

## IF-000-23, CCNE: Infant Top Ten Discussion

Client-centered nutrition education uses methods like group discussions and hands-on activities to engage participants in learning. This outline starts with a **Snapshot of the Session**, and then includes two parts:

**Part 1: Planning the Nutrition Education Session** - The first section prompts the nutrition educator to think about the learning objectives, materials, and preparation necessary to carry out the session.

**Part 2: Session Outline** - The second section outlines the key parts of the session. The nutrition educator uses this outline to lead the session.

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### Snapshot of Group Session:

**CCNE Lesson title:** CCNE: Infant Top Ten Discussion

**Developed by:** State Agency staff

**Date Developed:** 6/2012

**Approved by:** State Agency

**NE Code:** IF-000-23

**Class Description:** This class uses facilitated discussion to encourage participants to learn about and share common concerns about infants. Participants will select at least three out of ten topics to discuss from a bulletin board or poster. Each topic includes suggestions for discussion questions, visual aids, and optional corresponding activities.

**Target Audience:** Parents and caregivers of infants

**Type of Learning Activities:** Discussion, optional hands-on activities

## Part 1: Planning the Nutrition Education Session

Lesson: IF-000-23 CCNE: Infant Top Ten Discussion

Item	Notes for Planning the Session
<p><b>Learning Objective(s)</b> – <i>What will the clients gain from the class?</i></p>	<p>By the end of the session, participants will:</p> <ul style="list-style-type: none"> <li>• Give and receive support on common issues relating to caring for infants</li> <li>• Identify one key message from each of the main infant topics discussed</li> <li>• State one tip or new healthy habit to try with their infants</li> </ul>
<p><b>Key Content Points</b> – <i>What key information do the learners need to know to achieve the learning objective(s)? Aim for three main points.</i></p>	<ol style="list-style-type: none"> <li>1. Each infant’s growth and development will be different.</li> <li>2. Parents and caregivers of infants often share common questions and concerns about caring for infants.</li> <li>3. Through sharing, parents can discover tips and resources to help them raise happy, healthy infants.</li> </ol>
<p><b>Materials</b> – <i>List what you will need for the session (i.e. visual aids, handouts, supplies). Attach supplemental materials.</i></p>	<ul style="list-style-type: none"> <li>• Top Ten Infant Topics (attached)</li> <li>• Dry erase board or flip chart and markers</li> <li>• Visual aids and optional activities in a box/container (Suggested items are listed in attached Supplemental Information Guide)</li> <li>• Handouts available for participants, if desired. Suggested materials:             <ul style="list-style-type: none"> <li>○ “Let’s Eat! Feeding Tips for Baby’s First Year!” Stock #13-168 (Spanish #13-168A)</li> <li>○ “Watch Me Grow In My First Year” Stock #13-202 (Spanish #13-202A)</li> <li>○ “Cereal” Stock #13-76</li> <li>○ “Weaning your Baby From the Bottle” Stock #13-170 (Spanish #13-170A)</li> <li>○ “Somewhere There’s a Magic Cup”, Stock #13-06-12896 (Spanish #13-06-12896A)</li> <li>○ “Top 10 Ways to Grow Happy Kids” Stock # 13-06-13782</li> </ul> </li> </ul>

	<p>(Spanish #13-06-13782A)</p> <ul style="list-style-type: none"> <li>○ “Making the Right Amount of Milk” Stock #13-06-12038 (Spanish #13-06-12038A)</li> <li>○ “Breastfeeding: An Instructional Guide for Giving Your Baby the Best” stock #13-220 (Spanish #13-220A, Vietnamese #13-220V)</li> <li>○ “Common Infant and Childhood Problems – Food Allergies” Stock #13-127 (Spanish #13-127A)</li> <li>○ “Common Infant Problems—Colic” Stock # 13-120 (Spanish #13-120A)</li> <li>○ “Common Infant Problems—Crying” Stock # 13-122 (Spanish #13-122A)</li> <li>○ “For Healthy Babies, Handle Bottles Safely” brochure Stock #: 13-06-12255 (Spanish #13-06-12255A)</li> <li>○ “Food Safety At Home” brochure Stock #: 13-20 (Spanish #13-20A)</li> <li>○ “Hand Expression &amp; Storage of Breastmilk” brochure Stock #13-206 (Spanish # 13-206A)</li> <li>○ “Healthy Teeth for a Healthy Smile” stock #13-89 (Spanish #13-89A)</li> </ul>
<p><b>Resources</b> – Review current WIC resources or other reliable resources like WIC Works.</p>	<ul style="list-style-type: none"> <li>• Texas WIC Infant Nutrition Module</li> <li>• <a href="http://www.choosemyplate.gov">www.choosemyplate.gov</a></li> <li>• <a href="http://www.aap.org">www.aap.org</a></li> </ul>

***Class Flow & Set Up*** –  
*Consider the flow of the session & room set-up. Note any extra preparation that may be needed.*

Arrange classroom with chairs in a circle or semi-circle, if possible, to allow for discussion.

Cut out the Top Ten infant topics and attach to a poster or bulletin board. Hang or place in an area where all participants can view it easily.

