

A Family Guidebook



*Supporting Development of
Newborns and Infants*



This guidebook and others are available at
www.earlyintervention.alaska.gov

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*This guidebook was adapted from the Colorado Department of Human Services, Early Intervention Colorado.
www.eicolorado.org

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Introduction

This guidebook is provided to you by Alaska's Early Intervention/ Infant Learning Program, a program for infants and toddlers birth through two years of age who have special developmental needs. If you or someone who cares about your child has concerns about his or her development, the Early Intervention/ Infant Learning Program is here to help. You can request a free evaluation at any time to answer questions about your child's development and determine whether your child may benefit from early intervention supports and services.

To get connected to your local early intervention program, call 1-877-477-3659 or visit
www.earlyintervention.alaska.gov

If you are already connected to your local Early Intervention/ Infant Learning Program, the information in this guidebook may be particularly helpful as your family works to develop your child's Individualized Family Service Plan (IFSP). To learn more about the IFSP development process as well as to obtain additional information about the early intervention system in Alaska, there are informational videos and brochures available. You can download these resources at the Alaska Early Intervention website www.earlyintervention.alaska.gov or you can request pre-printed copies of the brochures by contacting the Early Intervention program in your community (1-877-477-3659).

The purpose of this guidebook is to help you understand how babies grow and how important you are in helping your baby's development. The information in this guidebook can be used for all babies, including those who are in a neonatal intensive care unit (NICU)

The Building Blocks of Infant Development

In the months following the birth of your baby, you will see amazing changes happen right before your eyes. You will see more skills develop during the first three years than at any other time in your baby's life. Even if your baby was born early or with medical concerns, you will see how much he wants to learn about the world when he looks at, listens to, and touches you and things around him. He will also begin to tell you what he needs through his activity, will show delight getting to know you, and will begin to get around on his own.

Many of these skills will develop over the first year, when babies are working hard at laying the important building blocks for later development. Building blocks for newborns and young BABIES include becoming steady and organized in their:

- **B**ody function organization
- **A**wake and sleep times
- **B**ody movement
- **I**nteractions with people
- **E**ating
- **S**elf-soothing



You play the most important role in helping your baby to have a solid and secure start. Your baby will tell you both what is easy and what is hard for him as he tries to handle each developmental building block. You can help him become steady in his growth by understanding how he communicates with you and then providing what he needs.

Body Function Organization

A young baby works on keeping his breathing, skin color, and temperature steady when he is touched and held. Even when sound, light, or activity levels around him change, he is able to keep his body steady. Other signs of organization are:

- Having regular breathing and a regular heart rate

- Digesting food
- Urinating and defecating

During pregnancy the mother's body controls all of her baby's body functions. After the baby is born, those functions need time to adjust and become steady. If your baby started out in a hospital NICU (a special nursery for infants born early or who need extra medical care), medicine and machines may have kept these body functions regular. It takes weeks and sometimes months for babies to keep those body functions steady, especially when they are born early or have medical complications.

Many babies are sensitive to loud sounds, bright lights, being handled, or activity around them. You may see these babies react by a change in their breathing or skin color. Gagging, hiccoughing, or bowel movement straining might also show that babies are sensitive to what happens around them.

Here are some examples of how you might expect a typical infant to show body function organization:

- Keeps a stable pink skin color except when crying
- Breathes evenly, regularly, and without too much effort (about 40–60 times a minute)
- Does not have long pauses (more than 10–15 seconds) between breaths
- Has several wet diapers every day
- Has a dirty diaper at least once a day
- Recovers quickly after getting the hiccoughs

When babies have steady body functions, it provides solid building blocks for:

- Adjusting to new experiences
- Being with sisters and brothers
- Living in a house with a busy family
- Being touched, moved, and handled
- Adjusting to change
- Listening, looking, and following



Awake and Sleep Times

Being awake to look at parents' faces, listen to voices, and take in the world are parts of baby activity that help build the foundation for later learning. Throughout the first year, a baby's sleeping and waking times are still developing, and she may not have predictable times, or cycles, when she is awake and asleep. Sleeping for longer times and sleeping through the night also take time to mature and may take a few weeks to many months to become regular.

