**Transcript episode 163**

[Meg] (0:00 - 1:15)  
Your baby is still waking at night and you're wondering why, then this episode is for you. I'm catching up with our regular guest Julia. She's mum to 10 and a half month old Aurelia and we are going to troubleshoot a twice at night wake up.

We break down the three biggest culprits behind night wakings at this stage which are nutrition habits and separation anxiety and then we look at what you can do to help your baby and also you get better sleep. But today's episode is not all about sleep. This stage is also packed with exciting milestones and we dive into one of the most important ones and you won't believe it's actually pointing.

We talk about why it matters and how it shapes your baby's communication skills. We've got all the insights on that one and finally if your baby is on the move like Aurelia is, it's time to talk about baby proofing your home. From wobbly little walkers to curious little hands, we have got everything covered so that you know exactly what you need to do around the home to make sure that your little one is safe.

So the key takeaways from this episode are the real reasons that your 10 month old is waking at night, how to support strong communication skills at this age and baby proofing for a safe and stress-free home. So don't go away, stay tuned because we are going to be covering all things for the 10 month old.

[Announcer] (1:16 - 1:57)  
Welcome to Sense by Meg Faure, the podcast that's brought to you by ParentSense, the app that takes guesswork out of parenting. If you're a new parent then you are in good company. Your host Meg Faure is a well-known OT, infant specialist and the author of eight parenting books.

Each week we're going to spend time with new mums and dads just like you to chat about the week's wins, the challenges and the questions of the moment. Subscribe to the podcast, download the ParentSense app and catch Meg here every week to make the most of that first year of your little one's life and now meet your host.

[Meg] (2:00 - 2:11)  
Welcome back mums and dads, always a pleasure to have you join me. I'm Meg Faure and this is Sense by Meg Faure and today we have a regular guest again, Julia. Welcome Julia.

[Julia] (2:11 - 2:22)  
Thanks Meg, thank you for having me again. We have been following an incredible journey with little Aurelia. She is around nine months old now, isn't she?

[Meg] (2:22 - 2:23)  
Ten. Gosh, it has flown.

[Julia] (2:24 - 2:32)  
Yeah and it's funny because so many people say to me, oh how old's your baby? Five months? I'm like no, no we're nearly one. I think for everybody else it also feels like it's gone quickly.

[Meg] (2:33 - 2:40)  
Yeah, no it is unbelievable but it's such a precious age this one where they're busy and hectic but it's just they're so cute, aren't they?

[Julia] (2:41 - 2:45)  
Yeah, let me tell you she's lucky she's cute because otherwise I think I would have thrown her out the window by now.

[Meg] (2:47 - 2:54)  
I know babies are designed like that, those very big heads, big eyes, the cuteness, so you actually will keep them on for a while.

[Julia] (2:54 - 5:37)  
Yeah, biology is a miracle, otherwise yeah she would have been in danger of being left on the side of the road I think. Tell me what the challenges are. Well, so I think the last time that we chatted I had had already a few weeks of kind of struggling with her nighttime sleep and you know for anybody who has been listening for a long time she's always been a sort of quote-unquote good baby.

She you know slept, not that she sort of sleeps through super super often but she does sleep through every now and then and certainly when she does wake up normally it would be like once a night and fairly easy to put down and I could manage it and then in sort of over the course of the last now probably two months I think it must be this night's sleep has just gotten very very messy and I think that in reality you know I would appreciate your input on this but my sense is that it's a combination of factors to do with the fact that she was sick for a number of weeks with different things so there was a snotty nose and then there was a tummy bug and now she's got a snotty nose again and then I suspect quite a lot of teething and in the last day or so I've found an incisor that's coming down so that's obviously definitely kind of been playing into it as well because there has been a lot of kind of pain crying you know quite a specific pain crying so I do know when she's sore and obviously it's like a very tricky developmental age because she's crawling a lot she's standing and bouncing and trying to to walk although not quite with any success just yet but yeah so there's just a lot going on and I think that that's all you know working together to maybe be a bit disruptive and so the one thing that I have tried since the last time we spoke was to be a bit stricter about her daytime sleep and we discussed a kind of shorter 45 minute odd nap in the morning and then maybe an hour and a half later in the day kind of just after lunch which is what we have been doing and I you know I think that under normal circumstances that probably does work but I think because we've been battling things like teething and illness we're not really getting anywhere with it and I'm just having to remind myself that I have to ride the wave so that's where we are. Goodness me and how often is she waking up?

