

1 **Genetic and Environmental Influences on Developmental Milestones and Movement:**

2 **Results from the Gemini Cohort study**

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6 Running Head: Developmental Milestones and Movement

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**Abstract**

35 **Purpose:** Variability in the timing of infant developmental milestones is poorly understood.  
36 We used a twin analysis to estimate genetic and environmental influences on motor  
37 development and activity levels in infancy. **Method:** Data were from the Gemini study, a  
38 twin birth cohort of 2402 families with twins born in the UK in 2007. Parents reported motor  
39 activity level for each of the twins at age 3 months using the Revised Infant Behavior Rating  
40 Scale (IBQ-R), and also reported the age at which they first sat unsupported, crawled, and  
41 walked unaided. **Results:** Activity level at 3 months, and age of first sitting and crawling  
42 were about equally influenced by the shared family environment (45%-54%) and genes  
43 (45%-48%). Genetic influences dominated for the age of taking first independent steps  
44 (84%). **Conclusion:** Aspects of the shared family environment appear to be important  
45 influences on motor activity levels and early milestones, although the timing of walking may  
46 have a stronger genetic influence. Further research to identify the specific environmental and  
47 genetic factors that promote early activity may be important for longer-term health outcomes.

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51 **Keywords:** twin; activity; child; motor

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53           The foundations of an active lifestyle are laid in early infancy, with evidence that the  
54 age of achieving developmental milestones in infancy is related to future sports participation  
55 (Ridgeway et al., 2009). Motor milestones have also been associated with critical transitions  
56 such as school readiness (Cowen et al., 1994), and with educational outcomes throughout life  
57 (Taanila et al., 2005). Age of attainment of early developmental milestones is important  
58 evidence for parents and paediatricians that infants are developing normally.

59

60           Conventional cohort studies are not designed to distinguish environmental from  
61 genetic effects, but studies of twins make it possible to obtain quantitative estimates of  
62 genetic and environmental influences (Plomin et al., 2008). Several smaller twin studies have  
63 examined infant activity level (e.g. movement of arms and legs, squirming). In a sample of  
64 302 pairs of twins aged 3-16 months, genetic factors explained 55% of the variance in infant  
65 activity level and the unique environment (which includes measurement error) explained the  
66 remainder (Goldsmith & Campos, 1999). In 60 pairs of twins, monozygotic (MZ)  
67 correlations were higher than dizygotic (DZ) correlations for both parent-rated, and  
68 objectively measured, infant activity level, suggesting genetic influence (Saudino & Eaton,  
69 1991). However, larger samples are needed to distinguish shared and non-shared environment  
70 effects.

71

72           Few twin studies have examined the age of attaining milestones such as sitting  
73 unsupported, crawling, or walking unaided, and results have been inconsistent. One study  
74 involving 626 siblings and 98 pairs of twins found that shared environmental influences  
75 explained more than half the variance in age of sitting without support, turning over and

76 walking five steps unaided (Peter et al., 1999). In contrast, in a sample of 84 pairs of twins,  
77 genetic factors explained the majority of the variation in age of sitting, crawling and standing  
78 (Goetghebuer et al., 2003). This variability is likely to be a consequence of limited sample  
79 sizes.

80

81 The present study used data from a large, population-based twin cohort (n=4804  
82 children) to assess genetic and environmental influences on movement activity level and  
83 three important developmental milestones in infancy: first sitting unsupported, first crawling,  
84 and first steps.

85

86

## Method

### 87 Gemini Study and Participants

88 Gemini is a cohort of twins born in the UK in 2007, designed to assess genetic and  
89 environmental influences on growth and development (van Jaarsveld et al., 2010). Half of all  
90 families with twins born in England and Wales during the recruitment period (Mar-Dec,  
91 2007) agreed to be contacted about the study (n=3435). Families where there had been a  
92 death were not contacted. Just under 40% (n=2402) returned the baseline questionnaire when  
93 twins were around 8.2 months old (SD=2.2, range 4.0-20.3 months). The first follow-up  
94 questionnaire was completed by 1931 families (80.4% of the baseline sample), when twins  
95 were 15.8 months old (SD 1.1, range 14.0-27.4 months). Participants classified their own  
96 ethnicity. Opposite-sex twins were classified as dizygotic (DZ). Parents of same-sex twins  
97 were asked to complete a set of 20 questions validated against polymorphic DNA markers

98 (Price et al., 2000) to determine whether the twins were monozygotic (MZ) or dizygotic  
99 (DZ). Zygosity was uncertain in 68 pairs and they were excluded from these analyses. Each  
100 pair of twins were raised in the same environment.

