

The Austrian mother-child health passport

From birth to the 5th birthday

Part 2



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Training document

“Promoting the health of women with a migrant background”

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The Austrian mother-child health passport

What is the mother-child health passport?

The mother-child health passport is intended to guarantee a safe pregnancy up until the time of birth. The focus is on the early detection of health risks, diseases and developmental disorders. Detecting child developmental disorders at an early stage enables support measures to be taken in good time. The mother-child health passport is a preventive programme for pregnant women and young children up to the age of five.

When and where can you get a mother-child health passport?

Once a pregnancy is confirmed, every woman is issued with a passport by the gynaecologist. A mother-child health passport is also available from the following doctors and institutions if they carry out mother-child health passport examinations: GP, outpatient clinics, pregnancy and family advice centres and outpatient departments of maternity wards.

Every pregnant woman can get the mother-child health passport if she is resident in Austria, even if she is not an Austrian citizen.

What is the purpose of the mother-child health passport?

- ✦ The examinations provided are for the early detection and timely treatment of diseases as well as for monitoring the developmental status of the child.
- ✦ The examinations carried out in pregnancy and up until the child is 14 months old is a requirement for you to qualify for the full childcare allowance.
- ✦ To reduce the mortality of infants, young children and mothers.

What does the mother-child health passport include?

The first mother-child health passport examination of a pregnant woman must generally be carried out by the end of the 16th week of pregnancy. The mother-child health passport includes:

- ✦ gynaecological examination, including three ultrasound examinations for pregnant women,
- ✦ laboratory test for pregnant women, for example to determine the blood group and the rhesus factor,
- ✦ a midwife consultation, and
- ✦ an internal examination during the pregnancy.

All the important details and results of examinations, such as the position, weight, height, expected date of birth of the child and the mother's blood group, are entered in the mother-child health passport.

In addition to the 5 examinations of the pregnant woman, 5 examinations of the child in the first 14 months are a requirement for you to qualify for the childcare allowance. Up until the age of five, a further four check-ups are necessary.

All the compulsory examinations are important for mother and child.

What does the mother-child health passport cost?

The mother-child health passport, and all the examinations included in the mother-child health passport programme, are free of charge when requested by the social security fund's doctor.

You can find further information at:

[Mother-child health passport \(sozialministerium.at\)](https://sozialministerium.at/mutter-kind-gesundheitspassport)

[Pregnancy, parents and child - Styria \(gesundheitskasse.at\)](https://gesundheitskasse.at/styria)

Examinations within the mother-child health passport during childhood

The child's first examination in the 1st week of life generally takes place in hospital. All other examinations are performed by the paediatrician. There is a total of 9 examinations and two hip ultrasounds.

The paediatrician is an important contact person for the parents. The child will be thoroughly checked during all the examinations. Questions about nutrition, body weight, body size, development and sleep may be asked and discussed. The vaccination plan and the current vaccinations are also discussed.

What examinations take place in the first 14 months of life?

Examination	When	What happens
1.	1 week	♦ Measure body weight and height ♦ Record observations of the mother and medical condition ♦ Medical examination of the child ♦ Assess the need for further examinations
2.	4 to 7 weeks	♦ General examinations see 1 week old ♦ Orthopaedic examination
3.	3 to 5 months	♦ General examinations see 1 week old
4.	7 to 9 months	♦ General examinations see 1 week old ♦ Examination of the ear, nose and throat area
5.	10 to 14 months	♦ General examinations see 1 week old ♦ Eye test
Hip ultrasounds are also recommended when the child is 1 week old and 6–8 weeks old.		

Together with the examinations during pregnancy, the examinations of the child up to the age of 14 months are compulsory for you to qualify for childcare allowance.

Further recommended examinations of your child:

Examination	When	What happens
6.	22 to 26 months	- General examinations see 1 week old Eye test by an ophthalmology and optometry specialist
7.	34 to 38 months	- General examinations see 1 week old Orthopaedic examination
8.	46 to 50 months	General examinations see 1 week old
9.	58 to 62 months	General examinations see 1 week old

The hip ultrasounds and the sixth to ninth examination of the child are not compulsory for you to qualify for the full amount of childcare allowance.

