

Preparing to Breastfeed

Who: Pregnant women

Why: 1. Pregnant women, particularly first time moms, need evidenced based information to build confidence in their ability to breastfeed

Time: 30 - 40 minutes

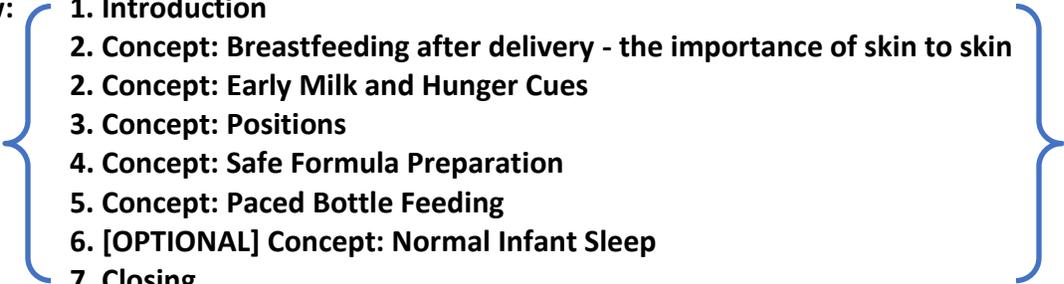
Objectives:

By the end of this session, participants will be able to:

- Describe the importance of skin to skin
- Describe the transition of colostrum to mature milk
- Demonstrate breastfeeding positions
- Prepare infant formula safely per CDC and WHO recommendations
- Demonstrate self-paced bottle feeding

Lesson

Overview:

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1. Introduction
 2. Concept: Breastfeeding after delivery - the importance of skin to skin
 2. Concept: Early Milk and Hunger Cues
 3. Concept: Positions
 4. Concept: Safe Formula Preparation
 5. Concept: Paced Bottle Feeding
 6. [OPTIONAL] Concept: Normal Infant Sleep
 7. Closing

Can expand on or exclude topics based on time / participants' needs.

Materials:

Handouts:

- How do they compare?
- Baby Behaviors Laminated Cues Card
- Safe Formula Preparation
- Paced Bottle Feeding
- Baby Behaviors Tri Fold (optional concept w/ normal infant sleep)

Materials:

- Flip Chart or white board (if possible)
- Baby Baby Oh Baby DVD (2011)
- Model Baby Doll
- Model bottle
- Model formula scooper (optional)

Introduction & Activity

[Have copies of each handout mentioned above within reach]

“Welcome to today’s class about taking care of mom and baby. My name is _____ and I will be leading class today.

“Today we will discuss:

- Breastfeeding After Delivery: the importance of skin to skin
- Early Milk and Hunger Cues
- Breastfeeding Positions
- Safely Preparing Formula
- An infant feeding technique called “paced bottle feeding”
- [Optional] An brief overview of normal infant sleep patterns

If possible, write the class topics on a white board or flip chart.

Class Introductions

- Allow several minutes for class introductions. If class is large, consider using Option 2.

Option 1: “Let’s start class by finding out how many of you are new moms (and/or dads, grandparents) and how many of you are experienced moms (and/or dads, grandparents). Let’s go around the room and have each of you introduce yourself and tell us if this is your first baby or if you have other children.”

Option 2: “By a show of hands, how many of you are new moms (and/or dads, grandparents)? How many of you have other children?”

Activity: True or False

“We’re going to start the class today with an activity. I’m going to read a statement and you tell me if it is true or false.”

1. “The amount of milk your body produces depends on the size of your breasts.”

[Allow time for someone to raise hand]

Answer: False. As long as you watch for your baby’s cues and feed them when they are showing you they’re hungry, your body will almost certainly make just the right amount of milk to meet your baby’s needs. The size of your breasts has nothing to do with how much milk you will make. It has everything to do with removing the milk from your breasts which will signal your body to produce more milk.

2. “Breastfeeding will cause your breasts to sag.”

[Allow time for someone to raise hand]

Answer: False. Any changes you see in your breasts will be the result of pregnancy, and not breastfeeding. Many of you will have no long-term changes at all once your body heals from the pregnancy and delivery.

3. “Breastfed babies are sick less often than formula fed babies.”

[Allow time for someone to raise hand]

Answer: True. Breastfed babies have lower rates of many short term and long term illnesses. The same is true for mothers who breastfeed. If your baby is sick less often, you'll spend far less time and money for doctor visits, as well as less time away from work or school.

[Show Handout: How Does Formula Compare?]

