

DADS' PACK

Packed full of information for all dads expecting a new baby

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Employment rights and benefits*

Babies can be very expensive so it's important that you know where you stand financially.



If you are in employment, as a new parent or expectant parent you could be entitled to:

- Paternity leave and pay
- Shared parental leave
- Adoption leave and pay
- Unpaid time off work to look after your child
- Unpaid time off to attend antenatal appointments

To apply and qualify for paternity benefits you must be one of the following:

- Father of an unborn baby
- Spouse/partner of the motherthis includes same-sex partners
- Adopting a child
- Intended parent (if you're having a baby through a surrogacy arrangement)

^{*}Information correct at time of writing - Sept 2024

Paternity leave

- You are entitled to up to two weeks leave after the birth of your baby.
- You do not need to take the leave straight away but the leave must end within eight weeks of your baby's birth.
- You are not entitled to more paternity leave if you have more than one baby (e.g. twins or triplets).
- You can't always know exactly when your baby will be born but by law your employer is entitled to 15 weeks notice of your estimated paternity leave start date (this will usually be your baby's due date provided by your Midwife, unless your baby is premature).
- If your baby is born prematurely, you are still entitled to paternity leave, you just need to inform your employer as quickly as possible especially if you choose to take your paternity leave straight away.





Your employment rights will remain the same during paternity leave.

These rights include:

- The right to return to work
- Accruing holiday allowance
- Pay increases



Paternity pay

Paternity pay is what you will receive whilst you take paternity leave, it is paid in the same way you receive your usual pay.

Not everybody is entitled to paternity pay.

To qualify for paternity pay you must:

- Have been continuously employed by your employer for at least 26 weeks
- Be employed by your employer up to your baby's birth
- Give the correct notice (unless your baby is born prematurely)
- Receive a minimum weekly wage at a specified value (To find out the current guidance around this visit www.gov.uk/paternity-pay-leave/eligibility)

For questions about paternity leave and pay please visit https://www.acas.org.uk/paternity-rights-leave-and-pay

Some employers choose to pay their employees their usual salary but this is not required by law. You will still pay national insurance contributions, tax and other deductions usually applied to your salary.

Leave for antenatal appointments

You (and your baby's mother) can take up to 6.5 hours unpaid leave to attend antenatal appointments, by law. You can do this up to two times during the pregnancy.



That's two appointments - up to 6.5 hours a time!



You must be in a permanent job or working through an agency for at least 12 weeks to be entitled to leave for antenatal appointments.

It is important that you attend antenatal appointments as the information is just as important to you as it is your baby's mother.



Download the Baby Buddy app on your smartphone to access lots of free information videos.

Shared Parental Leave and Shared Parental Pay

Shared parental leave allows both parents to take time off work to care for their baby in the first year as long as parental responsibility is shared (both your names are on the birth certificate). The great news is both parents can take shared parental leave at the same time!

If you are entitled to paternity pay you will also qualify for shared parental leave and shared parental pay so long as your baby's mother also meets the same criteria.

Both parents can take up to 50 weeks of shared parental leave combined - you cannot have 50 weeks of leave each.

Employers require you to give at least 8 weeks notice of your shared parental leave plans.

- Up to 37 weeks of shared parental leave will be eligible for shared parental pay.
- Shared parental leave can be taken in one go or up to three blocks (lasting at least one week) separated by periods of work.
- Shared Parental Pay is paid at the rate of £151.20 a week or 90% of your average weekly earnings, whichever is lower.

Your paternity leave period of two weeks is not included in your Shared Parental Leave entitlement.



To check if you are eligible visit: www.gov.uk/pay-leave-for-parents

Unpaid leave

Emergency carer's leave

Emergencies can happen when you have children, your child could be unwell and you may need to stay home from work without notice. Employers should allow you unpaid time off in these situations and may ask you for evidence of the emergency.

It is a good idea to familiarise yourself with your employer's carer's leave policy before you need to use it.

Unpaid parental leave

You may also feel you need time off work to settle your child into new childcare arrangements or need quality time with them.

If you have been employed for a year or more you can:

- take up to four weeks of unpaid parental leave per year
- take up to 18 weeks unpaid leave for each child up to their 18th birthday

You must discuss parental leave with your employer if you need to use it; you will need to provide sufficient notice beforehand, this can be discussed with your employer.

You should take this leave in whole weeks and not broken up into days You don't have to take all the leave at once.

For more information visit: www.gov.uk/parental-leave/entitlement

What financial benefits are available for families with young children?

Child Benefit

Child benefit helps towards the cost of raising a child. One parent can claim child benefit after the child's birth. This is paid every four weeks and there is no limit to the number of children you can claim for. The amount received per child will reduce after the first child.

- You can receive child benefit weekly if you are a single parent or on certain benefits, you can contact the Child Benefit Office to arrange this.
- When you register your baby you will be given a form to apply for child benefit or you can visit www.gov.uk/child-benefit.
- Child benefit will be paid until the child is 16 years of age.
 Payments can continue to their 20th birthday if they remain in approved educational and training provision.

Universal Credit

Universal Credit has replaced Child Tax Credit and Housing Benefit. The payment is to help towards living costs.

- You may be able to claim this if you are a low-income family, out of work or cannot work.
- If you would like to learn more about Universal Credit including the eligibility criteria and how to apply please visit www.gov.uk/universal-credit.

Tax-Free Childcare

Tax-Free Childcare is a government scheme to help with the cost of childcare if you are in employment (incl. self-employment), earning at least £120 a week and less than £100,000 a year. If you live with a partner, they must meet these criteria too.

- To benefit from Tax-Free Childcare, you must open a childcare account on the government website. You will use this account to pay your approved childcare provider.
- The government will pay 20% of the cost of your childcare up to £2,000 a year (or £4,000 a year for disabled children) for each child. For example, every £8 you put in they put in £2.
- Available for children below 12 years (unless your child is disabled).
- You are able to take back any unused funds; the government would also then withdraw the 20% they have funded.



Free Education and Childcare

Children aged 9 months – 4 years are entitled to 15 – 30 hours of childcare depending on your families situation. Childcare support is expanding too! See **www.gov.uk** and search 'free childcare' or ask your children's centre/family hub or health visitor



Healthy Start





What does my baby need?

Babies don't need as much as you might think they do.



Here are the most important things to have ready for when your baby arrives:

- Somewhere safe to sleep with safe bedding (see page 63)
- A pram or a sling so you can take your baby out
- Clothes. Babies grow out of things quickly so they don't need too many!
- Nappies and cotton wool
- If you are choosing to bottle feed your baby, you will need bottles and a way to sterilise them
- A car seat if you are planning to take your baby in the car (even a taxi)

Your Midwife* will talk to you and/or your baby's mother about what you need to pack in a hospital bag. Pack this early, so it is ready for when labour starts.



discomfort.