You can find further information at:

https://www.oesterreich.gv.at/themen/familie_und_partnerschaft/geburt/3/Seite.082211.html

<https://www.gesundheit.gv.at/leben/eltern/mutter-kind-pass/erste-bis-dritte-untersuchung-kinder>

<https://www.gesundheit.gv.at/leben/eltern/mutter-kind-pass/vierte-bis-sechste-untersuchung-kinder>

<https://www.gesundheit.gv.at/leben/eltern/mutter-kind-pass/siebte-bis-zehnte-untersuchung-kinder>

Vaccinations

The **free child vaccination plan** was introduced in Austria almost 20 years ago. Free vaccinations are selected according to the latest state of knowledge. On the one hand, very common diseases were selected, on the other hand, rare but very serious diseases. The idea is also to protect children against as many diseases as possible with as few injections as possible. Vaccinations are recorded in the child's vaccination passport.

In Styria, the **'Health for Parents and Child'** chequebook was introduced some years ago to ensure that as many children as possible complete the free children's vaccination programme in full. This 'vaccination chequebook' entitles you to the most important vaccines and vaccinations for children aged 0 to 6 to a value of around 900 euro free of charge. You will normally be given the 'Health for Parents and Child' chequebook when you give birth in hospital, or from your midwife. If you have not received a book by the time you give birth, you will receive it from your GP or paediatrician.

Why are vaccinations important?

Vaccinations promote the immune system's defence reaction. As a result of them, the body develops antibodies against dangerous pathogens.

Since vaccinations are voluntary, it is for the parents to decide whether, when, and against what their children are vaccinated. The schedule of vaccinations and the vaccinations set out in the Austrian vaccination plan are recommendations. If an appointment is missed for any reason, any vaccination can and should be administered as soon as possible.

At the latest before entering communal facilities (e.g. crèche, kindergarten, school), another check should be carried out to ensure that children have been vaccinated against all recommended diseases and are thus protected, as the risk of infection is significantly increased in communal facilities.

Where can I get my child vaccinated?

The following vaccination options are generally available:

- ✦ Paediatrician in private practice
- ✦ GP in private practice
- ✦ Vaccination centres in the federal states
- ✦ Social security health centres

You can find further information about the 'Vaccination Plan Austria' at:

www.sozialministerium.at/impfplan

[The key information about children's vaccinations \(vaccination brochure\) \(sozialministerium.at\)](http://www.sozialministerium.at)

<https://www.vorsorgemedizin.st/infektion-impfung/gratisimpfaktionen-in-der-steiermark/scheckheft-gesundheit-fuer-eltern-und-kind>

After the birth... baby blues and postpartum depression

Nine months being pregnant: Baby has finally arrived. There should be every reason to be joyous. But some women are not. Tears, fears and worries overshadow feelings of happiness and keep maternal feelings concealed. A crisis or depression often follows a major life event that needs to be processed. The birth of a child is a typical example of this.

The so-called **baby blues** is the most common and mildest form of depressive state. It generally starts within the first few days of giving birth. Around 75% of mothers suffer from baby blues. It is a low mood that usually passes quickly and does not require treatment. Following the birth of a child, support, understanding what it means and sharing experiences with other young mothers and fathers is especially important. It is not about swapping magic formulas. Knowing that other mothers and fathers often have very similar problems can very quickly help to make day-to-day life more relaxed.

If a depressive mood persists for longer than two weeks, there is a risk of **postpartum depression** (commonly also known as postnatal depression). Around one in six women suffer from this after giving birth. Various symptoms – such as listlessness, joylessness, exhaustion, sleep and concentration problems, feelings of guilt and increased anxiety – that last over a longer period of time can be an indicator. Depression usually develops in the first three months up to a year after the birth. There can be many different causes of this type of depression. Experts suspect the cause to be hormonal changes or traumatic birth experiences.

If postpartum depression remains untreated, it can have lasting negative impact on the mother-child relationship. It is therefore important to seek professional help quickly from a midwife or doctor. Most mothers – although fathers can be affected too – suffer in silence. Feeling under pressure to be happy, they are ashamed of their feelings. They do not realise that they are suffering from a treatable illness. As a result, those affected often encounter major misunderstandings and sometimes only find help in roundabout ways.