Concept: Breastfeeding after delivery - the importance of Skin to Skin

One of the best ways to get breastfeeding off to a good start after delivery is to have skin to skin time with your new baby for the first hour after birth. Skin to skin is when your baby is placed on your chest as soon as you're medically stable (commonly right away for vaginal deliveries) with only a blanket covering him or her.

We're going to watch a short video clip so that you can see just what I mean:

[PLAY: Baby Baby oh Baby \(start 1:42 End 4:40\)](#)

It's pretty remarkable the way babies are born with the expectation to breastfeed, and know exactly where to go for their first meal immediately after birth.

Concept: Early Milk and Hunger Cues

Who here knows the word for the thick, nutrient rich milk your body produces in very small amounts after birth?

[Pause for responses]

Yes, it's called colostrum. We're going to watch short clip about this really incredible milk.

[PLAY: Baby Baby oh Baby \(4:40 – 8:40\)](#)

We saw in this clip a lot of really important information. We saw that mom's milk will change to meet the changing needs of her baby from the moment they're born until the time mom and baby decide to stop nursing. At first your milk will be very thick and in very small amounts, but it's actually the perfect amount for your baby's tiny tummy.

Does anyone know how big a newborn baby's tummy is?

[Pause for responses]

Make a small circle with your thumb and forefinger

Your baby's tummy will only be about the size of a cherry after birth. By day three, their tummy will only be about the size of a walnut. So you see you don't need much to fill their tummies, and the amount of milk your body makes will be just right. And the best way to make sure that you continue to make enough milk for your baby is to "nurse on demand", or nurse whenever the baby shows you that they're hungry.

Does anyone know what a baby does to show mom or dad that they're hungry?

[Pause for responses. Affirm all correct responses]

Demonstrate the following hunger cues: rooting, sucking on fists

[Ask the group:] How do you think your baby can show you that they're full?

[Wait for answers. Validate correct responses]

"Great answers. Most commonly our babies will show us that they're full by turning their faces away or pushing the bottle away with their hands. Here are some other examples.

[Show Laminated Cues card]

Concept: Positions

Now we're going to talk a little bit about position options for nursing your baby. I'm going to show a short clip again and then we'll discuss what we saw.

[PLAY: Baby Baby Oh Baby \(9:34 – 15:55\)](#)

We saw that there's a number of positions that may work for mom and baby, and the most important thing is that you find what works best for you.

[Demonstrate cradle, cross cradle, football hold - emphasize this hold for nursing after cesarean or feeding multiples]

You saw that in the beginning, what often works best is the laid back breastfeeding position

[Demonstrate the laid back nursing position]

We're going to move into topics related to bottle feeding your baby, but before we do, I want stress that anytime you have a question or concern about breastfeeding your new baby, please call us. We are here to help you meet your goals.

Concept: Safely Preparing Formula

"Now we're going to move onto safe formula preparation.

If at any point in time you give your baby infant formula, we want to make sure everyone has received information about how to safely prepare it. On the back of the formula can, you have probably seen that the instructions encourage the caregiver to ask your doctor if your water needs to be boiled. We want to be sure that all of our parents and grandparents know that powdered formula is a non-sterile substance, meaning that there is a very small possibility that there may be something in the formula that could make your baby sick. Because of this, based on the best current recommendations available to us, we encourage all parents to boil the water, let the water slightly cool and then mix the formula with the boiled but slightly cooled formula. This will help make sure that anything harmful in the formula will be destroyed. After mixing the formula, allow it to cool quickly to feeding temperature and feed it immediately."

*While holding the Formula Preparation handout, point to and read each step.

“If you would like one of these handouts, they will be available for each of you after the class.”

“What questions do you have about preparing formula?”

Concept: Paced Bottle Feeding

Now once you've prepared your baby's bottle using either breast milk or formula, I'd like to show you the best way to hold your baby while you feed them. This is a technique called “paced bottle feeding” because it allows your baby to determine exactly how much food he or she receives from the bottle. By allowing your baby to follow their own hunger cues, you can prevent overfeeding and the post-feeding fussiness that can often come with it.

[Take model doll baby and position them in paced bottle feeding (upright) position in your arms. Hold model bottle in free hand in a horizontal position to the baby]

“The best way to allow your baby to have control over the feeding is to hold them in a more upright position, like this.

[Recline the model doll baby into the usual infant feeding position in your arms. Hold the bottle angled downward to the baby's mouth]

“If you hold your baby like this, your baby will continue to swallow even if they're not hungry because until they're older, it's very hard for them to stop the flow from the nipple on their own. So held like this they'll often just continue to swallow, regardless of if they're hungry, until the nipple is removed from their mouth.

