# Finding your Mum Tribe with Cassidy Mason | Episode 16

*Excerpt*

*Cass: So this week, Max has developed a new great habit, which is screaming at bedtime. He does not enjoy going to bed at all, which is particularly bad for Alex because he's the one that does bedtime. So poor Alex, every now and again, I get a little message saying, please, can you come up? Because Max is just screaming the house down. So he has his bath; that's not a problem. He loves his bath, smiling, kicking and he'll feed happily for about four ounces. And then suddenly it's like, he realizes bedtime's getting close and he just screams, loses the plot.*

Meg: This is Cass, mom to nine-week-old baby Max. And this week, we are also joined by Cass's long-time friends, Katie and Charlie, who are also first-time moms to baby Isla and baby Jazz. Together, we are exploring the world of six- to 10-week-old babies. We talk about baby cat naps, what they are and how to prevent them. I share some advice on how to help the moms settle their little ones at bedtime, including watching awake times, using weighted blankets and swaddling. And the moms ask me to weigh in on where the little ones less than three butts can be expected to sleep through the night and whether we should be giving them a dummy. So don't go anywhere for more about sleep, smiles and developing growth motor skills in the fourth trimester. Join me together with Cass, Katie and Charlie, as we parent with sense.

Intro

Welcome to Sense by Meg Faure, the podcast that's brought to you by Parent Sense, the app that takes guesswork out of parenting. If you're a new parent, then you are in good company. Your host Meg Faure is a well-known OT infant specialist and the author of Eight Parenting Books. Each week, we're going to spend time with new moms and dads, just like you to chat about the week's wins, the challenges and the questions of the moment. Subscribe to the podcast, download the Parent Sense app and catch Meg here every week to make the most of that first year of your little one's life. And now, meet your host.

Meg: Welcome back, I’m Meg Faure and I am delighted to be your host, as we journey with new parents through the joys and questions that are part and parcel of the first year of parenting. And this week, we are back with Cass, mom to Max, to hear all about the hot topics of a mom to a nine week. Is he nine weeks old, Cass?

Cass: Yeah. And he was nine weeks on Monday. Yeah,

Meg: It's unbelievable how time is flying. And Cass, you have got two friends who are joining us here today. Let us know who has joined us.

Cass: I have my two friends from Uni and we've all had babies around the same time. So there's Kate or Katie who has got baby Isla, who also is my goddaughter, very proud god mom. And Kate, how many weeks is Isla?

Katie: She's five weeks.

Cass: Five weeks. And then Charlie, who has had baby Jazz, who is four days older than Max. So I'm get about to turn 10 weeks. Is that right, Charles?

Charlie: Yep. She is 10 weeks on Friday.

Meg: Well welcome Katie and Charlie. We are absolutely delighted to have you both here with us. And as usual, Cass and I just kind of shoot the breeze; talk a little bit about what happened in her week. And maybe Cass, we could actually kick off there and maybe as Katie, Charlie, if things come up for you that you're experiencing at the same time, then you can just jump in as well and we can just share what this week of motherhood looks like.

Cass: So this week, Max has developed a new great habit, which is screaming at bedtime. He does not enjoy going to bed at all, which is particularly bad for Alex because he's the one that does bedtime. So poor Alex, every now and again, I get a little message saying, please, can you come up because Max is just screaming the house down. So he has his bath; that's not a problem. He loves his bath, smiling, kicking and he'll feed happily for about four ounces. And then suddenly it's like, he realizes bedtime's getting close and he just screams loses the plot.

Meg: That's fascinating Cass. And he wasn't doing that before because you'd put him down and you could kind of keep your hands on him and he'd sit without crying.

Cass: Yeah. No, he was an absolute dream to go down. But for the last three nights, it's just been screaming, absolute screaming.

Meg: And has anything changed on his day sleeps?

