

Growing Together

i n f a n t d e v e l o p m e n t

What is Normal?

Like snowflakes, no two infants are exactly alike. A own rate. However, we sometimes expect babies to do the same talk, etc.) at the same time.

Parents often worry about whether a child is developing at a “normal” rate, without realizing that the average ages given for certain developmental stages are just that - averages that can vary as much as six months from one child to the next. The key is not to compare your child to others. Think of your child as the individual he or she is, and accept the differences that make every child unique.

Social Development

Infants learn about the world through touch, sight, sound, taste, and smell. They learn about relationships from how people touch and hold them, and from the tones of voice and facial expressions people use when caring for them. When babies have their needs met - being fed when hungry, comforted when crying, held and touched gently, and kept warm and dry - they begin to trust the adults that care for them. This early sense of trust will help them develop positive relationships for the rest of their lives.

If adults handle a baby roughly or if they always seem anxious and irritated when they feed and diaper an infant, that child may learn that being with other people is not a pleasant experience. A basic sense of trust will not develop and the child may have difficulty relating to others.

Key Points

Social Development

Use gentle touches. An infant's first relationships can set the pace for relationships that will come later in life. Use eye contact and always talk to the baby so he or she will begin to know these as ways of communicating.

Physical Development

Newborns usually cannot lift their heads. When on their stomachs, their heads will turn to one side. Although newborns cannot roll around, some infants may move their body the entire length of a crib by thrusting with their feet and legs.

Because a baby cannot hold up his or her head, you must gently support the neck and head when you pick up or carry a baby.

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A 3- to 4-month-old baby (remember these are average ages) will begin to look around more, prop up on the chest and start to twist as he or she learns to roll from stomach to back and back to stomach. By about 4 to 5 months, the baby will try to grasp for an object, and watch his or her feet kick and move when placed on his or her back.

When you see a baby suddenly jump or twitch for no apparent reason, you are looking at the “startle” response. This is common in newborns and simply means that the nervous system is continuing to develop. Never shake a child or throw a baby playfully in the air because it could harm his or her nervous system.

As infants mature, they begin to explore and move by creeping, crawling, pulling themselves up, and walking. They practice their new physical skills when they grasp, touch, hit, roll, and grab objects.

A baby needs to visit a health care provider regularly. Whether it’s a person in private practice or a community clinic, someone in the medical profession needs to give proper vaccinations and watch over a child’s growth, development, and weight gain.

Key Points

Physical Development

Physical development is quick. Never leave an infant alone in what could be a dangerous position. Your baby may not have been able to roll over and fall off the changing table yesterday, but that doesn’t mean he or she couldn’t do it today. Even playful shaking or throwing can be harmful. Give the infant safe and clean toys to hold, rattle, and see. Check with a health provider about shots and growth.

Cognitive Development

Infants use all their senses to learn about the world. They “talk” with others through actions and sounds, and experiment with objects and noises. They enjoy watching the results of their actions. This is how children learn, make sense of the world, and learn to communicate. When babies coo, babble, and interact with others, they are developing language skills.

Children quickly begin to understand the meanings of symbols - that a smile and pleasant tone of voice mean the person speaking to them is happy, that dimming lights mean it is naptime, and that putting on a coat means a trip outside.

Young children think that when they cannot see someone or something, that it is gone forever. When important people in their lives leave, they do not understand that they will return. This period of development is hard on parents and children.

Parents can make these times less stressful by letting a child hold and keep personal objects, such as stuffed animals, blankets, or a family photo. Around the second year of life, children begin to form mental pictures of objects, and that makes it easier for them to say goodbye to moms, dads, and other people they care about.

Key Points

Cognitive Development

Talk to your children in the same way that you want them to learn to talk to you. Use signals and routines to help children understand what you want. For instance, dim the lights before naptime, read a story or turn on a lullaby tape before bedtime each night, or talk to them about where you are going and what you will do when you get back to help them prepare for you to go. Give your child a soft blanket or stuffed toy for comfort, if necessary.

Setting Limits

Infants are not born knowing right from wrong. They must learn by watching others and through trial and error. Once a baby begins moving around the house, he or she may find a world full of “no-no’s.”

All children are naturally curious about the world around them. Without the desire to explore, children would learn very little. Before your infant begins crawling or pulling up on tables and chairs, childproof your home. Making your home safe for your child to explore will help keep this stage of development pleasant and safe. Cover electrical outlets with plugs or tape, keep pathways through the house clear, move breakable

objects and plants to high shelves (but make sure the shelves are sturdy), and use gates at stairs and doorways.

Make rules and limits appropriate for the age of your child. In other words, don't expect an infant to understand the meaning of everything you say or to be able to do everything you may want.

Set limits that you're sure your child can understand. Use single words and a firm tone of voice. Give gentle reminders, and be understanding when your child forgets. This will let your child know, in a positive way, that you care about his or her behavior.

Key Points

Setting Limits

Childproof for safety and peace of mind. Be consistent and clear.

Accept the fact that you will have to repeat things; that's part of teaching.

Sleep

Newborn infants do not have regular sleep patterns. It usually takes six to 10 weeks for development of a good, 24-hour schedule, with the longest period of sleep at night.

By 3 months of age, most full-term, healthy infants probably are sleeping through most of the night. If your infant hasn't settled into a good sleep pattern by 5 or 6 months, take a close look at bedtime routines. Are they the same each night? Does a warm bath help? Is the child hungry? Would a "security" blanket or soft toy help?

