



# Feeding Your Newborn

## Breastfeeding Basics

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The best way to maintain a good supply and establish a solid routine is to respond to your baby's cues and signals as soon as possible. This can feel overwhelming and exhausting at first, but often gets easier with time and practice!

### Early Cues: "I'm hungry!"

*Stirring*  
*Mouth Opening*  
*Turning Head/Rooting*

Baby can self soothe or be soothed to sleep.

### Mid Cues "I'm really hungry!"

*Stretching*  
*Increasing Movements*  
*Hand to Mouth*

Baby can be soothed for short periods.

### Late Cues "Calm then feed me!"

*Crying*  
*Turning Red/Screaming*

Hold. Rock.  
Feed.



### The Latch is The Key

- The head tilt, the position of the lips around the areola, and maintaining the seal are key factors for a good latch.
- Baby's neck should be fully extended. You should be able to see lots of space between their chin and their chest as if they are looking up at the ceiling.
- This chin lift/head tilt affects tongue function and allows your baby to open their mouth wide enough to achieve a deep and effective latch.
- Their upper lip should be just past the base of the nipple, and their bottom lip should be well below the base of the nipple.

## Is My Baby Drinking?

**Nibbling**(trying to get milk): Babies are not receiving milk while they nibble.

- The Baby's mouth is moving quickly.
- The jaw moves up and down consistently with no pause in the downward motion.
- Looks like when a baby sucks on a soother.



**Drinking (receiving and swallowing milk):**

When your baby is drinking there is a pause in the downward motion of the baby's jaw followed by swallowing sounds.

**Pain is NOT a normal part of breastfeeding! Pain is often an indicator of a poor latch or other problem. Reach out to your Dr or local IBCLC to help resolve the issue!**

## Is My Supply Enough?



*Wet (clear or light yellow urine)*



*Tar-like (meconium)*

*Runny brown, green, yellow*

*Runny mustard yellow*

**Adequate milk supply and baby weight are common concerns for new parents. Weight checks and diaper outputs are both good indications baby is getting enough milk. If the baby gains well on mom's milk alone, then the supply is good.**



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Help for every step*

Infant-feeding support can look very different depending on family needs, feeding goals, and access. Below are common professional, educational, and community-based resources, along with guidance on who they are best suited for.

## Resource Type

### Certified Lactation & Infant Feeding Professionals

- These services offer individualized, evidence-based help for breastfeeding/chestfeeding or pumping challenges, latch issues, supply concerns, pain, re-latching after gap periods, pumping strategies, tandem feeding, or complex situations (preemies, multiples, tongue/lip ties, etc.).

### Support Groups & Community Help

- These are great for peer encouragement, shared stories, and ongoing community support helpful whether breastfeeding/chestfeeding is going well or you want shared learning and connection.

### Classes & Educational Workshops

- Structured classes are ideal for prenatal learning, preparing for pumping, latch technique, or returning to work while breast/chestfeeding

## Who this is best for

Those needing personalized help (latch issues, pain, supply concerns, pumping, special situations)

Ongoing encouragement, shared experience, community support, Emotional support and adjustment beyond feeding challenges

Expectant families wanting prep and confidence before baby arrives

Here's a centralized website that's especially useful for families in the Raleigh – Durham, NC area, offering a range of family resources, not just infant feeding. These sites compile supports for parenting, feeding, childcare, health, and connection to community services: <https://welcomebaby.org>