[Bring model baby up to upright position in your arms]

“So instead you want to hold your baby more upright like this. You want to gently offer the nipple to your baby rather than forcing it into your baby's mouth. Make sure the tip of the nipple is filled with liquid to ensure that your baby isn't swallowing any air which could upset their tummy. And then you can allow your baby to drink until they are full.”

[Ask the group:] How do you think your baby can show you that they're full when they're eating from a bottle?

[Wait for answers. Validate correct responses]

“Great answers. Most commonly our babies will show us that they're full by turning their faces away or pushing the bottle away with their hands. We really want to try to avoid forcing your baby to take more than they want, just to finish the bottle.

[Show Paced Bottle Feeding handout] We have a helpful handout which review this information which will be available to everyone at the end of the class.

“What questions do you have about paced bottle feeding?”

FACTS ABOUT LIGHT AND DEEP SLEEP

- Sleep patterns:
 - ✓ Birth to 6 weeks
 - Newborns sleep about 14 to 16 hours in a 24-hour period but only sleep a few hours at a time. **This is normal.**
 - During the first 6 weeks, a newborn baby's sleep is unpredictable. Newborns are still getting used to the new world around them and may mix-up days and nights.
 - ✓ 6 to 8 weeks
 - Baby may sleep more at night because they are awake more during the day.
 - Waking at night is still healthy and normal.
 - ✓ About 3 months
 - Longest stretch of sleep will be at night.
 - Baby may wake less often.
 - ✓ About 6 months
 - Baby is able to sleep up to 6 hours at one time.



TIPS FOR SLEEPY PARENTS

New parents can expect to get less sleep. For the first several months, parents will sleep in 2 – 3 hour stretches. These tips will not help a baby sleep through the night because waking up at night is important for newborns' health. However, these tips will help parents get a little more sleep.



- 1. Keep your baby close to you at night**

Pediatricians recommend putting the crib or bassinet in the same room for the first few months. Parents won't have to go far when baby wakes up and needs something.
- 2. Try some "white noise"**

Play soft music or turn on a quiet fan. Parents will still be able to hear their baby when he really needs them, but won't wake them every time he moves.
- 3. Keep lights low**

Instruct parents to keep the lights low while feeding, burping or changing their baby's diaper during the night. This will help parents get back to sleep more quickly. Remind parents they do not want low lighting if they are doing something that requires their full attention - for example, giving their baby medicine.
- 4. Sleep when your baby sleeps**

Parents might think it is impossible for them to sleep while their baby sleeps but even 90 minutes of sleep can help them feel more rested.
- 5. Ask for help**

Taking care of an infant can be hard work. Encourage parents to ask family and friends for help at home.

Closing

“Today we covered a lot of information. We discussed breastfeeding after delivery, early milk and hunger cues, breastfeeding positions, preparing formula for your baby and self-paced bottle feeding. [OPTIONAL: We also talked about normal infant sleep patterns].

“Take a minute to think about what we talked about today. Then, turn to your neighbor and discuss at least one thing that you want to remember and try doing once your baby arrives”

Allow a few moments for participants to discuss with each other.

“Would anyone like to share?”

“Are there any final questions or thoughts that you would like to share with us?”

Thank participants for attending our “Preparing to Breastfeed” class and **remind them that WIC is a wonderful resource for any questions or concerns once breastfeeding begins!**

Frequently Asked Questions for New Babies

Participants often have questions that are not addressed in the class outline or *Getting to Know Your Baby* brochure. These “frequently asked questions” will help answer participant’s questions that may come up during class discussions.

1. What is the average length of time that babies sleep?

Newborns sleep about 14 to 16 hours in a 24 hour period, but not all at one time. At 2 to 4 weeks of age young babies are able to sleep 2 to 4 hours at one time. By 6 to 8 weeks babies sleep more during the night time as they are awake more during the day. By 3 months of age babies are able to sleep up to 4 hours at one time and by 6 months babies may be able to sleep up to 6 hours at one time.

2. When will babies sleep through the night?

Babies sleep for longer stretches and wake less often during the night. Every baby is different, but 6-month-olds are mature enough to sleep up to 6-hours at one time. A 6-8 hour stretch of sleep is considered “sleeping through the night.” Keep in mind that each participant may have a different definition of “night”. Remind participants that even if their baby sleeps through the night for a few days or weeks, changes in the baby’s routine, sickness, growth spurts, or other things may cause night waking to occur again for a short time.

