

## Teaching Parents about Newborn Behavior

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  - USDA WIC Special Projects Grant 2006-2009

## Supplementation is Being Monitored

- Joint Commission
- CDC
- Surgeon General
- Baby Friendly



## Maternal Request for Supplementation of Healthy Breastfed Newborns

- 14 focus groups in English- and Spanish-speaking WIC participants (N=97)
- Study of maternal request for hospital formula for *healthy* breastfed infants



DaMota, JHL 2012

## Maternal Request for Supplementation of Healthy Breastfed Newborns

- 3 Major Themes
  - Unrealistic expectations about newborns and parenting
  - Lack of preparation for breastfeeding
  - Formula seen as the "solution"



## Parents' Unrealistic Expectations

- "The imagined baby"
  - Parents' prenatal construct of the baby
  - Will be in conflict with the real baby
- Parents and other caregivers have idealized the "quiet, full, sleeping" baby



Stern 1998; Heinig et al. 2006

### Unrealistic Expectations about Newborns

- Newborns expected to be quiet
  - "Every time that I tried to breastfeed, he would have a tantrum, become really angry. So then I thought 'Why? Why should I make him suffer?'"
  - "We started the formula on the 2<sup>nd</sup> day...since he never stopped crying."



DaMota et al. JHL 2012)

### Unrealistic Expectations about Newborns

- Newborns expected to sleep
  - "He wasn't sleeping and was constantly crying and when I would get him to latch, there was nothing."
  - "I guess she wasn't getting enough from me... they brought me the milk and after she ate, she slept."
  - "She wouldn't go to sleep but I knew she was still hungry, and then I would feed her a little bit [formula] and then she would go to sleep."

DaMota et al. JHL 2012)

### Day 1: The "Good" Baby

- Heightened alert state in the first 2 hours, followed by longer periods of sleep (over next 24 hours)
- Parents will think:
  - What a "good" quiet, sleeping baby!*
- And then...



DaMota et al. JHL 2012, Nugent 2007

### Days 2 & 3: Everything Changes

- Reality sets in! There is a sudden change in the baby's behavior
- Baby is expected to be quiet and sleeping, but now...**SOMETHING IS WRONG!**
- Parents ask for formula and the frantic baby falls asleep



DaMota et al. JHL 2012, Nugent 2007

### Lack of Preparation for Breastfeeding



### Lack of Preparation for Breastfeeding: Onset of Milk Production

- Many mothers thought their milk would come in as their babies were born
  - "She had a bottle because the milk wasn't coming in right away."
  - "They would also help show how to position him so that could breastfeed him but no milk would come out and no milk would come out so then I had to give him formula."
  - "My milk didn't come in for about 3 days..."

DaMota et al. JHL 2012

### Facts for Moms: Milk Onset

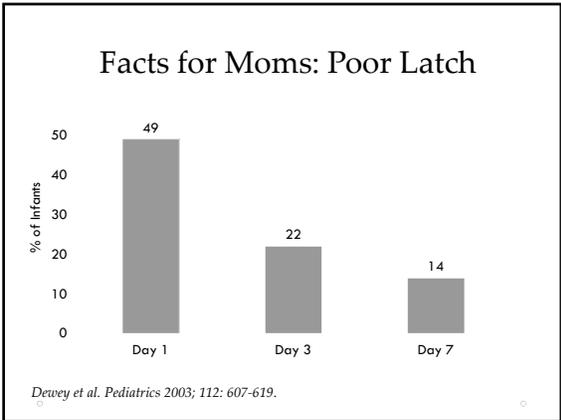
- 85% of mothers - milk comes in at 24-72 hours pp (bulk of additional 15% are *after 72 hours*)
  - First time moms' milk comes in later (avg. 70 hrs pp) than moms who have BF before (avg. 56 hrs pp)

### Lack of Preparation for Breastfeeding: The Perfect Latch

- Mothers expected their infants to latch perfectly the first time they attempted to feed
  - "He didn't suck well, he rejected it right away."
  - "I gave her formula, I would put her close but she would barely latch on. It was if she wanted everything to be easy and for everything to be fast. And I would say 'I can't do it either.'"



