

Ready... Set...



Welcoming Your New
Family Member

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- Ready Set Baby is designed to help you get ready for your baby, even if you've had a baby before.
- This will provide you with the latest science about infant feeding.
- And, you will learn how you will be cared for at the maternity center after delivery.

INSTRUCTIONS FOR THE EDUCATOR

Please use your own words wherever possible to make the education conversational. Talk **with** mothers, not at them. This will help them to listen well and stay engaged in the educational conversation. Important words are bolded.

i This icon represents a note, rather than suggested text.

Each content page contains the following components:

- **Title and Conversation Starter** (suggested question for engaging mothers at the beginning of each topic)
- **Main Message** (suggested text about the most important idea to convey)
- **Points to Cover** (suggested text: includes any definitions, rationale and other helpful information to convey the topic accurately to mothers)
- **i Teachable Moment** (*not suggested text: this section highlights an opportunity to teach mothers a particularly poignant fact related to the topic*)
- **Transition** (suggested text for moving the conversation to the next topic)

Let's Get Started!

1. Infant Feeding - Find out the Facts!

2. While You Are At The Maternity Center

- Skin-to-Skin
- Rooming-In
- Feeding “On Cue” / No Pacifier Use

3. Breastfeeding Information & Tips

- Exclusive Breastfeeding
- Benefits For Mothers And Babies
- Position And Latch
- Making And Maintaining Your Milk Supply
- Signs Your Baby is Getting Enough Milk

4. Once You Are Back Home With Your Baby

- Addressing Common Concerns
- The First Few Weeks
- Preparing for Other Caregivers
- Just For Partners
- Resources for Support

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What Have You Heard About Infant Feeding?



SAMPLE



What Have You Heard About Infant Feeding?

Have you ever breastfed or do you know any family members or friends who have breastfed?



MAIN MESSAGE

Each one of us has a unique opinion on infant feeding formed from the stories we hear from others and also from our own experiences. As part of your healthcare team, we want you to know the facts.

POINTS TO COVER

- Learning the facts will help you **make informed parenting choices** so you can do what is best for you and your baby.
- **i** Refer to Pages 4-7 of the patient booklet, "Find Out the Facts!". Allow time for review and discussion.
- Do any of these facts surprise you? Let's talk about the ones that caught your attention.

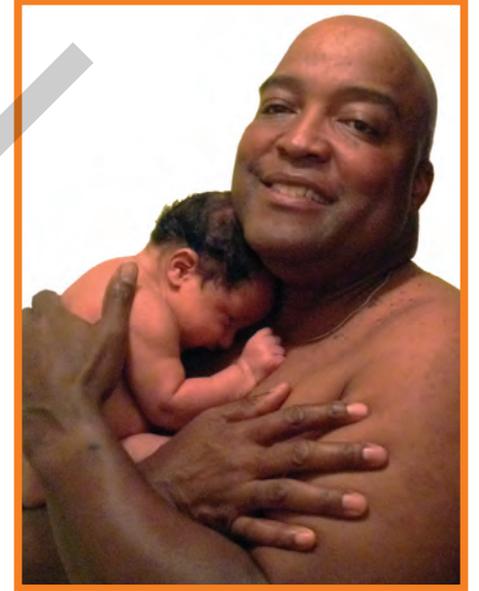
i TEACHABLE MOMENT

Thank her for sharing what she's heard about infant feeding. Be sure to **validate** her experience, **do not judge** her comments. Let her know the "facts" listed are based on **common misbeliefs** that many parents have – she is not alone.

TRANSITION TO THE NEXT TOPIC

The rest of the session will focus on topics that you will want to be familiar with before you have your baby. We have learned so much in the last 10 years about the value of breastfeeding. **Learning the latest science can help you to make your own feeding decisions.**

SKIN-TO-SKIN CONTACT →



Skin-To-Skin Contact

Parents And Babies Belong Together!

Skin-To-Skin Contact

Have you ever heard of “Kangaroo Care” or “Skin-to-Skin”?



MAIN MESSAGE

Your baby will be placed skin-to-skin immediately after birth. This is the best place for your baby to stay, with as little interruption as possible.

POINTS TO COVER

- Skin-to-skin means baby’s bare skin (diaper okay) touches your bare belly or chest as much as possible in the first days and weeks of life (cover for warmth as needed).
- It helps your baby’s adjustment to life outside the womb go much smoother. (It helps to steady your baby’s heart rate, breathing, temperature, blood sugars and blood pressure.)
- Skin-to-skin contact also helps with bonding, makes breastfeeding easier, and helps to calm your baby when he or she is upset.

