

## Bottom Shuffling Babies

### What is bottom shuffling?

Bottom-shuffling babies sit on their bottoms and move themselves around using their legs, and sometimes their arms to propel themselves, rather than crawling. They may use a variety of techniques to do this; some lean to the side and use one arm and leg, some use both legs together and some bounce.

Typically, babies who bottom shuffle do not like playing on their tummy and may be reluctant to take weight through their legs; they will lift their legs up when you attempt to support them in standing.

Most bottom shufflers are "late walkers" (typically anything from 18 – 24 months of age).

### Is it normal for children to bottom shuffle?

**YES** - Some children will master their motor milestones early and others will be much later and some may miss out on developmental milestones all together – such as crawling. Some babies will learn to bottom shuffle instead – **this is a normal variant**

The rate at which a child develops is affected by many factors such as:

- genetics/family history -someone else in the family may have been a bottom shuffler or late to walk
- Temperament.
- Experience and opportunity - baby may not have spent very much time on the floor due to lack of space, or time spent in hospital eg following a premature birth or prolonged illness

### Why do some babies bottom shuffle?

Babies who bottom shuffle typically have not tolerated being placed on their tummy and therefore do not develop the strength in their arms, neck and back muscles to enable them to push themselves up, move around on their tummy or crawl. They often prefer to lie on their back or to be supported in a sitting position.

These babies may be reluctant to roll from their back onto their side or their tummy or vice versa. This makes it very difficult for them to learn to sit themselves up from lying down.

In general, babies who bottom shuffle have joints that are more supple/flexible than average. This makes it more difficult for the child to stabilise their joints to take weight through their arms and legs, making it harder for them to crawl and to stand and step so they bottom shuffle instead.

Babies who bottom shuffle can move very quickly and their hands are free to hold and play with toys. They therefore often have little motivation to pull up to stand on their feet or use their arms to crawl.

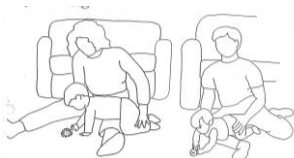
## How can I help my child?

### Help your child take weight through their arms

Encourage tummy time so that they can learn how to weight bear through their arms and so that their arms and shoulder girdle will become more stronger, making it easier for them to learn to sit themselves up from lying



If they do not tolerate lying flat on the floor, give them some support under their chest using a rolled up towel or lay them across your legs. Sit on the sofa, lean back and lay your child on your chest (progress to lying on the floor with your child on your chest)



Encourage your child to shuffle over obstacles on the floor, such as over your legs/cushions, etc so that they have to bring their weight forwards onto their arms to move themselves forwards.

### Help your child to kneel



Encourage your child to pull themselves up onto their knees, against you or on a piece of furniture. Kneeling helps to improve stability around the hips and lower body.



As your child becomes more stable in kneeling, you can help him/her to stand up. Sit on the floor behind your child, place one of his/her feet flat on the floor then hold him around his hips so that the child feels secure and you can help him/her to balance or guide him/her up into standing.

### Help your child to take weight through their legs



Sit on the floor with your legs crossed; sit your child on your lap with their legs over yours and their knees bent so that their feet are flat on the floor. If your child tends to lean backwards, use your body to keep their back straight and leaning forwards slightly to stop them leaning back. Encourage your child to lean forwards to reach for toys/objects, progress to reaching down to retrieve objects from the floor



Stand your child at low furniture

## Help your child to pull to stand from your lap



Kneel or sit cross legged on the floor in front of a sofa or coffee table, etc. Sit child on your lap making sure that their hips and knees are at 90 degrees and their feet are flat on the floor. Place an interesting object/toy on the surface, encourage your child to reach forwards for the object. Then move their hips forwards and up, over their feet (supporting them around their hips with your hands) as they straighten their knees. Bottom shufflers tend to try to stand with their bottom behind their feet so they need help to bring their hips forwards, over their feet. Encourage them to lean their tummy against the table/surface. When your child learns to stand up independently you no longer need to support them around their hips.

You can help your child learn to sit down by bringing their hips back and down onto your lap.

## Will a “sit in” baby walker or baby bouncer help my child learn to stand and walk?

**NO**, definitely not! These do not help children to develop their ability to stand or walk and have been the cause of many serious accidents.

## When to seek further advice or help from health professionals

- If your child has difficulty moving their arms or legs, eg if they appear to be weak or floppy or stiff
- If your child appears to be using one side of their body more than the other - this may be the arm and/or leg, do they have a strong preference to turn their head to one side?
- If your child always falls to one side or backwards when they lose their balance.
- When your child stands, is he/she unable to bring one or both feet flat on the floor or is their foot position very different on both feet
- If your child shows significant delay in other areas of their development, eg play and language, fine motor skills, vision or hearing

## Contact details

### Children's Therapy Services

Telephone number: 0300 019 2936

For further general health-related information, please ask the relevant department for an information prescription or contact:

Patient Experience  
University Hospitals Dorset NHS Foundation Trust  
Longfleet Road  
Poole  
Dorset  
BH15 2JB

Telephone: 0300 019 8499

[www.uhd.nhs.uk](http://www.uhd.nhs.uk)

**We can supply this information in other formats, in larger print or have it translated for you. Please call the Patient Experience Team on 0300 019 8499 or email [patientexperienceteam@uhd.nhs.uk](mailto:patientexperienceteam@uhd.nhs.uk) for advice.**

**If you wish to make any comments or to ask about any research evidence used to write this leaflet, please contact the Patient Experience Team on 0300 019 8499, write to the Patient Experience Team (address above) or email [patientexperienceteam@uhd.nhs.uk](mailto:patientexperienceteam@uhd.nhs.uk)**

---

Poole Hospital, Longfleet Road, Poole, Dorset, BH15 2JB

Author: **Rebecca Shelton** Date: **February 2021** Version: **Three** Review date: **February 2024** Ref: **192/21**

t: 01202 665511 w: [www.uhd.nhs.uk](http://www.uhd.nhs.uk) : @UHD\_NHS : @UHDDTrust : @uhd\_nhs