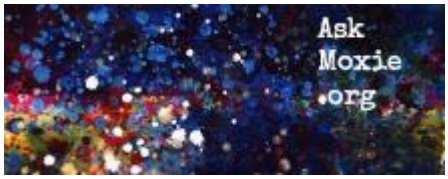


MoxieTopic:
Is This a Thing?: No, it's not just you, from birth through age 2

For the most part, your child is going to be a delightful human being, and you'll love being part of their growth and development. But there are times when your kid is just going to freak out, stop sleeping, scream more, or be a complete jerk. For the most part, there are actual reasons for your kid to have those bad times. The bad news is that it happens to almost every human being as we grow. The good news is that it happens at really predictable times.

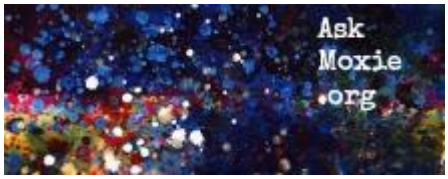
This MoxieTopic is something I haven't seen anywhere else: a chronological list of the bad spots from birth through two years. Most sources take just one aspect of growth--physical skills or developmental skills--and talks about them. I'm taking everything I've observed in my kids and seven years' worth of emails and comments from hundreds of readers of AskMoxie.org, as well as research on spurts of all sorts, plus all the "old lady"-type wisdom that people passed down to me to explain what was happening when, and putting it all together here. In other words: this is what your grandma would tell you about babies if she remembered the hard parts.

None of this is medical advice. I am not a medical professional or even a medical amateur, frankly (although I'm good at taking out splinters). If your child is having symptoms of any sort that are alarming you, seek professional medical advice.

Since I wanted this to be manageable and not a huge book, I'm not going into exactly why every single blip happens in detail. But there are some common themes, and I'd recommend that when your kid is wigging out (over a few days, not just one isolated day of wig-out) you **check things in the following order:**

1. Check the timeline to see if it's a known thing. These are mostly growth spurts, or developmental stages (you can read about them in *The Wonder Weeks*, referenced below), or equilibrium phases (you can read about them in the Ames and Ilg books, referenced below).

2. Movement breakthrough. These aren't in the timeline because they vary so much from kid to kid. But they can cause big problems sleeping and with generalized frustration while your baby is working on a new form of movement (rolling, sitting, crawling, walking, etc.). While your baby is working on a new movement skill their brains and bodies can't rest enough to sleep well, but once they have the new skill solidly established they'll be able to go back to sleeping and being calm.



3. Teething. Also not on the timeline because it's a complete crapshoot about when it happens. Some babies come out teething and some don't teethe until closer to a year; some never have any symptoms and a tooth will just pop out while others have weeks of pain, fever, crankiness, drooling, and rashes (diaper and facial) before each tooth appears. In general, if your child just seems agitated and in pain, it's likely to be teething. Pulling on the ears is also a classic sign of teething, because it's referred pain from the gums to the ears.

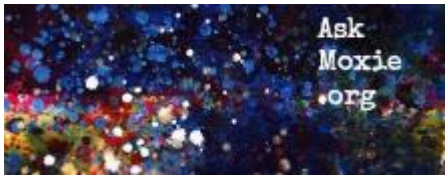
4. Physical discomfort of some sort. Since babies can't talk, they can't tell us about things that feel bad except by crying or squirming or other discomfort signs, so sometimes easily-remedied things cause crankiness, sleeplessness, or crying. Assess your baby's physical state for anything that could be causing discomfort (too cold/hot, hungry, indigestion/reflux, uncomfortable clothes, environmental allergies, etc.).

5. Existential angst. I'm kidding. Sort of. Some kids seem to be upset because they can't do things that they see others doing, and that can make them really cranky. Which is existential in a way, but mostly transitory.

Sources from Step 1:

The Wonder Weeks (book or smartphone app) by Frans Plooj and Hetty van de Rijt is a roadmap of when all the developmental leaps happen. The authors, Dutch researchers, discovered that kids all seem to have the same fussy periods at the same time that would end when the kids developed a new skill. The book tells you when the developmental leaps happen, what happens in each leap, and what behavior is likely to be leading up to the leap. Highly recommended and worth the money.