TEACHABLE MOMENT

The benefits of skin-to-skin extend beyond the immediate postpartum period. Encourage her to spend as much time skin-to-skin as possible in the early weeks. It’s great for partners to practice skin-to-skin, too!

TRANSITION TO THE NEXT TOPIC

Another thing that will help with bonding and breastfeeding is something called “Rooming-In”.

ROOMING-IN DURING YOUR MATERNITY CENTER STAY →



Rooming-In During Your Maternity Center Stay

AT THE MATERNITY CENTER

Rooming-In

What do you think it means to “room-in” with your baby?



MAIN MESSAGE

Your baby will remain with you in your room throughout your entire maternity stay unless a medical procedure requires separation.

POINTS TO COVER

- Rooming-in means that you and your baby are together 24 hours/day. This will mean less crying and faster weight gain for your baby, and more rest and sleep for both of you.
- Your baby needs to know you are close by smelling you, feeling your heart rate, and hearing your voice.
- The cream on the newborn’s skin is very healthy. You can delay the first bath as long as you wish. The bath can be done in your room.
- Be sure to have someone with you in your room at all times to help!

i TEACHABLE MOMENT

*Help mothers learn to **self-advocate** for the practices they know to be beneficial. When they take part in the decisions made about their baby’s care, they will feel more confident in their parenting skills when they leave the maternity center.*

TRANSITION TO THE NEXT TOPIC

Babies need to feel safe and cared for. Rooming-in and Skin-to-Skin are ways to help meet those needs. Another one of your baby’s primary needs is, of course, to be fed!

FEEDING “ON CUE” →



Feeding “On Cue”

Follow Your Baby’s Lead

Day 1

**Grape
5-7 ml**



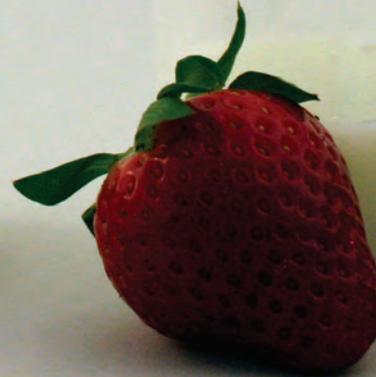
Day 3

**Cherry Tomato
22-27 ml**



Day 7

**Strawberry
45-60 ml**



Month 1

**Lime
80-150 ml**



Feeding “On Cue”

How will you know when to feed your newborn baby?



MAIN MESSAGE

Babies are hardwired to eat when they're hungry and stop when they're full. It is recommended that you do not watch the clock – watch your baby instead.

POINTS TO COVER

- Babies communicate with easy-to-recognize signs that tell us when they are hungry or full. Learning their language will get easier with time. **i** Refer to Page 12 in patient booklet. Allow time for review and discussion.
- Feeding “on cue” prevents underfeeding or overfeeding your baby and helps your baby feel safe and cared for.
- Pacifiers can hide your newborn’s signs of being ready to eat. Doctors recommend you avoid using pacifiers in the first month if you are breastfeeding.

i TEACHABLE MOMENT

Encourage mothers not to watch the clock - her baby will tell her when he or she is ready for more milk. While in the maternity center, a baby's tummy holds only about a teaspoon full! Help her to trust that frequent and small amounts throughout the day and night are the best way to hydrate and satisfy newborns.

TRANSITION TO THE NEXT TOPIC

Crying is a **very late** sign of hunger, so it's best to watch for other signs first. Be sure to calm your baby if he or she is crying before trying to feed. Try cuddling, rocking, talking or humming to your baby, or skin-to-skin contact on your chest.

EXCLUSIVE BREASTFEEDING →



Exclusive Breastfeeding

Your Milk And Nothing Else

Exclusive Breastfeeding

Do you know the suggested time to begin giving foods other than breastmilk?



Exclusive Breastfeeding
Your Milk And Nothing Else

MAIN MESSAGE

The best way to feed your baby is to give your baby only your milk for the first 6 months, and then introduce appropriate first foods after that, while continuing to breastfeed.