3. How long does it take a baby to go into deep sleep?

Newborns fall asleep in light sleep. About 20-30 minutes later, they go into deep sleep. Every baby is different, so look for signs of deep sleep to be sure. As babies get older, they will go from light sleep to deep sleep more quickly. By 4 months of age, many babies fall asleep in deep sleep.

4. Do I have to lay my baby on his back to sleep?

Doctors recommend that babies be put on their backs to sleep to help prevent Sudden Infant Death Syndrome (SIDS). Young infants who sleep on their stomachs are at an increased risk for SIDS.

5. Is it OK for my baby to sleep in my bed with me?

The American Academy of Pediatrics recommends that babies sleep in the same room as their parent(s) but on a separate sleep surface.

6. What should I do when my baby wakes up in the middle of the night and won’t go back to sleep?

Acknowledge that this is difficult for parents but is normal baby behavior. During the first 6 weeks, a newborn’s sleep will be unpredictable, and he will not know the difference between day time and night time. Babies wake during the night because they need something. Find out what your baby needs (Is he hungry? Does he need a diaper change? Is he too hot or too cold? Is he uncomfortable?) and take care of his needs. Keeping the lights low while you care for your baby will help you both get back to sleep more quickly. After your baby’s needs are met, speak softly, rock him gently and encourage him to go back to sleep. Your baby will wake less as he gets older.

7. Why would you want to wake a sleeping baby?

A parent may need to wake a young baby who is not waking to feed often enough. Call your doctor if you are concerned that your baby is sleeping too much.

8. Is it bad to wake a baby who is in deep sleep?

It is not harmful to wake a baby who is in deep sleep. If you need to wake your baby use a variety of sounds and touches. Be patient, it may take several minutes to wake a baby that is in deep sleep.

- 9. When I lay my baby down and she wakes up right away, is it because she is used to being held all of the time?**
Remember that newborn babies fall asleep in light sleep. Because of this, they may startle and wake up when laid down while still in light sleep. This is normal. Wait for signs of deep sleep before laying your baby down.
- 10. Is it good to let babies “cry it out” sometimes? Is it good for their lungs? Is it okay to let my baby cry herself to sleep? Am I spoiling my baby by picking her up when she cries?**
You may have heard many things about letting babies cry. Babies cry to communicate that they need something. Responding to a baby’s crying is simply taking care of her needs. Research shows that when parents respond to their babies’ cries, babies develop confidence that their world is safe and secure. You can’t spoil a baby by responding to her needs.
- 11. What do I do if I can’t get my baby to stop crying?**
Babies cry to tell parents that they need their help. Try to figure out why your baby is crying and respond to her needs. If your baby continues to cry after you have taken care of her needs, hold her close and repeat the same action over and over, such as gently rocking or swaying. Be patient; calming a crying baby takes time. If you start to feel angry or overwhelmed, lay your baby down in a safe place for a few minutes and take a break. If you think your baby is crying too much, contact your baby’s doctor.
- 12. What is a comfortable room temperature for my baby?**
If the room temperature is too hot or too cold for the parent, it may be too hot or too cold for the baby. If your baby is sweaty, he may be dressed too warmly or in too many blankets. Dress your baby in as many layers as you are wearing. Call your doctor if you have questions or concerns.
- 13. How do I know if my baby is sick?**
Every baby is different and may show a wide variety of symptoms when sick. Common signs of illness include the following: fever (feel hot), skin color changes (very red cheeks, pale), increased crying, a change in sleep pattern, wheezing, problems breathing, blood in stools, diarrhea, vomiting, coughing, and/or a runny nose. There may be other symptoms. Call your baby’s doctor if you think your baby may be sick or call 911 if you need help right away.
- 14. Is it good to swaddle your baby?**
There may be certain circumstances when swaddling is appropriate for very young infants. Swaddling may help calm very young babies, but swaddling older babies is discouraged. Swaddling limits your baby’s ability to move his body and gain strength and coordination. It also makes it hard for your baby to use his body to give you cues and limits your ability to read his cues.
- 15. Can I use a bouncy seat or swing to help calm my baby?**
The best way to calm a crying baby is to hold your baby close to you and repeat the same words or actions over and over. Bouncy seats and swings also provide repetitive motions that can soothe babies. However, many seats and swings now come with sounds and music as well. Too many sounds can overwhelm your baby. It may be helpful to turn off the music and turn the swing to face the wall. Although this may seem boring to an adult, it is actually calming to a baby. Be careful not to overuse this equipment. In order to grow and develop, babies need time to move their bodies freely in a safe place.