child development
6-9 months
You and your baby are starting to feel (and act) like separate people. He is starting to sit up, move by rolling, reach out and act on the world. He worries that you might not come back when you go away and lets you know it. He will respond to you giving him lots of things to look at, touch, play with and safely put in his mouth.

Time playing on his tummy on the floor will strengthen his back and help him learn to crawl.

Social and emotional development

There are some big emotional and physical developments in your baby that you will notice between six and nine months. Your baby is becoming able to move around and take a much more active part in family life.

- Your baby begins to realise she is a separate person surrounded by her own skin (and finishing at her hands and feet). She no longer experiences floating in a sea of feelings and needs where the outside and the inside are all mixed together. Instead she begins to feel she has an outside and an inside and to know where the boundary of the outside is. She will start to understand that you are separate from her, and it will worry her when she can’t see you or feel you nearby.

- She begins to recognise and identify her own feelings and that they are different. For instance, she may know the difference between feeling hungry and feeling lonely and may be able to give you some clue as to whether she wants food or a cuddle. She knows this because you have helped her to recognise different feelings by responding to her hunger with food and her loneliness with cuddles, etc.
Your baby will begin to have desires of her own, simple things she knows she wants, like wanting to hold an object or wanting to be picked up immediately. Her desires may not always be the same as yours and, for the first time, you may feel yourself clash with her tiny will!

She will, during these months, come to recognise the important, familiar people in her world and will become sensitive to strangers. By nine months she will be shy with strangers, and for a while she might not even want to be too close to people she knows, such as her grandparents, but this will change. With familiar people, it is a very sociable age and she will love playing and chatting.

**Physical development**

Your baby will put everything in his mouth. His lips and tongue are the most sensitive part of his body and will give him lots of information about texture, shape and taste. Also, you can swallow some bits of the world (such as food) but not others, and he is just learning this! Safety is very important.

- He will start to take some mashed solids around this time, and later some soft finger food, such as toast (under your supervision).

- At first it is hard for him to work out the eating action because he is used to sucking, so keeping the food inside his mouth can be hard!

- Just because the mashed pumpkin gets spat out does not necessarily mean he doesn’t like it, he just may not yet have got the hang of keeping it inside his mouth and swallowing it. Different textures feel very strange to him at first.
Moving

At some time during these four months she will be able to:

- roll over, front to back and back to front
- sit alone for a few moments when you put her into a sitting position, then manage to sit by herself without falling over
- do push ups when on her tummy, i.e. lift her head and chest off the floor and support herself on outstretched arms
- start to move while on her tummy, first ‘commando’ style, i.e. pulling herself along on her arms, then crawl on all fours
- reach for a rattle and shake it
- swap a toy from one hand to the other
- find her feet, play with them and put them in her mouth.

Seeing

Your baby’s eye muscles will be working well and he will be able to focus on small objects. He also develops a perception of depth and therefore can be afraid of heights and falling. By nine months he can not only see a change in floor level but also understand that it is scary. Despite this, some babies may let the desire to move overcome this feeling and try, for example, to roll off the change table.

Hearing

He will turn towards familiar sounds and voices and want to make sounds himself, not only ‘talking’ but by banging objects together.
Speech and language

While she has been cooing and babbling for many weeks, her sounds will now become more like real words.

- Your baby enjoys making sounds and she knows that she has made them.
- She will try different sounds like clicks, lip bubbles and raspberries as well as make her word-like sounds, and copy the sounds you make.
- She will use lots of different sounds to express different emotions; frustrated grunts, squeals and giggles.
- She will listen to you carefully when you speak to her, and she will talk back to you using her babbling sounds.
- She will probably be putting a vowel and a consonant together, as in ‘muum’ or ‘bubbub’.
- She might say ‘ma-ma-ma’ because she can, but she does not know that this sound is a word she can use when she wants her mother. These sounds will be repeated as she works out how to make the noises.

Activities for the six to nine month old

Your baby loves to touch and grasp and to ‘make things happen’, i.e. make things shake or bang or move towards him. These activities are great fun and also help him to understand that he has an effect on the world, he can DO things to it.

He is learning about up and down as well as coming and going, and he will love to play games that act these things out.
Your baby will love to:

- have you look into his eyes and chat with him
- lie on his back and grab his feet
- lie on his tummy and reach for a brightly coloured toy or piece of paper
- have you play ‘here is your nose - here is mummy’s nose’
- drop his toy from the highchair or pusher over and over and delight in watching you pick it up and give it back to him
- play ‘ahh boo’ as you bring your face quickly down to his tummy
- play ‘peek-a-boo’ as you hide your face behind a book or cloth and say his name when you come out.

