Newborn Walking: Additional Data

Some additional data are pertinent to the controversy between Gots (1) and Zelazo et al. concerning the work of the latter (2) on newborn walking. From birth, infants in an African foraging people (3) had extensive experience in vertical postures in a sling at the mother's side or held sitting or standing in the mother's lap. Although the newborn walking reflex was not systematically exercised, parents expressed the belief that motor milestones would not appear unless trained and attempted to train them in advance of maturation. These infants' neurological status at birth conformed closely to the European pattern, but they were advanced in sitting, standing up, and in the mature phase of walking compared to the American standardization sample (4) assessed by different investigators.

The simplest explanation for this change is that parental treatment accelerates development. This is the explanation offered by Ainsworth (5) and Géber (6) for the precocity of the infants in their Ugandan sample. While genetic factors cannot be ruled out, one isolated finding (7) of a difference between European and African infants in neurological status at birth has been difficult to repeat, and the method used has been challenged (8). However, precocity of milestones is well established (9), and Géber and others have noted that African infants raised in a European manner do not show the same degree of precocity (8).

The study by Zelazo et al. is thus not an isolated or arbitrary sort of intervention. Parental behavior which has the effect of accelerating motor development is widespread. The facts that among Bushman foragers, as among other hunting and gathering peoples (10), infanticade was practiced to effect adequate birth spacing and that, because of their mobile subsistence pattern, a new child was unwanted until the last child could walk well, combine to suggest that the practice of deliberately accelerating infant motor development may have considerable antiquity. Observations of Bushman newborns (11) also confirm the view of Zelazo et al. that in many infant care contexts the newborn reflex repertoire in general has functions (other than to be elicited by examiners) and that these functions may have survival value.

There are also cultures in which motor development is slower than (11) or simply different from (12) our own. Speedy motor development has no a priori claim to desirability. Its desirability is a matter for research. But what Zelazo et al. have suggested is well within the bounds of what at least some people have done with their babies, probably for many centuries. Only ethnocentrism makes it seem artificial to us. More important, they have used a research paradigm, that of intervention in a normal infant care context, quite different from the interventions in "deprived" and institutional settings with which we have become familiar. More research like theirs needs to be done, not only in motor maturation but in other areas of infant care and development. It makes sense to be guided in these interventions, at least to some degree, by the infant care practices of other cultures.

M. J. Konner

Department of Psychology and Social Relations, Harvard University, Cambridge, Massachusetts 02138

References
13. I am grateful to Irven DeVore and Jerome Kagan for discussions of an earlier draft of this comment.

November 1972