POINTS TO COVER

- It's important not to give any water, formula, drinks or solid foods unless prescribed by your doctor - your baby gets all of his or her food and drink from breastfeeding.
- Human milk is the perfect nutrition for your baby. Refer to your healthcare provider for Vitamin D recommendations.
- Continuing to breastfeed for up to two years and beyond is beneficial for both you and your baby's health.

i TEACHABLE MOMENT

Many women don't realize that even a small amount of something other than human milk changes the development of the infant gut for the worse. Infants' gastrointestinal tracts are immature at birth and very susceptible to germs and disease. Encourage her to avoid supplementing to preserve the natural microbiome of her baby's belly.

TRANSITION TO THE NEXT TOPIC

Did you know that your milk changes to meet your baby's needs that very moment? It is a living food that responds to our environment! That is just one of the many amazing things about breastmilk. Let's talk about some other reasons to breastfeed.

BENEFITS OF BREASTFEEDING →



Benefits Of Breastfeeding

Mom And Baby

Benefits Of Breastfeeding

Have you heard anything good about breastfeeding?



MAIN MESSAGE

Science has taught us a lot in recent years about how beneficial breastfeeding is not only for the baby, but also for the mother.

POINTS TO COVER

- For you, breastfeeding lowers your risk for diseases like diabetes, osteoporosis and breast and ovarian cancer, and it helps your body recover from pregnancy.
- Your milk is always warm and ready, and you don't have to change your diet unless your baby has an allergy or you have certain medical conditions.
- For babies, breastmilk is easy to digest and protects them from many health problems and diseases later in life, such as ear infections, diarrhea, allergies, diabetes, and cancers.
- Breastfeeding protects against Sudden Infant Death Syndrome.

i TEACHABLE MOMENT

Extended Breastfeeding: The benefits of breastfeeding extend well beyond the first year of life. Let her know she may breastfeed as long as both she and her baby desire. There is no recommended time to stop providing breastmilk.

TRANSITION TO THE NEXT TOPIC

Are any of those benefits surprising to you? Breastfeeding is very worthwhile, yet it doesn't come easy for all women. It is a new skill that will take practice and support – let's take a look at some common breastfeeding positions.

POSITION AND LATCH →



Laid Back Position

Position And Latch



Leaning Back



Cross-Cradle Hold



Football Hold



Cradle Hold



Lying Down

Position And Latch

Have you ever heard of “laid-back” breastfeeding?



MAIN MESSAGE

A good position helps your baby get a deep latch, or attachment, that is pain-free. Putting your baby to your breast will take some practice *and* patience as you both learn.

POINTS TO COVER

- Laid-back breastfeeding which is leaning back comfortably, at a slant, is a great position to try first. It goes along with your baby’s natural instincts.
- **Laying belly-to-belly** with your new baby is the most natural thing to do.
- It is important that you are comfortable. Experiment with what positions work best. **i** *Go over each of the 5 positions pictured on Page 15.*

i TEACHABLE MOMENT

*Breastfeeding discomforts are often alleviated when the mother relaxes and leans back comfortably. Emphasize importance of **mother’s comfort and patience** as they learn together.*

TRANSITION TO THE NEXT TOPIC

There are helpful tips for latching in your booklet on Page 16. Be sure to ask for help when you need it. Now let’s take a look at how your body makes milk.

MAKING AND MAINTAINING YOUR MILK →



Making And Maintaining Your Milk

Move It Or Lose It

Making And Maintaining Your Milk

Do you know what your first milk is called?



MAIN MESSAGE

Your first milk (colostrum) is thicker and more yellow than the milk you drink. It comes in very small amounts yet is full of nutrients and immunities - just what your baby needs.

POINTS TO COVER

- Making milk requires **frequent feedings** (at least 8-12 in 24 hours).
- When your baby removes milk from your breast, your brain gets the signal to make more milk.
- If you do not remove milk from the breasts, your body will not make more milk, and this can lower your overall potential milk supply. You've got to **move it or lose it**.
- If, for any reason, you are separated from your baby, you should hand express or use a pump to remove milk.

i TEACHABLE MOMENT

*Colostrum slowly changes to larger amounts of mature milk over the first 3-5 days. This is often referred to as **milk “coming in”**, but this is **misleading** because **breasts are not empty** before this time and have the right amount of nourishment for the baby.*

TRANSITION TO THE NEXT TOPIC

Some women worry that the small amount of colostrum available in the beginning is not enough. Rest assured that frequent feedings of your first milk are just what your baby needs to stay hydrated. This frequent feeding is what brings in your mature milk. Let's take a look at some other signs your baby is getting enough milk.

