

# *The Normal Course of Breastfeeding*

*Your baby doesn't match your books! Who's right? The baby or the books?*

**Babies are adaptable.** *You may be able to “bend” your baby’s behavior to fit your favorite book. But your baby is the way she is because that’s the way babies have always been. Here’s what seems to have been “normal” for human mammals for thousands and thousands of years:*

**Normal pregnancy** did not involve large amounts of many of today’s allergic foods. If your baby’s family has strong allergic tendencies, you may do well to avoid dairy products, eggs, and peanuts, at least during the third trimester. There is some evidence that avoiding them then and during early breastfeeding can help your child avoid a sensitivity to them.

**Normal birth** took place in a quiet, private place where the mother felt at ease. It did not involve labor drugs, which interfere with a baby’s ability to nurse and interact normally. It probably included an experienced woman, or “doula,” who “mothered the mother” during the labor. Research indicates that hospital birth is no safer than midwife-attended home birth for the average woman, and that an epidural is no more effective than a doula in keeping her comfortable.

**Normal postpartum connections** occurred without the baby being taken from the mother *at all*. Within the first hour, but maybe not immediately, the baby began to seek the breast, and nursed for perhaps an hour or more. He probably spent most of his time at breast for the first few days. Because the mother knew from long observation how to hold a baby for nursing, she was unlikely to feel pain. Pain is a powerful signal to every mammal that something needs fixing.

**Normal mothering** meant carrying the baby during the day and sleeping with the baby at night. No wheels, cribs, or separate room. Mothers mixed their work with frequent, quick nursings, often using only one breast each time. Babies were usually neither starved nor stuffed but in some happy place in between. The notion of a 2 hour average spacing is based in wishful thinking, not human biology. Some babies can wait that long, some gain poorly and wean early with that approach. Breastfeeding more often is actually easier, just as taking frequent short breaks at work is less disruptive and more restful than having only one long break in the middle of a long workday. All of a baby’s sucking provided calories - no stalling the baby with a no-cal pacifier. On the other hand, a baby who breastfeeds constantly and never seems satisfied may not be getting milk effectively; someone knowledgeable about breastfeeding needs to take a look.

**Normal weaning** probably occurred somewhere between 2½ and 7 years of age. That means that a one-year-old’s body, bones, and personality are geared for a diet of mostly breastmilk, not mostly solids. Breastfeedings probably tapered off so gradually that often neither mother nor child knew exactly when the final nursing happened.

**Normal nursing** was pleasant - for both mother and baby. Otherwise, why would she have bothered? If breastfeeding isn’t fun for you, check with a breastfeeding specialist. You both deserve to enjoy it!

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## ***LOW-TECH MOTHERING***

***- it's healthier, safer, cheaper... and easier!***

Caring for a new baby is much harder and much easier than you think it's going to be. Harder, because your baby will need you more than you realized. Easier, because many of the rituals of the bottle-feeding generations are disappearing. **Here are some of the things you DON'T have to do:**

√**YOU DON'T HAVE TO LEARN YOUR BABY'S CRIES** Most nursing mothers never really do. At your baby's first sign of distress, offer to nurse. If that doesn't work, try something else, then offer again. Breastfeeding solves a multitude of baby problems besides hunger.

√**YOU DON'T HAVE TO GIVE A DAILY BATH** Babies get dusty, not dirty. You'll be cleaning the only really messy part at diaper changes. Otherwise, do whatever you both enjoy. Some babies hardly ever get a bath... and they're glad. Others really like having a bath almost every day. To make bathtime even easier and more fun, get in the tub together.

√**YOU DON'T HAVE TO SET UP A SCHEDULE** Babies are flexible and portable. They sleep happily in your arms, in your lap, on the go, and they let you know when they need you. Your baby may set up his own schedule, or he may not. Either way, it's bound to change, so why worry about it?

√**YOU DON'T HAVE TO BUY BABY EQUIPMENT** All she really needs are diapers, clothes, a car seat, and perhaps a sling. A nursing baby has no need for bottles, pacifiers, or a special shelf in the refrigerator. Your arms are far better company than heartbeat teddies, swings, strollers, or crib gyms. And more than one baby has slept peacefully in a laundry basket during the day and with her parents at night.

