This book has been thoughtfully prepared to assist you in becoming a relaxed and confident parent. As your healthcare provider, I support breastfeeding as the optimal way of feeding your baby. As you progress through your pregnancy, our physicians, nurses and medical assistants will provide you with building blocks of information to help you learn what to expect in your baby’s early days. Please let us know about any questions or concerns you may have.

This guide was developed in collaboration with Southern Inland Counties Regional Perinatal Program/PAC/LAC and the Riverside County WIC Program. Original graphic design by Loma Linda University Children’s Hospital.
Exclusive breastfeeding for six months and continued breastfeeding with addition of appropriate foods for up to at least one year of age is recommended by all major healthcare organizations. Virtually all mothers can breastfeed with appropriate counseling, education, and knowledgeable support.
While You Are Pregnant:

Learn as much as you can about breastfeeding.
- Read pamphlets and watch any DVDs you get from the WIC Program.
- Take prenatal and breastfeeding classes at your local hospital or WIC clinic.
- Learn about moms groups in your area where mothers meet to support each other.

Create a support system.
- Family: Share the information you are learning about breastfeeding with the people who will be helping you when your baby gets here.
- Ask about WIC breastfeeding peer counselors: Peer counselors are WIC moms who breastfeeding their babies and who have been trained to help moms breastfeed. If you have a peer counselor, call her soon after having your baby so she can support you.

Plan to exclusively breastfeed:
Exclusive breastfeeding means your baby is receiving your breast milk and nothing else. Exclusive breastfeeding for the first 4-6 weeks is extremely important for establishing a good milk supply.

WIC Offers Families:
- Vouchers for free healthy foods
- Breastfeeding education and support
- Nutrition and health education

For more information, call 1-888-WICWORKS, visit wicworks.ca.gov or talk to your healthcare provider.
Mothers Who Breastfeed Enjoy Many Benefits:

- Less risk of breast and ovarian cancer
- Less risk of diabetes (this is very important if you are diagnosed with gestational diabetes during your pregnancy)
- Faster weight loss after pregnancy
- Less bleeding after delivery (especially important if you have low iron)
- Less risk of osteoporosis

Women who do not breastfeed have a higher risk of developing breast cancer, ovarian cancer and diabetes.
Breastmilk has **MORE** of the Good Things Babies Need

See for Yourself!

**BREASTMILK**

- Antibodies
- Anti-Cancer (HAMLET)
- Growth Factors
- Enzymes
- Disease Fighting Stem Cells
- Hormones
- Anti-Viruses
- Anti-Allergies
- Anti-Parasites
- Probiotics
- Prebiotics
- Minerals
- Vitamins
- Fat
- DHA/ARA
- Carbohydrates
- Protein
- Water

*Not all formulas have prebiotics and probiotics*

This institution is an equal opportunity provider.
California WIC Program.
California Department of Public Health.
1-800-852-5770

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Babies Who Breastfeed Get Sick Less Often Than Formula Fed Babies

Breastfed babies are less likely to have:

- Respiratory infections (breathing problems)
- Diarrhea
- Constipation
- Ear infections
- Allergies and eczema
- Asthma
- Childhood cancer
- Crib death (SIDS)

Later in life, breastfed babies are less likely to develop health problems, including:

- Diabetes
- Obesity
- Asthma
- Heart Disease
- Crooked teeth and cavities
Myths About Breastfeeding

“Breastfeeding will hurt!”
In the first days of breastfeeding, you may feel a pulling sensation that is uncomfortable as the baby grasps the nipple and stretches the breast tissue. This initial soreness will improve within two to four days after delivery. If you continue to have nipple pain, seek advice from a lactation consultant.

“I won’t be able to tell if my baby is getting enough with just breastfeeding.”
Watch your baby’s diapers for urine and stool every day. Several stools daily during the first few days, shows your baby is getting plenty of colostrum. After the fourth day, watch for 4-5 wet diapers and at least 2-3 stools in 24 hours. This means your baby is getting plenty of food while breastfeeding.

“I can’t nurse, I have to go back to work (or school).”
Mothers can breastfeed even if they go to work or school. WIC and other community resources can give you more information about your legal rights as a breastfeeding mother and about pumping your breast milk. Breastfeeding mothers miss fewer work days because of a sick child.

