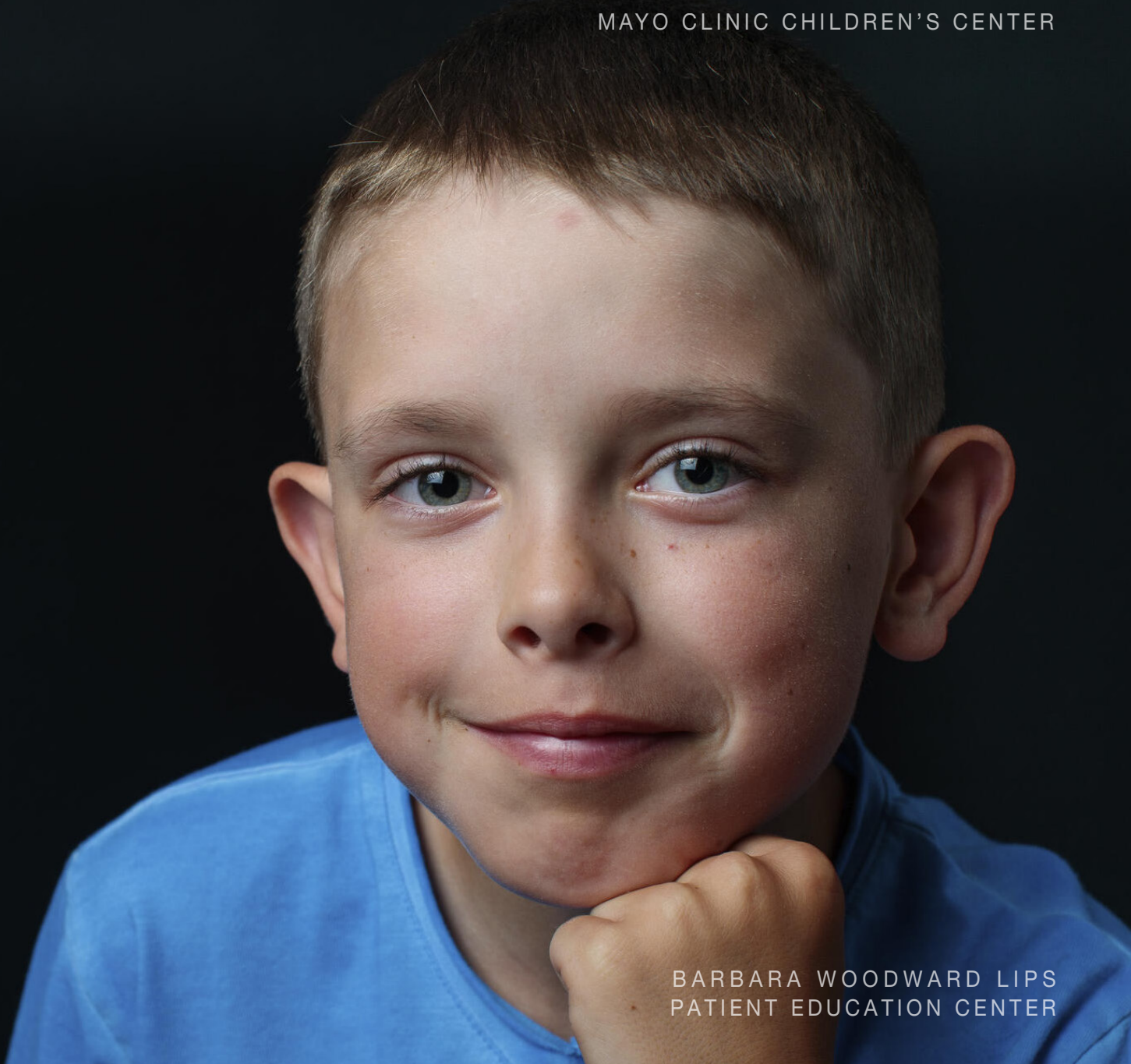




PATIENT EDUCATION

Is Your Child Ready To Stay Home Alone?

MAYO CLINIC CHILDREN'S CENTER



BARBARA WOODWARD LIPS
PATIENT EDUCATION CENTER

Mayo Clinic Children's Center

For more than 100 years, teams of physicians have cared for children at Mayo Clinic.