√**YOU DON'T HAVE TO GET UP FOR THE 2 AM FEEDING** Just keep your baby nearby, in bed with you if you like, and roll over to nurse before either of you really wakes up. You'll get the hang of it with a little practice. (No, you won't roll over on him, if you're not on any "sleepy drugs" or lying on a soft, sink-in mattress. When was the last time you fell out of bed? You'll be just as aware of your baby as you are of the edge of your bed.)

√**YOU DON'T HAVE TO CHANGE DIAPERS IN THE DARK** One of the best-kept secrets of baby care is that you don't *have* to change the baby at night, if he doesn't mind being wet. (Of course, if he has frequent stools or a rash, you'll want to keep him clean and dry. If you keep some spares at bedside, you still won't have to get up completely.)

√**YOU DON'T HAVE TO FUSS WITH BABY FOODS** The experts agree: human milk is *all* a human baby is designed to have for the first half year or so. By waiting until she can sit up and finger-feed herself, you'll bypass the mess - and expense - of commercial baby foods.

√**YOU DON'T HAVE TO INVEST IN NURSING CLOTHES** Most of us just wear the two-piece outfits we already own. Pull the hem up on one side to nurse; the baby covers any bare spots. For nighttime, try a gown with buttons down the front, or a short top.

**What your baby does need is you and your arms.  
The substitutes are high-priced. The original is priceless.**

## *Nursing, in a Nutshell*

- 1. The more often you remove milk,** the more milk you will have. The more milk your baby takes from you, the more milk your body will make. It's a very simple system!
- 2. Enough milk?** Most women are capable of nursing twins! In the early weeks, several poopy diapers and 6 to 8 heavy/wet diapers a day usually mean there's plenty of milk "going in". And your milk is the *normal* food for your baby, always changing to meet his changing needs.
- 3. Some babies are sleepy** at first and need encouragement to nurse frequently, but many newborns like to nurse *a lot*. Many newborns nurse much more often than the books say (especially in the evening!). But as they grow, their "nursing marathon" tapers off. Really!
- 4. Nursing provides** warmth, security, body contact, reassurance, and relaxation, as well as food. Don't try to put your baby's favorite activity on a schedule. Forget the clock and enjoy each other, the way nursing was meant to be.
- 5. Big or small,** fat or thin, thriving babies do best with only mother's milk for the first half year or so. Even water is unnecessary. And don't worry about overfeeding. There is no evidence that breastfed babies gain any more than their "programmed" amount, however often they nurse. You *cannot* nurse a growing baby too often; you *can* nurse too little.
- 6. Sometimes nipple pain is a concern.** Hug your baby's shoulders close so that his chest is snug against you, his body angled down below your other breast. Hold him so that his *nose* is near your nipple, so that he tips his head back slightly to reach it. Keep all your fingers *well* out of his way. When he opens wide, let his lower jaw land first, nipple in last, his lower lip as far as possible from your nipple. Snug him in so that his cheeks touch your breast. With his head tipped back, his nose should be free. For help, try La Leche League at [www.lalecheleague.org](http://www.lalecheleague.org), or an International Board Certified Lactation Consultant (IBCLC) at [www.ilca.org](http://www.ilca.org).
- 7. Returning to work?** You can still nurse your baby! It is the only thing you can do for your baby that no one else can do. Check with a La Leche League Leader or IBCLC on how to manage the details. Nursing for even a few weeks gives your baby a great start.
- 8. Do your breasts feel "empty"?** Don't be fooled! As long as you are a nursing mother, they will never be empty. And waiting for your breasts to "fill up" before feeding your little one can actually *reduce* your milk supply. After a month or so, your production will match your nursing's demand and you won't feel full. But the milk will still be there.
- 9. You and your baby are unique.** Listen, learn, and sift out the ideas that feel best for *the two of you*. Your nursing relationship will not be exactly like any other.
- 10. It's worth repeating:** Nursing frequently is the best way to ensure a good milk supply and a healthy and happy baby. It's a system as old as humankind, and it works just fine.