You can find further information at:

<https://www.gesundheit.gv.at/leben/eltern/baby/baby-blues>

Sudden Infant Death Syndrome

The term SIDS (= Sudden Infant Death Syndrome) covers all sudden and unexplained deaths of healthy infants (usually during sleep) with no identifiable trigger and where no cause can be determined even after a detailed investigation of the circumstances.

The 2nd – 4th month of life are a particularly risky time; during which the child experiences a particular motor change or a growth spurt. The SIDS risk is reduced only after the age of 12 months.

What are the triggering factors?

- ✦ If the mother smokes during pregnancy, after giving birth and around the child
- ✦ Drug addiction of the mother
- ✦ Stress: Stress for the infant means experiencing physically unexpected events (being alone, excessive loudness, frequently moving place and environment).
- ✦ Time of year: Worldwide, the risk of SIDS is half in the summer months than in the winter.
- ✦ Overheating
- ✦ Upper respiratory tract infections
- ✦ Placing baby on its stomach: Children whose parents deliberately place them on their stomach (i.e. lying on their stomach is their favourite sleeping position) are at a significantly higher risk of SIDS.

When should I contact a paediatrician?

- ✦ If the baby shows signs of illness such as shortness of breath
- ✦ If the child turns blue around the mouth or in the whole face, sweats unusually excessively when sleeping or is noticeably pale
- ✦ If you notice your baby not breathing for more than 15 seconds when sleeping
- ✦ If the infant vomits frequently or has difficulty drinking
- ✦ If you have any other cause for concern

What precautionary measures can be taken?

- ✦ **Place baby on its back!** Infants should sleep on their back during their first year of life. Sleeping on the stomach in particular, but on the side too should be avoided as far as possible because this is less stable and some children may roll onto their stomach.
- ✦ **Keep baby's head free!** Make sure your baby's head cannot get covered by bedding. It is recommended that the baby be positioned so that the feet rest against the end of the bed to prevent sliding under the bed cover.
- ✦ **No head pillows!** Babies should not sleep on soft supports or with a head pillow.
- ✦ **No sleeping with the parents!** Babies should sleep in the parents' bedroom, but in their own

bed.

- ✦ **No smoking!** Babies and children should grow up in a smoke-free environment both before and after birth. Smoking during pregnancy adversely affects the baby's development and creates a risk of sudden infant death.
- ✦ **Sleep at 18–20 degrees!** A nappy, a sleepsuit and a thin cover are all a baby needs to sleep. The ideal room temperature is around 18–20 degrees. Heated blankets are not suitable for babies.
- ✦ **Be careful with cords and chains!** Look for potential sources of danger of strangulation from cords or chains and ensure the cot bars are safely spaced (4.5–7.5 cm).
- ✦ **Breastfeeding helps protect!** If possible, breastfeeding should continue for longer than two months.
- ✦ **No danger from vaccinations!** Vaccinations are in no way linked to the frequency of Sudden Infant Death Syndrome.
- ✦ **Positive: the dummy!** Dummies may have a positive effect and so reduce the risk to the child.
- ✦ **Learn First Aid!** Parents should learn and be confident in practising heart massage and mouth-to-mouth resuscitation.
- ✦ **Regular examinations!** Attend the mother-child health passport examinations regularly.

What to do in an emergency?

In a life-threatening emergency (see symptoms above), resuscitation measures such as mouth-to-mouth breathing are important. However, waking and stimulating the child is often sufficient.

You can find further information at:

<http://www.sids.at/>

The child's development

Babies and children develop at different paces. Individual abilities develop within a certain period of time and depend enormously on the parents' attention and care. Patience is also sometimes needed since not all children learn at the same speed. If the child does not reach the development stage in one or more areas, a detailed medical examination is crucial. Abilities can be demonstrated by means of development tests or interactive observations, and targeted treatment measures introduced.

As part of the development diagnostics, the current stage of development in the following areas is recorded:

- ✦ motor functions (e.g. gross and fine motor skills)
- ✦ linguistic development (e.g. pronunciation)
- ✦ abilities in the area of body perception, self-perception and perception of others as well as processing abilities of sensory perceptions
- ✦ cognitive development (e.g. thinking, memory)
- ✦ social skills
- ✦ emotional development

Who checks childhood development?