Medical complications in the newborn period and early birth can further disrupt the development of regular sleep cycles. Babies may not sleep through the night until they are well into their first year, and when they do sleep it may be for only short periods of time. For these babies, it can be hard work to wake up and look at people's faces and listen to their voices, especially when there is a lot going on around them. Babies might be overwhelmed with too much to look at and listen to and may instead close their eyes and stay asleep, turn away, or become fussy.

Here are some examples of how you might expect a typical baby to manage sleeping and awakening:

- Has times when you can count on her being awake and times when she will sleep
- Sleeps 3–4 hours at a time, especially at night
- Wakes up gradually, not by crying suddenly

- When she cries, can be helped to wake up with some support like talking to her or picking her up
- Goes to sleep on her own when she is sleepy and can be put into her bed and stay asleep
- Wakes up when it is time to eat
- Wakes up to sudden noises but is able to "tune out" or ignore other sounds that happen over and over

When babies have steady waking and sleeping patterns, it provides solid building blocks for:

- Sleeping through the night
- Having stable sleep cycles, which means having sleeping and waking times that are similar day in and day out
- Storing energy for play
- Looking and listening
- Paying attention
- Learning about the world
- Being able to pay attention to important things in the environment and ignore things that aren't as important
- Being a social partner with a caregiver

Babies work hard in the first months after birth to sleep, wake up, and stay awake both at the same time and for the same amount of time. They manage to go from drowsiness to light sleep and deep sleep; they also manage to wake up and become alert, although they may be fussy at first. Eventually, they do all of this smoothly. They show that their sleeping and waking times are maturing by waking up for eating as well as by staying asleep even when it is noisy. When they are awake they begin to learn by looking at their parents' and other people's faces, listening to voices, and taking in the world.

Remember, when babies are put down for sleep, they need to be on their backs, not on their tummies even if that's how they slept in the hospital.

Other body movements you might have heard about that babies do are called reflexes. Reflexes are responses of the baby when they are touched or stroked on a part of their body. For example, when the baby's cheek is touched or stroked, the baby's mouth moves in that direction. Another example is when either the palm of the hand or under the toes is touched, the baby will grasp with their fingers or toes. There are other terms or definitions you may have heard that describe movement. Tone is a word that refers to the body's being either limp or floppy, stiff or relaxed. Words like "hypotonic" (limp) or "hypertonic" (stiff) are sometimes used to describe a baby's tone. Posture is another term used to talk about body movement. Posture is how the baby's body is when at rest and when handled. Words like "flexed" (bent) or "extended" (stretched out) are sometimes used to describe a baby's posture. Sometimes babies also have movements that are described as tremors, startles, and twitches. Tremors are quick repeating movements and can be seen in the face, tongue, arms, hands, legs, or feet. Twitches are usually just one or two sudden fast movements of each of the body parts, as well as the body. Startles are sudden whole body responses that typically occur with handling or sound but can sometimes happen without any clear reason.

Body Movement

Babies come out of their mother's body, where they were surrounded by fluids, into a world that takes some time to get used to. Over time, babies gradually get better at moving smoothly and without too many supports like being swaddled in a blanket. They become better at snuggling their bodies into the bodies of their parents and caregivers and adjusting themselves to be comfortable.

Babies who are born early, or who spend their first days, weeks, or months in a hospital may move differently or get themselves into body positions that are different from those of typical babies. Sometimes this happens because these babies have not been carried or held as much as babies who were born on time and went home right away. They may have been in bed for long periods of time, or may have had medicines or treatments that affect their movement. These babies may also be especially sensitive to touch and to being moved.