## **Better Than Breast Feeding!**

If you are a new mother, you may find that you "Breast Feed" your baby in the early weeks by thinking of your breast as a flesh-covered bottle. You may worry that you can't count the ounces, and wonder if your baby is getting enough. You will find yourself saying, "She can't be hungry again; she just ate!" You may firmly believe that a clock is essential "Breast Feeding" equipment, and if you're like some of us, you'll keep a diary of "Feedings" and time them with a stopwatch!

Gradually, you may find that you can't remember when she last "ate", or for how long, and you won't care. You won't know how often she roused at night, because you just rolled over, offered your breast, and went back to sleep. You'll have no idea how often you put your baby to breast each day. It's simply the easiest way to mother. You're not "Breast Feeding" anymore; you're "mothering your baby at your breast." You're Nursing!

A nursing relationship is a short, irreplaceable time in your life. After the first few weeks of getting to know that little stranger and adjusting to motherhood, you'll realize that you're happier with your baby than without her, and that your need to "get out" is more a need to socialize than to escape your baby. Since she's nursing, she's easy to take along - no extra bottles, no dangling pacifier, no cooler to keep the formula from souring. You'll find she fits easily on your hip or in a sling, and you'll figure out that she cries much less if she's in your arms.

You may discover that sitting down to nurse helps you "mellow out" on a bad day. That's not just because you're resting. The hormones produced during a nursing session actually help you cope with stress more easily.

You'll find the two of you have so many good reasons for nursing - to soothe away a hurt or scare, to gentle her off to sleep, to keep her busy while you're on the phone - that your baby is hardly ever really hungry, and has one less reason to cry.

After a few months, your baby will smile up at you while she nurses, and maybe pat your face. But when she smiles, milk will run out the corner of her mouth, and she'll have to get back to work. Your earliest games together may be at the breast - peekaboo with your blouse, or baby-toes-in-your-mouth. One day, you'll look down at her in your arms, sound asleep at your breast, and know that you're offering her one of life's greatest luxuries.

If the two of you nurse long enough, she may even tell you how wonderful it is: "Mommy, your nee-nees are nicer than nobody else's!" or just, "Mmmm good!" Eventually, your little one will move on to other things, but as one new weanling told her mother with satisfaction, "Mommy, your milk will last me forever."

"Breast Feeding?" No. *Nursing!*

## ***Respecting Your Baby***

*Babies are brilliant, sensitive, inexperienced people. In respecting your baby's body and abilities, you set the stage for a lifetime of mutual respect.*

***Mouth.*** Your baby senses the world largely through her mouth. If her very first mouth experience feels like an assault (vigorous suctioning, or a forceful finger or bottle), she may not willingly draw a breast into it for some time. Ask her permission before putting anything in her mouth.

***Appetite.*** When a newborn wants to suck, she wants food, not a finger or pacifier. Respect her ability to know her needs. If you feel she's never satisfied, check with a breastfeeding specialist.

***Ears.*** Have someone kiss you on your own ear, so you can see what the volume is like.

***Hands.*** If a baby's hands are washed immediately after birth, he loses the smell and taste he has always known, and may not nurse as readily. If his hands are kept in mittens "to protect his face", he's unable to comfort himself with them or to connect with his world, and may not feed well.

***Crying.*** Some babies cry for reasons we just can't figure out. If that's the case, your baby will certainly appreciate being held while you try to help. But most crying is simply for lack of feeding or holding. Vigorous crying stresses a baby's heart and brain and does nothing to "exercise his lungs". Respect your own instincts, and respond to cries.

***Penis.*** If you want to circumcise your son for other than religious reasons, consider that you will be destroying highly sensitive, functional skin without his permission. Very few men with an intact foreskin want to lose it. The health risks of an intact foreskin are no greater than the risks of removing it. Circumcision has been linked to heightened future responses to stress and pain.

***Diaper changes and baths.*** If your baby becomes distressed midway, consider taking a few minutes to nurse or console her. Soon changes and baths will be among her favorite activities. Until then, imagine what it would be like if you cried from fear and no one seemed to listen.

