



## What's Up? Your Baby's Development

# 1-Month Visit

The first months of baby's life are all about learning to feel comfortable, safe, and secure in the world. By responding to her signals and providing lots of love and comfort, you help your baby form a trusting bond with you.

*How are you helping your baby learn to feel safe and secure?*

### 1–2 Months: What's on Your Mind

## I have to go back to work soon—will my 6-week-old be okay in child care?

Yes, as long as it is a high-quality program. Look for a clean and safe setting with no more than 3 babies for every caregiver. There should be toys and books at the baby's level and child care providers who will let your baby sleep, eat, and play according to her own schedule. Make sure that the caregivers talk and play with the babies, that they comfort them when they are upset, and that they are loving and nurturing.

#### What Your Baby Can Do

**I am getting to know you and the other people who love and care for me.**

- I recognize your faces, voices, and smells.
- I respond to your smile and touch with pleasure.

**I learn to trust you when you respond to my cries.**

- I often stop crying when picked up and soothed, but sometimes do not.
- If I keep crying, it doesn't mean you are doing anything wrong.
- I may like being rocked, bounced, or swinging in a baby swing.

#### What You Can Do

**Talk and sing to your baby.** This makes him feel loved and helps him bond with you.

**Hold your baby.** Try some skin-to-skin cuddle time with your little one.

**Remember that you can't spoil a baby.** It is okay to pick up your baby whenever she cries. It's also okay to finish your task while using your voice to comfort her from afar, "I'm right here, just washing my hands, and I will be right over."

**It will help baby calm down if you can stay calm.** If your baby is inconsolable and you have tried everything, keep in mind that just by holding and comforting her you are teaching her that she is not alone and that you will stick by her through thick and thin.

**Did you know...** Babies whose mothers reported high stress cried and fussed more than babies whose mothers reported little stress.<sup>1</sup>

*As you use the HealthySteps handouts, remember that your child may develop skills faster or slower than indicated and still be growing just fine. Every child develops at his own pace—and your HealthySteps Specialist will be available to answer any questions you may have. Your family's cultural beliefs and values are also important factors that shape your child's development.*



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## Spotlight on Crying

- Crying, hard as it is to hear, is a normal way babies communicate hunger, discomfort, distress, or a need for your attention.
- Most newborns cry about 2 hours a day in the first 6 weeks. Crying decreases to about 1 hour a day by 12 weeks.<sup>2</sup>
- Being with a crying baby who is hard to soothe can be exhausting, stressful, and frustrating. Remember that just being there and staying as calm as possible helps your baby feel safe.
- Crying and fussiness are *very common* for young babies. Some babies experience intense crying for prolonged periods of time and can be very difficult to soothe. This behavior may be a sign of colic.
- Although colic has been studied by many medical experts, there is no universal definition for colic. One practical definition may be any repeated, inconsolable crying that occurs for more than 3 hours on 3 days of any given week in an otherwise healthy and well-fed infant.

### What It Means for You:

Even very young babies pick up on how their loved ones are feeling. When you are calm and relaxed, your baby is more likely to feel calm. When you are feeling stressed out and overwhelmed, your baby is more likely to feel tense. So in order to take good care of your baby, **it's really important that you take good care of yourself.** Ask trusted friends and family members for help when you need a break. Make time to do things that make you feel good. And be sure to talk to a trusted health care provider if you are feeling down or depressed.

### What You Can Do:

- **Talk with your health care provider.** Crying may have a medical cause—a food sensitivity, heartburn, or other physical difficulty.
- **Try different positions for your baby.** Sometimes a baby will cry less when he is placed facedown on an adult's knees and has his back rubbed. You can also try swaddling.
- **Try motion.** Sometimes walking or gently bouncing with your baby leads to less crying.<sup>3</sup>
- **Use soothing sounds.** Talk or sing softly to your baby. Try running a fan or humidifier in your baby's room—sometimes babies are soothed by this background noise.
- **Reduce stimulation**—lights, sights, sounds, and textures—for your baby. Sometimes less stimulation leads to less crying for babies.
- **Reach out for support.** Extended families and friends may be able to step in to give you a needed break. Everyone needs support, and nobody needs it more than the parents of a crying newborn.
- **Stay calm.** When you're calm, it helps your baby calm down. If you find yourself feeling frustrated, put your baby on her back in a safe place—like the crib—and take a short break. Crying won't hurt your baby, and taking a break will let you soothe another very important person...you!
- **Don't give up.** Soothing your baby is a trial-and-error process. If one strategy doesn't work, try another. Hang in there, and remember that the crying will get better.

*At this visit the pediatric team will measure your baby's length, weight, and head. They'll listen to your baby's heart and look at her eyes, ears, nose, and mouth. Your baby will receive any needed immunizations. We will talk about your baby's development and routines such as sleeping and eating. We'll also review safety guidelines. And, of course, we'll make time to discuss any questions or concerns you might have!*

1. Wurmser, H., Bolten, M. I., Domogalla, C., von Voss, H., Buchwald, J., Kowatsch, M., et al., (2006) Association between life stress during pregnancy and infant crying in the first six months postpartum: A prospective longitudinal study. *Early Human Development*, 82(5), 341–349.

2. Wolke, D., Bilgin, A., & Samara, M., (2017) Systematic review and meta-analysis: Fussing and crying durations and prevalence of colic in infants. *The Journal of Pediatrics*. DOI: <http://dx.doi.org/10.1016/j.jpeds.2017.02.020>

3. [healthychildren.org/English/ages-stages/baby/crying-colic](https://www.healthychildren.org/English/ages-stages/baby/crying-colic)