Here are some examples of how you might expect a typical infant to move:

- Stays in a softly bent position most of the time
- Brings his hands together in front of his body
- Keeps his arms and legs tucked into his body most of the time
- Has less jerky movements and more smooth movements
- Begins to reach toward caregivers
- Touches his own head, body, hands, and arms—later feet and legs
- Molds or snuggles into a caregiver's body when held
- Is able to move both sides of his body equally well

When babies have steady body movements, it provides solid building blocks for:

- Snuggling up to mom and dad and other caregivers
- Holding their head steady
- Reaching for parents' faces and then later for objects
- Rolling over
- Sitting

Interactions with People

Being with people is a basic building block for social and emotional development and starts when a baby begins learning her mother's voice and movement patterns before being born. Even the mother's smell and taste of skin and breast milk are known to the baby and help lay a foundation for early attachment. Babies come ready at birth to listen to their parents' voices and look at their faces. They can even imitate their parents' frowns and smiles as if they were having a conversation. Early and regular close and private times between a mother and her baby are important. Through intimate experiences, babies learn to trust that their parents will protect, care for, and love them.

Babies born with medical and developmental concerns may be so sick and not developed enough that they have few good times for interacting with their parents. Their parents, in turn, may not know how to talk to, touch, and hold their baby or feel comfortable doing so. At first, simple touching, holding, and providing mother's smells and tastes of breast milk can help an infant begin to interact. Later, when the baby opens her eyes and can stay awake, her parents can help her build skills and trust by just looking at her quietly. For quite a while after birth some babies are easily overwhelmed by sound and light or when they are moved. In these cases, caregivers need to match their interactions to the baby's energy level, how tired or awake they are, and need for "time-outs."

Here are some examples of how you might expect a typical baby to interact:

- Becomes alert for short periods of time
- Turns her head toward the sound of her parents' voices
- Follows her parents' faces from side to side with eyes and then head
- Changes her facial expression during interactions
- Decreases her arm, leg, and body movement when her parent comes close and talks softly
- Begins to smile at her parents' faces at about 6–8 weeks after due date
- Starts making sounds in her throat and then with her mouth
- Copies facial expressions
- Starts simple turn taking by "talking" to caregivers and then waiting for the caregivers to respond

When babies have steady interactions, it provides solid building blocks for:

- Looking and listening to people
- Paying attention
- Finding sounds and voices by turning their head or following a caregiver with their eyes
- Tracking or following faces and toys with their head and eyes
- Learning cause and effect
- Trusting in people
- Reacting to things that look or sound different from what they expected
- Learning object permanence—that things that disappear from sight still exist
- Having stranger anxiety—they notice the difference between people who take care of them all the time and people they don't know (strangers) and may get upset when strangers try to hold them
- Communicating
- Feeling secure and comfortable
- Developing language



Credit: Joy V. Browne, UCDHSC



Eating

Eating is one of the most complex skills that a baby must master. It develops during the first few weeks and months after birth and requires that babies not only wake up and stay awake but also get milk from the breast or bottle to their tummy (sucking and swallowing) while continuing to breathe. They must also handle being moved and held while interacting with the person who feeds them. When a baby is fed, all of his senses are stimulated in an organized way. Taste, smell, touch, hearing, and vision are all important for successful eating. Feeding also provides a time for the baby to feel close to the person feeding him while his stomach is getting full. That is why it is important for eating times to be enjoyable and predictable.

How feedings go early on may affect how feedings go in the future. Babies who begin their lives in the hospital sometimes don't have typical pleasurable eating experiences. They might have been fed before they were able to manage sucking, swallowing, and breathing, making the eating experience feel overwhelming. Many have had painful things happen to their faces which make them try to avoid anything coming near their mouths. Also, they may have had medical conditions that made eating a hurtful rather than a nurturing experience. Many of the babies who are born early or who have medical complications at birth struggle to develop pleasurable feeding and go home from the hospital still having eating difficulties.

