



Conversations With Your Baby

Understanding & responding to your baby's cues

Premature and hospitalized babies communicate, **but not through words**

Instead, they speak through their movements, facial expressions, levels of alertness and vital signs. We call these *cues*. Some cues indicate signs of stress, and some cues signal that your baby is comfortable. The great news is that you can communicate with your baby, help him/her feel safe and comfortable and enhance his/her brain development by learning to understand and respond to his/her cues.

The pictures below highlight some of the many ways babies communicate discomfort or stress:

Stop Sign: Fingers are extended or splayed, often with arm extended.^{2,8}



Furrowed Brow: Concerned or worried look creating lines/wrinkles on forehead.^{4,8}



Arm & Leg Extension: Arms and/or legs are held in position of extension.^{2,6,8}



Gaze Aversion: Moves eyes away from caregiver/situation.²


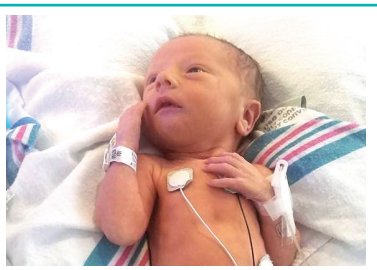





Create meaningful conversations with supportive caregiving

Supportive caregiving is a way to respect and respond to your baby's individual cues. This supports his/her brain development and assists with bonding. Picture every interaction with your baby as a conversation. He/she tells you what he/she needs in part through the cues on the previous page. You listen by understanding those cues. You communicate back to him/her by providing supportive responses in real time.

Here are five supportive responses you can use:

(There are many more cues and responses you will learn by interacting with your baby over time.)

Grasping	Provide a finger for your baby to grasp or hold. You may notice your baby comforting himself/herself by grasping onto his/her own hands or even equipment in the bed. ^{2,8}	
Hands to Face/Mouth	Help your baby by moving his/her hands to his/her face or near his/her mouth. You may notice your baby comforting himself/herself by putting his/her hands on his/her face or mouth. ^{1,2,5,6,7,8}	
Hand Hug	Help your baby by gently gathering his/her arms and/or legs and tucking them closer to his/her body. Hold with gentle pressure while his/her body relaxes. This is not only calming but also helps your baby develop normal movement patterns. ^{1,2,5,6,7}	
Skin-to-Skin Holding (Sometimes called Kangaroo Care)	Hold your diapered baby skin-to-skin on your chest. This helps with bonding, growth, attachment, immune system development, brain development, temperature stability, your milk production (if applicable) and more. ^{3,5,6}	
Time Out	Your baby may benefit from a brief break in care if stress signs continue despite support. ²	



Early Conversations build lasting impressions.

¹Altimier, L. B. (2015). Neuroprotective core measure 1: The healing NICU environment. *Newborn and Infant Nursing Reviews*, 15(3), 91-96. | ²Als, H., Lawhon, G., Brown, E., Gibes, R., Duffy, F. H., McAnulty, G., & Blickman, J. G. (1986). Individualized behavioral and environmental care for the very low birth weight preterm infant at high risk for bronchopulmonary dysplasia: neonatal intensive care unit and developmental outcome. *Pediatrics*, 78(6), 1123-1132. | ³Baley, J. (2015). Skin-to-skin care for term and preterm infants in the neonatal ICU. *Pediatrics*, 136(3), 596-599. | ⁴Guzzetta, C. E. (1998). *Essential readings in holistic nursing*. Gaithersburg, Md: Aspen Publishers. | ⁵Altimier L, Phillips R. (2016). The neonatal integrative developmental care model: advanced clinical applications of the seven core measures for neuroprotective family-centered developmental care. *Newborn Infant Nurs Rev*, 16(4):230-44. | ⁶Sanders MR, Hall SL. Trauma-informed care in the newborn intensive care unit: promoting safety, security and connectedness. *J Perinatol*. 2018; 38:3-10. | ⁷Coughlin M, Gibbins S, Hoath S (2009) Core measures for developmentally supportive care in neonatal intensive care units: theory, precedence and practice. *J Adv Nurs*. 2009 Oct; 65(10):2239-48. | ⁸Holsti, L., Grunau, R., Oberlander, T., & Whitfield, M. (2005). Prior pain induces heightened motor responses during clustered care in preterm infants in the NICU. *Early Human Development*, 81(3), 293-302.