SIGNS YOUR BABY IS GETTING ENOUGH MILK →



Baby's First Poop



Signs Your Baby Is Getting Enough Milk

Signs Your Baby Is Getting Enough Milk

How do you think you will know that things are going well?



MAIN MESSAGE

There is no need to measure how much milk your baby eats. Keeping track of wet and dirty diapers and weight gain tells you he's getting enough.

POINTS TO COVER

- A gradual change in your baby's poop from greenish black to a lighter color is also a good sign (**stools should be pale yellow, soft and seedy by the end of the first week**).
- Good signs to watch for include:
 - a deep latch that feels like a comfortable tug;
 - steady sucking and swallowing with the whole jaw moving (with short pauses);
 - a content and more relaxed baby after a feeding.

i TEACHABLE MOMENT

*The perception of insufficient milk is the #1 reason that women stop breastfeeding. It is a normal concern, but it is often unnecessary. Paying attention to the signs listed in the booklet will help her evaluate feedings and **prevent unnecessary supplementation or anxiety about low milk supply.***

TRANSITION TO THE NEXT TOPIC

Other good signs to look for are listed in your booklet, as well as signs that you need help. Now let's take a look at other common concerns that some mothers have.

COMMON CONCERNS ABOUT YOUR NEWBORN →



Common Concerns After You Are Home

BACK HOME

Common Concerns After You Are Home

Do you think you might have questions once you're back home with your new baby?



MAIN MESSAGE

Sometimes parents have concerns in the first week or two. Some of the most common concerns are addressed in this booklet. You can read them now and refer to them again once you are home with your baby.

POINTS TO COVER

- Let's take a look together at the list on Page 20 in your booklet.
 - *Allow time for review and discussion.*
- Have you considered any of these already?
- You may not have any of these concerns, yet it is important to know that **many breastfeeding problems are short-lived** with the proper support!

i TEACHABLE MOMENT

Self-confidence plays a key role in a woman's ability to meet her breastfeeding goals. Encourage her to take advantage of available support if she runs into difficulties. Many early breastfeeding problems can be resolved with proper support rather than with supplementation.

TRANSITION TO THE NEXT TOPIC

Knowing what to expect in the beginning is very important. The first few days at home can be very challenging – let's talk about ways to make that time easier.

THE FIRST FEW DAYS AT HOME →



The First Few Weeks

Changes For The Whole Family



The First Few Weeks

Will you have any support people staying with you after delivery?



MAIN MESSAGE

Be patient with yourself during this time. Responding to your new baby's needs can be challenging in the beginning. It does get easier!

POINTS TO COVER

- Plan to nest in with your family after getting home. Give yourself permission to take care of yourself and your baby.
- Taking good care of yourself will help you take good care of your baby. Be sure you get enough fluids, foods, and rest.
- It is recommended that you limit unnecessary visitors and phone calls until you and your baby are well adjusted.
- Your booklet has ideas of how to create a network of support before your baby is born.

i TEACHABLE MOMENT

Mothers do better with a lot of support after birth. Talk her through her personal situation and encourage her to consider some ways she can create a network of support to help her. Her neighbors, coworkers, friends, or family may want to lend a helping hand or have recent experience with newborns.

TRANSITION TO THE NEXT TOPIC

Planning ahead can really make a big difference and keep you from getting overwhelmed. Do you plan to return to work or school after you give birth?

i *If no, skip next card and ask if she has a partner at home. If no partner, skip Partners card and move to Resources for Help card.*

PREPARING FOR OTHER CAREGIVERS →

A close-up photograph of a woman with dark hair, wearing a blue short-sleeved top with ruffles, holding a baby. The baby is wearing a blue long-sleeved shirt and is looking up at the woman. The background is a brick wall with a metal railing. The text is overlaid on a semi-transparent dark blue band at the bottom of the image.

Preparing For Other Caregivers

Going Back To Work Or School

Preparing For Other Caregivers

Have you made a plan for when you go back to work?



MAIN MESSAGE

Many women continue to feed only their milk to their babies, even after returning to work or school. Planning ahead will ensure everything goes smoothly.

