



THE POKI YOKI PARENT LIBRARY · NO. 1

Sip by Sip

How your child learns to drink
— and how to help at every
stage



NEWBORN → BOTTLE → STRAW → OPEN CUP → BIG KID · AGES 0–6

Engineered to survive toddlers, designed for parents.

The experts behind this guide

Every milestone, age range and technique in Sip by Sip is synthesized from published pediatric guidance and fact-checked against it — then written in plain English. It's educational information, not medical advice.

 **AAP** ↗

 **ASHA** ↗

 **ADA** ↗

 **CHOP** ↗

 **Cleveland Clinic** ↗

Each badge and citation links to the source. Cited as sources — Poki Yoki is not affiliated with or endorsed by these organizations.

Professional bodies

- American Academy of Pediatrics — [Discontinuing the Bottle; Bottle Feeding; Choose Water for Healthy Hydration](#)
- ASHA — [Feeding & Swallowing Milestones, Birth-1yr; 12-18 months; Pediatric Feeding & Swallowing](#)
- American Dental Association — [Tooth Decay & Baby Bottles](#)

Pediatric SLP, OT & feeding-therapy sources

- Speech Sisters — [Bottle-to-Cup Transition](#)
- Solid Starts — [Cup Drinking; Weaning](#)
- ARK Therapeutic — [How to Teach Straw Drinking; Goodbye Sippy Cups](#)
- Feeding Littles — [Ultimate Guide to Cup Drinking](#)
- OWLS Therapy — [Skip the Sippy: An SLP's Guide](#)
- ASHA Leader — [Sippy Cups & SLPs](#)
- ezipz — [Straw-Drinking Milestone](#)
- Your Kid's Table — [Teach Straw Drinking](#)
- ABC Pediatric Therapy — [Cup Drinking for Infants & Toddlers](#)
- North Shore Pediatric Therapy — [Red Flags for Feeding/Swallowing](#)
- Cleveland Clinic — [Goodbye to Bottles & Sippy Cups](#)
- CHOP — [How to Keep Kids Hydrated](#)

ON THE SCIENCE WE HEDGED

Where this guide says open cups and straws are "favored by SLPs" or "support" oral-motor development — rather than claiming any cup "prevents" speech or dental problems — that wording is deliberate. ASHA notes there is no strong scientific proof of direct cause-and-effect from sippy cups; the guidance rests on oral-motor mechanics and clinical experience, with real-world risk tied to prolonged, heavy use. We'd rather give you the honest version.



Every sip is a milestone in disguise

Drinking looks automatic. It isn't. Getting liquid from a cup into a tiny body — without choking, without wearing it — is one of the most complex motor skills your child will master in their first six years. And the rules change *every single time* you hand them a different cup.

Breast and bottle teach a **rhythm**. A straw teaches **suction**. An open cup teaches **control**. Each one is a stepping stone that builds the skill the next one needs. When parents understand that hidden staircase, two things happen: the "why won't you just drink it?!" frustration melts away, and you can actually *help* — at the right time, with the right cup, using the same small tricks pediatric feeding therapists use every day.

That's what this guide is. We pulled together guidance from the American Academy of Pediatrics (AAP), the American Speech-Language-Hearing Association (ASHA), and practicing pediatric speech-language pathologists (SLPs) and occupational therapists (OTs), and turned it into a plain-English, stage-by-stage roadmap you can actually follow.

HOW TO USE THIS BOOK

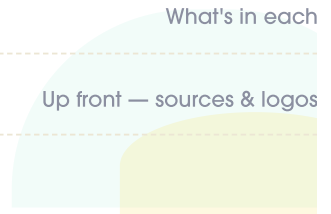
- **Jump to your child's age** using the contents on the next page. Each stage is self-contained.
- **Read the one stage ahead**, too — that's where you'll find the "graduation" strategy for the gate you're about to hit.
- **Look for the colored boxes:** **Why it matters**, **Try this**, **Watch out**, and **The Poki Yoki way**.

A PROMISE ABOUT HONESTY

Ages in this book are **typical ranges, not deadlines** — every child is on their own clock. Where the experts genuinely disagree, we say so instead of pretending there's one right answer. And this is **general education, not medical advice**. For anything about feeding safety, choking, swallowing, or speech, your pediatrician or a feeding-trained SLP/OT is the right call. See the red-flags page near the back.

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The Science of the Sip

Five skills your child has to build — in order — to go from newborn to big-kid cup. Understanding them is the difference between fighting the process and coaching it.

1. The first miracle: suck-swallow-breathe

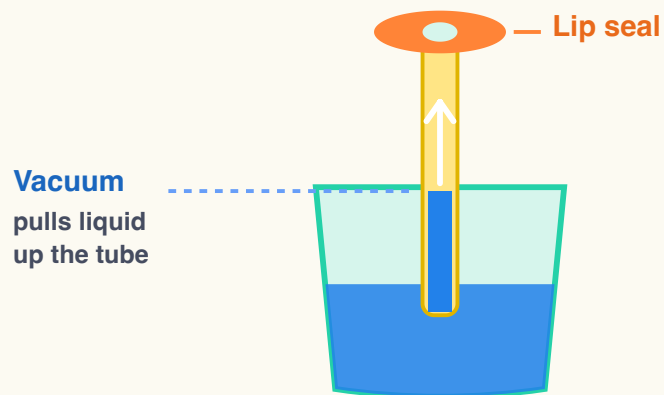
A newborn's first feeding job is a safety problem disguised as a feeding one. The airway and the food path share the same throat, so a baby has to time every swallow into a quiet beat of their breathing — or milk heads toward the lungs. Mature feeding settles into a roughly **1:1:1 suck-swallow-breathe rhythm**, with the swallow tucked into the pause between breaths. This coordination typically comes online around **34 weeks of gestation**, which is why very premature babies often can't feed by mouth at first.

WHY IT MATTERS

The very first thing your baby learns is to *not* breathe and swallow at the same instant. Every later drinking skill is built on top of this one safety rhythm.