Babies need most of all to be with and to have fun with people, especially their parents and others who are close to them, such as their brothers, sisters and grandparents. People are much more interesting than things.

SAFETY

A moving baby who puts everything into her mouth needs to be watched all the time because she can quickly swallow small objects or creep into unsafe places. Babies are not able to understand about danger. Lock away unsafe objects or put them high out of reach.
ALERT!

You should check with your doctor or child health nurse if, by nine months, your child is not:

- sitting up without help
- smiling and laughing out loud
- grasping, holding and shaking things
- reaching out for objects and putting them into their mouth
- turning towards you when you call their name
- beginning to try some ‘solid’ foods
- making lots of different sounds.
Summary

Social emotional
A baby at this stage usually:

- knows familiar people and starts to withdraw from strangers
- begins to turn around when her name is called
- starts to become anxious if the main caregiver is out of sight
- stretches up her arms to be picked up
- initiates gestures, such as cough, poking out tongue.

There may be a problem if your baby:

- does not show pleasure when she sees familiar people
- is not making eye contact
- cannot be reassured by mother or close carer.

Motor skills
A baby at this stage usually:

- sits without support by eight to nine months
- starts to move around by eight months (rolling, creeping)
- takes objects to mouth by six months.

There may be a problem if your baby:

- is not sitting by nine months
- holds her body stiff and cannot be put in a sitting position
- is not interested in, and reaching for, objects by eight months.
Daily activity
A baby at this stage usually:

- can hold a bottle to drink
- can start to drink from a cup, which is held by an adult, by six to eight months
- holds a spoon, but cannot use it, by seven months
- begins to try some ‘solid’ foods.

Understanding
A baby at this stage usually:

- looks for a fallen object by seven months
- plays ‘peek-a-boo’ games
- cannot understand ‘no’ or ‘danger’.

There may be a problem if your baby:

- does not recognise mother
- does not show interest in surroundings.

Speech and language
A baby at this stage usually:

- babbles by six to seven months, making one and two syllable sounds, e.g. ‘da-da’
- listens to a person speaking then ‘answers’ in babbling sounds.

There may be a problem if your baby:

- does not babble, imitate or make other sounds when someone talks to her.
Note: Children are different and may develop at different rates. So if your child does not do all the things in this topic, it may be because your child is working on some different area of his learning and development at present. However, children usually follow the same pattern of development, and it is good to have reassurance that your child is developing normally in their own unique way.

If your child is very different from other children, if you are worried about your child’s development or if it seems to go backwards, you should talk with a health professional about your concerns. If there is a problem, getting help and ideas early will help. Remember that what matters is to support them on moving forward from where they are now.

For more information contact:

- Local community child health nurse
  See inside your baby’s purple ‘All About Me’ book
  Look in the phone directory under ‘Child Health Centres’
  Visit www.healthywa.wa.gov.au

- Local family doctor

- Ngala Helpline
  8.00am - 8.00pm 7 days a week
  Telephone (08) 9368 9368
  Outside metro area – Freecall 1800 111 546*
  www.ngala.com.au

- Parenting WA Line
  Freecall 1800 654 432* (24 hour service)
  www.dlgc.wa.gov.au/parents

- Raising Children Network
  www.raisingchildren.net.au
Kidsafe WA
8:30am– 5:00pm (Monday to Friday)
Telephone (08) 9340 8509
Outside metro area – Freecall 1800 802 244*
www.kidsafewa.com.au

SIDS & Kids
9:00am – 5:00pm (Monday to Friday)
Telephone (08) 9474 3544
Outside metro area – Freecall 1800 199 466*
www.sidsandkidswa.org

*Calls made from a mobile may be charged at a timed rate.

This topic may use ‘he’ and ‘she’ in turn - please change to suit your child’s sex.
This information, along with other child health information, is available in electronic format at www.healthywa.wa.gov.au

This document can be made available in alternative formats on request for a person with a disability. Please contact childcommunity@health.wa.gov.au

© Women’s and Children’s Health Network, reproduced with permission. The South Australian Government does not accept responsibility for the accuracy of this reproduction. The original version is published at http://www.cyh.com

**Warning**
This document is published as general information only. You should always consult a healthcare professional for diagnosis and treatment of any health condition or symptoms.

**Disclaimer**
The advice and information contained herein is provided in good faith as a public service. However, the accuracy of any statements made is not guaranteed and it is the responsibility of readers to make their own enquiries as to the accuracy, currency and appropriateness of any information or advice provided. Liability for any act or omission occurring in reliance on this document, or for any loss, damage or injury occurring as a consequence of such act or omission, is expressly disclaimed.

Produced by Child and Adolescent Health Service 2012
Revised August 2013