Here are some examples of how you might expect a typical baby to manage feeding:

- Wakes up to eat at regular times
- Turns head toward a bottle or breast touching his face, opens his mouth, and grasps the nipple
- Shows excitement before eating begins and becomes less excited as he becomes satisfied
- Has steady breathing and color during eating times
- Grasps and explores with his hands while eating
- Has a steady pattern of sucking, swallowing, and breathing while eating
- Looks at his caregiver's face while eating, especially as the feeding progresses into a relaxed interaction
- Becomes relaxed as his tummy fills and may drift off to sleep

When babies have steady early eating experiences, it provides solid building blocks for:

- Growing and gaining weight
- Feeling secure, satisfied, and nurtured
- Eating other foods like strained foods, soft solids when he is older
- Using a spoon and drinking from a cup and sipping from a straw
- Feeding himself
- Having table manners
- Having social interactions while eating

Eating is complex and might help us understand how the baby is developing. Babies gradually develop more sophisticated eating skills over time, but it takes a sensitive caregiver to help them, especially if they were born early or had medical complications around the time of their birth.

Self-Soothing

Self-soothing is the ability of babies to calm themselves down with less and less help from their caregivers. Other words for this are self-regulation. At first, babies need help from their caregiver to both calm down and wake up. Some also need their parents to protect them from loud sounds, bright lights, too much handling, and other activities that overwhelm them. Over time most babies become better able to manage all of this stimulation and soothe themselves. Babies who can calm themselves can also better manage stress when they are uncomfortable, which helps them become steady. Babies show that they are self-soothing in many ways, for example when they suck on their hand, brace a foot on the side of the bed, or grasp a blanket.

Babies who are born early or have medical complications at birth may be more sensitive to the environment and may react in many ways. For instance they may become fussy or withdraw. For very sensitive infants, even looking at people's faces and listening to their voices may cause them to look away, change their breathing, go limp, or extend their arms and legs. When babies become overwhelmed, they need their parents or caregivers to step in and help them with their regulation. Many times it will be hard even for caregivers to soothe them. Gradually, over time, caregivers need to help a baby learn to become calm using her own self-soothing skills.

Here are some examples of how you might expect a typical infant to self-soothe:

- Calms when talked to or given a pacifier
- Brings her hands to her face, head, or mouth
- Braces her feet on the bed, bedding, or the caregiver's hands
- Looks at her parent's face to help herself calm down
- Looks away from faces or objects that are too overwhelming
- Settles herself to sleep on her own when put into her bed

When babies have become good at self-soothing, it provides solid building blocks for:

- Looking and listening
- Becoming emotionally steady
- Coping with stressful events and places
- Controlling their own behavior
- Sitting still
- Paying attention
- Learning



Credit: Joy V. Browne, UCDHSC

In order for a baby to be available for learning about her parents, family, and world, she needs to begin to learn to calm herself and be alert for interactions that are typical for infants. The ability to signal what she needs, like being hungry, wet or sleepy, and gradually calming down from crying or fussing, begins to lay the building blocks for adjusting to many situations, places, and people.

Caregivers who recognize when their baby is becoming overwhelmed, and know how to begin to help them to use their self-soothing skills, can lead their infants to learning to manage the world around them.

What Parents and Caregivers Do and How Early Relationships Develop (PreSTEPS)

- **P**redictability and Continuity
- **S**upport of Self-Soothing
- **T**iming and Pacing
- **E**nvironmental Support
- Supportive **P**ositioning, Handling, and Movement
- **S**leeping, Awake Time, and Social Relationships

Babies develop best when they are nurtured by their parents, family members, and close friends. Having a close relationship with your baby means that you are aware of her needs and can respond to them. Each time you are with your baby, you pay attention to her and respond to her special signals. Her behavior gives you clues to how you can change the environment, slow things down or speed things up (change your rhythm), or give her different amounts of support. You also are flexible in how you respond since different things may work at different times. When you respond to your baby each time she needs you, it lets her know that you are always there to support her

development. Parents sometimes worry that if they respond to their baby each time she cries or fusses it might spoil her but that's not true. Babies count on the adults who take care of them to respond each and every time. Responding to babies, holding them a lot, and paying close attention to them does not spoil them—instead, it helps them grow up trusting others which helps them become better at soothing themselves.