101

102 Comparisons with national twin statistics (ONS, 2006) indicate that the Gemini cohort  
103 is representative of UK twins on sex, zygosity distribution, gestational age at birth, and birth  
104 weight (van Jaarsvled et al., 2010). Gemini parents tend to be slightly healthier than the  
105 general population in terms of fruit and vegetable intake, smoking rates and BMI, and the  
106 majority are White-British and married (van Jaarsvled et al., 2010). Parents who did not  
107 complete the follow-up questionnaire were slightly younger (mean 32 SD 5 years vs 34 SD 5  
108 years;  $p < 0.001$ ), had slightly lower educational qualifications (2.9 SD 1.9 vs 3.6 SD 1.9;  
109  $p < 0.001$ ) and were more likely to be from a non-white ethnic group ( $p < 0.001$ ). Informed  
110 consent was provided by all parents. Ethical approval was granted by the University College  
111 London Committee of non-National Health Service Human Research.

112

### 113 **Infant Movement Activity Level**

114 Infant movement activity level was assessed in the baseline questionnaire using a  
115 subscale from the Revised Infant Behavior Questionnaire (IBQ-R; Gartstein and Rothbart,  
116 2003). The IBQ-R is widely used in developmental research and the activity subscale  
117 demonstrates good reliability and validity (Gartstein & Rothbart, 2003). Parents were asked to  
118 think about each child's behavior in the first 3 months of life and report on several aspects  
119 (e.g., 'during feeding how often did your babies squirm or kick; 'during sleep how often did  
120 your babies toss about in the crib'; when placed in a seat did your babies wave or kick their

121 arms') using a 5 point Likert scale (very rarely; less than half the time; about half the time;  
122 more than half the time; almost always). An overall infant movement activity level score was  
123 calculated for each child, higher scores indicated higher levels. Where  $\geq 5$  values were  
124 missing, data were excluded from analyses (n=120 children) leaving a total of 2274 pairs of  
125 twins. The IBQ-R in Gemini demonstrated good internal consistency (Cronbach's alpha =  
126 0.85).

127

### 128 **Early Motor Milestones**

129 Parents were asked a series of questions, in each case responding separately for the  
130 first-born and second-born twin: 'How old were your twins when they could sit up without  
131 being supported'; 'How old were your twins when they could first crawl on hands and  
132 knees'; 'How old were your twins when they could take a few steps without any support'.  
133 Parents also had the option to select 'not yet'. First sit and first crawl were asked in both the  
134 baseline and 15 month questionnaires; first steps were only asked in the 15 month  
135 questionnaire. If parents responded to the sit and crawl questions on both occasions and there  
136 was a discrepancy of  $>2$  months between values, data were counted as missing. Where  
137 responses were  $\leq 2$  months different, values from the baseline questionnaire were used, but  
138 results were checked using the 15 month data and there were no differences. A few children  
139 had not yet reached each milestone by the time the 15 month questionnaire was returned (first  
140 sit 0.6% and first steps 23%) and 2% of children were 'non-crawlers'. Exact numbers of  
141 infants included are provided in the results section.

142

143

## 144 **Statistical Analyses**

145           Associations between infant movement activity level and developmental milestones  
146 were assessed using partial correlations adjusting for gestational age. For twin analyses, data  
147 were regressed on age (gestational age and age of twins at questionnaire completion) and sex.  
148 Residuals from regressions were used for all analyses. Within-pair intraclass correlations  
149 were computed to provide preliminary evidence of genetic influence, based on the  
150 assumption that MZ (identical) twins share all of their genes and DZ (fraternal) twins share  
151 on average half their segregating genes. If a trait is purely genetic, MZ twins would be  
152 perfectly correlated (1.0) and the DZ correlation would be 0.5. Intraclass correlations were  
153 computed using SPSS software.