The paediatrician examines the child's development as part of the mother-child health passport examinations. If there are any abnormalities, specially trained child psychologists can check the development of the infant and toddler and identify any developmental delays or behavioural problems. The child's development can be positively influenced in the long term through a specially designed support programme. A psychological development test can be performed from as young as six months of age.

How can I support my child's multilingual development?

A child that grows up multilingual learns the languages in parallel. The child will initially build up a somewhat smaller vocabulary and use simpler sentence structures in all the languages. Raising a child to be multilingual works best if each parent speaks to the child in the same respective language. This should happen from birth if the languages use different sounds. If the child lives in a country where its parent's first language is not spoken, it should nevertheless learn this language first. If possible, the national language (e.g. German) should be taught by someone whose first language it is – e.g. in kindergarten.

You can find further information at:

<https://www.frauen-familien-jugend.bka.gv.at/service/publikationen/familie/elterntipps-babyalter.html>

Behavioural problems in children

When a child displays problematic behaviour, particularly anxiety or lack of attention, this is generally an indicator that the child needs help. However, physical complaints such as bed-wetting or headaches may also have psychological causes.

Colicky babies

Babies who cry for hours despite all the parents' attempts to calm them are known as colicky babies. Experts talk of colic if the child cries for more than three hours a day, more than three times a week, and for a period of more than three weeks.

What are the causes?

In addition to organic causes such as digestive disorders (three-month colic), the reason can also lie in the maturation process of the newborn. The organism of the newborn first has to adapt to the new environment. The sleep-wake rhythm, temperature balance and immune system have to develop, environmental impressions have to be processed and new eating habits have to be learned. Some babies find manage these development processes more easily, others find it hard.

Who can I turn to?

There are several places parents with colicky babies can go to in Austria, some at clinics, some at other institutions (e.g. the Austrian Society for Child and Adolescent Psychotherapy = ökids), which deal with the development and health of children.

The list of contact points can be found at <https://www.eltern-bildung.at/download/anlaufstellen-fuer-eltern-mit-schreibabys/>.

Tips for dealing with colicky babies

During acute periods of crying, the parents should concentrate on a few consistent calming strategies. Familiar sounds and actions that are repeated over and over again have a calming effect on babies; this could be the humming of a certain melody, a massage, gentle stroking, etc. It is also important to structure the daily routine and schedule regular sleep breaks. What parents need in any case is patience; it takes lots of repetitions to change the baby's behaviour and learn a sleep-wake rhythm.

Bed-wetting and enuresis

As with every other step in their development, each child takes a different amount of time to be 'dry' during the day and at night. Children develop a sense that their bladder is full from the age of 2 at the earliest. Bladder control is not fully developed until the end of the 4th year. A series of steps in psychological development also needs to be mastered for a child aged 3–4 to be dry. These include a certain degree of independence, for example.

Physical causes such as abnormalities must first be ruled out. If everything is physically in order and the child is developing at a normal pace, stressful situations may be the trigger for enuresis. The birth of a sibling, the parents separating or a death in the family can be very stressful for a child, and a child who was previously dry may start wetting the bed.

Aggressive behaviour

Aggressive behaviour is often just a passing phase. A certain degree of aggressive behaviour is even a necessary aspect of healthy development in learning to stand up for your needs. For example, the so-called defiance phase between the ages of 2 and 3 is an important milestone in a child's natural development and may well be accompanied by aggressive behaviour.

Excessively aggressive patterns of behaviour in children are often a cry for help or a sign of fear to show that they are in a stressful situation, for example frequent arguments or the divorce of their parents.

ADHD

In the case of behavioural problems such as ADHD (attention deficit hyperactivity disorder), careful diagnosis is very important to distinguish restless, under-challenged or traumatised children from those with ADHD. In Austria, certain criteria must be present for the diagnosis of ADHD. An ADHD diagnosis should not be given before the age of three to four. The younger the child, the more immature and impulsive behaviour is age-appropriate, and therefore 'normal'. Difficulties within the family should also be ruled out.

Tips for dealing with behavioural problems

Offer the child as much support, security and encouragement as possible.

For example, always take the child's fears seriously.

Try to calm the child.

Stay calm yourself!

Speak to the paediatrician and seek professional help.