2. The fluid-dynamics leap: suction up a straw

A straw is a genuinely new physics problem. To pull liquid *up* a tube against gravity, your child has to (1) form a tight **lip seal** around the straw, (2) generate sustained **negative pressure** — a vacuum — inside a closed mouth, and (3) chain that back into the old suck-swallow-breathe sequence. The catch: a beginner's instinct is often to *blow*, not suck, and the first successful pull usually delivers way more liquid than they expected (cue the cough).



A sealed mouth + a steady vacuum = liquid climbing against gravity. That's the new skill a straw teaches.

WHY IT MATTERS

A straw is the first time your child creates a vacuum *on purpose* with a sealed mouth. The same lip closure, cheek tension, and tongue control are the building blocks of clear speech sounds — which is why so many SLPs love straws.

3. Tongue posture: why the cup you choose changes the mouth

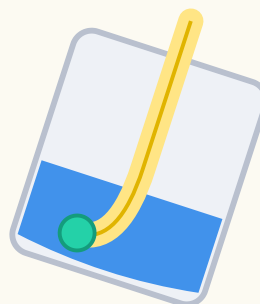
Different vessels park the tongue in different places. Therapists distinguish an **immature swallow** (a front-to-back tongue motion, normal in infancy) from a **mature swallow** (the tongue tip lifts to the ridge behind the upper front teeth). Open cups and straws let that tongue tip rise naturally. A **rigid spout**, by contrast, sits on top of the tongue and can keep it resting low and forward — closer to the infant pattern.

4. The gravity problem: chasing the last sip

With an **open cup**, drinking is a tilt problem: as the liquid drops, your child has to tip the cup *and* their head further and further to chase it — while still controlling the flow. That last mouthful is genuinely hard. With a **straw**, the same problem shows up as keeping the straw tip down in a shrinking puddle. A **weighted straw** solves it mechanically: a dense tip (the opposite of a bobber) follows the liquid wherever it pools, so the child gets the last sip without tipping their head back at all.



✗ Normal straw — sucks air



✓ Weighted — gets last sip

Tip the cup and a normal straw sucks air. A weighted tip swings to wherever the liquid pools — so a child gets every drop without tipping their head back.

WHY IT MATTERS

A child can master *suction* long before they master *head-tilt-plus-flow-control*. A weighted straw lets them succeed at one new skill at a time instead of two at once — which is exactly how good coaching works.

5. Open-cup control: jaw stability & graded movement

Therapists rate the open cup as the **highest-skill** vessel — it asks the lips, tongue, cheeks, *and* jaw to cooperate. Two ideas to know: **jaw stability** (a steady jaw base, so the lips and tongue can work independently — early on, kids "borrow" stability by biting the rim) and **graded jaw movement** (opening and closing in small controlled increments, which is what lets a child take a measured sip instead of guzzling).

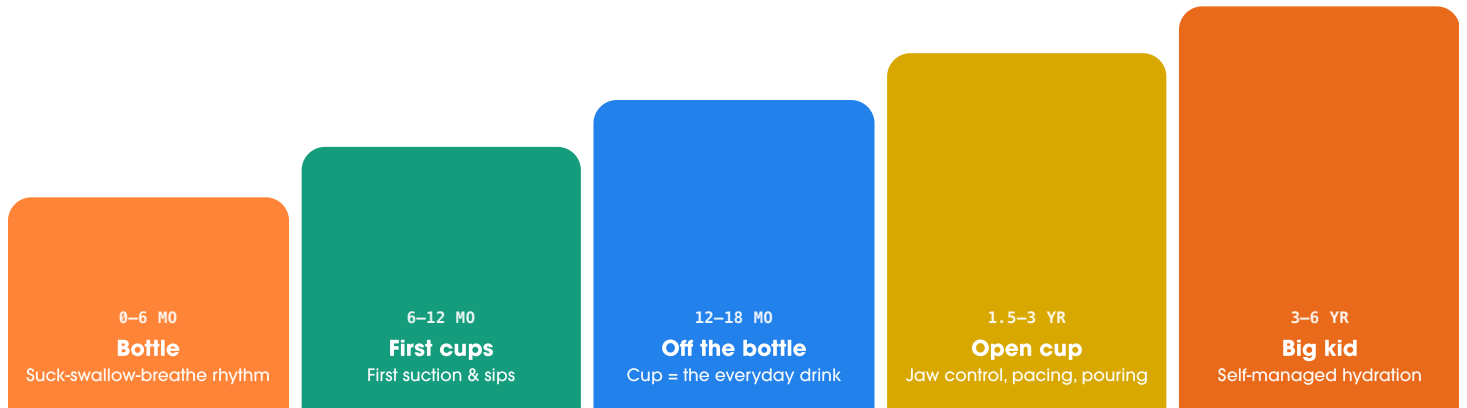
Spilling isn't failure. It's the visible edge of a child learning to grade jaw and tongue movement. The mess is the practice.

AN HONEST NOTE ON THE "SIPPY → SPEECH" CLAIM

You'll hear that spout cups *cause* speech delays or crooked teeth. The truth is softer: ASHA itself notes there's **no strong scientific proof** of cause-and-effect. The concern is based on the *mechanics* above plus clinical experience, and the real-world risk is tied to **prolonged, heavy** spout use — not the occasional cup. So throughout this book we say open cups and straws **support** mature oral-motor patterns and are **avored by SLPs** — not that anything "prevents" a speech problem.

The Whole Journey at a Glance

The official anchors from the AAP and ASHA, on one page. Pin it to the fridge.



The drinking ladder — each step builds the skill the next one needs.