Gather handouts before class begins.

During the class, facilitate a short discussion on each topic selected by participants, using open-ended questions. Several general questions can be used to spark conversation with any of the topics; additional specific questions are listed for each topic. For each question, hints on answers are also included in the **Supplemental Information Guide** to help the facilitator either provide background information or redirect misinformation.

The questions and answers are intended as a guide, not a script. Remember it is important to allow participants to discuss what is meaningful to them.

Each topic has an **optional activity** and **visual aids** that can help enhance the participant's learning experience. It's up to you to decide whether or not to include the optional activities as time permits.

## Part 2: Session Outline

Lesson: IF-000-23 CCNE: Infant Top Ten Discussion

Item	Notes for Conducting the Session
<p><b>Introduction:</b> <i>Create a respectful and accepting learning environment by welcoming participants, introducing yourself, reviewing agenda, exploring ground rules, making announcements, etc.</i></p>	<p>Example: “Welcome, thank you for being here today. My name is _____. Today’s class is about raising happy, healthy, infants. This is a discussion style class and there’s a lot that we can from each other so please share your questions and ideas.”</p>
<p><b>Icebreaker:</b> <i>Anchor the topic to the participants’ lives. Use a question or activity likely to bring out positive but brief comments; Can be done as a group or partners.</i></p>	<p>Sample icebreaker-- “Let’s go around the room. Please share your name, how many children you have, and their ages.”</p>
<p><b>Activities:</b> <i>For each learning activity, list instructions and include three to five open-ended discussion questions. Keep in mind that activities should enable participants to meet the learning objectives.</i></p>	<p>“Parents often have questions about what they should do to raise happy, healthy infants. This board shows some common concerns that parents often share.”</p> <p><i>Direct attention to the bulletin board or poster display with the Top Ten Infant concerns. Read the topics aloud.</i></p> <p>“Take a moment to look at the different topics. You will get to decide what we discuss today! Let’s decide on 3 topics to talk about. If time allows, we can discuss more.”</p> <p><i>Class selects at least 3 topics. It may be helpful to give each participant 3 sticky notes to place on the board next to their selected topics. Facilitator writes down the 3 topics on a dry erase board or flip chart for reference throughout the class.</i></p> <p>“Great, thank you for picking the topics. Let’s get started with _____”</p> <p><i>Facilitator goes through each topic and can use the sample open-ended questions as needed in order to spark conversation.</i></p>

Item	Notes for Conducting the Session
	<p><b><u>General Questions (for use with any topic):</u></b></p> <p>What specifically are you interested in learning about [<i>insert topic</i>]?  <i>May help to narrow down broad topics and focus on participants' specific areas of concern.</i></p> <p>What questions do you have about [<i>insert topic</i>]?</p> <p>What have you either heard or experienced about [<i>insert topic</i>]?</p> <p><b><u>Specific Questions (for each topic):</u></b></p> <p>1) <b>STARTING SOLIDS FOR THE FIRST TIME</b></p> <p>Besides age, what are some other signs you can look for to know your baby is ready for solid food?</p> <p>Why is it important to wait until you see signs of readiness to feed your baby solids and not earlier?</p> <p>What advice can you give other moms on the best way to start solid foods? Which foods should she try? How should she offer new foods to her baby?</p> <p>2) <b>STARTING THE OLDER INFANT TO TABLE FOODS</b></p> <p>What textures of food are best for your baby right now?</p> <p>What are some foods that you should not give your baby before age 1?</p> <p>How would you know if your baby has an allergy to a certain food?</p> <p>How can you change the food you make for the rest of your family to be able to safely feed it to your baby?</p> <p>3) <b>STARTING A CUP</b></p> <p>How do you know if your baby is ready for a cup?</p> <p>What are some challenges you might come across when trying to start a cup?</p> <p>What tips can you give other moms on how to introduce the cup to their babies?</p>

Item	Notes for Conducting the Session
	<p>4) <b>THE WEANING PROCESS</b></p> <p>When and how should you start to wean your baby from the bottle?</p> <p>What are some common challenges with weaning your baby from the bottle?</p> <p>Why is it important to begin the weaning process from the bottle earlier rather than later?</p> <p>When should you wean the baby from breastfeeding?</p> <p>5) <b>DRINKS FOR OLDER INFANTS</b></p> <p>What drinks are acceptable for your baby before age 1?</p> <p>Why should you be careful about giving your baby too much water? Too much juice?</p> <p>Juice is not required for growth but if you are planning to give juice how should you offer it?</p> <p>When and how do you introduce your baby to cow's milk?</p> <p>6) <b>FEEDING TIMES AND AMOUNTS</b></p> <p>How often and how much should you feed your baby?</p> <p>How does your baby let you know he/she is hungry or full?</p> <p>Why is it important to listen to your baby's hunger and fullness cues?</p> <p>What are some things you can do create safe and happy meal times for you and your baby?</p> <p>7) <b>CRYING AND COLIC</b></p> <p>What makes your baby cry? Does he/she have different cries for different reasons?</p> <p>What works for calming your baby?</p> <p>Having a fussy or colicky baby can be stressful. What advice can you give other mom's to help relieve stress?</p> <p>8) <b>FOOD SAFETY &amp; STORAGE</b></p> <p>Once baby food has been opened, what is the best way to store it?</p>