[Julia] (5:37 - 5:41)  
So funnily enough look I mean it varies if you'd asked me this question a week ago I probably would have given you a different answer but at the moment she's doing a very funny thing where she wakes up like between 10 and 11 which of course she hasn't done since she was a teeny tiny baby so that's not very fun because normally I have just closed my eyes and then she'll sometimes wake again around one or well and or closer to four o'clock and then that at four o'clock I normally give her a bottle because I need her to go back to sleep and that's the kind of yeah that's normally the pattern certainly for the last week or so.

[Meg] (5:41 - 6:29)  
Yeah okay so it sounds like you've I mean our basics that we always look at is obviously illness and teething which you've taken into account and I mean definitely when it comes to illness you've got to keep you've got to have a look at all the things that'll just make her comfortable whether it's a decongestant that has been recommended or paracetamol if she's not feeling well and is teething so you do need to take care of those things and you also do need to make some allowances but the one thing in terms of allowances just we don't want to fall into any habits and I'll talk about that as another point completely and we spoke last time about you know kind of that developmental stage where she is going through a leap but she is also actually a proprioception seeker that's why she's up on her legs early and bouncing they tend to seek proprioception. Did you add in quite a bit of swinging in the afternoon?

[Julia] (6:30 - 6:43)  
Yeah so look I we're not maybe as consistent with it as we should be but I when I sort of remember and I have the time I do try and put her in the swing like just before supper time but yeah like I say maybe we're not consistent enough with it.

[Meg] (6:43 - 7:16)  
Yeah I definitely would pop in a little bit more of that just because she is a sensory seeker she's not watching TV I presume or screens yeah okay that's good because that definitely does impact sleep at this age because they're getting too much sedentary time as opposed to movement time which is what they really need at this time and then her day sleep schedule is spot on so 45 minutes in the morning and a 90 in the afternoon is spot on so that all sounds good so that leads me around to two things that kind of peak up at this time as well actually three things the one is nutrition how's her diet?

[Julia] (7:17 - 8:03)  
So she thankfully is in that stage before Santi got picky at about 15 months so we are very lucky that she eats quite a varied diet and she certainly is an enthusiastic eater she's very hungry at the moment actually now that you mention it she we were actually about to drop the afternoon bottle because she wasn't really finishing it and in fact the current phase she's in where she's absolutely smashing every single bottle and she's eating so much when she has her solids she hasn't been as interested in her bottles for quite a long time now like she drinks them but she doesn't necessarily always finish them whereas at the moment she is drinking them down to the last drop and she's yeah seems to be kind of ravenous and I'm giving her more snacks and things so there's I don't know if it's like a growth spurt or but she's yeah she's a happy girl at the moment.

