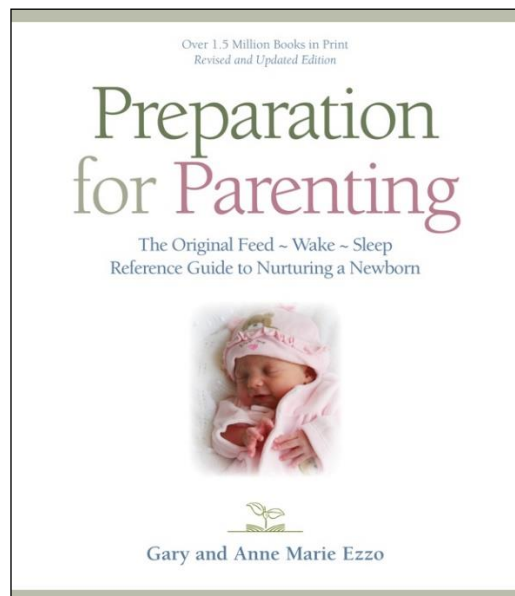


*Leader's Guide*  
*for*  
*Preparation for Parenting*



GrowingFamilies.*Life*

*The worldwide mission of Growing Families, through its staff and ministry partners, is to provide families with parenting and family resources that will help instill, encourage and perpetuate the passing on of biblical values from one generation to the next.*

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## Course Version Numbers

| Course Title              | Version / Date |
|---------------------------|----------------|
| Preparation for Parenting | 2010           |

## Points of Contact



[www.growingfamilies.life](http://www.growingfamilies.life)  
[www.growingfamiliesleaders.life](http://www.growingfamiliesleaders.life)



GrowingFamiliesLife



growingfamilieslife



GFILife



customerservice@gfius.org

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ALL RIGHTS RESERVED. No portion of this publication may be reproduced, stored in a retrieval system, or transmitted in any form, by any means – electronic, mechanical, photocopy, recording or otherwise – without prior written permission.

# WELCOME!

This Leader's Guide has been put together with the aim of encouraging you as class leaders. So, congratulations on your commitment and faith to share in the journey of parenting with others. We believe that as leaders of Growing Families courses you have both an awesome opportunity and big responsibility to speak into the lives of the parents who join you in your classes.

Time and effort will be required to establish and maintain relationships, to encourage and reassure parents, and to humbly share your journey – both your successes and mistakes. So, we hope that this manual will help you share your insights, as well as extract the most out of the course material. We hope that you will bless each family you share your journey with.

Please use this resource in conjunction with the Leader's Guide introduction found at [www.growingfamiliesleaders.life](http://www.growingfamiliesleaders.life)

Finally, we would like to share some scripture when God spoke to Moses as an encouragement. *"Who gave man his mouth? Who makes him deaf or mute? Who gives him sight or makes him blind? Is it not I, the Lord? Now go; I will help you speak and will teach you what to say."* Exodus 4:11 (NIV)

May the Lord bless you in your ministry.

Geoff & Alicia Bongers.

## A note from Gary and Anne Marie Ezzo

It is always a blessing to see others catch one's vision of the importance of establishing a biblical mindset for parenting and to come along side to help other parents to share in that vision. We so appreciate all the effort that has gone into preparing a Leaders Guide for those leading Preparation for Parenting.

Spearheaded by Geoff & Alicia Bongers and encouraged by Bill & Joan Grosser, this tool will be a tremendous resource for you as a leader as you help young couples "to begin as they mean to go." Preparation for Parenting will help lay a solid foundation for the future. For "if the foundations are destroyed, what can the righteous do?" Psalms 11:3.

The leadership team of Growing Families stands in amazement and wonder to see what truly the Lord has done. He provided the vision and we along with many other leaders, have attempted to be obedient to the call and injunction that Jesus gave us all thousands of years ago "Go therefore and make disciples of all the nations... teaching them to observe all things that I have commanded you..."

May we all remember Who we serve and may His name be glorified through the efforts of all involved with this process.