Item	Notes for Conducting the Session
	<p>What are some safety tips for making your own baby food and storing it?</p> <p>How should breastmilk be stored? For how long?</p> <p>How should infant formula be stored?</p> <p>What are some things you should do when preparing infant formula to make sure it's safe?</p> <p>What is the best way to clean bottles, nipples, and feeding equipment?</p> <p>9) <b>DENTAL CARE</b></p> <p>How can we care for teeth and gums even before the first teeth appear? What about once teeth appear?</p> <p>What can you do to help with teething discomfort?</p> <p>How can we help prevent infant tooth decay?</p> <p>10) <b>HEALTHY GROWTH AND ACTIVITY</b></p> <p>Why is being active important for your baby? What are some things you do to encourage your baby or child to be active?</p> <p>When do growth spurts usually happen? How do growth spurts affect how much breastmilk or formula your baby consumes?</p> <p>How do you know if your baby's growth is on the right track?</p>
<p><b>Review and Evaluations:</b>  <i>Invite participants to summarize the key points and share how they will use what they learned in the future. List a question/activity to prompt this. List any community or other resources for clients.</i></p>	<p>What is the most useful thing you have gained from this class?</p> <p>What did you learn today that you will try at home?</p> <p><b>Client New Lesson Evaluation Surveys:</b></p> <ul style="list-style-type: none"> <li>• Please collect surveys only during the evaluation period.</li> <li>• Evaluation period: [August-October]</li> </ul> <p>During the evaluation period, please collect at least 30 new lesson evaluations from clients.</p>
<p><b>Personal Review of Session (afterward):</b> <i>Take a few moments to evaluate the</i></p>	<p><b>What went well?</b></p> <p><b>What did not go as well?</b></p>



Item	Notes for Conducting the Session
<i>class. What will you change?</i>	<b><i>What will you do the same way the next time you give this class?</i></b>
<b><i>Supplemental Information – Describe any attachments and include any other needed information.</i></b>	<p>The following items are attached to this lesson:</p> <ul style="list-style-type: none"> <li>• <b>Top Ten Infant topics</b> - can be cut out and attached to desired surface (bulletin board or poster) for the lesson.</li> <li>• <b>Supplemental information sheet</b> - provides suggested answers to questions and additional information that may be useful for teaching this lesson.</li> </ul>

## **Supplemental Information Guide**

*Remember, this supplemental guide is intended to provide the facilitator with background information and to help redirect misinformation. This guide is not intended to be a script.*

### **STARTING SOLIDS FOR THE FIRST TIME**

**Resources:** “Let’s Eat! Feeding Tips for Baby’s First Year!” Stock #13-168 (Spanish #13-168A), “Watch Me Grow In My First Year” Stock #13-202 (Spanish #13-202A)

**Optional Teaching Aids:** Photos of infants at different stages of development. DVD 0609, “Feeding, Cooking, and Shopping for Healthy Families”- choose segment 1, “Baby’s First Bites”. Different types of infant feeding spoons.

#### **Questions:**

**Besides age, what are some other signs you can look for to know if your baby is ready for solid food?**

Introduce solids around 6 months of age. Some babies may show signs of readiness a little earlier, and some a little later. These are some signs to look for:

- sits alone or without help
- can hold his head steady and straight
- opens his mouth when he sees food coming
- keeps his tongue low and flat to receive the spoon
- closes his lips over a spoon and scrapes food off as a spoon is removed from his mouth
- keeps food in his mouth and swallows it rather than pushing food out of his mouth.

Remember, each infant develops at their own rate.

It doesn’t matter if the baby is breastfed or bottle-fed, look for the signs of readiness before starting solids.

Some babies may have a medical condition that can cause developmental delays. It is important for the mom to talk with the infant’s pediatrician about the right time to start solids.

**Why is it important to wait until you see signs of readiness to feed your baby solids and not earlier?**

Introducing food too early may be harmful due to choking, developing food allergies or causing an infant to consume less breast milk or infant formula.

Introducing food too late can lead to nutritional deficiencies. It is important to look at the infants developmental stages of readiness.

**What advice can you give other moms on the best way to start solid foods? Which foods should she try? How should she offer new foods to her baby?**

Introduce one new food at a time. Introduce single ingredient foods first to make sure the baby is not allergic to that particular food. Allow at least 7 days between trying new foods. Give small amounts of the food at first. Watch the baby closely for allergic reactions such as a rash, wheezing or diarrhea.

Feed solids with a spoon and avoid using infant feeders or feeder bottles. Do not add cereal or baby food to the bottle or enlarge holes on the nipple to feed cereal.

Let infants explore their food with their hands as they get older. Wash an infant's hands before eating. Encourage finger feeding. Be patient and accept that infant will make a mess as this is part of learning for an infant.

**Optional Activity:** Show photos of infants at different ages and stages of development and have participants describe what stages of development the baby is in and what type of food would be acceptable. Display and pass around different types of infant spoons for parents to look at.