Babies do not need:

Skincare products, wipes or soap Newborn babies should be bathed in plain warm water. It is best to use cotton wool soaked in warm water for nappy changes. A baby's skin is very delicate. Chemicals and fragrances in toiletries can cause rashes and

- Products that claim to make babies sleep better such as sleep pods
 - These are dangerous for babies. Please talk to your Midwife or Health Visitor* if you are unsure if a product is safe for your baby.
- Shoes Babies do not need shoes until they can walk.

^{*} An overview of all professionals mentioned can be found from page 72

Preparing yourself mentally for the birth

Your baby's mother will be given lots of support in the lead up to the birth, such as antenatal appointments.

You should try to be there during these conversations as it will help you to prepare too.

- Ask healthcare professionals questions you have relating to the labour. It's good to have a clear idea of what to expect.
- Childbirth is an exciting life-changing event. Many people worry a lot in the months before the due date, this is natural.

Things don't always go the way you expect. You are in good hands, the midwives and doctors are highly trained professionals.

 Understanding the stages of labour can help prepare you for the big day.

Visit www.nhs.uk and type 'Stages of birth and labour' in the search bar.

If your baby will be delivered by caesarean section, understanding the stages and recovery will help you to prepare.

Visit www.nhs.uk and type
'Caesarean section' in the search bar.



Preparation for feeding

- It's normal to be unsure of how you will feed your baby once they arrive. It's better to be open to every option.
- The best way to prepare is to speak to the midwifery team or your Health Visitor about feeding your baby. They will be able to answer any question you may have (or point you in the right direction).
- Antenatal group sessions help you with what to expect and give you information before your baby arrives.

For local classes, visit **www.nhs.uk** and type **'antenatal classes'** into the search bar or speak to your midwife.

 Doing your own online research is helpful.
 There is a lot of accurate information on the internet but be mindful of false and misleading information too.







Prepare yourself for nappy changes by visiting www.nhs.uk and typing 'how to change your baby's nappy' in the search bar.'

Things to expect immediately after the birth of your baby

Your baby and your baby's mother will have checks before they can leave the hospital. These support their health and make sure they are safe to go home.

If you are having a home birth, the Midwife will explain how some of these checks will happen as an outpatient.



Remember!



Baby's first examination

Immediately after your baby is born, the Midwife will check your baby is healthy and well. If your baby needs more support, the Midwife will get help from others.

Newborn and Infant Physical Examination (NIPE)

Your baby will be examined by a midwife or doctor within 72 hours of birth to screen for health conditions of the eyes, heart, hips and testes in boys.

Vitamin K injection

This will be given only with parental consent. The injection helps to protect your baby against a rare but fatal bleeding disorder. This is usually discussed before your baby is born.

It is normal for small tears and grazes to occur to your baby's mother during the birth of your baby

Sometimes, tears can need stitches. The hospital staff will offer your baby's mother pain relief whilst they do the stitches. She will usually be able to continue having skin to skin with your newborn baby during this time.

Most babies will receive a newborn hearing screening test

If the hospital isn't able to do this before discharge, they will arrange an appointment for your baby to have this as an outpatient. This is a painless test to check your baby's ears are working as they should be, usually babies sleep through it.

If your baby is born by caesarean section, the hospital staff will talk you and your baby's mother through the process

There will be clear advice given to your baby's mother about how she needs to look after herself following a caesarean. You should be there for these conversations so you will be able to provide support for her.



Special care for unwell or premature babies

Sometimes babies need to be cared for in a specialist newborn ward (often called the neonatal unit).

There are many reasons why a baby may need to be cared for in the neonatal unit:

- Babies born early
- Very small babies
- Babies born with an infection
- Babies who have been born after a very difficult birth
- Babies born with medical needs

Being told your baby needs to be cared for in the neonatal unit can be very worrying for new parents.

The neonatal unit will support you and your baby's mother through the time spent here. They will explain to you how you can safely interact with your baby.

Your Health Visitor will also support you and your baby's mother during this time.

For online help and support if your baby is born premature and/or unwell, visit **www.bliss.org.uk**

Supporting your baby's mother after the birth

Your baby's mother may feel uncomfortable after the birth of your baby. Your support will help her get through this time.

Your baby's mother will receive advice about how she should care for herself physically after birth.

You can research what your baby's mother may be experiencing physically to help you to support her by visiting **www.nhs.uk** and typing **Your body after the birth'** in the search bar.

- There is no set time to wait before having sex after the birth of your baby. Communicating with each other about this topic will help you and your baby's mother feel comfortable.
- Your baby's mother can become pregnant any time following the birth even if she is breastfeeding and has not had a period, it is important to use barrier methods of contraception if you want to avoid getting pregnant again so soon. The GP will speak to your baby's mother about contraception at her 6 week appointment (see page 24).
- The weeks following birth can be a tiring and emotional time for both you and your baby's mother. Read 'Looking after you' (page 36) for more information.

Visit www.nhs.uk and type 'When can I use contraception after having a baby?' in the search bar.

The paperwork!

After the birth of your baby, there are a few tasks you'll need to do.

1 Birth registration

You must register your baby's birth at the local registry office within the first 42 days after the birth. This needs to be done in person.

As the non-birthing parent, you will either need to be married to the baby's mother or named on the birth certificate to have parental responsibility of your child.

For more information visit www.gov.uk/register-birth

2 Register at the GP

Once you have registered your baby's birth you will receive a birth certificate.

You should then visit your chosen GP practice to register your baby. Your baby and baby's mother should be registered at the same practice.

3 Applying for Child Benefit

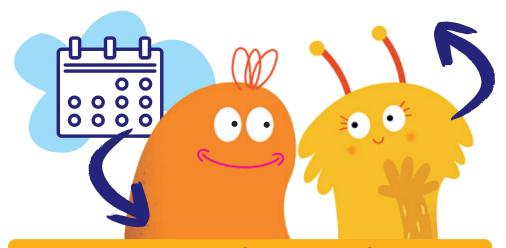
Once your baby is registered, you should apply for child benefit (and child tax credit if you are entitled).

You will receive information about how to do this when you register your baby's birth. Take a look at the 'Employment rights and benefits' chapter (page 5) in this guide.

4 Arranging childcare/nursery school places

It is important to look into childcare providers early as spaces can fill up fast.

You should choose a registered childcare provider as these are regulated to ensure safety.



Appointments to expect after the birth of your baby

- These appointments will be arranged by telephone or post
- Healthcare professionals will arrange more visits with you if they need to
- You are an important part of these appointments
- For an overview of the professionals mentioned here, please see page 72

1. Postnatal midwifery appointments

Your community midwifery team will be in touch to arrange home visits. These visits support feeding, provide you with safety advice and are to monitor your baby's weight.