Blessings,

Gary & Anne Marie Ezzo

# Preparation for Parenting

## The Original Feed – Wake – Sleep Reference Guide for Nurturing a Newborn

The *Preparation for Parenting* series, (Parenting from Birth to Six Months). Designed specifically for parents just starting their journey into mother and fatherhood, this five part series provides the critical foundation for baby and parents. This is more than an infant-management concept; it is a mind-set for responsible parenthood. The principles presented will help any parent develop a plan that meets the needs of a new baby and of the entire family. This plan will not leave mum ragged at the end of the day nor in bondage to her child, nor will dad be excluded from his duties.

Healthy growth, contentment, good naps, playful waketimes and the gift of nighttime sleep are achievements too valuable to be left to chance. They need to be parent directed and managed. These are attainable conclusions because infants are born with the capacity to achieve these outcomes and equally important, they are born with a need to achieve them. Our goal of every lesson is to show parents how this is done but only after we demonstrate why it should be done.

The series consists of five visits, tracking two newborns and their families from birth to six months of age. Expectant parents will observe how the *Preparation for Parenting* feed-wake-sleep strategies harmonize to bring about the desired outcome: peace, order and a baby who sleeps through the night between weeks seven and nine.

Finally, as is the case with the entire Growing Families curriculum, *Preparation for Parenting* can provide trustworthy ideas and workable solutions, but not every possible answer to every unique salutation. As you lead parents through each lesson, it's become vital to think in terms of principle. Helping them understand the 'principle' derived from their hierarchy of beliefs and goals, is a greater asset than just giving them a list of 'how-to' answers. Principle parenting is wisdom parenting extended.

### First Night Leader Alerts

- Review the First Class section in the Leader's Guide Introduction available at [www.growingfamiliesleaders.life](http://www.growingfamiliesleaders.life).
- The age related content allows parents who start together in *Preparation for Parenting* to stay together as they move through each of the subsequent courses. This helps build a growing sense of community among class participants.
- Please adapt this information to suit your leadership style, class format and style.

### Follow-up & Next Course

- Following up parents helps to stay connected. This is a ministry of relationship building.
- Encourage parents to connect to your local, regional and national Growing Families communities via [www.growingfamilies.life](http://www.growingfamilies.life) or social media.
- Remind them to call you if struggling or call a local Contact Mum.
- Babyhood Transitions 5 months to 12 months builds on the principles learned to date and continues to lay the foundations for your parenting. As this course begins with introducing solids, it is usually worth doing just before the babies are 5 months.

# Visit One

## The Home Environment

Duration: 33 minutes

### General Summary

In this session, the biblical foundation of the family is presented. From Genesis 2 and Ephesians 5, the husband-wife relationship is shown as a family by itself, even without children. The husband-wife relationship is the priority among human relationships.

The greatest influence parents have on their children is as a husband and wife, rather than a mother and father. Children derive much of their security from seeing the husband-wife relationship functioning smoothly. Children have an intrinsic need to know their parents are solid in their relationship.

### Key Principles

- The family is the primary social unit of every society – one worth protecting and keeping.
- Creating a loving home environment where a baby will feel safe and secure starts with mum and dad’s commitment to each other.
- The quality of the parent-child relationship is dependent upon the quality of the husband-wife relationship.
- A strong marriage is a firm foundation to maximise your parenting influence.
- Couch-time - even infants need to see a concrete demonstration of their parent's love for each other.

