

Health check

Necessary dental treatment should, where possible, be carried out before pregnancy. Hormonal change during pregnancy leads to a loosening of the connective tissue with swelling of the gums. As a result, bacteria can advance more easily and cause inflammation. Many women are not aware that the health of their teeth is also very important for the health of their baby. Dental research has proven that there is a connection between periodontal (gum) disease and an increased risk of premature birth or newborn babies of below average weight. The risk is almost eight times greater for women with inflammation of the gums than for women with healthy teeth and gums.

The NRW state project "Health of Mother and Child"

Within the scope of the NRW state project "Health of Mother and Child", information has been published in German and Turkish under the title "Cigarettes and alcohol – not with us!" This can be downloaded as a pdf document from the Website of the State Institute for Health and Work (click on Mutter und Kind, Materialien): www.praeventionskonzept.nrw.de.

Women who wish to have children should check and, where necessary, update their vaccination record, if necessary after seeking their doctor's advice. Adequate immunization against measles, mumps, chickenpox, whooping cough and, above all, rubella (German measles) is particularly important. A doctor can check, for example, whether a woman has sufficient antibodies against rubella. Should this prove not to be the case (as with around 15 per cent of women), vaccination should be carried out without fail before pregnancy. In the case of infection with rubella during the first three months of pregnancy, the risk is very high that the child will be born with a mental handicap, blind or deaf. Vaccination against rubella cannot be carried out during pregnancy.

Women under 25 years of age who are insured with statutory health insurance bodies are offered an annual test by a gynaecologist for Chlamydia, which are sexually transmitted and, if untreated, can result in diseases of the womb and fallopian tubes. The women affected can often no longer become pregnant in a natural manner.

Drugs, alcohol and smoking

If a woman regularly takes drugs and medicines she should seek advice from her doctor. Some drugs can have a negative effect on fertility; others damage an unborn child during pregnancy. Almost all risky drugs can be replaced by drugs that are suitable for pregnant women and breastfeeding mothers.

Smoking reduces fertility – in both men and women. For that reason, the best thing is for couples to decide on a smoke-free life before pregnancy.

Alcohol is also harmful. Women who seriously fear that they will not be able to do without alcoholic drinks during pregnancy should visit an addiction advice centre (addresses in Chapter 4 of the brochure). By the way, it is also bad when the father drinks a lot of alcohol, for alcohol reduces a man's sperm density. There is evidence that regular consumption of alcohol increases the share of malformed sperms and impairs male fertility.

Signs of pregnancy

There are a number of signs, which indicate that a woman is expecting a child. The absence of her period and physical changes (for example, tension in her breasts, a frequent urge to pass water, nausea, tiredness, dizziness and ravenous hunger) are often the first signs of pregnancy.

To be on the safe side, a woman should have a pregnancy test. There are a number of ways of doing so. The most reliable is a visit to a gynaecologist. Just around one week after conception the gynaecologist can detect a hormone in the blood of an expectant mother and clearly confirm pregnancy.

If hormonal concentration increases, pregnancy can be confirmed by a urine test after around two weeks. This simple test can be obtained in pharmacies and stores (for example, in a *Drogeriemarkt*). The results are not always reliable, however, and have always to be confirmed by a doctor. Doctors in Germany are bound to professional discretion, and can pass on information concerning their patients only with the agreement of these patients. Apart from doctors, pregnancy conflict and advice centres (addresses in Chapter 4 of the brochure) provide advice on all matters connected with pregnancy; such as, sex education, contraception and family planning. They also give tips concerning social and economic assistance.

Marriage between relatives

With Germans, marriages between cousins are rare. In certain migrant milieus such relationships are more common. One has to be aware that children of blood-related parents are more frequently born with malformations and handicaps, or suffer from inherited diseases. Researchers estimate that the risk is two to four times as high as with couples who are not related. Married couples who are related should therefore take advantage of genetic advice (for example, at a university hospital) before they decide to start a family. They will then receive information on the risk of diseases as well as on possibilities of diagnosis and treatment. If you are affected, talk it over with your doctor.

Tips concerning:

Health before pregnancy



- A healthy diet, doing without cigarettes and alcohol as well as scrupulous use of drugs and medicines have a positive effect on the fertility of men and women.
- Drink three cups of coffee a day at most.
- Supplementation of a woman's diet with folic acid (0.4 mg tablet daily) already before pregnancy.
- Check the immunization of women, particularly against rubella (German measles) before pregnancy, boosting where necessary.
- A visit to the dentist is important, so that necessary treatment can be recognized and carried out.
- If the possibility of pregnancy exists, a woman should become certain of her condition as soon as possible and visit a gynaecologist.

2. Healthy during pregnancy

Preventive care and checkups for early diagnosis of illness

Expectant mothers who have statutory or private health insurance cover are entitled to care by a gynaecologist and/or a midwife during pregnancy and delivery as well as for a number of weeks after the birth of their child. Such opportunities should be made use of.

In the regular course of a pregnancy, without health problems, a monthly medical checkup is sufficient. From the 32nd week of pregnancy a checkup every two weeks is provided for, and if the baby is overdue a checkup every second day is necessary. In addition, pregnant women

should visit the dentist in the 4th and 8th month of pregnancy.

Medical care includes the examination of expectant mothers for infectious diseases that can be of particular significance for the child; such as, hepatitis B and rubella (German measles). All expectant mothers are additionally offered an HIV test, which can also be carried out anonymously. Early detection of an HIV infection is important, since nowadays, with timely medical treatment, there is a good chance of preventing transmission to the unborn child.

Infections with Chlamydia are also registered during pregnancy. They can lead to premature births and to infection of the baby during the birth. Possible symptoms for this disease are inflammation of the eyes, pneumonia and difficulty in breathing. During checkups, gynaecologists always examine pregnant women for vaginal infections. This is very important for the prevention of premature births. Women can also examine themselves, if they wish, between visits to the doctor. Testing gloves, with which the pH factor of the



vagina can be measured, can be obtained in pharmacies. An increased pH factor indicates an infection. Certain statutory health insurance bodies reimburse the cost of testing gloves.

Within the scope of medical checkups during pregnancy, advice and education is provided on health risks for mother and child that can arise during pregnancy and following delivery.



Maternity card for checkup results and pregnancy documentation

The expectant mother is also given a so-called maternity card (*Mutterpass*), on which the course of the pregnancy and the results of all medical checkups are recorded. Women should always have this card with them and bring it to checkups.

The following tests for an expectant mother and her unborn child are offered during medical checkups:

- Test for diabetes during pregnancy (urine test)
- Test for pregnancy-related metabolic disease (regular control of blood pressure, urine tests and testing of tissue for oedema (accumulation of fluid))
- Ultrasound scan (determination of the baby's body measurements, probable date of birth as well as the development of the child in the womb, which is particularly important in the case of expected multiple births)
- Cardiotocography (CTG, recording of labour pains and the child's heart beat)

The father-to-be can come along and attend these examinations.

Diet

Pregnant women should consciously choose a healthy and balanced diet, and not eat too much (certainly not for two!). They require, however, more vitamins, mineral nutrients and trace elements.

Energy requirements do not increase to the extent that is often assumed. An additional 250 to 400 calories daily is sufficient from the 4th month of pregnancy. An increase in weight of 10 to 15 kilograms by the end of pregnancy is normal. Very thin women sometimes put on even more weight. If the woman does not put on enough weight (for instance, because she is on a diet), the baby will not get the quantity of energy and nutrients that is necessary for its healthy development.

