

Enhancing Your Baby's Development through Movement

David Van Nuys, PhD, aka Dr. Dave,
interviews Beverly Stokes on
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Dr. Dave: Beverly Stokes, welcome to Shrink Rap radio.

Stokes: Thank you, Dr. Dave. I'm delighted to be here today!

Dr. Dave: Well, I'm really pleased to have you on the show I must say. You're the author of two very fascinating titles: One is *Amazing Babies Moving: Essential Elements to Enhance your Baby's Development in the First Year*, and then you have a more recent one that just came out in 2015 and it's titled *Your Self-Motivated Baby: Enhance Your Baby's Social and Cognitive Development in the First Six Months through Movement*. . . . You're really into babies.

Stokes: Yes, my baby movement research documented in movement vignettes in my books and videos has been ongoing for over 25 years.

Dr. Dave: Before we get into your work as it's presented in these two books, let's take a step back and have you tell us how you first got interested in infant development.

Stokes: Well, I was teaching movement programs for adults, teens, and a Mom's and Tots class in Canada, and decided I really wanted to know more. I was so interested in the babies' movements. I trained and was certified by Bonnie Bainbridge Cohen at her School for Body-Mind Centering as a practitioner and teacher of Infant Developmental Movement and Somatic Movement Education. I am also a Certified Movement Analyst of the Laban/Bartenieff Institute of Movement Studies and Movement Pattern Analyst in Warren Lamb's decision-making framework. I have studied with many notable teachers in the movement field: Judith Kestenberg, teachers in the Feldenkrais Method and the Alexander Technique, and Breathing Coordination with Carl Stough. With an interest in private practice, I also became a cranial-sacral therapist.

Dr. Dave: Oh really? I didn't know that.

Stokes: Yes, I had a studio in Toronto called the Center for Experiential Learning with a large studio for my movement workshops and parent-baby groups.

Dr. Dave: You're reminding me to move!

Stokes: I also originated the program at the Canadian College of Naturopathic Medicine, and taught developmental movement and experiential anatomy of the body systems. I was in private practice at my studio, and that is where I documented "Amazing Babies Moving," my first video. Later on, when I was teaching my Amazing Babies Moving programs and workshops on the body systems, I met Janet Kaylo and was on faculty in

her Laban/Bartenieff and Somatic Studies program at York University and Ryerson University in Toronto.

Dr. Dave: So you have been doing pioneering work in infant development now for 25 years, and I'm struck by how you have carved out a career for yourself in a very nontraditional way. You didn't just go into a master's program here or a doctoral program there. But really, you kind of invented your own career, your own niche, which I really congratulate you on.

Stokes: Thank you.

Dr. Dave: And you've been doing it for 25 years, so I'm wondering if you can in broad strokes contrast for us what was known about infants 25 years ago when you first got into this, and a sense of what's changed over the course of 25 years, and I know we'll get into some of the specifics of that as you take us through some of your current work, but kind of in broad strokes—I assume we know a lot more now than we did then.

Stokes: There's been a resurgent interest in motor development and its influence in specific areas, and I think that's what's changed. For example, how babies coordinate their body and explore their environment. Also where babies are looking, their focus of attention, and how they perform different actions. What is unique about my work is that I am documenting the babies' development in "real time." I can't ask the babies to do something or ask them a question. It's the baby who leads the session. This renewed interest in motor development includes expressive communication in social interactions and the development of humor. Although there are infant researchers who study the babies' motivation in action, I am also looking at this in context of the decision-making framework.

Dr. Dave: Wow. A lot going on with babies.

Stokes: Yes there is!

Dr. Dave: Now, you were trained in cranio-sacral and other kinds of movement, so are you manipulating the babies in any way, are you massaging them or stretching their limbs or anything like that?

Stokes: I'm glad you brought that up. I don't move the babies' arms and legs but rather use subtle touch to entice the baby to initiate the movement. Typically, I set up an age-appropriate environment that encourages natural movement and exploration. But I don't move the baby's body because what I'm interested in is how the babies organize their body by themselves, in body positions that are naturally occurring. Rather than the baby sitting on their mom's lap, the parent is lying on the floor, at the baby's level in a horizontal, vertical, or sagittal alignment that offers new ways of interacting with each other, and also develops their spatial awareness.