### Suggested Session Outline

|                                 | Flipped | Traditional |  |
|---------------------------------|---------|-------------|--|
| Open in Prayer and introduction | ✓       | ✓           | Start by introducing yourself as leaders; refer to First Class section in the Leaders Introduction found at <a href="http://www.growingfamiliesleaders.life">www.growingfamiliesleaders.life</a> . |
| Sharing Time                    | ✓       | ✓           | Ask each couple to introduce themselves and what their expectations are of this course.  |
| Video                           |         | ✓           | Duration: 33 mins – Visit Summary page 21  |
| Refreshments                    |         | ✓           | Being the first class this may not last long if your group doesn’t really know each other, but this time can merge into your discussion time.  |
| Discussion                      | ✓       | ✓           | Start your discussion using the possible discussion topics in this manual. Allow parents to ask their own questions.   |
| Close in Prayer                 | ✓       | ✓           | Encourage parents to implement the principles and complete any activities ready for the next class.  |



#### Please Note

When using the email templates, you may want to set a reminder to do this either straight after the class or the next day, so the class participants know when to expect them.

## Visit One Summary

### Chapter One

- 1. Creating a loving home environment, where a baby will feel safe and secure, starts with Mum and Dad's commitment to each other.
- 2. Understanding is an attribute of learning that all couples must seek to gain as they start their journey of parenting.
- 3. The best way to evaluate any parenting theory is to look at the short and long-term outcomes. Seek to follow after the good examples of other parents.
- 4. Your baby's life will be shaped by three great influences:
  - a. Genetic disposition.
  - b. God given temperament.
  - c. The home environment created by Mum and Dad.
- 5. As individuals, a mother and father cannot communicate the total message of love apart from the oneness that is formed in the bonds of their marriage. That is how God designed it!
- 6. The Genesis account teaches us that:
  - a. Marriage is the first social relationship established in scripture.
  - b. Marriage forms a complete family. Children expand the family but do not make you a family.
  - c. The more parents demonstrate love for each other, the more they saturate their child's senses with the confidence of a loving, safe and secure world.
- 7. The five principles to keep your marriage strong so you can maximize your parenting influence include:
  - a. Life doesn't stop when you have a baby. It may slow down for a few weeks, but it should not stop entirely.
  - b. Take time to commune with God through prayer and study.
  - c. Date your spouse.
  - d. Continue those loving gestures that marked your marital friendship as special.
  - e. Learn to practice 'Couch Time'.
- 8. A single parent faces double duty with the care and responsibility of rearing a baby, while often wearing several hats as homemaker, provider and parent. But a single parent loves her baby with the same passion as a couple and desires as strongly as any couple to give her baby the best chance in life.

## Possible Discussion Topics

*Relating the following topics to real life situations that may have occurred within your own family will greatly assist your class members in understanding the principles in this lesson.*

*This section may include discussion questions (●) and reminder points (❖) and some practical activities (➤). Use your discretion on how to use these in your class.*

- **Did anyone have a key take-away from this visit that they would like to share?**  
You may like to first read over the summary points of the visit to help this discussion. You may like to first read over the summary points of the visit to help this discussion. As a leader take note of these answers because they are a great conversational starting point for the next visit. For example, a mum may state: "I really appreciated being reminded of the importance of my personal quiet time." When the class meets again, you might ask her: "How did you do this week with your personal devotions?" The more you are able to reach back to their personal comments, the more conversational the entire class becomes.
- **What are the best times in your weekly routine for couch-time?**  
Use examples of different ways you do couch-time, such as ... on a park bench while your children play, at the dinner table after a meal, with baby watching from a seat, etc.  
When doing couch-time with very young children, try to put them in a position to see you both together. However, the most important thing is giving your undivided attention to each other. What other ways are there to demonstrate your love for each other in front of the children?
- **What ways can we nurture our marriage relationships?**  
A healthy marriage is a big part of a healthy home environment. A few principles to discuss:
  - Life does not stop once the baby arrives.
  - Take time to commune with God through prayer and the study of His Word.
  - Date your spouse.
  - Continue those loving gestures that were enjoyed before the baby came along.
  - Practice couch time.
- ❖ **Emotions at the baby's arrival, often invoke a natural inclination towards being child-centred**  
Just keep balance that other things are important too, especially your husband-wife relationship, and your decisions shouldn't all revolve around the new baby. However, don't feel guilty about spending lots of time with your baby. Enjoy them, and yes, they do take up lots of time!  
Failing to demonstrate your marriage relationship to your children undermines the foundations of your training.

