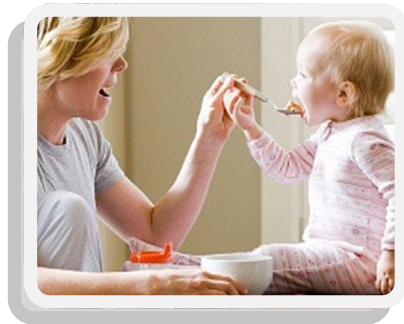
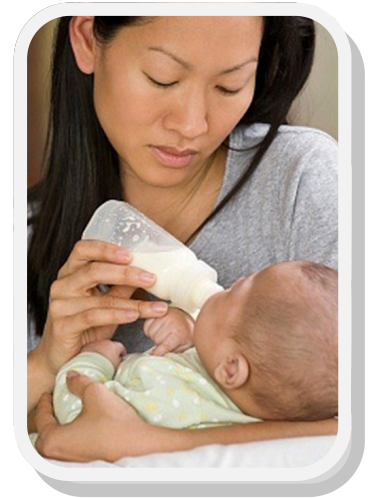


# Feeding the Infant or Child

Position the infant or child with their head and neck supported in a straight line. The child should look straight ahead or slightly down. The infant or child will be more comfortable and ready to eat if their pelvis and trunk are in alignment, lower extremities are supported, and hands and arms are brought in to midline.

If the infant or child arches into extension, provide deep pressure to the anterior trunk and assist them in bringing their arms to midline to reduce excessive extension. Try repositioning the child so they are seated on your lap with their whole body securely supported by your body.



Try to make feeding a positive experience. Read the child's cues, if they are engaged and opening their mouth for food they will be more successful when eating.

Take a break if the infant or child takes a long time to eat or if they show signs of stress such as turning away or grimacing, and then reattempt feeding.

After exhaustive crying the infant or child may be tired and may have difficulty eating.

Feed the infant or child when they are awake according to their natural sleep cycle.

Feed the child in a quiet environment and limit the amount of distractive talking.

## To assist the child with opening and closing of mouth:

*Assisting with the child on your lap:*

Place first finger under the bottom lip

Place second finger under the chin

*Assisting with the child sitting in front of you:*

Place thumb under the bottom lip

Place first finger on the side of face

Place remaining fingers under the chin

**To open mouth:** Gently glide chin and lower lip down.

**To close mouth:** Gently glide chin and lower lip up.

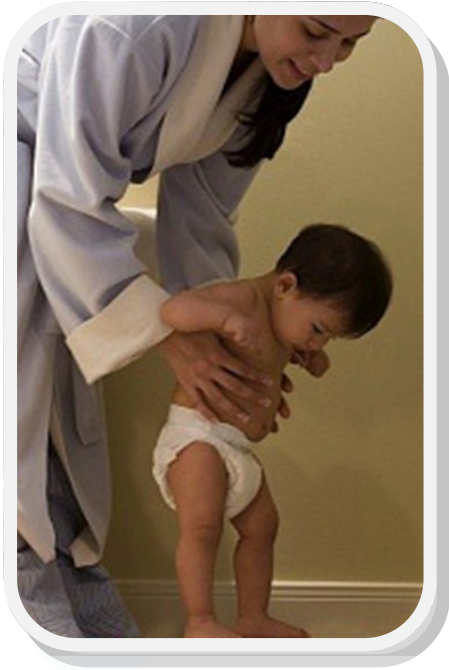


Feeding child on your lap



Feeding child in front of you

# Teaching the Child to Walk



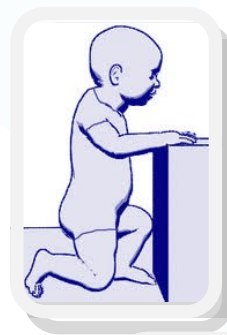
Practice walking with the child with your hands on their hips and trunk to facilitate weight shifting.

Shift weight to one side to enable one foot to lift up at a time.

Do not hold both hands over the child's head.



Allow the child to practice safely falling down and getting back up through "plantigrade" on hands and feet or through half kneeling.



Give the infant or child supportive surfaces and short furniture to pull on to stand up and side step around.



Provide the infant or child with toys they can push to practice walking on their own.



# In the Nursery



Talk quietly and decrease loud noises in the nursery.

Allow the infant to sleep without interrupting the natural sleep cycle.

Turn off bright lights when they are not needed; bright lights irritate the infant.

Place cribs away from doors, walkways, telephones, sinks and areas of high traffic.



Provide continuous sustained touch to the infant with arms and legs in flexion to calm and soothe the infant. Stroking and light touch can be irritating.

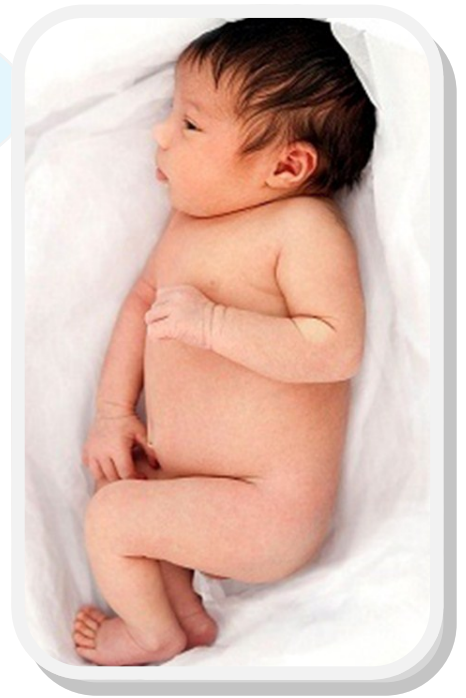
Combine caretaking activities in one session to avoid disrupting the infant's sleep on multiple occasions.



# Positioning the Infant or Child

Position the infant so they lay on their back, stomach, and both sides of their body equally.

Turn the crib so that interesting stimuli are in different positions in relationship to the infant.



If the infant or child has tight muscles, gently stretch the muscles of the arms and legs to prevent stiffness and position the limb in a position of prolonged stretch.

Hold the infant in sitting and slowly tilt their body backward, sideways, and forward to stimulate and strengthen neck and trunk muscles.

Position the infant with limbs flexed and supported (nested) in supine, prone, or sidelying to promote symmetry and midline.

For infants under the age of 6 months, position the infant in supine to sleep and on their stomach to play (“tummy time”).

