



### **Families will be encouraged to feed their babies when the baby exhibits feeding cues, regardless of feeding methods**

- A.** Babies have documented 8 or more feeds/attempted feeds every 24 hours when baby exhibits feeding cues. There will not be restrictions on feeding length or frequency.
- B.** All families, regardless of feeding method, have documented teaching of feeding.
- C.** Mothers who are separated from their infants are assisted and educated to express their milk 8 or more times per 24 hours. Expression should begin at one hour but no later than 6 hours after birth.
- D.** All mothers who plan to breastfeed are taught hand expression.

**According to the American Academy of Pediatrics, “During the early weeks of breastfeeding, mothers should be encouraged to have 8 of 12 feedings at the breast every 24 hours, offering the breast whenever the infant shows early signs of hunger, such as increased alertness, physical activity, mouthing or rooting. Crying is a late indicator of hunger.”**

The evidence supports cue-based feeding, (also called demand feeding or responsive feeding) which can only occur when babies are rooming-in with their parents 24 hours per day.

Cue-based feeding promotes health equity by helping more families to be successful at establishing breastfeeding. Cue-based feeding fosters exclusive breastfeeding and milk supply establishment by enabling more frequent feedings and increased milk intake. By teaching parents to respond to their baby’s cues to feed, parents are empowered, both in the hospital and at home, to attend to the routine needs of their babies.

Assure families that frequent feeding in the first days of life is a good thing to establish milk production and that the baby will be more efficient and have less frequent feedings once breastfeeding is well established.

### **Sleepy or reluctant-to-feed babies**

Your hospital should have policies in place for babies who are unable to feed on cue in the early postpartum days. Many times babies who are born early, have had a traumatic birth, or who are ill do not exhibit feeding cues. Parents can be taught how to wake a sleepy baby but avoid overstimulation and how to identify very subtle hunger cues for feeding opportunities. Mothers can entice reluctant feeders with skin-to-skin contact and maximize milk supply with regular and effective stimulation of the breasts. This can be done by hand expression or by pumping if indicated. A feeding evaluation by a trained lactation professional may be needed.

## PRACTICE 8



### Resources:

- [Responsive feeding info sheet](#) at UNICEF UK.
- California Baby Behavior campaign [information sheet for parents](#).  
California Baby Behavior [video](#).
- [“How to use a breast pump”](#), University of Michigan.
- [“Pumping milk for your baby”](#) , La Leche League USA.
- First Droplets have really good [videos on Hand expression and hands-on pumping](#) that are available for download for free.
- [Hands on pumping information](#) by Nancy Mohrbacher .
- [Hands on pumping video](#) by Stanford University and Jane Morton.
- Morton, Jane et al. [“Combining hand techniques with electric pumping increases milk production in mothers of preterm infants”](#) J Perinatology, 2009. 29(11):757-64.
- [Texas Ten Step Toolkit](#) from the Texas Department of State Health Services, Nutrition Services Section
- La Leche League International handout [“Is my Baby Getting Enough Milk”](#)  
La Leche League International handout [“Frequency of Feeding”](#)
- Good handouts for parents and staff can be found at [Carolina Global Breastfeeding Institute](#).