A healthy diet includes lots of fruit and vegetables. Fish and high-value oils (for instance, rape seed and olive oil) are good for the child's metabolic system and development. Wholemeal products, potatoes, fruit and vegetables contain important carbohydrates. The baby needs a lot of protein for the formation of bones, teeth and muscles. These are found in eggs, milk products and meat, but also in vegetable foodstuffs. Milk, pulses, broccoli and soybean products contain

calcium, which the baby requires already from the second month of pregnancy for bone formation. Iron (in meat, wholemeal products, green vegetables, pulses, beetroot and nuts) is essential to ensure that the unborn child receives enough oxygen by way of red blood corpuscles. Doctors also recommend sufficient provision of iodine. The best and easiest way is to cook with iodized salt, and to eat salt-water fish at least twice a week. To ensure an adequate supply of iodine, the additional taking of iodine tablets (100 to 200 µg daily) is recommended during pregnancy and during the breastfeeding period.

Vitamins are important not only for the metabolism and the formation of blood, but also for the development of the child's bone structure and lungs. And remind yourself from time to time that you need folic acid!

In your choice and preparation of food bear in mind the following: Salads and fresh vegetables should be washed particularly well, and you should do without raw or lightly fried meat, raw eggs, raw fish and products made from raw, unpasteurized milk (for example, untreated milk products), through which listeriosis and toxoplasmosis – diseases that are harmless for adults but dangerous for the unborn child – can be transmitted. Meat and meat products as well as fish and fish products are only suitable when they are well cooked and heated through.

Expectant mothers are also well advised to do without giblets (liver and kidneys), which contain toxins. Through frequent eating of liver there is also the danger of an overdose of vitamin A, which can lead to malformation. It is recommended to eat fish once or twice a week for a sufficient supply of polyunsaturates, iodine and selenium. On account of possible pollution, however, large salt-water fish, such as tuna, red fish/rose fish, catfish, skipjack tuna and shark, should only be eaten in small quantities and not regularly.



Care should also be taken with coffee and tea, since these drinks slow down the absorption of nutrients and can increase the risk of miscarriage. Therefore, never drink more than three cups a day. The frequent consumption of cardamom, cinnamon and quinine (in Tonic Water) is also risky, since they bring on labour pains.

Consumption of alcohol

The harmfulness of alcohol cannot be rated high enough. Similar to nicotine, alcohol is a cell poison (cytotoxin) that has a detrimental effect on the physical and mental development of the baby.

Just imagine: Every glass of alcohol that you drink during your pregnancy is drunk, too, by your baby. If you have a blood-alcohol concentration of 0.6 per mil, your unborn child also has a blood-alcohol concentration of 0.6 per mil; the difference being that it is much more difficult for the unborn child to break down the alcohol. Alcohol damages the cells and impairs cell division. The consequences for the development of the unborn child's organs – for example, the brain – are considerable.

Miscarriages are not the only risk. If you drink alcohol while pregnant your baby could be born with a mental handicap or malformed.

Peculiarities and handicaps, which are clearly attributable to consumption of alcohol during pregnancy, are also described as “foetal alcohol syndrome” (FAS). Frequent symptoms of FAS are disproportionate short stature (arrested growth), underweight at birth and

retarded growth after birth as well as facial changes. The consumption of alcohol during pregnancy can also have a harmful effect on the child's organs (for example, heart defect and sight, hearing or eating disorders) as well as on its development and social behaviour.

Smoking

Cigarettes contain over 1,000 chemical substances. The most important is nicotine. Every cigarette smoked or passively smoked during pregnancy impairs the development of the unborn child, since it takes in all harmful substances by way of the umbilical cord and the placenta. Smoking increases the risk of miscarriage or a stillborn child as well as cot death (sudden infant death syndrome) (see Section “Safe sleep for the baby”). The risk of premature birth is doubled and retarded growth is common. Children of mothers who have smoked during pregnancy suffer more frequently from allergies, asthma and other respiratory diseases. A smoke-free environment not only promotes the health of children, parents benefit too.

Drugs and medicines

As already mentioned (see Section “Drugs, alcohol and smoking”), expectant and breastfeeding mothers should not take certain drugs and medicines. If a doctor prescribes drugs or medicines for an acute illness, or non-prescription medicines are bought in the pharmacy, it must be clarified whether they are safe to be taken during pregnancy or breastfeeding. Where uncertainty exists a doctor should be consulted.

Feeling good

Pregnancy is a time in which the parents-to-be can prepare themselves for the baby and the new challenges of parenthood. Peace and freedom from stress are demanded. Exercise, for example, helps to reduce stress. Sports in the open air that require stamina (walking or swimming, for instance) are to be recommended. With sport, care should be taken to protect joints and the spine, which means that sudden severe jars, such as occur with tennis or squash, should be avoided. Sports that can involve falls (such as combative sports, skiing, skating, riding or cycling), should be given a miss, especially by the unskilled, for the sake of the baby.

One can travel, of course, during pregnancy. Some doctors advise, however, against air travel during the first three months of pregnancy. Women may not fly after the 36th week of pregnancy and during the first seven days after delivery. When an expectant mother makes a journey by air she should wear compression stockings (to protect against thrombosis) and move around in the aircraft from time to time.

Plan your journey carefully and obtain advice from your doctor on things to be borne in mind.



What should pregnant women avoid?

Pregnant women – and in particular those with inadequate immunization – should avoid contact with persons with infectious diseases such as measles, mumps, chickenpox and, in particular, rubella (German measles) (see Section “Health check”).

If signs of influenza occur, you should visit your doctor immediately.

It is also advised to avoid contact to cats. Parasites can be found in cat excrement, earth and raw meat, which transmit toxoplasmosis. Toxoplasma infection during pregnancy can give rise to miscarriage, blindness and a mentally handicapped child.

The topics of diet, alcohol, smoking and the taking of certain drugs and medicines during pregnancy are to be found in other sections of this guide.

Preparation for the birth

The last three months of pregnancy are the time to prepare for the birth. Hospitals, midwives and physiotherapists offer antenatal classes. Expectant mothers with an insufficient command of the German language can obtain information on antenatal classes in foreign languages close to where they live or at the hospital, as well as information on interpreter services.

Such classes offer a good opportunity to be advised on the usual procedures around the birth, since German routines can differ from those in other countries. Breathing and other exercises are part of the programme. Most women commence an antenatal course in the 6th or 7th months of pregnancy. Because courses are quickly booked out, it is advisable to register early around the 4th month. Most statutory health insurance bodies pay the cost of classes run by midwives.

Expectant mothers with statutory health insurance are entitled to midwife care free of charge. She provides information on pregnancy, birth, confinement after childbirth and the months that follow. She helps, too, with pregnancy complaints. Midwives also look after mother and child after the birth. They have experience with breastfeeding, with childcare and possible difficulties. The midwife is a great support for couples having their first child. Parents-to-be have themselves to take the first step and contact a midwife.



As far as care during the birth is concerned, there are two possibilities. One can either leave it to chance which midwife is on duty in a hospital and will attend the birth. Or one can “book” a particular midwife. This “private midwife” is then present throughout the birth. The advantage of this alternative is that midwife and expectant mother get to know each other already during the pregnancy and can create a bond of trust. The “private midwife” can also carry out certain medical checkups by arrangement with the gynaecologist.

The birth

Most babies are born in hospital, where there are always experienced doctors on hand. In the case of complications action can be promptly taken. From a medical point of view, the hospital is the safest place to give birth. With potential-risk pregnancies (multiple births, older mothers or the final position of the baby in the pelvis), delivery in a hospital with accessibility to a children's hospital (perinatal centre) is advised. The doctor who has carried out checkups during the pregnancy advises the parents-to-be.



It is rare for an expectant mother in Germany to decide on delivery at home. The available care for births at home is correspondingly limited, for which reason it is advisable to look for a free midwife early in the pregnancy. The advantage of delivery at home lies in the familiar surroundings. The disadvantage, however, is that medical aid is available to only a limited extent, and in the case of complications the woman giving birth must be taken to hospital.