You can find further information at:

<https://www.gesundheit.gv.at/leben/eltern/baby/schreibaby>

<https://www.gesundheit.gv.at/krankheiten/psyche/adhs/therapie>

Nutrition for mother and child

Energy and nutritional needs increase when you are breastfeeding. To ensure that mother and child are well provided for, it is important to have a varied diet that meets their needs. A sufficient intake of fluids is also important. When breastfeeding, you can eat anything that was well tolerated during the pregnancy. A varied diet is ideal. This is the best way to ensure that mother and baby are well nourished.

What benefits does breastfeeding have for the baby?

Breast milk is the most natural and best nutrition for healthy infants in the first year of life. Breast milk changes during a breastfeeding session. At the beginning it is thin and watery and quenches thirst, towards the end of the meal the fat content increases and satisfies hunger.

Breast milk promotes the maturation of the baby's intestines and the development of healthy intestinal flora, and reduces the risk of some gastrointestinal diseases. Breastfeeding also promotes the development of the child's teeth and jaw. Suckling at the breast leads to optimal development of the jaw and mouth muscles.

The optimal duration for which a baby should be fully breastfed is around six months.

What infant formula is recommended if I cannot or do not want to breastfeed?

If you cannot or do not want to breastfeed, first infant formula is recommended for healthy babies. These formula feeds are made from cow's milk and are largely similar in composition to breast milk. First infant formula is suitable for feeding throughout the entire first year.

Infant formula should also be prepared fresh, immediately before the mealtime. Any formula left over should be disposed of. Do not keep prepared infant formula in bottle-warmers or Thermos flasks for long periods.

My baby is at risk of allergies, what do I need to consider?

If there are already allergies in your family or you notice an intolerance, you must discuss the appropriate diet with your paediatrician.

When can I start complementary feeding?

Depending on the child's development, you can start to introduce solid (complementary) food at the age of around 6 months. Introducing complementary food does not mean you should immediately stop breastfeeding. Continue to breastfeed for as long as you and your child want to.

What is suitable as the first complementary foods?

At the beginning, the baby needs foods rich in iron and zinc, such as meat, cereals, hen's eggs or pulses (peas, lentils, soya beans, etc.). Well blended purées with few ingredients are suitable as the first complementary food. New foods should be introduced slowly and in stages. Foods that babies can easily choke on should be avoided (nuts, seeds, grains, berries, pulses).

Avoid adding salt, sugar and sweeteners to the complementary food. Honey should be avoided completely in the first year of life.

Water is the ideal drink; fluids should be given regularly from the age of ten months. Continuously sucking sugary drinks leads to tooth decay and an early habit of consuming sweet things, and should therefore be avoided.

Babies have an innate preference for sweet and salty foods. To develop healthy eating patterns, young children should be introduced to and accept other flavours. Offer your child lots of different complementary foods and encourage your child to try them. Parents should also set the example – children eat what their parents eat – so make sure you enjoy a varied diet.

General tips:

- ✦ Take the time to eat
- ✦ Eat together at the table
- ✦ Eat at regular times
- ✦ Set a good example of healthy eating
- ✦ Keep your kitchen hygienic

You can find further information on nutrition for pregnant and breastfeeding women, babies of complementary feeding age, toddlers and children aged 4–10 at www.richtigessenvonanfangen.at

Tip: Video explanations

[Nutrition \(richtigessenvonanfangen.at\)](http://www.richtigessenvonanfangen.at)

You can find further information at:

[The Austrian Nutrition Pyramid for Pregnant and Breastfeeding Women \(richtigessenvonanfangen.at\)](http://www.richtigessenvonanfangen.at)

[Healthy Nutrition for Parents and Child - Healthcare Fund \(gesundheitsfonds-steiermark.at\)](http://gesundheitsfonds-steiermark.at)

[Homepage | Children Eat Healthily Initiative](#)

Exercise for mother and child

The pelvic floor and the muscles of the abdominal wall are put under a lot of strain during pregnancy and birth. Regular exercise can strengthen the muscles of the pelvic floor. You can start postnatal exercise six to eight weeks after giving birth, when any injuries to the perineum or vagina have healed.

Why is postnatal recovery important?

