Helping parents support their baby’s early communication and language

Abstract
Effective communication between infants and parents lies at the heart of their developing relationship, and provides the foundation for later language development. Research into parental communication shows that responsiveness is the key ingredient for the development of the child’s communication and healthy attachment. Some parents may need support to develop a positive relationship with their baby, and may benefit from being involved in practical experiences with their babies that help them to identify what positive communication feels like, and how it relates to child development.

Key words
Parent–child relationship > Responsiveness > Attachment > Interaction > Early communication

Health visitors and other professionals working with parents can support them to interact with their baby in a consistent and positive way. This is the foundation for the development of early communication and language skills. Finistrella and Lavis (2014), in their exploration of the development of parent and infant wellbeing, highlight the importance of a ‘sensitive and consistent relationship’ between parents and their infant. This type of relationship is essential for the process whereby the baby becomes securely attached to his or her main carers. This promotes healthy brain development, and has a significant impact on the child’s wellbeing and developing mental health, including how he or she develops future relationships. Effective communication between baby and carer is a central component of the process where the parent bonds with the baby and the baby forms an attachment with the parent and subsequent caregivers (Gerhardt, 2004).

In the 1970s, detailed studies of early communication between mothers and infants showed mothers responding to their babies’ vocal sounds. The parents responded as if the baby was trying to communicate meaning, although the baby may have simply burped (Snow, 1977). The high-pitched and exaggerated tone of voice that mothers in the studies used became known as ‘motherese’, though it is now commonly referred to as infant-directed speech—or child-directed speech, with older children—in recognition of the importance of the role of fathers and other primary caregivers in a child’s early life (Jones, 2014a).

Further research into effective communication between carers and infants describes interactions that involve the adult and baby taking turns, with the child providing the starting point; e.g. by gazing at the parent’s face or making a physical movement or vocal sound. Parents pick up on these cues by commenting on the child’s sound and responding to it. Linguists have identified various styles of interaction that characterised not only how parents talked to their babies, but reflected their attitude towards parenting. At one extreme, parents were highly prohibitive, interpreting the baby’s behaviour as challenging or ‘naughty’, while others had a more child-centred interactional style. Responsiveness was regarded as the most effective component for fostering language development and wellbeing (McDonald and Pien, 1982; Lieven, 1984).

The process of baby and parent ‘tuning into’ each other, or attunement, involves parents being emotionally available for the child; e.g. helping the child to become calm through acts such as feeding and using soothing words (Gerhardt, 2004). Babies are born with a drive to make sense of the world, including making sense of communication. This includes interpreting adults’ non-verbal signals, such as facial expression and tone of voice, both of which convey the emotional meaning of words (Boyce, 2012; Jones, 2013a).

Parents build up positive patterns of communicating with their young children that balance being responsive with stimulating the baby, typically by trying to make them smile, laugh and show pleasure. However, parents are able to pick up on the signs that a baby might
give that they have had enough of a particular interaction; e.g. when the baby looks away or possibly becomes distressed. Parents also create predictable play sequences with their baby that involve language, exaggerated facial expression and turn-taking—such as ‘peekaboo’.

Experiments such as the Still-Face Paradigm (Tronick et al, 1979) showed mothers briefly ceasing to respond to their babies in this way. In this experiment, infants became distressed at the sudden lack of communication, indicating how important parental responsiveness becomes for children’s wellbeing. Given a relationship where he or she is involved in regular play and communication with parents or carers, a baby’s own communication will begin to flourish. This is most noticeable when babies begin, from 2 months onwards, to make automatic vocal sounds, known as ‘cooing’. This develops into the more elaborate sound-play of babbling and then gradually, by the age of 1 year, into the infant using his or her first words (Jones, 2014b).

**Supporting parents**

In many cases, parents naturally develop this type of responsive relationship, and the process of becoming attuned, bonded and attached is a pleasurable one for both parent and child. However, some parents may need support in building a relationship with their infant. There can be a wide range of reasons for this, including parents’ lack of awareness of the baby’s emotional needs, or the mother experiencing postnatal depression that impairs her ability to bond or communicate with her baby (Emde and Easterbrooks, 1985). In other cases, babies may experience developmental difficulties, such as Down syndrome, where the baby may be quite passive and may not make the initial signals that stimulate carers to respond (Slonims et al, 2006).

The level and type of support that parents need will depend on the nature of the difficulty, and providing information about the importance of early communication and play is an important starting point. This could include suggesting parents access websites such as the National Literacy Trust’s Words for Life (www.literacytrust.org.uk/words_for_life) and Talk to Your Baby (www.literacytrust.org.uk/talk_to_your_baby) pages. Health visitors can also model behaviours, including showing parents how to respond to their baby’s babbling. While helping parents know how to identify and respond to their baby’s cues is the first part of enabling them to bond with their babies, some may need additional practical support to build a positive relationship (Box 1).