The same applies to maternity (or birthing) clinics. As in the case of delivery at home, delivery in a maternity clinic should only be considered after an uncomplicated pregnancy. In maternity clinics, midwives work and assist at the birth. A doctor is generally not in attendance.

Whatever they decide, parents-to-be should make appropriate arrangements at an early point in time, whether with a hospital or maternity clinic. Many hospitals offer appointments, during which the couple can have a look at the maternity ward. Fathers-to-be are particularly welcome.

Tips on being: Healthy during pregnancy



- Do completely without nicotine and alcohol.
- Regularly attend checkups at the gynaecologist for early diagnosis of illness.
- Select a midwife during the early months of pregnancy, who will accompany the pregnancy and support care of the child in the first few months after birth.
- Take care to have a varied diet, with lots of fruit and vegetables as well as wholemeal products. Drink a lot of water.
- Take folic acid tablets throughout the pregnancy. Information on folic acid can be obtained from every gynaecologist.
- Do without raw meat, raw eggs and cheese made of untreated milk.
- Only those drugs and medicines should be taken that are safe during pregnancy.
- Regular exercise is very good, and while taking it, every woman should listen to her own body.
- Avoid sports that might involve falls.
- Courses for parents-to-be (“preparing for the birth”) can be attended in the second half of pregnancy. It is advisable to register around the 4th month.
- The place where the birth will take place has to be chosen. The doctor will advise whether delivery in a special clinic is necessary. Maternity (or birthing) clinics regularly organize information events for parents-to-be, with the opportunity to take a look at delivery rooms.
- The expectant mother should spoil herself and also let herself be spoiled by others.

3. Healthy after the birth

At home again

Following birth in a hospital or clinic, the mother and her newborn baby are discharged, as a rule, within a few days. The world now suddenly has a new focus of attention! The initial period with a new baby is described by many parents as unbelievably happy, but at the same time as incredibly tiring. For many parents, particularly with their first child, it is unimaginable how much time and energy such a small being can demand. The nights are short, since the baby gets hungry every three or four hours. Its nappies have to be regularly changed and the baby washed. Initially, these tasks take up a lot of time; later they become routine. What is more, the mother must recover from the strain of the birth.

Confinement describes the first eight weeks after the birth. During this period, parents and child need a lot of peace and quiet as well as time for each other. At this time it is very important to get help. It is helpful, moreover, if the father of the child relieves the mother of as much housework as possible, even when this has not previously been part of his tasks.

The mother should take it easy physically during confinement after childbirth and not lift heavy things. The general rule is to lift nothing that is heavier than the baby. The pelvic muscles have been “worn out” by pregnancy and birth. If the mother starts to lift heavy things or engage in sporting activities too early, there is the risk that she will become incontinent (that is, unable to hold back stools or urine) in later life. There are, however, specific exercises (“regeneration”) for the confinement period. The midwife can demonstrate these exercises to the mother.

After confinement, it is advisable to visit a special regeneration course. Such courses are offered, for example, by midwives, physiotherapists and adult education institutions, and they are paid for by the statutory health insurance bodies.

The midwife makes regular home visits during the first few weeks after the birth (daily for the first ten days, and as required until the end of breastfeeding). The midwife is also available at any time on the telephone, to give advice, answer questions and deal with problems. Should contact not have been made to a midwife during pregnancy, this should be done without fail while the mother is still in the hospital or maternity clinic.

After the birth, relatives and friends will announce their intention to visit, to see the newborn baby. If it all gets too much for the parents, they should not hesitate to put off a visit until a later time, or to ask the visitor for his or her support, by bringing something to eat, for instance.

It is quite normal if, around three to five days after the birth, as a result of hormonal changes the mother gets weepy or the "baby blues". The mother suddenly has the feeling that she is alone and unable to cope with her new duty. She quickly loses her temper, and is often close to tears. At the same time, she cannot really understand what is wrong with her.



As a rule, these symptoms disappear within a few days. In rare cases, however, they can develop (in the baby's first year) into postnatal depression. The mother has the constant feeling, over a number of weeks, that too much is expected of her; she might also harbour thoughts of suicide. Postnatal depression is an illness, which can and should be treated. Even when the decision is not easy, with severe problems, which arise from depressive feelings and thoughts, a doctor or midwife should be asked for advice without fail.

Safe sleep for the baby

It is the nightmare of every mother and every father: An apparently healthy baby does not wake up. Cot death (sudden infant death syndrome) is one of the most frequent causes of death among small babies. The insight that babies that sleep on their backs less often die suddenly has probably saved the lives of very many children in recent years.

Today, it is clear that sudden cot death can occur if certain of the child's protective reflexes are impaired. Small babies frequently take a breathing space while sleeping. Normally, this is not serious. Protective reflexes prevent the baby from suffocation (asphyxiation). If the level of oxygen in the blood becomes too low and the level of carbon dioxide (that is, "used air") too high, the child automatically draws a deep breath and

wakes up very briefly. Infections, overheating, re-inhaling breathed-out air and passive smoking disturb this reaction. The baby can then suffocate.

To protect the child, the following recommendations should be taken to heart:

Small babies should always be laid on their backs to sleep, They should not sleep in their parents' bed, but rather in a cot in the parents' bedroom. The baby needs space, in order to prevent its breathing from being obstructed and to stop it getting too hot. Neither a pillow nor head protection nor a sheepskin belongs in a baby's cot. A cover is also not recommended, which the baby could pull over its head. A suitable baby's sleeping bag is safer. The mattress should be thin and firm. A rubber overlay should not be used, since it can prevent the

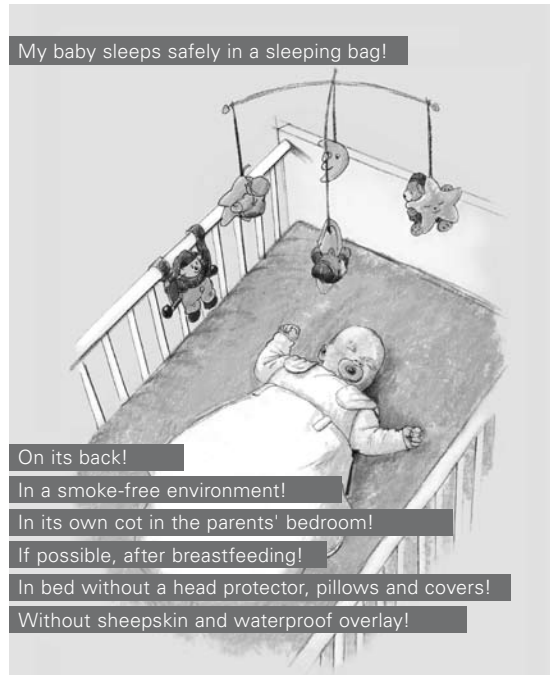
The NRW state project "Health of Mother and Child"

Information on the topic of "Safe Sleep for my Baby" has been published in North-Rhine Westphalia within the scope of the state project "Health of Mother and Child" in German, Arabic, English, French, Polish, Russian, Serbo-Croatian and Turkish. These brochures can be downloaded as pdf documents from the Website of the "preventive concept NRW", click on Mutter und Kind/Materialien: www.praeventionskonzept.nrw.de.

exchange of moisture and air. The baby does not need a cap, hot-water bottle or large cuddly toy while sleeping. It could get caught up in pieces of string, ribbons, cables, mosquito nets, canopies or curtains. Room temperature of 16 to 18 degrees centigrade is ideal for sleeping.

No-one may smoke in the presence of the baby. It has been shown that passive smoking increases the risk of sudden cot death. Breastfeeding has a preventive effect, since mother's milk protects against respiratory infection, and breastfed children have shorter, less deep sleeping phases. If the mother is able, she should breastfeed for at least six months.