Through daily contact with the same close circle of caregivers, babies learn to trust others. They also learn what to expect next, how people respond when they signal that they need something, and how good they are at getting their needs met. Over the first few weeks and months after birth you will respond to your baby thousands of times. The interaction you have with your baby will include paying attention to her and responding to her signals. This process will help create the special and highly important relationship you have with your baby.

You can show your baby that you are there to respond to her unique needs in many ways. PreSTEPS stands for the ways that parents and close caregivers help babies and include: Predictability and Continuity (Pre); Support of Self-Soothing (S); Timing and Pacing (T); Environmental Support (E); Positioning, Handling, Supportive Movement (P); and Sleeping, Awake Time and Social Relationships (S).

Thinking about PreSTEPS will help remind you of the things you can do each day to support your baby's development.



Predictability and Continuity

Predictability and Continuity describes all of the ways that you keep things the same for your baby and how you create routines that help your baby develop a sense of trust in others. Babies develop best when they have a world that is safe, organized, and consistent. When you create such an environment you teach your baby about what happens next, what to expect, and how to respond to what happens around them.

Things that you can do to create predictability and continuity:

- Prepare your baby for what will happen next by using your voice, your touch, and the way you move. You might tell her with words or use a familiar signal—for example holding the pacifier up for her to see before giving it to her.
- Before you start to do something that is new for your baby you might touch her gently to let her know about the change or simply that you are there.
- Having the same things happen at the same time of day and in the same place also creates a predictable and safe environment for babies. For example, feeding your baby in the same chair, in the same room, at the same times each day helps her know what to expect so that she feels safe and comfortable.
- When you do the same things in the same way over and over again, your baby learns to trust that you will come when she needs you and that you will take care of the things that she needs.
- Letting other people know how to take care of your baby and encouraging them to do it the way you do also helps keep things familiar for your baby.



Dear Family:

Thank you for taking such good care of me. You let me know that something will happen by telling me about it or touching me gently before you start. Even though I'm little, having things happen at the same time each day helps me learn what will happen next. I like my routines and the schedule you have for me. You also make sure that the same few people are with me almost every day. You know what I like and what I don't like, and you tell my likes and dislikes to other people who take care of me and what I might do in different situations. I like it when everyone who takes care of me does the same things in the same day.

Support of Self-Soothing

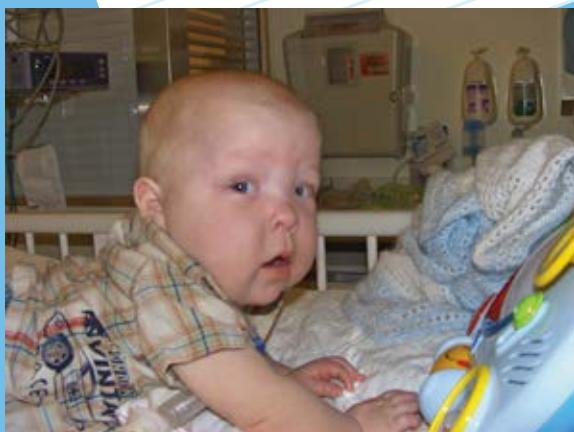
Support of Self-Soothing describes how you would help a baby keep himself steady and learn how to calm himself and quiet down, even after being upset. When you help your baby stay calm and steady, he can pay attention to the world around him, learn, and interact with people. At first babies need grown-ups to help them calm down. Eventually, they learn how to calm with less help and how to keep themselves steady.