POINTS TO COVER

- You'll want to breastfeed as much as possible while you are with your baby, and pump your milk into a storage container for later use while separated from your baby.
- Pumping while you are away will ensure you continue to produce enough milk for your baby, and will provide the milk for feedings by other caregivers.
- Many employers provide lactation rooms or a space for mothers to use, and many insurance providers reimburse the cost of a personal breast pump.

i TEACHABLE MOMENT

It is vital that she talk to her supervisor and/or human resource office about her plans for continuing to breastfeed, after taking all of her available leave. Empower her with the knowledge that by continuing to breastfeed, she is less likely to miss days from work since her baby is less likely to get sick.

TRANSITION TO THE NEXT TOPIC

A little planning goes a LONG way. There are many resources to help you figure it out. Your partner can also be a huge support. Do you have a partner at home?

i *If no, skip next card and move to Resources for Help card.*

JUST FOR PARTNERS →



Just For Partners

Breastfeeding Is A Team Effort

Just For Partners

How does your partner feel about breastfeeding?



Just For Partners
Breastfeeding Is A Team Effort

MAIN MESSAGE

There is no need for partners to feel left out when moms are breastfeeding. There are many other ways they can bond with their baby.

POINTS TO COVER

- It is important to help partners feel included in newborn care since they cannot breastfeed.
- Encourage them to LEARN about breastfeeding, SUPPORT you in your efforts, and PROVIDE comfort to you as you both adjust to the new baby.
- They can do other things to get to know their newborn like practicing skin-to-skin contact, giving baths, holding the baby in a baby-carrier, and learning infant massage.

i TEACHABLE MOMENT

Read her the case study on Page 24 of a man who wanted his wife to formula feed because he wanted to support her in feeding and 'be a part of the action'. Once he realized the health benefits of breastfeeding, and decided to devote himself to other ways to bond with his baby.

TRANSITION TO THE NEXT TOPIC

In addition to the support you can get from your partner, there are many other resources available for you to take advantage of.

RESOURCES FOR HELP →



Resources For Support Nationwide Help At Your Fingertips

Resources For Support

Do you know the resources available in your area?



MAIN MESSAGE

There are many groups and organizations that exist to provide mothers confidential support when they need it most. Maternity centers have clinics to help with breastfeeding and your local health department is also a good resource for information and help. You are not alone.

POINTS TO COVER

- Your booklet lists national resources, such as toll-free hotlines for mood disorders, depression or domestic violence.
- There are also a lot of breastfeeding related resources available online if you are able to access a computer.
- Many women find it very helpful to meet with other mothers in their community after birth – do you think it might be nice to hear stories from other mothers?

i TEACHABLE MOMENT

*Modern society is missing the support that the “village” lifestyle provided to new mothers. Many women feel alone with many unanswered questions during the early days and weeks of a new baby’s life. Help her realize the importance of seeking out support in her community and asking for help when she needs it. **Share any local resources with her.***

TRANSITION TO THE NEXT TOPIC

Thank you for your time today. Please know you can bring up anything that you have questions about at any time with your healthcare team. There is even a notes section that you can use to record your questions. Do you have any questions that I can answer right now?

QUESTIONS? →

Questions?



Questions?



Photo Credits

What Have You Heard About Infant Feeding?

With thanks to Allison Kuznia Photography

Skin-to-Skin Contact

With thanks to Hannah Edens and Ken Chandler

Rooming-In During Your Maternity Center Stay

treehouse1977 www.flickr.com/photos/13071852@N00/3319908047/
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Feeding "On Demand"

With thanks to Ken Chandler and Megan Stauffer

Exclusive Breastfeeding

With thanks to Texas Department of State Health Services

Benefits of Breastfeeding

With thanks to Brook Colgan

Position and Latch

With thanks to the Women's Birth and Wellness Center of NC, Peel Region Health Services of Ontario, and La Leche League International

Making and Maintaining Your Milk

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Signs Your Baby is Getting Enough Milk

With thanks to Annemie Tonken, Hannah Edens, and United States Breastfeeding Coalition (USBC)

Common Concerns

With thanks to Annie Oumarou

The First Few Weeks

With thanks USBC

Preparing for Other Caregivers

With thanks to Leslie Koehn and NC Region V WIC

Just for Partners

With thanks to Ken Chandler and Megan Stauffer

Resources for Help

Mark Evans www.flickr.com/photos/8641421@N07/3487954077/
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Questions?

With thanks to Tara Barber Smith

We would like to thank the W.K. Kellogg Foundation for their generous support of this and other projects that foster a breastfeeding-supportive society. For more information please visit breastfeeding.unc.edu.

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