154           Structural equation modelling was used to generate quantitative estimates of additive  
155 genetic effects (A), shared environment effects (C), and unshared environment effects plus  
156 measurement error (E) using MX Maximum likelihood Structural Equation Modelling  
157 Software (version 32; Virginia Commonwealth University, Richmond VA). Parsimony of  
158 sub-models (CE, AE and E) was tested with two goodness-of fit-statistics: change in  $X^2$  and  
159 Akaike's Information Criteria (AIC). Post-hoc power calculations were conducted in MX.  
160 To test for contrast effects, MZ and DZ correlations were examined and equal variance by  
161 zygosity was tested (Levine's test). Significance was set at  $\alpha < 0.05$ .

162

163

## **Results**

164           Participant characteristics are presented in **Table 1**. There were no significant  
165 differences between MZ and DZ twins in age at time of questionnaire completion, infant  
166 movement activity level, or age of first steps ( $p$ 's all  $> 0.05$ ). First sit was slightly later in

167 MZ than DZ twins: mean difference 0.34 months (95% confidence interval (CI) 0.12, 0.39;  
168  $d=0.216$ ), as was first crawl: mean difference 0.25 months (CI 0.12, 0.39;  $p<0.001$ ;  $d=0.133$ ).

169 Correlations between infant movement activity level and developmental milestones  
170 are presented in **Table 2**. There was a low correlation ( $r=-0.212$ ;  $p<0.001$ ) between higher  
171 infant movement activity level and first crawl at a younger age, although there was no  
172 correlation between higher infant movement activity level and first sit ( $-0.168$ ;  $p<0.001$ ) and  
173 first steps ( $-0.135$ ;  $p<0.001$ ) at younger age. There was moderate correlations between first sit  
174 and first crawl ( $r=0.468$ ;  $p<0.001$ ) and between first crawl and first steps ( $r=0.476$ ;  $p<0.001$ ).  
175 In addition, a low correlation was found between first sit and first steps ( $r=0.296$ ;  $p<0.001$ ).

176

### 177 **Sex Differences in Infant Movement Activity Level and Developmental Milestones**

178 Infant movement activity level was higher in boys (mean 2.38, SD 0.72) than girls  
179 (mean 2.31, SD 0.72;  $p$  for difference  $<0.001$ ), although the effect size was small ( $d=0.097$ ).  
180 Age of first sit was slightly earlier in boys (7.36 months, SD 1.51) than girls (7.54 months,  
181 SD 1.61;  $p<0.001$ ), also with a small effect size ( $d=0.115$ ). Age of first crawl and first steps  
182 were not significantly different between the sexes. Genetic and environmental estimates  
183 were broadly similar for boys and girls (data available from the corresponding author)  
184 therefore analyses are presented using whole group data.

185

### 186 **Analyses of Genetic and Environmental Influences**

187 Within-pair intraclass correlations (ICC) for infant movement activity level and  
188 developmental milestones are presented in **Figure 1**. MZ correlations were higher than DZ



189 correlations for all outcomes, indicating genetic influence. DZ correlations were more than  
190 half that of the MZ correlations for infant movement activity level, first sit, and first crawl,  
191 indicating a shared environment effect. The DZ correlation was around half that of the MZ  
192 correlation for first steps, indicating strong genetic influence.

193

194 Quantitative estimates (full models presented in **Table 3**) confirmed the indications  
195 from the intraclass correlations. The best fitting model for infant movement activity level  
196 was the full ACE model; with genes explaining 48% of the variance and the shared  
197 environment explaining 45%. A small percentage (7%) of variance was explained by the  
198 unique environment plus measurement error. Similarly, the age that children could sit  
199 unsupported was significantly influenced by genes (48%) and the shared environment (42%),  
200 with a small contribution (10%) from the unique environment. The heritability estimate for  
201 the age that children first crawled was similar (54%), with contributions from shared (33%)  
202 and unique (13%) environments. The more parsimonious AE model was the best fit for first  
203 steps; indicating that 84% of the variance was explained by genes with no detectable effect of  
204 the shared environment.