[Meg] (8:03 - 11:41)  
Yeah so I think let's just quickly talk a little bit about diet this is the age where milk starts to drop off and that's totally normal developmentally the fact that she's increasing is fine we'll talk about that but for other mums whose little ones are kind of loving their solids and not wanting their milk that does happen and then we usually do drop either the mid-morning or the mid-afternoon bottle and so three to four bottles of milk in a day would be age appropriate so she should be having kind of one on waking that may be slightly smaller if she's had that 4 a.m. so you can almost split that 4 a.m. into kind of 100 mils at 4 a.m. and another 100 mils when she wakes up and then one at 10, one at 2 and one at 6 so it's really like a kind of 6, 10, 2, 6 and either the 10 a.m. or the 2 p.m. will also become a reduced bottle so like 100 mils and that is very typical. In terms of her solid meals she should be having breakfast, lunch and supper plus two snacks that should happen those snacks should happen at around about the time of those mid-morning, mid-afternoon bottles and the focus here is to make sure that she's having enough iron. This is the age where iron stores have depleted by six months the stores that they have from pregnancy and so they really do rely on nutrition on solid nutrition and also a little bit on bottle feeds if they're bottle fed in that formula milk is iron fortified often whereas obviously breast milk isn't so mums if you're listening and you're exclusively breastfeeding still you really need to focus in on those meals. The places where food is generally fortified is in processed cereals and in formula milk and if she's not having either of those she is having formula milk but if they weren't then you would really want to make sure they're having really nice red meat options and some nice legumes otherwise if they're not on a vegetarian diet and then obviously your dark green vegetables and hopefully you pair those dark green vegetables with some vitamin C as well. So quite a nice recipe in the Weaning Sense book is actually our quinoa, spinach and berry recipe because it's got the berries which have got the vitamin C and then the spinach and so I would maybe pop one of those smoothies into her diet so either as a mid-afternoon snack or else even as a meal in the evening. Often they might be pickier in the evening and then a smoothie might be easier.

So you can also make up a kind of little one of the little bowls that is kind of a really thick smoothie and feed that to her almost like a puree as well or have that for breakfast. Try not to put dairy with it and the reason is that dairy interferes with the absorption of iron. So those are kind of the things you'd want to focus in on and then obviously quite a high fat and high protein diet as well so nice amounts.

I'm not talking about like cutting out carbs, I'm talking about just making sure that she's having nice healthy fats and healthy proteins and I would definitely be increasing the quantity particularly in snack times. She can almost have like five little meals a day and that might assist so that's definitely something I would look at particularly because she's having this 10 p.m wake up 10 11 p.m wake up so that's the one thing. The second thing that's very classic at this age is of course separation anxiety.

They're still just busy navigating does mum still exist when I can't see her so I would be playing lots of separation games like wait like where's Santi let's go find Santi and play hide and seek with him and of course she'll then learn that when you look for something it is actually there and that develops object permanence and when that develops this they tend to settle in terms of their separation anxiety. Also in terms of separation anxiety does she have a doodoo blankie or an attachment object of some sort?

[Julia] (11:42 - 11:50)  
She does, she has a little soft lambie that is the other sort of thing that I think she associates her sleep with because it's what she has when she's in her cot that's what she puts her face on.

[Meg] (11:50 - 12:10)  
Okay brilliant and that's very important mums if you don't have that at this age you need to put it in place. So those are the first two things that I would look at is nutrition and sleep anxiety separation anxiety and at that point I think you've got it all covered. So my next question is when she goes to sleep for her morning sleep her afternoon sleep and at bedtime how does she fall asleep?

[Julia] (12:12 - 12:16)  
I throw her in the cot and then I walk out the room that's the general strategy.

[Meg] (12:16 - 12:20)  
And she just goes to sleep on her own?

[Julia] (12:20 - 12:20)  
Yeah yeah yeah.

[Meg] (12:20 - 12:32)  
Okay so that's absolutely brilliant okay so that is the that's the key thing is that they need to be falling asleep on their own and if she wakes at 10 or 11 does she then have the quick feed if you're giving it to her and then settle herself right back to sleep?

[Julia] (12:33 - 12:33)  
In the evening?

[Meg] (12:34 - 12:36)  
At like 10 p.m if she wakes then?

[Julia] (12:36 - 13:11)  
Yeah so normally what I do is I give her some water and just make sure that she's got her dummy and then sometimes I give her a cuddle depending on how much she's howling it does vary quite a lot. Sometimes it's more like a it seems like almost it's happening in her sleep but generally speaking the water does the trick at that time it's the the way you know like last night it was a she woke up at 10 and actually my husband handled that one I don't even remember it I was fast asleep and then at half past three she woke up and that was a much more kind of protracted having to do rocking and cuddling and then eventually gave her a bottle kind of thing.