Dear Family:

Thank you for helping me learn how to keep myself steady. You tell me and other people around me all about the things that I do to keep myself calm. You give me extra support during times when I'm tired or feeling overwhelmed. And you always know what position to put me in to help me use my own skills to stay calm and steady. I love how you offer me your own body, voice, and face so that I know I can do it by myself when I listen to you or look at you and feel the support of your body.

Things that you can do to support self-soothing in your baby:

- Notice the things that your baby already does to keep himself calm and steady. For example, he might be getting his fingers to his mouth, grasping your finger, or looking at your face.
- Think about how good your baby is at keeping himself self-calm and steady.
- Know how your baby tries to keep himself calm and steady in situations that are different or overwhelming for him, especially when he is tired.
- Put your baby in positions that will help him to use his own skills to stay calm and steady. For example, swaddle him in blankets with his hands near his face so that he can get his hands to his mouth, or lay him on your lap so that he can push against your body with his feet.
- Use your body, bedding, or other supports to help your baby have successful efforts at calming himself. For example, offer your finger or blanket for him to grasp or give him a pacifier to suck on.
- Use your body, face, and voice to help your baby stay calm and steady. For example, talk softly so that he can hear your voice, or let him look at your face to help him calm down.



Credit: Joy V. Browne, UCDHSC

Timing and Pacing

Timing and Pacing describes how you pay attention to your baby's reactions and give her a chance to respond to what's happening around her. When the timing of your actions matches what your baby needs, you help to keep your baby's body functions, movement, sleep patterns, and interactions steady. You also help your baby feel more in control when you let her make a response to something that happens around her, notice her response, and then you decide what to do next based on her signals. Your baby has more energy to be involved in what is happening to her when these things happen during awake time. For babies with special health care needs, having too many things happen at once or having things happen when babies aren't expecting them can be especially overwhelming.

Things that you can do to time and pace interactions with your baby:

- Notice how your baby reacts in different situations, like going to the grocery store or being in a noisy room, and see when your baby needs a break. For example, your baby may let you know that she needs a break when her breathing or movements become less steady, or when her color changes. She may also need a break when she yawns, hiccoughs, fusses, cries, looks away, or suddenly falls asleep.
- Do things when your baby is ready for them to be done, like feeding your baby only when she is fully awake, or letting her sleep even if it is her usual bath time.
- Slow things down if your baby shows you that she is having a hard time, for example, by breathing harder, looking away, starting to fuss—or go a little faster if your baby is ready for it. For example, if she looks away when you talk to her, stop talking until she looks back at your face, or if she starts to look at you, talk softly to see how she responds.
- Give your baby a chance to respond to the changes you make before making other changes. For example, let her breathing even out and become more steady after a diaper change before picking her up, or pause a feeding if she starts to go limp.



Dear Family:

Thank you for being there for me. You interact with me when I am fully awake and ready to play. When we are together, you watch me carefully and give me a chance to respond to you before doing something else. You pay attention to how I act and slow things down when I get overwhelmed. You give me a chance to catch my breath. If I don't need to have something done right away, you let me sleep when I'm tired and wait to do it until I wake up. You also figure out when the best times are to do things like eating, playing, and taking baths. When you are getting ready to leave me, you do it slowly and carefully so that I stay steady and calm. And even when you are finished with what you need to do, you stay with me until you are sure that I am ready for whatever is next.

Environmental Support

Environmental Support describes how a baby's surroundings can affect him whether he is sleeping, playing, interacting with people or during any other activity.

Dear Family:

Thank you for being creating an environment that is dim, quiet, and soothing, and not busy for me to rest in. You always make changes when I need you to, like when a bright light is shining at my face or when the television is too loud. When I am awake and ready to play, you give me wonderful things to look at. I especially love looking at your faces. If I am sleepy, you quiet yourself down and let me get some rest. You also notice and help other people notice how I am affected by things around me. And, you try really hard not to take me around to too many busy places or be cared for by too many other people.