AGE	THE NEW SKILL	REACH FOR	EASE OFF
0-6 mo	Suck-swallow-breathe rhythm	Breast / slow-flow paced bottle	—
~6 mo solids start, sits up	First sips; lip closure begins	Open cup (assisted) + straw cup	Hard-spout sippy
6-12 mo	Purposeful suction; mature swallow begins	Straw cup (often weighted) + open-cup practice	360 / spoutless cups
12-18 mo	Cup becomes the everyday drink; wean bottle	Straw + open cup	Bottle (gone by ~18 mo)
1.5-2 yr	Straw mastery; open cup with help	Open cup (small fills) + weighted/angled straw	Sippy / spout cups
2-3 yr	Independent open cup; self-serve	Open cup as default + straw bottle on the go	—
3-4 yr	Confident open cup; pouring	Open cups + straw water bottle	—
4-6 yr	School-ready, self-managed hydration	Leak-proof straw bottle they can open themselves	—

🚩 THE THREE OFFICIAL ANCHORS

- **AAP:** offer a cup when solids start (~6 mo); be **off the bottle by 12-18 months**; "healthiest to drink from an open cup by about age 2." Skip *valved* sippy cups (they make a child suck "just like a bottle").
- **ASHA milestones:** early, messy cup/straw attempts at 6-9 months; spill-free straw drinking and open cup "with some spilling" by 12-18 months.
- **The throughline:** bottle → straw → open cup, each building the next skill.

Breast

Slow-flow bottle

What's happening

Your newborn feeds by reflex, not by choice. A touch on the cheek triggers **rooting**; the suck-swallow-breathe rhythm does the rest. Babies self-regulate by sucking, pausing, and breathing — and a flow that's too fast blows up that rhythm.

What to use

Start with the **slowest / newborn-flow nipple** and only move up if your baby is clearly working too hard or frustrated. (Many breastfed babies stay on slow-flow the whole bottle journey to protect the latch.) Hold baby **semi-upright**, never feeding flat on their back.

How to do it well — paced bottle feeding

Hold the bottle close to **horizontal** so the nipple is only partly full, and let your baby suck-and-pause naturally with frequent breaks to breathe and burp. This makes them work a little for the milk, the way they would at the breast, and helps prevent overfeeding.

💡 TRY THIS

Think **responsive**, not robotic: follow your baby's hunger and fullness cues (releasing the nipple, turning away, slowing down) rather than the clock or the ounce line. Don't pace so hard that intake suffers.

⚠️ WATCH OUT

- **Flow too fast:** coughing, gulping, milk dribbling from the mouth, or stress signs → drop to a slower nipple and pace more.
- **Bottle/breast preference** is usually about *flow*, not nipple shape — bottles flow easily with gravity. Slow-flow + pacing keeps both feeling similar.
- **Overfeeding:** bottle-fed babies may suck past full. The AAP flags more than ~7–8 oz per feed or ~36 oz/day as worth mentioning to your pediatrician.

**Paced bottle-feeding check**

The habits that keep feeds calm and safe.

- Using the slowest / newborn-flow nipple
- Baby held semi-upright (never feeding flat)
- Bottle near-horizontal, with pauses to breathe & burp
- Following hunger & fullness cues, not the clock

THE POKI YOKI WAY

This is the one stage the cup drawer sits quiet — but it's where the journey starts. Stage 2 is just weeks away, and the cup you pick then sets up everything after. Read ahead.

Open cup (assisted)

Straw cup

Weighted straw

Hard-spout sippy

What's happening

Right as solids begin around **6 months**, your baby is ready to start *practicing* cups. This is the single highest-leverage window in the whole journey: SLPs recommend introducing **both an open cup and a straw cup** now. Independent, spill-free drinking isn't expected yet — this is batting practice.

The SLP "two-cup" move

- **Open cup:** a tiny open or "side-sipping" cup, parent-held, offered a few times a day at meals — start with 1–2 oz.
- **Straw cup:** begin with a squeezable honey-bear-style cup (6–9 mo), then a standard straw cup they suck on their own (~8–12 mo).

On contents: many SLPs suggest breast milk/formula in the open cup early and introducing **water around 9 months** in small amounts; breast milk/formula stays the primary drink in year one. Check exact amounts with your pediatrician.

How to teach the very first straw sips

The squeeze method (easiest first win): use a squeezable straw cup or honey-bear cup; when your baby's lips are on the straw, give a gentle squeeze so a little liquid travels up into their mouth. Squeeze less and less over days until they pull it up themselves. Many babies get it in a single day. (*Full step-by-steps in the Playbook, Part Twelve.*)

🧠 WHY START SO EARLY

Open-cup and straw practice trains the tongue toward a mature swallow, helps with teething, and avoids the all-day sucking that pools sugars on new teeth. Starting the *habit* at 6 months makes the later "off the bottle" deadline a non-event.

📝 Readiness check: ready for a cup?

Tap each one that's true today.

- Sits up with support and has steady head control

- Shows interest — watches and reaches for your drink

- Has started (or is starting) solids

- Can move food/liquid back and swallow (less pushing out)

⚠️ WATCH OUT

Some spilling and dribbling is **normal practice**, not failure. But if your baby **coughs constantly** at the cup/straw after a month or two of practice, or is **older than ~15 months and still not drinking from any cup**, check in with your pediatrician or an SLP.

THE POKI YOKI WAY

This is where a **system** earns its keep. One Poki Yoki base takes a **weighted "any-angle" straw** for these first independent sips (so they get liquid even when the cup tips), and the very same lid swaps to an **angled "last-sip" straw** and later a simpler top as their skill grows. You're not buying a new cup every few months — you're swapping a \$5 straw on the cup you already own. *Replace the part, not the cup.*

Straw cup

Open cup

Bottle

What's happening

The cup graduates from practice toy to **everyday drink**. The AAP's guidance: begin weaning the bottle around 12 months and be **fully off it by ~18 months** — aiming for an open cup by about age 2. (Reasonable targets vary a bit by source: 12–18 months AAP, 12–15 months pediatric dentistry. The defensible rule of thumb: **off by ~18 months, ideally 12–15.**)

Why weaning matters

- **Teeth:** prolonged bottles — especially milk or juice at nap/bedtime — bathe teeth in sugars and drive "baby-bottle tooth decay," worst at night when saliva drops.
- **Oral development:** continuing the infant suckle pattern can reinforce a habitual tongue-thrust that affects articulation.
- **Nutrition:** bottles become high-calorie snacks that crowd out solid food and can drive excess weight gain.