[Meg] (13:12 - 13:18)  
Okay so at the 10 if you give her a little bit of water and her dummy she falls back to sleep?

[Julia] (13:18 - 13:20)  
Yeah usually it's just sort of transient that one.

[Meg] (13:20 - 13:23)  
All right well then I would and how long are you waiting before you respond to her?

[Julia] (13:24 - 13:25)  
Maybe not long enough?

[Meg] (13:25 - 15:26)  
Yeah I would say five minutes which sounds very long but I would literally do that now because she can put herself back to sleep. You've covered all the bases for sure and she's probably just waking because she's coming into a light state of sleep and then just seeking you out. So my suggestion is tonight to just listen if she does what I call effing and batting which is kind of a little bit of a cry and then kind of talking and then a little bit of a cry I would actually leave her completely if she's absolutely howling wait for a minute or two at least to see if she'll resettle herself and then the next thing you're going to do so the first thing you're going to do is listen the second thing you're going to do is use your voice so you're going to say to her where's your dummy from outside the bedroom so where's your dummy and she probably won't find it at that point because now she's heard your voice she's going to want you in there and then you're going to walk and you're going to say where's your dummy and put it in her hand and what you're trying to do is you're trying to signal to her that if I wake up I can actually reach for my dummy and so I would actually go about it that way is you know try to get her to use her dummy on her own. I probably would now stop using the water. I think she can probably just do it just with it with the dummy but definitely you need to phase it in.

Talk or listen then talk then dummy into hand never into mouth and then obviously you must have about five dummies in her cot at night so that she can actually find one when you're not there. That would be my suggestion for that night waking. It is a pain I know but I think you know make sure that she's if she is teething use the paracetamol make sure she's having a good diet play the separation games and then actually handle it with a little bit of behaviour management in the middle of the night and then the 4 a.m. I think you're doing the spot-on thing give her half a feed and that's because they then settle back to sleep go through to the morning and that 4 a.m. will eventually move out to later in the day let you know it'll move out to like five or six.

[Julia] (15:26 - 15:27)  
Yeah.

[Meg] (15:27 - 15:27)  
So no magic wands here but just little steps that can actually make a difference.

[Julia] (15:27 - 16:35)  
Hopefully will do so yeah no thanks that's actually the you know especially things like remembering to listen I think that what often happens with me and and it's it's a kind of PTSD from Santi where I got myself into a vicious cycle of thinking well you know I don't want him to wake up too much I'm sure other mums can relate to that they have a tricky sleeper I don't want him to wake up too much so I'm going to rush in there at the you know first squawk to try and settle him before it gets out of hand kind of thing which is you know survival but not entirely rational or necessarily aligned with the science and so I think that in a way that's maybe what's happening at 10 o'clock I'm like absolutely exhausted I'm about to go to sleep or I've just gone to sleep and then the idea of having to sort of go through a whole you know process with her 10 o'clock is exhausting so I'll just land up kind of going in and settling her maybe the the sort of quick and easy way when maybe I need to just practise a little more patience or indeed make it Vito's problem and he you know he's much better at that than me and maybe to say listen babe you're in charge between 10 and midnight and you know this is the process to follow I'm not going to get involved so I think maybe I'll do do that route.

[Meg] (16:36 - 17:29)  
Exactly and you know I mean I you I mean you say you that that's how you're feeling my my firstborn is now 26 and I remember that thought like it was yesterday like if I quickly run in there quickly he won't be fully awake and of course that's how you start habits so definitely that is what lies behind this and then also you can also try a little bit of white noise in the room so maybe try that tonight just playing it in the background and see if she'll sleep through that 10 p.m wake up it often does help as well and then also just making sure that the room is a little bit cooler than you think it needs to be so often you know and I'm sure that it's it happens to most of us when it's hot we wake up and so you know I used to think very early on in my parenting journey that babies need to be really warm to sleep well but actually it's got to do with them also being a little bit cooler same as us so rooms nice and cool kind of 18 to 21 degrees which at the moment and in Cape Town is obviously tricky, but yeah, that's what you'll be aiming for.

