

## how to carry a baby?

I am from Germany and moved to the US seven months ago. I keep coming across ads in your magazine that show babies in slings facing outward. Everything that I have read on that issue indicates that letting your baby face the world in a sling with her back toward you is just wrong. I advise that you seek comment from researcher Dr. Evelin Kirkilionis on facing outward.

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Dr. Evelin Kirkilionis, Forschungsgruppe Verhaltensbiologie des Menschen (FVM), Freiburg, Germany, responds: When parents carry their babies in a sling or car-

rying bag, they give them a sense of security. Babies can be aware of their parents with practically all their senses. They can hear their heartbeats, feel their warmth, observe their facial expressions, take in their smells—just the sensation of being moved pacifies especially well. And if children are carried sitting upright with their legs spread and strongly drawn up, the parents are also “practicing”—quite coincidentally—prevention of so-called innate hip dysplasia. This requires, however, that the baby’s thighs be drawn up at least to a right angle; it’s better if it’s even more. Then if the baby is sitting on the parent’s hip or is carried face to face, the baby has a leg position that is ideal for the healthy maturation of the hip joint. If the legs are bent more than 90° (about 100° to 110°) and spread approximately 90°, the femur head fits ideally in the hip socket. This favors its healthy development. Moreover, the body posture of the baby is not stationary. Through the movements of the parent as well as those of the baby, a constant stimulus is transferred to the child’s hip joint, which promotes circulation to the still-cartilaginous structures

and supports their maturation. All in all, this way of carrying is an appropriate way to prevent hip dysplasia.

When baby is facing away from the mother’s body, these anatomically positive aspects of carrying are lost. The child has an unfavorable leg posture because the legs dangle down. Often, because of the construction of the carrying bag, a stretching in the hip joint is even forced. This must be regarded extremely critically in terms of the development of the hip joint, especially in the first four months. Such a stretched position means that the femur head is not centrally guided into the hip socket, and this leads to malformation.

Moreover, with this mode of carrying, the overall posture of the torso of the child is not age appropriate. If the baby sits facing away in the carrier, the straps pull from the front over the child’s shoulders; this often causes a very upright posture, since the shoulders are pressed back. In the worst case, this posture, in combination with a stretched position in the hip joint,

forces a hollow back.

*In addition, a child will not sit on her or his diaper-padded bottom. Rather, the weight will be distributed onto the cartilage of the symphysis of the pelvis. This means that the baby is sitting on the crotch, and for boys, on the testicles.*

*When the flood of information becomes too much: Babies carried facing away from their parents are confronted with stimuli from the environment without being able to turn away when it becomes excessive. These children also cannot read the facial expressions of their parents to see how this information is to be interpreted. In the case of disturbing stimuli, babies cannot look at their parents' faces to be assured that everything is still OK. Admittedly, babies carried in this way are very excited, exceptionally awake and active. They seem to like having so much to see. But our little ones still have to learn to distinguish between important and unimportant information, and also need to learn how to "blind or shut*

*out" unneeded stimuli. The exposure to this flood of information is often not ended at the right time, as the babies cannot withdraw from it by themselves. For one thing, even if babies in this position want to turn away, they cannot. For another, strong stimuli can hold babies'*

*attention even if it is too much for them.*

*With face-to-face carrying, it is possible for babies to turn away from strong stimulation when they get tired. Also, the change in body posture allows their bodies to relax. All this is not possible when babies face away from their parents.*

There are several possibilities for carrying your baby: What to do when the little one wants to see more of the world than is possible with the usual frontal carrying mode? One possibility is to carry the baby in the sideways cross-carry, sitting on the parent's hip. However, this may be too strenuous for the carrying person's back. Alternatively, one should shift to the back-carrying mode. Here the child should be carried in such a way that it can observe its surroundings over the shoulders of the carrying person. This is rarely possible with conventional carriers; it is easier to achieve with a sling or a similar carrying device. In both cases, healthy development of the hip joint is supported because the leg position is equivalent to the frontal carrying mode. Moreover, the orientation of the baby to the parent's body more strongly favors attachment with the parents.