Create a safe sleeping environment for your baby:



Source: Ministry of Labour, Health and Social Affairs of the State of North-Rhine Westphalia (publisher), Health of Mother and Child. Brochure "Safe Sleep for my Baby".

Breastfeeding

Mother's milk is the best food for healthy babies. In its first six months of life it basically needs nothing else. Mother's milk is easily digestible. It contains antibodies against a number of diseases. The risk of allergy is reduced by mother's milk. Breastfeeding is practical: The milk is sterile, constantly available and always has the right temperature. Apart from that, mother's milk is free of charge! Breastfeeding is not only beneficial for the baby, it is also good for the mother when she breastfeeds from the very beginning. This way, the womb recedes after birth much quicker and the mother also loses weight quicker. In addition, breastfeeding guards against breast cancer. And what is more, it is a tender relationship between mother and child.

The baby may drink as much and as often as it wants. At the beginning, it is probably hungry six to eight times a day. At some point, the breastfeeding rhythm generally levels out between every three and four hours. In order that the baby thrives and that no breastfeeding problems occur, it has to be given the breast properly. The midwife usually explains this to the mother immediately after the birth. There are different breastfeeding positions. The important thing is that the baby's body is fully turned towards the mother during breastfeeding, and that the baby sucks not only on the nipple, but also on as much of the surrounding breast tissue as possible. This way, problems such as milk build-up, soreness and inflammation are prevented. Should such a problem occur, however, it is important, after having left hospital, to have a competent person to whom one can turn for advice. One should inform oneself in advance of the possibilities. The question that mothers of small babies might like to raise are not always of a medical nature concerning breastfeeding. Many mothers are happy to help each other and exchange experiences. Possibilities for this are offered, for example, by breastfeeding groups and breastfeeding cafés.



Breastfeeding mothers need the support of their partners. Friends and family can also help. The mother should avoid stress and allow themselves periods of peace and quiet, especially during the first few tiring months. As during pregnancy, a healthy and varied diet is the best thing for mother and child. It is also important to drink enough, in order to compensate loss of liquid. Doctors and midwives advise against going on a diet during the breastfeeding period. Through the loss of weight, noxious substances in fatty deposits get into the mother's milk, and are then passed on to the baby.

During the breastfeeding period smoking remains a taboo! The toxins contained in cigarettes are passed on to the baby through the mother's milk. If you are

simply unable to give up smoking, it is nevertheless better to continue breastfeeding than to shift to bottled milk. However, in this case the mother should not smoke for an hour before breastfeeding and put on a fresh top, so that the baby does not breathe in the smoke that has accumulated in clothes.

Care should also be taken with alcohol. Alcohol passes into the mother's milk and thus harms the baby. If a breastfeeding mother occasionally has a drink, she should let as much time as possible pass before breastfeeding. Alternatively, she can pump enough milk for the next feed beforehand. In any case, she should ask her doctor or midwife about the risks. The same applies when the mother has to regularly take drugs or medicines.

Vitamin D and fluoride

The following applies, irrespective of whether a child is breastfed or fed with ready-made milk: Up to the end of its first year, a baby additionally needs a vitamin D compound, which guards against the bone disease rickets, and, after consulting the doctor, a fluoride preparation to protect against caries. On particularly hot days, or with feverish illnesses, after consulting the doctor the baby should be offered a sugar-free drink (boiled water or fruit/herbal tea) in addition to milk.

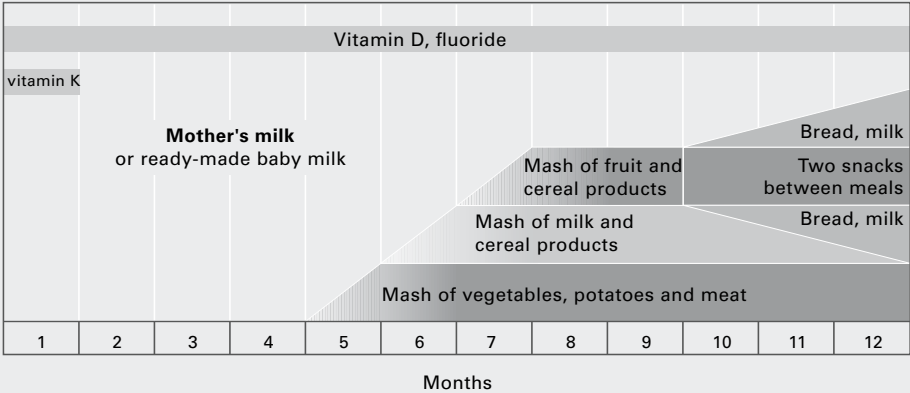
Ready-made milk

When a mother can no longer breastfeed her baby, ready-made milk is recommended, which can be bought in supermarkets and stores (*Drogeriemarkt*). Mother-milk substitute products on the basis of cow's milk are recommended, whose composition is similar to that of mother's milk. Up to the end of its sixth month a baby requires infant food. When necessary, this food can be given up to the age of one. It is labelled "Pre" or "1". After its sixth month, a child can be given follow-up food labelled "2", which is supplemented with additional food products. Fresh cow's milk or soybean milk, whether diluted or undiluted, is unsuitable for small babies, since it cannot be digested by babies and gives rise to digestion problems. For hygienic reasons, and due to unbalanced nutrient content, it is not advisable to prepare baby milk oneself.

Babies, whose parents or siblings suffer from allergies such as hay fever, neurodermitis or asthma, are at risk of allergies. If they are not breastfed, it is advisable to ask the doctor whether the child may be given low-allergenic ready-made milk. This is labelled "HA Pre", "Pre HA" or "HA". "HA" stands for hypoallergenic and means that the product is less likely to give rise to allergies. Low-allergenic follow-up food is labelled "HA 2". Every mother must herself find out which food is best for her baby.

Wrongly mixed ready-made milk, whether too diluted or too concentrated, is unhealthy. The preparation instructions on the packet and the quantities stated by the manufacturer must be followed without fail. Water must always be freshly boiled and then cooled to around 50 degrees centigrade before it is poured over the milk powder. Every measuring spoon of powder should be levelled with a knife, so that the milk does not become too thick. The bottle should then be well shaken and cooled to drinking temperature.

The feeding plan for the first year of life



Source: Research Institute of Child Nutrition, Dortmund

The bottle should have a teat with as small a hole as possible. This ensures that the baby has to suck just as hard as a baby that is breastfed. Sucking is important for the development of the jaw and swallowing. In addition, the baby is tired by the effort and can sleep better. As in the case of breastfed children, feeding according to the child's need is nowadays recommended, also to avoid overfeeding. The decisive factor is normal development of the child's weight. This is controlled in the first few weeks by the midwife and at regular checkups by the doctor.

Supplementary food

From the 5th to the 7th month, feeding with breast milk or ready-made milk is gradually supplemented with mashed food. To begin with, a combination of mashed potato, vegetables and meat is particularly good. Ready-made mashed food products can also be bought in glasses, and attention should be paid to the recommendations of the manufacturer concerning age and quantity.

It is important that the mash initially consists of few ingredients, and that until the end of the baby's first year it contains no spices (salt or pepper, for example) and as far as possible no sweetener or other unnecessary additional substances. If the mother herself prepares the mash, it is advisable to use well-washed organic fruit and vegetable. One can begin with

mash at midday. From the 6th or 7th month the baby is also fed a mash of milk and cereal products a second time in the evening, and around one month later together with a mash of fruit and cereal products. The baby should be given water or unsweetened fruit or fennel tea to drink. From the 9th to 12th month the baby can be gradually accustomed to solid food at family mealtimes.

If a child is at risk of allergies (see Section "Ready-made milk"), one should discuss with the doctor how new food products can be introduced and which products should be avoided.