If your baby is growing well and there are no concerns the midwifery team will discharge you once you've seen the Health Visitor, this is usually around 10-14 days after birth. Some babies may remain under the care of midwifery until they are 28 days old.

2. Day 5 midwifery team visit

A member of the midwifery team will visit your home when your baby is 5 days old.

At this visit, your baby may be weighed, and with parental consent a small sample of blood will be taken from their foot. This is for the newborn blood spot test to check your baby for certain inherited health conditions.

For more information ahead of this test, visit **www.nhs.uk** and type **'newborn blood spot test'** in the search bar.

3. New birth visit with your Health Visitor

Between 10 and 14 days after the birth you will be visited by a Health Visitor at your home.

At this appointment, you will receive a lot of important and useful information about how to keep your baby safe and healthy. You will also receive information about other available services.

4. 6-8 week GP check

Your baby and baby's mother will receive an appointment to see a GP between 6 and 8 weeks after the birth. Sometimes these appointments are at the same time. The GP will:

- Check the health of your baby
- Discuss how your baby's mother is healing and feeling emotionally after the birth
- Tell you about your baby's immunisations
- Discuss contraception with your baby's mother if required



5. 6-8 week Health Visitor appointment

Between 6 and 8 weeks after the birth, a Health Visitor will visit your home or ask you to come into a clinic to:

- Check your baby's growth
- Give you information about your baby's development
- Support you and your baby's mother

6. 8, 12 and 16 week immunisations

Vaccinations will protect your baby and others from several serious illnesses. It is important that you and your baby's mother have all the immunisations available to you, as this will further help protect your baby and others.

Your Health Visitor and GP should speak to you about vaccinations and answer any questions you have.

The first vaccination should be given once your baby is 8 weeks old and can be booked by calling your GP practice.

Visit www.nhs.uk and type 'NHS vaccinations and when to have them' in the search bar.



Bonding with your baby in pregnancy

All antenatal appointments and classes are for both mothers and fathers. This is your chance to ask questions and hear all about what to expect. It's important that you know these things as well as your baby's mother.

The more prepared you are the better, this will help you:

- To be ready for the birth and the support you will give your baby's mother during labour
- To keep your baby safe
- To have confidence in caring for your baby
- Know what services are available to help you
- Be successful with feeding especially breastfeeding
- Have a stronger relationship with the baby's mother
- To improve the mental health of both you and the baby's mother
- Transition to returning to work after paternity leave

Talk to the bump and feel the baby move!

This helps you to connect with your baby. At 26 weeks, a baby will start to respond to familiar voices and recognise them when they are born.

Activity

Why not try singing a song to the bump? When they are born this song may soothe and settle them down.



Bonding immediately after birth



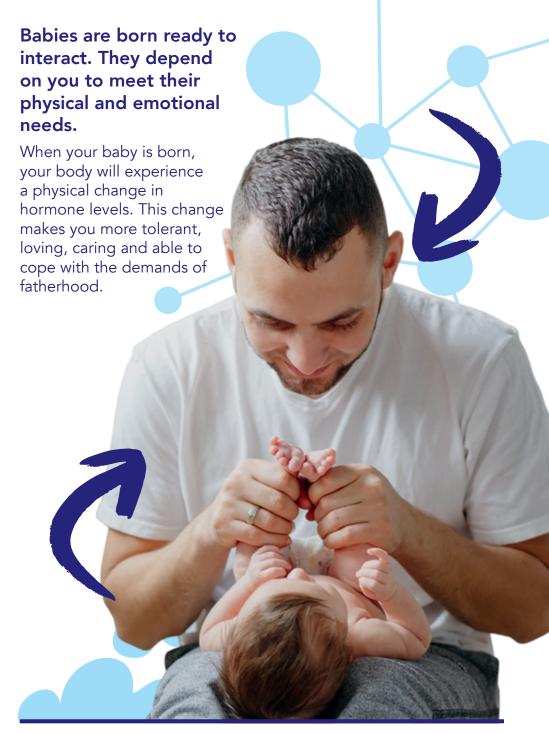
Skin to skin contact is one of the easiest and most powerful ways to bond with your little one.

- Release hormones like oxytocin (the love hormone)
- Help with bonding and attachment
- Reduce stress for both you and your baby
- Regulate your baby's body temperature

You can't have too much skin to skin time

The more you try this, the more you will recognise their cues and build your relationship. It is important that you stay awake during skin to skin to keep your baby safe. It is a very relaxing thing to do so if you feel yourself starting to drift off, lay your baby down in a safer sleeping environment (see page 63 for safer sleeping advice).





Your baby's movements and cries are their way of showing you that they need something. This could be a nappy change, that they are hungry, tired or want your love and attention.

It will take some time to get to know what your baby's body language, noises and cries mean – these are called cues. **As you get to know them, you will recognise what they need.**

Your baby is likely to start smiling when they are around six weeks old. Responding to your baby's cues with your love, attention and support is a great start to their learning. These positive responses from you help with their brain development and emotional wellbeing. Your attention will give your baby the confidence and sense of security to explore the world around them.

These positive early childhood experiences play a big part in how they form relationships later in life.



Activity

Look at your baby and try to use different expressions, smiles and noises. Wait to see them respond - it could be a smile or a kick. Newborn babies don't maintain eye contact very well but as they grow and develop, they will perfect this skill. Even if you don't think you see a response from your baby, continue to communicate with them as this is how they learn to communicate back.

Sometimes, it can feel strange talking to a baby when you think they are not responding and you may feel you don't know what to say. Reading stories to your baby, no matter their age and no matter the story (it could be a book you are reading yourself) is a great way to support your baby's development and will also inspire an early interest in books!



The importance of play

For the first 18 months of your baby's life, the brain makes over one million connections per second.

Play is great for learning, brain development and building close relationships.

These adventures together are great for building your baby's confidence and resilience. They will help with future challenges such as starting school and being more ready to bounce back from the challenges they will experience through life.



Through play, children are learning all the time by solving problems, creating, experimenting, thinking, imagining and communicating. Helping your child to learn through play will build their confidence to keep exploring and learning about the world around them.

Engaging in and encouraging imaginative play can improve your child's learning:

- Explore toys together and follow their lead
- Acknowledge what interests your child whilst encouraging them to try new things too
- Sing songs and read stories
- Play games like 'peek-a-boo', 'round and round the garden' and 'ready steady go'

Remember it is the time you invest in your child that is important and will lead to them achieving more in life, not the activity. You do not need fancy toys or to spend money on days out! You will be surprised at how much fun you and your child can have with a cardboard box!





