

School Begins at Birth Series Year One, Month Three

Deborah Richardson Child Development Specialist

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Dear Parents

Your baby is now three months old!

Do you ever wonder what your infant is thinking, even at the early age of three months? The answer is definitely interesting. Although every child is different, most have an inner self that is present at birth, maybe even before. If you have twins, you can observe early personality differences. You may see one twin kicking, grasping and moving right from the start while the other is not nearly as active. However, the less active child might make sounds that seem to talk to you in an understandable way. Even though twins grow in the same environment nine months before birth, they often express themselves in completely different ways after birth.

Even though you cannot see your child's inner self, it continues to grow and develop every day. It will be several years before you will hear "Me too!" or "I hurts!" or "I am angry" as your child describes feelings. However, if you watch closely, you can see your child's feelings right now. You may carefully introduce your child to a new person, like a favorite aunt or uncle. Your child may decide not to like that person no matter what anyone says or does. You may offer the breast or bottle and get a strong refusal.

Childhood development experts probably owe infants an apology. For years they have not understood the talents of newborns. Research now shows that babies are surprisingly able to understand some aspects of the world.

During the past two decades, researchers have closely watched the behavior of babies in their first hours, days and months of life. As a result, we now know more about newborns than ever before.

Newborns can see, hear, smell and taste much better than previously thought. Infants acquire skills and knowledge long before we see the obvious signs like smiles, babbling, cooing and attempts to reach for objects.

As you guide your child's learning and decision-making in ways you think are best, you are a teacher. Observe your child-student carefully, providing the love and nurturing that are so necessary to children's achieving their full capabilities.

Mental Development

Before the 1960s, nobody knew for sure whether newborn babies could learn. A few studies suggested that babies could respond to a flash or the sound of a buzzer. These reactions were considered simply reflex actions.

In the mid-1960s, however, several well-known researchers published important results. Three-month-old and younger infants learned to suck faster or slower to raise the illumiation of a picture of a face. Researchers used the volume of a record player instead of the picture in another experiment. If the infant increased the sucking action, the volume raised. A decrease in sucking lowered the volume. The infants learned to vary their sucking patterns to change the sound level.

By month three, your child will have clearly developed two ways of sucking. One is fast, hard-driving, and almost frantic. The other is more leisurely. Your child will suck faster when hungry. When your baby is full watch how he or she sucks.

Try this experiment when your child finishes feeding. Put an object close to your child's eyes and then slowly move it away. Quite likely, your child will stop sucking while studying the object. When your child begins sucking again, move the object closer. Your child will control you and the object by signaling with the sucking action. Sucking is one of the first ways infants demonstrate their learning.

Emotional Development

By three months it becomes very clear that each baby is different. Each has a different personality. Do not compare your child to any other and do not expect too much too soon. Remember, differences are normal.

For example, take thumb-sucking. Some babies are born sucking their thumbs, others never begin. However, by the third or fourth month, most children use their thumbs to soothe themselves. Research shows that infants need to suck to satisfy their cravings, even after satisfied with breast milk or formula. The thumb is nature's pacifier. Do not worry about a thumb-sucking habit.

Infants who are comfortable, relaxed and emotionally stable will smile at experiences they enjoy. They laugh at those that are exciting and squeal with joy at the things that really delight them. Your child has a great deal of energy to let out. Watch for the peaks and valleys in your child's emotions.

Social Development

Three months is a friendly age. Your baby probably likes people and expresses happiness when anyone appears by wiggling all over. A big grin of delight usually accompanies this display of joy.

At three months of age some infants are able to laugh or to come close to real laughing sounds. They respond to your laugh. Your infant is now becoming aware there are many different people around. Infants turn their heads to follow objects, voices and music.

Your child's best social skill is saying "thank you" by smiling or laughing.

Language Development

Can you imagine how small your child's vocal chords must be? It is hard to understand how such a tiny body part can produce so much sound. Your child is rapidly learning how to control his or her vocal chords to make many different sounds. You may notice new sounds daily.

Long-winded crying spells often bring food, toys, a dry diaper, and attention to young children. Respond to your child's smiles rather than to angry cries. Then your baby knows which behavior you prefer. You will be way ahead of the game. This is difficult because crying is so much louder.

Babbling is the repetition of the same sounds in a row. Infants can manage this skill pretty well by three months.

Babbling is a deliberate vocal action. Your child makes a sound and enjoys what has just happened. The baby makes the sound again because it is pleasing and comforting. In this way, infants strengthen and stretch their vocal chords just as they do their fingers and toes.

Imitate the sounds you hear from your child. Your voice pleases your child. You reinforce your child's efforts to communicate. Play games of sound with your child. Soon your child's response will be a joyous return of your love.