Postnatal recovery includes special exercises to do after giving birth. The midwife will first show you exercises to strengthen your pelvic floor and help to return your uterus to normal size. This can reduce possible late effects – such as urinary or bowel incontinence. The exercises also help to strengthen the back and abdominal muscles.

After completing the postnatal exercises, you should continue with pelvic floor training. You are advised to continue pelvic floor exercises for at least six to nine months after giving birth. At the same time, you can start the first pelvic floor-friendly sports such as swimming or walking six weeks to two months after giving birth.

How can I encourage physical activity in my baby?

A newborn baby's movements are still uncontrolled and uncoordinated. But every activity produces a wealth of information in your baby's brain. It learns to control its head and trunk muscles, to coordinate its arms and legs, to kick, roll and crawl; at about 6 months your baby will learn to sit up, and to walk at about one year.

During the first months, provide stimulation for all your baby's senses. Through intensive activity with your child, you will promote both physical and mental development.

How can I encourage my child's physical activities in the first years of life?

The physical development of your child in the first years of life can be promoted by trying out and practising different movement sequences during play. The following play ideas train your child's fine motor skills (grasping and holding) as well as eye/hand coordination and arm and leg muscles.

- ✦ Put things into and take things out of bags, shopping baskets, drawers
- ✦ Dress and undress (themselves or a doll/teddy bear)
- ✦ Shape and knead different materials (e.g. cake mix)
- ✦ Paint and scribble
- ✦ Stacking, sorting and lining up (building blocks, large wooden beads, pasta shapes)
- ✦ Climbing and balancing (on low walls, tree trunks)
- ✦ Jumping (e.g. from bed onto the floor; start by holding your child by both hands)
- ✦ Rolling and pedalling (ride-on car, tricycle – don't forget a safety helmet!)
- ✦ Splashing around and swimming (never without constant supervision!)
- ✦ Throwing and catching (throwing a ball into a bucket or rolling a skittle over)

How much activity is recommended for children of kindergarten age?

Parents and other adults should provide all children of kindergarten age (between 3 and 6) with opportunities for physical activity every day. Children of kindergarten age should be physically active for at least 3 hours a day (can be split over the day). Sitting for long periods should be avoided, and always interspersed with periods of activity.

Ensure that physical activities are fun, age-appropriate and cover the widest possible motor spectrum.

You can find further information at:

[Physical activity recommendations poster and folder – children aged between 3 and 6 \(fgoe.org\)](https://fgoe.org/Physical%20activity%20recommendations%20poster%20and%20folder%20%E2%80%93%20children%20aged%20between%203%20and%206)

[Let's move brochure.pdf \(paediatric.at\)](https://paediatric.at/Let's%20move%20brochure.pdf)

Dental health

The foundation for healthy teeth needs to be laid in early childhood.

What can I do?

- ✦ Take care of your own dental health, especially during pregnancy, and see your dentist regularly.
- ✦ Breastfeeding promotes the development of the child's teeth and jaw.
- ✦ Milk teeth: The moment a tooth appears, it needs to be cleaned regularly. Healthy milk teeth form the basis for teeth that stay healthy.
- ✦ Tooth-cleaning: While children are small, it is crucial that parents clean their children's teeth. Tooth-cleaning can later gradually be left to the children. Make sure your child cleans the teeth at the back of their mouth and the gaps between teeth. Use fluoridated toothpastes.
- ✦ Tooth decay develops particularly quickly through constant sucking on bottles, dummies dipped in honey and the frequent consumption of sweetened drinks (especially before bedtime and at night). Give your child water and unsweetened tea.
- ✦ Visiting the dentist: Take even young children for check-ups. That will help to reduce fear and build trust.

You can find further information at:

[Dental Health from the Beginning - Styria \(gesundheitskasse.at\)](https://gesundheitskasse.at)

[Dental Health Information Sheets - Styria vitalis](#)

Child safety

There are lots of dangers lurking for small children in an apartment, house and garden. But accidents are no coincidence. Childhood accidents can be avoided by being aware of hazardous situations and taking simple safety measures.

What types of childhood accidents happen?

✦ Falls

Falls from the changing table are the most common cause of severe head injuries in infants. Therefore, never leave your child unattended on the changing table.

As soon as children begin to crawl and walk, they can easily fall on steps. Secure the stairs and landings in your home with adjustable wooden or metal grids. Use window safety devices to limit the distance that windows can be opened and remove anything children could use to climb over windowsills and balcony railings.