***Skin.*** Our skin is our largest organ. Babies love to feel their own bare skin against a parent's. With a blanket over the two of you, you provide more effective warming and more stable "vital signs" than the most expensive hospital warming unit. Our skin normally produces our vitamin D, but only when exposed to sunlight. Run errands with your baby, without the automatic blanket-over-the-face, so he can enjoy the sights and sunlight and produce his own vitamin D naturally.

***Play.*** Your baby is most open to play during those "quiet alert" times when he's neither hungry nor sleepy. Mimic his expressions. Make a face at him, slowly and several times, and he may attempt the same one – even to sticking out his tongue. But babies tire quickly. When he looks away, yawns, or puts his hands up stiffly, playtime is over and the respectful player lets him snuggle in-arms.

## *Ah, Nights...*

I tried to nurse my husband's elbow once. Groggy, desperately sleep-deprived, I heard my baby cry and fumbled in the bed for him, putting the nearest warm thing to my breast. But my son was down the hall, in his own crib, where we returned him after most nursings. That's why I was sleep-deprived.

Our first routine was for my husband to get up each time the baby cried, and bring him to me to nurse (sitting up) on Side One. Then my husband would get up, take the baby to the bathroom, change his diaper, and return him to me to nurse (sitting up) on Side Two. Then my husband would get up and return the baby to the crib down the hall. Three trips out of bed each time those eight pounds of energy woke up. That lasted three nights.

But it took us two babies to get it completely right. Our second baby shared our bed from the start, with a rubber-and-flannel sheet under baby and mother to catch any drips from either one. There was an extra diaper handy at bedside until he stopped pooping at night, an extra nightgown or two until I stopped leaking, and a nightlight in the early days to help me line up my inexperienced partner of unaccustomed dimensions without either of us moving from our nest.

I nursed the "bottom breast" until it was soft, and later in the night rolled over a bit farther to nurse the "top breast", looming over him like a tent, elbow resting on the far side of him. When his doctor asked me how often he nursed at night, I answered, "I have no idea," and thought how right and simple that answer was.

Nights weren't perfect, of course. Parenting never is. There were gaps in the bedding that let in cold air. There were nights when I wished he would just sleep. There were semi-conscious wrestling matches between a father who wanted part of the bed to himself and a little boy who liked to sleep with his leg over his father's.

But we never knew night terrors or head-banging - two childhood behaviors that Americans consider normal and zoos consider signs of stress in their monkeys. I never walked cold floors. He woke happy in the morning and so did we. And no "body pillow" can match the relaxation and peace of cuddling a child in bed.

Our sleep arrangements varied over time; our policy was to do whatever gave the most people the most rest tonight. Once he graduated to his own bed, he and his brother often shared it, or he came in with us partway through the night. Or I moved in with him - a luxury for me, because his was the most comfortable mattress in the house. When he stopped waking in the night - and stopped climbing in with us - we reminded our children that they were always welcome, but they said, "oh, no thanks." And that was that.

We miss the smell and feel and snuggliness of those little bodies. It's a time that comes only once, and we'll never get it back. Maybe if our grandchildren come for overnights...

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## *Safe Sleeping*

Is it safe to sleep with your new baby? Of course. Imagine a cave woman laying her defenseless newborn in a separate niche in the cave for the night, well away from the warmth and protection of her body. Now that's unsafe sleeping!

Of course it's not safe to sleep with a baby if you've been drinking heavily or taking drugs that keep you from rousing normally. It's also unsafe to have gaps that would allow your baby to slip between bed and wall or between mattress and frame; or to lay your baby on poofy pillows, bedding, or mattress from which he can't free his face. It's much easier to change our bedding than our biology.

There. That's out of the way. What's left? Adults who are never completely unconscious (or they'd fall out of bed), sleeping with a very lumpy object (with a head like a grapefruit-sized rock) that yells when it's squeezed. Works fine.