Proper food for older children

From the age of one children need a varied mixed diet. They are growing and require sufficient nutrients. It is recommended to give the child a lot to drink and plenty of vegetable products (wholemeal bread, cereals, potatoes, rice, noodles, fruit and vegetables).

Animal food products – milk and milk products (cheese, yoghurt and quark) as well as meat, fish and eggs – should only be eaten moderately. While fatty and sugar-rich products should be avoided as far as possible, children need one warm, freshly prepared meal and around 1½ litres of liquid each day (younger children generally drink less; one-year-olds, for example, about 600 ml.), at best unsweetened teas and water. Juices and lemonades contain too much sugar and damage the teeth. Cola drinks should be withheld from children as long as possible, since they hold back bone development, damage the nervous system and can make children nervous.

Healthy teeth

To help a child keep his healthy teeth, a proper diet and oral hygiene are important from the very beginning. Even the first teeth should be cleaned on all sides with a soft brush. Up to its 2nd birthday it is enough to clean a child's teeth every evening before putting it to bed. Constant sucking at bottles of drinks containing sugar – also to fall asleep – should be avoided. They result in plaque and, ultimately, in caries, which often destroys the incisors (front cutting teeth).

From the age of two until school age it is advised that children clean their teeth daily – under parental supervision – with a child's toothbrush and toothpaste containing fluoride. Parents should ensure that the teeth are properly cleaned, particularly in the early years. From the age of five the child can use adult toothpaste.

After sweets have been eaten (at best only once a day), teeth should always be cleaned. Teeth-protecting children's chewing gum can neutralize damaging acids between meals. Household salt containing fluoride protects teeth against caries.



Dental checkups

As with adults, children and adolescents should also go regularly to the dentist. Statutory health insurance bodies pay the cost of the following checkups and preventive care:

Children (2 to 5 years of age)

During a total of three checkups the dentist looks for diseases of the teeth, mouth and jaw. He advises parents on oral hygiene, diet and preventive care with fluoride.

Children and adolescents (5 to 17 years of age)

Children and adolescents are informed of possible diseases during two annual visits to the dentist. Oral hygiene is checked and practised. Teeth are examined, fluoridated and the molars sealed.

Checkups for children and adolescents

The early years of life are very important for a child's development. For this reason, checkups for early diagnosis and preventive care are provided for children and adolescents. The costs are normally covered by the statutory health insurance body.

“U checkups” (U stands for *Untersuchung* = checkup) commence immediately after birth. They serve the purpose of observation of newborn and other children, as well as early recognition and treatment of possible malformation. U 1 and U 2 normally take place in the hospital. In the case of early discharge from a maternity or birthing clinic (so-called “outpatient delivery”), the

paediatrician must subsequently conduct the heel test for metabolic diseases.

This test is particularly important, since it recognizes diseases that have to be treated at a very early stage. When malformation is diagnosed early on, it can generally be better treated.

U10 and U11 are recommended additional checkups, the costs of which are paid by only a few health insurance bodies. They bridge the gap between U9, at around 5 years of age, and the “J checkup” (J stands for *Jugend* = adolescent), at the age of 12 to 14. During these checkups attention is paid to development disorders relating to performance at school and social behaviour. Health promoting measures should be encouraged.

Duty of notification in North-Rhine Westphalia

Doctors in North-Rhine Westphalia are obliged to notify the names of children who participate in U5 to U9 checkups to the “Central Office for Healthy Childhood” at the State Institute for Health and Work of the State of North-Rhine Westphalia. There, in co-operation with residents' registration offices, children are identified who have not attended “U checkups”. The parents of these children then receive a reminder. This way, participation in “U checkups” should be increased. In cases when, even after such a reminder, notification of participation is still not received, the responsible municipality is informed, which examines and decides whether there is reason to intervene.

Overview of “U checkups”

Checkup	Date of appointment	Place
U1	Directly after birth	Hospital, or at home by the midwife
U2	Between the 3rd and 10th day of life	Hospital, or at the paediatrician
U3 to U9	8 checkups (with the new U7a) up to the age of 6	At the paediatrician or GP
U10 and U11	Between the ages of 6 and 7 as well as 8 and 9	At the paediatrician or GP

Specific appointments for the U3 to U9 checkups are arranged between parents and the paediatrician.

The insurance card and the “U booklet” (equivalent to a child health record), in which the doctor records the results of examinations, should be brought to all checkups. Vaccinations can also be carried out at appointments for “U checkups”. So don’t forget the vaccination card!



“U Booklet” (child health record), in which the doctor records checkup results

“J checkup”

At the beginning of puberty, a number of physical changes take place in adolescents. The “J checkup” takes place between the ages of 12 and 14. It serves the purpose of recognition and treatment of illnesses that could endanger the mental and social development of adolescents. Moreover, at this checkup health-endangering behaviour, such as smoking, is also discussed. Parents should ensure that their children take advantage of this checkup at the paediatrician or GP. Many paediatricians also offer special consulting hours for adolescents.

Medical checkups for adults

Medical checkups are available not only for children. It is also important for adults to remain healthy, especially if they have children.

All members of a statutory health insurance scheme are entitled to checkups and preventive care. Depending on age and sex, different checkups are available free of charge, and in such cases the surgery fee also does not have to be paid.

- **Women** are entitled to undergo annual screening for cancer from the age of 19,
- from the age of 29, annual breast and skin examinations,
- from the age of 49, an annual checkup for early diagnosis of cancer of the intestine, and
- from the age of 54, two enteroscopies at an interval of ten years.
- In addition, women between 50 and 69 years of age are invited to undergo mammography screening every two years. Screening tests for early diagnosis of breast cancer take place in so-called screening units.

- **Men** are entitled from the age of 44 to an annual checkup for prostate, genital and skin diseases,
- from the age of 49 to annual screening for cancer of the intestine and
- from the age of 54 to two enteroscopies at an interval of ten years.

Women and men are entitled from the age of 35 to a health checkup every two years, which primarily serves the purpose of early diagnosis of frequently occurring diseases such as cardiovascular disease, kidney disease and diabetes.

During the health checkup, the doctor clarifies in a detailed discussion the risks that arise for the patient from previous complaints and day-to-day habits. Blood pressure and pulse are measured, heart and lungs sounded and urine and blood samples taken.

Vaccinations for babies, children and adolescents

Vaccination protects against disease. The following vaccinations are recommended by the Standing Commission on Vaccination (STIKO) for children:

- Tetanus
- Diphtheria
- Whooping cough
- Poliomyelitis (polio)
- Festering meningitis and laryngitis through haemophilus
- Hepatitis B (yellow jaundice)
- Pneumococci
- Meningococci
- Measles/mumps/rubella
- Chickenpox
- Influenza (viral infection)
- Cervical cancer



An individual vaccination does not, however, have to be given for each disease. There are vaccines that are effective against several infectious diseases (for example, measles/mumps/rubella and the “six-fold vaccination”).

Vaccination

The Ministry of Labour, Health and Social Affairs of the State of North-Rhine Westphalia provides information on vaccinations (inoculations) on the Internet. Brochures on the topic of measles, mumps and rubella (German measles) have been prepared in German, Russian and Turkish, and can be downloaded from the Website as pdf documents: www.impfen.nrw.de.

The timing of vaccination for a child is best discussed with the paediatrician at the U3 checkup (at the age of 4 to 6 weeks). A child cannot be vaccinated if it is suffering from an infection. In such a case, the vaccination must be postponed to a later date. Most vaccinations are well-tolerated. They offer a child protection against disease, but cannot guarantee 100% security. Diseases could still break out, but in a weakened form.

Statutory health insurance bodies generally cover the costs of the above-mentioned vaccinations.