205

206 Based on these parameters, power to detect a shared environment effect at alpha 0.05  
207 for movement activity, first crawl and first sit was 100%. For first steps, power to detect a  
208 significant shared environment effect was slightly lower because the sample size was smaller  
209 but, the power to detect a significant shared environmental effect of 17% (the upper bound of  
210 the confidence interval observed in the quantitative analyses) was 100%. There was no  
211 evidence of contrast effects in our data.

212

**Discussion**

213           The results of this study indicate the environment has an important role in infant  
214 movement activity level and motor development, although genetic factors dominate the  
215 emergence of walking (first steps). The magnitude of the genetic effect on movement  
216 activity level in our study (around 48%) was very similar to that observed in smaller twin  
217 studies using the IBQ activity subscale <sup>15</sup> or objective measures (Saudino & Eaton, 1991;  
218 Saudino & Eaton, 1995). It is unclear whether infant movement activity (movement of arms  
219 and legs) maps on to ‘fidgeting’ which also demonstrates high heritability (Fisher et al.,  
220 2010), or is more related to play behavior (Saudino & Zapfe, 2008). Relationships between  
221 these childhood activity behaviors merit future research.

222

223           Finding a significant shared environment effect raises the interesting question of  
224 which specific environmental factors are responsible. Parental intervention may play an  
225 important role at this stage of life – for example coaxing babies to wave their arms in  
226 response to a toy, or encouraging them to practice sitting. Aspects of the psychosocial  
227 environment (e.g. parental encouragement and modelling) are known to affect childhood  
228 activity levels (Hinkley et al., 2008), and they may also be important in infancy. Preschool  
229 children with more siblings tend to be more active (Hesketh et al., 2006), perhaps because  
230 infants try to copy the movements of their older siblings. Similarly, older siblings can  
231 influence motor development by providing more interaction (Berger & Nuzzo, 2008).  
232 Availability of age-appropriate toys or parental knowledge of expected developmental  
233 milestones may also affect motor development. However, parents also encourage walking  
234 and we found no evidence for any shared environmental influence, suggesting that family  
235 effects for the other milestones are likely to be more than mere encouragement.

236

237           One possibility is that the key parental influences are not related to advancing motor  
238 milestones but retarding them. The available literature indicates that children need to be as  
239 active and free as possible for adequate motor development. For example, they must develop  
240 the strength required to push against gravity required in development of sitting (Tecklin,  
241 2008). Use of devices such as infant walkers, swings, bouncers and car seats may have a  
242 negative impact on early motor development (Tecklin, 2008) and reaching developmental  
243 milestones is universally later now than in previous years (Piek, 2006). This could be a  
244 product of an increasingly sedentary population with more access to such devices. At present  
245 we do not know whether this influences development of physical activity behavior and  
246 preferences, but this is a possibility.

247

248           A survey of 400 paediatric occupational therapists expressed the view that modern  
249 infants spend too long on their backs (for example, in car seats that can be removed and  
250 attached directly to strollers or swings; [www.pathwaysawareness.org/research-at-pathways](http://www.pathwaysawareness.org/research-at-pathways)).  
251 While parents are generally aware of the American Academy of Paediatrics' (1992)  
252 recommendation to place infants on their backs when sleeping, fewer caregivers are aware of  
253 the 'Prone to Play' message, which encourages parents to place infants on their fronts during  
254 waking time for optimal early motor development (Zachry et al., 2011). There is evidence  
255 that some parents purposely place infants on their backs even when awake due to a  
256 misconception that this will reduce the incidence of Sudden Infant Death Syndrome (SIDS;  
257 Zachry et al., 2011). Parents may need to be more clearly informed that the 'Back to Sleep'  
258 and 'Prone to Play' messages advocated by AAP are complimentary rather than  
259 contradictory. Interestingly, a longitudinal cohort study found that prone time only

260 influenced early motor milestones (including crawling and sitting) and did not influence first  
261 steps (Kuo et al., 2008). This is consistent with our finding that the shared environment was  
262 significant for earlier milestones, but not for walking.