Cass: Nope. Nothing's changed on his day sleeps at all. The first night he started doing it, he had his worst night sleep that he's actually had. Apart from the vaccination night, he had a terrible night that night. We were up almost every 45 minutes. He was doing one sleep cycle and then waking up. And then the next night, he kind of went back to normal. And then the following night, he did seven hours straight through until about three in the morning. And then he did his feed and then one other feed at five, you know, straight through until 5:30 each. And then last night, last night we're now staying at my mom and dad's because they're going away and we're looking after the house. So he woke up every two hours last night, but I do think that might have been because we’re in a different place, but he was going down really quickly again. But it's just when Alex is doing the bedtime routine, he just starts squint, like we've never heard him make that noise before.

Meg: That's really interesting. And I mean, just talking about that, what time is he waking in the afternoon from his last sleep of the afternoon?

Cass: So I'm trying to give him a sleep, a sort of power nap that he goes up for his bath between 6:00 and 6:30. So I'm trying to give him power nap where he's waking up between 5:00 and 5:30.

Meg: Okay. So that's absolutely perfect. So you're aiming for about an hour before bedtime. So one of the things that you can actually start to do Cass, and just for everybody's purposes, we talking about awake times here. So what are those awake windows that are optimal to make sure little ones settle quite easily and what happens as they get older, those little awake windows length and a bit? And if we don't, if we're not on top of it, if we're not watching that lengthening, we are putting them down too early and when they actually are not quite tired enough, which it could be. So the awake windows for his age right now are 60 to 80 minutes. And what we generally say is the 60-minute awake windows, hold onto those for the morning sleeps and stretch them towards 80 minutes for the afternoon sleeps. And so I would actually start to leave 80 minutes between his last nap of the day and bedtime, just so he is a little bit more tired and ready to actually settle down.

Cass: So bedtime being, when he's going up for his bath.

Meg: No.

Cass: So when we stop, no. So you see it is he's already going up for his bath that 45 minutes to an hour after he wakes from his last day sleep.

Meg: Okay. So that should be fine. Okay. So what time is he actually lights out? What time is lights out?

Cass: Well with all this screaming, he's not settling until about eight o'clock, so it's about an hour and a half of bedtime.

Meg: He's not settling until eight o'clock and he's awake at five.

Cass: Yeah, because he goes up for his bath and then he's fine.

Meg: It’s too long

Cass: At the time we would usually start to put him down is when he starts screaming suddenly.

Meg: Oh, okay. Yeah. So you're going to have to experiment with those awake times. I mean, I think in principle, 90 minutes or 80 minutes to complete lights up, like when he should be actually asleep. And often, that means that for about 15 minutes before you're doing the rocking and the settling and the shushing. So they're getting into a drowsy state. So try and aim for then, I mean, it would be aiming for 60 minutes with lights out and then 80 minutes for him to be completely done. I would suggest.

Cass: Okay.

Meg: Either of you, Katie and Charlie, either of you two experiencing that?

Katie: Similar to those questions with me with Isla, obviously she's five weeks so she's of a different age. She's way behind where you guys are, but she fights sleep...

Meg: Yes.

Katie: So, I mean the sleep is like these 40 minutes, but

Meg: She's a little cat naps.

Katie: She does.

Meg: Yeah.

Katie: So we don't have that sort of lovely fun time because she'll go down 15, 20 minutes and then she'll be up again for like an hour and then she'll have another.

Meg: Yeah. Yeah.

Katie: So at bedtime, we are trying to start getting her into routine with bath things, but I do like, it does take about an hour and half to get her down through the witching hour.

Meg: It is. So first of all, I mean, I love that you've brought up this catnapping thing because weirdly, I was actually just busy writing an article for my website on exactly the subject. So there are two kinds of classifications that people think of when they think of catnaps. The one is that 45 minutes sleep, which is often when little ones, and I know that Max certainly did it when he was very little, they would sleep a very long stretch to, for like three, four hours between sleeps, between feeds. And then suddenly they start to do these 45 minutes and we consider those to be cat naps. Now I absolutely know that that's not what you're talking about, but I'm just referencing it with, with this information. So if little ones are doing 45 minute naps, that's actually coming into the natural sleep or light sleep state and that's why they're only doing 45 minutes stretches.