How to wean — gradually, one bottle at a time

Two reputable sources, two slightly different orders — pick what fits your child. The common thread: **go gradually and replace, don't just remove.**

AAP APPROACH

Keep mealtime bottles first; drop the others — **nap & bedtime first.**

SPEECH SISTERS (SLP) APPROACH

Drop the **daytime** bottle first, then morning, and eliminate the **nighttime** bottle last.

💡 TRY THIS — THE "SWITCHEROO"

Put only **plain water in the old bottle** and serve the good stuff (milk, their favorite drink) **only in the cup**. The bottle quietly loses its appeal. And **replace the comfort, not just the bottle** — a snuggle, a song, or a story fills the gap that the bedtime bottle used to. Weaning typically takes 1–6 months.

Your bottle-weaning plan

Drop one bottle at a time — tick each off as you go. Saves automatically.

- Cup is familiar — offered alongside bottles

- Dropped the daytime bottle

- Dropped the mid-morning bottle

- Water-only in any remaining bottle

- Dropped the bedtime bottle (last one!)

- Fully off the bottle 🎉

What's working for us

Jot what helped, what didn't, questions for the pediatrician...

WATCH OUT

Never put your child to bed with a bottle of milk or juice (decay risk). Still leaning heavily on a bottle past 18 months, or not drinking from any cup by ~15 months, is worth raising with your pediatrician.

THE POKI YOKI WAY

The hand-off is easier when the new cup is genuinely better than the bottle — spill-proof enough to trust on the couch, light enough for little hands, and theirs. A modular cup that **grows with them** means the cup that replaces the bottle is the same cup they'll carry to kindergarten — just with a different straw on top.

Straw cup

Open cup (supervised)

Weighted / angled straw

Sippy / spout

What's happening

Sips get bigger and swallows get smoother — less choking, less spilling. The bottle is gone. Now the work is twofold: **polish the straw** and **start real open-cup practice** with supervision. SLPs suggest balancing both rather than living on one.

The "last sip" problem — and the fix

A plain straw only reaches the liquid directly under it; tip the cup and it sucks air, and a toddler doesn't yet have the head-tilt control to chase it. A **weighted straw** (the tip follows the liquid) or an **angled straw** (aims into the mouth) lets them get every drop with good head and neck posture — and skips the "it's empty but it's not" meltdown.

How to graduate toward the open cup

- **Model it big.** Sit face-to-face and take exaggerated sips — toddlers imitate.
- **Small cup, small fill.** A shot-glass amount of water means a spill is a teaspoon, not a flood.
- **Change one thing at a time.** Put their *usual* drink in the new cup so the only new variable is the vessel.
- **Practice where mess is free** — the bath, outside, the high-chair tray.

⚠ WATCH OUT — LOSING THE SIPPY

This is the stage to phase out hard-spout cups. If you use one as a short bridge, choose a **valve-free** design (no forced sucking). And the red flags worth a call at *any* age: frequent coughing/gagging on liquids, a **wet or gurgly voice** during/after drinking, or liquid coming out the nose.

Ready for the open cup?

Tap what's true today.

- Drinks from a straw without much spilling

- Fully off the bottle

- Sits at the table and copies your sips

- Takes a small open-cup sip with help

THE POKI YOKI WAY

The "last sip" problem is exactly what an **angled straw** and a **weighted "any-angle" straw** were built for — and on a modular system they snap onto the cup you already use, so you can match the straw to the week's skill instead of buying a whole new cup. The valve-less "Free Flow" option means there's no hidden valve to fight (or to grow mold in).

Open cup (everyday)

Straw bottle (on the go)

What's happening

By 2–3, most children can drink from a regular **open cup without major spills**, and many use open cups as their default by about 36 months. New bonus skill: **beginning to pour** from a small pitcher.

How to graduate — the self-serve station

- Set up a **low water station**: a small pitcher and a child-height cup so they can pour and drink on their own (Montessori-style pouring starts ~2.5 yr).
- Use a tray with a raised edge and **fill the pitcher only $\frac{1}{4}$ – $\frac{1}{3}$** so a spill is a teaspoon.
- Let them practice with **fuller cups in low-stakes spots** — at the sink, in the bath — before fuller cups at dinner.

⚠ WATCH OUT

- **Overfilling** turns practice into a flood — keep fills small.
- **Throwing or dumping** is usually attention-seeking or "I'm done." Skip the big reaction; calmly take the cup and re-offer later. Keep drinking seated.
- If a child this age **still can't manage any open-cup sips**, still needs a bottle, or routinely coughs on thin liquids, mention it to your pediatrician.

 Independence tracker

The self-serve skills of the 2–3 year stretch.

- Open cup without major spills
- Pours from a small pitcher
- Serves themselves at a low water station
- Drinks seated, mostly mess-free

 THE POKI YOKI WAY

Independence is the goal — and a cup a toddler can carry, drink from at any angle, and not flood the couch with builds confidence faster. Keep an open cup in rotation at the table and a spill-proof straw cup for the car and the park; on a modular system that's *one* cup, two configurations.

Open cup (table)

Straw water bottle

What's happening

Everyday open-cup drinking with much less spilling, and **pouring skills sharpen**. That grasp-tilt-rotate of a pitcher is quietly building the hand and wrist strength and hand-eye coordination your child will later use for writing and cutting.

How to graduate

- **Build a hydration routine:** offer water at predictable anchor points — snack, after play, after a nap.
- **Scaffold pouring:** pitcher-to-pitcher → pitcher-to-one-glass → pitcher-to-several.
- Make water the easy default and keep an accessible bottle around.

HOW MUCH TO DRINK (GENERAL TARGETS)

Toddlers **1–3 years: about 4 cups of fluids a day** (water + milk combined); rising with heat and activity. These are ballpark figures from the AAP — adjust for your child.