✦ Scalding

Pots containing hot liquid on the stove or table pose a danger for children. Make your stove safe with a safety guard and use the rear hobs where possible. Turn all pan handles around to face the wall.

✦ Accidents with electricity

Power sockets are favourite but dangerous objects for children to investigate. Ensure that power sockets are fitted with suitable covers or use child-proof sockets.

✦ Poisoning

As they explore the world around them, children put lots of objects in their mouth. Medications, caustic liquids, washing powder, etc. are very dangerous.

Always keep medications locked away. Store toxic or caustic substances in lockable boxes out of the reach of children.

✦ Drowning

As soon as children are able to walk, they like to play in water too. Children can drown in as little as 10–15 cm of water. Never let children play unattended in or even next to a paddling pool, swimming pool or other body of water. Secure private swimming pools with a fence. Secure slippery bathtub bottoms in your home with rubber mats.

♦ Out and about with baby

Depending on the age of the child, there are different transport options (e.g. pushchair, bicycle, car). On a bicycle, your child needs a child seat and a helmet. Children are at particular risk in car accidents if they are not properly secured. Use a suitable age-appropriate bicycle or car child seat on every journey, therefore. Child seats for newborn babies may be loaned throughout Austria from the drivers' associations.

Where can I get safety tips?

Since 1983, the Austrian Committee for the Prevention of Childhood Accidents (Österreichische Komitee für Unfallverhütung im Kindesalter) or ADULTS PROTECT CHILDREN (GROSSE SCHÜTZEN KLEINE) has been working to improve child safety in Austria. The aim is to inform locally, regionally, nationally as well as internationally on the importance and possibilities for preventing childhood accidents, and so reduce the number of childhood accidents.

BÄRENBURG, the child safety house in Graz demonstrates child safety in practice in its show home, and offers guided tours for young & old. In addition, the most important child safety tips can also be viewed online with the 'virtual BÄRENBURG'.

You can find further information about child accident prevention at:

[ADULTS PROTECT CHILDREN - Child safety and accident prevention \(grosse-schuetzen-kleine.at\)](https://www.grosse-schuetzen-kleine.at/)

[BÄRENBURG child safety house - ADULTS PROTECT CHILDREN \(grosse-schuetzen-kleine.at\)](https://www.grosse-schuetzen-kleine.at/)

[Child safety brochures & folders | KfV - Austrian Road Safety Board \(Kuratorium für Verkehrssicherheit\)](https://www.kfv.at/)

Childcare allowance

The **childcare allowance** is part of the Austrian family support programme. Through the childcare allowance, the state supports whichever parent temporarily stops working. The childcare allowance payment is not to be confused with the family allowance or maternity allowance. The **family allowance** is paid for each child irrespective of income up to the age of employment (maximum up to the age of 25). The **maternity allowance** is intended to compensate for the mother's lost income in the period from eight weeks before the expected birth date to eight weeks after delivery.

What are the requirements for claiming childcare allowance?

- ✦ Proof of receipt of the family allowance payment
- ✦ Centre of vital interests in Austria
- ✦ One parent and child must live in the same household (confirmation of registration)
- ✦ Legal residence in Austria
- ✦ The amount of childcare allowance is linked to the first ten mother-child health passport examinations
- ✦ Compliance with the additional earnings limit
- ✦ In the case of separated parents, additional custody rights for the child

Proof of the mother-child health passport-examinations carried out must be submitted to the competent health insurance provider by a certain date. The sheets provided in the back of the mother-child health passport serve as proof. The doctor stamps these as soon as the prescribed examinations have been completed. The examinations must be carried out in the time periods prescribed.

The three ultrasound examinations during pregnancy are not a requirement for continued payments of the full amount of the childcare allowance.

When can childcare allowance be applied for?

An application for the childcare allowance can be submitted at the earliest on the day of birth. Parents currently have a choice of two childcare allowance systems. It can be claimed as a lump-sum (**childcare allowance account**) or as an **income-dependent benefit**. The decision on which option to choose must be made when applying for the first time and is binding for both parents. This means that the parents must jointly decide on one of the two systems. A change can be made only within 14 days of the first application!