Child safety

It happens very quickly: A baby turns over and falls from the changing stand. A crawling baby finds the WC detergent and sucks at it. A small child pulls down a kettle. Every year a million children have such a bad accident at home or at play that they need medical attention. Small children are affected particularly often by fatal accidents. A great deal can be done, however, for the safety of babies and small children. Here are a few important tips for a baby's first year:

- Never leave a baby lying unattended on the changing stand or other raised surfaces, even when the baby is still very small.
- When changing a baby's nappies, one hand should always remain on the child!
- Secure wall sockets/power points with child guards.
- Do not place cups or jugs with hot drinks within the reach of children. Avoid hanging tablecloths and kettle cables to prevent scalding with hot liquids.



- Burns threaten also at hot stoves and cookers. Children should have no opportunity to approach an oven or cooker.
- Food prepared in a microwave often feels only lukewarm, although at certain places it is already very hot. Before you give food to your child you should stir it well and taste it yourself.
- Keep drugs and medicines in a medicine cabinet. Do not leave them lying around.
- Detergents and chemicals should be stored in a cupboard that is out of the reach of children.
- Do not use “strollers” to encourage small children to walk. Bad falls continually happen with “strollers”, which can also have a negative effect on the development of bone structure. Furthermore, it has been shown that children do not learn to walk quicker with “strollers”.
- A child must never be left unattended in the bath or paddling pool, even when it can already sit and stand.

Growing up multilingual

The languages of origin of parents are elemental for a child. With children who grow up multilingual in Germany, it is the duty of parents to ensure that apart from their language of origin their children learn to speak German as soon as possible. Only this way can their children get along independently and self-confidently in our society, and be successful at school as well as in their jobs and careers.

Parents can support their children in this by finding a place for them in a kindergarten or day nursery, so that they have enough time to learn German before starting school. Parents should make an effort, already before kindergarten, to let their children play with German-speaking children. Opportunities arise to make contact with parents with the most varied languages of origin in groups for crawling babies, swimming courses for toddlers and other similar activities.

Although most children first begin to speak at the beginning of their second year, language development is also influenced by the preceding period. The unborn child already hears the language of origin in its mother's womb. When parents speak to their baby, it first gets to know the language melody, then the meaning of words. Later it learns to form sentences and to express abstract matters in words.

Parents should therefore talk with their children in the language they speak fluently, in which they feel most comfortable. For in this language they know the most words, and also how the language is structured. When a child learns its first language in this way, it will help it to learn other languages. It is also helpful when parents talk a lot with their child, when they look at picture books

together, and when they read to him and tell him stories. The singing of songs and the reciting of rhymes are important, so that the child can develop a feeling for language. If parents let their child talk, and do not correct them too often, it will enjoy speaking and develop well.

If the parents speak different languages, each of them can communicate with the child in his or her own language of origin: one language – one person. For all mixed situations (discussions between the parents, discussions at meals, shopping etc.) fixed “language rules” should apply, so that the child knows which language is spoken in a given situation.

Don't worry! Children can learn one, two or three languages at the same time. They need, however, a particular reference person for each language, and they need to constantly speak and listen to this language in everyday life.



Tips on remaining:

Healthy after the birth



- In the first few weeks after the birth parents should take time for themselves and their child. The partner, friends and relatives can support and spoil the mother.
- Midwives are good persons to talk to about all questions and problems concerning confinement after childbirth.
- Medical checkups (“U checkups”) for children must be attended without fail.
- A mother should try to breastfeed her child for six months solid.
- A varied diet is important during the breastfeeding period, with lots of fruit, vegetables and wholemeal products as well as a lot to drink.
- The sudden death (cot death) of a baby can be prevented by always laying a baby on its back to sleep in the first few months.
- Pay attention to the child's sleeping environment: baby's cot in the parents' bedroom, sleeping bag for the baby, no pillow and a room temperature of 16 to 18 degrees.
- Avoid cigarette smoke in the flat.
- Parents should be informed about vaccinations and get appropriate advice from the paediatrician.
- Remove sources of danger in the flat before the baby starts to crawl.
- Regular dental care is very important for children from the first tooth.
- It is advisable for parents to inform themselves about the topic of “bilingualism with children”. Each reference person should speak with the child only in his or her language of origin.

4. Addresses

Institution/Contact	Description
AIDS-Hilfe NRW e.V. Lindenstraße 20 50674 Köln Tel.: 0221 925996-0 Fax: 0221 925996-9 E-mail: info@nrw.aidshilfe.de Internet: www.nrw.aidshilfe.de	The AIDS-Hilfe centres in North-Rhine Westphalia offer, among other services, a telephone helpline. They provide information on questions concerning “safer sex”, “safer use” and possible infection risks as well as on the HIV antibody test.
Arbeitskreis Neue Erziehung (ANE) Boppstraße 30 10967 Berlin Tel.: 030 259006-0 Fax: 030 259006-50 E-mail: ane@ane.de Internet: www.ane.de	ANE supports parents by means of so-called “letters to parents”, which are aimed at the particular age of the child and available in German and Turkish. They deal with issues of preventive care and health promotion and give important advice. They are dispatched by youth welfare offices (<i>Jugendamt</i>), but can be ordered by parents directly.
Ärztammer Nordrhein Tersteegenstraße 9 40474 Düsseldorf Tel.: 0211 4302-0 Fax: 0211 4302-1200 Internet: www.aekno.de	The Medical Associations act on behalf of the state to maintain first-rate, reliable medical care as well as the professional conduct of doctors. Besides further training for doctors and medical assistants, their duties cover the provision of advice to their members, the general public and policy-makers. They also represent patients' interests and assist in cases of medical errors. On their Websites the Medical Associations offer health tips and general information for patients.
Ärztammer Westfalen-Lippe Gartenstraße 210–214 48147 Münster Tel.: 0251 929-0 Fax: 0251 929-2999 Internet: www.aekwl.de	

Institution/Contact	Description
<p>Berufsverband der Frauenärzte e.V. Internet: www.bvf.de</p> <p>Deutsche Gesellschaft für Gynäkologie und Geburtshilfe e.V. Internet: www.dggg.de</p>	<p>These organizations offer a platform on the Internet with information on the topics of pregnancy and family planning. In addition, there is an online search function for gynaecologists and clinics: www.frauenaerzte-im-netz.de</p>
<p>Berufsverband der Kinder- und Jugendärzte e.V. (BVKJ) Nordrhein Gebhardstraße 17 42719 Solingen Tel.: 0212 31 16 15 Fax: 0212 31 53 64 E-mail: fischbach@kinderaerzte-solingen.de</p> <p>Westfalen-Lippe Pfarrstraße 10 32457 Porta Westfalica Tel.: 0571 5 18 55 Fax: 0571 5 84 79 E-mail: WestermannDrMechthild@t-online.de Internet: www.kinderaerzte-im-netz.de</p>	<p>The Professional Association of Paediatricians represents the interests of doctors in Germany who specialize in the medical care of children and adolescents.</p> <p>Its Website offers extensive information on doctors and clinics as well as on the medical care of children and adolescents (for example, on particular diseases and the healthy development of children).</p>