WATCH OUT

Limit sugary drinks (teeth and habits). Persistent coughing on thin liquids, or refusing to drink enough to stay hydrated, is worth a professional's eyes.

THE POKI YOKI WAY

A **straw water bottle** for the car and the playground, open cups at home — the same modular cup carries both jobs as your child's skills mature, so the gear keeps up instead of piling up in the drawer.

Open cup (mastered)

Leak-proof bottle

What's happening

Reliable open-cup and water-bottle mastery. Fine-motor skills are mature enough to **open, close, and refill a leak-proof bottle independently** and to self-manage hydration across a long, busy day.

How to graduate

- Pick a bottle your child can **operate solo** — pre-loosen nothing; let them own it.
- **Tie sips to the routine:** after gym, at snack, before they say they're thirsty.
- For active play and sports, **prompt water during breaks** — for everyday activity, water is all most kids need.

HOW MUCH TO DRINK (GENERAL TARGETS)

Ages 4–8: about 5 cups of fluids a day, more with heat and exercise. For active kids, sip water during breaks rather than waiting for thirst.

THE POKI YOKI WAY

"Big kid" doesn't have to mean "brand-new bottle." The same cup system your child started on at 6 months now wears a grown-up straw lid and goes to preschool — one cup, a whole childhood. *The last cup you'll ever buy.*

Leak-proof straw bottle

Open cups

What's happening

Full independence: your child manages their own hydration through a school day, opens and refills their own bottle, and drinks neatly from open cups at home and in the lunchroom.

School & lunchbox readiness

- Choose a **durable, leak-proof, refillable** bottle (insulated is a nice bonus for cold water).
- Make sure they can **open it, close it, and refill it** themselves — and know **where and when** they can refill at school.
- Pack **water-rich fruits and veggies**; they count toward hydration too.

💧 HOW MUCH TO DRINK (GENERAL TARGETS)

Older children: roughly 7–8 cups a day, adjusting for heat and activity. Watch for dehydration signs on hot/active days — dark urine, low energy, headache — and offer water more often.

📝 School-bottle readiness

Before the first day, can they...

- Open and close the bottle themselves

- Refill it at the fountain or sink

- Drink neatly from an open cup at lunch

- Know when & where to refill at school

🍷 THE POKI YOKI WAY

The endgame of a modular system: a leak-proof bottle a five-year-old can run themselves, built from the same parts they've grown up with — and when the straw finally wears out, you replace the straw, not the bottle. No drawer full of cups that never quite worked.

The Cup Cabinet

Every vessel parents reach for, what it's good at, what to watch — and the modern feeding-therapy consensus on the "best" path.

VESSEL	BEST FOR	THE CATCH
Bottle 0–6 mo+	The infant suckle; measurable intake	Match flow to cues; wean by ~18 mo. Too-fast flow → gulping/coughing.
Open cup (incl. tiny trainers) ~6 mo with help	Gold standard for oral-motor development; no parts to grow mold	Messy; needs adult support early; not for on-the-go.
Straw cup (top straws) ~6–9 mo+	Builds lip/cheek/tongue control; travels well; SLP favorite	Straws trap mold if not cleaned; don't force it too early.
Weighted / angled straw ~8–12 mo+	Solves the "last sip"; drink at any angle; great posture; OT-recommended for special needs	One more piece to clean well.
Hard-spout "sippy" minimize	Spill control as a <i>short</i> bridge	Preserves the infant suckle pattern; SLPs say skip it or phase out by ~3.
Soft-spout transition cup	A gentler bottle-to-cup bridge	Still a spout (milder version of the concern).
360 / spoutless trainer	Genuinely spill-proof; drink from any rim point	Hidden-rim mold behind the valve; some therapists no longer recommend (jaw/tongue posture).
Insulated steel bottle ~16 mo+ / school	Durable, keeps water cold, independence	Heavy when full; straw/spout parts still need cleaning.

Valve vs. valve-less: the spill-proof trade-off

A **valve** is a one-way silicone gate that stays sealed until your child sucks. It keeps the bag dry — but it (a) forces strong suction, reinforcing the very pattern SLPs want to move away from, and (b) is a **classic mold trap**. **Valve-less** designs draw more naturally and clean far easier, but can leak if knocked over. The pro move: whatever you choose, **buy the one that comes fully apart for cleaning.**



"Spill-proof" you can actually see: a valve-less Poki Yoki cup tipped on its side, holding water in.

✓ THE MODERN EXPERT CONSENSUS

1. **Teach open cup AND straw early** — around 6 months, with help. These two build the mature swallow.
2. **Minimize hard-spout sippy time** — skip it if you can; if not, treat it as a short bridge and phase out by 18–24 months.
3. **Choose for cleanability** — anything with a valve or straw must disassemble completely.
4. **Graduate to an insulated straw bottle** for the school years.

🗣️ A NOTE FOR SENSORY & SPECIAL-NEEDS FAMILIES

Weighted and angled "any-angle" straws aren't only a toddler training tool — pediatric occupational therapists use them as **adaptive drinking aids**. The added weight gives proprioceptive/sensory input and better motor control, and an any-angle straw lets a child with limited mobility or oral-motor differences drink without precise positioning. If your child has feeding, sensory, or motor challenges, an OT or SLP can help you choose the right straw and technique — and many of these tools are the same ones in this guide.

🍷 WHERE POKI YOKI FITS

This is the white space the whole system was designed around: **spill-proof with a valve-less option** (no hidden valve to trap milk or grow mold), **parts that fully come apart** to clean, and **interchangeable straws** — weighted, angled, and standard — so one cup walks your child down the exact path on these pages. Modular, dishwasher-safe, and backed by a lifetime warranty: *replace the part, not the cup.*

Your Poki Yoki, Stage by Stage

The whole point of a modular system: the cup stays the same, and you change the straw to match the skill your child is building. Here's the cheat sheet.