Show DVD, 0609, "Feeding, Cooking, and Shopping for Healthy Families"- choose segment 1, "Baby's First Bites".

**STARTING THE OLDER INFANT TO TABLE FOODS**

**Resources:** "Let's Eat! Feeding Tips for Baby's First Year!" Stock #13-168 (Spanish #13-168A), "Cereal" Stock #13-76, "Common Infant and Childhood Problems – Food Allergies", Stock #13-127 (Spanish #13-127A)

**Optional Teaching Aids:** Jars of different stages of baby food. A baby food mill. Food models of acceptable and not acceptable foods for infants.

**Questions:**

**What textures of food are best for your baby right now?**

Ages 4 -6 months: Strained or pureed, thin consistency for cereal

Ages 6 – 8 months: Mashed foods

Ages 8 – 12 months: Ground, finely chopped, chopped foods

Jarred baby food or food made at home are both appropriate to give infants. Many jarred foods are available in different stages of texture. Plain varieties are preferred instead of fruit desserts or food mixtures with added ingredients such as sugar or corn syrup. The plain vegetables and fruits offer more nutrient value for the cost of food compared to fruit desserts and mixed foods.

Follow safety guidelines when selecting jarred baby or making food at home.

Plain vegetables, plain fruits, plain meats, dairy foods such as yogurt and cottage cheese are appropriate.

### **What are some foods that you should not give your baby before age 1?**

#### Foods that cause choking:

- Fruits and vegetables such as raw vegetables, cherry or grape tomatoes, hard pieces of raw fruit, whole pieces of canned fruit, whole uncut grapes, berries, or cherries, uncooked dried fruit such as raisins.
- Nuts and nut butters.
- Tough or large chunks of meat, hotdogs, meat sticks or sausages
- Large chunks of cheese and string cheese
- Whole beans, smashed beans are ok.
- Popcorn
- Hard candy, jelly beans, caramels, gummy candies, gum, marshmallows
- Hard grain products such as granola bars, crackers or breads with seeds, nut pieces or whole grain kernels

#### Foods that can cause allergic reactions:

- Whole eggs and egg whites. Egg yolks are ok.
- Nuts and nut butters.
- Shellfish

#### Foods that can cause illness because of bacteria or toxins

- Honey
- Unpasteurized juices or cheeses
- Fish with high levels of mercury- shark, swordfish, king mackerel, tilefish

#### Other foods to avoid:

- products with artificial sweeteners
- products with caffeine
- chocolate
- commercially prepared infant food desserts, commercial cakes, cookies, candies, and sweet pastries.

### **How would you know if your baby has an allergy to a certain food?**

A food allergy is a response by the immune system to a food. Symptoms can include coughing, wheezing, skin rashes, hives, diarrhea and vomiting. In rare but serious cases, an infant may experience anaphylactic shock which involves trouble breathing, severe wheezing, and loss on consciousness. This is very dangerous. Call 911 if this happens.

The most common foods that cause allergic reactions are eggs, cow's milk, soy, wheat, peanuts, tree nuts, fish and shell fish.

**How can you change the food you make for the rest of your family to be able to safely feed it to your baby?**

- Cook produce until just tender. Do not overcook. Steaming is a good option.
- Some fruit does not need to be cooked if they are ripe and soft such as apricots, avocado, bananas, melon, etc.
- Cook meats thoroughly to kill bacteria. Avoid high salt/high fat meats such as hot dogs, sausage, Vienna sausage, bacon, bologna, salami, luncheon meats, etc.
- Puree or mash food to the right texture. Add liquid to the food for a thinner consistency.
- As the infant gets older and his feeding skills progress, the consistency and texture can be made thicker.
- Prepare without adding unnecessary ingredients such as sugar and salt.

**Optional Activity:** Display food models of appropriate foods and inappropriate foods to give infants. Have participants pick out either the appropriate or inappropriate foods.

Pass around the jars of baby foods and have parents discuss which are best to give their own baby.

Demonstrate how a baby food mill can be used to puree a vegetable.

**STARTING A CUP**

**Resources:** “Weaning your Baby From the Bottle” Stock #13-170 (Spanish #13-170A), “Somewhere There’s a Magic Cup”, Stock #13-06-12896 (Spanish #13-06-12896A)

**Optional Teaching Aids:** Display different types of cups for infants.

**Questions:**

**How do you know if your baby is ready for a cup?**

Many infants are ready to try a cup, with assistance, at about 6 months old. It is normal for some liquid to fall out of their mouths. Usually at about 8 months, infants can curve their lips around the rim of a cup and are able to drink with less spilling. Spilling and messiness are normal.

**What are some challenges you might come across when trying to start a cup?**

- The baby doesn't show interest in the cup.

- The baby gets too much liquid in her mouth.
- The baby wants to walk with the cup.
- The baby doesn't seem to like any of the cups you have tried.
- A cup doesn't seem as convenient as a bottle.
- The baby spills the liquid.

