



Preceptor Edition

Baby Behavior Guidebook

This training was created by the Arizona WIC program with materials adapted from UCDAVIS Human Lactation Center.

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What Will You Learn?

This course will help you understand baby behaviors in healthy, full-term babies from birth to 6 months old. Learning about baby behaviors can give you the knowledge you need to help parents make better feeding decisions and reduce their child's risk of obesity.

After completing the Baby Behavior LMS course, you will be able to:

- Identify the six infant states
- Understand the different types of infant cues and provide recommendations to help caregivers respond accordingly
- Understand why babies cry, and provide recommendations to help soothe crying babies
- Understand infant sleep cycles, and give recommendations to increase the amount of sleep for caregivers

Items Needed for This Course

- Pen or pencil
- Access to Baby Behavior LMS course

Recommended Time

- Approximate time it takes to complete the Baby Behavior LMS course: 2-3 hours
- Approximate time it takes to complete this Baby Behavior Guidebook and discussion with your preceptor: 1-2 hours

Things to Remember

- This guidebook is yours to keep.
- You are encouraged to take notes, highlight, and write in this guidebook.
- As your preceptor chooses, you may work in a group or as an individual.
- You are encouraged to ask your preceptor(s) for help, ask questions about the information in the course, or ask any questions about additional topics related to Baby Behavior training.

PRECEPTOR NOTE: As a preceptor, you are assessing trainees for their understanding of the Baby Behavior competencies for each module. The guidebook training activities are intended to help you assess both trainees' ability to apply basic knowledge and assess their critical thinking skills. Participation by trainees in the face-to-face activities and discussions is required in order for you to thoroughly assess their skills and level of competence.

Baby Behavior Course Instructions

- ☐ Log onto [MDH LMS-My Absorb](https://minnesota.myabsorb.com/#/login) (<https://minnesota.myabsorb.com/#/login>)

- Open and complete the Baby Behavior LMS course module and the corresponding Baby Behavior Activities in this guidebook.
- At your preceptor’s direction, complete the Baby Behavior LMS course and guidebook, either individually, with other trainees, or with your preceptor.
- Complete the Baby Behavior Post-Test.
- Meet with your preceptor at their direction to discuss each module of the Baby Behavior LMS course and the associated activities in this guidebook, either after each module, or after all modules have been completed.

PRECEPTOR NOTE:

Preceptor Steps:

- **At your discretion, trainees may work in groups or as individuals.**
- **At your discretion, you may review answers with trainees periodically as they complete activities of the Baby Behavior Guidebook, or after they have fully completed it. Please answer all questions the trainees may have and clarify any incorrect answer.**
- **“Possible responses” provided throughout the guidebook are suggested responses and are often not the only answers.**
- **If training more than one person at a time, be prepared for trainees to finish the coursework at different times. In order to have trainees review the face-to-face portions together, prepare a list of things that trainees who finish first can do during downtime (e.g., ask you questions for more clarification, check email, clinic observation, etc.).**

Module 1: Introduction to Baby Behavior

PRECEPTOR NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 1 COMPETENCIES:

1. Trainees will understand that many caregivers are confused regarding their infant’s behaviors.
2. Trainees will understand that many caregivers have unrealistic expectations about their infant’s behavior.
3. Trainees will understand that the way caregivers perceive their infant’s behavior impacts the way they respond to their infants.

4. Trainees will understand that many caregivers misinterpret their infant's cues, and will often try to feed their infants, even when they're not hungry.

Module 1: Activity

PRECEPTOR NOTE: Allow trainees time to read through the following activity and answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. What do you think may be some of the unintended consequences of trying to feed infants any time they cry, or when you want to try to get them to sleep longer?

Possible responses:

- **Caregivers will fail to address the actual problem that the infant is experiencing.**
- **Caregivers may continue to try to manage their children's behavior with food as their children get older.**
- **If caregivers' transition from breastmilk to formula, there could be a variety of lost breastfeeding-related benefits.**
- **If caregivers begin putting cereal in bottles in order to get their children to eat more/sleep longer, there is an increased risk of aspiration.**
- **Repeatedly overfeeding infants and children may lead to obesity**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 1, slide 4 of the Baby Behavior LMS course for the correct answers to the above question.