## Homework Assignment

*Highlight the key activities listed below to encourage class members to apply the principles covered. Remind the class members to be prepared to share their insights and experiences as appropriate.*

1. **You can start a habit of couch-time right now, it's an ideal opportunity to do homework together and discuss what you're learning.**
2. **Read Chapter 1, Right Beginnings and answer the questions.**



### **Please Note**

This is a pretty easy week in terms of reading and homework. Really encourage couch time, suggest topics from your own experience or suggest that they discuss how to meet each other's needs once the baby comes along.

## Supplemental Resources

### **Online**

Class Email Template

[growingfamilies.life](http://growingfamilies.life)   [growingfamiliesleaders.life](http://growingfamiliesleaders.life)



### **Title**

Calm Baby, Confident Mum

### **Author**

Simone Boswell

### **ISBN**

978 0 646 47835 7



## Questions for Review – Chapter 1 - Pages 30 PFP Manual

**1. How would you summarize the major theme of the chapter?**

Answers may include the following themes:

Biblical foundations of the family is the marriage relationship and that it lacks nothing.

The home environment is the single greatest influence shaping a child.

Children are to be welcome members of your family but not the centre of it.

**2. List and offer a short explanation of the three great influences on a child's life?**

(page 25 - 26)

a. Their genetic disposition inherited from their mum & dad.

b. Their God-given temperament.

c. The home environment created by mum & dad.

**3. A healthy vibrant marriage relationship provides children with what? (page 28)**

A healthy vibrant marriage relationship provides a haven of security for children as they grow in the nurturing process as it creates a sense of certainty for them.

**4. Do children make a family or do they expand the family? Explain your answer. (page 27)**

Children expand the family. God declared marriage of a man and woman to be a complete relationship when he concluded the sixth day of creation by declaring "Now it is very good."

**5. What is Couch Time? (page 29)**

Couch Time is say, 10-15 minutes often at the end of the workday when Dad & Mum sit as a couple and talk to each other. This gesture provides a tangible sense of their parents; togetherness and fulfils on of their greatest emotional needs – the need to know of dad & mum's strong love for each other.

## Visit Two

# The Ripple Effect Principle

Duration: 26 Minutes

### General Summary

Various different feeding philosophies are presented in this session to show the importance of understanding and deciding which philosophy is best for their family. The alternative of Parent Directed Feeding (PDF) is presented to bring out the best in both parent and baby because it is child-oriented not child-centred or mother-centred.

Every action taken as a result of your parenting beliefs sets in motion the ripple effect impacting outcomes with your children. Every feeding philosophy sets in motion a neurological chain reaction, impacting everything else down the line. The feeding philosophy you choose creates the first RIPPLE impacting waketime and sleep patterns which in turn impact a child's cognitive abilities.

### Key Principles

- Every action taken as a result of your parenting beliefs sets in motion the ripple effect impacting outcomes with your children.
- Every feeding philosophy sets in motion a neurological chain reaction, impacting everything else down the line.
- The feeding philosophy you choose creates the first ripple impacting waketime and sleep patterns which in turn impact a child's cognitive abilities.
- With PDF a parent will feed their baby upon the hunger cues but will always allow the clock to provide protective limits.
- Routine feedings encourage the stabilization of your baby's hunger metabolism just as erratic feedings discourage stabilization.