Tummy Time helps:



- Promote emotional bonds
- Encourage language development
- Build baby's brain
- Babies stay active through interactive, floor based play

Tummy Time also helps babies:

- Learn how to solve problems (how can I grasp that toy?)
- Learn how to deal with their frustrations (it's just out of reach - what if I push with my feet?)
- Ask for help
- Develop their sense of distance (how near or far away is that toy?) helping their eyes to work together to get a 3d view of the world

Never leave babies unsupervised during tummy time!





30 minutes a day is all they need and little and often is best

Month 1





Aim for 10 minutes of tummy time a day

Month 2





Build to 20 minutes of tummy time a day

Month 3





30 minutes of tummy time a day by 3 months old





Try adding 10 minutes a month until your baby can roll over both ways

There's no such thing as too much tummy time so use this as a guide

Never leave babies unsupervised during tummy time!

Who can help?

It is quite normal to feel nervous about bonding with your baby, especially if you are a first time parent; this is not something to be ashamed of.

If you would like support, the following services are here to help:



Looking after you

Up to

of fathers suffer postnatal depression

(official statistics)



Lots of fathers think their own feelings aren't as important as others - this isn't true.



Postnatal depression isn't something only women experience, men experience this too. So it is important not to ignore your feelings.

It's hard to know what to expect when your baby is born.

Let's find out a little more about how to manage these feelings.



Pregnancy and birth

Your baby's mother will be given lots of support in the lead up to the birth, such as antenatal appointments with midwives to discuss the birth plan. Your midwife will talk you through a birth plan that will help you to understand what to expect. Try and make sure you attend antenatal appointments as often as you can.

Things don't always go as planned.

Both mums and dads can experience Postnatal Post-Traumatic Stress Disorder (PTSD) after birth.

If you feel you have any of the following symptoms please talk to your midwifery team, your Health Visitor or your GP:

- Flashbacks of the birth that cause emotional distress
- Nightmares that may or may not relate to the birth
- Feeling that you, a loved one and/or your baby is not safe
- Feelings of guilt. Questioning your actions and the actions of others during the birth
- Keeping yourself busy to avoid feelings and memories
- Low mood, depression and anxiety

Mind is a mental health charity that has a lot of useful information on their website.



Early days and supporting your baby's mother

Many women can experience low moods (crying, anxiety and sadness) in the early weeks after birth. Hormones and tiredness can contribute - these symptoms usually go away after a few days.

You can help:

- Be supportive (being there will help her to feel better)
- Encourage her to have skin to skin with your baby
- Encourage her to take naps (to catch up on sleep!)
- Make sure she is eating well & drinking water (this will give her energy!)
- Check in on her (by text or call if you aren't able to be there)
- Encourage your partner to get support from the health visitor / GP if you are worried

Worrying about your baby's health is normal. It is important to get support if you have concerns. Getting answers helps reduce worry and the impact it can have on your mental health.

Visit www.nhs.uk and type 'postnatal depression' in the search bar.

In the early days of becoming a father you are likely to spend most of your time supporting your baby's mother and spending time with your baby.

You might want to ask your Health Visitor about groups for you and your baby or pop along to your local children's centre.

Understanding and responding to changing moods

Many fathers feel low in mood after the birth of their baby.

It can be difficult to talk about mental health. No one will judge you when you decide to talk about your emotions - it's the best way to get support.



Things to try if you are feeling low:

- Re-establish structure to your day if you feel this has been lost
- Spend time with family and friends
- Spend time with your baby, try some relaxing skin to skin

- Take a walk
- Exercise (outdoors or at home)
- Eat well
- Good sleep routines
- Practice mindfulness & relaxation techniques

Adapting to your baby's sleep pattern can be difficult; you are likely to feel tired as you adjust.

Advice to support you in managing your baby's sleep will depend on factors such as feeding. You can ask your Health Visitor for baby sleeping tips.

If you are struggling to cope with your baby's sleep, it is time to get help.

Postnatal depression and anxiety affects both mothers and fathers

If you, or your baby's mother, experience any of the following, contact your Health Visitor or your GP:

- Feeling low for more than a couple of weeks
- Losing interest in doing things you used to enjoy
- Change in eating habits
- Struggling to fall to sleep without reason
- Not wanting to leave the house or see others
- Feeling unable to cope with everyday life
- Somebody close to you tells you they are worried about your mental health
- An increase in unhealthy habits such as drinking and smoking
- Frequent feelings of frustration since the birth



The NHS website has a useful self-assessment online tool that asks a series of questions and provides advice depending on your answers.

You do not need to give any of your personal details and it is your choice whether you follow the advice.

Please visit www.nhs.uk

Enter 'Depression and anxiety self-assessment quiz' in the search bar.

Communication

Talking about your feelings as parents is important for the mental health of you and your baby's mother.

Remember, it is normal for tiredness and stress to lead to misunderstandings. Talking calmly and listening will help to resolve issues.

Activity

Try to talk about the positives (what you and your baby's mother are doing well).

Then talk about the difficulties you're having (for example, what you need help with).

You will not agree on everything. Remember to listen and to agree on a solution together.

Talking about your thoughts and feelings reduces stress.

Try to do this with different people (your baby's mother, family, friends and other fathers).

Visit www.nhs.uk and search 'mental health services' or talk to your GP for support.



Managing stress and infant crying

Having a baby can be stressful for many reasons. Babies demand a lot of care and attention. It's normal for them to want to be in your arms and fed a lot.

Babies don't always want something when they cry, it is their way of communicating. Managing crying is a common and understandable cause of stress for parents. Babies start to cry more around 2 weeks of age, this usually peaks between 6 and 8 weeks.



ICON is a resource to support parents to manage infant crying.

There are many useful videos you can watch by visiting *iconcope.org*

- Infant crying is normal
- **C** Comforting methods can help
- It's OK to walk away
- Never, ever shake a baby

It is better to walk away for a few minutes and leave baby in a safe space than to get angry near them, they are very fragile.

If stress becomes too much (or it is affecting your children or baby's mother), please get help from your Health Visitor or your GP.

Domestic abuse

Domestic abuse is a pattern of behaviour in any relationship that is used to gain or maintain power and control over a close family member or a partner.

This can take many forms, including:

- Threats of harm
- Physical harm
- Threats of not being allowed to see your child
- Not being able to talk to certain people
- Financial control

Witnessing domestic abuse is harmful to children of all ages. If you think you may be the victim of domestic abuse, you must get support to protect yourself and your children quickly.

Men can often feel embarrassed if they are a victim of domestic abuse and worry they may not be believed. This is not true. There are specialist domestic violence support services designed for male victims.