Dr. Dave: You've got all these wonderful pictures in your latest book and we'll be talking about these situations. But actually, it made me wish there were an infant in the house. Now, I'm the father of four and grandfather now of four, but everybody's past the baby stage. While I like to think I was a good father, I certainly didn't know as much as I do now, having gone through your books. And it seemed like a really key thing is, as you just said, getting down on the floor at the baby's level, and not doing something to them, but really letting them lead the situation, and they're learning about us and we're learning about them, and it's really a fluid exchange—that's the impression I've got.

Stokes: Yes. And for each session to be aware that the baby is rested, dry, fed, and alert. And when the baby is in this optimal state, parents can also be the floor at the baby's level, which is so important. And the baby knows the parent is there. When the baby is content and begins exploring a toy or an object, this is when the parent can quietly observe their baby's play session. Their baby will show them so many amazing explorations and new actions. You know, babies are eager to move. They love moving their body.

Dr. Dave: Right.

Stokes: Just like we do, it's just the pleasure of moving, going for a walk, going for a swim. I like dancing, as well, so I dance tango.

Dr. Dave: Oh really? Argentine tango?

Stokes: Argentine tango.

Dr. Dave: Somebody started talking about that just yesterday in my tai chi class, so it's interesting that the very next day we're talking about the Argentine tango.

Stokes: I only mention it because of the pleasure of moving and babies are so eager to move, and explore.

Dr. Dave: And you're going to be painting verbal pictures for us, since people don't have the book, unfortunately, yet, to be looking at over 350 photos in color, so you'll be kind of painting the picture for us describing, as you call them, vignettes, kind of sessions or action sequences, and we're going to have you take us through a movement framework that focuses on developmental movement, social interaction, and self-motivated learning. So we'll take some time and have you step us through each of these three topics if you will. So let's jump into it now.

Stokes: Let's start with developmental movement.

Dr. Dave: Yeah, developmental movement.

Stokes: There is a general progression to the baby's movement development. As you follow the movement organization in the baby's first year, first lifting their head, rolling

over, belly crawling, independent sitting, cross-lateral creeping, pulling up to standing and independent walking, you will see four basic movement patterns. I show this in my first book, *Amazing Babies Moving*. These patterns are spinal movements initiated from the head and tail, symmetrical movements initiated by both arms or both legs, lateral movements initiated by the movement of the arm and leg on the same side of the body, and cross-lateral movement. Cross-lateral movement is the pattern you see in locomotion in hands and knees creeping, it is the movement of the right arm and left leg together, and the left arm and the right leg together. In my second book, *Your Self-Motivated Baby*, I cover the first three patterns, because we're looking at the baby's movement development in the first six months before the locomotion stage.

Dr. Dave: I seem to recall that one of the grandchildren when they were kind of in this phase did the creeping, but backwards, ended up going backward. Is this something that happens some of the time?

Stokes: Yes, but this is not in cross-lateral creeping, although they can creep backwards maybe to change direction. You're likely talking about one of the first locomotion patterns, where a baby is lying on the floor on their tummy, and they push with both hands and their body slides backwards.

Dr. Dave: Okay, yeah, I don't remember it all that clearly, but that's probably what was going on.

Stokes: Well, that's probably what's happening. The baby also finds it funny, because their intention is to go forward to a parent, or to get a toy, and all of a sudden they're sliding backwards. They really do find that very funny.

Dr. Dave: Yeah. And I'm struck by how closely you observe them and how you've created a whole vocabulary for describing and categorizing their movements.

Stokes: The vocabulary is based on the foundation of human movement, the framework used in many somatic trainings and nonverbal communication. My focus has been to document movement, social interaction and exploration in the environment in typically developing babies.

Dr. Dave: So, what's going on, what sorts of things are they learning in the course of doing all this movement?

Stokes: What interested me is how babies move in different body positions, so a baby lying on its back, what is the baby exploring? We could look at a three-month-old baby, with their head in midline, and with their hands together, maybe they're exploring their fingers, developing their body awareness. I always encourage parents to talk to their baby about their body, "Oh, I see you found your hands today" or maybe a four-month-old baby is lifting their legs off the floor and placing their hands on their knees. "I see you found your knees today" or "Now you can reach your feet." So during this pre-locomotion stage, babies are developing their body awareness, and doing all these

incredible body explorations against the potent force of gravity, because they're moving against gravity.

Dr. Dave: So they're learning about gravity among other things as well.

Stokes: Yes. Mastering gravity is primary for their security, comfort, growth, and development, one of the most essential learning experiences for future movement explorations.

Dr. Dave: And it's funny, as you lean into the camera and speak to me in that voice that you would speak to the baby, and I see your face, it makes me aware of my fingers and my toes (laughter). I feel like I'm regressing.

Stokes: I think you're just developing your tactile awareness and your kinesthetic awareness as I'm talking.

Dr. Dave: Yeah . . . so somebody might wonder, well, what's the point of all of this? I mean, the baby will develop, and what's the point of knowing all of this?

Stokes: It's the baby's motivation to explore, to interact and lead their social interactions, and develop their motivation, problem solving new actions. In these vignettes babies show us their concentrated attention—how long a baby can explore and what they are discovering and learning. I mentioned three months, so let's talk about a three-month-old baby exploring her toy whale. The baby is lying on her back on the floor, and her mother gives her a soft toy whale. It's a stuffed toy and quite large, but light weight, and she can rest it on her body and turn it around to hold the tips of the tail fin in her hands. Babies love tags on toys, and even at three months, she can point to the tag nestled in the forked fin. As she feels and moves the toy, the whale rolls off her body and lands on the floor beside her. This toy whale has a curved tail, and the baby curls her fingers and moves the back of her hand to fit into the same shape of the whale's tail.

Dr. Dave: Uh-huh, so she's kind of mirroring it.

Stokes: She recognizes and shapes her own hand to fit it into the three-dimensional curve of the whale's tail.

Dr. Dave: Interesting.

Stokes: Yes, it is very interesting. This is three-dimensional learning, and she is the one that is motivated to explore the toy. As I observed her handling the whale on her body, she was able to spontaneously bring one leg up to balance and support the whale on her body. Through her actions she learns what she can do. At the end of the session, she is very calm, her whole body is relaxed, her arms and legs are resting on the floor, and her hand is resting on the tail of the whale. This is a very long learning, exploration experience—led by her.

Dr. Dave: That seems to be a really key thing, and I notice you say that with particular emphasis. (Laughter.) So, say a little bit more—why is it important that it’s led by her?

Stokes: Because they are learning what they can do, and so often we think that we have to teach babies—but actually we are the ones who are still learning from the babies. Another very interesting vignette was with a four-month-old baby that I was documenting. She was lying on her back, on her blanket, on the floor and she was looking at me intently. Her right arm was spread out to the side with her index finger extended, and she was pointing to the stars on her blanket. I thought, “She wants me to look at the stars on her blanket.” She’s sharing her everyday experience of her starry blanket with me. And that’s called “declarative pointing,” pointing to share something with somebody else.

Dr. Dave: And that was at what age?

Stokes: Four months old. And you wouldn’t think you’d see the pointing gesture in a baby that young. What is interesting is that she is lying on her back on the floor. She’s not sitting independently yet, but in this supported position, with her arms resting on the floor, she can use this pointing gesture and through her visual attention to engage me, she can communicate her intention. How do I know this? I know that was her intention because of what she did next.

Dr. Dave: And what was that?

Stokes: She wanted to roll over and touch a large star on her blanket. Because this blanket had clusters of white stars on a blue background, there were large stars, medium-sized stars, and small stars. She rolls over to point to the large star on her blanket, and then she rolled over on top of this large single star.

Dr. Dave: Okay, but you didn’t reach out and roll her over when you got that intention.

Stokes: No, I didn’t. And interestingly, this will happen in tummy time, and in this case too, when she rolls over onto her tummy, she gets one hand caught underneath her . . .

Dr. Dave: Yes, I’ve seen that.

Stokes: Yes, and often a parent will try and help the baby move her hand, but I usually encourage parents, to let the baby organize their body by themselves.

Dr. Dave: So a lot of what’s going on it sounds like is the baby’s developing a sense of self-efficacy.

Stokes: Yes, this is what’s so important for the baby to learn.

Dr. Dave: The baby’s learning, “I can do.”

Stokes: Yes, and this builds the baby's self-motivation.

Dr. Dave: So, going back to my earlier questions of what's the point of all this, I know a lot of parents are interested in an enhanced stimulating environment, an enriched environment. And in a way this is a way of enriching the baby's environment in a very social way, so that there would be a lot of social learning going on.

Stokes: Also, what's interesting is to pause and let the baby take the lead in these social interactions. I want to share a delightful development in babies who are around five months old—they're developing their sense of humor, being funny to make other people laugh.

Dr. Dave: Oh yes.

Stokes: They are very funny. I write about one baby in my first book, when this baby is ten months old, in my baby group and one baby is sitting behind the other. The little boy in front has a colorful beach ball, and he lifts the ball over his head, and the baby behind sees the ball coming, and she takes the ball. She is playing a joke on him, literally behind his back. He looked so surprised! And then he smiled—he got the joke.

In my new book, I'm interacting with a five-month-old baby on the floor, and her mother is documenting this play session. We're lying facing each other in tummy time with our arms resting on the floor, and our fingertips almost touching. She looks at my right hand and places her left hand on my right hand, mirroring the same side. And then she looks up at my colorful necklace, and looks back at our hands. I don't do or say anything, I just observe what she is doing. She looks up at me, and I smile at her. Smiling lets her know, I'm enjoying being with her. But I still don't say anything and I don't initiate an action. She looks at me and smiles, and now we're smiling together, communicating to each other, "We're enjoying this!" And she looks back at our hands and then she takes her left hand and crosses her midline and puts her hand on my left hand. Now she watches me to see what I'm going to do. But I don't know what she's going to do next, and I'm really curious. I don't know what her expressive repertoire is. In a surprising intentional action, she suddenly pulls her hand away quickly, and laughs. That's the joke! Maintaining eye contact, she watches to see if I find it funny too. This new accelerated movement in quick timing was the "punchline," the key element to make me laugh too.

Dr. Dave: We had twins, actually—two of our four kids who are twin boys, fraternal twins, and I remember they were on the kitchen table in those little stand-up baby seats, little plastic . . .

Stokes: It would be better to have them on the floor . . .

Dr. Dave: Yeah, okay, good point. But they were kind of facing each other, and it seemed like it was almost the first time that they realized that there was another guy there. And they started laughing. Their laughter just kind of triggered each other, and they were just laughing at each other, with a real sense of joy and discovery.

Stokes: Can I say something about the overuse of containers? It has become an issue because babies aren't getting the physical interactions with gravity they need by moving on the floor, or developing their motivation to explore the environment.

Dr. Dave: Yeah, okay. I think in this case it was for feeding—two, and you know, you got to have some way of setting them up. Now earlier, I notice you said something about curiosity. It seems like that's important, that what you're bringing to the situation is a lot of your own curiosity.

Stokes: Yes, that's right. It's in these three stages of the decision-making framework, the first being the attention stage, where the baby is looking, they're showing us their curiosity and interest, maybe playing with a toy. The second stage is planning the action, what they are going to do with the toy? How is this exploration going to unfold? And the third stage is the action stage, and these include all the different actions that the baby will do with the toy.

In one of these vignettes, we can follow a five-month-old baby playing with a wooden duck. The parent or caregiver creates the environment and provides the baby with a toy. Again, you can't tell the baby how to explore the toy, so it really is based on the baby's interest and actions with the toy that develop their movement and handling skills. Sometimes a surprising event will happen like the five-month-old experienced playing with this wooden duck. The duck is on two wheels with a wooden ring around it, so it was a little unstable, and the duck topples over. Now the duck is upside-down! The baby has another problem to solve—to turn the duck right-side up. She is able to do this, and when she does, the wooden ring around the duck fits into the curve of her arm.

Again, it's the baby's embodied experience of three-dimensional shape and space. The wooden ring around the duck is circular and fits into the curved shape of her arm. Just like the three-month-old placing the back of her hand to fit into the curve of the whale's tail. In the first example the three-month-old baby curves her hand to fit into the shape of the whale's tail and in the second one, the five month old matches and fits the circular wooden ring into the curved shape of her arm.

Dr. Dave: You know, earlier, you were describing a situation with the baby, and you said, "And I didn't say anything." So when, do you say things? When do you know the time is right to say, to be talking to your baby?

Stokes: There are many different ways we can engage and interact with babies. In early gazing the baby will be focused on her mother's animated face—as her mother is smiling, talking or singing, her mouth is moving and her eyes are bright, and her eyebrows may be raised and the baby can shift her gaze from her mother's eyes to her mouth and eyes again. This is a wonderful back-and-forth interaction that's taking place between the parent and baby. Other times you may just be quietly observing what your baby is doing. Parents often think they have to show the baby how to play, but there are times you just want to observe your baby without interrupting their exploration. Your baby will be very

aware you are there. Being attentive is important. We all know, maybe you've had this experience, when trying to solve a problem and your friend nearby isn't saying anything, but just because there's someone else there . . .

Dr. Dave: Right.

Stokes: You solve the problem. Well, it's a similar situation. The parent or adult's attention is on the baby. That's the important part.

Dr. Dave: Yeah. We all crave attention, like being a podcaster—I can attest to that. And I can even remember when I was quite young, it was constantly, “Mommy, look at this, look at what I can do, mommy look!” And that almost goes through the whole life cycle, but it kind of gets converted into other people eventually.

Stokes: The baby is aware that you are watching what they're doing. I have several vignettes that show the baby smiling at the end of their play exploration. Sometimes the baby is smiling, experiencing the pleasure in their own play exploration, and if the parent is there, the baby may look up at the parent with bright eyes and smile to share their experience.

Dr. Dave: Yeah.

Stokes: I think the difference is that everything is a first time or new experience for the baby discovering how to move, planning an action, playing with a toy or problem solving what they can do right.

Dr. Dave: Right.

Stokes: And babies are aware the parent is there.

Dr. Dave: I'm just saying that that goes on through our whole life cycle, we all crave being seen. And in psychology there's a concept of social facilitation that I remember from graduate school a long time ago. Two animals will eat more side by side than they will alone, across quite a few different species, including human beings.

Stokes: What I am showing in my book is the parent's attunement to their baby in their social interactions and uninterrupted play.

Dr. Dave: But we really didn't talk about, I'd asked you about when to talk to your baby. And so there are occasions where I think you, and mothers kind of naturally do this, if the baby is making some kinds of sounds . . .

Stokes: Well, I had a really interesting experience with a mom and baby I was documenting—the baby was about ten days or two weeks old, and I said to her, “Is your baby looking at you?”

Dr. Dave: Yes.

Stokes: And she said, “Oh no, my baby can’t focus his eyes on my face yet, he’s not really looking at me.” She was standing up holding her baby in her arms, so I suggested that I would videotape her baby over her shoulder. As she was holding her baby in her arms, in the horizontal position on the left side of her body, I videotaped her baby over her right shoulder. The baby looked at the camera, and shifted his gaze and looked at her face and smiled. And she said, “Oh, he *is* looking at me!” And you see, that changed how she related to her baby. Knowing this, she would smile and talk to her baby and also wait for her baby to respond. So it was an important learning experience for her and their growing relationship.

Dr. Dave: Yes. The mother is so important, that relationship between mother and baby is so primal, because they’re together all the time, especially in the beginning and from the very beginning. And as a father, and maybe an unenlightened father, I’m now going to confess that I sort of had this attitude that the baby wasn’t really real until about three months, when they start to recognize *me*, and respond to *me*. And that’s when I get really interested, as a male, and I don’t know how typical I am in that regard.

Stokes: Well, I like to offer dads a wonderful movement exploration with their baby. You know, lots of parents say, “My baby doesn’t like being on their tummy.” So one little activity for the baby to get comfortable on their tummy is for the dad, to lie down on the floor and place a pillow under his head so that his head isn’t too low. Then to gently pick up and place his baby so the baby is lying on his chest, and the dad can hum to the baby. His baby experiences these humming vibrations that are very soothing. This is a comfortable way to introduce a baby to tummy time, and for dads to do something new with their baby that maybe they wouldn’t have thought of—humming, gazing at their baby, and also encouraging tummy time.

Dr. Dave: Yeah, that certainly sounds familiar. I need to adjust the picture of myself with these babies. One memory that stands out really strongly: The twins actually came along late and so I was older, was an older father, and I had a different attitude about parenting I think because I was more secure in my career, et cetera, and because there were two and they sort of needed more attention. And so I remember one time, it was very early on, this is when they were really, really just, not long out of the hospital, I don’t remember how many days, but they were really very little, and I was sitting in a rocking chair and I’ve got one on each . . .

Stokes: (laughter)

Dr. Dave: . . . shoulder, breast, chest, something, and they’re sleeping. And I’m in this rocking chair and I can feel their little consciousnesses pulling me down and I’m getting sleepier and sleepier—and it’s such a wonderful feeling to feel these little sleeping beings. And that’s one of the strongest memories of my life, really—there was a real deep bonding experience for me.

Stokes: Yes. That's wonderful.

Dr. Dave: Well, where are we in our outline here? We were going to talk about developmental movement, social interaction, self-motivated learning—it feels like we've been doing all of those.

Stokes: I think so. First we went through the developmental movement patterns and how important motor development is, and movement in all those domains, in social interactions. And if you're close to a baby when you're lying on the floor beside your baby, and when the baby is exploring a toy, they may also stay connected to you by placing their foot against you. They like to keep a body connection. Or maybe their hand is resting on your body. So there's touch. And they will also, if you're close enough, maybe reach out and touch your face. So yes, touch, and being close to each other is really important socially, and that is expressive movement. And even the little tongue game that parents often play right from birth. There's a lot of scientific research on tongue protrusion. Facing your baby, and sliding your tongue between your lips—and waiting for your baby to organize their response. Often adults move a little too quickly, by not waiting, and giving the baby time to organize their response.

Dr. Dave: Yeah, going back to the idea that the baby is kind of taking the lead . . .

Stokes: Taking the lead by initiating the interaction . . .

Dr. Dave: And being patient and . . . you really have to slow down to do this.

Stokes: Yes, that's very important.

Dr. Dave: As an adult, you have to slow down, and turn on your curiosity.

Stokes: Yes—be like a baby!

Dr. Dave: Instead of feeling like, okay, this is dead time, but I have to spend time with my baby . . . I don't know if anybody is like that or not, but . . .

Stokes: I hope not! Of course, there are times when parents are busy, and would like to be doing other things. But I really do encourage parents right from the start to create a place on the floor for their social interactions and playtime. You know, babies make parents and adults playful. Often parents don't have experience in how to playfully interact with their baby. So having a special place and time of day, maybe in the morning when the baby is more alert, and later in the afternoon—this creates a daily rhythm for you and your baby. You may begin with fifteen minutes and because you will become so interested and engaged with your baby, this time will naturally expand and become your favorite time of day.

Dr. Dave: You know, we think of babies demanding a lot of time, and being the source of, the occasion for a lot of work. But I think that also the baby is doing a lot for us, and that the baby potentially is a healer. What do you think about that?

Stokes: As I was saying, babies bring out a playfulness in adults that maybe they don't express any other way and a joy, a joy through their love, through their social interactions, you could call it healing, because it is love . . .

Dr. Dave: Where I'm coming from with that is that I have a good friend who has suffered some neurological issues, and recently he has been visiting another friend who has a new baby. And he finds that he is actually going to hang out with the baby, he goes and visits so he can hang out with the baby, and he feels better as a result.

Stokes: Yes, I am not surprised by this.

Dr. Dave: So it sounds like it's a very healing interaction.

Stokes: Yes, that's a very specific situation. I'm talking more generally about parents, caregivers, grandparents and their babies. But yes, I can certainly understand that, and it gives them a lot of pleasure, and a lot of joy.

Dr. Dave: What have we not touched on here that you'd really like to make sure that we get in, or have we touched on it all?

Stokes: I think we've touched on a lot.

Dr. Dave: Earlier you mentioned a video that you made, and I'm wondering, is that available for people, is there someplace where they can see this video?

Stokes: Yes, well of course, my new book, *Your Self-Motivated Baby*, is available, and my first book was written based on my first video, "Amazing Babies Moving," and then I documented and produced "Amazing Toddlers Moving." So there are two videos that are available at my website.

Dr. Dave: And what is that website?

Stokes: My website is www.amazingbabiesmoving.com. My new book's website is www.yourselfmotivatedbaby.com. I also wanted to say that my videos, and my first book, have been translated into four languages. The videos were translated and used in a parenting program on Hop! Television in Israel for four years and the videos are streamed in universities and colleges in the U.S. and China. They are used in many early childhood education programs, Montessori, Waldorf, Head Start, preschools, including intervention and somatic training programs.

Dr. Dave: I'm not surprised, and that must be very gratifying.

Stokes: Yes, it is very gratifying. What I really want to emphasize by focusing on the first six months is to look at the baby's motivation—the baby's motivation in social interactions, and actions exploring their environment. In these vignettes, we see how babies initiate and lead their social interactions and develop their sense of humor. In their dynamic explorations, babies are problem solving, planning actions and regulating their attention to reach their goal—that is learning from motivation to mastery!

Dr. Dave: Okay, well maybe that's a good wrap-up. So Beverly Stokes, I want to thank you for being my guest today on Shrink Rap Radio.

Stokes: And, thank you, it was wonderful. Okay, Dr. Dave, thank you very much.

Dr. Dave: Okay, bye now.

Stokes: Goodbye.