“I’m going to have a Cesarean, so it will be too hard.”
After a Cesarean, you will need more help getting started with breastfeeding because you cannot move as well, but soon it will get easier. Your nurse can help you find comfortable breastfeeding positions that will keep the baby off your incision.

“Nobody in my family breastfed, so I can’t.”
In the past, many women who did not breastfeed either did not know the benefits or did not get help with problems. Now, we know how important breastfeeding is for mom and baby.

“I am diabetic, so I can’t breastfeed.”
Breastfeeding is really good for diabetic mothers and their babies. Exclusive breastfeeding can reduce the risk of your baby becoming diabetic.

Don’t let the wrong information stop you from breastfeeding.
Supplementing breastfeeding with bottles of formula can cause many problems, especially in the first weeks after birth.

Your breasts do not get enough stimulation to get a full milk supply.

Frequent breastfeeding causes the breasts to make milk faster. You can increase your milk supply by breastfeeding more often. Bottles of formula make the baby nurse less often, so your breasts make less milk. Frequent breastfeeding and avoiding formula and pacifiers will help you make more milk.

Baby will have a higher risk of certain medical problems.

Studies show that just one formula feeding can change a baby’s normal intestinal bacteria, which could increase a baby’s risk of infection. Formula feeding should not be portrayed as equivalent to human milk feeding.

Use of bottles and artificial nipples may interfere with breastfeeding.

Offering a bottle to a baby who is learning to breastfeed can cause confusion and frustration for the baby. A baby’s mouth moves differently when breastfeeding than when bottle feeding.

You are more likely to get engorged.

Breastfeeding frequently and avoiding formula will help protect you from engorgement. If the baby is full of formula, he will not breastfeed as much.
Understanding Your Newborn Baby’s Behavior

Sleeping

Babies must wake up at night to let parents know they need something. While sleeping patterns vary, most newborns wake 3-4 times or more at night.

Waking at Night

Newborns sleep differently than adults. They start sleeping in a light sleep and move to deep sleep after about 20 minutes. It is easier to put your baby down in a crib to sleep if they are in deep sleep. Some signs of deep sleep are:

- Very little movement
- Breathing is regular and steady
- Relaxed and floppy arms and legs
- Baby makes sucking movements

Newborns spend about an equal amount of time in light sleep and deep sleep, in about 50-60 minute cycles. Initially newborns may wake with each cycle, or every one or two hours.

Tips for sleepy parents

- Wait a little while to put baby down after feeding.
- Play time and physical activity during the day are important for good sleep at night.
- Turn off lights and TV where your baby sleeps.
- Rest while your baby sleeps; even sitting quietly can help you feel more rested.
- Accept help from family and friends.
- Have your baby’s crib or bassinet placed near your bed.

For additional information about sleeping and crying, visit [www.wicworks.ca.gov](http://www.wicworks.ca.gov) and click on: California Baby Behavior Campaign.
What to know about crying:

- All babies cry.
- Responding to early cues can help prevent some crying.
- Crying is upsetting for a reason; it is a signal that the baby needs help.
- Babies cry less and less as they get older.
- If you start to feel angry or overwhelmed because of baby’s crying, it is okay to put the baby down in a safe place and take a break.
- Contact your pediatrician if you think your baby is crying too much.

When your baby cries:

Try to figure out the reason for the crying. For example, he or she may be:

- In need of a diaper change
- Over stimulated
- Too hot or too cold
- Uncomfortable
- Hungry
- Tired

Hold your baby close to you and repeat the same action over and over. You might try one of the following:

- Speaking softly or singing
- Gently rocking, swaying or bouncing your baby
- Gently massaging her back, arms and legs

Remember, learning how your baby communicates with you takes time. As babies get older, they will cry less and be easier to understand.
Comfortable Breastfeeding Positions for Mom and Baby

**Cross Cradle**
The cross cradle position is common for use with newborns and smaller babies.

- Support your baby’s body and neck.
- Put your baby across your body tummy-to-tummy with you.
- Wrap her legs around your side.
- Baby breastfeeds on the breast opposite your supporting arm.

