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CHEEERS: Helpful Prompts

Postnatal

There are three parts to think about for each of the components of the CHEEERS:

1. What does baby do?
2. How does parent respond?
3. What was the frequency of the behavior? (behavior documented should represent the way the parent responded for most or all of the visit).

When documenting CHEEERS, be sure to use *facts* (baby turned head away, parent changed activity) rather than *interpretations* (parent responded to baby's cues). Each component should represent the interactions over an entire visit. Please note that you only need 1 example but you may add more. All components of Post-natal CHEEERS should be documented each visit. CHEEERS components are integrated; it is sometimes difficult to separate out the differences between them. For example, Cues and Empathy could be very similar. What is important is to be sure that each component has a different example.

C-ues:

- Does baby give clear cues?
- Over the entire visit, does the parent respond mostly sensitively and responsively to the baby's cues.
- If the answer is "yes," write an example of a cue in which the parent responds sensitively and in a timely manner to the baby.
- If the answer is "no," write an example of a cue in which the parent did not respond in a timely and sensitive and nurturing way.
- Example: *Baby splayed fingers and turned her head away. Dad reached to the side and put spoon with food in baby's mouth. Baby spit food out. This represented most of the visit.*

H-olding:

- What type of holding did you see overall?
- What was the quality of the hold?
- Was baby in arms or at arms length?
- Was there spatial closeness?
- What type of touch did you see overall?
- How did baby respond?
- Example: *Dad held baby close to body. Baby snuggled into dad's arms. This represented most of the visit.*

E-xpression:

- What was the language like?
- Was there a conversation? What was it like?
- How did baby respond?

- Example: *Mom looked at baby and said, “what would you think about going for a walk? Baby smiled and giggled. Mom took baby for a walk. This represented all of the visit.*

E-mpathy:

- Did parent understand what baby was thinking or feeling?
- Does parent think about how experiences might be impacting the baby?
- Does parent support baby in dealing with intrusive or uncomfortable events?
- What does parent say or do to demonstrate that he/she understands what baby is thinking or feeling?
- Example: *Baby was taking her first steps and fell on carpet. Mom went to baby and picked her up. Mom said, “Oh, poor baby, are you OK? While holding close to chest. Baby smiled. This represented most of the visit.*

E-nvironment:

- What does the parent do with the environment to stimulate baby’s development?
- How does the baby respond?
- Example: *Dad took his baseball hat off his head and held it between baby and him. He moved it away and baby smiled. He began a game of peek-a-boo with baby. Baby laughed. This represented most of the visit.*

R-hythm & Reciprocity:

- Who initiated the activities?
- How did the baby respond?
- Was there a dance?
- Example: *Mom shook a rattle for baby. Baby looked away. Mom continued to shake rattle. Mom chose all activities. This represented most of the visit.*

S-miles:

- Is there joy during the visit?
- Mutual attention
- Smiles between parent and child
- Example: *Baby nor mom smiled during the visit. There were mutually engaged in the Mr. Potato Head activity most of the visit.*

Prenatal

Please note that not all components of Prenatal CHEEERS will be able to be documented at each visit, but there should be some opportunities beginning in the 2nd trimester. Also, frequency may not always be evident during the prenatal period. Generally, the 3 E’s are the easiest to document during the prenatal period (expression, empathy and environment).

C-ues (more evident in the 3rd trimester when baby kicks, rolls, and has more movement):

- Does parent talk about what the baby does inside her belly and vision what baby might be telling her or what it might mean?
- Are the parents aware of the movement in mom’s belly?

- Does the parent notice differences in the baby's movements, and wonder that the baby might be telling her or what they might mean?
- What does the parent tell you that demonstrates this?
- Example: *Dad says that when baby kicks, he pats baby's foot and baby kicks him back.*

H-olding (more evident after birth of baby):

- Does mom rub her tummy in a soothing manner?
- Does mom rest her hands on her belly?
- Does dad touch mom's belly?
- What is the quality of their touch?
- Example: *During most of the visit, mom sat with her hands folded across the top of her belly, gently stroking it from time to time.*

E-xpression (more evident in the 3rd trimester when baby kicks, rolls, and has more movement):

- How do parents speak about the baby and/or the upcoming birth? What do they say?
- Are parents talking with baby through the womb?
- Do parents talk about what baby might be doing in the womb?
- How do parents talk about the baby and/or the upcoming birth? What do they say?
- Example: *Mom says dad talks to the baby each night, putting his lips close to the womb, or*
- *Mom says, "This baby is going to be trouble. Every time I sit down to watch TV, he starts kicking me on my bladder so I have to go pee. He does it on purpose."*

E-mpathy:

- Does mom adjust her position to make her baby more comfortable?
- Does mom or dad talk about what it must be like for the baby in the womb, putting themselves in her place?
- Is mom avoiding stress and in general taking good care of her body?
- Do parents speculate about what baby will be like, look like, what characteristics unborn baby might have?
- Does parent talk about baby liking certain foods or noticing that baby seems to move more when she eats certain foods?
- Do the parents keep a journal, or a record of the pregnancy talking about their emotional experiences and speculating about the baby's experience?
- Has mom made lifestyle changes for the well-being of the baby (stopping smoking, drinking, substance use? Has she improved her nutrition?)
- Example: *Mom says she noticed how the baby moved "way too much" after she smoked a cigarette. She stopped smoking after that, and has gone 3 days without a cigarette.*

E-nvironment:

- Do parents sing or read to baby through the womb?
- Is mom getting prenatal care? Have the parents selected a hospital?

- Is mom getting healthy exercise?
- Have the parents prepared a space for the baby?
- Does mom call the doctor/midwife when worried about the pregnancy?
- Do the parents enjoy the prenatal curriculum activities?
- Are parents attending prenatal classes?
- Example: *Mom shows you the baby's bed with a mobile she made hanging where he will see it.*

R-hytm and Reciprocity (more evident in the 3rd trimester when baby kicks, rolls, and has more movement):

- When baby kicks, do parents pat baby back?
- Are the parents interacting with child by playing "flashlight tag" and other fetal stimulation activities?
- Do they notice what effect things they do have on fetal movement, and what happens when they change what they do?
- Example: *Dad says when baby kicks, he pats her foot, and baby kicks him back.*

S-miles:

- Are parents happy about the pregnancy/new baby? What do they say?
- Do they speak about the baby with joy?
- Do parents smile when talking about the pregnancy/new baby?
- Are parents excited about the pregnancy/new baby? What do they say?
- Example: *Mom tells you that this pregnancy was not at all wanted, and she cannot wait until it is over.*

Remember, once the CHEEERS is documented, you will want to identify which of the CHEEERS to address using one of the Reflective Strategies.