What do you gain? Normal breathing and heart rates for your baby, without the breathless periods so often observed in solitary-sleeping babies. Normal baby sleep - which does not mean long hours of deep, hard-to-rouse-from sleep, though that might seem desirable. An even body temperature for him, warmer and more stable than the most expensive hospital baby-warming unit can provide. A mellower baby at night, with far less crying. Safety from fire, kidnapping, and goblins. Lots of languid cuddle time.

You certainly gain vastly easier baby-care, especially if you learn to breastfeed lying down during the day, when your tolerance and inventiveness are intact.

Infant sleep researchers believe solitary sleep may be linked to higher rates of SIDS. This is a very difficult relationship to prove, since sleep arrangements change and since SIDS may have multiple causes. But we do know that many of the risk factors associated with SIDS are increased when babies sleep alone, and that cultures that share sleep tend to have low rates of SIDS. Shared sleep is as old as humankind, and small children crave it.

Shared sleep takes many forms. At our house, a lack of creativity kept us in an antique bed narrower than today's standard double. Many nights there were four of us in it! If I had it all to do again, I would invest in a king-sized mattress and put it on the floor for those early years of parenting. Everyone would have plenty of room, and even an acrobatic toddler couldn't fall far. We sacrificed comfort for convention, in a part of the house that no one but the sleepers themselves ever saw or used. Silly.

For more thoughts on sharing sleep with your baby, see William Sears's book, "Nighttime Parenting," published by La Leche League International and in most libraries and bookstores. Sweet dreams! And remember that nowhere is it written that we're entitled to 8 hours of unbroken sleep. Going to bed earlier helps!

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## *Wearing Your Baby*

Babies are built to be carried. A baby's instincts tell him that he isn't safe on his own, so he cries to be held. His heart rate and breathing are less stable when he's alone. And our milk, unlike the milk of rabbits or other leave-them-in-the-nest mammals, is tailored for frequent nursing - no problem if we're already holding the baby.

Wearing a baby is healthy and cheap. If manufacturers can convince parents that human contact isn't adequate or easy, they can sell strollers, cribs, heartbeat teddies, intercoms, infant seats, swings, playpens... the list is endless. But separation is good for business, not babies.

Wearing your baby just means getting out an old shawl, length of cloth, or purchased sling, and going on with your life. Tying your baby *on* means your baby won't tie you *down*! Mothers find they have more energy for loving when they put less energy into separating. At home, your baby has the comfort of constant holding and the brain-building stimulation of changing sights and positions, rather than being stored in a swing with a pacifier for excitement. On the go, doors and stairs are no problem, and the sling offers privacy when he wants to snack in the checkout line. Your baby is at eye level with the grown-up world, and you'll find that everyone includes him in conversation - another major brain-builder - while they ignore the baby in a stroller.

Your breasts are more comfortable with frequent nursing - easy to do when you wear your baby - and he won't have to feel over-full or over-empty. The many small meals and the motion of your body also help his digestion. With his stress-free meals and sense of security, you'll probably have the most contented baby on the block, which will make him more fun for everyone.

You'll find that you can get more done in your own life if you don't restrict nursing to major meals at major intervals, and you'll find that there's hardly any place your in-arms baby can't go. All a baby really wants or needs is this "absent-minded but present-bodied" mothering; your mind will be free for other things, and you won't fret about how your baby is doing. You'll know.

Slings are easier than carriers with straps and buckles, and will fit your baby into toddlerhood. A sling should hug your baby against you, so don't pull up the fabric on the "inside". Settle your baby into it so that he can see out. If he doesn't enjoy it, talk to an experienced sling user. It's the method, not the sling. Older babies like to sit facing out, or perched on your hip. Babies enjoy being "worn" through their first year and beyond. That's why you often see parents pushing an empty stroller and carrying its occupant.

A fictional gorilla described his group's feeding pattern this way:

"Wherever one turns, there is something wonderful to eat. One never thinks, 'Oh, I'd better look for some food.' Food is everywhere, and one picks it up almost absentmindedly, as one takes a breath of air. In fact, one does not think of feeding as a distinct activity at all. Rather, it's like a delicious music that plays in the background of all activities throughout the day." *Ishmael* ©1992 Daniel Quinn

What a wonderful way to start life! And you can offer it to your baby - in your arms.