Small Muscle Development

Notice that you baby's hands are no longer tightly closed. The fingers are starting to relax. Your baby will use the large and small muscles to bat or reach for moving objects. Now is the time to add some complicated objects to your child's crib. A cluster of brightly colored, fluttering ribbons or a mobile are good ideas. Babies like anything that moves. See Activities for Growth.

Large Muscle Development

The baby's head is very big for the body. The neck muscles that control the head are still weak. This has been giving your little one some trouble. By the end of this month it will be steadier and may even turn from side to side. When placed on their stomachs, most infants at this age can lift their heads and hold them strongly. They prop their chests up with their forearms. The head will become steadier as the end of the third month approaches.

Compared with animals, humans have a much longer period of time in which to learn certain skills. Your baby is taking very small steps toward mastering these skills. You need to be observant and ready to help your child when teachable moments approach. A teachable moment is when your baby is ready and interested for learning. Say a few encouraging words. Give a smile, a hug, or pat on the back. This will encourage your child to keep at a task or to master a skill. If you are alert to these special times, you can direct your child along the path toward success. The teachable moments may come many times during your child's waking hours. Encourage your child's maximum development by your quick response to these early efforts.

Special Message to New Parents

Sometimes a person loses self-confidence and esteem after a baby is born. Why this happens is not clear, but it is common to new parents.

If you feel nothing will ever be the same again, you are probably right. The idea is frightening. You may be longing for the serene, peaceful solitude of days before the baby arrived. You may be experiencing the fears, depression and frustration new parents feel with changes and adjusted routines. There are some things parents can do about this.

Spend some time without your baby. Get away. You need some uninterrupted blocks of time for sharing thoughts, making decisions, and planning for the future with your friends and family.

If you cannot arrange time without your baby, get in the car and go for a long drive. Several hours on a pleasant back road can be very relaxing. The rhythm of the car usually lulls your little one into extra good behavior. The close car ride also allows good communication. Take turns with child care so that you get some relief from the minute-by-minute routine. Keep communication lines open and expanding.

Mental Health Suggestions for New Parents

There is no reason to hit or to shake a baby, even in a playful way. Sudden tosses in the air or shakes are frightening for the child. Never let anyone play roughly with your little one. Shaking can permanently injure a baby. Hitting, biting and other rough treatment can break softly formed bones and can hurt interior organs.

If you ever feel like shaking your child because you are angry or you cannot stop the baby's crying, forget it. Babies are too young to understand. You will only make the situation much worse.

Everyone needs a break once in a while. Talk out your frustrations with your spouse, family member, friend or neighbor. Try to find someone to stay with your baby for an hour or two. NEVER leave your baby alone. If you absolutely cannot get away, gently lay your child down in the crib. Go take a shower. Wash your face. Make a snack. Turn the radio or stereo to your favorite music. Walk to another room until you stop feeling hassled and frustrated. When you can feel gentle and loving again, return to care for your infant.

Every human being has a stress point beyond which rational, calm and loving actions are impossible. Your stress point is low. Everything is going wrong. You feel the world closing in on you. You are not alone.

One young mother who had experienced an uncomplicated pregnancy and easy birth fell apart a few months after her baby's birth. She had recently moved to a new city. It rained for weeks and weeks and, to top it off, her baby was not gaining enough weight. She had to supplement her breast milk with formula, which added to her feelings of inadequacy and isolation. This mother was lucky, however. She joined a group of other young mothers in the area for a once-a-week discussion. Most of the other women had experienced the same feelings. Letdown, isolation and confusion are normal following the birth of a child.

Another mother had a double adjustment to make. She had a good job for several years before having her first baby. She got rewards for doing a good job. As a new mother she never heard even a thank you for hours of overtime. She reasoned even the most devoted new mother might feel unappreciated and used. She longed to know if she was doing a good job. She discussed her displeasure openly with her spouse and mother. She decided to go back to part-time work earlier than she planned. Her mother's willingness to care for the newborn made the decision easier.

Health Suggestions for Baby

What can you do about a baby's stuffy nose or difficult breathing? A cool mist vaporizer in your baby's room will help breathing. Put two to four drops of a mild salt-water solution (1/4 teaspoon of salt to 1/2 cup of warm water) into each nostril. Use an eyedropper. The solution will help clear the nasal passages. A 2-ounce ear bulb syringe, available at pharmacies, can gently suck out the liquid from the nostrils.

To take your baby's temperature, use a rectal thermometer. Before inserting the thermometer shake the silver line down to below 97°F (35°C). Lubricate the bulb end with petroleum jelly. Spread the buttocks apart and gently slide the thermometer about one inch into the rectum. Hold the thermometer in place for three minutes, but do not let go. After each use, clean the thermometer with alcohol or cool soapy water.