T. DENNY SANFORD PEDIATRIC CENTER MAYO EUGENIO LITTA CHILDREN'S HOSPITAL

Pediatric Sub-Specialties in the following areas:

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|---------------------------------|--------------------------------------|------------------------------------|
| Allergy and Immunology | General Pediatric and | Plastic and Reconstructive Surgery |
| Anesthesiology | Adolescent Medicine | Psychiatry and Psychology |
| Cardiology | Gynecology, Adolescent | Pulmonology |
| Cardiovascular Surgery | Hematology and Oncology | Radiation Oncology |
| Child and Family | Infectious Diseases | Radiology |
| Advocacy Program | Medical Genetics | Regional (Health System) |
| Community Pediatrics and | Neonatal Medicine | Pediatrics |
| Adolescent Medicine | Nephrology | Research |
| Critical Care | Neurology | Rheumatology |
| Dermatology | Neurosurgery | Sleep Medicine Center |
| Developmental and | Ophthalmology | Speech Pathology |
| Behavioral Pediatrics | Oral and Maxillofacial Surgery | Surgery |
| Emergency Medicine | Orthopedic Surgery | Urology |
| Endocrinology and Metabolism | Otorhinolaryngology (ENT) | |
| Gastroenterology and Hepatology | Physical Medicine and Rehabilitation | |

Pediatric Specialty Clinics:

| | | |
|---------------------------------|-----------------------------------|--------------------------------------|
| Adrenoleukodystrophy Clinic | Dana Child Developmental and | Metabolic Bone Clinic |
| Aerodigestive Clinic | Learning Disorders Program | Mood Disorders Clinic |
| Anxiety Disorders Clinic and | Dermatology Genetics Clinic | Neonatal Follow-Up Clinic |
| Intensive Therapy Program | Diabetes Clinic | Neuromuscular Clinic |
| Arrhythmia and Device | Eating Disorders Clinic | Pain Clinic |
| Placement Clinic | Eosinophilic Esophagitis Clinic | Pain Rehabilitation Center |
| Asthma Center | Epilepsy Clinic | Pediatric Diagnostic Referral Clinic |
| Attention Deficit Hyperactivity | Erythromelalgia Clinic | Pediatric Level 1 Trauma Center |
| Disorders (ADHD) Clinic | Facial Paralysis and | Plagiocephaly Program |
| Bariatric Surgery Clinic | Reanimation Clinic | Pulmonary Hypertension Program |
| Brain Injury Program | Feeding Program | Renal Stone Clinic |
| Brain Tumor Clinic | Fertility Preservation | Spina Bifida Clinic |
| Cerebral Palsy Clinic | Fetal Surgery Program | Spinal Deformities Clinic |
| Chemotherapy/Radiation | Friedreich's Ataxia Clinic | Sports Medicine Center |
| Long-Term Effects Clinic | Functional Movement | Thyroid Nodule/Cancer Clinic |
| Child and Adolescent Intensive | Disorder Program | Transgender Clinic |
| Mood Program (CAIMP) | Heart Failure Clinic | Transitions Program |
| Childhood Sarcoma Clinic | Hemophilia/Coagulopathy Clinic | Transplant Center |
| ComPASS (Palliative Care and | Hyperlipidemia Program | Travel Clinic |
| Integrative Medicine) | Immunodeficiency Disorders Clinic | Vascular Malformations |
| Congenital Heart Clinic | Inflammatory Bowel Disease Clinic | Velo-Pharyngeal |
| Constraint Induced Movement | Learning Disorders | Insufficiency Clinic |
| Therapy Program | Assessment Clinic | Voiding Clinic |
| Craniofacial Clinic | Long QT Syndrome Clinic | Weight Management Clinic |
| Cystic Fibrosis Center | Marfan Syndrome Clinic | |

This Is a Big Decision



Is my child old enough and responsible enough to stay home alone? It's one of those questions many parents and guardians wish someone else would answer. If only someone had a clear answer — one just right for each child and every parent who wonders about this. That would be ideal.

But as you may know, you likely won't get this answer from other sources. In fact, most states don't have laws to guide parents about this decision.

Are your friends or family leaving their children home alone? You may feel pressure to do the same thing. **Even if other children are the same age, wait for the right time for your child.** This should be a time when the child says he or she is ready and a time when you're pretty sure the child is, too.