**Cradle**
The cradle position is usually used after the first few weeks and is common for breastfeeding older babies.

- Place a pillow in your lap.
- Put your baby on his side, tummy-to-tummy with you.
- Rest his head on your arm starting off with his nose in front of your nipple.
- Tuck his lower arm under your breast.

**Lying Down**
Breastfeeding while lying down can be comfortable for women who have had a difficult delivery or for night feeds.

- Use pillows for comfort as needed.
- Start with his nose in front of your nipple, just like the other positions.
- Support your baby with your arm, a pillow or a rolled-up blanket.

**Clutch of Football**
The clutch or football position is usually a comfortable position for women who have had a c-section or have large breasts.

- Place one or more pillows at your side to support your arm.
- Put your baby on the pillow with his legs tucked under your arm.
- Slide your arm under your baby’s back and support his neck with your hand.
- Hold baby with arm on the same side as the breast being offered.

**Laid Back**
Laid back breastfeeding encourages you and your baby’s natural breastfeeding instincts.

- Lean back in a comfortable position on a couch, bed or reclining chair. Use pillows for support, if you want.
- Lay baby on your bare breast.

- Relax and help him as much as you like to find your nipple.
- Remember you are a team.
Breastfeeding Positions

Cross Cradle

Lying Down

Laid Back

Cradle

Clutch or Football
There are different positions to hold your baby while nursing. With practice, you will find the position that is more comfortable for you.

**Latching On**
Latching on is the way your baby attaches to the breast for feeding. A good latch is important to:

- Avoid sore nipples
- Make sure your baby is getting enough milk
- Help your body produce more milk

**Tips for a good latch:**

- Line up your baby’s nose with your nipple. Your baby’s head can then tilt back, letting his mouth reach up and over your nipple.

- Make sure your baby’s mouth is open and wide before bringing him in to latch on. A wide open mouth helps your baby to get more of the dark skin around your nipple (areola) in his mouth.

- Watch to see that your baby’s chin and lower lip touch the breast first. Once on the breast, your baby’s chin will be pushed in against the breast.

**Signs of a good latch:**
Both of his lips are curled out wide, not tucked in.

- Cheeks are rounded.
- You can hear or see your baby swallowing.
- You do not feel pain while breastfeeding.
A Baby’s 9 Instinctive Stages

The First Hours After Birth:

Stage 1: The Birth Cry
The first stage is the birth cry. This distinctive cry occurs immediately after birth as the baby’s lungs expand.

Stage 2: Relaxation
The second stage is the relaxation stage. During the relaxation stage, the newborn exhibits no mouth movements and the hands are relaxed. This stage usually begins when the birth cry has stopped. The baby is skin to skin with the mother and covered with a warm, dry towel or blanket.

Stage 3: Awakening
The third stage is the awakening stage. During this stage, the newborn exhibits small thrusts of movement in the head and shoulders. This stage usually begins about 3 minutes after birth. The newborn in the awakening stage may exhibit head movements, open his eyes, show some mouth activity and might move his shoulders.

Stage 4: Activity
The fourth stage is the activity stage. During this stage, the newborn begins to make increased mouthing and sucking movements as the rooting reflex becomes more obvious. This stage usually begins about 8 minutes after birth.

Stage 5: Rest
At any point, the baby may rest. The baby may have periods of resting between periods of activity throughout the first hour or so after birth.

Stage 6: Crawling
The sixth stage is the crawling stage. The baby approaches the breast during this stage with short periods of action that result in reaching the breast and nipple. This stage usually begins about 35 minutes after birth.

Stage 7: Familiarization
The seventh stage is called familiarization. During this stage, the newborn becomes acquainted with the mother by licking the nipple and touching and massaging her breast. This stage usually begins around 45 minutes after birth and could last for 20 minutes or more.

Stage 8: Suckling
The eighth stage is suckling. During this stage, the newborn takes the nipple, self-attaches and suckles. This early experience of learning to breastfeed usually begins about an hour after birth. If the mother has had analgesia/anesthesia during labor, it may take more time with skin to skin for the baby to complete the stages and begin suckling.