When you pay attention to how sound, light, and activity affect your baby, you can tell what kinds of situations your baby will do best in. You have probably noticed that your baby likes quiet, soothing environments. Depending on how the surroundings affect your baby, you can make changes to help keep your baby steady and safe.

Things that you can do to provide environmental support for your baby:

- Notice how your baby responds to things around him. He may react to loud noises, bright light, or get overwhelmed with too much activity around him. You might notice that he startles, pauses in his breathing, becomes fussy or goes to sleep when the environment is too overwhelming for him.
- Notice how your baby responds when you make changes to his surroundings. Your baby may open his eyes if you dim the lights or he may eat really well when you find a quieter place to feed him.
- Prepare ahead of time—get things ready for the activities that you have planned so that you and your baby have everything that you need nearby.
- When your baby shows signs of being overwhelmed, help create a calm and soothing environment by decreasing noise, light, and activity levels.
- Going to loud, bright or very busy places like grocery stores or amusement parks might be too much for your baby to manage. Think about how he might be cared for at home by a familiar caregiver when these trips are planned.

Supportive Positioning, Handling, and Movement

Supportive Positioning, Handling, and Movement helps caregivers understand how babies respond to being touched and having their bodies moved around. When you know how your baby likes to be touched, you can make changes that help support her development of steady body movement. When babies are moved, they can sometimes become unsteady. They might change the way they breathe, wake up or fall asleep suddenly, or react with stiffness or limpness. Providing your baby with support during movement or touch helps keep your baby steady in many of those basic building block areas.

Things that you do to support positioning, handling, and movement for your baby:

- Keep your baby in a tucked, softly bent position with her arms and legs close to her body, especially when she is being moved and when you are settling her in.
- Move your baby when she shows that she is steady and ready to be moved. Move her slowly and give her a chance to react to the movement before continuing.
- Take turns with your baby, wait for her response and support her to stay steady while you are moving or touching her.
- Use blankets or your body to help keep your baby in a softly bent position. Before your baby goes to sleep, remove any blankets, toys, or other objects from her bed.*
- Be sure to use an approved car seat that is right for your baby's size. Place the car seat in the back seat of your car when taking your baby out for a ride and be sure to follow the manufacturer's directions for installing and using the carseat. Ask your doctor or home health care provider if you have questions about how to transport your baby.
- When your baby is awake, offer a variety of positions. For example, place her in your arms, up on your shoulder, or on her back, sides, or tummy. Being in a different position promotes body movement and posture development.

***Be sure that when you put your baby down for naps or at night that you position her on her back for sleep.**



Credit: Joy V. Browne, UCDHSC

Dear Family:

I love when you hold and touch me. Your gentle hands and your supportive body help me feel safe and steady. When you keep me tucked in I feel really cozy. You take the time to move me slowly and carefully, moving my head and my body at the same time and using your own body to support me. Whether you hold me up against your skin or wrap me in a blanket and hold me close, your touch means so much to me. You wait for me to let you know how things feel before going on. And when you can't hold me anymore, you tuck me in so that my body feels really comfortable. When you put me down to sleep you make sure that I'm on my back so that I'm safe and can sleep soundly. You also make sure that I'm safely tucked in my car seat when we go out for a ride.



Dear Family:

I love opening my eyes and seeing your smiling faces looking at me. Thank you for noticing when I am awake and being ready to play with me. You give me breaks when I need them and don't do too many things at once so that I don't get overwhelmed. I like it that you protect my sleep and wait until I'm awake to do things like changing my diaper. When I am awake, you talk to me, smile, laugh, and play. If I start getting upset, you let me know everything is going to be okay and help me get calm again.