Module 2: Just Being Themselves

PRECEPTOR NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 2 COMPETENCIES:

1. Trainees will be able to identify the 6 infant sleep states: deep sleep, light sleep, drowsy, quiet alert, irritable, and crying.
2. Trainees will understand how light sleep is different from deep sleep.
3. Trainees will understand that some infants need help from their caregivers to transition from one state to another.
4. Trainees will understand that "repetition to soothe" is a common method of helping to transition babies out of the crying infant state.

Module 2: Activity

PRECEPTOR NOTE: Allow trainees time to read through the following activity and answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. What are some ways that you can tell if an infant is in light sleep or deep sleep?

Possible responses:

Infants in light sleep will show the following signs:

- Intermittent body movements
- Irregular breathing
- Facial twitches
- Rapid eye movement (REM)
- Wake very easily

Infants in deep sleep will show the following steps:

- No body movements
- Rhythmic and regular breathing
- Intermittent bursts of sucking
- Do not respond
- Very hard to wake

PRECEPTOR NOTE: At your discretion, refer trainees to Module 2, slides 6-7 of the Baby Behavior LMS course for the correct answers to the above question.

2. How would you describe repetition to soothe to caregivers who struggle to calm their crying babies?

Possible response:

Repetition to soothe is a repetitive calming technique that a caregiver can use to calm a crying baby. In order for repetition to soothe to be effective, a caregiver should focus on using the same repetitive technique (e.g., patting, rocking, swaying, etc.) for several minutes before trying something else if the infant continues to cry.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 2, slides 10 of the Baby Behavior LMS course for the correct answers to the above question.

Module 3: Special Considerations

PRECEPTOR NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 3 COMPETENCIES:

1. Trainees will be able to differentiate between engagement and disengagement cues.
2. Trainees will be able to identify hunger and fullness cues.
3. Trainees will understand that infants cry for many reasons, not just because they're hungry.
4. Trainees will understand some reasons for persistent crying and be able to provide tips for babies that cry persistently.

Module 3: Activity

PRECEPTOR NOTE: Allow trainees time to read through the following activity and answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. In your own words, describe the difference between engagement and disengagement cues. List examples of each.

Possible responses:

Infants display engagement cues to let caregivers know that they want to be near them, or that they're ready to play and learn. Examples of engagement cues are:

- **Looking intently at faces**
- **Rooting**
- **Feeding sounds**
- **Smiling**
- **Smooth body movements**
- **Open eyes**
- **Relaxed face**
- **Feeding posture**
- **Raising head**
- **Following voices and faces**

Infants display disengagement cues to let caregivers know that they need something to be different. Examples of disengagement cues are:

- **Turning, pushing, or arching away**

- **Crying**
- **Choking**
- **Coughing**
- **Extending fingers**
- **Holding hands stiff**
- **Falling asleep**
- **Looking away**
- **Faster breathing**
- **Yawning**
- **Putting hands to ears**
- **Grimacing**
- **Glazed looks**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 3, slides 3-4 of the Baby Behavior LMS course for the correct answers to the above question.

2. List 5 different hunger cues.

Hunger Cue #1:

Hunger Cue #2:

Hunger Cue #3:

Hunger Cue #4:

Hunger Cue #5:

Possible responses:

- **Clenched fists**
- **Fists over their chest and tummy**
- **Bringing hands to their face**
- **Flexed arms and legs**
- **Mouthing**
- **Rooting**
- **Fast breathing**
- **Sucking noises or motions**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 3, slide 6 of the Baby Behavior LMS course for the correct answers to the above question.

3. List 5 different fullness cues.

Fullness Cue #1:

Fullness Cue #2:

Fullness Cue #3:

Fullness Cue #4:

Fullness Cue #5:

Possible responses:

- **Slowing or decreasing sucking**
- **Extending arms and legs**
- **Extending and relaxing fingers**
- **Pushing away**
- **Arching away**
- **Falling asleep**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 3, slide 7 of the Baby Behavior LMS course for the correct answers to the above question.

4. How can a caregiver determine if a baby is crying because they are hungry, or if they are crying for some other reason?

Possible responses:

In addition to crying, infants that are hungry will often show other hunger cues (e.g., clenched fists, fists over their chest and tummy, bringing hands to their face, flexed arms and legs, mouthing, rooting, fast breathing, sucking noises or motions, etc.).

PRECEPTOR NOTE: At your discretion, refer trainees to Module 3, slide 11 of the Baby Behavior LMS course for the correct answers to the above question.