Stage 9: Sleep
The final stage is sleep. The baby and sometimes the mother fall into a restful sleep. Babies usually fall asleep about 1 ½ to 2 hours after birth.
At the Hospital:

Hospitals have practices in place that support mother and infant bonding and breastfeeding. Learning more about these practices will help you be better prepared for your hospital experience.

- **Protected time immediately after birth:** The first hours after birth are important for your baby’s development especially for bonding and breastfeeding. This special time should be protected, private, and uninterrupted.

- **Feed your baby as soon as possible after delivery:** Your baby will be alert and interested in breastfeeding for the first hour or two after delivery. If you have a cesarean delivery and are unable to nurse your baby right after birth, ask to begin breastfeeding as soon as possible.

- **Rooming-in:** Your doctors, midwives, and nurses will encourage mothers and babies rooming together. Rooming-in helps you learn your baby’s early hunger cues.

- **Plan to limit your visitors:** Limit your visitors so you and your baby have plenty of uninterrupted time for breastfeeding and for important skin-to-skin contact.

- **Pacifiers:** Pacifiers are not given except for medical procedures such as having a heel stick for newborn metabolic screening.

- **Plan to exclusively breastfeed:** Your doctors, midwives and Nurses will only interrupt breastfeeding with supplementary feedings if medically necessary. Water and sugar water are not given.

- **Routine procedures:** Your baby’s weight and bath may be delayed to decrease separation time which is stressful to mother and baby.

- **Skin to skin contact:** Having your baby skin to skin is important immediately after birth, during your hospital stay, and at home.

Babies who are kept skin to skin are more likely to breastfeed well and often, which is important for developing your milk supply.
Newborn Baby Cues and Behaviors

Eating
Newborns need to be fed often because their stomachs are very small.

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Day 3</th>
<th>Day 7</th>
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<tbody>
<tr>
<td>size of a cherry</td>
<td>size of a walnut</td>
<td>size of an apricot</td>
</tr>
<tr>
<td>5-7 ml</td>
<td>22-27 ml</td>
<td>45-60 ml</td>
</tr>
<tr>
<td>1-1.4 teaspoons</td>
<td>.75-1 oz</td>
<td>1.5-2 oz</td>
</tr>
</tbody>
</table>

When your baby needs something to be different, he might:
- Look away, turn away or arch his back
- Frown or have a glazed look in his eyes
- Stiffen his hands, arms or legs
- Yawn or fall asleep

Hunger Cues

When your baby is hungry, he may:
- Keep his hands near his mouth or suck on his fist
- Bend his arms and legs in toward the middle of his body
- Make sucking noises
- Pucker his lips
- Search for the nipple (root)

When your baby is ready to interact, learn or play, he might:
- Have a relaxed face and body
- Follow your voice and face
- Reach towards you
- Raise his head
- Stare at your face

Responding to cues quickly before your baby starts to fuss may help your baby cry less

Fullness Cues

When your baby is full, he may:
- Suck slower or stop sucking
- Relax his hands and arms
- Turn away from the nipple
- Push away
- Fall asleep
Maternal Mood Changes

I feel depressed sometimes. Is that normal?

Being the mother of a newborn can be an emotional and challenging time. Most new moms feel sad, upset, or worried sometimes. This is because of:

- Hormone changes in your body
- Not getting enough sleep
- The new responsibility of caring for an infant
- Being away from your friends and usual activities

It usually gets easier as your baby gets more settled. If feeling of sadness continues, you may have depression. You may have no interest in your baby, eating, sex, or life in general. It may be hard to take care of your baby. You may feel like hurting your baby. If you have these feelings, get help right away from your doctor or a counselor.

Coping with mood changes:

- Accept and ask friends and family for help with errands and chores
- Talk about how you feel with those close to you
- Limit activities that are stressful and/or optional
- Exercise; just a short walk will often help
- Use a baby sling to keep baby close
- Rest when your baby does
- Join a new mothers group as many mothers have the same challenges

Feelings of depression and anxiety can happen to any mother through no fault of her own.
What do I need to know about breastfeeding in the first week?

