Pikler, Point and Periphery

by Jane Swain

THE COMPETENT INFANT

Emmi Pikler (1902-1984), was a pediatrician who founded the Pikler Institute in Budapest, Hungary. Early in her career, she lived in Triest, Italy for a year, where she spent time on the beach observing parents with their infants. Pikler witnessed parents teaching their infants to sit, stand and walk before they were able to do so on their own. She asked the question, does this communicate to the child that what he is doing is not good enough, and that he should be doing something of which he is not yet capable? Essentially Pikler's answer was, what the infant is capable of doing at a particular time, is the perfect thing for him to be doing.

Pikler saw this teaching gesture of the adult as a distrust of the child's inherent ability to guide his own motor development. It seems apparent that Pikler had a tremendously well-developed sense of the ego of the other. In her time, just as today, infants were usually seen and treated as objects. It was, and is, considered the adult's job to teach the child to sit and to walk. Pikler strongly disagreed with this, and saw each infant as a unique individuality, capable of guiding his own motor development, in fact, infinitely more qualified than any adult was.

How is it that an infant is capable of guiding his own motor development? Steiner describes that the child from birth to three has a "telephonic connection" with the spiritual world, and through this connection the child learns to walk, speak and think. Pikler did not refer to the spiritual world, but she clearly had an understanding that the genius of the child was at work, and that it must be allowed to do its work.

For the infants in Pikler's care, there was no propping the child up into a sitting position, no holding the child's hands and helping him learn to walk, no use of exersaucers, johnny jumpers, or baby seats. Instead, Pikler allowed each infant to come into the vertical positions of sitting and standing entirely through his own efforts, *and in his own time*. Pikler wrote a book describing this process entitled, "Give Me Time To Do It Myself." Anna Tardos, Pikler's daughter, who is the current director of the Pikler Institute, says, "What's the rush, we have our whole lives to be vertical!" The gesture of letting infants take their time, goes against our "get ahead, sooner is better" culture. However, based on my 30 years

of experience and study, I believe there is no correlation between early walking and later athletic ability.

Pikler came to these practices out of her own tremendous powers of observation. She was not an anthroposophist. Rudolf Steiner is in agreement with Pikler, and goes further with a stern warning. "Here again the rule holds good that we should leave everything to the child itself. Of its own accord it will raise itself to an upright position when the right time comes. Premature efforts at walking and standing or gymnastic exercises (only proper to a much later age) can only do damage. They may even affect the nerve-life for the whole of later life in the most disastrous way."[1]

The infants at the Pikler Institute are given a protected, safe environment for self-initiated motor exploration. Of equally critical importance, Pikler recognized that *self-initiated motor exploration is a function of the relationship with the primary caregiver.* This relationship is tended to and developed during the caregiving activities of feeding, dressing, bathing, and diapering, whereby the child is treated as a competent person capable of participating in each activity.

The child is "filled up" with the presence and attention of the adult during these times, and then the child is allowed time on the floor for free motor exploration. These two practices--being fully present for the child, and then letting the child have time by himself for motor exploration--reinforce each other, and give the child a feeling of competency and security. Self-initiated motor exploration also provides incredible opportunities to strengthen the will and to integrate the primitive reflexes.

PRIMITIVE REFLEXES

The baby is born with essentially no coordinated movement, no balance and no sensory experiences of the world outside of the womb. For example, he has moved before, but in the buoyancy of a fluid environment. Therefore he has never had to control his body weight in the gravitational field in the same way as he does after birth.

It's a nearly overwhelming task to manage the onslaught of sensory experiences in the early weeks and months of life. The primitive reflexes provide a means of responding to the physical world; this is the start of sensory motor

[1] p3. of WECAN publication, "Understanding Young Children".

integration. The reflexes are crucial for survival and protection of the physical body. Researchers believe the Moro reflex facilitates the first breath of life. They also believe the primitive walking reflex helps the baby position himself upside down in the womb in preparation for birth, and then other kicking reflexes of the legs help to initiate the contractions of labor.

Every typically-developing baby has the same progression of primitive reflexes. At a certain stage of development, in utero or after birth, particular reflexes and reactions emerge, gain strength, have their "hay day", and then fade away into the background. The reflexes overlap with each other in time, in a finely-tuned ebbing and flowing. There is profound wisdom in the sequence of the reflexes. Each particular reflex lays a foundation that supports the child to take the next step of development in a well-prepared way.

In a typically-developing infant, the blatant manifestations of the primitive reflexes cease by 6-12 months. The more subtle manifestations of the reflexes gradually cease by about six years of life. At this point the reflexes are said to be "integrated." The reflexes never really go away; they are always lurking in the background, and they will manifest even in adults under stressful circumstances, such as fatigue.

In the typically-developing baby, the moment-to-moment manifestation of the reflexes is related to the child's current state and is influenced by fatigue, hunger, handling, noise level, etc. A protected environment and sensitive caregiving are crucial so that the reflexes are not constantly being triggered. The reflexes have a purpose, and they need to be there, but ultimately they need to be integrated, to go to sleep. The Pikler caregivers are masters in these arenas of sensitive caregiving and environmental support.

As balance increases, primitive reflex activity decreases; the two are inversely proportional to each other. If given time on the floor, the baby will spend an incredible amount of time learning to balance. Balance develops in two ways--when the child shifts his weight within each developmental position (such as reaching for his foot while lying on his back, or reaching for a toy in sidelying) and when he transitions between positions. It is very important that the child has time and space to learn to balance. It is also important that he is picked up and carried in a way in which he doesn't lose his balance, as the development of balance is a crucial factor for the healthy integration of the primitive reflexes.