You have many topics to think about

Your child needs to know a lot of information to be ready to be home alone. The topics shared here can prepare your child to be home alone. When you're ready, review this with your child. It will help you make this decision together. And that can lead to a better experience for everyone.

Children Mature at Different Rates



Every child is different. Some children are afraid to sleep at another child's house. Other children at the same ages have no hesitation. There's no right or wrong way for kids to mature. And there is no one age when children are ready to stay home alone.

General age guidelines

You have a lot to think about as you reflect on your child's readiness to stay home alone. For example:

- What is your child's age and maturity level?
- Does your child have any intellectual or psychological issues, mental health concerns, or physical problems such as an illness or a disability?
- How easily can you or an emergency contact be reached? Can your child make emergency contacts by phone or in person when the child is home alone?

Leaving children at home alone involves some risk. The goal is to avoid situations that could put a child at risk physically or emotionally. Do whatever you can to lower these risks.

The ages shared here are general guidelines. To stay home alone, many children may need to be older than the ages in these guidelines. For some children, this decision depends on whether an adult will be nearby and whether the child will be caring for other children at home with them.

Here are general age guidelines. Children:

- Under the age of 8 should **never be left alone** for any period of time.
- Ages 8 to 10 may be **left alone for less than** three hours.
- Ages 11 to 13 may be **left alone for less than** 12 hours. Often, children of this age should start with 2 to 3 hours and build up to longer periods of time based on their comfort and individual needs.
- Ages 14 to 15 may be **left alone for less than** 24 hours.
- Ages 16 to 17 may be **left alone for a longer time** if there is a plan in place about how to respond to an emergency.

See also “What to do in an emergency.”

Your child may be ready when...

As you think about whether your child is ready to be home alone, answer these questions:

- Does your child communicate well? For example, when your child tells you about an event at school, does your child tell you all the important information? Or do you have to ask a lot of questions to learn what really happened?
- Does your child tell you if he or she gets in trouble?
- Is your child responsible for age-appropriate tasks?
 - Does your child make some independent decisions? Examples include choosing what to wear and what activities to do.
 - Does your child get ready for school without supervision? This includes dressing, brushing hair and teeth, washing as needed, collecting homework and books, and so on.
- Can your child handle unexpected situations?
 - How does your child handle a small personal injury, such as a scraped knee after falling?
 - What does your child do when the doorbell rings? If the family rule is for an adult to answer the door, does your child find an adult? If your child is allowed to open the door, does your child check to see who is there before opening the door?

Other things to think about:

- Will your child be caring for younger siblings? If so, typically your child should be at least 11 years old and older than the siblings.
- How long will your child be home alone? It’s important that you honor any time frame. For example, if you tell your child you’ll be home by 6 p.m., the child may worry if you aren’t home by that time.
- How safe do you believe your neighborhood is?
- Will other adults be available when your child is home alone? See also “What to do in an emergency.”

Preparing Your Child To Stay Home Alone



Kids need to know some practical things if they will be home alone. If your child doesn't know how to do these tasks, take the time to teach your child now.

The basic rules

Your child should know:

- Your home address, phone number, and your first and last names.
- How to lock and unlock doors. Ideally, the doors should be locked when your child is home alone. The child should be told not to unlock or open doors unless the child sees a parent, guardian, police or emergency contact who has been called.
- How to work the home security system if you have one.
- The expected safety rules of the house. Common examples include:
 - When to leave the house and yard and when it is OK to have friends in the house and yard.
 - What kind of activities are OK to do for fun.
 - What are acceptable snacks and meals.
 - When it is OK to talk on the phone or be on other devices.
 - How to use the microwave, stove, oven and any other needed cooking equipment.
 - How to use items in your home's first-aid kit.

Also talk about your child's usual daily responsibilities.

