Your easy-read.. Issue 12 MOTHERS & others GUIDE

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This booklet conforms with 'best practice standards' These standards are recommended by MICE and The Baby Friendly Initiative

NEW RESEARCH - How to influence your baby's brain development Building strong baby bonds • Sleep information How dads and others can help

Welcome to this booklet. We hope you find it useful.

It is in 2 sections and has been designed to give you all the information you need about making your feeding choice and caring for your new baby. We do not expect you to absorb it all at once but gradually during your pregnancy. Keep it handy for use after birth too.



Breastfeeding Positions

Section 2 - Getting off to a good start

KEY POINTS

- **C** Close to mum
- H Head free
- I In a line
- N Nose to Nipple

Each mother and baby are a unique feeding couple. How you hold and feed comfortably will depend very much on you and your baby as individuals.

KEY POINTS FOR ANY POSITION USED

Baby held close

• Make sure you are in a position that will remain comfortable for the duration of the feed.

Baby's head and body in straight line so he can tilt his head back and swallow easily.

• Baby's nose to your nipple. This allows him to take a big mouthful of breast from underneath the nipple.

Here are some of the most commonly used holds.

The laid back approach i.e. biological nurturing



This 'laid back' posture heips babies initiate a natural reflex to breastfeeding. This is when you instinctively hold and cuddle your baby in a natural way. This can be prone with your baby length ways, sideways or slanting. Your baby always has close contact with the breast and can have unrestricted access to your breast for feeding. Gradle hold



This is the position that mothers spontaneously use. Your baby is turned towards your body and his shoulders are supported on your forearm to allow his head to tilt back so he can open his mouth wide and attach.

Early Days

Early days

Healthy term babies may not feed very much in the first 48 hours; they have energy stores that they can use to provide food. However, they may cry for cuddles. Keep your baby close to you. Do not be afraid to cuddle, stroke or talk to him, as this will give him added security.

A study showed that stress levels among babies were raised when they were alone, and that they were much less likely to sleep soundly.

Babies respond to stress by producing high levels of a hormone called cortisol. When babies are cared for sensitively and responsively, stressful situations become much less likely to provoke such high increases. Maintaining low levels can encourage optimal brain development.

HOW CAN I KEEP HIS CORTISOL/STRESS LEVELS LOW?

Be responsive to your baby. Observe your baby's cues, offer comfort whenever he needs and avoid leaving him to cy for prolonged periods.

You can't spoil a baby with lots of love and cuddles! Breastfeeding can quickly soothe a baby. It's not just for nutrition but for love too!

TOP TIP Mothers can help disperse stress hormones by touch and breastfeeding.

Babies' systems are not designed to take large amounts of fluid during the early days, as their kidneys are very immature. Your breast will provide the exact amount of colostrum that your baby needs, so do not feel that there is 'not enough there'.

Your midwife will offer help with the second breastfeed within six hours of birth. Pain relief given in Labour (e.g. pethiding or morphine) can make babies sleepy. If you feel that your bab needs extra encouragement to feed, if can be helpful to offer win a feed at regular intervals and if necessary give nim hand expressed colostrum.

Breastfeeding should be a rewarding and satisfying experience for both you and your baby. However some mothers and babies need a little more help than others.

Each mother/baby partnership is unique and even mothers who have successfully breastfed before may need a little melp.

All babies differ in their needs and therefore each mother/baby experience will be different. Knowing what is normal and why it is happening helps mothers develop their own coping strategies.

Your midwife/neonatal nurse will give you extra information if your baby is small, premature or ill.

Building strong bonds

Your baby should stay with you all the time in hospital and at home. This will help you to get to know each other and enable you to recognise your baby's early feeding signals, before he crips.

AT HOME

Life with a new baby can be quite beyindering carticularly in making choices about parenting. There's a huge number of parenting books that have differing views.

Many patients worry about how they are relating to their baby, from recognising their needs and developing a good bond to fears about 'spoiling' their baby by responding to their cues. You may be confused by conflicting advice from friends, family, professionals and parenting experts.



Happy toddler, happy baby. Win win situation!

Research says that it's impossible to spoil a baby. Babies cry for a reason and do not have the skills or capacities to intentionally 'control' their behaviour. The part of the brain that is responsible for this doesn't mature until toddlerhood.

Humans need prolonged physical contact to grow, develop and thrive. 'Hugging' is an instinctive way to soothe and comfort your baby. Just hold your baby's front against your front. He will find this more natural than being cuddled on his back.

Care that is loving, responsive, consistent and secure enables babies to develop, learn about the world, feel safe, loved and looked after. This is an ideal way for your child to develop positive relationships and for their brain to develop in the best possible way.

Dads' Page

British dads are just getting better and better. In the last 30 years, the amount of quality time they spend with their kids has increased by 8 times. In fact, fathers are now reported to provide up to one third of the care given to under 5s.

Dads are increasingly keen to be more involved, despite the barriers they need to overcome. i.e an NSPCC survey showed that long working hours and lack of 'father friendly support' are still an issue for them. As a result, all child services organisations are now legally required to actively engage with fathers.

Build your own special baby bond

You may have noticed, but dads are quite different from mums. You look different, sound different, you even hold your baby differently. Research shows that mothers and fathers even play differently with their children. You've probably heard about skin-to-skin contact for the mum, but your baby will find a hairy chest to be very warro and cosy too!

