



St. Vincent Physician Network

"The Creepy-Crawler"

from www.kidsgrowth.com

The 9-month-old child continues making major gains in development and begins displaying a little independence. The youngster of this age is always on the move and will begin to get opinionated about such things as what foods to eat and when to go to sleep. Occasionally, these opinions turn into protests, so now is the time to begin setting some limits and saying "no."

The following comments are designed to help you and your partner enjoy your 9-month-old while continuing to gain confidence in yourselves as parents. The information is not intended as a substitute for well-baby visits by your newborn's pediatrician.

Never hesitate to ask your child's physician for guidance concerning specific problems. This is the reason for regular well-baby checkups.

Parenting and Behavioral

- Keep up a constant chatter with your 9-month-old child. Talking to your child while dressing, bathing, feeding, playing, walking and driving encourages speech development.
- Encourage play with age-appropriate toys. Babies like to bounce, swing, reach for you, pick up and drop objects, and bang things together. Unbreakable household objects such as plastic measuring cups, large wooden spoons, pots, pans and plastic containers make great toys. A foam rubber ball helps the child develop his or her small motor skills.
- Provide opportunities for safe exploration.
- Begin to set limits by using verbal "no's," distraction, removing the object from the baby's sight or removing the baby from the object. Never use spanking as a form of discipline, even a "little" tap on the hand. If you become angry with your baby, put the child in his or her crib or playpen for one or two minutes. This will allow you to calm down and allows your baby to realize he or she has done something wrong. Consistence of discipline is very important - adhering to the limits you set keeps your child safe.
- Shoes are not necessary at this age (except for "show"). They should be used only to protect the feet from sharp objects and the cold.
- Stranger anxiety may limit some parent's ability to leave their 9-month-old with grandparents or a baby sitter. It is important for parents to get out from time to time without their little one. You get a breather, and your son or daughter learns that sometimes you do go away, but you always come back.

Development

- During this period your baby will probably learn to creep, crawl and otherwise get around the room. He or she may even pull up in the bed or on furniture and begin "cruising" around the room.
- Responds to his or her own name.
- Understands a few words such as "no-no" and "bye-bye."
- Begins developing certain concepts - for example, your child will retrieve a toy after he or she watched you put it under a blanket.
- May say "dada" or "mama" but not specifically.
- Sits well independently.
- Bangs two toys together.
- Plays interactive games well such as peek-a-boo and pat-a-cake.

- Perhaps the most striking developmental achievement is the use of fingers and thumb to poke, pry, probe and pick up smaller and smaller objects.
- Sleeps through the night except for an occasional night waking.
- The 9-month-old has now learned to be "cool" or even a little afraid of certain strangers - even family members he or she does not see very often. The baby of this age also begins to take a dim view of being examined by their doctor.
- Often has one or both bottom front teeth.

Illness

- Nine months is the age when a child becomes increasingly susceptible to infections, probably due to loss of maternal antibodies the youngster received during pregnancy. In addition, everything goes into his or her mouth, including germs!
- Do not be discouraged if your child has a cold or two between now and his or her first birthday.

Feeding

- Give your baby soft table foods if approved by your doctor to increase the texture and variety of foods in his or her diet. Give your child the opportunity to use his or her newly developed skill of plucking things by offering small bits of soft table foods. (You may need to give your child a bath after every meal!) The 9-month-old is a great imitator. The food on your plate is much more appetizing to him or her, so take advantage of this to introduce new table foods.
- Never give a 9-month-old food that may cause choking and aspiration, such as peanuts, popcorn, hot dogs or sausages, carrot or celery sticks, whole grapes, raisins, corn, whole beans, hard candy, large pieces of raw vegetables or fruit, or tough meat.
- Always supervise your child while he or she is eating.
- Continue teaching the infant how to drink from a cup so he or she is off any bottles by 1 year.
- Continue using breast milk or iron-fortified formula for the first year of your infant's life.
- Continue giving extra Vitamin D to the breast-feeding infant and supplemental fluoride to all children who are not exposed to fluorinated water.