So the 45 minutes is actually not a cat nap. It's actually a typical sleep stretch for this age. And it starts at around about six weeks and it goes all the way through, unfortunately until about six months. So most babies don't really link their sleeps cycles, until they're six months old. And then at that point, they're on lovely solids and they start to link their sleep cycles again for lunchtime. Some babies do link two sleep cycles together. I think Max might still link a couple of his sleep cycles together, but many babies don't. But actually, what you are talking about Kate is different; that is real cat napping. So that is when you've got a 10-to-20-minute stretch of sleep and then they wake up at that point. Now the reason that babies do that is that they're waiting for what's called the Hypnagogic Startle.

Now a little bit of background to that is that we all suffer from these Hypnagogic startles. Basically, we all have normal muscle tone that we can kind of exist in the world and act out on our thoughts throughout the day. And then as we go to sleep, our bodies actually lose muscle tone as we go into a deep state of sleep. And you will know that you would've done this when you were sitting on a plane and you kind of had nodded off and as your body kind of slumped, you wake yourself up. And that's what's called the Hypnagogic Startle.

Now little babies do this as well. Except what happens with them is that it actually is enough to wake them up. And it's particularly so, if you've got a more sensitive baby. So in the case of Max, for instance, he's got a much higher threshold for sensory information, so he might never have been woken by his Hypnagogic Startle, he just kind of stepped through it, but Isla might actually be a little bit more sensitive. And so, when she does her little Hypnagogic startle, which will look to you like a reflex, it'll look like her fingers just go wide in that moment or her arms might even actually just shoot out that moment.

Katie: Yeah.

Meg: And that's actually the Hypnagogic startle. And because she's more sensitive, she's actually waking herself up with it. Now there are things that you can do for it actually. So a couple of things are number one, what works really well for it is swaddling. So, and I know that some moms will say to me, my baby doesn't love swaddling and Cass and I have about the controversy that exists around swaddling, but I'm actually a very big and strong advocate for swaddling. And it definitely is one of the things that can limit those Hypnagogic startles because what it does is that, as they kind of do that little jerk, it's almost like they're moving against the uterine walls and they kind of do the jerk against where they're contained and therefore they can sleep through it.

So step number one, definitely swaddle and when you talking about swaddling, you got to swaddle really, really tightly. So I'm not talking about kind of loose swaddling. It's got to be at shoulder level, arms towards the midline and really, really tight so that you can kind have withhold that reflex. That works. The other thing that works is actually white noise, interestingly; because white noise helps little ones to sleep in a slightly deeper state of sleep so that can work as well. And then leading your hand on her is actually probably the biggest tip because what you do is you actually get her through that 10 to 15 minute Hypnagogicstartle. And once she's through that, she'll move through and do her 45 minutes or potentially actually link two sleep cycles. So it's just getting her through that, that'll make the big difference.

Katie: Okay. That's interesting actually, because I do find that she does settle quicker. I always puts my hand on her chest. Like if I put it there and like, you know, with a bit of pressure, she seems to settle much easier. She tends to sleep deeper.

Meg: Yeah. I mean it's fascinating these different personalities and I think we should definitely come onto that just now, but it's also one of the reasons why, when a mom says to me, “she'll sleep for very long stretches when she's on me, the minute I put her down, she wakes up,” that's often that Hypnagogic startle. So leaving your hand on her is a good idea. I've spoken about the Zaki, which is a product, a slightly weighted little product in the shape of her hand, but you can actually use any slack weighted product to actually leave on her just for a little bit as she falls asleep because not up near her face, but just across her tummy, just so that as she's falling asleep, she feels like there's a bit of something kind of containing her. That can be also good tip for that

Cass: On that Meg because we've been using that with Max because I think we spoke about it again last week. But you mentioned as they're falling asleep, is it right that we should be taking that off, kind of after 20 minutes or is it okay to leave it on or…?

