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1. HUG Your Baby <http://www.hugyourbaby.org/>
 - a. Self-funded program to help parents prevent and solve problems around a baby's eating, sleeping, crying and attachment
 - b. Based on work of Dr. T. Berry Brazelton and other leaders in child development, medical and lactation
2. When parents misunderstand newborn behavior they can
 - a. Emotionally retreat and under-react
 - b. Become agitated and over-react
3. What parents want and need
 - a. Find delight in their child
 - b. Help them understand child development
 - c. Help them solve common problems
 - d. Parents who do not understand or do not know how to respond effectively have: increased postpartum depression, increased risk of child abuse, increased anxiety, and poorer breastfeeding outcomes
4. Consider theories of teaching
 - a. Patient education literature recommends that education be clear, concrete (not abstract), and associate a new idea with ideas already known and understood
 - b. Adult Learning Theory recommends that education address all styles of learning: visual, auditory, and social/interactive
5. Primary skills parents need
 - a. To understand a baby's sleep/wake cycles
 - b. To recognize when a baby exhibits a physiologic stress response
6. Newborn "Zones" instead of Newborn "States"
 - a. "Resting Zone" – sleeping states
 - b. "Ready Zone" – ready to eat and ready to play
 - c. "Rebooting Zone" – fussing and crying states
7. Baby is "sending out an 'SOS' – Sign of Over-Stimulation"
 - a. Body "SOSs" – changes in color, movement and breathing
 - b. Behavioral "SOSs" – "Spacing Out" (going from alert to drowsy state); "Switching Off" (gaze aversion); and "Shutting Down" (going from drowsy to asleep)
 - c. *Neurons to Neighborhoods*: Chronic stress in babies increases cortisol; elevated cortisol negatively impacts developing brain; elevated cortisol lowers threshold for response to stress later in life; negative outcomes are reduced when parents can see and respond effectively to a baby's stress response
 - d. HUG DVD on Zones and SOSs
8. "Resting Zone" – Sleep states
 - a. Active/Light sleep
 - i. Baby's eyes flash open; she may vocalize; breathing increases; moves and jerks

- ii. 60% time in the newborn
 - b. Still/Deep sleep
 - i. Baby is totally still; no movement of the eyes; eyes stay shut; breathing deep and regular
 - ii. 40% time
 - c. Newborns awake between Active/Light and Still/Deep sleep
 - d. As baby matures she groups Active/Light and Still/Deep sleep cycles so that she can sleep longer
 - e. HUG DVD on sleeping
- 9. "Ready Zone"
 - a. Ready to Eat
 - i. Though rates of breastfeeding initiation are increasing, breastfeeding duration falls far below international standards and women's goals
 - ii. Misunderstanding baby's behavior is an often-overlooked reason why women abandon breastfeeding
 - iii. Brazelton's *Touchpoints* theory states that developmental surges cause a disruption in a baby's eating, sleeping, or general behavior
 - iv. *Touchpoints* are predictable and correlate to The Infant Feeding Practice Study II
 - v. *The Roadmap to Breastfeeding Success: Teaching Child Development to Extend Breastfeeding Duration* includes: <http://www.hugyourbaby.org/Home/roadmap-to-breastfeeding-success>
 - 1. Three-hour online course for professionals
 - 2. Handout for parents
 - 3. Newsletters for parents: weekly for 12 weeks, then monthly until one year
 - b. Ready to Play
 - i. Skills to get baby to "Ready Zone" enhance parent confidence and parent-child interaction
 - ii. Fathers who have eye-to-eye contact with baby in first 4 hours spend more time with babies at 3 months
 - c. HUG DVD on playing
- 10. "Rebooting Zone"
 - a. Mothers who cannot manage a crying baby:
 - i. Have increased PPD
 - ii. Can be a trigger for child abuse
 - iii. Can contribute to adding formula or giving up breastfeeding altogether
 - b. Normal increase in crying begins at 2 weeks, peaks at 6 weeks, and decreases up to 12 weeks
 - c. HUG DVD on crying
- 11. HUG Research: <http://www.hugyourbaby.org/Home/research>
 - a. NICU fathers exposed to HUG have increased knowledge of newborn behavior and decreased parental stress (Published)
 - b. Nurses and doulas taking HUG online course showed increased knowledge of infants and recommends course to colleagues (Published)
 - c. PAT Home Visitors demonstrated increased knowledge of infant behavior and increased confidence to teach parents. The parents they helped showed increased confidence to care for baby (Pending publication)
 - d. Japanese nurses described HUG as helpful to parents they serve. (Published)

- e. Undergraduate nursing students who received HUG training demonstrated increased knowledge of newborns and increased confidence to teach parents (Pending publication)
 - f. Birth Center patients who participated in *Roadmap* program had increased confidence to parent in spite of postpartum depression (In progress)
 - g. Family Physician residents study (In progress)
12. HUG Your Baby Resources are:
- a. Convenient (come and go format, available at home or at work)
 - b. Economical (because no travel necessary, which can result in staffing shortages)
 - c. Efficient (because of coordination of training for professionals and resources for parents)
 - d. Online courses: <http://www.hugyourbaby.org/Home/hug-training>
 - i. Part I – Introduction: *Helping parents understand their newborn* – two contact hours credit; cost -\$35
 - ii. Part II – *HUG Strategies and Skill Building* - four contact hours credit; cost -\$65
 - iii. Part III – *Certified HUG Teacher* - twelve contact hours credit; cost -\$150
 - iv. *Roadmap to Breastfeeding Success* - three contact hours credit; cost -\$60
 - v. \$110 discount for ordering entire (4 parts) training
 - e. Resources for parents: <http://www.hugyourbaby.com/order.html>
 - i. DVD – award-winning, 20-minute DVD helps parents prevent and solve problems around eating, sleeping, crying and attachment (\$48)
 - ii. Handout for DVD (\$40 for 50)
 - iii. *Roadmap* handout (\$40 for 50)
 - iv. Significant discount for bulk order of any products (For example, order of 500-1,000 DVDs can be \$8-10 each)
 - f. Recommendations for incorporating HUG Your Baby into your setting
 - i. Have at least one leader in your facility complete the full, four-part HUG training so that they might serve as a mentor
 - ii. Have remainder of staff complete Part I if involved in general parent education. Those involved in breastfeeding support might take instead *The Roadmap to Breastfeeding Success* that includes pertinent information from Part I and information on breastfeeding support.

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