THE SPATIAL JOURNEY

Primitive reflexes are stereotypical movement patterns. When the primitive walking reflex is triggered, the movement of every baby looks the same. Here the movement is not permeated by the individuality, as it is with mature walking, where each gait is different. One can also change the way one walks according to his purposes and to the social situation. Here the movement is peripherally-oriented; it is in relationship to the world.

When we're around a new baby, there's a glow in the room; the baby takes up the whole room. The baby is actually more in the space around himself, than in the space of his body. The primitive reflexes help the infant come *into* the space of the physical body. This is readily apparent with the suck reflex, where everything goes *into* the mouth: nipples, hands, feet, toys, and pieces of fuzz! The gesture is also *into* the body with the other primitive reflexes, in that the muscle tone increases when the reflexes are triggered. This helps to establish body scheme or body geography and allows the infant to feel his body.

In contrast to the peripherally-oriented mature movements, the primitive reflexes are point-centered, or body-centered. This is good; the baby needs to come into the space of his own body. However it's not healthy to become stuck there, a prisoner in the body, cut off from the periphery.

The primitive reflexes are etheric pathways. They are akin to river beds in the space around the body. Initially the pathways are one-way streets, *in* towards the body. When the primitive reflexes are integrated, the pathways become two-way streets, coming *in* and going *out*. With the sucking reflex, for example, initially the direction is *in*. Soon the baby starts to babble and to do "raspberries" with his lips, where the pathway reverses and goes *out*. When children are older yet, they blow dandelions, bubbles, and pin wheels. They sing, blow *out* birthday candles and spit *out* watermelon seeds.

If this reflex doesn't become integrated, the child may suck his clothes, hair, and lips. In its severe form the child may have unclear speech, low volume, and stuttering, where he can't get the words *out*. The mature pattern is well-articulated speech, which is in relationship to the periphery; we speak differently to different people. The integrated pathway is *in* and *out*, as we can still employ sucking when we chose, such as sucking on a straw, but we are not bound to it.

SUPPORTING THE CHILD'S WORK

Just as we can not teach the child balance, neither can we integrate the reflexes for the child. This the child must do this for himself. However there is an incredible amount that can be done to support this work of the child. Initially sturdy, smooth, incoming pathways must be built. As Jaimen McMillan says, "in the early period of life, the child is nursing off the breast and off the rest, of everything!" It's important that what's coming in is pleasant, and that it's freely given by the adult in a selfless, unconditional way. Then the pathways are strong and untainted. What eventually happens is that the child turns around and rides out on the same pathways. The reflex pathways that create the bridges for the child to find his home *within* his body are also the ways back *out*, the means to find his place in the world.

Physical and soul warmth help the child come out on the pathway, as do practices which support the developing four foundational senses. The sense of touch is formative in enabling the child to know the boundary of the body. Spatially the primitive reflexes bring the child *inside* the body. The child needs to be touched and held in a way in which he can spatially come *out* to the border of the body. If the handling is harsh, spatially the child recoils and is driven back *inside*. This is the spatial definition of tactile defensiveness. This also can happen with trauma. Sensitive handling skills are learnable and can provide tremendous opportunities for healing. It is important that the adult develops the sensitivity to perceive the spatial activity of the child.

Whenever the child *actively and successfully meets* a situation in the world, the outgoing pathways are strengthened. For example, when routines and rhythms are woven into the child's surroundings, this gives the child an opportunity to actively *meet* the expectation. The British saying, "well met," describes it accurately. This does not happen when movement is imposed upon the child, or when the child is forced to do something. This does not mean that the child should not be given a boundary. The important factor is *how* the boundary is given, optimally with the adult giving space for *self-initiated compliance* from the child.

As a general rule, the Pikler caregivers do not place toys in the hands of the infants, but rather the toys are placed around the infant, and the child is allowed to roll and crawl and to reach *out* for the particular toy in which he is interested. When the limb *rays out* and *meets* the toy, the hand will successfully form to the shape of the object. Essentially, it is interest in the world that integrates the reflexes. The latin root, *interesse*, means between. Interest is the bridge between

being in the body and being in the world. It is a vehicle by which one can come out of oneself and find one's destiny in the world.

Balancing involves the height of the center of gravity and the width of the base of support of the physical body. If one's balance is challenged, one will lower one's center of gravity and widen one's base of support, as one naturally does on an unstable surface such as a rocking boat. If given time on the floor, the infant will gradually develop his balance by raising his center of gravity and narrowing his base of support *in each of the developmental positions*. Here the child is *meeting* the geometry of the situation.

The relationship with the primary caregiver--whether professional or parent--is the most important factor in the life of the developing child. Self-initiated movement is a function of the quality of this relationship. It is paramount that the professional never uses his knowledge of motor development in a way which implies to the parent that he has done something wrong. This may negatively affect the tender relationship between the parent and child.

PREPARATION FOR LIFE

At birth, the infant is essentially bound to the face of the earth, but the child is far from helpless. He is getting help from the periphery, through his "telephonic connection" with the spiritual world. The task of the adult is to not interfere with this connection, and to provide the time and space in which the child can do this majestic work. The infants are warriors in an archetypal battle against the merciless and unyielding forces of gravity. If infants are allowed to engage in their own unique and gradual processes of coming up into the vertical, they will emerge victorious and will be strengthened for life.

This article is based on the author's study of the work of Jaimen McMillan (founder of Spacial Dynamics®), Rudolf Steiner, Emmi Pikler, Jean Ayres (founder of Sensory Integration), and Berta Bobath (founder of Neurodevelopmental Treatment).

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