Louise Bates Ames and Frances Ilg were two researchers who worked at the Gesell Institute of Human Development and observed children of all different ages. Their goal was observation about normal human developmental stages, not experimentation. In the 1970s they wrote a series of books, one for each year, about what was normal for that year. Although the books are dated in some of their assumptions about family structures and what a child's "normal" day consisted of, their insights about behavior are dead on and extremely detailed. The books (titled "Your One-Year-Old," "Your Two-Year-Old," etc.) are all still in print and are easy to find new or used, so I'd recommend getting the book for whatever year you're in just to have as a reference when you're wondering if something's normal or not. Every time I pick up one of their books I'm reassured that there's nothing wrong with my child.



An important note about the time stamps: All times are for a 40-week baby. If your baby was born at 39 weeks, add a week to every time estimate. If your baby was 41 weeks, subtract a week from every time estimate.

Also: As Gus the diner owner in *The Muppets Take Manhattan* says, "Peoples is peoples." All people are different, and babies and kids are just young people. It is entirely possible that your baby won't conform exactly to these times. Don't think there's something wrong if your baby doesn't. You might also not be able to see any kind of pattern, especially with the sleep regressions. (Some parents say their kid never had any regressions, and some others say their kid slept so poorly for so long that they didn't notice any times that were worse.) All this--hitting these time stamps as listed here or hitting them at different times or not hitting them--is normal.

You may also notice that the time stamps are front-loaded. Think of development like a spiral, with the tightest curl on the inside, so if you start in the middle there are a lot of turns as you start going, but then as you keep going the turns stretch out. Human development is like that, too, so there's a lot happening rapidly for the first half year, then it stretches out in the next half year, and stretches out even more in the next half year, etc., until the blips and annoyances are few and far between. And then the kid moves out of your house and you don't even notice all the blips.

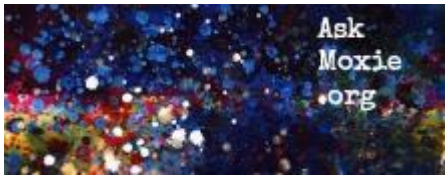
Here's the actual timeline. Good luck, and may the force be with you.

The Timeline

3 days: The mother's hormones take a huge drop. You might be super-emotional and very weepy, or on the edge, or cycling from euphoric to despairing all day. It's normal. Make sure you have other adults around to take care of you, and drink a lot of water.

10 days: Another big hormone drop for the mother like the one at three days post-partum. Don't be alone, and drink lots of water. Hormones will be cycling out of your body for months and months after delivery, so be gentle with yourself and your feelings.

3 weeks: Growth spurt! The baby will want to eat almost constantly for 2-4 days. You'll finish a feeding, and ten minutes later the baby will start rooting around like they're starving. It will seem impossible that the baby can eat again so soon, but they can. This is the baby's way of increasing capacity, and if the mother is breastfeeding, this will bring up the mother's supply. To survive it: If you're breastfeeding, breastfeed whenever the baby wants to eat, even if it doesn't seem to make sense. Settle in with a lot of water and movies to watch, and know that you will survive, and it will end in a couple of days. If you're formula feeding, just feed the baby whenever they're hungry, even if the



amounts seem excessive. After the growth spurt is over, your baby may eat more at a sitting and space out the feedings.

6 weeks: Growth spurt! The baby might hit this growth spurt harder or more easily than the three week growth spurt. Some babies hit both hard, while others seem to grow more during one than the other. Manage this spurt the same way you managed the first one, by feeding whenever the baby wants to eat, whether it makes sense to you or not. This will also last 2-4 days.

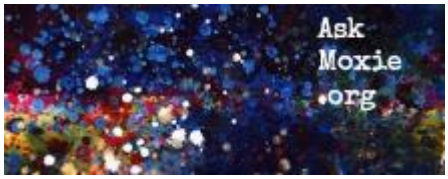
Your feet might be under you a little more at this point, so as soon as you notice that the baby's hit a growth spurt, take a picture. Then take a picture later in the day or the next day--you'll probably be able to see a size increase from all the eating! Again, it's annoying to be stuck feeding the baby constantly for a couple of days, but after the spurt is over the feedings will probably stretch out again.

6-8 weeks: Peak of crying. Some people suspect that there's some kind of growth of the digestive tract at this point that causes tummy distress and extra gas, because 6-8 weeks is the peak of crying for a lot of babies. Know that it's common and you're not doing anything wrong, and focus on getting through this phase any way you can. Often the crying is clustered in the evening, so work on ways to cope, like going for walks or rides, or bouncing around your house. If it makes you feel better, try things like gripe water or eliminating foods from your diet. Or just wait it out.