[Julia] (17:35 - 18:22)  
Yeah, we will certainly do a little bit of practising of all these things and hope for the best and also just do the thing that I've been doing a lot with baby number two, which is riding the wave and seeing where it takes us. Because, you know, actually, believe it or not, any mums who are in the trenches with number one, it really does change. Next week or next month will be a whole different story.

And actually, that's the best way to get through the night. I find this to just remember that actually, you know, tomorrow night will be an entirely different thing and next week and next month. So you just have to go with it.

And are you using a baby monitor out of interest?

[Meg] (18:22 - 18:23)  
No.

[Julia] (18:23 - 18:29)  
So she's right next door. We share a wall. So I listen. But I mean, it doesn't take a lot to wake me, to be honest. I mean, one little squawk and I'm tuned in.

[Meg] (18:29 - 18:30)  
You're listening. Yeah, no, absolutely. That's for most mums. But yeah, because often mums use baby monitors and we actually end up hearing too much. You almost don't want to hear everything, you know. So I think not having a baby monitor is perfect. As long as your baby's room is within a shouting distance, you will hear them for sure.

[Julia] (18:38 - 19:21)  
Yeah, yeah, exactly. And I remember with Santi, actually, we did have a monitor for a long time and it got to the point where the sort of slightly tinny, almost kind of white noise that it made because it's quite an old monitor we inherited from someone. When I turned it on at night, it actually used to give me anxiety, not the sound of him making a noise, but the sound of the monitor.

And I used to just get so stressed. It would ratchet up in me. Nothing would be happening, but I would just be getting more and more anxious.

And then that was the point at which I thought, no, this is ridiculous. I'm going to turn it off. I can hear him quite easily.

So I do think that there are cases in which those monitors really can do more harm than good, certainly to your mental state.

[Meg] (19:22 - 19:28)  
Absolutely. No, couldn't agree more. So tell me, what are the positives? What is keeping her alive at the moment?

[Announcer] (19:30 - 20:08)  
This episode is brought to us by ParentSense, the all-in-one baby and parenting app that helps you make the most of your baby's first year. Don't you wish someone would just tell you everything you need to know about caring for your baby? When to feed them, how to wean them, and why they won't sleep?

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[Meg] (20:09 - 20:14)  
So tell me, what are the positives? What is keeping her alive at the moment?

[Julia] (20:16 - 22:11)  
Well, as we mentioned earlier, she is extremely cute. It's so funny, even when we have these really, really difficult nights, she's just such a delight in the day. Again, thank goodness for her.

Even on Saturday night, we had an absolute horror. She went down at, I think, about half past six and then half past seven, she was awake and she screamed for three hours. I don't know what it was about.

I tried painkillers. I tried rocking her. I tried playing Enya.

You name it, I did it. Nothing worked until I eventually gave her another bottle. I mean, there's no way she was hungry.

She had eaten an enormous dinner and had had a full bottle of bedtime. Anyway, I needed something to sort of tip her over the edge. So she eventually got a bottle at about 11 o'clock.

But the day preceding that, she was just completely angelic. She had had two wonderful naps, exactly the amount of time they were meant to be. She had stayed at home playing with her dad in the morning while I'd taken Santi to a party, and then we'd all gone to a friend in the afternoon and she'd had lots of attention and lots of being sort of thrown around by the kids.

She was just a delight and smiling and everyone was like, oh, what a lovely baby. So she does sort of certainly balance it out by being just really engaging. It's lovely to kind of watch her really start to understand language, I suppose.

I think that's what it is. She's starting to understand when I say no to her. But she has this hilarious kind of cheeky face.