Sleeping, Awake Time, and Social Relationships

Sleeping, Awake Time, and Social Relationships describes how and when babies are available to interact with their environment. Babies learn by interacting with people and the world around them. For weeks after they are born they are still developing good sleep habits and smooth transitions from sleep to waking. How do you know when your baby is ready to play? Ready to sleep? What happens when your baby looks at you and smiles, or makes little noises and responds when you make them too? What signals does your baby use to tell you that he isn't ready for interaction? All of these questions have to do with your baby's daily cycles including when he wakes up, when he sleeps, how much energy he has for interacting with people, and how he learns by looking and listening.

Things that you do to support your baby's sleep and awake times and encourage interacting with people:

- Notice if your baby is asleep or awake, tired or ready to play.
- Notice how your baby's behavior changes between asleep and awake. Is it gradual or very sudden? Does it take your baby a long time to wake up? Does he wake up in time for important activities like eating? When you know your baby's patterns and routines, you can find the right time to interact with your baby.
- Provide a quiet, dimly lit space for your baby to sleep in. Keep noise and activity levels down.
- Interact with your baby when he is awake and comfortable, including doing things like changing his diaper and giving him a bath.
- Give your baby things to look at and listen to—the best thing for your baby to see and hear is your face and voice.
- Be patient with how long it takes for your baby's sleep and awake times to become predictable. Babies can take weeks and months to sleep through the night or have longer periods of awake times for play, especially if they were born early or had lots of medical complications.

References

- Als, H. and Gilkerson, L. (1995). Developmentally Supportive Care in the Neonatal Intensive Care Unit. *Zero to Three* 15 (6): 1–10.
- Als, H. and Butler, S. (2006). Neurobehavioral Development of the Preterm Infant. In Martin, RJ, Fanaroff, AA, & Walsh, MC (Eds.) In *Fanaroff & Martin's Neonatal Perinatal Medicine: Diseases of the fetus and the infant*, 8th Edition. Philadelphia: Elsevier Mosby.
- Browne JV, MacLeod A. & Smith-Sharp, S. (1996). Family- Infant Relationship Support Training. Denver, CO: Center for Family and Infant Interaction.
- Hofer, M. A. (1994). Hidden regulators in attachment, separation, and loss. In N. A. Fox (Ed.), *The development of emotion regulation: Biological and behavioral considerations*. Chicago, IL: Society for Research in Child Development.

Kelly, J.F. & Barnard, K.E. (2000). Assessment of parent- child interaction: Implications for early intervention. In J.P. Shonkoff & S. J. Meisels (Eds.), *Handbook of Early Childhood Intervention* (pp. 258–289). Cambridge, England: Cambridge University Press.



Resources for Caregivers

Books/Booklets

- *Early Arrivals* by ZERO TO THREE: National Center for Infants, Toddlers and their Families
- *The Magic of Everyday Moments* by ZERO TO THREE: National Center for Infants, Toddlers and their Families
- *Your Premature Baby and Child* by Amy Tracy and Dianne Maroney
- *Parenting Your Premature Baby and Child: The Emotional Journey* by Deborah Davis and Mara Tesler Stein
- *The Scientist in the Crib* by Allison Gopnik and Andrew Meltzoff
- *Touchpoints* by Berry Brazelton

Web Sites

- Early Intervention/ Infant Learning Program
www.earlyintervention.alaska.gov
- Getting to Know Your Baby by Kathleen VandenBerg, Joy Browne, Linda Perez, and Amanda Newstetter. Available at: www.specialstart.ucsf.edu/sstp/download/getting_to_know.pdf
- March of Dimes
www.marchofdimes.org
- Early Childhood Technical Assistance Center
www.ectacenter.org
- Zero to Three
www.zerotothree.org



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**State of Alaska • Department of Health & Social Services • Senior and Disabilities Services
Alaska Early Intervention • Infant Learning Program**

For more information about Alaska's early intervention system, call

1(877) HSS-FMLY (477-3639)

or visit

www.earlyintervention.alaska.gov



06/2019