

The application of natural methods is the predominant feature of present day child welfare guidance. These include short hygienic clothes instead of the old fashioned enveloping long ones. Binders will also soon become a thing of the past, together with all the frills, veils and fur lined bonnets. The modern mother is taught to appreciate the dangers of overfeeding and the lack of fresh air and sunshine.

In consequence of these modern approaches the mortality rate of babies is now lower than it has ever been. It proves without dispute that the methods used are on the right lines.

It may be useful to outline the modern approach to baby welfare. It is now understood that a child at even a very tender age needs exercise, so the old fashioned tight binder is discarded, leaving the little body unrestricted in any way, to kick as it wants to and as Nature intended it to do. Several times during its waking hours the clothes should be entirely removed, so that kicking and stretching to the limits of its powers can be freely indulged in, to its great benefit and satisfaction.

In a general way it seems reasonable to allow one stomachful of food to be digested before adding another feed, so less meal times are indicated today than used to be the case. In our more enlightened age, instead of ten or even twelve feeds in every 24 hours, are substituted five meals during the day and none during the night. What a revolution in method is this feeding technique, which allows both child and mother to receive the whole-some benefit of a full night's rest.

Lungs require unlimited quantities of fresh air day and night, so the custom now is to place the infant outside in all weathers, a very beneficial practice if carried out with knowledge and understanding. The only possible excuse for a light veil is to keep flies and other insects out of the child's ears, mouth, nose and eyes. It should never be heavy enough to prevent the full free movement of cooling, refreshing, life giving fresh air. In most cases the veil can be completely discarded and an insect screen thrown over the baby carriage instead, with even greater advantage.

For a mother to breast feed her baby is obviously the correct natural method but, especially amongst the more fortunate people, this used to be looked upon with a certain amount of repugnance and inconvenience, but more and more mothers are beginning to realise that breast feeding is the child's birthright, and the practice is rapidly become more popular, to the great benefit of the child. Gratitude must be extended to the personnel of the welfare centres for influencing mothers to feed their babies in the natural way, and on helping them with advice when it is needed.

By applying the new methods and outlook on infant care two very revealing facts are brought into prominence. In the first place it is the custom today to see everywhere happy, chuckling, contented, sunkissed little bodies which are a joy to behold, and secondly, the mothers of such children are enchanted that their youth, health and vivacity are not impaired by child care. Further, the point may be stressed that such mothers and children are national assets of tremendous value.

Although every care possible, using modern methods, have been taken it sometimes happens that a bonny breast feed baby, full of the joys of life, becomes sickly at the time of weaning. This is naturally disappointing

but a little knowledge soon overcomes this temporary trouble.

As may be expected the change of habit, from breast feeding to a mixed diet can produce a psychological check to the child, and if indigestion is added to this, certain troubles are sure to manifest themselves.

As the change in feeding methods is usually the cause of the disturbance it is necessary to examine them carefully, revising them so that the transition is gradual and yet satisfying. Diluted cow's milk, fruit and vegetable juices should be used as the immediate step from breast feeding. These liquids contain all the necessary ingredients to maintain good health, in an easily assimilable form, and what is more, they are complementary to each other, thus no digestive upsets result from their indigestion.

It often occurs that mothers, eager to see that their babies continue to thrive, make the mistake of proceeding to solid foods far too quickly, before the tiny stomach of the child has become acclimatised to the change by carefully stepped food gradation. They proceed to feed the infant after weaning it, at say nine months of age, with bread and butter, eggs, jellies, sugar, potatoes and gravy, rice pudding, minced meat and so on, and are surprised when it refuses to eat, becomes sickly and intractable.

By modern standards the child should be kept, after weaning, on milk and juices until it is at least eighteen months of age, then proceeding to gradually added starchy products.

After eighteen months the child can proceed to fresh fruits and milk for breakfast; vegetables, baked potatoes, dried fruits and raw milk for dinner at midday, and tea consisting of whole wheat products, milk and perhaps a grated raw salad. As the child grows a little added variety can be made to the midday meal by introducing scrambled egg, or an egg custard made with fresh eggs and T.T. milk.

A great deal of harm is done by mothers listening to misguided wellwishers, but if they rigidly adhere to the above suggestions, there will be no check in the child's progress and illnesses of most sorts will not appear, or if they do, they will clear up very rapidly, because the little system will be clean and wholesome, with the protection of sound lungs, strong muscles and good rich blood to aid it.

Mothers should always bear in mind that the specialists at the clinic have the access to all the latest knowledge and experience on all matters relating to child welfare, and it is in the interests of the child and its mother to take full heed of all the advice available.

Overseas Medical Students See Plastic Surgery at East Grinstead.

FOURTEEN MEDICAL AND NURSING students from Jamaica, Trinidad, British Guiana, Mauritius, Nigeria, India, Denmark and Germany visited the Plastic Surgery Unit of Queen Victoria Hospital, East Grinstead, on January 10th.

They were looked after by Mr. C. R. McLaughlin, consultant in plastic surgery, and witnessed several operations, as well as meeting patients in various stages of recovery who were receiving post-operative treatment such as physiotherapy.

The visit was arranged for the students by the Student Welfare Department of the British Council, who had previously held a showing for some of them of parts of the Council's film on "Techniques in Plastic Surgery."

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