Glossary

Activity
The amount of physical movement during eating, play, sleep, dressing, and bathing.

Adaptability
The ease or difficulty with which reactions to stimuli can be modified.

Alertness
Widening and brightening of the infant’s eyes and face as he or she focuses attention on stimuli (such as visual, auditory, or objects to be sucked).

Approach/Withdrawal
The style of initial responses to new stimuli, including situations, people, places, and foods.

Auditory response
The newborn’s ability to react to sounds, including voices, in the environment.

Babkin reflex
This reflex is elicited by gently holding the infant’s hands between the thumb and index/middle fingers. Pressure is applied to the palm and dorsum of the hands. The infant will open her mouth and drop her tongue to the floor of her mouth.

Behaviors
Observable activities in the infant in response to external or internal stimuli in the environment.

Consolability
The ability of infants to bring themselves or to be brought by others to a lower state.

Cuddliness
The degree to which the newborn molds and nestles into the contours of the caregiver’s body.

Cues
Behaviors that signal an infant’s status or needs.
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**Difficult infant**
Intense. Demonstrates irregular sleeping and eating patterns, negative response to new situations (withdrawal), difficulty adapting to change, irritability, and negative mood.

**Disengagement cues**
Types of behavior that signal the infant’s need for time-out or a reduction in stimuli.

**Distractibility**
Effectiveness of environmental stimuli in interfering with ongoing behavior.

**Easy infant**
Mild mannered. Demonstrates regular sleeping and eating patterns, positive response to new situations (approachable), high adaptability to change, and positive mood.

**Engagement cues**
Types of behavior that signal the infant’s readiness to interact with caregivers.

**Galant reflex**
See “Truncal incurvation reflex.”

**Grasp reflex**
See “Palmar grasp reflex” and “Plantar grasp reflex.”

**Habituation**
The ability of infants to lessen their response to repeated stimuli.

**Hand-to-mouth activity**
The infant brings the hands to the mouth area, often accompanied by rooting and sucking movements. The infant may also suck on his or her fingers.

**Intensity**
The energy level of the infant or child’s responses.

**Mood**
The usual disposition—amount of pleasant or unpleasant behavior—the child exhibits in different situations.
Moro reflex
This reflex is elicited by placing the infant in a semi-upright position, allowing the head to momentarily fall backward, with immediate resupport by the examiner’s hand. The infant symmetrically extends and abducts the arms and opens the hands, then adducts and partially flexes the arms as if in an embrace. The fingers extend except for the index finger and thumb, which are often semiflexed forming a characteristic “C” position. Following the return of the arms toward the body, the infant may relax or cry.

Motor behavior
Spontaneous body activity and activity in response to stimuli.

Palmar grasp reflex
Stroking the infant’s palm with a finger will cause the infant to grasp the finger. The infant will tighten the grasp when his or her arm is drawn upwards. When the palmar grasp is tested in both hands, the term infant can be briefly lifted.

Persistence/Attention span
The length of time a child pursues activities and sticks to difficult tasks.

Placing reflex
Holding the infant upright and touching the top of the foot to the underside of a horizontal surface will cause the infant to flex, then extend the leg and place the foot flat.

Plantar grasp reflex
Applying fingertip pressure to the ball of the foot will cause the infant to curl the toes and attempt to grasp the finger.

Predictability
The ability of an infant to respond to the environment in a way that can be anticipated by the caregiver.

Readability
The ability of an infant to demonstrate a behavior that is understood by the caregiver.

Rhythmicity
Regularity of biologic cycles and physiologic functions such as sleep, hunger, and elimination.
Understanding the Behavior of Term Infants

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**Rooting reflex**
Stroking the infant’s cheek or corner of the mouth will cause the infant to turn the head toward the side stroked and open the mouth. This reflex is less prominent after one month of age.

**Self-consoling behavior**
Activities of fussing or crying newborns to regain control of themselves.

**Self-regulation**
The ability of an infant to adapt to his or her surroundings in a positive and predictable way.

**Sensory threshold**
The amount of stimulation, such as noise or light, needed to evoke responses from the child.

**Sleep cycle**
The time from a period of active sleep, through a period of quiet sleep, to the beginning of the next active sleep period.

**Slow-to-warm-up infant**
Mild mannered. Demonstrates slow adaptability after several attempts and negative mood.

**State**
A group of characteristic behaviors and physiologic changes that recur together in a regular pattern.

**State modulation**
The ability of the infant to make smooth transitions between states, cycle between sleep states, arouse when appropriate (e.g., for feeding or playing), and sustain sleep states.

**State organization**
The development of sleep and awake states, including increasing duration of sleep and awake periods, increasing periods of quiet alert, consolidation of sleep into nighttime hours, and maturation of the sleep states.
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**Stepping/Walking**
Holding the infant upright so that the soles of the feet touch a flat surface will cause the infant to make alternate stepping movements. This reflex becomes more active 72 hours after birth.

**Sucking reflex**
Touching the infant’s mouth will cause the infant to respond by opening the mouth and making sucking movements.

**Temperament**
The basic biologic dimensions of personality that are apparent early in life and continue to be demonstrated to some degree throughout life.

**Truncal incurvation (Galant) reflex**
This reflex is stimulated by suspending the infant ventrally, supporting the anterior chest wall in the palm of the hand. Firm pressure is applied along the spine in the thoracic area with thumb or cotton swab. The infant flexes the trunk and swings the pelvis toward the stimulus.

**Visual response**
The newborn’s ability to react to objects or people with whom she or he makes contact.

**Withdrawal**
See “Approach/Withdrawal.”