DaMota et al. JHL 2012



### Lack of Preparation for Breastfeeding: Frequency of Feeds

- Mothers had no idea how frequently newborns would need to be fed
  - "She was a big baby. She would wake up every 3 hours like clockwork wanting to be fed."
  - "He was constantly eating like every 45 minutes to 1 hour, I just couldn't sit there and feed him so I moved him to a bottle."



DaMota et al. JHL 2012

### Facts for Moms: Early Breast Milk Volumes

- Day 1
  - 13 ± 6 g/kg (range 3 - 32 g/kg)
  - ~50 mL for a 3.6 kg newborn
- Day 3
  - 98 ± 47 g/kg (range 50 - 163 g/kg)
  - ~350 mL for a 3.6 kg newborn
- Day 5
  - 155 ± 29 g/kg (range 110 - 196 g/kg)
  - ~560 mL for a 3.6 kg newborn

Casey et al. Am J Dis Child 1986; 140: 933-936.

### Frequent Feeding = Sleep Deprivation

- Mothers believed that feeding formula was the best way to rest
  - "She was feeding every 2 hours and it was wearing me out and I could get a break when she went to the nursery."
  - "I had a c-section so I didn't want to do anything, you know? I was just tired, recovering, it was just too much for me."
- Many mothers reported that medical staff *told them* that formula *should* be used to increase rest

UCD Human Lactation Center, 2010

## Rest is Important, But....

- Mothers may leave the hospital believing that formula is the only way to achieve rest
  - No limit on visitors
  - No social/physical support in place at home
- Implies fatigue and infant waking are due to BF and that caring for newborns is *easy*
- Parents need effective strategies to deal with the first 6 weeks
  - The problem is not the baby waking, the problem is coping with the waking

UCD Human Lactation Center, 2010

## Formula As the Solution



## Formula as the Solution

- Formula perceived as a “solution” to breastfeeding problems or challenging infant behavior
  - “He wouldn’t stop crying so the nurse gave him a bottle. He latches fine to a bottle so I said ‘okay.’”
  - “I just wanted to give him formula because he was crying and always awake.”

DaMota et al. JHL 2012

## The Breastfeeding System

- | Mother   | Baby                                |
|--|-------------------------------------|
| • Needs to bond with baby                                    | • Needs to bond with mom            |
| • Needs time to recover from the birth                       | • Can conserve energy               |
| • Needs to make the right amount of milk for <i>her baby</i> | • Needs to start with small volumes |
|  | • Needs time to practice feeding    |
|  | • Needs to calm down to feed        |

## Key Messages for Parents of Newborns

- Baby behavior changes from the 1<sup>st</sup> to 2<sup>nd</sup> day
- Latching takes practice – expect quick improvement
- Moms feel changes in breasts *after* discharge
- Babies use cues to communicate – *response* improves them



## Sharing Baby Behavior Messages

## The Cornerstones of Baby Behavior

1. *Engage* the caregiver using your knowledge of baby "secrets" – explain what you see!
2. Stay with the *basics* that related to caregiver action
  - Cues
  - Crying
  - Sleep
3. Value and validate the *baby's skills*



Simplification of NBO and NCAST interventions

## Promoting Positive Infant-Parent Interactions

- Value and Validate Babies' Skills
  - "Isn't it amazing how *you* baby can tell *you* what she needs?"
  - "*He's* trying so hard to tell *you* that he needs something to be different. What do *you* think it might be?"

("you" may refer to individual or family as a whole)



## Unrealistic Expectations

- Prenatal Messages
  - Real newborns are not like babies in the media
  - Babies sleep differently that adults – these differences keep them safe and healthy
  - Crying doesn't always mean hunger, you will learn your babies cues
  - Get help at home



## Promoting Informed Decisions about BF

- Prenatal and first days
  - Moms do not feel changes in their breasts until after they leave the hospital
  - Babies and moms need lots of practice to get breastfeeding started
  - Healthy babies will wake up and be fussy on day 2
  - Moms and dads need support at home



## Supporting Exclusive BF

- Address moms' questions about trigger behaviors
  - Why does my baby wake up when I put her down after feeding?
  - Why does my baby wake up so much at night?
  - Why does my baby cry so much?
- Support interactions
  - Responding to cues helps child improve cues
  - Reassure them that behaviors change over time
  - Many reasons why babies cry
- Reframe bottle-feeding



## For More Information

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