

WHY “TUMMY TIME” MAY NOT BE THE ANSWER

By Sarita Gálvez

"Tummy time" is a much discussed topic and trying to make a decision on whether your baby should have tummy time can be tough. Listen to a nurse, tradition or your gut instinct? This is an interesting article exploring tummy time in the growth and development of your baby and discusses a number issues you might like to think about.

“His head will become flat”, said the nurse severely. It was the first thing she said after I told her that I would not place Nahuel on his tummy during the first months. Her comment did not surprise me at all as five years ago I would probably have said the same. About 3 years ago, when my first son was a baby, I tried to follow guidelines that stressed on the importance of “tummy time”, but my son showed me with his body language the discomfort he was feeling and that there was another path to follow. I was confused between my knowledge as a physiotherapist and my feelings as a mum, but I followed my intuition and began my research. Now I feel a little bit more prepared to explain and share the results of my research, which like everything related to parenting, is in constant flux. Like a plant, changing its shape following the light and nutrients that help it to better to continue its growth. However, you will probably keep thinking about the terrible outcome the nurse predicted in regard to my parenting practice. What kind of belief helps you to cope with that awful prediction? Where does this institutional severity come from?

In the early nineties the American Society of Pediatrics (AAP) among other health organisations of the US, started a campaign aimed at reducing the risk of Sudden Infant Death Syndrome (SIDS) and other sleep-related causes of infant death. Evidence suggested a strong correlation between SIDS and sleeping in prone position, in consequence one of the main points of the

campaign was to place healthy babies on their backs to sleep. Even though the important success of the campaign (which reduced by 50% the incidence of SIDS), some evidence suggested there were some negative outcomes as well. Three of the negative consequences are:

1. A rise in the incidence of delay in gross motor skills in children
2. A rise in the incidence of Deformational Plagiocephaly (DP) (This skull deformity results from repeated external pressure to an infant's skull due to the head being in one position for extended periods (e.g. in a cot or car seat))
3. A rise in the incidence of torticollis.

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Considering those negative outcomes, the new aim of the Public System is to prevent them, encouraging families to place their babies on their tummy while they are awake and under supervision, this is widely known as "Tummy Time". In 1994 the AAP launched their new campaign known as "Back to sleep, tummy to play". In an article published in the Journal of Family Practice the author provides this recommendation to practitioners "Stress to parents the importance of tummy time (...) Encourage this practice even if parents report that their infant cries or otherwise appears not to tolerate the prone position" (Robertson R., Journal of Family Practice, Oct 2011, Vol. 60 Issue 10, p605-607, 3p) This means that evidence supports what I was doing with my first son, during his early days of life outside the womb. Nonetheless it was impossible for me to ignore his emotions and not be touched by his appeal to be moved from that position. In my opinion, we should be sensitive and responsive to our children's expressions. What is she or he trying to tell me through irritated cries and body tension?

I found answers when I looked back in time to Eastern Europe. I'm talking about Hungary in the sixties and the paediatrician Emmi Pikler doing her wonderful research on infant development, where freedom of movement and autonomy were an essential part of her propositions. It is interesting that her research never alluded to positional plagiocephaly (or any kind of flat head)

considering that in the Pikler Institute they did not applied “tummy time”, meaning that adults did not placed babies on their tummy and, as a result, the babies explored that posture only when they started to roll through their own motivation and sensorimotor resources. This give rise to the question of why babies who were not exposed to tummy time did not have flat heads or developmental motor delay? In the Pikler Institute there is no plagiocephaly, there is no delay, there is no congenital muscular torticollis. Why? What did they have that made the difference? They had MOVEMENT.

Sadly we are living in a non-movement era. Furthermore, I think our babies are living in the “movement restriction” era. Industry’s aim is to provide all sorts of plastic devices to keep babies in place: contented and “happy” (happy?). In consequence, we are bombed by baby capsules, prams, seats, bumbos, swings, high chairs, walkers, jumpers, humongous baby gyms, among an extensive list of similar paraphernalia. Now if we add to this the time spent in the supine position while sleeping and the long time on any of the big list of devices for “early days”, we will easily find an answer. Recent evidence supports this as researchers have found that the supine position during sleep is not a direct cause of DP, suggesting a much more intricate scenario, where several modifiable post-natal factors such as positioning, slow achievement of motor milestones and “less than 3 times per day in tummy time” may be associated with DP (van Vlimmeren et al, Pediatrics 2007;119:e408). But is more tummy time the answer to this dilemma? I doubt it.

For me, the answer is much more complex and I am sure it goes further into our comprehension of human development, although there is something clear: We just have half of the picture describing the importance of the early movement experience and what exploration means to our children. I am always impressed when scientific literature represents motor development as a lineal sequence of milestones that children must achieve at a determinate age, in the dynamic of “the faster, the better: successful mum” Why is faster better when it comes to motor development? Who said walking at 12 months is better than walking at 16 months? What happened with the process? Is it important? I am also impressed by the insensitive approach that literature

animates in our health practitioners “Encourage tummy time even though babies cry, even though they are in discomfort” What is that? Is there any ethics committee that disapproves of this? I want to believe there is.

I want to believe we can provide a new paradigm for early childhood practices in the Public System. I refuse to accept that almost all Western-inspired countries are encouraging Tummy time daily from the very first day, which certainly is followed by sitting them at 6 months and making them walk at 12 months, with all the deep long term outcomes this practice might cause in the emotional and cognitive development of children.

Does contemporary literature provide evidence of a different approach? Yes it does.

A couple of years ago an interesting multicentric research study conducted by Ariane Cavalier et al. in France suggested that a preventive program following Emmi Pikler’s method of “Unrestricted mobility” (also known as freedom movement) since the very early days post-natal, contributes to reduce the incidence of DP. This scientific evidence provides a different perspective, hence practice in regard to Plagiocephaly and in consequence, early childhood wellbeing (Cavalier et al, Early Human Development 2011;87;537-543)

Let me explain further why Emmi Pikler’s approach is a completely different perspective on early childhood. With her research she dug deep into the importance of movement as an essential dimension of global development, as a result she understood movement as expression, movement as a continuous learning process, movement as the pursuit of freedom and autonomy. Her approach promotes freedom of movement and the importance to assure a safe and nurturing environment for children to explore, where adults’ attitude is crucial. Adults need to be respectful, responsive and cultivate observation rather than intervention, providing an emotionally secure environment where children feel capable from their very early months. Also, space and clothes

are important. Babies, as they become more active and mobile, need a safe environment to explore and comfortable loose clothes that enables movement in all directions. Toys are spread on the floor and should be suitable according to the age group. Last but not least the surface to play is the floor: babies are placed in the floor in their natural first position, i.e. supine position (on his back).

By exercising their body, little citizens also exercise their freedom in space: Freedom to choose and explore following their self motivation. In consequence, they are connected with their environment as active explorers. From the early days their attention focus changes to the different stimuli, rolling their head and then their hips in a natural and spontaneous practice that connects the whole body. After long practice, babies will naturally roll to their side, a position that helps them to prepare to continue with the roll that enables them to explore the world from a different perspective on their tummy. They are protagonists in their own journey where the new posture is an achievement that provides joy and pleasure. In this scenario there is no space to stillness, in consequence, no deformations are likely to appear. This is the scenario of the awareness of movement, a space to discover the use of their selves, a space to thrive.