5. What are some reasons that babies may cry persistently (a lot)?

Possible responses:

- **Immature bodies**
- **Unable to self soothe**
- **Unable to regulate their own states**
- **Have trouble giving cues that caregivers understand**
- **Illness**
- **Injury**
- **Gastrointestinal (digestive) problems**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 3, slide 14 of the Baby Behavior LMS course for the correct answers to the above question.

6. What tips would you offer to caregivers of babies who cry a lot?

Possible responses:

- **Get help from family and friends**
- **Address cues early to help reduce, but not eliminate, crying**
- **Reduce stimulation in environment**
- **Use soothing techniques**
- **Seek medical or other professional help**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 3, slide 15 of the Baby Behavior LMS course for the correct answers to the above question.

Module 4: Infant Sleep

PRECEPTOR NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 4 COMPETENCIES:

1. Trainees will be familiar with caregivers' misconceptions regarding infant sleep.
2. Trainees will be familiar with infant sleep cycles.
3. Trainees will understand the importance of night waking.
4. Trainees will be familiar with some of the reasons for excessive night waking.
5. Trainees will be able to provide caregivers with some recommendations to increase the amount of sleep they get.

Module 4: Activity

PRECEPTOR NOTE: Allow trainees time to read through the following activity and answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. What advice would you offer to a caregiver who is considering switching from breastmilk to formula in order to get their infant to sleep longer?

Possible responses:

You've done a great job by breastfeeding/giving breastmilk to your baby thus far, and I would encourage you to continue since there are so many benefits of breastfeeding and switching to formula will not help your baby sleep longer at night. It's also important to remember that night waking is normal. Babies need to wake frequently

at night in order to ensure that their needs are met. Your baby will naturally start sleeping longer when she gets a little older.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 4, slide 2 of the Baby Behavior LMS course for the correct answers to the above question.

2. Match the description of each infant sleep cycle with the associated age range by drawing a line to the match the sleep cycle description to that of the age range.

Sleep Cycles

- A. Starts in light sleep state, transitions to deep sleep after 5-10 minutes, starts to have one longer deep sleep period at night
- B. Starts in deep sleep state, less likely to be easily awakened after being put down to sleep
- C. Starts in light sleep state, transitions to deep sleep after 20 to 30 minutes, wakes easily after being put down to sleep

Age Ranges

- a) Newborn
- b) 2-3 Months
- c) 4+ Months

PRECEPTOR NOTE: At your discretion, refer trainees to Module 4, slide 5-7 of the Baby Behavior LMS course for the correct answers to the above question.

3. What are some of the benefits of light sleep and night waking?

Possible responses:

- Light sleep and dreaming are important to babies' brain development.
- Newborns' stomachs are tiny, so they need to eat small amounts often.
- Newborns who are too hot or cold need to wake up and get the attention of the caregiver to help change the environment.
- The hormonal cycles of breastfeeding mothers are interrupted by night feeds.
- Most breastfeeding mothers who wake to feed their babies at night will not resume their periods until their baby is older.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 4, slide 8 of the Baby Behavior LMS course for the correct answers to the above question.

4. What are 5 reasons for excessive night waking?

Reason #1

Reason #2

Reason #3

Reason #4

Reason #5

Possible responses:

- **Baby's body is immature**
- **Baby hasn't gotten enough to eat**
- **Too much stimulation before naptime or bedtime**
- **Illness or injury**
- **TV or intermittent stimulation**
- **Changes in routine**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 4, slide 10 of the Baby Behavior LMS course for the correct answers to the above question.

5. What advice would you offer to a caregiver who complains of not getting enough sleep?

Possible responses:

- **Keep their babies nearby at night**
- **Keep the lights low when they feed, burp, or change the baby's diaper**
- **Try to sleep whenever they get the chance**
- **Ask for help with housework, the yard, and taking care of other children**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 4, slide 11 of the Baby Behavior LMS course for the correct answers to the above question.

Module 5: Support for Caregivers

PRECEPTOR NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 5 COMPETENCIES:

1. Trainees will know the ideal times to share messages with caregivers about crying, sleep, and cues.
2. Trainees will be able to share key messages with caregivers about crying and sleep.

Module 5: Activity

PRECEPTOR NOTE: Allow trainees time to answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. When is the best time to share messages with caregivers about crying?

Possible response:

The best time to educate parents about crying is either before the baby is born or very shortly after birth.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 5, slide 2 of the Baby Behavior LMS course for the correct answers to the above question.

