



## THE SLING CARRIER AS EARLY INTERVENTION

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The Epiphany Center Infant Program uses the “Over the Shoulder Baby Holder” as an intervention for infants who have been prenatally drug exposed. The birth process brings about many drastic changes in warmth, containment, rhythmic motion and light for the infant. The Baby Holder sling provides an environment for the infant that is a transition from the womb to the harsh world. The sling type carrier has long been used by other cultures to keep the child safe, warm, and connected to the mother while she goes about the necessary tasks of daily living.

As an intervention for prenatally drug exposed infants, the Baby Holder helps minimize the negative effects of the drugs on the infant’s system. For example, an infant prenatally exposed to cocaine may experience a period of behavior disorganization after birth which manifests itself as disturbed sleep and irritability (Chasnoff, Burns & Burns, 1987). The cumulative forms of environmental modification provided by the Over the Shoulder Baby Holder: rhythmic motion, reduced light, and curved, supported position seem to have a rapid soothing and stabilizing effect on the baby and are more effective than a single form (e.g., just motion). The infant’s sleep periods are extended, and symptoms of irritability such as prolonged crying are reduced.

Some level of distress is inevitable and unavoidable for the newborn, but the excessive irritability commonly found in infants prenatally exposed to drugs places extra demands on their parents and other caregivers. The ability to calm an infant is important for parent/infant attachment. A calmer, less irritable infant feeds better, is more socially responsive, and more likely to develop better parent/infant relationships.

Carrying these infants in a Baby Holder not only reduces irritability but protects them from too much environmental stimuli. According to Dr. Brazelton, each infant has an individual threshold for stimulus which can be used for organization and learning. Stimulation which exceeds this threshold overloads the infant and sets up defenses which are likely to be costly to future development (Nugent, 1985).

A caregiver at our program, Shannon Hunts, summarizes the value of the Over the Shoulder Baby Holder in this way:

“I appreciate the ability to comfort and soothe an infant in a way that is not temporary or sporadic, and is more interactive. It allows me to provide an intervention that does not have to be interrupted as I do other things or relate to other children and adults. We too often try to ‘fix’ the discomfort in infants so that we can move on to other things. We don’t always consider the effects of temporary solutions that decrease the external signs, but leave the infant needing comfort.. The Baby Holder allows for time together, a closeness between adult and infant, that is not disturbed, that is consistent, and that is very comfortable for me and the child.”