In the first few months after birth, you and your child experience many rapid and exciting changes together.

In the first 3-4 months your baby begins to release the primitive reflexes that they were born with. The integration of these reflexes determines sensorimotor development, neurological maturity and around 6 months most reflexes should completely integrate your baby’s system and allow purposeful volitional movements. (Directly influences: success with higher level movement and coordination; i.e. handwriting, hand-eye coordination, static balance, body control etc...)

Every baby has their own pace and development is not always linear. We are finding that what propels the optimization of development is movement experiences, and the exposure to social engagement with parents to help assist with the regulation of emotions and uncomfortable situations. (Directly Influences: Self-regulation, socio-emotional skills, tolerating change and transitions, problem solving, vagal tone etc...)

**The Tummy Time Method is a movement-based system to optimize baby's social nervous system, promote neurodevelopmental maturation, and connect babies and families through early play activities.**

Each phase builds from the previous one and like neuro development, one must master each stage to successfully grow and appropriately progress to the next phase. Which is why it is so vital to begin tummy time from the first moment of your child’s life (The Gold standard of Tummy Time during first 2 weeks of life is skin to skin, on mom’s or dad's chest).

Your baby is born in the fetal position and remains in it for the first month or so of their life. Should they receive the appropriate conditions allowing them to explore their environment safely, you will notice successful development and increased comfort and ease laying on their tummies. (Directly Influences: working out asymmetries, development of symmetrical facial features, maturing balance receptors in inner ear, efficient auditory processing etc...)
TUMMY TIME + HEAD MOVEMENT AS A BASIS FOR DEVELOPMENT

Your baby’s ability to turn their heads to both sides while on their stomach is an integral part of bone and spine symmetry and proper development.

Many baby’s keep their head resting to one side while laying on their tummies with one cheek on the surface and when you turn their heads to the opposite side, they will quickly turn their heads to their preferred sides. Let them be exposed to and feel the surface they are working on and constantly encourage head movements to both sides.

Remove all clothing (diapers optional) and as they grow designate several soft areas in your home where you and baby can spend time dedicated to connection, coregulation, safe exploration of safe interesting objects and sounds during tummy time.

The following are the Tummy Time Phases through 1 Wave of tummy time:

**NOTE:** Intentional Tummy Time is 4-5 waves per session, 5 Sessions per day. Key aspects being repetition, consistency and novelty.
Phase ONE

Hold baby close to body and lower to surface in supine (on back)

Phase TWO

Social Engagement/ Social Play with back and forth, facial expressivity, eye gazing, parentese and other vocalizations. Raise your eye brows and be as animated as you feel. This

Phase THREE

Roll baby into tummy position by using pelvis and lower extremities to roll baby in with minimal facilitation.

Phase FOUR

Play, engage, move, and notice baby's arousal increase. Arousal level is increasing as he is engaging tummy time. How well does baby regulate this? What attempts are made for regulation? Consider surface (rough, smooth, slick, cold) and attire.

Phase FIVE

Peak of Excitability (PoE). The point at which baby's arousal is heightened and something needs to shift in order to downregulate, otherwise baby will get over stimulated.

Phase SIX

Prepare arm and roll baby out of tummy time position. Roll baby out with minimal facilitation. It's important to minimize startle response as needed.

Phase SEVEN

Pick baby up and “plug them into you.” Use both hands, roll baby onto side and shift weight through pelvis (not midline).
Phase EIGHT

Calm, rest, settle and harmonize baby. The process of down regulating, decreasing the arousal level returning to baseline or better. Help baby harmonize by sighing out loud, have a relaxed facial expression, notice breathing patterns. When baby is once again relaxed, content and ready repeat all phases of the wave 5 times, 3-5 times per day.

NOTE: Make sure to complete all phases rolling your baby into and out of tummy time equally on both sides of their body. If the first wave starts by rolling in and out of tummy time over the left shoulder, perform second wave rolling over right shoulder.

What does the Medical/developmental literature say about Tummy Time (condensed list):

- A consistent tummy time routine and its daily practice is associated with improved motor milestone achievement
- Improved head control at 3 months, yielding early learning abilities through direct interaction with their environment
- Helps prevent positioning related skull deformities, and helps correct shape
- Decrease reflux
- Promotes gastric emptying. Gastric residuals were significantly lower in the prone position than in the supine position at the five measurement points. Placing preemies in prone position for the first half hour after feeding is suggested.
- Lack of tummy time contributes to sedentary/obesogenic lifestyles
- Babies are more engaged and happier during tummy time when accompanied and supported by a parent
- Babies like to look at interesting objects which keeps them engaged during tummy time
- Developmental milestone delays were noted after back to sleep was initiated
- Professional intervention and instruction dramatically increase active participation in tummy time for babies
- Preemies have decreases salivary stress response and respiratory rate in prone positions compared to supine
- Oxygen saturation was significantly higher in the prone position compared with supine position in preemies with RDS.
- Reduces motor delay in infants with Down Syndrome.
- Babies with retrognathia demonstrates less apneic events in prone when compared to supine
- In preemies less than 32 weeks, quarter turn prone and prone were effective in decreasing respiratory rate, where supine did not.
- Prone position was found to slightly improve the oxygenation in neonates undergoing mechanical ventilation
- Prone positioning increases end expiratory lung volume and shifts tidal ventilation to the ventral lung regions. The latter suggest that infants should preferably be placed in prone position after extubating.
Prone position is a preferred position for facilitating sleep and reducing stress for preterm infants exposed to varying environmental stressors.

At six months, bearing weight on extended arms and on thighs were predictive of erect sitting posture at 9 months of age.

In oxygen-dependent preterm infants, both left lateral and prone positions improve lung function by optimizing breathing strategies.

It was a pleasure meeting you. Please feel free to reach out to the number and e-mail below with any questions, concerns, feedback or interests in tele-consultations.

Happy Parenting!

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Relationship between infant sleep position and motor development in preterm infants. Journal of Developmental and Behavioral Pediatrics, 22(5), 293- 299.


Suprenant, D., Milne, S., Moreau, K., Robert, N., 2014. Adapting to higher demands: using innovative methods to treat infants presenting with torticollis and plagiocephaly. Pediatric physical therapy, Fall, Volume 26, issue 3 p 339-345.


RECOMMENDED READING + ADDITIONAL RESOURCES

Porges, S. The polyvagal Theory Neurophysiological foundations of emotions attachment communication and self-regulation.

Solter, A. The Aware Baby.

Schore, A. Affect Regulation Affect Dysregulation.

Winnicott, DW. The Child, The Family and the outside world.

Francois Barbira freedman. Baby Yoga.

Montagu, A. Touching.

McClure, V. Infant Massage.

Bly, L. Motor Skills Acquisition in the first year of life & Components of typical and atypical motor development.


Voss, A. Understanding your baby's sensory signals.

Medina, J. Brain rules for baby.
Cutchlow, Tracy. Zero to Five. (70 Essential Parenting Tips Based on Science).

www.pathways.org an amazing resource for typical and atypical developmental information and photos, also contains information about tummy time, sensory processing and much more.