2. When is the best time to share messages with caregivers about sleeping?

Possible response:

During pregnancy or very shortly after birth

PRECEPTOR NOTE: At your discretion, refer trainees to Module 5, slide 3 of the Baby Behavior LMS course for the correct answers to the above question.

3. When is the best time to share messages with caregivers about cues?

Possible response:

Shortly after the baby is born is the perfect time to teach parents about baby cues.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 5, slide 8 of the Baby Behavior LMS course for the correct answers to the above question.

4. What are 3 key messages you could share with caregivers about crying?

Key Message #1

Key Message #2

Key Message #3

Possible responses:

- **Crying is an important way that babies communicate when they really need something.**

- There are many reasons why babies cry.
- Understanding and responding to cues will reduce crying.
- Use repetition to soothe when needed.
- Persistent crying affects only a few babies, and those babies don't necessarily have colic or digestive issues.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 5, slide 2 of the Baby Behavior LMS course for the correct answers to the above question.

5. What are 3 key messages you could share with caregivers about sleeping?

Key Message #1

Key Message #2

Key Message #3

Possible responses:

- Babies have two types of sleep, light and deep, and babies need both to be healthy.
- Their sleep patterns change over time, and eventually they wake up less.
- Some parents may need to wait to put their newborns down until the babies stop dreaming because babies in light sleep can wake easily.
- Parents can encourage light sleep and dreaming by laying babies on their backs to sleep.
- Babies need to wake up often to feed.
- You will need help at home because you may not get enough sleep after your baby is born.
- Babies' sleep patterns change over time, and eventually they wake up less.

PRECEPTOR NOTE: At your discretion, refer trainees to Module 5, slide 3 of the Baby Behavior LMS course for the correct answers to the above question.

Module 6: Caregiver-Infant Interaction

PRECEPTOR NOTE: It is recommended for you to review the competency below with trainees.

MODULE 6 COMPETENCIES:

1. Trainees will understand the 3 steps needed to promote successful caregiver-infant interactions.

Module 6: Activity

PRECEPTOR NOTE: Allow trainees time to answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. What are the 3 steps involved in successful caregiver-infant interactions?

Step #1:

Step #2:

Step #3:

Possible responses:

- **Engage: Say something about the baby's behavior that the caregiver will recognize.**
- **Validate: Use the baby's name and appropriate pronoun (he/him or she/her). Highlight the baby's skills in communicating with the caregiver.**
- **Provide basic relevant information to help meet the baby's needs. Focus on cues, crying, and sleep.**

PRECEPTOR NOTE: At your discretion, refer trainees to Module 6, slide 1 of the Baby Behavior LMS course for the correct answers to the above question.

Module 7: Course Summary

PRECEPTOR NOTE: It is recommended for you to review the competency below with trainees.

MODULE 7 COMPETENCIES:

1. Trainees will be able to answer frequently asked questions about baby behavior.

Module 7: Activity

PRECEPTOR NOTE: Allow trainees time to answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. The following are frequently asked questions (FAQs) that caregivers have about their baby's behavior. Indicate what you think would be the best response for each question below.

a. “Why does my baby wake so easily?”

Possible response:

There are two different types of sleep: light sleep and deep sleep. Babies in light sleep are dreaming, move periodically, and are very easy to wake, whereas babies in deep sleep are motionless and are much harder to wake. Young babies fall asleep in light sleep, so it’s a good idea to wait to see signs of deep sleep before laying them down. Once babies are around 4-5 months, they begin falling asleep in deep sleep, and it becomes much easier to lay them down right after they fall asleep without waking them.

b. “When will my baby sleep through the night?”

Possible response:

The length of time that babies sleep will get longer as they get older. Many babies are able to sleep around 6 to 8 straight hours at night by 6 months of age, which many doctors consider “sleeping through the night.”

c. “I’ve tried everything; why won’t my baby stop crying?”

Possible response:

Sometimes trying too many strategies in a short period of time can be too much for babies. Try repetition to soothe by using the same one or two actions over and over again for several minutes before trying something else. These actions could include things like swaying, patting, rocking, singing, and stroking.

d. “If I immediately respond to all of my baby’s cues, will that spoil her?”

Possible response:

Immediately responding to your baby’s cues won’t spoil her. On the other hand, by responding to her cues early, you’ll help her to practice and repeat cues that work and reduce her crying.

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