Institution/Contact	Description
<p>Bundeszentrale für gesundheitliche Aufklärung (BZgA) Ostmerheimer Straße 220 51109 Köln Tel.: 0221 8992-0 Fax: 0221 8992-300 E-mail: poststelle@bzga.de Internet: www.bzga.de www.schwanger-info.de www.kindergesundheit-info.de</p>	<p>The BZgA is a federal authority, which reports to the Federal Ministry of Health and is responsible for health education and prevention in Germany. Besides extensive information materials on health issues, which are available in a number of languages, the BZgA also offers advice and assistance for parents. A list of advice centres for parents is also provided on its Website.</p>
<p>Deutscher Bundesverband für Logopädie e.V. (dbl) Augustinusstraße 11a 50226 Frechen Tel.: 02234 37953-0 Fax: 02234 37953-13 Internet: www.dbl-ev.de</p>	<p>Speech therapists examine and treat people of all ages with speech impediments and disorders or impaired ability to swallow, which can have different causes. On the DBL Website a search can be made for speech therapists throughout Germany. Information is also provided, for instance, on language acquisition in multilingual families.</p>
<p>Deutscher Familienverband (DFV) Landesverband NRW Elsbachstraße 107 51379 Leverkusen Tel.: 02171 341270 Fax: 02171 341758 E-mail: info@dfv-nrw.de Internet: www.dfv-nrw.de Family counsellor: www.familienratgeber.dfv-nrw.de</p>	<p>The DFV sees itself as representing the interests of families in Germany. On its Website the DFV offers family counselling in NRW as a practice-related service for parents.</p>

Institution/Contact	Description
<p>Forschungsinstitut für Kinderernährung (FKE) Heinstück 11 44225 Dortmund Tel.: 0231 7922 10-0 E-mail: fke@fke-do.de Internet: www.fke-do.de</p>	<p>The Website of the Research Institute of Child Nutrition (FKE) offers clearly explained information on the sustenance of babies and children as well as recipes and brochures on the topic of child nutrition. In the FKE database on supplementary food one can find and compare ready-made baby food products related to particular ages as well as recipes.</p>
<p>Freie Wohlfahrtspflege NRW Co-ordinated 2008/2009 by AWO Bezirksverband Westliches Westfalen e.V. Kronenstraße 63–69 44139 Dortmund Tel.: 0231 5483-0 E-mail: koordination@freiewohlfahrtspflege-nrw.de Internet: www.freiewohlfahrtspflege-nrw.de</p>	<p>The State Working Group of the Independent Welfare Service NRW, with its 17 member associations, offers a wide range of opportunities for services at a local level. The Independent Welfare Service NRW (Workers' Welfare AWO, Caritas Associations, German Parity Association of Charitable Institutions, German Red Cross, Diakonie Relief Organization and Jewish Communities) offers the full range of social services on an independent non-profit basis.</p>
<p>Gemeinsame Elterninitiative Plötzlicher Säuglingstod (GEPS) Deutschland e.V. Landesverband NRW Stadtlohnweg 34 48161 Münster Tel.: 0251 8620 11 Fax: 0251 8620 11 E-mail: geps-nrw@schlafumgebung.de Internet: www.schlafumgebung.de or www.geps-deutschland.de</p>	<p>This parents' action group, which is active throughout Germany, offers support to families who are affected by the sudden death of a baby. In addition, the GEPS carries out PR activities and provides information on risk factors concerning cot death that can be controlled. The improvement of services (for example, through information leaflets and regular further education events) is also part of the activities of the GEPS.</p>

Institution/Contact

Gesellschaft für Geburtsvorbereitung – Familienbildung und Frauengesundheit e.V.

Martina van der Weem

Am Ohrenbusch 3a

40764 Langenfeld

Tel.: 02173|977946

E-mail:

vanderweem@gfg-nrw.com

Internet: www.gfg-nrw.com

Description

This society offers advice to parents-to-be before the birth. Antenatal classes are intended to support the health of women and families in different phases of life.

Gesundheitsämter in NRW

You can find the addresses of local health authorities in North-Rhine Westphalia at municipal and local government offices.

An overview is to be found on the Website of the State Institute for Health and Work (www.liga.nrw.de)

Health authorities in NRW offer health information, education and advice to the general public. The health service for children and adolescents is concerned, in particular, with issues of child health (for example, medical checkups for children starting school). Their further duties include, for example, advice on AIDS, advice on vaccination as well as help for the mentally ill, addicts and persons with handicaps.

ginko Stiftung für Prävention

Kaiserstraße 90

45468 Mülheim an der Ruhr

Tel.: 0208|30069-31

Fax: 0208|30069-49

E-mail: info@ginko-stiftung.de

Internet: www.ginko-ev.de

The ginko Foundation for Prevention is the coordinating body for addiction-prevention measures in NRW. Multilingual information on addictive substances and consumption behaviour is available on the foundation's Website. Apart from leaflets, which can be downloaded as pdf documents, there is also information on a range of services. Further information is also available on the Website of the Ministry of Labour, Health and Social Affairs of the State of North-Rhine Westphalia. Click on "Gesundheit" – "Aufklärung und Vorbeugung" – "Sucht": www.mags.nrw.de.

Institution/Contact	Description
<p>Humangenetische Beratung The addresses of local genetic advice centres can be found on the Website of the Deutsche Gesellschaft für Humangenetik: www.gfhev.de</p>	<p>In a consultation on human genetics, information is provided on an existing or supposed risk of occurrence of a genetic (hereditary) disease in a newborn child. The service is offered to couples or individual persons and is often provided at university hospitals.</p>
<p>Informationszentrale gegen Vergiftungen des Landes Nordrhein-Westfalen Zentrum für Kinderheilkunde der Universität Bonn Prof. Dr. M. J. Lentze Adenauerallee 119 53113 Bonn</p>	<p>You can obtain free advice on questions of poisoning around the clock under the telephone number: 0228 19240. The Website of the Information Centre on Poisoning also offers information on first-aid and the prevention of accidents involving poisonous substances: www.meb.uni-bonn.de/giftzentrale</p>
<p>Kassenärztliche Vereinigung Nordrhein Tersteegenstraße 9 40474 Düsseldorf Tel.: 0211 5970-0 Fax: 0211 5970-8287 Internet: www.kvno.de</p>	<p>Insured persons have access to a search engine for practising doctors and psychotherapists in North-Rhine Westphalia on the Website of the Association of Panel Doctors. Information is also offered on the topics of self-help, emergencies and medical standby services as well as health tips.</p>
<p>Kassenärztliche Vereinigung Westfalen-Lippe Gartenstraße 210–214 48147 Münster Tel.: 0251 929-0 Fax: 0251 929-2999 Internet: www.kvwl.de</p>	

Institution/Contact

Description

Krebsgesellschaft

Nordrhein-Westfalen e.V.

Volmerswerther Str. 20

40221 Düsseldorf

Tel.: 0211 | 15760990

Fax: 0211 | 15760999

Internet:

www.krebsgesellschaft-nrw.de

The North-Rhine Westphalia Cancer Society works for improvement in the care of cancer patients. It also promotes preventive care, early diagnosis as well as treatment and aftercare.

Landesinstitut für Gesundheit und Arbeit des Landes Nord- rhein-Westfalen (LIGA.NRW)

Ulenbergstraße 127–131

40225 Düsseldorf

Tel.: 0211 | 31 01-0

Fax: 0211 | 31 01-1189

E-mail: poststelle@liga.nrw.de

Internet: www.liga.nrw.de

LIGA.NRW advises and supports the government, authorities and institutions of the State of North-Rhine Westphalia as well as local authority associations on all questions concerning health and health policy as well as safety and health protection in the workplace.

Landesverband der Hebammen NRW

Im Cäcilienbusch 12

53340 Meckenheim-Merl

Tel.: 02225 | 94 72 63

Fax: 02225 | 94 72 64

Internet:

www.hebammen-nrw.de

The State Association of Midwives provides information on the services of midwives before, during and after a child's birth. The Association's Website provides parents with help in finding a suitable midwife.