Meg: So Cass, you can leave it on all night if… and is like there are a couple of caveats here, the one is your baby has to be sleeping on their back. So we only do it with babies who are sleeping on their back. If a baby's sleeping on their tummy or their side, we don't use it. And also, you need to keep it quite light. So we like those not to be anything more than 10% of body weight. So it's not a heavy weight. It's really just like something that's just slightly weighted. And in those circumstances, you can leave it on. But again, the right position to put it is across the tummy, not up on the chest and then there won't then be flopping it over their head for instance. So yes, you can leave it o and I certainly left mine on with my three children overnight, but I did make sure that it wasn't anywhere near their face.

The sleep safety guidelines are not to have anything in the court with your baby. But I certainly do use this with babies who are just really unsettled and are not giving their moms good stretches because I think a good stretch of sleep for a mom is just so important.

Cass: Yeah, I know. We had it and now it's used to be all over the place.

Meg: Interesting, yeah. And Charlie, how's it going for you?

Charlie: It's good actually. I was saying to the girls, she is sleeping for like seven, eight hours solidly all the way through the night and it's amazing, but I'm really making sure that I'm swaddling her tight. And she goes to see I'm putting on the white noise and the Moses basket. And I also found that expressing and giving her some milk before bed, that the stuff that I've expressed in the morning. So it's my mom was it's the cream in the morning that you've expected to giving her that is really making her sleep better and suddenly throughout the night. And if she does sort of make a little murmur, I can put a dummy in or she'll know on straight to sleep again.

Meg: Yeah.

Charlie: So, it's going quite well.

This episode is brought to you by Parent Sense, your parenting app. As an avid user, I can safely say that Parent Sense is the all in one baby development app that helps moms and dads keep track of their baby’s routines and really take the guesswork out of parenting in the first year of a baby's life. Meg, tell us what makes Parent Sense so special.

Meg: So Parent Sense is my love child. I developed it because I felt the parents needed a little manual in their pockets, and that's what it is. It gives parents routines for their baby’s day. They flexible routines for sleep and for feeding. And then it also gives them a play activity for every single day, 365 for the first year of life as when is recipes and meal plans. So it really, unlike most other apps, it covers absolutely every aspect of early parenting

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Meg: So we certainly do have little ones that are 10 weeks old are starting to sleep throughout the night. And when moms talk about sleeping through, we talk about anything from eight to 10 hours at night, which is what exactly what it sounds like Jazz is doing, which is fabulous. The one thing with the dummies, how frequently is she waking? How frequently does she need that dummy through the night?

Charlie: Not often. I think sometimes, it’s happened a couple of times that there's at three, about three, I'll just pop the dummy in. So I don't know whether or not because this, it doesn't sound like she's in distress or needing his feed or napkin change. So I don’t know what your thoughts are with sort of, and it will

Meg: Yeah. And what time is bedtime? Just to understand what the stretch is.

Charlie: So bedtime used, I used to feed her for half nine, and then her down around 10 each, but now I'm putting her down around nine each. So I'm to have more of an evening as well. So about nine o'clock I'm putting her down,

Meg: You're pulling it back a bit. Okay. Yeah. So look, I mean, if, if she's going down, ideally you do want to move that bedtime earlier and earlier.

Charlie: Yeah.

Meg: Just because we find the babies set up better sleep habits, long term, if they're going to bed, kind of between six and seven or seven and eight, the latest at the, the stage. If she was going down between seven and eight and she was waking at three for a feed or waking and staring at three, I probably would be feeding her.

Charlie: Okay.

Meg: Because it's a very long stretch. Look, she's only going from nine until three. So it's actually, what is that? That's probably six hours. So you can stretch her with a dummy. But if she wakes again after that, I would certainly be feeding her because one of the risks we have is getting into that dummy habit where we just kind of fobbing off the feed and a couple of things can happen there. One is that potentially, she actually needs that feed, but maybe she's quite obsess with the little one and therefore is not kind of pushing it and maybe she won't gain weight as well as she should be and maybe she's actually needing that feed.

And the other thing is that we can end up with a dummy habit. So, I mean, if they're moms who listening, I know this isn't the case with you, but if there's a mom who's listening, who's little one's waking at 11, one and three and she's fobbing that off for the dummy; 11, one, and three, you are likely to actually develop a dummy habit, which is something we don't want to do. But if she's going from nine until three, it's only six hours and you can fiber off with the dummy. That's fine. But certainly as you move that backwards, if she was going down at seven or eight and she was waking at three, I would probably be doing a feed. What often happens is that they actually kind of wake for it. You put in the dummy and then they wake again half an hour later. So nobody's getting any more sleep anyway. And that's the situation where we would rather just give a feed and let them get on with it. How is her weight gain?

Charlie: Her weight gain is… what is she now? She's 10 pounds 11. So yeah, she does, I think she does need to put on a little bit more weight wouldn't …

Meg: Yeah. Well we don't worry. Look, I mean the whole thing with weight gain, and this is something that, I mean, Cass knows that I don't push weight gain to follow a specific curve because we know actually that babies don't do that. And I don't like the curves because they end up pushing babies into like, this is the norm and this is what all babies should be doing. The important thing with weight gain is, are you don't want it to flatten. So if you go for one weight gain to the next and it's flat and then a second weight and it's flat again, that's when we worry. And the other time we worry is on those norm curves, if you actually cross a line, actually either up or down. So in other words, if the weight gain goes, you know, if you were born on the 50th centile and you go into the 75th and into the 93rd, you kind of ending up really crossing weight lines then. And that's when we prefer babies not to do that. So I'm never hysterical about weight gain as long as it's consistent, and as long as it's there from week on week.

Charlie: Can I ask a question about bedtimes? Because you said, “Charlie, what your bedtimes sort of be a bit earlier.” Obviously again, she was a bit younger. So we obviously don't put her to bed until we go to bed, but she has to face bed in the same room as us. But we do try and have like a quiet time where she goes into her Moses basket, get downstairs with us at like seven and we turn down the lights and everything gets much quieter, but she's not in a separate room and she's not, I'm not putting upstairs on her own. So that's not really her official bedtime, her official, bedtime's like 9:30, 10 when she has like that final feed before the sort of weekend. Right? Yeah.

Meg: So she's very little still, so her flexibility is fine. And I know for Cass, Max was doing exactly the same. He was actually going down while they were having dinner downstairs, but certainly as they start to approach 14 weeks, so between now and 14 weeks, you actually want them going down in their consistent sleep space. And the reason for that is that at 14 weeks, they start to have sleep associations where what happened the way that I was put to sleep for my previous sleep is what I expect now. And so for that reason, we really do want a fair amount of consistency. So my suggestion and I know Cass has started to put it in place already, is to actually get a good baby monitor and to start to actually have bedtime happening in their own room. I think that it is the age, even from now six weeks old between now certainly and 12 weeks, you do want them to be going down in their own room with a baby monitor, monitoring them.

Charlie: And so obviously the vibes because she’ll stay in our room, I think until she's four months because that's sort of this sort of handed her by the just day like, don't have them anywhere else until they're at least four months old. But from like six to seven weeks, we can put her up in our room with the baby monitor and be downstairs.

Meg: Yeah, absolutely. Absolutely. And it's good for her sleep habits to be doing that as well. You know, that the room is dark, the room is separate, and it is a sleep space. And then actually all the way through into the toddler years, I talk with moms about actually never leaving the room after bath time because I mean, you can literally fox your child into believing that the world stops at bath time. If you've always been consistent with that, and that is something that you're going to want when they're toddlers, you don't want them to know that they could come downstairs or whatever. So yes, I would actually be putting in place that she can go down after bath in her own room. And you mentioned right at the beginning that she's starting to look at actually putting in place a bedtime routine, which is great. You don't have to be religious and kind of enforce it at this age because she’s still so little and we want flexibility, but it does set them up for good sleep habits for sure.

Charlie: Yeah. We're definitely trying. We unfortunately, she's got a problem with her umbilical cord so she can't have a bath every night, but we are trying to feed be at the right time and you know, as you say flexibility, but …

Meg: Well actually, you mentioned something very important there. Like do they actually need a bath every day? Because the reality is, until they're rolling, they actually are very clean. Babies are very clean, rarely. And so there's nothing wrong with what we call top and tailing. So giving her a really good wipe down with some cold boiled water on cotton wool of her face. And especially in those neck folds where they end up with all the curds going a little bit sour in there and of course around the balm area and all those lovely fat rolls as well. So you want to do that really well, but you don't have bath them every single night. Yeah, I'm just loving looking at your faces and I have to just tell everybody what's happening right now. So right now, Jazz, 10 weeks old is lying on Charlie's lap and making eye contact and smile.

Charlie: Yeah. Little smiles and so rewarding when they give you their smiles.

Meg: Oh my goodness.

Charlie: Now, she's going to have some tears. But now Jazz mesmerized by his friend.

Meg: Well, I actually had to tell you what you guys just did there, I mean, just for everybody, what I just witnessed, I can't see Jazz's face at all, but I can certainly see Charlie and, and Katie's face and their eyes just lit up. Their eyes became wide and they were smiling and really focused in on little Jazz's face. Now what's fascinating about that is human beings are completely hardwired to do what we call serve and return. And serve and return is actually a phrase that was developed by the Harvard Center for the Developing Child. And it kind of speaks to the fact that when babies do something, we immediately respond back because they are so cute, which was written all over your face. And when you do that, when you smile back at her and you open your eyes and you raise your eyebrows and you open your mouth and she sees your white teeth and the whole story, it then reinforces for her that actually, this is exactly what I want to do. I want my mom to now smile at me and look at me and that's the foundation for all future relationships. So she is busy wiring in her brain that there is a response from a human being, which is actually the foundation for language as well.

So I love watching what you guys have been doing because that's so. You are wiring her brain just perfectly as you do that. So one of the experiments to actually do is to actually make a position with your mouth. For instance, hold your mouth open and then stick your tongue out and then hold it very still for a while. And what you'll actually find is she'll actually start to mimic that and to copy it. It's a very interesting thing. It's actually a reflex. And so Max probably won't do it anymore because he's now a little bit older and he's losing his reflexes, but certainly for Isla, who's only six weeks old, she's probably still doing those social reflexes, which are amazing to watch.

Cass: Oh cool. Yeah.

Charlie: I’ll give it a go.

Meg: You must do that.

Charlie: I can't wait until she first smiles; she hasn't done that yet. So, I'm really hoping I get the first one.

Cass: I could be any day now. Wouldn't it?

Meg: It will be. It's one of the most hardwired milestones. I mean, other milestones, like for instance, crawling can happen anywhere between seven months and 11 months, but smiling is like, it will happen for all babies pretty much worldwide at six weeks.

Charlie: Really.

Meg: And we do find that are slightly more irritable and sensitive babies, sometimes are slightly on the later side of normal. So maybe six to seven weeks and then little ones who really laid back and social tend to do it actually a little earlier. So even like three or four weeks, you can start to see it.

Cass: Talking of milestones, Meg, I was going to ask because I saw that the… so some of the things that he might start to do and to look out for are, rolling from side to tummy or from back to side even, although that was sort of the main one. Oh, and me pulling him up for sitting, to sort of start to get used to that sitting motion. Are there things for that role? He's not really showing any sign of rolling a bit. Should I be doing anything to encourage that?

Meg: Yes. And actually the one that you just mentioned, which is pulling to sit is one of our best ones. So what I mentioned a couple of weeks ago is that rolling is actually dependent on good flexion and good extension muscles. So good tummy muscles and good back muscles. And the back muscles, we work on really hard by giving tummy time and the tummy muscles. One of the ways we can work on the tummy muscles is actually with pull to sit. So what you should do is actually pop your hands behind his shoulder blades, almost like you're cupping his scapula behind his shoulders and then start to actually pull him up, first of all like that. And what he's going to be working at hard then are working his flex muscles of his neck because he's got to keep his head lined with his neck at that time.

And once he starts to do that and you'll see initially we actually watch for the lag because the lag initially will start, as you start to pull him up, his head stays down on the mat and then he kind of pulls his neck up to line. And then eventually, when you just put your hands like that, he'll actually pull his neck forward him because he knows what's coming, which is awesome. And then later on, you move your hands off his scapula and then onto his humorous onto the upper part of his arms. And you pull up from there with a little bit of support around his, kind of top of his shoulder. And then later on, you are actually going to pull to sit right from his fingertips. Like literally you're going to hold his hands and you're going to just putting him up with his fingers. And as he does that, he's really going to be working his flex muscles. And that would be a good to do. Cass, so that would be number one. Number two, having little things for him to push up against with his feet that he work his flex muscles with his feet to the second.

Cass: Well, he does to the point where I almost have to feed him where there isn't an arm nearby because he'll start kicking and pushing with this.

Meg: I love it. I know he's doing really well.

Charlie: How often should you be doing tummy time?

Meg: Every day. Every single day.

Charlie: Everyday.

Meg: And actually in my advice is to do it in-between every single feed as well. So literally because for some babies, especially if they don't like it, it might only be up two minutes of tummy time, then you've got to do it in-between every single feed. And if you're doing it like that, they get used to it from young age and it actually then take it quite happily, a whole lot more happily.

Katie: I did tummy time today and I'd just given her a feed and I was like, right, let's try some tummy time, pop you on the just washed rugs. And then it's like, all the milk came out straight away. So I didn't know whether I should leave it like a little five minutes?

Meg: Yeah. You can leave it for five minutes. Definitely, definitely leave it for five minutes. Especially if she is one of the more kind of, I call them oopsie babies, you know, she opsies more often. If she does do that, then you would let her milk settle a little bit and then pop her down.

Charlie: Yeah.

Meg: But actually when they're on their tummies, they're not more likely to spit up when on their tummy generally, because it actually holds in the valve at the top of their tummy. So I would still be giving her lots of tummy time.

Charlie: Okay, perfect.

Cass: On the topic of tummy time, Max has also developed a new habit because I'm not going to call my newborn baby lazy, but when he lies on his tummy, he will just lie down and but doesn’t seem to want to push up or lift his head.

Meg: Cassidy, well, it's a settled baby and my middle child was a settled baby too. And they actually are just quite happy not to, you know, let the world go by. So, putting him on his tummy will encourage him little by little.

Cass: Yeah. He’s laughing and smiling, but just lying down. And I have to really, when he does lift his head, I feel like I'm training. I am looking after dogs at the moment. So dogs are on my mind, but I do feel a little bit like I'm training him in that way because I'm rewarding him, is good boy. When he lifts his head…

Meg: It is like that though.

Cass: Is there anything else I can do to encourage him?

Meg: Yeah. So definitely put a towel underneath his chest, just to prop him up slightly and put something very interesting in front of him because if he's got a towel under his chest, he's got a little bit more support. So he is more likely to raise his head.

Cass: Okay.

Meg: So ladies, this has been absolutely amazing. I could go on chatting to you for hours and hours. I think we should do this at least once a month so that we can catch up…

Charlie: Definitely.

Meg: …with everything that's happening, but you have certainly got very precious babies. And I think that's just so special that you're going through this all at the same time. It's really is.

Cass: Yeah, no, it's amazing. And we've got a little WhatsApp group that we fire little. Is this happening to you or did this happen or yeah, that's going on or, oh my gosh, I can't put him down or I can't do this or thing. it's lovely to be able to share it.

Katie: Yeah. And they're so different, but even though they're so differences, like there are still similarities of like what we are going through irrelevant at the babies. They are, they are all precious.

Charlie: Absolutely.

Meg: Well, I think the most special thing is you've got the sisterhood of motherhood that you guys are supporting each other and that's really what's needed. So, thank you both so much for joining us, Kate and Charlie. Lovely to meet you both and Cass, will chat again next week.

Cass: Absolutely. Thanks so much, Meg.

Thanks to everyone who joined us. We will see you the same time next week. Until then, download Parent Sense app and take the guesswork out of parenting.