**What tips can you give other moms on how to introduce the cup to their babies?**

Help the baby hold the cup. Feed liquid very slowly so the infant can take her time swallowing. Cups with spill-proof lids are not recommended since they may encourage the infant to carry the cup and drink more often. They also put infants at higher risk for developing dental caries. Offer small amounts first, 1 – 2 oz, until the baby drinks without spilling.

Juice is not required for growth but if giving juice, offer it in a cup and not a bottle. The sweetness of the juice will encourage your baby to drink from the cup.

**Optional Activity:** Pass around the cups and have participants describe which type of cups are best to use for infants. Have participants discuss the pros and cons of each type of cup.

**THE WEANING PROCESS**

**Resources:** “Weaning your Baby From the Bottle” Stock #13-170 (Spanish #13-170A), “Somewhere There’s a Magic Cup”, Stock #13-06-12896 (Spanish #13-06-12896A)

**Optional Teaching Aids:** Pictures of teeth with baby bottle tooth decay.

**Questions:**

**When and how should you start to wean your baby from the bottle?**

Weaning from the bottle to the cup is a gradual process. Start the weaning process early. Infants should try to be weaned off the bottle and onto a cup by 12 to 14 months old. Waiting longer can make weaning more challenging and also increase the baby’s risk of developing dental caries.

Some infants learn to drink from a cup more easily than others. Use a cup when you begin offering juice or water after the baby is 6 months of age. Formula can also be put in a cup and the bottle can slowly be used less.

A cup can be introduced instead of a bottle at the feeding of least interest to the baby or at mealtimes with other family members are drinking from cups.

Do not let your baby crawl, walk around or go to bed with a bottle. If your baby wants a bottle to go to bed, replace this with something else that’s comforting such as reading a book to your baby or giving your baby a nighttime bath. Offer other comforting things such as a blanket or stuffed toy.

Try different cups for your baby and see which one works the best.

### **What are some common challenges with weaning your baby from the bottle and what advice can you give another mother on how to handle them?**

- Weaning from the bottle can be stressful for both you and your baby. Try not to wean when your baby is ill or there are other major home changes going on.
- Your baby may cry for the bottle, making it harder to give it up. It may be helpful to find something else to comfort the baby when weaning from the bottle. For example, start a bedtime routine that includes a bath and reading a book or offer a stuffed animal.
- The bottle seems a lot more convenient. Weaning from the bottle takes some patience. It's important to start good habits now and in the long run, it won't take as much time and the baby will learn to drink from the cup with ease.
- Have other family members give the baby the bottle while you are trying to wean her. Include your family when coming up with a plan on weaning from the bottle. Remind everyone that the baby will benefit more when she is using a cup.

### **When should you wean the baby from breastfeeding?**

If possible, breastfeeding should be continued through the baby's first year. After a year, breastfeeding can continue as long as mom and baby want to continue. The longer a mom breastfeeds, the more benefits her baby will receive.

The weaning process is up to the mother and infant however, it begins in part when complementary foods are introduced and the infant naturally begins breastfeeding less.

Weaning from the breast should be a gradual process to allow both mom and baby time to adjust. Older babies can be weaned to a cup. If a baby is less than a year old, the baby can be weaned onto infant formula. If the baby is over a year, cow's milk can be used.

**Optional Activity:** Show picture of teeth with baby bottle tooth decay and discuss how it can be prevented.

## **DRINKS FOR OLDER INFANTS**

**Resources:** "Let's Eat! Feeding Tips for Baby's First Year!" Stock #13-168 (Spanish #13-168A)

**Optional Teaching Aids:** Empty packages of common beverages: milk, 100% juice, sports drinks, clear sodas, punch, etc.

### **Questions:**

#### **What drinks are acceptable for your baby before age 1?**

The only acceptable beverages for infants ages **0 - 6 months** is breastmilk and/or iron fortified formula. Healthy infants generally do not need plain water added to their diet.

For infants, ages **6 – 12 months**, breastmilk and/or formula still provide many nutrients during this time. Once complementary foods are introduced, the child's health care provider may recommend plain water (4-8 ounces a day) in a cup. No more than 4 ounces of 100% fruit juice daily in a cup may also be offered.

Never give infants of any age cow's milk, goat's milk, soy or rice drinks, sodas, fruit drinks, punches, coffee, tea, herbal teas, drinks sweetened with artificial sugars, sweetened water, sports drinks, etc.

### **Why should you be careful about giving your baby too much water? Too much juice?**

Under certain medical conditions, the child's health care provider may recommend water but usually infants 0 – 6 months should not get any water. Too much water makes infants feel full which will keep them from getting enough nutrition from breastmilk, formula and complementary foods. This can affect the baby's growth and development.

If a baby is eating complementary foods, 4 – 8 ounces of plain water can be offered in a cup.

NEVER add extra water to formula to "stretch it out". Always mix formula with the proper amount of water.

Infants who drink excessive amounts of fruit juice may:

- Drink less breastmilk, infant formula, or other nutritious foods.
- Develop gastrointestinal symptoms such as diarrhea, abdominal pain, and bloating.
- Develop malnutrition and short stature.
- Develop dental caries.

### **Juice is not required for growth but if you are planning to give juice, how should you offer it?**

Wait until your baby is at least 6 months before offering fruit juice. Only offer 100% fruit juice. Introduce fruit juices one at a time to make sure the baby is not allergic to a particular juice. Do not offer juice in a bottle or spill proof cup: this increases the baby's chance of developing dental caries. Offer juice in a cup without a lid and help your baby drink the juice until she can do it on her own. Avoid giving juice at nap or bedtime. Do not give the baby unpasteurized fruit juices because these may contain harmful bacteria.

Read the label when buying juices. Drinks that say "drink", "beverage" or "cocktail" are not 100% juice.

Give no more than 4 ounces of 100% fruit juice per day. Some moms choose to dilute the juice with water and offer 2 ounces, twice a day.

### **When and how do you introduce your baby to cow's milk?**

Infants should not be introduced to whole milk until they reach 12 months of age regardless if they are bottle fed or breastfed. Offer milk in a cup in small amounts to make sure the child



does not have an allergic reaction to the milk. Offer no more than 16 ounce of whole milk daily. Infants aged 12-24 months should be given whole milk because they need the extra fat from whole milk for brain development.

**Optional Activity:** Have parents pick out from the display, which drinks are appropriate to give infants.

## FEEDING TIMES & AMOUNTS

### Resources:

“Top 10 Ways to Grow Happy Kids” Stock # 13-06-13782 (Spanish #13-06-13782A)

“Making the Right Amount of Milk” Stock #13-06-12038 (Spanish #13-06-12038A)

“Breastfeeding: An Instructional Guide for Giving Your Baby the Best” stock #13-220 (Spanish #13-220A, Vietnamese #13-220V)

**Optional Teaching Aids:** Visual aids showing the size of baby’s stomach at various ages- small marble (day 1), ping pong ball (day 3), softball (adult). The Ameda belly balls can also be used: [http://www.ameda.com/sites/default/files/Belly\\_Balls\\_Card.pdf](http://www.ameda.com/sites/default/files/Belly_Balls_Card.pdf)

### Questions:

#### How often and how much should you feed your baby?

Both breastfed and formula fed newborns should be fed 8-12 times per day. Newborns should not go longer than 2-3 hours during the day or 4 hours at night without breastfeeding. If your newborn sleeps longer than 4 hours she should be awakened for feedings.

There is no specific rule that says exactly how much, or how often babies should be eating. Every baby is different, and babies will adjust how much they’re eating each day, based on their growth. As a general guideline- an infant will drink about ½ oz. of formula per pound of body weight at each feeding.

Paying attention to hunger and fullness cues is a good way to know how often and how much to feed. Counting wet diapers can also be helpful for checking if newborns are getting enough to eat. By the time infants are 6 days old, they should have about 6 wet disposable diapers each day.

From birth to 6 months, infants’ stomachs will get bigger, so they will eat more at each feeding and will eat less often. At 6 months infants will begin to depend less on formula and/or breastmilk, and start getting nutrients from complementary foods.

Checking the baby’s growth is the only sure way to know if your baby is getting enough calories.

Many breastfeeding women are concerned about making enough milk. Many women think that breast size affects ability to breastfeed. This is not true. Breast size has no effect on how much milk your body can make. Each time you feed your baby you are stimulating your milk supply and telling your body to make more milk. If you have questions or concerns about making enough milk, or breastfeeding in general, a WIC Peer Counselor or lactation consultant is available to help answer your questions.

## **How does your baby let you know he/she is hungry or full?**

You've probably noticed things that your baby does to tell you that he/she is hungry or full. These are called hunger and fullness cues.

Hunger cues- rooting reflex, sucking on hand/hand-to-mouth activity, fussing sounds, facial expressions, reaching for food or spoon, crying. Crying is usually a late sign of hunger. It is best to notice other hunger cues before your baby is upset and crying.

Fullness cues- decreased sucking, coming off the breast or nipple, turning away from the nipple, pushing the bottle away, losing interest, becoming distracted, refusing to eat.

Between 6 and 12 months, most infants start eating more complementary foods and decrease their breastmilk or infant formula intake.

## **Why is it important to listen to your baby's hunger and fullness cues?**

By feeding your baby based on his/her hunger cues, you are helping your baby learn to eat based on his/her hunger. As children and as adults, this healthy feeding relationship can help your child maintain a healthy weight and healthy relationship with food for the rest of his/her life (ex. – child will stop eating when full).

## **What are some things you can do create safe and happy meal times for you and your baby?**

Pay attention to signs that your baby is hungry or full and listen to these signs (do not force feed), there is no need to feed based on a strict schedule, make sure your baby is comfortable during meals, feed foods that are safe and appropriate for your baby's age (watch for choking hazards), set a good example, encourage self-feeding even if things get messy, give small servings, don't use food as a reward or punishment.