11-12 weeks: Your baby might--MIGHT--be transitioning into a regular nighttime sleep routine and regular sleep times at this point.

12 weeks: Growth spurt! Usually not as bad as the three week or six week growth spurt, but you may see a surge in feeding for a couple of days and more variability than you have in the previous few weeks. Same method of dealing with it--just feed your child and ride it out.

4 months: Sleep regression. This is the first of the noticeable sleep regressions, in which a surge in brain development keeps the baby's brain so busy that they can't sleep in long chunks while they're working on a developmental leap. For more about developmental leaps (including a timeline of when they happen in the first two years) check out *The Wonder Weeks*. This sleep regression is tied to the developmental leap at 16 weeks. Your child will wake up more often at night for a few weeks. It's normal, but extremely frustrating, because most babies have barely stated getting on a consistent sleep pattern and now it's all messed up again.



Don't let this shake your confidence. You're doing the right things, and this sleep regression is a great sign for your baby's development. Instead of trying to fix your baby's sleep while the regression is happening, manage the regression by dividing and conquering sleep, if you can. If you have a partner or another adult you can trust living with you, take shifts waking up with the baby so each person gets 4-5 hours uninterrupted sleep each night (plus some more shorter stretches). This sleep regression lasts a few weeks, then your baby will settle back into a more manageable sleep pattern.

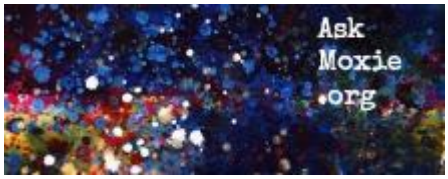
5-5 ½ months: Baby finally starts taking reasonable naps. Up to this point, your baby is likely to be taking naps that last either 20 minutes or 45 minutes. You may (if you're lucky and extremely vigilant) be able to get your baby to take a second 20- or 45-minute nap right after the first one if you can do some soothing at the exact moment your baby is coming out of that first cycle. Your baby is probably getting enough sleep over the course of the day, but it can be frustrating that it's not in longer chunks.

Longer naps usually start kicking in between 4 ½ months and 5 ½ months, once the 4-month sleep regression is over. This means the game isn't over if your baby is 5 months old and not taking two or three consolidated naps per day. Give it a few more weeks before you really start troubleshooting, because most babies will fall into a natural pattern of napping in which the naps are consolidated and longer (usually 90 minutes to three hours per nap).

The 2/3/4 pattern is not unusual for babies over 5 ½ months who take two naps per day. This means that from the time the baby wakes up in the morning to the start of the first nap is around 2 hours. The time from the end of the first nap to the beginning of the second nap is around 3 hours. And the time from the end of the second nap to bedtime for the night is around 4 hours. Many babies fall into roughly this pattern on their own, but if you're trying to nudge your baby into a nap routine, this is one that seems to be fairly successful.

6 months: Growth spurt PLUS first disequlibrium phase. The fourth time is a charm with the growth spurts, because this one tends not to be as intense, and you're better equipped to handle it. Sleep can be a totally different story, though.

Ames and Ilg have a theory that babies and children go through periods of equilibrium around the year mark and periods of disequilibrium around the half year mark, so this is the first period of disequilibrium. (Disequilibrium means that they're out of balance, readjusting, and in flux, physically and emotionally and developmentally.) Some kids start sleeping better than they have been, but many go through a disruption that can be longer and more generalized than a regression. It feels like things that have worked



before to get your child to sleep or to stay asleep might not be working anymore, and things just have an “up in the air” feeling. Your baby may also be more easily distractible while feeding during the day (which can lead to more eating at night), and you may have variable results if you’re starting solids right around this time.

Success during this phase often means letting go of expectations that your child will react the same way to things as they did previously, and understanding that development isn’t linear. Paying attention to what works now, and not worrying about what worked before, is the most direct way to feel like you’re as on top of this phase as it’s possible to be.

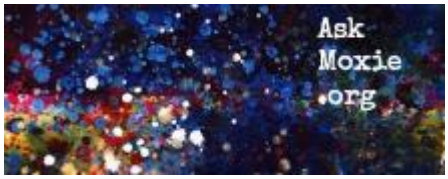
8-9 months: Sleep regression. This one is tied to the 37 week and 46 week Wonder Weeks, and may last for a few weeks or a month, and may taper back to something normal over the course of a few weeks instead of going back suddenly after the leap happens. (Yeah, that can be brutal.) Your baby may have problems getting to sleep or staying asleep either during the night or for naps or both.