Services Available

- Men's Advice Line: call 0808 8010 327 (Monday to Friday 10am to 8pm), email info@mensadviceline.org.uk or use the webchat function on the website (Wednesday 10am to 11.30am and 2.30pm to 4pm) for non-judgemental information and support
- ManKind on 0182 3334 244 (Monday to Friday, 10am to 4pm)
- Respect is a nationwide organisation who provide support for men experiencing domestic abuse - Freephone 0808 8010327

If you feel you or another person is in immediate danger, please call the police on 999.

Protecting your baby from smoke

Secondhand smoke is especially harmful to children as they have less well-developed airways, lungs and immune systems.

Children who live in a household where at least 1 person smokes are more likely to develop:

- Asthma
- Chest infections like pneumonia and bronchitis
- Meningitis
- Ear infections
- Coughs and colds

Speak to your midwifery team, your Health Visitor or your GP about how smoking can affect your baby and for support in quitting.





If you smoke and would like to quit, download the free NHS Quit Smoking app which allows you to track your progress, see how much money you're saving and access daily support.

You are four times more likely to quit smoking with support.

Feeding your baby

You may have already had conversations about how you want to feed your baby. However keep an open mind, you don't have to make long term decisions about feeding in the first few days/weeks.

Feeding can be demanding both physically and mentally in the early days.



Responsive feeding or 'feeding on demand'

When to feed your baby

You do not need a feeding schedule. Health professionals recommend "responsive" or "on demand" feeding whether you are breast or bottle feeding – this means following your baby's cues and feeding them when they are hungry (unless you are being otherwise advised by a health professional)

Feeding cues

After a while, you will get to know your baby's hunger signs before they start to cry out.

Your baby may:

- Try to find something to suck usually their hands or fingers
- Move their eyes around
- Start wriggling and become restless
- Open and close their mouth or lick their lips

Tip

Feeding your baby on both sides (left and right) helps develop babies brain. You can do this by feeding your baby on both breasts during each feed or holding them in different arms when bottle feeding.

Why is it so important that you are involved in feeding?

You are likely to be the first person your baby's mother will turn to for support.

Your help is important!

- There are lots of ways you can share feeding responsibility, which you can find later in this chapter.
- Your newborn baby will eat and sleep more than anything else in those first few months. Supporting with feeding will help you to bond.
- Supporting your baby's mother in their feeding choices will benefit your baby. Be part of the conversations with Midwives and Health Visitors



Remember the midwifery team and your Health Visitor are available to support you and your baby's mother.

If you have any concerns, please contact your local team for support.

What is breastfeeding?

Breastfeeding is feeding your baby breast milk. This can be done directly from the breast, or expressed (pumped) and fed through a cup, tube, syringe or bottle. This includes donor milk.

All parents should be supported to feed their baby in the way that is best for them, and breastfeed for as long as they want to.

Benefits for babies

The human body is amazing! Milk from the breast is perfectly designed for babies and toddlers. Breast milk changes as a baby grows, so that it always supports their development. It also protects against many diseases and infections and lowers the risk of sudden infant death syndrome (SIDS). Did you know that breast milk also changes to suit the environment, such as in hot weather, meaning breast milk is all babies need!

Benefits for breastfeeding parents

Breastfeeding has lots of health benefits for the parent too. It reduces the risks of breast and ovarian cancer, type 2 diabetes, weak bones (osteoporosis), obesity and cardiovascular diseases.

Visit: www.nhs.uk and search for 'Breastfeeding'.



Breast milk exposes your baby to different tastes depending on what your baby's mother eats. This makes them more open to different tastes when they try solid foods. Breastfeeding mothers and breastfed babies are recommended to take vitamin D supplements. These supplements can be free under the Healthy Start Scheme if eligible, see page 13.

For information on why Vitamin D is important, visit **www.nhs.uk** and type **'Vitamin D'** in the search bar.

Benefit to the environment:

Breastfeeding is the cleanest and greenest way to feed your baby.



For every 1kg of infant formula made



12.5kg of rainforest is cleared



4700 litres of water are used



21.8kg



of greenhouse gases are released into the atmosphere

Feeding your baby in the first couple of days

The breastfeeding process starts in pregnancy.

The breast changes in response to hormones generated by the pregnancy.

Your baby's mother may notice that her breasts are getting larger as changes happen within the breast. They may also become more sensitive.

Milk may or may not leak during pregnancy. This is not a sign of whether breastfeeding is going to be easy or not.

When your baby is born, their stomach is small and cannot hold much liquid.

The first milk produced is very thick and can be yellowish - this is because it is very concentrated to deliver all the nutrients your baby needs without having to stretch their stomach.

Even if you and your baby's mother have chosen not to breastfeed your baby, it is great for your baby to at least have this first milk.

In the days following birth, the amount of breast milk produced will increase as your baby grows.

The milk will become more watery and white.

Hormones are responsible for regulating breast milk.

SAVE THE NUMBER IN YOUR PHONE:

You can call the National Breastfeeding Helpline on 0300 100 0212 for support between 9.30am-9.30pm every day.

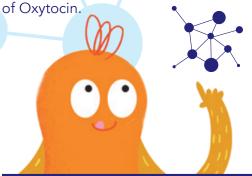
The science bit!

Oestrogen and progesterone are hormones released by the placenta during pregnancy. They prepare the breasts to make milk and keep milk production minimal until the baby is born.

Once the baby has arrived these hormones decrease. This tells the body that it is time to make milk through the release of another hormone, Prolactin.

Prolactin tells the breast to make milk and is released with every feed. This is why mothers must breastfeed at regular times throughout the day. Any unused milk remains stored within the breast.

A suckling baby (or breast pump/hand expression) causes a release of the hormone Oxytocin, this instructs the breast to release the milk (often called let-down). We've seen this one before - it's the love-hormone! Sometimes even the sound of a crying baby can cause the release



The hormones involved in breastfeeding can also affect emotions. It is common for women (especially in the early stages of breastfeeding) to have mood changes.

Download the Baby Buddy app on your smartphone to access lots of free breastfeeding videos and much more.



Breastfeeding and you

Breastfeeding is a decision that you and your partner or co-parent can make together.

If you do choose to breastfeed, you are one of the first people they will turn to for support. Without support, they are more likely to give up breastfeeding earlier than they had planned.