Institution/Contact	Description
<p>LandesSportBund Nordrhein-Westfalen e.V. Friedrich-Alfred-Straße 25 47055 Duisburg Tel.: 0203 7381-0 Fax: 0203 7381-616 E-mail: info@lsb-nrw.de Internet: www.wir-im-sport.de</p>	<p>The State Sports Federation and Young Athletes North-Rhine Westphalia represent a large number of offers and services in the field of sports. Beside general programmes and initiatives there is also a special service for migrants: The projects “Integration through Sport” and “spin – sport intercultural” have among their objectives the integration into society of persons with a migration background through sport.</p>
<p>Ministerium für Arbeit, Gesundheit und Soziales des Landes Nordrhein- Westfalen (MAGS) Fürstenwall 25 40219 Düsseldorf Tel.: 0211 855-5 Fax: 0211 855-3683 Internet: www.mags.nrw.de</p>	<p>MAGS has the task of co-organizing the living conditions of people in North-Rhine Westphalia and improving general social conditions. The Ministry pursues these objectives in the areas of labour policy, health policy and social policy.</p>
<p>Präventionskonzept NRW, Landesinitiative Internet: www.praeventions- konzept.nrw.de</p>	<p>Prevention Concept NRW is a state-backed organization, which conducts a wide range of activities. It has developed, for instance, multilingual information and material on topics such as “Mother and Child” and “Overweight Children”. Contact can be made to the Prevention Concept through the Website.</p>

Institution/Contact	Description
<p>Ministerium für Generationen, Familie, Frauen und Integration des Landes Nordrhein-Westfalen (MGFFI) Horionplatz 1 40213 Düsseldorf Tel.: 0211 86185-0 Fax: 0211 86185-4444 Internet: www.mgffi.nrw.de www.integration.nrw.de</p>	<p>MGFFI is responsible in North-Rhine Westphalia for policy issues related to families and integration. The Ministry's Website presents an overview of the wide range of support programmes. "Integration in Nordrhein-Westfalen" is the Internet Portal of the Integration Ministry. Here, information can be obtained on integration services, integration topics and integration data.</p>
<p>Netzwerk der Geburtshäuser e.V. Geschäftsstelle Kasseler Straße 1a 60486 Frankfurt/Main Tel.: 069 71 0344 75 Fax: 069 71 0344 76 Internet: www.geburtshaus.de</p>	<p>The Network of Maternity Clinics promotes the idea of maternity clinics (birthing clinics) in Germany. Information on maternity clinics in NRW can be found on the Website.</p>
<p>Pro familia Landesverband Nordrhein-Westfalen Postfach 130901 42036 Wuppertal Tel.: 0202 24565-10 Fax: 0202 24565-30 E-mail: lv.nordrhein-westfalen@profamilia.de Internet: www.profamilia.de</p>	<p>Thirty advice centres and numerous branch offices are connected with the Pro familia State Association. Medical advice and services are offered concerning pregnancy, contraception, desire for children, health of men and women as well as sexual medicine. All pro familia advice centres are officially-recognized pregnancy advice centres.</p>
<p>Psychotherapeutenkammer Nordrhein-Westfalen Willstätterstraße 10 40549 Düsseldorf Tel.: 0211 522847-0 Fax: 0211 522847-15 Internet: www.ptk-nrw.de</p>	<p>The Psychotherapist Council NRW offers patients information on psychological psychotherapists as well as child and adolescent psychotherapists. A search engine is offered on the Website, which helps in the search for a psychotherapist in North-Rhine Westphalia.</p>

Institution/Contact	Description
<p>Selbsthilfenetz NRW Produkt vom Deutschen Paritätischen Wohlfahrtsverband Landesverband NRW e.V. Loher Straße 7 42283 Wuppertal Tel.: 0202 2822-430 Fax: 0202 2822-490 Internet: www.selbsthilfenetz.de</p>	<p>The Self-Help Network NRW puts interested persons into touch with health-related self-help groups in NRW. In addition, it offers a platform on which statewide self-help organizations and local self-help contact points describe their activities. A wide range of information and help for self-help complete the service.</p>
<p>Sozialverband Deutschland e.V. Landesverband Nordrhein-Westfalen Erkrather Straße 343 40231 Düsseldorf Tel.: 0211 386030 Fax: 0211 382175 Internet: www.sovd-nrw.de</p>	<p>This association offers advice to patients free of charge. The service covers advice and information on medical and psychosocial matters as well as on public care infrastructures. It offers guidance on treatment methods as well as referral to special institutions and self-help groups.</p>
<p>Zahnärztekammer Nordrhein Emanuel-Leutze-Straße 8 40547 Düsseldorf-Lörick Tel.: 0211 52605-0 Fax: 0211 52605-21 Internet: www.zaek-nr.de</p>	<p>The Dental Associations Nordrhein and Westfalen-Lippe offer patients information on the topic of oral health. Support in finding dental practices is also provided on the Website.</p>
<p>Zahnärztekammer Westfalen-Lippe Auf der Horst 29 48147 Münster Tel.: 0251 507-0 Fax: 0251 507-570 Internet: www.zahnaerzte-wl.de www.erste-zahnarztmeinung.de</p>	

Notes

Acknowledgement

We would like to thank all the specialists and institutions that have contributed to the preparation of this guide:

Dr. Ute Alexy (Forschungsinstitut für Kinderernährung Dortmund) | Dr. Aysun Ay (Klinik für Frauenheilkunde und Geburtshilfe an der Medizinischen Hochschule Hannover) | Dr. Fikret Çerçi (Arzt für Kinder- und Jugendmedizin in Detmold) | Dr. Engin Erdoğan (Arzt für Familienmedizin in Bursa/Türkei) | Prof. Dr. Joachim Gardemann (Kompetenzzentrum Humanitäre Hilfe an der Fachhochschule Münster) | Jennifer Jaque-Rodney (Familienhebammenbeauftragte des Landesverbandes der Hebammen Nordrhein-Westfalen) | Prof. Dr. Markus J. Kemper (Zentrum für Geburtshilfe, Kinder- und Jugendmedizin beim Universitätsklinikum Hamburg-Eppendorf) | Heike Mönninghoff (Pädagogin Hannover) | Heike Reinecke (Ministerium für Arbeit, Gesundheit und Soziales des Landes Nordrhein-Westfalen) | PD Dr. Erika Sievers (Referentin für Sozialpädiatrie und Kinder- und Jugendgesundheitsdienst bei der Akademie für öffentliches Gesundheitswesen in Düsseldorf) | Dr. Martina Stickan-Verfürth (BKK Bundesverband) | Thomas Wagemann (BKK Landesverband Nordrhein-Westfalen) | Wolfgang Werse (Landesinstitut für Gesundheit und Arbeit Nordrhein-Westfalen) | Dr. Matthias Wienold, Katja Ngassa Djomo, Anna-Lena Krahn, Mehmet Eser, Martin Müller, Eva Schwarz (Ethno-Medizinisches Zentrum e.V.)

The following translators were responsible for translating the guide into the respective languages:

Javier Arola Navarro, Hai Bluhm, Ana Maria Cervantes Bronk, Dr. Jolanta Batke-Jesionkiewicz, Michael Gromm, Shahram Jennati Lakeh, Bartłomiej Jesionkiewicz, A. Kadir Akel, Photini Kaiser, Mustafa Kisabacak, Hong Van Nguyen, Francesca Parenti, Milos Petkovic, Rose-Marie Soulard-Berger, VIA TEXT – Übersetzernetzwerk, Frankfurt am Main: Halil Alite, Nehat Kolçaku, Maher A. Sandouk

Health of Parents and Children in North-Rhine Westphalia

Are you expecting a child? Do you have questions concerning diet or medical checkups during pregnancy? Or do you already have children, and would like to know more about what to look out for during breastfeeding, how a child sleeps safely, or how children can be protected against dangers at home? In this guide you are given helpful answers to these and many other questions concerning the health of parents and children.

Besides medical topics, the guide is primarily concerned with the services of the German health system for parents before, during and after pregnancy.

The guide "Health of Parents and Children in North-Rhine Westphalia" can be ordered or downloaded at: **www.bkk-promig.de**

This guide was given to you by: