# Navigating Preemie Milestones & Development | S3 EP 80

**Meg:** [00:00:00] Welcome back mums and dads. I am thrilled to be your host on Sense by Meg Faure, the ultimate parenting podcast. I'm Meg Faure, an accomplished occupational therapist and an expert in all things related to infants. My special interest lies in the perinatal period. So that's the period that covers everything from pregnancy all the way until in the early years.

**Meg:** So early childhood education. And my goal in life is to help simplify the early parenting journey and guide you through this really exciting time. And each week I'm delighted to welcome a new mom, sometimes an infant specialist, and sometimes a media personality to the show. And we delve into their unique experiences and insights and uncover invaluable tips and tricks that are going to make your parenting journey smoother as well.

**Meg:** And so this week, I'm especially thrilled to welcome Tove back Tove has been on the show with us a couple of times. She was on as a mom of two, looking at the jugglers reel. So if you want to go back and look at that [00:01:00] episode with Tove, we were talking about how she was introducing her little baby at the time, Jagger, to her special needs toddler Gray.

**Meg:** And of course fast track about 14 months later, Tove is back with us. As the mom of three. So Tove, welcome to the show today.

Tove: Thanks, Meg.

**Meg:** Really lovely to have you. And you are no longer a mom of two. You are now a mom of three. And we followed your journey in the last couple of episodes first with the actual introduction to how beautiful little Nova joined the world a couple of weeks early, quite a few weeks early. And then we also had a session with Kath McGaw on getting breastfeeding started with prem babies, which was a hugely useful session. So if you haven't listened to that and you have a prem baby moms, go back and listen to that.

**Meg:** And now fast track a couple of weeks. Nova will be five weeks old tomorrow. Can you believe how the time has flown already, Tove?

**Tove:** crazy. It's crazy. It's so, so, so, yeah, very slowly, but very quickly at the same time. It's amazing how that happens.

**Meg:** Yeah, no, it's quite incredible. And how [00:02:00] things going, how are you finding the night feeds, the exhaustion? Is it as bad as it felt first and second time round or how is it now?

**Tove:** Yeah. Probably definitely not. In fairness, I don't think I ever started sleeping again, so. Have continued to not sleep. So I think that makes it a little bit easier. It's not like you get your life back and start sleeping through the night and having these blissful, these blissful evenings.

**Tove:** And the kind of then shock of going backwards. So, so I've actually found the adjustment very simple because it doesn't feel like a huge adjustment. Obviously I'm waking up more than I was, but yeah, it doesn't feel as Startling as it did the second time there was a bigger gap. So it did kind of feel like, Oh my gosh, I've gone back to no sleep.

Meg: Now I'm really tired. Yeah.

**Tove:** Not really. She's been great. It's been really nice. And also maybe they're just being so grateful to have a home. Because I missed out on all that time with her in NICU in the evenings and there is, I quite like that bonding, quiet, it's the one time of the day where all the other kids are [00:03:00] not there and the husband's not there and the dog's not barking and there's not 500 people pulling at you to have that time with her peacefully and maybe I'm also just super grateful that I've got that back to myself now, so, it's not bothering me as much.

**Meg:** Yeah, so yeah, I'm really super interesting. I can remember when Alex, who's my second, was born and I can remember getting up. She was a really easy baby, settled baby. And so she really was only ever doing one night feed and started to sleep through very early. But I can remember standing and we had a house up in Noordhoek up on the hill overlooking the valley and then the ocean.

**Meg:** And I can remember standing there two o'clock in the morning, holding her in my arms, overlooking the valley with all the lights below me. And that for me encapsulated everything it was to be a new mom. Yeah, I was tired. I mean, I was up, I was tired, but I was just absolutely soaking up the time, the peace and the silence and being in a bubble with her.

Meg: And it can be very precious time.

**Tove:** I feel like also feel like knowing it's my last maybe that's also it's [00:04:00] like, I know this is never going to happen again. And, and I also

know now that there's an end. And I think when you have your first and you never sleeping and you stressed, you're like, is this going to end?

Tove: Am I ever going to sleep again? And you get,

## Meg: So

**Tove:** call the fear. And I feel like once you've got the fear, then you're just like, oh my gosh, if I don't sleep now, then I'm never going to sleep. And then if I don't put it down now, and I don't like, and you just psych yourself up where. Both my kids sleep through now.

**Tove:** The other two, I know it's going to end. I know she's going to sleep. I know we will get to the other side of this. Like it's fine. And it's the last time I'm ever going to do it. So I don't know. There's something very, there's something that feels very special in that. I feel a lot more patient, a lot more calm.

**Tove:** And again, maybe it's also the birth was so traumatic and stressful and, not being allowed to have a home and have her with me that I'm just so grateful to, to have the space with her maybe that contributes to.

**Meg:** Yeah. Yeah. So how long did she end up spending the hospital? Because she was born, was she born six or seven weeks early?

**Tove:** Seven weeks early. If I'd had a Caesar, it was six weeks early, but seven weeks in terms of term. [00:05:00] And she was out in three. We were very lucky, but I think it's cause she was a good weight. And she latched again, definitely to do with the help and advice from Kath, you guys very early.

**Tove:** I pushed very hard and I did, the hospital time was very intense because I made sure I was there for every three hour feed that I could be. So the only ones I missed was the 12 and three in the morning, but I was there for the nines three and be, I think because I pushed it was probably more exhausting than what it is having a home now because I pushed so hard to do that and be there.

**Tove:** She had to have the boob and I think it helped the nurses. It's me definitely helps that you're, you're constantly here and putting the boob in her face. And so the latching, I think, all of that stuff just helped. We were very lucky to get her home when we did and they did it really well, before I left, I wasn't allowed to take her home.

**Tove:** You'd swear, like it was my first child. Spend the night in a little room, part of the hospital where they'd keep checking on me and check that everything was fine [00:06:00] and that I was comfortable before I took her home. I was like, this is what you should be doing for first time moms who are like panicking.

**Tove:** It was actually a really wonderful thing to do because you had your own little apartment, your own fridge, your own, like it was like being at home, but you know, you had access to the nurses and the doctors. If you felt nervous or worried.

**Meg:** Wonderful. Almost like a step down facility. It sounds fabulous. Yeah. Yeah.

Tove: was. Very, very clever.

**Meg:** Quite amazing. So she is now three weeks prem will be two weeks prem tomorrow, I guess, because she's currently four weeks, six days tomorrow. She'll be five weeks old. And so two weeks prem tomorrow. How have you found that kind of calculating the adjusted age ?

**Tove:** I find that quite tricky because I think psychologically... When you out of, and maybe it's just me, but then having spoken to the other parents in the NICU, I feel like it's quite a similar journey. Like when you leave it, you're like, Oh, we done now. She's fine. Like we're back on track. She's one month and that's not how it works, [00:07:00] right?

**Tove:** She's sleeping more. She's not quite at the same milestones. And, and so actually your preemie journey is a longer one. In my mind, it was like, all I've got to do is get her out of NICU, but just got to get out of NICU and get her home, and then it'll be fine. Like then it's back on track and I'm a tracking mom, you know that.

**Tove:** So like, then I can go back to my tracking and everything will be fine. And it'll be the one month mark and it's not. And so I found that quite challenging to get my head around. Adjusting expectations. I'm looking for one month milestones, but you're not actually one month. She's minus two weeks.

**Tove:** Like how long I'm going to have to keep managing that change in a like when that stops. And obviously I have a bit of PTSD around my first having special needs and not hitting milestones. And so, I see Nova not hitting the milestones and I go, is this the same thing?

**Tove:** Am I like, I don't want to miss anything and I want to catch it early if there is a problem, because that's what I, had with Grey. But at the same time it's kind of constantly reminding yourself that you don't have a one month old.[00:08:00] And that is difficult because I'm finding that journey a little bit challenging to navigate.

**Meg:** Yeah. So let's talk a little bit about that because it can be quite confusing and even the **words** are confusing. So you've got what is called actual age or chronological age, depending on who you speak to. So sometimes it's CA means chronological age and AA means actual age. And then on the other side, you've got corrected age, CA, and adjusted age, AA.

**Meg:** So you've got. Really lots of confusing words. We need to just pick one. So we'll call it her actual age, which is the age that she is now. So she is five weeks tomorrow and she will have her birthday party when she is 12 months old. So that is how old she is. And so when you speak about her two friends and family, she is five weeks old tomorrow because that's her life journey.

**Meg:** But we use adjusted age or corrected age, but adjusted age. When we start to look at things like developmental milestones, because we simply cannot expect her to have [00:09:00] the same milestones as a baby who is born at term. And so you very rightly pointed out that she would not quite be doing the things that she should be doing at a month old.

**Meg:** In fact, if she was a month old, she would be making eye contact, she would have be having a little bit more awake time. She would be watching your face, maybe a little bit more. And in about two weeks time she would smile. Now those your early milestones that you look for turning towards sounds as well.

**Meg:** So those type of things she won't be doing because she's actually still only just not even two weeks preterm, so she's not actually born yet. And so your developmental milestones, you do adjust and how long you adjust them for depends on two things. The one it depends on how prem your baby was.

**Meg:** And the other thing is that it depends on how your baby's doing. So, part of it is driven by her. We generally say that for 18 months you adjust their age, but you start to kind of phase it out as they get a little older. And it does also depend on how prem they were. So if, for instance, she was only two weeks prem, which is a [00:10:00] 38 week old, which is actually considered a term baby, really a full term baby.

**Meg:** But let's say she was only two weeks early, then by the time she gets to a month old, you've already started to ignore that and you negate for it. You don't even notice it. But a seven week prem baby is quite a prem baby. And so in Nova's case, we'd probably be adjusting our expectations all the way through to about nine or 10 months.

**Meg:** So when you're looking at milestones that say she should be crawling by, let's say nine months, you probably would make sure she's crawling by 11 months or 10 and a half months. And so, you know, make a little bit of a difference. And it's specifically with those developmental milestones.

**Tove:** That's really interesting for me. Cause as I said, again, like psychologically, I think you, so like once I'm out of the NICU it's done and you're not, as you said, like it really is shifting and it's also shifting all the content you see, right. Cause then you see this content and you start to panic and you start to worry.

**Tove:** But things like weaning, do you then, does it also follow, would you then wean a month later or six weeks later than what you would normally wean if I would wean at four [00:11:00] weeks? I'm now going to wean at five and a half, closer to six.

### Meg: Yeah.

#### Tove: That's really

**Meg:** No, you don't. So that's what, so that's what the piece is really interesting. Yes. No. So you don't with weaning. So with weaning, we say that the latest science says that anywhere between 17 and 24 weeks is when you can start weaning your baby and you actually stick with that as a chronological age or as an actual age for prem babies.

**Meg:** Having said that, most of them won't wean at 17 weeks. They will be on the later side of that range.

**Tove:** that's really interesting. So, so it's kind of, so is it more, it's more the developmental piece then. Okay.

**Meg:** Exactly. So you're going to watch for the signals. So in the weaning sense book, we talk about, physical signals, which is when she sits on your lap and you hold her with your hands around her hips or her waist, she's sitting upright enough that her chin is up off her chest.

**Meg:** So she's not sitting independently, but she's got her head off her chest. And um, she interested in food? Is she making eye contact with food? Is she watching [00:12:00] you when you eat? Take food to your mouth. Is she watching it? And so those the type of signals that we're going to watch for. And we'll start watching that when her chronological age of 17 to 24 weeks.

**Tove:** That's really interesting. And then in terms of sleep tracking and stuff like that, do we then work on her adjusted age as well? Like kind of when you start getting to the point where you awake, alert, awake, pushing for your kind of sleep hours and making sure that they're not overstimulating themselves is that would we work on the adjusted age for that?

**Meg:** Correct. So the adjusted age for sleep. Exactly. So at, for instance, the age that she is at now, she's probably, you're probably looking at about 45 minutes between sleeps, which is age appropriate for now. And then as she grows, you will actually always adjust for that.

**Tove:** That's really interesting.

**Meg:** So that means a full term baby, at nine months, you're going to get a cusp age where a baby's goes from three sleeps down to two sleeps she is going to do that at her adjusted age of nine [00:13:00] months.

Tove: Okay. So that'll be like 10 and a bit months.

Tove: Yeah.

Meg: Correct.

**Tove:** Okay. Yeah. So, I mean, for me, that's a, like a completely different journey to navigate. Right. Because it is, you are constantly, and also when you speak to the medical professionals, they're like it, they also work on two different ages, depending on who you talking to about what.

**Tove:** And so it is, yeah, I found that quite interesting to navigate and definitely a little trickier than I anticipated.

**Meg:** Very interesting. It is, it is a different journey. And like you say, I think you've got this, as you call it PTSD, because you've had a child who has been delayed. So now you're super vigilant and watching her for delays.

**Tove:** Yeah. And I'm definitely hyper hysterical about it, and I'm very aware of that. It doesn't make it any better, but it's just, you are very like, okay, well hold on, you're not doing this. I have to keep reminding myself, well, she's not actually a month, she's not,

Meg: born yet. She's like literally. Yeah.

Tove: she's a, she's still in my stomach kind of thing.

**Tove:** And so that is, is quite tricky to keep taking yourself [00:14:00] back there. And yeah, so I, I think that for me has been really, a really interesting piece, cause as I said, I really thought when she's out, it's done,

Tove: you know, we're done and, and that's, there's obviously not.

**Meg:** the case. Yeah. Yeah. Very interesting. And how's the feeding journey going?

**Tove:** fantastically. Look, she's a really good feeder. She latches beautifully. She eats a lot. I produce excess milk, so I am very lucky that that's not a journey we struggling with.

**Meg:** And I think, I think that's super interesting just for other moms, sometimes dummies or pacifiers get a really bad rap because we told, don't use them too early. And very often we told whatever you do, don't give your baby a bottle because it can create nipple confusion. But in actual fact, Nova's journey has included both dummies or pacifiers and bottles out of necessity and because she was prem and she's feeding beautifully.

**Tove:** Beautifully. And I often use the bottle. So at night I cluster feed before the kind of 10 o'clock I'm going to bed feed. But I need [00:15:00] my boobs to fill. So I always give her a bottle. I let my husband have a bonding moment with her and give her a bottle. I'll do like a seven o'clock feed and then he'll do like a half past eight cluster feed and then I'll do like a half past nine, 10 one.

**Tove:** And I let him do that one with a bottle and it's a great way for him to also bond with her. And she takes the bottle beautifully. It's also given me a lot of freedom with the other kids. So if I want to do a class with them or fetch them from school or take them to an activity, I can leave Nova with my husband or with the nanny with a bottle of breast milk.

**Tove:** And everyone's okay. I'm not like, no, sorry, kids, other kids can't do anything with you because I need to be on call she's demand feeding. And I think that's been really helpful for the other kids as well, in terms of settling them in and not getting too stressed and tense about Nova dominating my time.

**Meg:** Yeah. Yeah. And it is, you know, such a juggle and hugely personal for some moms, they will choose to exclusively breastfeed and for the older kids, just to have a little bit less of them. You have [00:16:00] chosen to make sure that the others have a little bit more time and she has got then a bottle feed and, like all things parenting, it's such a personal journey and it's, it's what really what works for you and what works for your family.

**Meg:** How are you finding the juggle of actually having three in the house? How's that going?

**Tove:** Yeah, it's been a, it's definitely been a routine shift, right? You kind of very much like my husband and myself, you get into a pattern, like you do that, you manage that child, you have your structure. And when you have a third that changes, cause now I'm doing, four or 5am feed.

**Tove:** And so I want to try and sleep longer. So my husband needs to get both the kids up and do breakfast with both the kids. And then I want to see them before they go off to school. So, the whole. The whole dynamic shifts. Now how do you get all three of them in the car? On, on the weekend, we were like, we're gonna do a family outing, like this

### Meg: OMW you are brave

**Tove:** I was like, that is it. We've been home for a week now, it's gonna happen. Took us an hour and a half to get everyone ready to get in the car. And by that time I needed to do another feed. And then Jagger needed to have a sleep and I was [00:17:00] just like, there's no way. Like we'll go for a walk down the road.

**Tove:** it's just not gonna happen. So, But also I think you're less anxious the third time round. She comes and does a school lift with me, with Gray, and I'm not worried, as much as I was, but it's definitely, a juggle as all parenting is.

**Tove:** And it's definitely trying to find that balance and that new niche. And then just as you get comfortable, Nova will have a leap or Jagger will have a leap or someone will shift something or some dynamic. So I'm under no illusion that it's going to last for long. Like there's like little brief moments of yay.

**Tove:** Before something spirals and happens again. But yeah, at the moment it's been lovely. I think my biggest challenge., I don't know if it's a challenge, but what's been interesting to me is trying to get the kids to acknowledge Nova, or kind of engage with her. Gray lives in her own world and has special needs.

**Tove:** And so. She didn't with Jagger and I didn't anticipate her having any interest in Nova other than, I'm feeding and so she can't be on top of me. [00:18:00] And so there's that dynamic to balance. And strangely enough, she's been more interested in Nova than Jagger has maybe because she saw Jagger as a baby and she knows now what Jagger will be.

**Tove:** I don't know, but she's definitely more attention to me when I'm feeding Nova and I try and feed her often with the kids around. And I'll put the TV on or something so that they want to sit by me peacefully because otherwise it'll be chaos and be part of the feeding quiet journey together because she doesn't do much else than that.

Meg: Yeah.

**Tove:** So I guess one of my big questions is how to engage Jagger particularly, Gray is obviously, a separate kettle of fish, but engage Jagger with Nova without, creating too much trauma for him.

**Meg:** Yeah. So it's quite interesting, you mentioned there that gray has been more interested in Nova than Jagger has, and Jagger of course is 15 months, 14 months.

Tove: Yeah. 14 months.

**Meg:** months. Yeah. So, a couple of things around that, and this goes for children anywhere [00:19:00] when there's only a very small gap of a year all the way through to actually a bigger gap of even three years that little babies are actually not very cute or engaging for toddlers.

**Meg:** Like, they're kind of a little bit blobby. They cry a bit. They occupy a place on your chest occasionally when you're breastfeeding, but pretty much for everything else, they're not terribly interesting. The big shift comes and particularly for social children like Jagger the big shift comes when Nova gets cute.

**Meg:** And that's usually at about kind of eight to 12 weeks. in her case, it'll, you be maybe at around about 12 to 16 weeks you know, become really cute

because she's smiling. She's engaging when people walk in the room, they want to Make eye contact with her.

**Meg:** That's the point at which Jagger will suddenly notice that this is a human being. So it's not discommon for them to actually completely discount, new baby at this age. Gray, it's quite interesting because, maybe Gray, it's not so much around the fact that she remembers what Jagger was like, but maybe she's moving into developmental phase where she is actually more interested in people [00:20:00] outside of herself, she is delayed, but maybe that progression is happening for her. And that's why she's suddenly interested in this other little life, think jaggers displaying what we would absolutely typically see for toddlers. And what will happen guaranteed and I mean, I'm sure if we're having a conversation In that time, in the next eight weeks, he will become very, very nose out of joint because she will become cute and will be occupying a lot more in everybody's mind, you're on airtime at the time.

**Tove:** Yeah, he's definitely quite dramatic at the moment. Like doesn't like the word, no throws himself on the floor and has a cry. It's very emotional about it all. And, definitely wants to sit on top of me when I'm feeding, but I let him like, I can move Nova and then I put his hand on her and I'm like, Oh, your baby, look at your baby.

**Tove:** As you said, he's just like, whatever, there's this blobby thing here pushes her in the pram a bit, although it's like a near death experience for Nova to be pushed around by Jagger. But yeah, I'm definitely anticipating [00:21:00] some serious behavior pushback.

Meg: Yeah. So one of the things that's quite a good idea to do., enjoy books?

Tove: Loves books.

**Meg:** Okay, so one of the things you can do is instead of saying it's time for Nova's feed now, you say it's time for story time now, and you have, wherever you're feeding, you have a little box of books and so you have those books with you, and the minute he comes close, you say, come, it's time for story time, then what actually happens is that the Feed is the secondary issue that happens to be going on in the background, but the main primary thing that's actually going on is book reading time.

**Meg:** And that tends to make them feel like actually you're sitting still, which Tove, I know you fairly well, you've probably not sat still much in his life. So

now he's, now he's got the pleasure of actually having you sit still and you can read a book to him. So I think try and make feed time all about him.

**Meg:** And obviously. Nova can just get on and feed. And that's easy at this age. It all changes when she becomes social, which will happen at about 16 weeks for term baby, so when she's about 20 weeks old, she'll suddenly not want to feed because she'll [00:22:00] be so fascinated by everything that's going on in the world, and if you're reading to him, she'll be distracted.

**Meg:** But for now, we're in a little bit of a honeymoon period in some ways. It's going to get trickier from here before it gets easy again.

**Tove:** Yeah, I know. I've no doubt where, it's definitely anticipating more challenges with him.

**Meg:** Yeah. Yeah. Very interesting. But you really are coping remarkably. I think, to have a prem baby as your third baby, to have that baby completely on your own. Anybody's interested to hear today's story, she did give birth on her own because her husband was far away. And that, you at the time, because you are quite stoic, you kind of treated it as a, as if it was matter of fact, but that was a big start for you and her.

Meg: It really was.

**Tove:** Yeah, I definitely, as I said, I'm sure once everything's calmed down and we've settled down a bit, there'll be some trauma around that, but I think I don't know, maybe again, our journey with gray has been so traumatic in so many ways that just the fact that we're all alive and happy and healthy, like that was just very grateful that was the [00:23:00] outcome of what felt like at the moment it could have gone any way.

**Tove:** So it was yeah, we were very lucky and the hospital was great and all of that makes a big difference,

**Meg:** amazing. Well, thank you so much for your time, Tove. It's so fabulous to catch up and to hear about that early journey of a little Prem baby of another sibling, a third one in the family. let's keep in touch.

Tove: Absolutely. We'll chat soon.

Meg: Chat soon. Thank you.

Tove: Cheers.