## **What are some foods that are choking hazards? What can you do to reduce the risk of choking?**

Examples: nuts, seeds, nut/seed butters, popcorn, pretzels, whole beans, grapes, berries, raw fruit or vegetable pieces, hot dogs, sausages, cherries, hard candies, marshmallows, tough meats, large chunks of cheese, whole-kernel corn,

Hold your infant while feeding a bottle (never "prop" a bottle), make sure the hole in the nipple is not too large; do not use teething pain relief medicine before mealtimes (can interfere with chewing); supervise mealtimes; serve food that are the appropriate texture for your infant's development; feed small portions; cut round foods into short strips; mash, puree or grind foods; remove bones from foods.

**Optional Activity:** Use visual aids to show the size of a baby's stomach. Use this visual to help parents understand that because the baby's stomach is small, he/she needs frequent small feedings.

## CRYING & COLIC

**Resources:** “Common Infant Problems—Colic” Stock # 13-120 (Spanish #13-120A)  
“Common Infant Problems—Crying” Stock # 13-122 (Spanish #13-122A)

**Optional Teaching Aids:** Baby doll, blanket

### Questions:

#### **What makes your baby cry? Does he/she have different cries for different reasons?**

Some reasons babies might cry include if they're hungry, need to burp, if they're wet, tired, want to be bundled, want to move, are lonely, hot, want to suck on something, their tummy hurts. Remember that it is normal for babies to cry. Crying often peaks at about 6 weeks of age and resolves around 3-4 months. If you're concerned about your baby's crying, or if your baby isn't eating, sleeping or acting as usual, be sure to call your baby's doctor.

Some babies may have colic- when crying lasts longer and the baby is harder to soothe. The exact cause of colic is not known. Sometimes parents think that the formula is causing problems. Usually, this is not the case unless the baby has a cow's milk sensitivity.

#### **What works for calming your baby?**

Wrapping baby snugly in a blanket, giving gentle massage, placing baby on your chest with skin to skin contact, holding your baby on his/her side/stomach, gently swinging or rocking your baby in your arms, making a loud “shushing” sound in your baby's ear, taking your baby for a car ride or walk outside in a stroller, playing calming music, warm baths, laying the baby down across the knees, tummy-down while rubbing the back, rhythmic motions or sounds, running the vacuum cleaner (sounds that mimic being inside the womb).

#### **Having a fussy or colicky baby can be stressful. What advice can you give other mom's to help relieve stress?**

Find support from friends or family members. Remember that the colic will not last forever and usually goes away at 3-4 months of age. Find someone to help you look over your baby while you leave the house. Take a walk, nap when your baby does, breathe deeply, listen to music, practice taking a mental vacation (visualize a happy place), stretch, use aromatherapy, find something that will make you happy.

**Optional Activity:** Instructor can demonstrate how to hold the baby on his/her side/stomach, how to gently swing or rock baby, and how to make a loud shushing sound in the baby's ear. Participants can practice this.

The instructor can lead participants in deep breathing to help reduce stress. Inhale deeply through the nose, hold for a count of 3, and exhale completely through the mouth. Do this 3 times. Parents can spend 5-10 minutes a day doing deep breathing for relaxation.

## FOOD SAFETY & STORAGE

**Resources:** “For Healthy Babies, Handle Bottles Safely” brochure Stock #: 13-06-12255 (Spanish #13-06-12255A)

“Food Safety At Home” brochure Stock #: 13-20 (Spanish #13-20A)

“Hand Expression & Storage of Breastmilk” brochure Stock #13-206 (Spanish # 13-206A)

**Optional Teaching Aids:** Visual aids of choking hazard items (packages or cut-outs), show example of baby jar safety button.

### Questions:

#### Once baby food has been opened, what is the best way to store it?

Do not leave opened baby food out for more than 2 hours. Refrigerate immediately to keep bacteria from growing. Do not store opened baby food for more than 3 days. When feeding, it’s best to put the amount of baby food you are going to use into a bowl, then refrigerate the leftovers instead of feeding directly from the jar. Saliva in the jar can lead to bacterial growth. When purchasing baby food, be sure to check the packaging. On jarred foods make sure that the safety button on the lid is down, for packaged foods throw away any packages that are leaking or swelling.

#### What are some safety tips for making your own baby food and storing it?

Wash hands with soap and hot water, thoroughly wash all work surfaces and equipment. Wash all fruits and vegetables before preparing, make sure that meats are cooked thoroughly and are free of bones and tough pieces. Foods should be pureed to their appropriate texture and consistency for your baby.

Prepared food should be fed immediately or stored in refrigerator or freezer. Foods that have been left out at room temperature for more than 2 hours should be thrown away.

Use freshly prepared refrigerated foods within 48 hours. Refrigerated meats, fish, and egg yolks should be used within 24 hours.

#### How should breastmilk be stored? For how long?

Location	Best used within	Still safe to use within	Temperature
Countertop	3 hours	3 hours	Room temperature must not be higher than 85 degrees F or 29 degrees C. Containers should be covered and kept as cool as possible

Insulated cooler bag	24 hours	24 hours	Keep ice packs in contact with milk containers and limit opening the cooler bag
Refrigerator	3 days	5 days	At or below 39 degrees F or 4 degrees C
Freezer section inside a refrigerator	2 weeks	2 weeks	At or below 5 degrees F or minus 15 degrees c
Freezer with separate door, or deep freezer	6 months	12 months	At or below 0 degrees F or minus 7 degrees C

**How should infant formula be stored?**

- Keep bottles of prepared infant formula in the refrigerator until ready to use.
- Throw out any formula that's left over after feeding. Formula that mixes with saliva can grow germs.
- Formula that's taken out of the refrigerator should be used within 2 hours or thrown out.

