

Tummy Time

Since the "Back to Sleep" program was initiated in 1992, infants have spent time less time in prone (stomach). The recommendation by the American Academy of Pediatrics to avoid stomach sleeping until infants roll from their stomach to back; was developed to decrease the rate of death from Sudden Infant Death (SIDS). Some parents have taken this recommendation to mean avoidance of all prone positioning during waking hours, but infants should be provided with many daily opportunities for supervised play in prone.

Studies have examined the effects of supine (on back) positioning on infant motor milestones, as well as flattening of the skull (plagiocephaly), and asymmetrical head/neck posture (torticollis). van Vlimmeren et al. (2008) found that infants who did not spend a sufficient amount of awake time in prone presented initial delays in motor development and quality of motor skills. Prone positioning is essential for a child to develop increased flexibility in the hips and shoulders, head control, core stability, weight shift and upper extremity weight bearing, strengthening, and visual development. These skills will be the building blocks for future motor and cognitive development. Infants should be positioned on their tummy for **supervised** periods of 5 minutes at least 4-6 times daily (van Vlimmeren, 2008) from the time they are brought home from the hospital and slowly increase daily. By 3 months, infants should play while on their tummy up to 3-4 hours daily.

Tummy Time may include:

- 1. Lying on stomach, place toys in all directions around baby. Mirrors are great toys!
- 2. <u>Side lying</u> (both right and left) with the use of the Boppy (not to take the place of tummy time more than one time/day)
- 3. Placing baby on tummy over the Boppy or your thigh/lap with arms extended out in front
- 4. Lie baby prone on your chest while you are lying supine
- 5. Carrying baby with the football hold, give appropriate head support
- 6. Supervised upright play once baby has good control of head and neck

van Vlimmeren L. A., van der Graaf, Y., Boere-Boonekamp, M. M., L' Hoir, M. P., Helders, P. J. M., & Engelbert, R. H. H. (2008). Effect of pediatric physical therapy on deformational plagiocephaly inchildren with positional preference: A randomized controlled trial [Electronic version]. *Archives of Pediatrics and Adolescent Medicine*, *162(8)*, *712-718*.