Weighted "any-angle"

Follows the liquid at any tilt

first sips & travel



Angled "last-sip"

Reaches the final drops, no head-tilt

the toddler years



Straight & swirl

Everyday, confident sipping

big kid

STAGE	WHAT THEY'RE LEARNING	SNAP ON...
6-12 mo first cups	First purposeful suction; getting liquid even when the cup tips	Weighted "any-angle" straw
12-18 mo off the bottle	The cup becomes the everyday drink; chasing the last sip	Weighted straw Angled "last-sip" straw
1.5-3 yr straw + open cup	Refining the straw; starting open-cup practice	Angled straw Standard top straw
3-6 yr big kid	Confident, independent, on-the-go hydration	Standard top straw Open / big-kid lid

● Weighted — follows the liquid at any angle ● Angled — reaches the last sip ● Standard — everyday top straw

● Open / big-kid lid

🍷 ONE CUP, THE WHOLE STAIRCASE

Every other cup in the drawer was outgrown in a season. With Poki Yoki, the base and lid stay; you swap a **\$5 straw** as your child levels up — weighted → angled → standard → big-kid lid. That's the "grows with your child" promise, made literal. *Select it. Snap it. Sip it.*

The How-To Playbook

The exact techniques pediatric feeding therapists use — including two "expert secret" tricks most parents have never heard of.

Gate 1 · Teach straw drinking

A good starting sweet spot is around **9 months** (earlier with the assisted methods below, if your baby is eating purees). Two proven methods:

Method A — The squeeze / honey-bear method

1. Use a **squeezable straw cup** (or the classic Honey Bear cup) with a preferred liquid.
2. Place the straw on your baby's lips and **gently squeeze** so a little liquid travels up into their mouth.
3. This teaches "liquid comes from this thing" and prompts lip closure — no suction required yet.
4. **Squeeze less and less** over days, letting them do more of the work until they pull it up alone.

Method B — The pipette / finger-transfer method (the step most parents skip)

1. Dip a straw into the liquid and **cap the top with your fingertip** to trap a small column inside — like a science pipette.
2. Lift it out (finger still on top) and set the straw between your baby's lips.
3. **Release your finger** so the liquid flows in — an instant reward that teaches lip closure.
4. After a few reps, wait for them to **close their lips first**, then release.
5. Gradually tip the straw upright so they have to **suck a little more each time**.

💡 PRO TWEAKS

- **Cut a straw in half** — shorter needs less suction.
- Start with **thicker liquids** (smoothie/yogurt drink) → thinner → water. Thick moves slowly and is easier to manage.
- Use a straw stopper so they can't bite down too far.

Teach-the-straw tracker

Tick the techniques you've tried — it's normal to need a few before it clicks.

- Squeeze / honey-bear method

- Pipette / finger-transfer method

- Cut the straw shorter

- Started with a thicker liquid

- 🎉 They pulled liquid up on their own!

Gate 2 · Teach open-cup drinking

1. **Pick a tiny cup** — shot-glass size with a soft, flexible rim (spills slower, gentle on gums).
2. **Start thick, start small** — 1-2 oz of a thicker liquid gives time to organize a swallow.
3. **Hold to the lower lip** (keep it touching, don't pull away between sips), tip up a little, then back down.
4. **Hand-over-hand:** guide the tipping motion; one small sip, then lower and pause to swallow.
5. **Thin the liquid** toward water and increase volume as control improves.
6. **Practice where mess is free** — high-chair, bath, outdoors.

Gate 3 · Wean the bottle & the sippy

1. Around 6 months, let baby **play with and sip from a cup** so it's familiar before you need it.
2. **Drop one bottle at a time** — easiest first; save the comfort-heavy bedtime bottle for last.
3. **Water-only in the old bottle/sippy**, the good stuff only in the cup.
4. **Replace the comfort** (snuggle, song, story), not just the bottle.
5. Offer **straw + open cups** as the replacements — and **be consistent across all caregivers**.

Troubleshooting & Tips

When it goes sideways — and the small things that quietly work.

THE PROBLEM	WHAT TO TRY
Bites the straw	Often teething or seeking jaw stability. Offer a chew toy first; use a straw stopper; check they have good seated/trunk support (instability triggers biting).
Can't create suction	Prime the straw (squeeze or pipette method) for a reward without full suction; use a half-length straw; progress slowly.
Refuses the cup entirely	Lower the pressure: let them "feed" a doll first; use a clear cup so they see inside; offer a preferred drink; keep modeling.
Throws / dumps it	Usually attention or "all done." Skip the big reaction; calmly remove and re-offer later. Practice over a tray.
Gulps too fast / chokes	Smaller cup, smaller volume, thicker liquid, pause between sips. If it persists, get it evaluated.
Only one specific cup	Normal preference. Introduce a similar new cup beside the favorite, let them choose, rotate slowly.
Gets frustrated	Keep sessions short and playful; exaggerate your own slurp; end on a success; never force.

💡 TIPS & TRICKS THAT ACTUALLY WORK

- **Model it big** — get face-to-face and take exaggerated, slurpy sips. Babies learn by watching.
- **Make it routine** — small sips of water in a cup at every meal. Repetition beats intensity.
- **Give choices & color** — let them pick the cup; fun designs increase buy-in.
- **Use a preferred drink** as the motivator when water won't sell it, then dial back to water.
- **Praise small wins** and keep it light — silly slurp noises, little games.
- **Consistency across caregivers** is the quiet superpower.

Watch-Outs & Red Flags

The #1 hidden hazard: mold in straws & valves

Straws and one-way valves trap moisture and can grow mold within **days** — often where you can't see it. To clean safely:

- **Disassemble every part.** Soak in hot soapy water ~10 minutes.
- Scrub straws with a **thin wire brush**; pinch valves open and scrub inside. (If you can't see light through it, it's not clean.)
- **Dry fully** and store open / upside-down. Use the dishwasher's heat cycle or boil to sanitize.

WHY "FULLY COMES APART" MATTERS

The whole reason feeding experts harp on cleanability is this: the cups that grow mold are the ones that *don't* disassemble. A valve-less option and parts that fully separate aren't a luxury — they're the hygiene feature.

