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# Nutrition Education Counseling Guide

## Participant Categories Section

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### Cues

#### Assessment:

- Observe baby and assist mom in identifying baby's cues
- Assess parent's knowledge/interest level of infant feeding cues
- Assess parent and infant interactions

#### Suggested counseling points *(Counsel based on your assessment of baby's cues and mom's concerns and level of interest)*

1. Babies use noises and their bodies to communicate. Babies are born with the ability to communicate. They use specific behaviors (movements, noises, etc) to communicate what type of interaction, if any, they need.
2. By responding quickly to baby's cues, parents and babies will learn to communicate with each other. Responding to cues early will reduce crying. Sometimes the cues are difficult to understand. With practice babies get better at giving cues and parents get better at responding to them, babies get better with practice
3. Babies use engagement cues when they want to be near you and disengagement cues when they need something to be different. Interactions can have both types of cues within a short period of time. Over time, both babies and caregivers will learn to use cues to communicate.
  - Engagement cues are behaviors that indicate that a baby wants to interact. This is the best time for baby to learn, play and feed. The following are engagement cues:
    - Looking intently at face
    - Rooting
    - Feeding sounds
    - Smiling
    - Smooth body movements
    - Eyes open
    - Face relaxed
    - Feeding posture
    - Raising head
    - Following voice and face
  - Disengagement cues are behaviors that indicate that a baby needs something to be different. Babies may need to take a break when exhibiting these cues. Parents are to identify baby's need and/or provide comfort. The following are disengagement cues:
    - Turns away
    - Pushes, arches away
    - Crying
    - Choking, coughing
    - Extending fingers, stiff hands
    - Falling asleep
    - Looks away
    - Faster breathing
    - Yawning
    - Hand to ear
    - Grimace
    - Glazed look

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4. Babies need to be fed often, and will usually give several hunger or fullness cues at one time. Watching and responding to hunger cues can help prevent some crying. Responding to fullness cues can help avoid overfeeding.
  - Hunger Cues:
    - Sucking on hands or wrist
    - Bending arms and legs
    - Making sucking noises
    - Moving the mouth or tongue
    - Searching for the nipple (rooting)
    - Being more alert
  - Fullness Cues:
    - Sucking slower or stopping to suck
    - Relaxing hands and arms
    - Turning away from the nipple
    - Pushing away
    - Falling asleep

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### Crying

#### Assessment:

- Assess parent's knowledge and/or interest level in learning about normal infant crying.
- Assess parent and infant interactions

#### Suggested counseling points *(Counsel based on your assessment of mom's concerns and level of interest)*

1. Babies use crying as a way to communicate many things. All babies cry. It is normal and healthy.
  - Crying is a baby's "super power." Crying results in a sound that affects the nervous system in most adults, rouses them, and drives them to respond to their baby's needs.
  - Many newborns cry more than older infants as they adapt to their new postnatal environment and struggle to provide readable cues.
  - Crying occurs for many reasons other than just hunger. Babies may cry because of discomfort/pain, distress, fatigue, overstimulation, frustration, unfamiliar sensations, distractions or fear. Remember, hungry babies might cry, but they will also display hunger cues.
  - As adults respond to babies' cues and babies refine their cues, crying lessens.
2. Follow these steps to calm a crying baby
  - Try to figure out the reason for crying. Is baby:
    - In need of a diaper change
    - Too hot or too cold
    - Overwhelmed
    - Tired
    - Hungry
    - Uncomfortable
  - Hold baby close to you
  - Repeat the same actions over and over, such as
    - Speaking or singing softly
    - Gently rocking, swaying or bouncing baby
    - Gently massaging baby's back, arms and legs
3. Babies will take longer to calm down if they are very young or upset. Be patient and keep repeating one or two soothing actions long enough for them to be effective before trying something else.

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### Sleep

#### Assessment:

- Assess parent's knowledge/interest level in learning about normal infant sleep

#### Suggested counseling points (*Counsel based on your assessment of mom's concerns and level of interest*)

1. Babies go through periods of both light (active) and deep (quiet) sleep. Both types of sleep are important for baby's health.
  - Babies need light sleep for their brains to grow and develop.
  - Babies dream during light sleep; dreaming is healthy for babies.
  - During light sleep babies:
    - Move around and make noises
    - Have eye twitches or open and close their eyes quickly
    - Have fast and slow breathing
    - Dream
    - Wake up easily
  - Babies need deep sleep for their brains to rest and recover.
  - During deep sleep babies:
    - Don't move very much
    - Have relaxed and floppy arms and legs
    - Have regular steady breathing
    - Make sucking movements
    - Don't wake up easily
  - Babies fall asleep in light sleep and may wake easily if laid down while in light sleep. Wait for signs of deep sleep before laying baby down. Light sleep may last 20-30 minutes.
2. Babies sleep patterns change over time
  - Newborns sleep about 14-16 hours in a 24 hour period.
  - By 2-6 weeks of age, young babies are able to sleep 2-4 hours at a time. During the first 6 weeks, baby's sleep will be unpredictable and may mix up days and nights.
  - Around weeks 6-8, babies may be able to sleep up to 6 hours at a time.
  - As infants get older they will sleep for longer stretches.
  - Babies may have times when they wake up more often due to growth spurts, sickness, change in routine, or learning a new skill such as rolling over or crawling.
3. Night waking is important. Babies must wake to be fed and when they need help to be safe and comfortable.
4. Safe sleep
  - Put baby on his or her back to sleep.
  - Babies should sleep by themselves; not sharing a bed with parents.
  - Nothing in the sleep area except a tight-fitting sheet; remove soft things like pillows, blankets, comforters, bumper pads, and stuffed toys from the sleep area.
  - Avoid overheating baby with too many clothes.
  - Don't smoke near baby.
  - Keep baby's face uncovered for easy breathing.

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### Newborn: Day 1

#### Assessment:

- Assess mom's level of interest in learning about what to expect the first day of her newborn's life.

#### Suggested counseling points (*Counsel based on your assessment of mom's concerns and level of interest*)

1. Healthy newborns are alert in the first 2 hours after birth (unless heavily medicated or recovering from a traumatic labor and birth).
2. Baby's first feeding should occur in the first 2 hours
  - Continue feeding each time the baby become alert.
3. Expect baby to have longer periods of sleep over the next 24 hours
  - Most babies struggle to stay awake on the first day, even while they are feeding.
  - The baby's deeper sleep on the first day helps mom recover and baby to conserve calories while feeding is being established.
4. Skin to skin contact is important.

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#### Newborn: Day 2 & 3

**Assessment:**

- Assess mom's level of interest in learning about what to expect on days 2 and 3 of her newborn's life.

**Suggested counseling points** (*Counsel based on your assessment of mom's concerns and level of interest*)

1. Baby appears different than on Day 1. Babies are more alert on days 2 and 3. There is a potential for an increase in crying.
2. On day 2, babies typically wake and demand frequent feedings.
3. It's normal and healthy that baby will be sensitive to stimuli and wake easily at days 2 and 3. Sleep will be sporadic.
4. Babies may be overwhelmed by the environment.
5. Skin to skin contact is important.