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## ***WHAT YOUR BABY EXPECTS IN LIFE***

*As new mothers, we expect to parent the way we have learned to parent - and there are many different styles. But a baby's "expectations" are not learned. They are the instincts and reflexes of all babies around the world, and they are the same as they were thousands of years ago. Babies are not helpless. They are highly skilled for the world they "expect" to be born into. When we change their world, we make life harder for them. You may not want to live in a cave with your baby, but it helps to know what your baby "expects" the start of life to be like.*

***DURING HER BIRTH*** she expects not to have to deal with drugs. The drug that affects you for only a few hours can cause her problems for days or weeks, making it hard for her to nurse with normal efficiency and frequency. If you're trying to decide about a medication, remember that your decision can affect much, much more than the birth.

***RIGHT AFTER HE'S BORN*** your baby expects to stay with you. After he spends some time with his bare skin on your bare skin, getting used to breathing and seeing and hearing, he'll begin to think about his first meal, and he can crawl or wriggle right up to your breast, find your nipple, latch on, and have a l-o-n-g nursing, with little or no help! If he is taken away from you for washing and measuring before his first nursing, or if he has drugs to cope with, he may not be able to complete those first activities as well, and your own instinctive responses to him will be changed. Breastfeeding works well under all kinds of birth circumstances, but it is far easier for both of you if your time together is unbroken.

***AFTER HER FIRST NURSING*** she expects a long sleep at your side or in your arms. She has heard your heart and breathing and has felt your warmth all her life, and she will actually have a steadier heart and breathing rate herself if she stays in touch with you. If you stay skin-to-skin with her, you'll probably find she nurses a great deal, and that's good for both of you, reducing the risk of jaundice, low blood sugar, hypothermia, dehydration, and breastfeeding problems. As your milk supply builds over the next few days, those marathon sessions will begin to shorten, though she'll still do best with lots of skin contact and lots of nursing.

***AT HOME*** he expects to stay close to you. All mammal babies have some way to protect themselves: speed, camouflage, safety in numbers. Human babies protect themselves by being held. He'll feel safest and calmest when he's next to you, where the tigers can't eat him and the ants can't crawl on him! He expects to set his own pace, finishing one breast before starting the other, and perhaps not wanting both breasts each time. He'll probably expect frequent snacks rather than infrequent feasts. He expects you to respond quickly to his sounds, and he expects not to have to cry for what he needs. He expects to be near you at night as well as during the day, and will have a far healthier sleep with you next to him. He expects your bare skin on his, especially in these early weeks.

*Your baby "expects" to be in your arms and "expects" you to listen to him, not to a clock or an instruction book. If you meet his expectations, you'll have a happier, healthier baby. And that means a happier life together.*

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## *Of Puppies and Babies*

**Picture this:** Your pet dog is in labor. Instead of leaving her in the quiet corner she has chosen, you bundle her into the car and take her to a strange, brightly lit house bustling with strangers who keep poking and peering at her. As each puppy is born, it is positioned at one of her teats for a few minutes to see if it will latch on. If it doesn't latch immediately, it's washed, wrapped, and put in a separate box until later.

**When your watch tells you the puppies are hungry,** you take them from their little boxes and put them with their mother. Many are too sleepy or too frantic to nurse, but some of them finally settle in. After 5 minutes, you remove them from the teats (not an easy task; they don't want to let go) and rearrange them on different teats, where they may or may not reattach. When your watch tells you they are full, you remove them (still not an easy job), wrap them well, and return them to their separate boxes. If they cry before it's time to be hungry again, you jiggle them, distract them, or try to get them to suck on something else. At night, you listen to them cry in their separate boxes while they learn to self-comfort.