At this Checkup

- An important part of each well-child visit is the evaluation of the baby's growth. In the vast majority of children, growth falls within normal ranges on the standard growth curves for **weight, height or head size**. The smooth curves of a growth chart might create the impression that a baby grows in a continuous, smooth manner. Instead, growth usually occurs in spurts. Therefore, single growth (height, weight, head size) measurement at any particular month in a child's life is of limited value - more important is the child's **rate of growth** over time.
- The 6-month-old will also be checked thoroughly both physically and developmentally.

Sleep

- Encourage your baby to console himself or herself by putting your child to bed awake.
- Due to the emergence of stranger anxiety, the 9-month-old baby may show resistance to going to sleep for naps and at night.
- Some 9-month-old babies begin night awakenings for short periods of time. Should this happen, check your baby, but keep the visit brief, avoid stimulating your infant, and leave the room quickly once you feel everything is OK. Do not give extra bottles, take the infant into bed with you or rock him or her back to sleep. This will only reinforce the night awakenings and it will become a habit.
- Sleep is also occasionally disturbed when the infant pulls up in his or her crib and can not get back down.
- Never put the baby to bed with a bottle.

Immunizations

Since immunization schedules vary from doctor to doctor, and new vaccines may have been introduced, it is always best to seek the advice of your child's health care provider concerning your child's vaccine schedule.

- Many physicians apply a painless skin test for tuberculosis which needs checking by the parents in three days. A positive reaction does not mean the child has tuberculosis - only that he or she has been exposed to the disease.
- Ask your baby's doctor about possible side effects (fever, irritability, tenderness over the injection site).
- Some physicians at 9 months, others at 12 months, perform a hemoglobin or hematocrit determination to check for anemia ("low blood"). This requires a small poke on the finger to obtain a drop of blood.

Safety

- Remember, there is no such thing as a "child proof" cap.
- Your adorable newborn is now "mobile" so child-proofing, if not done at 6 months, is a priority. Get down on the floor at your baby's eye level and see what the infant can get in to.
- Continue to use a rear facing infant car seat in the back seat.
- Do not leave your child alone in a tub of water or on high places such as changing tables, beds, sofas or chairs. Always keep one hand on your baby.
- Avoid using baby walkers. There is considerable risk of major and minor injury and even death from the use of walkers. There is no clear benefit from the walker's use.
- If your home uses gas appliances, install and maintain carbon monoxide detectors.
- Always empty buckets, tubs or small pools immediately after use. Ensure that swimming pools have a four-sided fence with a self-closing, self-latching gate. Swimming pools are deadly to children at this age.
- Continue to keep the baby's environment free of smoke. Keep the home and car nonsmoking zones.
- Avoid overexposure to the sun. A waterproof sun screen with an SPF more than 15 is OK. Even with sun screen, avoid the hours between 10 a.m. and 3 p.m., when the sun is most dangerous.
- Do not leave heavy objects or containers of hot liquids on tables with tablecloths that the baby may pull down.
- Place plastic plugs in electrical sockets.
- Keep all poisonous substances, medicines, cleaning agents, health and beauty aids, and paints and paint solvents locked in a safe place out of the baby's sight and reach. Never store poisonous substances in empty jars or soda bottles.
- Install gates at the top and bottom of stairs, and place safety devices on windows.
- Lower the crib mattress.
- Learn child cardiopulmonary resuscitation (CPR)

Eliminations

- Your baby will have his or her own frequency of bowel movements.
- Most babies strain, grunt and fuss when they have bowel movements. This does not mean they are constipated.

When to call the Doctor

- Anything that bothers you!
- Your baby shows little interest in social interaction, avoids eye contact and smiles infrequently.
- Your baby seems stiff or floppy.
- Will not bear weight on legs.
- No babbling, infant squealing or laughing.
- Does not turn when name is called.
- Eyes are always crossed.
- You have not seen any developmental changes since the last checkup.

The information presented in Growth Milestones was obtained with the help of our pediatric experts and with material from The American Academy of Pediatrics' *Guidelines for Health Supervision* and Bright

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