- When babies are breastfed you may feel a little left out and want to build an equally special bond with your baby.
- Oxytocin is known as 'the love hormone', this helps with bonding (it's released during breastfeeding), for dads it's released when you spend time close to your baby. As we saw on page 26 you can use oxytocin to help you bond with your baby too!
- There are lots of things you can do with your baby to help you both release the love hormone and bond together if mum is breastfeeding;
 - skin to skin babies love cuddles and cannot get enough
 - bath time

- singing to them
- telling them stories
- There's lots you can do to help during breastfeeding too:
 - Look out for feeding cues
 - Pass baby to mum in the early days
 - Make sure mum has food and drink when she is feeding baby
 - Change your baby's nappy
 - Go for walks with baby between feeds so mum can rest
- Remember; the more time you spend caring for your baby the stronger the bond!
- Supporting your baby's mother with breastfeeding is one of the most important things you can do for your baby

For additional help and support contact the midwifery team or your Health Visitor or visit www.nhs.uk/start4life/baby/breastfeeding

How do you know if breastfeeding is going well?

Breastfeeding is going well* when your baby:



- is having 8-12 feeds every 24 hours (feeds will become less frequent as your baby gets older)
- feeds for more than five minutes (up to 40 mins)
 each feed
- is calm when feeding and generally remains latched for the duration of the feed
- is content after most feeds
- has at least six wet nappies a day with two poos

*Unless you have been told otherwise by a healthcare professional

Contact your Health Visitor for help if your baby:

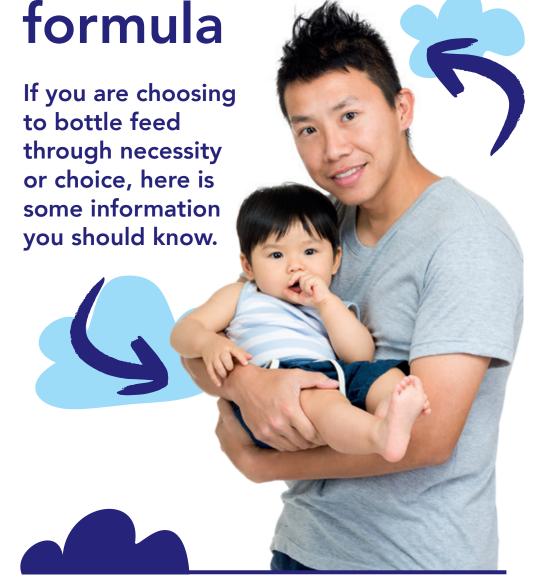
- is yellow in colour (jaundiced)
- is very sleepy and isn't waking for feeds when they should
- feeds for less than five minutes at each feed
- feeds for longer than 40 minutes frequently and/or consistently falls asleep on the breast without completing a full feed
- frequently refuses to breastfeed and/or comes on and off the breast throughout the feed

isn't having enough wet nappies or poos

Also if:

- your baby's mother feels pain in her breast during or after a feed
- you and your baby's mother are considering stopping breastfeeding due to a feeding worry

Bottle feeding breast milk and



Breast milk expression

Your baby's mother can express milk by hand and by using a manual or electric pump

Your baby's mother may want to express milk if:

- Your baby is in hospital
- Your baby is unable to breastfeed
- She is returning to work
- She is trying to increase her milk supply
- She is producing a lot of milk and the breasts feel uncomfortably full
- She plans to be away from your baby for a while





For information visit **www.nhs.uk** and type **'expressing breast milk'** in the search bar.

Bottle feeding

There are many reasons why you might be considering bottle feeding, either with expressed milk or formula milk. Talk to a health professional if you are thinking about doing this in the first few weeks as your baby's mum will need support and advice about any changes to her breasts and the effects on her and baby.

When feeding your baby with a bottle they will show you whether they've had enough, want more or need to take a break. *Remember responsive feeding and looking for feeding cues*

Signs your baby needs a break or has had enough milk:

- Splaying fingers and toes
- Milk spilling from the mouth
- Stopping sucking
- Turning head away/pushing away the bottle

Expressed milk

Your baby's mother needs to regularly empty her breasts. This will maintain her milk supply and ensure her breasts are comfortable.

If you are choosing to introduce a bottle, try to feed with the bottle at a similar time each day to minimise the impact on breastfeeding.

Your baby's bowel habits will change if you start using formula. This is because it takes longer to digest and there is more waste produced. Stools are likely to become less frequent, darker in colour and more formed.

For information visit www.nhs.uk and type 'How to combine breast and bottle feeding' in the search bar.

Formula milk

There are lots of formula brands available

Healthcare professionals cannot tell you which to choose. This is a decision for you and your baby's mother to make together.

For babies under one

- Use a standard 'first' formula; there will be a number 1 on the box
- You should not give cow's milk to your baby as a drink
 (Whole, blue-top cow's milk is ok to be used as an ingredient in solid foods.)

All formula milks available for sale in the UK meet strict nutritional standards

- Using formula milks marketed for specific non-medical purposes such as 'comfort milk' and 'anti-colic milk' is not routinely recommended. Before using these it is best to talk to your Midwife or Health Visitor.
- If your family has cultural or religious dietary requirements check the label for contents.
- If you are considering using an alternative to cows milk formula please contact a Midwife or Health Visitor.

- You can buy formula either in powder form or pre-made.
 The powdered formula works out much cheaper per feed.
- Store-bought pre-made formula should not be heated before giving to baby.
- If your baby is not taking to the formula you have chosen, speak to a health professional before changing it.

For information visit **www.firststepsnutrition.org** and choose **'Infant Milks'** from the options tab.

Safer bottle feeding

- You can bottle feed your baby with formula or expressed breast milk
- It is important that you sterilise bottles before using them to feed your baby breast milk or formula.
- Powdered formula is not sterile. You must correctly prepare formula to sterilise the milk before feeding it to your baby. Follow the instructions on the label.
- You should prepare fresh formula for each feed.
- Always bottle feed your baby by hand, don't use items to 'prop feed' your baby as this is dangerous for them. Try to position your baby so that the bottle is held horizontally/just slightly tipped and baby is close to your body.

- Formula and expressed breast milk should not be mixed in bottles. The temperature of the formula may be too high and could damage the enzymes within the breast milk.
- Unlike breastfeeding, there is a constant flow of milk into the baby's mouth when using a bottle.

Take breaks if you can see milk spilling from your baby's mouth.

- After a bottle feed, babies need to be 'winded'. This is because they often swallow air when feeding from a bottle.
 - It is common for babies to spit out some milk when being winded.
- If you think your baby is vomiting after feeds, please contact the midwifery team.

For more information visit www.nhs.uk and type 'How to make up baby formula' and 'Sterilising baby bottles' in the search bar and www.nhs.uk/Start4Life and type 'Burping your baby' into the search bar.

Safety inside and outside the home

Keeping your baby safe is one of your main jobs as a parent.

Here is some information to help you make the safest choices for your baby. We have provided you with a list of great internet resources at the end of this section too.



Handling your baby

Newborn babies aren't strong enough to hold up their own heads. It is important when you hold them that you support their head so that it is in line with their body.