**Box 1. From knowing to feeling**

Baby Talk and Play is one example of an organisation that offers practical training sessions for parents with their babies (Jones, 2013b). During the sessions, groups of parents meet and take part in activities that deepen parents’ awareness of the positive feelings associated with playing and communicating with their young babies. Debbie Brace, an early years consultant who developed the training, begins each group session with an informative discussion about aspects of early communication, such as the importance of listening to the baby, waiting and then responding. Parents and babies are then involved in a game that demonstrates this principle. During the game, parents are helped to identify what is working well and encouraged to repeat the behaviour throughout the game.

For example, a parent may be over-stimulating her child by regularly trying to bring him to a high pitch of excitement. During a session where the parents were sitting in a circle, with their babies in their laps, lifting up a parachute, this mother was encouraged to wait for her baby’s response. When the baby said, ‘Ah!’ his mother practised responding by quietly saying, ‘Ah!’ So you’d like me to do it again? Then she would wait for baby to look at her and say, ‘Ah!’ again, before she lifted the parachute. This helped the mother realise that responding to her child’s cues was more important than always trying to stimulate him through excited talk and boisterous play.

Through this process of supporting parents and babies to have positive experiences together, as opposed to modelling for them or telling them what to do, Baby Talk and Play seeks to help both parent and baby to identify the positive feelings involved in successful interaction. Once a parent has felt the pleasure of communicating positively, they will be more able to identify this feeling when playing and communicating in the future. This is part of the process of what Brace describes as ‘building intuitive parenting’: ‘Professionals and academics often describe early parenting as “instinctive”. This makes an assumption that talking and playing with your baby is somehow genetically determined, in the same way that human babies feel impelled to crawl, walk and then run. But if we use this term, we run the risk of assuming that parents who don’t do this are in some way failing to be “instinctive”. Using the word “intuitive” in relation to parenting individual children recognises that there are skills that can be learned, such as being responsive to the baby’s signals. By building intuition, we help parents to be active in finding out about what their child needs as an individual. This empowers them to respond positively as their child grows.’

**Being in the moment**

The experience of bringing up a first child can differ significantly from caring for second or subsequent siblings. Subsequent children may benefit from having parents who are more experienced—and possibly more relaxed about their role—but these parents may also have less time to become involved in play and interaction, as they now have more than one child to care for. Being ‘in the moment’ is an important concept in such a situation (Jones, 2013b). The busy parent is encouraged to see every short amount of time spent in intimate care with a baby as an opportunity for one-to-one, positive communication. This could take place during...
IN PRACTICE

Box 2. Responsive interaction
Speech and language therapist Bhavna Acharya and Debbie Brace lead the London Borough of Hounslow’s Let’s Talk Together programme and provide training on interaction (Jones, 2014c). Acharya believes the cycle of interaction begins at birth, and makes a direct link between early experiences of interaction and potential language delay.

Acharya regards the development of a responsive interactional style as being crucial for language development: ‘If parents are able to respond and involve their child in play and talk in a way that is meaningful and includes singing and face-to-face interaction, child and parent develop a sense of wellbeing that encourages the child to want to interact more. This provides essential practice that leads the child towards first words and beyond.’

Impact of parental interactional style
From the earliest days of a baby’s life, the cycle of interaction between parent and baby can have consequences on development. Problems may arise that can negatively influence the pattern of communication. In some cases, the parent does not identify the baby’s early attempts at communication, which may result in a series of behaviours from the baby that can be interpreted as attention-seeking or naughty, such as screaming or crying. This may result in negative responses from the parent, leading to more ‘naughty’ responses or the baby shutting down. If a child’s attempts to initiate communication are regularly missed, interaction patterns can become negative. The baby may be described by the family as ‘difficult’, appearing to always be protesting.

In other cases, the baby does not make attempts at initiation. This may please some parents, who are keen to have a ‘good’, undemanding baby who does not require much attention other than physical care. In cases of known developmental delay, such as Down syndrome, parents may inadvertently overcompensate and attempt to increase stimulation, which can result in the parent taking all the turns in the interaction, and the baby still not responding. This may lead to parents experiencing a sense of failure, which can negatively influence the bonding and attachment process. A responsive interactional style can, therefore, be paramount in promoting both bonding and language development (Box 2).

Summary
For many parents, the formation of a responsive, well-attuned relationship with their baby will come naturally. Some, however, will need additional support in developing the intuition necessary to build attunement. Whether this support is delivered through home visiting or practical training in a clinic or community setting, it can be fundamental in allowing parents to experience and understand the significance of early interaction. A consistent, responsive relationship is a key aspect of fostering communication and language development.

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