- Newborn babies have small stomachs and need to breastfeed often, about 10 or more times in 24 hours.
- Your baby may be sleepy for the first 24 hours after birth, especially if you have had medication during labor or had a cesarean section.
- Your baby may become much more alert and want to feed very frequently and also cry more after this sleepy period.
- You should hear or see your baby swallow after several sucks.
- Let your baby show you how long to breastfeed. Once baby has fed well on the first side and stops or lets go, burp baby and offer the second side to see if baby is still hungry.
- Giving your baby a pacifier or bottle can make you produce less milk because baby does not breastfeed as often.
- Your nipples will be tender. If you have concerns, call WIC, your breastfeeding support person, nurse, physician or lactation specialist.
- Baby may lose some weight but should be back to birth weight by 10-14 days.

You can tell if your baby is getting enough milk by the number of diapers baby uses.

- Your baby’s stools will change.
  - Days 1-2: Black, thick and sticky
  - Days 3-4: Greenish to yellow and less thick
  - By Day 5: Mustard or yellow, seedy or watery

<table>
<thead>
<tr>
<th>Baby’s Age</th>
<th>Wet Diapers</th>
<th>Dirty Diapers</th>
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</thead>
<tbody>
<tr>
<td>1 day old</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2 days old</td>
<td>2</td>
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</tr>
<tr>
<td>3 days old</td>
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<td>3</td>
</tr>
<tr>
<td>6 days old</td>
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<td>4</td>
</tr>
<tr>
<td>7 days old</td>
<td>6</td>
<td>4</td>
</tr>
</tbody>
</table>
Common Concerns

“I don’t have enough milk”
Your body is always producing milk. By breastfeeding your baby whenever he wants to eat, you are letting your body know exactly how much milk to make.

“I want dad to feed the baby so they will bond.”
There are many bonding opportunities other than feeding. For example, babies love being skin to skin with dads when they are not hungry.

“My baby doesn’t want to breastfeed.”
This is a learning time for both of you. The “baby steps” of learning will come more naturally if you keep your baby skin to skin and just practice breastfeeding.

“I’m going back to work so I want my baby to get used to the bottle.”
Babies who learn to bottle feed first, often do not breastfeed well, but babies who learn to breastfeed first, usually can go back and forth easily later on.

“I don’t want to spoil my baby.”
It is normal for your baby to want to be close to you most of the time. Your voice, touch and smell comforts your baby.

All babies have times when they want to eat more often. Breastfeed at these times even if your baby was just fed—you are always making milk.
Lactation Support in the Hospital

Your hospital stay may be only 24-48 hours. It is important to ask for help with breastfeeding while you are in the hospital. If you have not done so already; ask about what lactation support the hospital provides.

- **Lactation consultant:** A lactation consultant is a healthcare professional with additional training and experience regarding providing lactation support to moms.
- **Nurses:** You will have a different day nurse than night nurse. They may change within those times and during the following day(s).

Nurses and physicians are knowledgeable, however, breastfeeding messages could seem inconsistent, as breastfeeding guidance will change depending on the baby’s age in hours and/or days.

Ask your lactation consultant or nurse for referrals to additional lactation support for when you are discharged from the hospital.

What questions do you have about hospital practices after birth, such as holding your baby skin to skin?
40 Week Visit

Your baby will soon be here!
Tell us how we might further prepare you for breastfeeding or understanding infant cues and behavior.

We hope the information provided in this book helps you prepare for the arrival of your new baby. Congratulations.
FAMILIES GROW HEALTHY WITH WIC

What is WIC?
The Women, Infants, and Children (WIC) Supplemental Nutrition Program is for women who are pregnant, breastfeeding, or who have had a recent pregnancy loss; and for children under 5 years old.

WIC Income Guidelines

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<th>Number of Persons in Family Unit</th>
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<tbody>
<tr>
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<tr>
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May 1, 2020 – June 30, 2021
*Income guidelines change annually. Unborn children are counted in family total.

WIC offers families at no cost:
- WIC card to buy healthy foods
- Nutrition and health information
- Referrals to health care and other community resources
- Breastfeeding support

Working families and Migrants are welcome to apply!

To learn more and see if you qualify, visit: m.wic.ca.gov

For WIC information and office locations call:
1-888-WIC-WORKS
(1-888-942-9675)

WIC Income Guidelines

California Department of Public Health/WIC contracts with the following agencies to deliver WIC services in Orange County.

WIC is an equal opportunity provider