- You should avoid picking up your baby by putting your hands beneath the armpits. You are unable to support the head whilst doing this. It applies pressure on a baby's body and moves baby's shoulders into an unnatural position.
- A newborn baby will not always cry if they are uncomfortable. It is your job when holding your baby to check that they are in a safe position.

The safest and most comfortable way to pick up your baby is to:

- **1.** Place one hand beneath the head and shoulders
- 2. Then the other hand on the buttocks
- 3. Lift them in a lying position

This is also the safest way to pass your baby to another person.



When winding your baby, you may choose to do so with their head looking over your shoulder. This is a great way to wind your baby and have a cuddle at the same time but be mindful of your baby's head.

If you notice your baby's head is moving around a lot, try a different position until your baby gets a bit stronger.



If you use a baby carrier/sling make sure that your baby's weight is compatible with the product you choose. All carriers will have a weight range.

Not all baby carriers/slings provide head and neck support for your baby. You can visit a child health clinic and speak with your Health Visitor if you are unsure about the safety of the carrier.

- If your baby has medical equipment (such as oxygen tubing or a feeding tube), please ask your specialist nurse for advice on how to handle your baby with this equipment in place.
- Never slide your baby across surfaces or pull them by their clothing.
 This can cause friction burns and leave them in an unnatural position.
 Always pick your baby up to move their position.

Do not throw your baby into the air or hold them high up, these are very dangerous things to do with a baby.

Illness in babies

If you don't feel it's an emergency:



Pharmacy

Expert knowledge of medicines to treat illness



Health Visitor

Trained nurses or midwives for support and guidance



GP

Tell the receptionist it is about a young baby



Call 111

Free NHS service



If you do feel it's an emergency:

Go straight to A&E or dial 999 for an ambulance



Managing illness

It is a good idea to own a thermometer to check your baby's temperature. A high-temperature is an early sign that your baby is unwell.



A normal temperature in babies and children is around 36.5°C but this can vary. A high temperature is considered to be above 38°C.

www.nhs.uk has clear advice for different ages of children, visit the site and search 'fever in children'.

- Babies rely on their milk for hydration and nutrition. If you are worried your baby's appetite has reduced call your Health Visitor. They will complete a telephone assessment and tell you what to do next.
 - Babies should not drink water until they are eating solid foods.* Call 111 if your baby is showing signs of dehydration.
- Childhood immunisations protect your baby from many serious diseases.
 - They help protect other vulnerable people who cannot have vaccinations themselves too. Your Health Visitor will give you and your baby's mother a lot of information about them. If you have any questions or concerns, please contact your Health Visitor to discuss.
- Your Health Visitor will give you information about managing illness. Please refer to this information or use the www.nhs.uk website to search for your specific concerns.

*Unless advised otherwise by a healthcare professional

Sepsis

Sepsis is a life threatening medical emergency which can be hard to spot. Sepsis needs treating early.

Call 999 or go straight to A&E if your baby has any of the following symptoms:

- Blue, pale or blotchy skin, lips or tongue
- A rash that does not fade when you roll a glass over it
- Difficulty breathing, breathlessness or very fast breathing (you may notice grunting noises or the skin sucking under the ribcage)
- A weak, high-pitched cry that is different to their normal cry
- Being sleepier than usual or difficult to wake up
- Not responding to you like they normally do

Safer sleeping

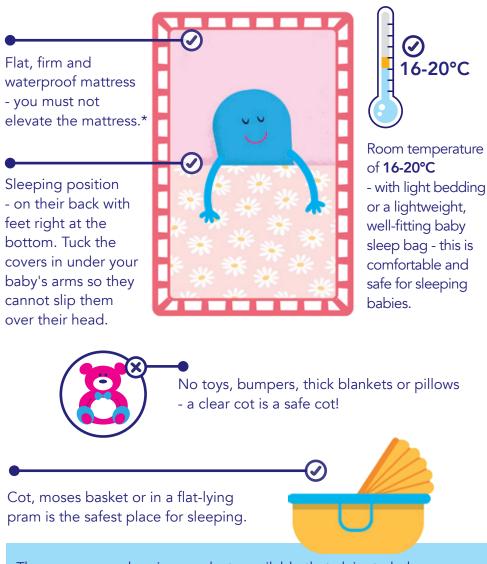
It is important that you know how to place your baby to sleep.

Young babies are not strong enough to safely position themselves.

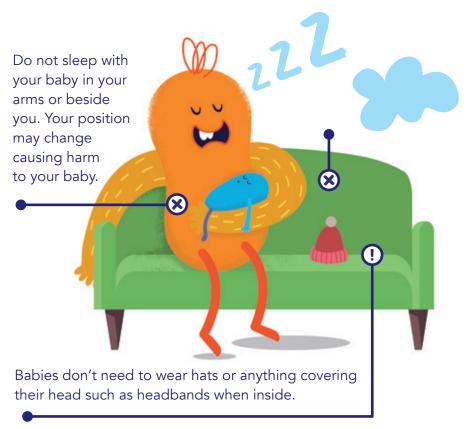
You should always place your baby to sleep on their back. Sleeping on their side or front can cause suffocation. Their nose and mouth may become covered by a blanket or the mattress.

Babies manage to move around, even in early weeks. When putting your baby to sleep it is important to place them with their feet very close to the end of the cot / moses basket. They are then unable to wriggle down under their blanket.

If you are struggling to get your baby to sleep, talk to a health professional and visit www.lullaby trust.org.uk



There are many sleeping products available that claim to help your baby sleep better (oval-shaped sleep pods, nests, pillows, cot bumpers). **These are unsafe for baby.** They can cause suffocation. There is a British Standard for cot mattresses but not for sleep pods/nests.



Your baby's head is the main way they will lose heat if they need to. A hat can stop your baby's body controlling its own temperature.



The Lullaby Trust is the best source of safer-sleeping information for parents.