The baby's temperature is the number at the end of the silver line. If you think your baby is running a fever, record the temperature every four hours. If the fever is over 101° F (38.5° C), administer baby aspirin drops every six hours. Follow instructions on the label, or consult your physician for the correct dosage.

Do not bundle your baby in extra clothes or blankets. If the fever is 103° F (39.5° C) or over, bathe your child in lukewarm water until the temperature reading is 102° F (39° C) or below. Sometimes it is necessary to have the adult get in the tub to hold and comfort the sick child.

Calling the Doctor

Sometimes it is difficult to decide to call the doctor. Do not inform your doctor every time your infant spits up. If your baby occasionally skips a meal or throws up, you probably should not worry. Keep an eye on your baby. Watch for other signs of illness such as fussiness, rash, fever or watery bowel movements. If these happen, call the doctor. Write down any of the signs you have noticed so that you can report them to the doctor when you call.

*Call the doctor for Vomiting and Diarrhea if** Your baby has both at the same time Your baby does not get better in 24 hours Your baby is less than four months old Your baby wets less than four times a day Your baby will not drink anything Your baby's bowel movements are explosive Your baby goes longer than usual without a bowel movement or only oozes

There is blood in the stools

*Vomiting means a forceful throwing up, not just spitting up. Diarrhea means frequent, loose, very watery stools, not soft, pasty ones.

Call for a Fever if

Your baby has a high fever that lasts for more than two days. Your child is less than four months old and the temperature is 101°F or higher.

Your child is more than four months old and has other symptoms such as diarrhea, vomiting, fussiness or if the fever comes back after taking an aspirin substitute.

Call for a Rash if

Your child has other symptoms, such as fever.

Adiaper rash does not go away after four days using zinc oxide. The skin is very irritated from scratching.

Call for a Cough if

Your baby also has a fever.

The cough brings up phlegm.

Your baby breathes faster than usual, and if the chest pulls in, nostrils flare, or if your baby grunts when breathing.

Call for an Earache if

Your child rolls his or her head or tugs at either ear. Your baby has a fever. Your baby is fussy or cries hard when lying down. There is any drainage from the ear. There is a decrease in appetite.

Call for a Fall or Bump if

Your child passes out, has a convulsion or rolls the eyes. Your child goes to sleep and is hard to wake. Your child has difficulty breathing. Your child vomits. There is bleeding you cannot control.

Call for Severe Pain if

Your child will not eat. Your child becomes inactive. Your child cries more than usual.

Regular Visits

Make regular visits to the doctor during your child's first few years of life. It is important to go regularly for check-ups even when there are no symptoms of sickness. The baby's first examination is at six weeks. Make well-child visits at 4, 6, 9, 12, 15, 18 and 24 months. Visit once a year after that.

At each visit the nurse and doctor check your baby for normal growth and development. That is the time to ask questions or to relay concerns you may have. You and your health professional are an important team to help keep your baby well.

Activities for Growth

Anything within two or three feet of your baby's eyes will be of interest and subject to intense examination. Your baby still likes to stare at faces and pictures of faces. Infants will also pay attention to three-dimensional objects brought near the eyes. Looking then touching leads to learning through exploration. Making a brightly colored mobile for your baby's crib can create an early interest in learning.

To make a mobile, begin by obtaining a wooden dowel about a yard long to fit across your child's crib. You also will need some heavyweight string and small rubber bands. Wrap the dowel in soft string or yarn. With the string, attach the dowel securely to the horizontal top of the crib rail. You may want to wrap the string around one of the vertical posts as well as the rail. To keep the dowel from slipping out of place when tied, wind a rubber band tightly around each end of the dowel.

On this dowel hang many different types of toys. Four or five brightly colored ping-pong balls or a cluster of fluttering ribbons are good. Reaching and hitting these objects will help your child learn to guide those little hands toward an object in space. There are many adaptations of this toy. You can dream up a new twist on this basic theme every week. Your child will love the action.

References

- Bloom, K. & Elsa Los, (1990). Adult perceptions of vocalizing infants. *Infant Behavior and Development*, 13, 209-219.
- Bornstein, M. & C. Tamis-LeMonda. (1990). Activities and interactions of mothers and their first born infants in the first six months of life; Covariation, stability, continuity, correspondence and prediction. *Child Development*, 61, 1206-1217.
- Haith, M. & M. McCarty. (1990). Stability of visual expectation at 3.0 months of age. *Developmental Psychology*, 26, 68-74.
- Roe, K., A. Roe, A. Drivas, & R. Bronstein. (1990). A curvilinear relationship between maternal vocal stimulation and three-month-olds' cognitive processing: A crosscultural phenomenon. *Infant Mental Health Journal, 11,* 175-189.
- Toda, S., A. Fogel, & M. Kawai. (1990). Maternal speech to 3-month-old infants in the United States and Japan. *Journal of Child Language, 17,* 279, 294.

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