Like the four-month sleep regression, this is normal and is happening because your baby’s brain is working on other things and just can’t stay asleep. But it can be seriously disturbing to you, not only because you have to wake up more during the night, but also because it seems like a major step backward. While some babies may have started sleeping through the night around six months, many are still waking up at least once, so this regression with its multiple wake-ups can be both insulting and demoralizing. Remembering that it’s normal and that it will end will help, along with going into lockdown mode and making up a schedule for your own sleep so every adult can get at least four hours in a row each night.

10-11 months: Feeling of general incompetence. The nine-month sleep regression, which may take a long time to end fully, inspires a feeling of incompetence and defeat in some parents. If you’re feeling like you thought you were getting good at parenting but now it’s all gone to crap, know that this is normal and you’re not alone, and it’s more a function of the age of your child than of anything you’re doing.

Also, mothers who pump breastmilk may experience a decrease in the amount they can pump, while still having adequate supply for breastfeeding directly. We don’t know why pumping can change, but it happens to enough women that it seems to be a thing.

11 months is also a common time for the return of the menstrual cycle. If you notice a drop in breastmilk supply for the first few days of your cycle, try taking calcium



supplements for a few days before and during the first few days to see if that lessens the drop in supply.

12 months: You made it! Only 17 more to go.

13 months: Sleep regression. This is the 55 week Wonder Week, and tends to be shorter than either of the previous regressions. Again, it's a matter of budgeting your own time so every adult in the house can get at least four hours in a row even when your child is waking up more often than that. By the time you work that out, the regression will probably be over.

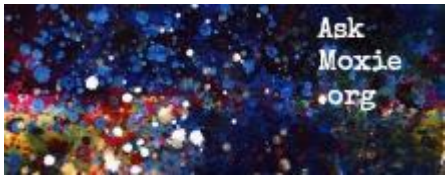
15 months: Kids who have never slept through the night before **might** start sleeping through now.

16-20 months: The 18-month sleep regression PLUS six-month disequilibrium. The 18-month sleep regression can be a huge one. It can be very intense, and can affect nighttime and/or daytime sleep, and may start as early as 16 months and last as long as 20 months. It can make you feel insulted and angry. Again, though, it's normal and part of normal brain development, even if it makes you want to scream.

In addition, your child is learning new skills and independence and probably wants to do more things on their own. Combined with huge receptive verbal skills that outpace their productive verbal skills, kids at this age have a lot of thoughts and desires but they can't say everything they want to say yet. This stage is extremely frustrating for your child, because they can see what they want to do and can maybe do parts of it, but can't do all of it, aren't allowed to do all of it, and can't even tell you what they want. This is why kids have tantrums.

Teaching signs can help, as can echoing your child's feelings back to them ("You're angry because you wanted to ride on the tricycle all by yourself"). Tantrums can make you feel exhausted and incompetent, but they're largely a by-product of the misalignment between brain power and physical competence of this stage. If you can help your child process their upset feelings into communication, it may help.

One very specific way children this age manifest the frustration and desire for control is by refusing to eat, only eating certain foods, or resisting food or table manners in other ways. Since they have little control over their bodies in general and are still physically controlled by adults in most ways, refusing to allow things into their mouths or to swallow them can be the only form of protest and control they have. This can be frustrating to you, but as long as your child doesn't have feeding or metabolic issues in general, they won't starve, so try to give them as much leeway as possible in eating.



21 months: Right around the 21-month mark, children come out of the disequilibrium stage of independence-seeking frustration and become more mature. This coincides with a blossoming of verbal skills that allows them to communicate their desires and feelings. Kids who have been in sleep regressions also sleep better now if the sleep regression hasn't resolved already. In other words: take a breather.

24-27 months: There's a big separation anxiety phase at this stage that can make normal routines, including exchanges with caregivers and mealtimes, more complicated. This can also coincide with a sleep regression that is characterized by resistance to going to bed, problems falling asleep, increased waking, and resistance to naps during the day.

From now on: Expect general equilibrium at the year mark and big disequilibrium at the half year mark. Particular trouble spots are: 2 ½, 3 ½, 4 ¾, 6 ½, and age 7. All of these are characterized by the push-pull of clinginess and resistance and emotional fragility, and can be extremely frustrating.

The first two years are extremely challenging, While you're in them they seem like they'll last forever. They won't. It will get better, both because your child will get older and will be able to communicate with your better and be a more equal participant, but also because you get better at being a parent. You can do it.

Courage.