263

264 In further support of a shared environment effect, a number of modifiable factors that  
265 influence achievement of developmental milestones have already been identified, for  
266 example maternal smoking during pregnancy and in the first year predict developmental  
267 delay (Slykerman et al., 2007). Breast feeding is highly beneficial for motor development and  
268 may influence infant activity (Worobey, 1998). Children from lower socioeconomic groups  
269 are more likely to be more developmentally delayed (Bradley and Corwyn, 2002) and the  
270 childcare setting can also influence age of achievement of milestones (Mulligan et al., 1998).

271

272 One study found no genetic influence on sitting without support, but did show  
273 significant genetic influence on crawling and first steps (>90%). However, the small sample  
274 size meant that confidence intervals included zero, so it is difficult to draw conclusions  
275 (Goetghebuer et al., 2003). In their sample of twins and siblings, Peter et al. (1999) found that  
276 the shared environment explained more than 50% of the variance in sitting unsupported and  
277 walking. Our results support these estimates for sitting, but we found that genetic factors  
278 explained most of the variance in first walking unaided. Different measures could contribute  
279 to the differences, Peter et al. asked when infants could walk at least five steps unsupported,  
280 whereas we asked about first walking unaided, but more likely it is a sample size effect.

281

282           In support of our findings of genetic influences, motor development and skill level are  
283 likely to be influenced by factors such as muscle-fibre type and mitochondrial activity,  
284 which, although trainable, are partly genetically determined (Mulligan et al., 1998). There have  
285 been few studies of specific genes that influence motor activity level, although the dopamine  
286 system is implicated in motor activity. For example, infants with the long allele of the  
287 dopamine receptor DRD4 showed higher motor activity (Auerbach et al., 2001).

288

289           Our study is the largest to date to examine genetic and environmental influences on  
290 infant motor development, and has the statistical power to generate good estimates of both  
291 environmental and genetic parameters. The large sample size meant that we were reliant on  
292 parental reports rather than objective measures, but the error term was not strikingly high and  
293 there was little evidence in our data of contrast bias (parents overestimating differences  
294 between DZ twins and underestimating MZ differences; Saudino et al., 2000). While our  
295 genetic estimates for infant activity level are similar to previous studies, finding a strong  
296 shared (as opposed to unique) environment effect is novel (Goldsmith & Campos, 1999;  
297 Saudino & Eaton, 1991; Saudino, 2005). It is possible that use of parental retrospective recall  
298 of infant activity inflated the shared environment estimate. However, it is also possible that  
299 the environment has changed since these earlier studies and that parental and societal patterns  
300 are exerting stronger effects. Twins attain their developmental milestones slightly later than  
301 singletons, although a study comparing 2151 twin pairs and 2151 singletons found no  
302 significant differences in age of reaching five developmental milestones (turn, sit, crawl,  
303 stand and walk) within the normal range (Brouwer et al., 2006). There is no reason to suppose  
304 that the magnitude of genetic and environmental influences would differ between twins and  
305 singletons. In our sample a proportion of infants had not begun walking by the time the 15

306 month questionnaire was returned therefore, our results may not be fully generalizable to late  
307 developing infants.

308

309

### **Conclusions**

310 Genes are significant determinants of early life motor activity and developmental  
311 motor milestones, but the environment also plays an important role. These results support the  
312 need for research to identify the specific genes and specific environmental factors that  
313 influence motor development.

314

315

### **What Does this Study Add?**

316 Variability in the timing of infant developmental milestones is poorly understood.  
317 This paper estimates genetic and environmental influences on motor development and infant  
318 movement activity level. The shared family environment appears to influence infants motor  
319 activity levels. The timing of independent first steps may have a stronger genetic influence.

320

### **Conflicts of Interest**

322 The authors declare no conflicts of interest.

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