Other things to keep an eye on

- **Prolonged bottle use** → tooth decay, crowded-out nutrition. Off by 12–18 months; never to bed with a bottle.
- **All-day "grazing"** on milk or juice bathes teeth in sugar. Offer milk/juice at sit-down times, water in between.
- **Auto-flow / no-suck cups** for brand-new drinkers can flow too fast — thicken and pace instead.
- **Heavy hard-spout use** is associated (debated) with tongue-thrust and bite changes — moderation is the consensus.

► CALL YOUR PEDIATRICIAN / ASK FOR A FEEDING (SLP) EVALUATION IF YOU SEE...

- **Coughing, gagging, or choking** during or after drinking — especially repeatedly
- A **wet, gurgly, hoarse, or breathy voice** after drinking; liquid coming out the nose
- Trouble **coordinating breathing with drinking**; arching, distress, or color change during feeds
- **Meals routinely over 30 minutes**, or consistently stressful mealtimes
- **Persistent refusal** of liquids/cups, or **no progress** with cup or straw despite consistent practice
- **Poor weight gain**, dehydration signs, or losing a drinking skill they used to have

Coughing/choking, persistent vomiting, or weight loss warrant **prompt** contact with your pediatrician. An SLP or OT can assess oral-motor skills and safe swallowing and build a plan.

The Milestone Checklist

A gentle gut-check, not a test. These are **typical** windows — plenty of happy, healthy kids land a little earlier or later. If a whole stage feels stuck, that's your cue to chat with your pediatrician.

≡ tear out & stick on the fridge

~6 MO Starting out

- Sits with support and shows interest at mealtimes
- Takes a first assisted sip from a small open cup
- Lets you introduce a straw (squeeze/honey-bear method)

~12 MO Finding the skills

- Pulls liquid up a straw on their own
- Takes open-cup sips with help (spills are fine)
- Bottle is being phased out at daytime feeds

~18 MO Off the bottle

- Fully off the bottle
- Drinks from a straw without much spilling
- Not relying on a hard-spout sippy as the main cup

~2-3 YR The independent cup

- Drinks from an open cup without major spills
- Beginning to pour from a small pitcher
- Mostly serves & drinks on their own

~4-6 YR Big kid

- Open-cup drinking is neat and reliable
- Opens, closes & refills their own water bottle
- Manages their own hydration through a school day

Missing a box isn't a problem — a whole stage with no progress despite consistent practice is worth a professional's eyes (see Part Fourteen).

Questions Parents Actually Ask

Is my child behind if they're not on a cup yet?

Probably not — ranges are wide. Early cup work (6–12 mo) is *practice*; the firmer marker is being off the bottle by ~18 months and managing an open cup by about age 2. No progress at all despite practice is the thing to flag.

Are sippy cups really that bad?

The honest answer: a spout cup now and then is fine. The concern is *prolonged, exclusive* hard-spout use, which can reinforce an infant-like suckle. ASHA notes there's no hard proof it causes speech problems — but open cups and straws are the better-supported choice, so make those the everyday cups.

When can my baby have water?

Small amounts of water can start around 6 months once solids begin (many SLPs say ~9 months for everyday water), with breast milk or formula staying the primary drink in year one. Confirm exact amounts with your pediatrician.

Straw first or open cup first?

Both — around 6 months, with help. They build different skills and reinforce each other. You don't have to choose.

How do I finally drop the bedtime bottle?

Go gradually and save bedtime for last. Put plain water in the bottle and the "good stuff" only in a cup, and replace the comfort with a snuggle, song, or story. Most families take 1–6 months.

How do I keep the straw from getting moldy?

Disassemble every part, scrub the straw with a thin wire brush and pinch valves open to clean inside, dry fully, and store open. Cups that come fully apart are far easier to keep clean — that's a real buying criterion.

A quick glossary

Suck-swallow-breathe

The coordinated, safety-critical rhythm a baby uses to feed without milk entering the airway.

Lip seal

Closing the lips tightly around a straw to create the vacuum that draws liquid up.

Oral-motor skills

The coordinated movements of lips, tongue, cheeks and jaw used for eating, drinking and speech.

Jaw stability / graded jaw movement

A steady jaw base, and the ability to open/close in small controlled increments — what lets a child sip instead of guzzle.

Mature vs. immature swallow

A mature swallow lifts the tongue tip to the ridge behind the upper teeth; the infant pattern moves the tongue front-to-back.

Weighted ("any-angle") straw

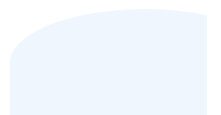
A straw with a dense, flexible tip that follows the liquid as the cup tilts, so a child gets the last sip at any angle.

Valve-less

A cup design without a one-way suction valve — easier to draw from and far easier to clean (no hidden mold trap).

SLP / OT

Speech-language pathologist / occupational therapist — the pros who assess feeding, swallowing and oral-motor skills.



The Anatomy of a Poki Yoki

We built this guide because we built the cup — after living every stage in it ourselves. Here's how the design maps onto the exact challenges in these pages. (No sales pitch; just the engineering.)



Every Poki Yoki comes fully apart: the scallop base, the magnetic lid with its removable inner seal, the valve, and the family of swappable straws.



The 12-magnet lock

Six magnets in the lid, three in each collar — overmolded into the plastic and sealed away from little hands. The polarity is engineered so the wrong parts simply won't connect.

Solves fiddly, leak-prone assembly — it goes together right every time, even when your toddler "helps."



The removable inner seal

Every part comes apart — including the seal. No valve crevice you can't reach, no trapped-moisture spots.

Solves the #1 cup complaint: hidden mold (Part Fourteen).



Interchangeable straws

Four top straws (bend, straight, training, swirl) and two bottom straws — angled "last-sip" and weighted "any-angle." Swap to match the skill.

Solves the gravity / last-sip problem and one cup across stages (Parts 1, 4 & 11).



Two valves in the box

A spill-proof valve for the toddler years, and a free-flow valve as they move toward open-cup sipping.

Solves "right at 18 months, annoying at 4" — both are included.