What to do in an emergency

Be sure to talk with your child about emergency situations. Your child should know:

- What to do in an emergency. Talk about these common problems:
 - Fire in the house
 - Smoke detector or carbon monoxide detector going off
 - Severe weather and local sirens if your community uses this kind of warning system
 - Stranger coming to the door
 - Power outage
 - Medical emergencies
- When and how to call 911 or your local emergency phone number.
- When to leave the house and where to go in an emergency.
- Which neighbors or nearby friends to call when help is needed quickly. In case the first person isn't available, it's a good idea to list two or three people. Ask for their permission to list them as emergency contacts. Also ask which phone number your child should call.
- Where to find and use emergency phone numbers. Will your child find them on a cellphone, tablet or smartwatch? Will the numbers be posted near a landline phone or somewhere else?
- How to find the emergency contact phone numbers on the device. How does your child think of these emergency contacts? Should they be listed under "Emergency"? Or should they be listed under the person's name using the first name and then the last name? No matter one's age, when a person is under stress, it's important for this information to be easy to find.

Write down this emergency information on a sheet of paper. Include 911 or your local emergency phone number. Add your address and your names, too.

Post this sheet in very visible places. For example, post it on the refrigerator and near a landline phone, if you have one. Many parents also put it in the child's usual hangout places, such as the bedroom and the family room.

The goals for this sheet are:

- For the child to be familiar with the information from having seen it often.
- For the information to be nearby if an emergency happens.

Practice to boost your child's confidence

Talking about these topics is helpful. It's also helpful to act out what to do if an emergency situation arises. For example, pretend that:

- The child is locked out of the house.
- A stranger knocks on the door. The stranger wants to use the phone because the car broke down.
- The child has a small injury, such as could happen when your child takes a hot bowl out of the microwave.

Many families have found it helpful to ease a child into this level of responsibility. For example, leave the house for a short period of time, such as an hour. When you get home, talk to your child about the experience:

- What did your child do while you were gone?
- How did your child feel about being home alone?
- Did anything surprising happen?
- How did your child react to any surprising moments?
- What surprised your child about this experience?
- What does your child wish he or she had known?
- What questions does your child have?

Getting ready to leave

- Talk to your child about how long the child will be home alone. Agree on times to check in while you are gone.
- Review again the ground rules.
- Stock up:
 - Have healthy food and drinks at home.
 - Have all the usual emergency supplies in places the child can easily reach. Be sure your child knows where all these things are and how to use them.
- Childproof your home. Secure everything that could be a health or safety risk, such as:
 - Alcohol
 - All prescription and nonprescription medicines, including aspirin, ibuprofen (Advil, Motrin IB, others) and acetaminophen (Tylenol, others)
 - Guns and ammunition
 - Tobacco
 - Car keys
 - Lighters, matches and fire starters

Final Thoughts

It is a big responsibility for a child to stay home alone. With good preparation, it can be a very successful experience for your child. It could even give a boost of confidence that will help your child become more responsible in other areas of life as the child grows up.

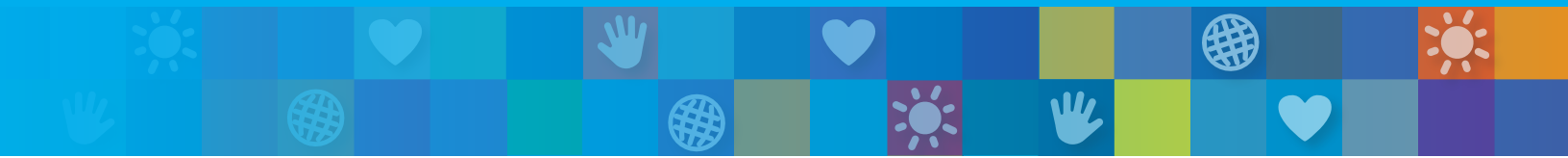
Keep the lines of communication open. If your child reacts with worry or questions that concern you, it's OK to wait a while before you try this again.

For more information

If you have questions after reading this, contact your child's health care provider.



Notes



This material is for your education and information only. This content does not replace medical advice, diagnosis or treatment. New medical research may change this information. If you have questions about a medical condition, always talk with your health care provider.

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BARBARA WOODWARD LIPS PATIENT EDUCATION CENTER

Mrs. Lips, a resident of San Antonio, Texas, was a loyal Mayo Clinic patient of more than 40 years and a self-made business leader who significantly expanded her family's activities in oil, gas and ranching. Upon her death in 1995, Mrs. Lips paid the ultimate compliment by leaving her entire estate to Mayo Clinic. By naming the Barbara Woodward Lips Patient Education Center, Mayo honors her generosity, her love of learning, her belief in patient empowerment and her dedication to high-quality care.

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