Special Developmental Problems of Infants and Toddlers

Prenatal Exposure to Drugs

The effects of drug exposure upon children during pregnancy are not completely understood. What was once believed to be a consistent syndrome of symptoms known as crack/cocaine exposure to infants and children is now not believed to be totally attributable to crack/cocaine exposure during pregnancy. While research indicates that children who are exposed to other stressors in utero often suffer a variety of developmental difficulties, the specific effects of various illegal or street drugs are not completely known.

A number of factors known to affect the fetus during pregnancy probably combine to place the newborn child at risk for a variety of developmental problems. These factors include cigarettes, marijuana, cocaine, poor prenatal care and parenting practices, poverty and low socioeconomic status, including low education level and associated social risks and the risks associated with drug-seeking behavior.

Infants

Infants who have been drug exposed during pregnancy may be very irritable and difficult to soothe. These children are often labeled “disorganized” or lacking the ability to self-regulate their emotional states. At birth, and shortly thereafter, these children are often identified as “stiff” and “irritable” by caretakers. These patterns are usually short-lived and seldom continue beyond infancy.

Drug-exposed infants have a tendency to be smaller at birth in weight and length. They typically catch up to non-exposed children with proper care and nutrition.

Other symptoms in newborns include gaze aversion: a frowning or furrowed brow that gives the infant a worried look, motor agitation, hiccups, spitting up and crying.

Caretakers should receive education and instruction in strategies to soothe newborns and learn to reduce their stress. Examples of soothing strategies include providing firm touch, swaddling the infant with arms close to his/her body, using a pacifier and vertical rocking. It is often helpful to reduce the amount of stimulation in the newborns environment. Finally, it is critical for parents and caretakers to learn to “read” the infant’s cues, and adjust their interactions with the baby so as not to overwhelm or irritate the baby.
**Toddlers and Preschool Children**

Children exposed to drugs in utero are more likely to experience delays in development for a number of reasons. While the precise origin of the delays is not known, it is important that children with developmental delays receive appropriate services. Early intervention services that stimulate cognitive, motor, language and social development are effective for children with delays caused by drug exposure.

Drug-exposed children may exhibit any number of symptoms. Common problems include behavioral symptoms, such as low tolerance for frustration, distractibility and impulsive behavior. Language delays are frequently found in children with impoverished home environments. These problems may appear as articulation problems or as delays in verbal expression.

**Treatment**

Caretakers of children who are drug exposed should be aware of indicators of developmental delays and should seek medical, developmental or psychological assessments for children who exhibit difficulty.

Early intervention services that stimulate cognitive, motor, language and social development are effective for children with delays caused by drug-exposure. These services are available through the Kansas Infant-Toddler Services, local Tiny-K Programs.