You only ever receive the childcare allowance for your youngest child. If a second child is born while you are receiving the allowance, the entitlement for the older child ends on the day the younger child is born. A new application for childcare allowance must be submitted for the newborn child and is then paid for this child.

You can find out more at the Styrian Chamber of Labour

https://stmk.arbeiterkammer.at/beratung/berufundfamilie/kinderbetreuungsgeld/Kinderbetreuungsgeld_neu.html or

<https://www.gesundheit.gv.at/leben/eltern/mutter-kind-pass/kinderbetreuungsgeld> or

<https://www.frauen-familien-jugend.bka.gv.at/familie/finanzielle-unterstuetzungen/>

Where can childcare allowance be applied for?

The application for childcare allowance is submitted to the health insurance provider which paid the maternity allowance or the provider the applicant is or was last insured with. If there is no entitlement to maternity allowance, the childcare allowance can be claimed from birth.

If you do not have health insurance, the Austrian National Health Insurance (ÖGK) is responsible. All expectant mothers can claim the flat-rate childcare allowance, irrespective of whether they previously worked or were in education.

Parents and children who are not Austrian citizens may also be entitled to the childcare allowance.

This applies to:

- ✦ EU and EEA citizens and Swiss citizens who have documentation of their right of settlement (registration certificate)
- ✦ Third-country nationals with corresponding residence permits pursuant to Sections 8 and 9 of the Settlement and Residence Act (NAG) or Section 54 of the Asylum Act 2005
- ✦ Individuals entitled to asylum (positive conclusion of the asylum procedure)
- ✦ Individuals granted subsidiary protection who are gainfully employed or self-employed and do not receive benefits under the basic provision or minimum income scheme or are not entitled to such benefits.

You can get the forms specifically designed for this purpose from your competent health insurance provider or online at [Austrian National Health Insurance - Styria](#)

NOTE: Please distinguish between childcare allowance and parental leave. Parental leave is a leave of absence under labour law for parents who are gainfully employed. The duration of parental leave does not need to correspond to the period in which the childcare allowance is claimed.

‘Early Childhood Interventions’ (Frühe Hilfen)

A pregnancy and life with a baby and/or young child turns life on its head. Everything changes. That can be challenging, stressful, but frightening as well.

Early Childhood Intervention programmes provide services for parents from pregnancy, and for families with children up to the age of three. They include practical **help**, advice, mediation and support. Early Childhood Interventions focus in particular on parents or families who are struggling with day-to-day life with a child, and want some support.

This family support is voluntary, confidential and free of charge!

What are the reasons for getting help through family support?

Family support assists you and your family in getting the right help if:

- ✦ stresses occur during pregnancy,
- ✦ a child needs more attention than a parent can provide,
- ✦ feelings of being overwhelmed and fears arise in the role of parent,
- ✦ there is a lack of support within the partnership and in the wider family,
- ✦ the financial basis of existence is at risk.

Family support professionals can visit you in the hospital and at home.

What are the aims of family support?

- ✦ Promote the healthy development of children
- ✦ Promote a secure parent-child bond, interaction and relationship
- ✦ Strengthen families
- ✦ Promote the psychosocial well-being and health of parents/families in stressful life situations
- ✦ Identify and reach out to families in stressful life situations at an early stage

Early childhood experiences have a strong influence on the further physical, mental, social and emotional development in children.

Early Childhood Interventions make parents’ resources and competences visible and open up perspectives on how to promote healthy development and the well-being of children.

How can I access this support?

In Styria, five regional Early Childhood Intervention networks are available to support families within the framework of ‘Gut begleitet von Anfang an!’ (Well supported from the start!) – Early Childhood Interventions Styria.

Contact via the Austrian National Health Insurance in Styria:

Manuel Kainz, MSc, MSc

Coordination of Early Childhood Interventions Styria

+43 5 0766-151929

[Early Childhood Interventions Styria - Styria \(gesundheitskasse.at\)](https://www.gesundheitskasse.at)

Where else can I get support?

- ✦ Advice on child and youth welfare issues is available at the respective district commission. Social workers are available to provide citizens with advice on issues concerning caring for and raising children and youngsters.
- ✦ You can find further advice centres under [Family advice: Advice centres](#)

Sources

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