Feeding your new baby

This one's an important decision, the biggest you both will make on your baby's behalf. A father's influence on munit's decision of whether to breastfeed, is greater than you might realise.

There is much scientific evidence showing that breastfed babies are healthier and fitter for their whole life (look at pages 4-5 for some interesting facts). Would you imagine the cost of bottle-feeding for a year and beyond could be up to $\epsilon_{1,000}$?

Do dads need to know about breastfeeding?

YES! You can make a massive difference. The more support and encouragement you give, the more confident your partner will feel, and the longer she will breastfeed for. The facts speak for themselves. It is proven that mothers are more likely to start and continue breastfeeding when dads actively participate in the decision, understand the benefits, and apply a positive attitude.

Having a baby is the tiring bit, not the breastfeeding! A new mother has just been through one of the most exhausting, stressful but exciting experiences of her life. It's no wonder she needs time to rest and recuperate...

What can a dad do?

- Take as much time off work as you can.
- Be around to take over some household chores. DON'T be daft enough to refuse heip from anyone that offers to clean, cook or shop. It will allow you all to spend time together as a family.
- Allow your partner to use her maternal nations Respect the uniqueness of each other's role, as you will form your own individual relationship with your baby.

 If she's having difficulties, encourage her to ask for help from a professional, or phone the breastfeeding helplines - it's easier to solve problems early on. Keep this guide handy so you can refer to t. You'll find the Helpline Numbers on back page.

 Be her gatekeeper. Keep an eye on how many visitors you receive, and how long they stay for. A note on the front door stating "we are all fine but are resting at present" can really help!



- Provide regular frod and drink for your partner. This will keep her energy evels up. Before the baby arrives, make sure you have a week's meals in the freezer.
- Ercourage her to sleep when your baby sleeps.
- Try to snield her from well-meaning but unhelpful advice. Even the friendlies words can be too much if given at the wrong time.
- Encourage her to keep breastfeeding. Tell her what a great job she's boing. When the midwife/health visitor calls stay and be involved in the discussions.

What else can I do if I can't share the feeding?

Skip to-skin is a perfect way to bond with your baby. For a mum, the familiarity of her scent includes that of her milk. Babies often settle happily with dad, as the smell of mum's milk can be distracting at times.

Wear a baby sling. Babies love ambient noise, so you can give mum a break by putting on the sling, and getting the vacuum cleaner out! It also makes it easy to take your baby out for a walk.

Share bath time. Your baby will feel really relaxed in your strong arms.

Change the nappy. Make the most of eye contact, talking and playing.

Arrange to go out as a family. Short trips at first. When breastfeeding there's no need to worry about transporting formula, taking bottles or sterilisers.

You're never alone

NATIONAL NUMBERS FOR LOCAL BREASTFEEDING SUPPORT

10 www.babywearing.cc.uk

1 www.babyniendly.org.uk

12 www.thebabycate.co.uk

14 www.lcgb.org

15 www.kellymom.com

www.nhs.uk/start4life

www.isisoriline.org.uk

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Automatic Connection to a **local breastfeeding support person.** This system recognises the area code of your phone to do this. You will therefore not be connected to a local supporter if your telephone number is withheld or you use a mobile telephone.

| National Breastfeeding Helpline | 0300 100 0212 |
|--|---------------|
| National Childbirth Trust (8am-10pm) | 0300/330 0771 |
| La Leche League | 0845 120 2918 |
| Breastfeeding Network | 0300 100 0210 |
| Supporter Line in Bengali বাংলা ভাষায় সাহায্য পাওয়ার ফোন নাম্বার: | 0300 456 2421 |
| Supporter Line in Sylheti সিলেটি ভাষায় সাহায্য পাওয়ার ফন নম্বর: | 0300 496 2421 |
| Association of Breastfeeding Mothers | 0300 330 5453 |
| | |

WEBSITES FOR FURTHER INFORMATION:

- 1 www.nctpregnancyandbabycare.com
- www.feedgoodfactor.org.uk
- 3 www.laleche.org.uk
- **4** www.breastfeedingnetwork.org.uk
- 5 www.abm.me.uk
- 6 www.tonguetie.net
- 7 www.tongue-tie.org.uk
- 8 www.breastfeeding.nhs.co.uk
- 9 www.multiplebirths.org.uk

BREASTFEEDING APPS

1 Breast start

FURTHER INFORMATION FOR DADS

Guide for new dads: www.fatnerhoodinstitute.org.ul A Dad's Guide to Breastfeeding (men need to know about it tool) Brighton and Hove Fathers and Breastfeeding: NCT, 2010 - NTC Information Sheet Dads are Special leafler, La Leche League

BREAST PUMP HIPE (FEEDING CUPS SUPPLIERS)

Medela UK

Ard Medical Ltd

Central Medical Supplies

0161 7760400 01823 336362 01538 399541

To buy Mother's and Others Guide (28p per copy), please visit www.coothersguide.co.uk/order.html



Find out about your local Children's Centres.

They can be useful to

• Ask for any help and support.

• Help you and your baby socialise.

• Discuss any concerns.

• Offer one to one support in your home.

They also have many drop in, stay and play sessions that are open to all.

Contact your professional for more information about what you have in your area.



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