**Do you think your dog will have an easy labor and birth?** Will the puppies have any trouble learning to nurse? Will the mother and puppies feel relaxed and comfortable together? Have you found the simplest way to keep the puppies warm and content? Are you the best one to judge when the puppies need to nurse? *Do you have the feeling you're putting a lot of unnecessary energy into this project?*

**We were mammals long before we were intellectuals.** We can use our intellect to overcome birth and breastfeeding problems, but it's much easier if those problems aren't there in the first place. Birth goes much more easily and quickly for any mammal with quiet and privacy. Keep that in mind when you choose your birthplace; for most mothers and babies, traveling to a hospital is no safer than staying home. Give your baby time to get used to breathing, seeing, and hearing before expecting her to nurse, but keep her with you until she does. There's plenty of time for cleaning and measuring later (and even then she belongs with you). Interrupting that first hour interferes with your instincts and hers, and can make nursing more complicated for both of you.

"Wear" your baby. Her heart rate, breathing, and temperature are most stable in your arms. Share sleep with her, as her ancestors always did. Nurse her before she cries, and don't ask her for a reason. If she's nursing contentedly on one side, let her stay there, unless you get bored or tired. The other side will keep until one of you is ready for it. You'll find your baby cries least if you treat her like the baby mammal that she is. Your instincts to keep her close and content are the instincts that have always helped babies thrive, and you'll both be less stressed if you follow them. Best of all, you'll have more energy for living and loving if you put less energy into separating. **Why make a simple job more complicated?**

(Oh, and by the way, do take the puppies out of those silly little boxes!)

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## ***WHAT ABOUT DAD?***

*For as long as there have been babies, there have been fathers. But no father in the history of the world ever nursed a baby. If fatherhood doesn't mean feeding, what does it mean? **Everything else!***

**Fathers are different from mothers.** They have fuzzy chests, deep voices, big hands, flat shoulders - differences that babies come to appreciate. "Ma-ma." "Na-na." Those are quiet, needy sounds - calls for the softness and milk that soothe away hunger and fretfulness. In fact, "Mama" was probably Latin baby-talk for breast. "Pa-pa!" and "Da-da!" are cheerful, playful sounds made by babies around the world. At the end of the day, when Mama and Baby are frazzled, Daddy may be just the different smell and feel and voice and style they both need.

**Wear your baby** in a sling and go for a walk. Babies are social people, and usually love to be "moving and grooving" at eye level in public. Read the newspaper to your baby, or take a nap with him on your bare chest. Talk to him about things around the house; the low pitch of your voice is intriguing. After the first few weeks, get in the bathtub together. As he learns that he can always touch base with Mom for a snack, he'll be more and more relaxed with you. Tuck your baby in bed with both of you for cozy, easy nights and a strong sense of family.

**The "colic dance"** is a father specialty. Hold your fussy baby by putting your hand in his crotch and his front along your forearm, so that his head rests near your elbow with one of his arms on each side of your arm, your hand holding his thigh. Almost all babies relax in this "magic hold", especially if you jiggle gently as you move. Or sway with your baby. Babies tend to prefer side-to-side motion over front-to-back motion, whether on a shoulder or in a car seat.

**Make diaper time a social time.** After the first few weeks, diaper changes are usually a favorite time for games and conversation. And breastmilk diapers smell fine: popcorn, or buttermilk, or maybe cheddar cheese.

**Nursing and Mama are the center** of a new baby's world. Nursing is his career, his hobby, his obsession. But his world keeps getting bigger, and the first person your baby will add to his world is you. You are The Safe Person Who Is Not Mama, and your very different style will gradually teach your baby that different can be nice, too. In the meantime...

**A father's first job** is to *support* the uniquely female process of breastfeeding, not to *compete* with it, and how long your partner nurses depends more on you than on any other person. More than one non-latching baby has begun nursing because Dad gave just the right encouragement at just the right moment! Offering a "relief bottle" may seem helpful, but in the early weeks it is more likely to cause additional problems: soreness, breast refusal, extra work, and - if the bottle contains formula - health risks. Instead, be your partner's bulwark against criticism. See that she gets fed. Help her find informed and positive help ([www.la lecheleague.org](http://www.la lecheleague.org) and [www.ilca.org](http://www.ilca.org) are good places to start). Care for her so that she can care for your child. Your two separate jobs will link to form a strong, secure safety net for the World's Best Baby.

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