Please take a look at their website for advice. www.lullabytrust.org.uk

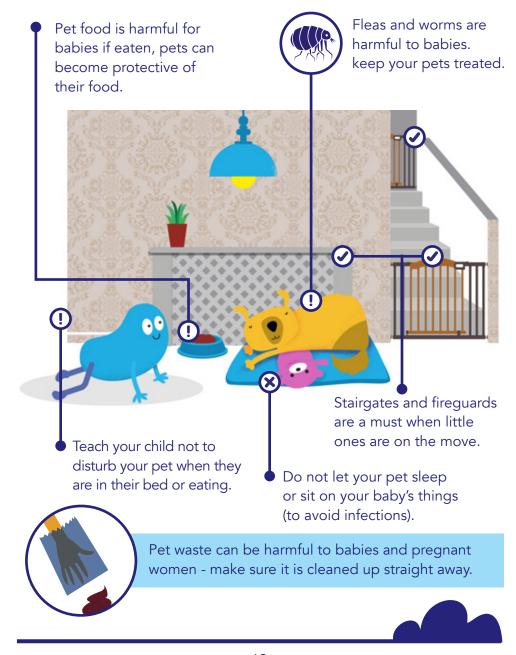
Car seats

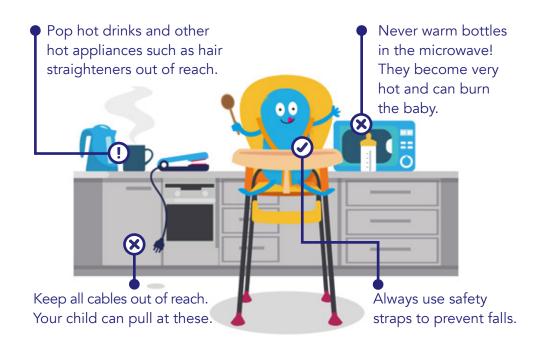
Car seats are designed to keep babies safe when travelling, not for them to sleep in for long periods.





General safety









to remove them. Make sure toys are kept in good condition with batteries secured correctly.

Laundry and dishwasher tablets are brightly coloured and attractive to babies but they are very harmful if swallowed or burst onto the skin and eyes. Keep them in high cupboards out of reach.



Glossary of Practitioners

There are lots of practitioners available to support you as a parent and parent to be. Here are some of those services

Maternity

Maternity Midwife:

Midwives provide most of the care for women during their pregnancy and birth. Student Midwives work alongside Midwives under supervision.

Senior Midwife:

Senior Midwives are Midwives with more responsibilities such as leading their team. Some specialise in extra roles such as prescribing medication and performing ultrasounds.

Maternity Support Worker:

Maternity Support Workers (MSWs) help the Midwives and Obstetric Doctors in the community and hospital. Their roles include:

- performing observations
- blood tests
- assisting with feeding and bathing your baby

Obstetric Doctor:

These doctors specialise in pregnancy and childbirth.

Anaesthetic Doctor:

These doctors specialise in pain relief and preparing patients for surgery.

Family Health Services

Health Visitor:

(also known as a Specialist Community Public Health Nurse): Community Public Health Nurses are registered nurses or midwives who can support with health, growth or development issues in children.They:

- work with parents who have new babies
- offer support and advice from pregnancy until the child starts school at age 5

Family Nurse:

Family Nurses deliver a programme called the Family Nurse Partnership (FNP). FNP is for parents and parents-to-be aged 24 and under.

A Family Nurse visits parents from early pregnancy until their child is 2 years old. Eligible families are contacted during pregnancy about the service.

Nutrition Peer Support Worker:

Nutrition Peer Support Workers promote and support breastfeeding. They help mothers and families from pregnancy and during the first 6 weeks after birth to achieve their breastfeeding goals.

Children and Young People's Practitioner:

(Nursery Nurse):

Work alongside Health Visitors and School Nurses to:

- give advice
- assess child development
- support parents

Children and Young People Support Workers and Children and Young People Practitioners have qualifications relevant to children's health and development.





Health Practitioners locally chosen by you

General Practitioner (GP):

GPs treat all common medical conditions. They refer patients to hospitals or other medical services if needed.

Practice Nurse:

General Practice Nurses work in GP surgeries as part of the healthcare team. Their role includes:

- administering immunisations
- running clinics
- taking blood samples
- performing tests on patients

All practitioners involved in supporting you as a family have a responsibility to ensure all children are protected and safe from harm. Practitioners may refer you for additional help and support from local authority colleagues. Where possible, this will be discussed with you first.

Pharmacists:

Pharmacists use their expert knowledge of medicines and health to give advice and guidance to patients. They're a great source of information and support for parents. Many are open 24 hours a day.



To find your nearest A&E, urgent care centre, GP, dentist or other health service please visit **www.nhs.uk** and type **'find xx'** in the search bar.

Additional specialist support organisations and national helplines

Opening times and availability may vary, visit the websites for up to date information

■ The Birth Trauma Association:

Helping individuals traumatised by childbirth www.birthtraumaassociation.org.uk

Bliss:

For families affected by a baby born sick and/or premature Book a video call by visiting the website www.bliss.org.uk

Cry-sis:

Support for parents with crying and sleepless babies

Helpline number: 0845 122 8669

(2p/min plus the standard network charge) Helpline hours: 09:00am – 10:00pm

www.cry-sis.org.uk

Family Lives:

Support for all aspects of family life including same-sex parenting,

young parenting and single parenting

Helpline number: **0808 800 2222** (standard network charge) Helpline hours: 9am-9pm Mon-Fri I 10am-3pm Sat & Sun

Online Chat: Mon-Fri 1:30pm-9pm

www.familylives.org.uk

Gingerbread:

Support for single parents

Helpline number: 0808 802 0925 Helpline hours: Vary, see website

www.gingerbread.org.uk

Hub of Hope:

Find local support for a variety of concerns such as mental health struggles by entering your postcode www.hubofhope.co.uk

Kicks Count:

Supporting parental knowledge of pregnancy particularly baby movements

www.kickscount.org.uk

ManKind Initiative:

Domestic abuse support for male victims

Helpline number: 0182 333 4244 (standard network charge)

Helpline hours: 10am-4pm Mon-Fri

www.mankind.org.uk

Mind:

Mental Health Support

Helpline number: 0300 123 3393 (Freephone)

Helpline hours: 9am-6pm Mon-Fri (except bank holidays)

www.mind.org.uk

Miscarriage Association:

Support for families affected by miscarriage

Helpline number: 0192 420 0799 (standard network charge)

Helpline hours: 9am-4pm Mon-Fri www.miscarriageassociation.org.uk

Sands:

Support for families affected by baby loss

Helpline number: 0808 164 3332 (standard network charge)

Helpline hours: 10am-3pm Mon-Fri / 6pm-9pm Tuesday and Thursday

evenings

www.sands.org.uk

Shelter:

Housing advice

Helpline number: 0808 800 4444 (Freephone)

Helpline hours: 8am-8pm Mon-Fri / 8am-5pm Sat & Sun

www.shelter.org.uk

Shout 85258:

Free, anonymous and confidential mental health support through text

Text: SHOUT to 85258 (free and will not appear on phone bill)

Text helpline hours: 24/7 www.giveusashout.org

Start4Life:

NHS information for parents regarding feeding and much more www.nhs.uk/start4life

Twins Trust:

Support for multiple birth families Helpline number: **0800 138 0509**

Helpline hours: 10am-1pm / 7pm-10pm Mon-Fri

www.twinstrust.org

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Additional local support

Additional local support

Congratulations, and enjoy fatherhood