So we have a rattan headboard in our bed and in the morning, the kids are both in the bed with us and she'll often go and pull it. In fact, we've lost a few pieces of it from when Santi was a baby. And so whenever I see her going towards it, I say no.

And then she looks at me with these wide eyes and like a half smile. And I'm like, no, no, it's not a game. Then I have to try and keep a straight face instead of starting to laugh.

But she really gets away with murder, that child.

[Meg] (22:12 - 22:46)  
That's amazing. And in terms of communication, so she's starting to understand language. And I don't know if I've shared this with you, but receptive language, which is the understanding of language, precedes expressive language by about six months.

It's quite a long period of time. It's quite interesting. So they really do start to understand long ahead of them actually starting to actually speak the words, which is super interesting.

They also start to understand nonverbal communication. Has she started to understand, like if you point to an aeroplane or a hadeda flying overhead, does she look where you're pointing?

[Julia] (22:47 - 23:13)  
Yes, she does. She definitely is. She's quite aware in that sense.

So I would say, funnily, now that you kind of mentioned it, I do think that she has quite a good sense of even just sort of gestures and I suppose also kind of atmosphere, even to that degree. She just seems to be quite sensitive. It's not quite the right word. I don't mean it in that she sort of easily disturbs, just that she has good, yes, exactly.

[Meg] (23:14 - 25:21)  
Amazing. Yeah. So it's actually very interesting.

This ability to look where somebody is pointing in the direction they're pointing is an incredibly important stage in verbal communication. And the reason for that is that in order to look where somebody's pointing, instead of looking at the end of their finger, you've got to know that they're trying to communicate something with you. So if you say, oh, there's a hadeda and you point and she looked at the end of your finger, that would be that she isn't really getting the idea that you're actually looking and pointing up at something that she needs to look at.

That's not at the end of your finger. That's like 30 metres away in the sky or something, you know? So we call it mind mindedness.

It's the knowledge that another human being has a mind. And it's obviously the foundation of language, because if we didn't understand that somebody had a mind, we wouldn't have the need to communicate with them. So children with communication deficits and in particular autism, and so this kind of social communication deficits, they don't look where you're pointing.

They look at the end of your finger because they haven't actually got it in their head that you're trying to communicate something bigger with them. And so pointing is such an interesting milestone. It's in a way, I make it, you know, I've got these favourite milestones.

You shouldn't really have favourites, but I do. The first being smiling, the second being crawling, and the third being pointing, because each of those are so fundamental as a foundation for other milestones later. And actually in one of our previous episodes that actually just flighted very recently, we spoke about how crawling was so important as a foundation for maths later.

I mean, it's a big leap. Mums, if you haven't heard that episode, it was back when she was seven months old, we discussed it. But likewise, pointing is an absolutely incredible milestone.

It's a foundation for mind mindedness and being able to know that actually I need to communicate, because what she'll do is she'll first of all start to look where you're pointing, and then she'll start to point. So she'll go to the kitchen and she'll point, crawl in there and point at the fridge when she wants something to drink, or point at the nappy bag when she wants you to get something out. So she started to do that.

[Julia] (25:22 - 25:26)  
No, not yet, but it just suddenly made me remember when Santi was doing that. It was so funny.

[Meg] (25:26 - 25:37)  
And then what she's doing is she's communicating her mind to your mind. And so without even being able to speak, she's now actually communicating. So very, very important milestone that she'll be doing there.

[Julia] (25:38 - 26:33)  
Yeah, I think I probably wasn't as aware of it with Santi. I didn't necessarily understand how early they kind of start that that type of communication. But I'm definitely more aware of it with her.

You know, just the fact that she can absolutely understand when I'm saying no to her is such a clue to kind of what's going on in her mind. And it's really it's fascinating. She's also I remember we spoke last time about how she was quite a chilled crawler.

Well, she was obviously listening, because she suddenly become this incredibly fast crawler with so much determination and direction. So whereas before I could guesstimate where she would be if I had to turn around for one minute and turn back, I kind of know she'd almost be in the same spot. Not so much anymore.