**Storage Guidelines for Infant Formula**

Refrigerated bottles of concentrated or ready-to-feed formula	Use within 48 hours of preparation
Refrigerated bottles of powdered infant formula	Use within 24 hours of preparation
Powdered infant formula stored tightly covered, in a cool, dry place	Use within 1 month of opening

**What are some things you should do when preparing infant formula to make sure it's safe?**

For infants less than 3 months of age, tap water and bottled water should be brought to a boil for one minute (not for longer which can concentrate any lead in the water) and allowed to cool before mixing formula. Never use hot water from the faucet to make baby formula or for cooking. Before collecting water, allow water to run for one to two minutes to reduce lead in the water in case the pipes contain lead.

Bottles, water, hands, can openers, and anything that comes in contact with the formula should be as clean as possible.

### **What is the best way to clean bottles, nipples, and feeding equipment?**

Items should be washed in hot water using dishwashing detergent and bottle brushes or clean dish cloths. Then place all items in a large pan, cover with water, and boil for 5 minutes. Remove all items and place on clean cloth or paper towel to air dry. Items can also be put in the dishwasher, but WIC recommends that for at least the first 3 months, equipment should be sanitized in boiling water for 5 minutes.

#### **Optional Activity:**

### **DENTAL CARE**

**Resources:** “Healthy Teeth for a Healthy Smile” stock #13-89 (Spanish #13-89A)

**Optional Teaching Aids:** Washcloth, gauze, teething ring, rattle, child sized toothbrush

#### **Questions:**

**How can we care for teeth and gums even before the first teeth appear? What about once teeth appear?**

Clean your infant’s mouth by wiping out the mouth gently and massaging the gums with a clean, damp washcloth or gauze. Do this after feedings or at least twice a day, including before bedtime.

As soon as teeth appear, clean twice a day, including before bedtime. Use a small, soft child-size toothbrush with water only. Continue cleaning using a clean washcloth or gauze pad to clean the areas without teeth.

**What can you do to help with teething discomfort?**

Chill a clean rattle, teething ring, or pacifier in the refrigerator and offer it for chewing. Do not offer ice chips or raw hard vegetables. If you are prescribed teething pain medicine, do not give it to your infant before mealtimes. This can interfere with chewing and can be dangerous.

**How can we help prevent infant tooth decay?**

Use bottles only for formula, breastmilk, or small amounts of water if needed (for more information see the “Beverages for Infants” section of this lesson). If giving juice, offer 100% pasteurized fruit juice only in a cup. Sweetened beverages should not be put in bottles. Give the bottle only at feeding times. Give only water between meals. Transition to a cup between 6 and 12 months and try to wean your infant off of the bottle by between 12 to 14 months (for tips on weaning from the bottle see the “The Weaning Process” section of this lesson). Take your infant for a dental check by 12 months of age, avoid sharing eating utensils, do not chew food then feed it to your infant. Bacteria that causes tooth decay in adults can be passed onto infants.

**Optional Activity:** Show optional teaching aids and discuss how each can be used to promote dental health.

## HEALTHY GROWTH AND ACTIVITY

**Resources:** “Watch Me Grow In My First Years” Stock #13-202 (Spanish #13-202A)

**Optional Teaching Aids:** Notecards and pens/pencils

**Questions:**

**Why is being active important for your baby? What are some things you do to encourage your baby or child to be active?**

Helps growing babies and children maintain a healthy weight and also develop their social skills, motor skills and brain development.

Let your baby crawl, roll over, and walk (be sure to childproof the home and supervise infants closely), tickle baby’s toes, gently play with hands and feet, playing peek-a-boo or patty cake, letting baby push against you, playing crawl and chase. Give toys that encourage infants to move around in a safe environment, try parent-infant play groups.

After feeding, try playing and talking with your baby instead of encouraging baby to sleep.

**When do growth spurts usually happen? How do growth spurts affect how much breastmilk or formula your baby consumes?**

Usual growth spurt times: 2 to 3 weeks, 6 weeks, 3 months. Remember that babies will increase their intake when they’re having growth spurts. Pay attention to your baby’s hunger and fullness cues. (For more information on hunger and fullness cues, see the section of this lesson- “Feeding Times & Amounts”)

**How do you know if your baby’s growth is on the right track?**

Checking your baby’s growth is the only sure way to know if your baby is on the right track. Your baby should have several check-ups during the first month, then periodic visits through four months. Newborns usually lose weight in the first few days of life but then return to their birth weight by 2 weeks. After that, babies should gain about 4 to 8 ounces per week. Infants usually double their birth weight by 4 to 6 months and triple by 1 year of age.

**Optional Activity:** Pass out notecards and have participants write down something they want to try doing with their infant to encourage activity.