Key Points

Sleeping

Expect your infant to fuss at bedtime; it is part of the learning process.

Children must find a way to soothe themselves.

Set up a routine for bedtime so that children will know what to expect.

Keep a chart and schedule of sleep and wake times, if necessary, to design a plan.

Sleep patterns can change when babies are teething, sick, in unfamiliar surroundings, or when families are going through stressful times.

Infants will fuss; this is part of the learning process. They need to learn how to soothe themselves and relax into sleep alone. Infants often move about, search for a fist on which to suck, or cuddle a blanket as they try to quiet themselves and relax for sleep. Objects like a stuffed animal, a toy, or a special blanket will often comfort and reassure a child.

Infants need to learn to rely on their own techniques for going to sleep. When a baby is first learning to go to sleep by him- or herself, parents will probably have to listen to some crying or fussing.

Ten minutes of crying can often seem like an hour, so it is a good idea to actually use a timer. Let your baby cry for 5 minutes, then go in to comfort him or her. The next time your baby cries, wait 10 minutes before going in; then 15 minutes, and so-on. This may be difficult at first, but good sleep patterns now will help prevent sleep problems from developing when your child is older.

Even after infants have settled into a good sleep-wake pattern, these habits may be disrupted by teething, illness, travel, or an upset in the family. It may take several months to settle into the sleep-wake pattern again unless parents work toward a consistent schedule. You may have to help your child deal with anxieties and fears, and you may have to be persistent in setting limits.

As children grow and develop, their sleep patterns and sleep needs will change and the bedtime routines will need to change, as well. With patience and persistence, you should be able to help your child continue to go to sleep alone, and save some quiet evening hours for yourself.

Crying

Normal physical development requires that babies cry. Crying helps improve the heart and lungs. The most important reason a baby cries is to tell you that he or she needs something.

Most parents quite naturally respond to these signals, feeding the baby, changing diapers, holding or cuddling the infant. Many parents wonder if picking up the baby right away will encourage crying for attention.

However, children will generally cry less when parents and caregivers respond to their signals in a sensitive way. A parent who reacts quickly helps to strengthen a sense of trust in the infant.

If an infant who is full, burped, dry, warm, and secure continues to cry, talk to your doctor. The child may have what physicians so often cannot explain or cure - colic. Often you can help a baby go to sleep by playing a tape recording of a continuous, repetitive sound - like running bath water, soft music, or small appliances such as a fan, hair dryer, or vacuum cleaner. (Never leave a running appliance, such as a fan or hair dryer, in the crib with the infant!)

Key Points

Crying

Infants need to cry for normal physical development.

Meet the child's basic needs, Seek help if absolutely nothing works.

Answering a crying infant does not encourage the child to try to Control your actions (yet).

Building Blocks of Infancy

Use this checklist as you watch your baby grow from birth to 12 months.

Important For All Babies

- My baby always rides in a car seat when in a vehicle.
- I have a regular place for my baby's health care (public health clinic, pediatrician, family doctor).

My newborn to 2-month-old

- Has seen the doctor for a 2-week-old checkup.
- Looks at my face when I talk.
- Smiles back when I smile.

My 3- to 4-month-old

- Has seen the medical professional at least two times for well-by check-ups.
- Has gained at least some weight since birth.
- Smiles back at me when I talk or gently touch his or her face.
- Makes sounds like

"0000" and "aaaaa."

- Watches me when I walk across the room.
- Jumps when there is a loud or sudden noise.
- Lifts his or her head and chest when lying on his or her stomach.
- Plays with his or her hands by touching them together.

My 8- to 7-month-old

- Has seen the doctor at least one time for a well-baby checkup since his or her 3-month birthday.
- Has doubled in weight since birth.
- Reaches out to be picked up. 0 Laughs and babbles (saying babababa or dadadada).
- Turns his or her head and looks at me when I talk.
- Rolls from tummy to back and from back to tummy.
- Turns his or her head

toward sounds like the radio, TV, or voices.

- Reaches for and holds a toy.
- Learns about toys by putting them in his or her mouth.
- Sits up with the support of arms in front

My 8- to 10-month-old

- Has seen the doctor at least one time for a well-baby checkup since she or he was 6 months old.
- Has gained weight since she/he was six months old.
- Plays "peek-a-boo" or waves bye-bye after seeing me do those actions.
- Looks at the right person when I say "mama" or "dada."
- Scoots or crawls across the floor on his or her tummy.
- Holds something in each

hand at the same time.

- Stands while holding onto furniture.

My 11- to 12-month-old

- Has seen the doctor for at least one well-baby checkup since he or she was 9 months old.
- Has gained weight since he or she was 9 months old.
- Gives me a toy when I ask for it.
- Shakes his or her head "no." 0 Looks at the right thing when I say words like "bottle" or "ball."
- Pulls up to standing by holding onto furniture.
- Can find a small toy when it is hidden.
- Says "mama" or "dada" to the right person.
- Picks up small things (like cereal) using thumb and forefinger.

By age 2, children should have received the following vaccinations:

- 1 vaccination against measles/mumps/rubella (MMR)
- 3-4 vaccinations against Hib (a major cause of spinal meningitis)
- 3 vaccinations against polio
- 4 vaccinations against diphtheria, tetanus, and pertussis (DTP)
- 3 vaccinations against Hepatitis B

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