Spill-proof magnetic lid

The magnetic seal is engineered to stay shut even when the cup hits the floor — or flies across the room.

Solves spills on the couch, the car, the everywhere.



Replaceable parts

Straws, collars, valves and seals are all sold separately. Swap the worn part — keep the cup.

Solves outgrowing & tossing cups every season (better for your wallet and the planet).



Dishwasher-safe — every part

Not "most parts." Every component is top-rack dishwasher safe, and stores disassembled to dry fully.

Solves 10 p.m. hand-washing.



Molded measurement marks

Clear oz + mL markings molded right into the base.

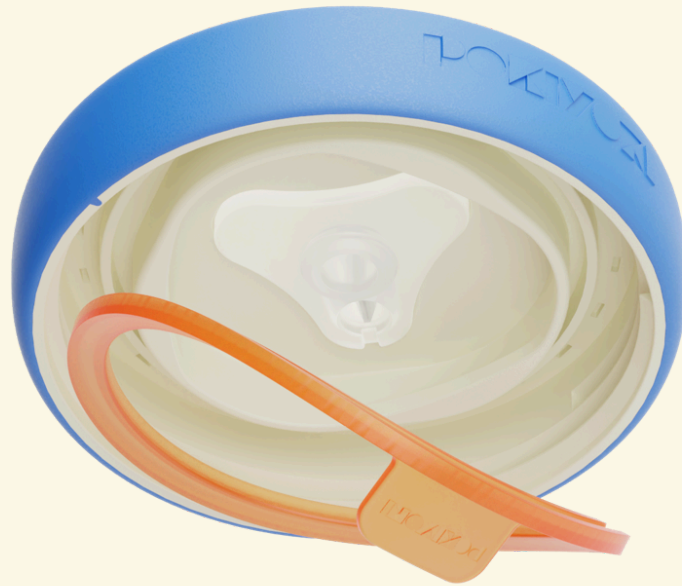
Solves guessing volumes — handy for paced bottle feeds and small open-cup fills.



Materials you can trust

Tritan plastic, food-grade silicone; BPA-, BPS-, PVC-, phthalate- and lead-free. All parts pass the small-parts choke-tube test.

Solves the "what's it made of?" worry.



The whole reason mold hides in other cups: a seal you can't remove. Poki Yoki's inner seal lifts right out — every surface washes and air-dries.

THE HONEST VERSION

We're a cup company — of course we think ours is the answer. But the design choices above weren't marketing; they were our own pain points as parents, engineered out one at a time. Use whatever cups work for your family. If you ever want one that does all of the above, you know where we are.

Built for Every Challenge in This Book

A single index: the hurdle you'll hit, the page it's on, and the design detail that takes it on.

THE CHALLENGE	THE POKI YOKI ANSWER
Hidden mold in straws & valves (Part 14)	A removable inner seal and parts that disassemble completely — nothing you can't reach and inspect.
The last sip / gravity (Parts 1 & 4)	Angled " last-sip " and weighted " any-angle " bottom straws that follow the liquid.
Getting off the bottle & spout (Parts 3-4)	A cup genuinely nicer than the bottle, plus a free-flow valve for the open-cup transition.
Spills, throws, the car (every stage)	A spill-proof magnetic lid engineered to stay shut even when thrown.
Outgrowing cups every season (Part 11)	A modular system — change the straw, keep the cup, from 6 months to big kid.
Fiddly assembly & frustration	12-magnet polarity means it can't go together wrong — kids reassemble it themselves.
10 p.m. hand-washing	Every part is top-rack dishwasher safe.
"Is it safe?"	Tritan + food-grade silicone; BPA/BPS/PVC/phthalate/lead-free; choke-tube tested.



One platform, every stage — and the same embossed lids your kid will recognize as "theirs" for years.

Choosing Your System

When you're ready, you pick the *size* — not a different cup. Every part is cross-compatible across all of them, and the whole system is covered by a **lifetime warranty**.



The signature scallop cup — angled straw, magnetic lid, oz/mL marks molded into the base.

Discovery Cup

\$29

Try-it / gift

- 1 single magnetic cup — the lowest-friction way into the system

Starter System

\$45

One child, fully set up ★

- 1 lid · 14oz scallop + 2x 12oz stacking cups
- 8 top straws · 2 angled + 1 weighted bottom straw
- 2 valves · 3 spare collars · storage bag

Family System

\$85

Multiple kids

- 3 lids · 2 scallop + 4 stacking cups
- 16 top · 4 angled + 2 weighted straws
- 5 valves · 9 collars · 2 storage bags

Household System

\$119

Max value + swirl straws

- Everything in Family, scaled up
- Adds the loop-and-swirl "crazy" straws



Every system arrives ready to go — cups, the full straw family, valves, spare collars and a storage bag. Pricing shown for reference; confirm current pricing and contents at pokiyoki.com.

POKIYOKI

ONE CUP FOR THE WHOLE JOURNEY

Meet the cup that grows with your child

Every stage in this book asks for a different straw — weighted for the first sips, angled for the last sip, simple for the big-kid years. Poki Yoki is a **modular, spill-proof cup system** where the straws, lids, and bases all interchange. One cup walks the entire path from 6 months to kindergarten. When a part wears out, you replace the *part* — not the cup.



Valve-less spill-proof option · no hidden mold trap ·
dishwasher-safe · lifetime warranty.

Build your system at pokiyoki.com →

Magnetic. Modular. mom approved.

POKIYOKI

KEEP GOING

Get the next stage before you hit it

Drinking is just one of a dozen "gates" in the toddler years. Join the Poki Yoki parent list and we'll send the right tips at the right age — plus first access to new parts, restocks, and member perks. No spam, just the stuff that helps.

[Join the Poki Yoki list →](#)

Made for parents, used by kids.

POKIYOKI

One cup for the whole journey.

From the first assisted sip to the school-day
water bottle — the modular, spill-proof cup
system that grows with your child.

The Poki Yoki Parent Library · No. 1

pokiyoki.com