She is on the other side of the house and rushing around, you know, when they kind of crawl so fast, and they've got the onesie on and they almost like slip, they've got no traction. And then she just sort of goes in one spot over and over again.

[Meg] (26:34 - 26:46)  
So precious. So being that she's your second, your house is probably very well baby proofed already. But this is the age where we really do need to baby proof the house.

What sort of things have you looked out for and that you're very conscious of around baby proofing?

[Julia] (26:48 - 27:31)  
So specifically, it's things like having locks on cupboards in the kitchen, because there in our kitchen, certainly there are a lot that are at her eye level, you know, and drawers as well, because also, you know, certainly in our kitchen, drawers are full of potato mashers and peelers and all sorts of things that I think can cause a bit of unintended injury. We don't really have any sharp corners, like our coffee table's actually an Ottoman, the things like that, that can't really do her any harm. And certainly, the playroom that she's in is also, you know, it's been well used by Santi.

So there's nothing particularly dangerous in there. We also have locks on our toilets and things like that. So that's all actually still in place from when Santi was little.

So we're quite lucky that it's mostly, you know, the bases are covered. What would you say are the most important things?

[Meg] (27:32 - 30:55)  
Yeah, so the two that are my most important, the one is water. So I mean, it's really being super vigilant. My very first job out of university, I worked in a paediatric rehab facility in New York.

And one of my first patients I ever had was a 16-year-old boy who had fallen into water as a baby. And it was such a shock for me to see what water damage, what brain damage due to drowning actually does. It's just absolutely horrific.

And it's just so avoidable, but you've got to have eyes open for it. So ponds, swimming pools, toilets, and low areas where water is played with, like a little water pond, or even like a tray of water, like bath time, like you just cannot ever take your eye off them. And I think people used to, when I was a young mum, people used to think I was ridiculously obsessive.

We had a net and a fence. And like, I was obsessed with it, absolutely obsessed with it. I would not leave my children when they were near water.

And all three of my children were swimming by 18 months. They were super early swimmers, very, very early. In fact, my middle child, who ended up being a brilliant swimmer, was even earlier than that.

We, you know, I had taken them to swimming lessons with me. I didn't do drown proofing. It was more one of those kind of, it was called aquatots.

And it was more like getting into the water with your little one and just, it was supposed to be that they just came to love water. But obviously, there was a little bit of kind of independence with, if you fell in the water, how would you turn on your back? And I can remember that from a very little age, they were able to do that.

But even with that, they were never left in a pool until they were like six years old without me sitting and watching them. It was just my obsession. So number one, 100% water.

And then number two would probably be loose furniture. So in particular, bookshelves that are loose. I mean, I know I can see your bookshelves are enormous and probably bolted into the wall, but any bookshelf that can be pulled onto a child, and I'm sure you heard, well, maybe you did or didn't a couple of years ago, there was a child at a school in Johannesburg who managed to put a bookshelf onto themselves and actually died.

It was at a playgroup and it was devastating for the playgroup franchise. But pulling a bookshelf onto yourself is a very common thing and particularly with her because she's that child who does pull herself up on things. So those would definitely be my top two.

Door closing and drawer jammers are optional in my mind because you can actually clear low-lying areas and put Tupperwares in there and put the glasses up above. But the only thing is that they can slam their fingers, which is obviously not ideal. So yeah, those are definitely my top two.

And then I guess the third one would also be electrical sockets. And then the final one that I would also that nobody often thinks about are the lines from blinds. And those can get wrapped around necks.

So one of the things that I did was, what you need to do is actually plait the bottom ends of kind of strings from blinds so that they also can't get those wrapped around their neck. It's not a big risk, but it definitely is something that I look out for. But this is the age where we need to baby-proof the house because you can't, like you said, she's so fast, you can't watch her all the time.

[Julia] (30:55 - 31:51)  
Yeah, absolutely. The water one's quite scary. I mean, we were talking about my brother last week when we were two, he drowned in a swimming pool and was flatlined and had to be resuscitated.

