FACILITATOR'S GUIDE

Newborn Care

A Guide to the First Six Weeks

The first days at home with a newborn can be a complete mystery to new parents. Along with your instruction, Newborn Care: A Guide to the First Six Weeks will help your class participants feel more confident about how to feed, comfort, and keep their baby safe and healthy. Parents will appreciate each tidbit of information, especially when reinforced with the suggested class discussion and hands-on activities.



INTENDED USE

This video is intended for use in newborn care classes, childbirth and prenatal classes, home visits, and as part of a lending library. The target audience is new and expectant parents of any age and background.

SUGGESTED FACILITATOR **PRESENTATION**

- Review the video and facilitator's guide
- Make copies of the resource list and the New Parent Handout for parents to take home
- Present the video to your class, either all at once or pausing for discussion and/ or hands-on activity (see suggested stopping points)
- Pass out and review resource list and New Parent Handout

PROGRAM OVERVIEW AND SUGGESTED STOPPING POINTS

Introduction (0:59)

a. Parenting a newborn may seem mysterious at first, but with time and experience, new parents will learn how to best care for their baby

1. Your Newborn (3:09)

- a. Newborn Appearances baby's appearance in the first week (milia, stork bites, Mongolian spots, vaginal swelling, vernix, skull shape)
- b. Newborn Senses what a newborn can see, hear, smell, taste and feel
- c. Brain Development what newborns need, and don't need, for proper brain development

2. Cues, Crying, and Comfort (7:23)

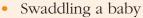
- a. Reading Cues how to read newborn cues (playful, overstimulated, sleepy, waking)
- b. Crying why babies cry (fatigue, hunger, hot or cold, lonely, in pain, dirty diaper)
- c. Comfort Techniques holding and swaddling, using your voice and white noise, massage, rocking and bouncing, change of environment
- d. Abusive Head Trauma (Shaken Baby Syndrome) – definition (ANIMATION), getting support, how to safely deal with the frustration of a crying baby

3. Eating (6:20)

- a. Breastfeeding American Academy of Pediatrics (AAP) recommendations, benefits of breastfeeding for mom and baby, father's support, correct latch-on (ANIMATION), risks of medication, alcohol, and tobacco, non-nutritive sucking, getting support
- b. Formula Feeding safe and nutritious bottle feeding, holding baby while bottle feeding, propped bottle and tooth decay
- c. Burping

Suggested Stopping Point!

Pause to practice the following with a newborn doll:





- Bouncing and rocking a baby
- How to sing to, talk to, and shush a baby
- Massaging a baby

Suggested Stopping Point!

Pause to discuss or practice the following:

- Why breastfeeding is easier, cheaper, and healthier in the long run
- The importance of proper formula preparation for nutrition
- How to burp a baby





4. Diapering and Cleaning (6:04)

- a. Diapers Stools (meconium, frequency, appearances of breastfed and formula-fed stools), diapering supplies, how to diaper, diaper rash, constipation, diarrhea, dehydration
- b. Cord Care care and signs of infection
- c. Circumcision Care care and signs of infection
- d. Bathing how to sponge bathe, supplies, how to tub bathe, water safety
- e. Nail Care and Dressing
- f. Being Out in the World

5. Sleeping (3:19)

- a. Sleeping average number of hours a day, cycles of sleep, nighttime vs. daytime sleep
- b. SIDS safety back-to-sleep, crib safety, pacifier use
- c. SIDS prevention breastfeeding, vaccinations

6. Health and Safety (6:04)

- a. Baby's Physical going to the doctor, jaundice, signs of sickness, taking an under-the-arm temperature
- b. Safety infant car seats, using safety straps, keeping one hand on baby, never leaving baby alone
- c. Parent Health rest when baby does, how to nap, talking with partner, accepting help, staying healthy

Conclusion (0:24)

 a. Follow your instincts. If it feels right, it probably is.

Suggested Stopping Point!

Pause to practice the following:

- Diapering baby
- Sponge bathing baby
- Using a baby nail clipper
- Dressing baby



OWE A

Suggested Stopping Point!

Pause to practice or discuss the following:

- Taking an under-the-arm temperature
- Putting baby in a car seat
- Tummy time
 (getting down on the floor with them)
 and back time (moving arms and legs)
- Organizing support (meal delivery, errand running, house chores, sibling care)
- Making time to be together (spend 15-30 minutes everyday talking, paternity and maternity leave, when to have intercourse again)



RESOURCES

American Academy of Pediatrics

www.aap.org

Centers for Disease Control

www.cdc.gov 800.CDC.INFO

American SIDS Institute

www.sids.org 800.232.SIDS

National SAFE KIDS Campaign

www.safekids.org 202.662.0600

Consumer Products Safety Commission

www.cpsc.gov 800.638.2772 (product recalls)

Baby Center

www.babycenter.com a valuable parenting website

La Leche League

www.lalecheleague.org for help finding a local breastfeeding support group

IMAGE LIBRARY

Newborn Appearance

Your baby will look a little different than you might expect at first. Don't worry, these characteristics will all go away in time.



Vernix

This cream cheese-like substance coats the skin of a just-born baby.



Cone Head

The shape a newborn's skull can take as a result of the soft boney plates coming together to help the baby's head squeeze through the birth canal.



Milia

These are tiny white bumps on the baby's face.



Mongolian Spot

These bluish-green or gray birthmarks are found on the baby's lower back. It's most common among Asians, Polynesians, Native Americans, and African Americans, and normally disappears three to five years after birth.



Stork Bites

These are temporary birth marks that look like patches of deep pink skin on the baby's face and neck.

Hunger Cues

Look for your baby's first signs of hunger, sometimes these can occur together or all at once!



Rooting

This is when a baby turns his head towards your chest as he searches for a breast.



Open Mouth

Baby will open his mouth when you touch it with your finger.



Sucking Motions

Baby makes smacking sounds or sucking movements with her mouth.



Sticking Tongue Out

Baby will thrust her tongue out many times as she is rooting.



Hand to Mouth

This is when baby brings his hand to his mouth to suck on.



IMAGE LIBRARY continued

Breastfeeding Holds

There are many ways to hold your baby when you breastfeed. Try them out, and see what works best for you and your baby.



Cross Cradle

Support your baby's upper back and shoulders with one hand, keeping your fingers low behind his ears. This hold is good because it supports newborns' weak necks.



Side-lying

Lie on your side with the baby tummy to tummy. This restful position is also good if you had a cesarean, but may be easier with an older baby



Football

Hold your baby along the side of your body. This is a good hold if you had a cesarean.



Cradle

Support your baby's head in the crook of your arm. Use this position when the baby has more head control.



Laid Back

Recline comfortably at a 45 degree angle. Position your baby so that he lies with his tummy on your torso. This hold allows gravity to help baby latch on and feed.



Skin to skin

Breastfeed your baby skin to skin (with no clothing or bedding between you) whenever possible.