“Aren’t babies amazing? They can tell us that they ‘need something to be different’ or they ‘want to be near us’ by using their bodies and making noises. What do you think your baby is trying to tell you right now?”

This is just one example of how one might open a discussion about baby cues with a new mom. Even when we introduce cues prenatally, nothing can replace a parent’s own experience with their baby to understand how babies communicate.

**Look for opportunities** to weave baby behavior into the infant certification appointment.

- **Is the baby sleeping?** How can you talk about light sleep/deep sleep/sleep patterns?
- **Did the baby start crying while being weighed?** How can you talk about baby being bothered by what’s going on outside his body, like bright lights, noises, change in temperature?
- **Is the baby wiggling his face and squirming, and then passing gas?** How might this be an opportunity to talk about babies being bothered by things going on inside their bodies?
- **Do you see mom feeding the baby a bottle, yet the baby is giving fullness cues?** How might you use this as an opportunity to talk about how subtle fullness cues can be, and maybe even utilize the fullness clip as a visual? *(See attached scenario)*

**The best visual aid is mom’s own baby!** If the baby is sleeping, then back-up tools such as the baby behavior brochure or the video clips can be utilized.

**Tailor the education to the needs of the parent.**

*Have a conversation. Listen to what mom is saying. Observe mom and baby interactions.*

These things will help you assess mom’s understanding of her baby’s behavior. If mom states that she “doesn’t have enough breastmilk”, evaluate her understanding of her baby’s behavior and what is normal first, then move on to more clinical evaluation questions.

And finally, don’t forget that exhausted new parents need to hear that message of hope:

“As you recognize and respond to your baby’s cues, you both will get better and better at communicating with each other and things will get easier”
Staff Activities for Reviewing Cues:

- **View the Question/Answer Portion of the Cues Section** of the “Getting to Know Your Baby” DVD. Listen to how Dr. Heinig answers common questions about crying.
  - Practice answering the same questions *in your own words*
  - Think about other questions/comments you hear from participants about crying. How might you answer these questions?

- **View the baby vignette portion of the Cues Section** of the “Getting to Know Your Baby” DVD. Listen for key messages about cues.

- **Watch the video clip “Fullness Cues”** (note: this clip is posted on You-Tube and is also available on Education Clips DVD)
  - Role play with a coworker, utilizing the Role Play Scenario (last page)
  - Practice using the “Fullness Cues” video with a different scenario, using your own words.

- **Practice with “Teachable Moments”** scenarios from BB Spotlight #3 or come up with your own scenarios for practice.

**Next Spotlight**: will feature a creative Baby Behavior staff training idea shared by a local agency staff person!

Do you have a BB success story? Training idea? Innovative way to use BB? We invite you to share - email valerie.haack@state.mn.us
Role Play Scenario:

First time mom, Sarah is enrolling her 2 week old baby Seth. As you call Sarah back for her appointment, you notice that Seth is in the car seat, almost asleep, and Sarah has been holding the bottle in his mouth as she checks Facebook on her phone.

You weigh Seth, during which he fusses a little bit but is still pretty sleepy. Sarah puts Seth back in his car seat, and returns the bottle to Seth’s mouth. Seth is now in light sleep, he continues to occasionally suck on the bottle and Sarah continues to hold it in his mouth.

(PCS techniques noted)

**CPA:** Look at Seth! What a cute little baseball outfit! (building rapport)

**Sarah:** Yeah, his Grandpa gave it to him. He wanted to make sure he was dressed right for the big Cub’s win! *(Sarah takes the bottle away so you can see the outfit better)*

**CPA:** Awe, that’s really sweet. Sounds like Grandpa thinks this little guy is pretty special.

**Sarah:** Well Grandpa doesn’t see him when he’s screaming in the middle of the night!

**CPA:** Yes, those first few weeks can be rough, (affirming) especially because babies only sleep a few hours at a time—and that includes the middle of the night.

**Sarah:** I remember talking about that at my last WIC appointment, and you’re right, it is hard, but I know it’s totally normal, so I just have to get through it.

**CPA:** I like your “can do” attitude. (Affirming) And as Seth gets a little older he will sleep for longer stretches, and he will figure out when its night time, making things a little easier. (Educating)

**CPA:** What cues does Seth use to try to communicate things to you? (Open-ended Question)

**Sarah:** Well he sure knows how to tell me when he’s hungry! It seems like he eats all the time.

**CPA:** How does Seth let you know he is hungry? (Exploring)

**Sarah:** His whole body starts to sort of wiggle, and he starts sucking on his hands and looking for the bottle. He sometimes even makes grunting noises.

**CPA:** Sounds like he’s a real talented little boy who knows how to let mamma know what he needs! Those are definitely hunger cues that you are describing. (Affirming)

**CPA:** Fullness cues can sometimes be a bit trickier to recognize than hunger cues. In fact when I had my first baby, I remember thinking, “is she finished with the bottle, or not?” (Normalizing) I have a really short one minute video clip of a baby showing fullness cues. Would it be ok if we watched it, and then we can talk about how Seth shows you he’s full? (Asking Permission)

**Sarah:** Sure, why not. *(Fullness Cues with voice-over is viewed)*

**CPA:** What are your thoughts on what you saw? (Exploring)
Sarah: Well, I had no idea that babies keep sucking even after they are full because it’s a reflex. In fact, I think I may sometimes keep giving Seth his bottle after he’s already asleep and is probably done. (Change Talk)

CPA: That sucking reflex makes us think they are still wanting more because we see them sucking. (Normalizing)

Fullness cues are sometimes hard to recognize. (Educating)

When you see Seth: *(Show BB brochure if helpful)*
- Suck slower, or stop sucking,
- relax his hands and arms
- turn away from the bottle,
- push away or fall asleep,

He is telling you that he is full.

Sarah: Ok. Well, I do notice that he starts sucking slower. And then he falls asleep. So I just need to take the bottle away from him at this point because he’s done? (Change Talk) (Self-summary)

CPA: Yes! You’ve got it! Baby’s cues are sometimes tricky to figure out because they can’t tell us exactly what they want, but as you respond to Seth’s cues, he will get better and better at telling you what he needs, and things will get easier. (Message of Hope)

Sarah: I hope so. This parenting stuff is hard!