And it was, I mean, absolutely horrific for my mother. And, you know, it's sort of a family story. And I think all of us are quite paranoid about water safety as a result.

I mean, thank God he was OK. But I mean, that oxygen deprivation was definitely, you know, played a role in his life. And so, yeah, and it's also just it's just traumatic.

It's just plain horrible. And so, yeah, water is a big one, especially in this country, when a lot of us are lucky to have pools and things like that. I mean, I remember when Santi was six months old and first he was crawling, I immediately got on to the phone with the fence company and had a nice big fat fence put around our swimming pool, which, yeah, thank goodness does a great job.

But it's something to be very vigilant about.

[Meg] (31:52 - 33:16)  
It's interesting because I mean, you know me and anybody who listens to my podcast knows that I'm extremely nonjudgmental about parenting because I know everybody follows a journey. So, you can choose pretty much any path of caring for your child and I'll back you. But the one thing I cannot back a person on is an open pool.

And I've had some really quite serious confrontations with people where I mean, in fact, the one situation was quite a well-known celebrity, in fact, who was going to be a PlaySense host, one of our PlaySense play groups. And we have a rule in PlaySense, obviously, because we host in people's homes, is that if you've got open water, it has to be double covered. It was really, we're very strict about it.

Anyway, she wanted to host, we were desperate for a host in that particular area, and she had an open pool. And I said to her, and she had a two-year-old, not even, 18-month-old. And I said to her, you can't do that.

And, you know, it was really, and in the end, we didn't host in her home. I said to her, I'm sorry, but I'm not just absolutely not prepared to do it. And she said, and we're trying to understand her rationale, their rationale was their child will fall in the pool and she will learn.

And I was like, yep, but she might not be there when she does it. And it's, yeah, really, really, for me, it's a, it's a, it's an absolute no-no. Open water is the big one.

And then obviously, you also get, I mean, the one that isn't around the home is just also where it's irresponsible parenting as if a child's not in a car seat when you're travelling, you know, those are.

[Julia] (33:16 - 33:31)  
That is, yeah, that's the one that gets me when I'm driving around and I see a child bobbing around on the back seat. Or worse, on the front seat. Spikes my blood pressure so much.

I want to get up and start screaming and beating people. Makes me so angry.

[Meg] (33:32 - 33:39)  
Yeah, no, I know. I guess we are getting a little bit judgy here, but there are the safety things. They're the things that, you know, I think are the not negotiables.

[Julia] (33:40 - 33:57)  
No, absolutely. Yeah. I mean, I suppose I can see how it might sound like judgement.

I don't know. I think it's more like, I don't know, a lack of consideration. I don't know.

It's asking for trouble. I think it's, yeah, there's not really an excuse for not having those things in place, if you ask me. Yeah.

[Meg] (33:57 - 34:11)  
Yeah, absolutely. Well, as usual, you and I are very much on the same page. So Julia it has been wonderful to chat with you.

I really, really have loved these chats and we look forward to chatting again next month when she will nearly be one. I cannot believe it.

[Julia] (34:12 - 34:38)  
Yeah, no, no, it's absolutely wild. I can't, I can't, I really can't wrap my head around it. I just don't know where the time's gone.

It's just, it's such a different thing. I think, yeah, for any, any mums who are still on number one and are planning number two, I can just tell you that certainly from my experience and a lot of the people I know, their experience, it is really an entirely different experience. So, and yeah, it goes so fast.

Yeah, it really does.

[Meg] (34:38 - 34:44)  
Excellent. Well, thanks for your time again, Julia, and we'll catch up next month.

[Julia] (34:44 - 34:46)  
Okay. Thanks Meg. See you then.

[Meg] (34:46 - 34:46)  
Thanks.

[Announcer] (34:46 - 34:55)  
Thanks to everyone who joined us. We will see you the same time next week. Until then, download ParentSense app and take the guesswork out of parenting.