### Suggested Session Outline

|                 | Flipped | Traditional |   |
|-----------------|---------|-------------|---|
| Open in Prayer  | ✓       | ✓           |   |
| Review          | ✓       | ✓           | Ask if there are any questions, insights or thoughts from the previous visit and go through the questions for review. |
| Video           |         | ✓           | Duration: 26 mins - Visit Summary page 33   |
| Refreshments    |         | ✓           | This may merge into your discussion time.   |
| Discussion      | ✓       | ✓           | Start your discussion using the possible discussion topics in this manual. Allow parents to ask their own questions.  |
| Close in Prayer | ✓       | ✓           | Encourage parents to implement the principles and complete any activities ready for the next class.                   |

## Visit Two Summary

### Chapters Two & Three

- 1. Every action taken as a result of your parenting beliefs sets in motion the ripple effect impacting outcomes with your children.
- 2. Every feeding philosophy sets in motion a neurological chain reaction, impacting everything else down the line.
- 3. The feeding philosophy you choose creates the first RIPPLE impacting waketime and sleep patterns which in turn impact a child's cognitive abilities.
- 4. The infant led feeding philosophy wrongly assumes "baby knows best". This could lead to lack of proper nutrition due to a sluggish baby not showing signs of hunger or a baby feeding too often and not receiving full feedings.
- 5. Clock Feeding does not consider any factors other than the constant of the clock. In this case, legitimate signs of hunger may be ignored.
- 6. With the Parent-Directed approach you feed your baby when he is hungry but the clock provides the protective limits so you are not feeding too often, such as every hour, or too little such as every four to five hours.
- 7. PDF encourages full feedings rather than snack or cluster feedings.
- 8. With PDF a parent will feed their baby upon the hunger cues but will always allow the clock to provide protective limits.
- 9. Most healthy infants have the ability and the capacity to achieve nighttime sleep between seven and nine weeks of age. It is an acquired skill that is enhanced by a feeding routine.
- 10. Routine feedings encourage the stabilization of your baby's hunger metabolism just as erratic feedings discourage stabilization.
- 11. The three common sleep props included:
  - a. sleep vibration equipment.
  - b. rocking or nursing a baby to sleep.
  - c. using a car ride to put baby to sleep.
- 12. The death rates associated with co-sleeping with infants are so high, that many members of the American Academy of Paediatrics are calling for a complete ban on co-sleeping.

## Possible Discussion Topics

Relating the following topics to real life situations that may have occurred within your own family will greatly assist your class members in understanding the principles in this lesson.

This section may include discussion questions (●) and reminder points (❖) and some practical activities (➤). Use your discretion on how to use these in your class.

- **Did anyone have a key take-away from this visit that they would like to share?**  
You may like to first read over the summary points of the visit to help this discussion. As a leader, note take-aways as they are a great conversational starting point for the next visit.
- **What are the benefits of using a routine?**  
Security and contentment for the baby, allows you to get other things done, frees a breastfeeding mother to leave baby with confidence. It is interesting to note that hospitals use a routine for premature babies, for health reasons.
- **What are some of the problems with Attachment Parenting?**  
Stress, lack of sleep, fussiness, contentment deficit, problems with breastfeeding, post natal depression, detracts from a sound marriage, what happens when next baby arrives ... and where's Dad?
- **How much sleep does a baby need? How much crying does a baby need?**  
Baby needs 16-20 hours sleep a day during first couple months, moving down to 14-18 hours at 6 months. A baby needs naps at least 1½ hours long.  
New babies cry between 1 to 4 hours a day, and they need to cry. Amount of crying peaks at about 6 weeks old.  
What happens if you block that cry? Fussy, high need baby, that cannot let off steam, so cannot go to sleep.
- ❖ **"Parental Assessment" is a term introduced here. It works on the assumption that the parent knows best and not the baby. Encourage your class that they will understand this term more in later weeks. Very simply, it means that parents have to think and assess each situation, discussing any challenges together, using what they learn from this course along with a good dose of 'common sense'.**  
Some of facts that they will need to consider are:
  - Is this normal behaviour for my baby? What are they characterised by?
  - Is this a normal cry period, or an abnormal one?
  - Is baby comfortable? Could they be sick? Need a nappy change? Might they be hungry?
  - How long has baby been awake? When are they due for bed?
  - How long ago was the last feed? Was it a good feed?
  - How long did baby sleep? Was their prior sleep a good one, or are they still catching up?
  - How much waketime can our baby tolerate, before it affects their ability to sleep, or to play?
  - What other events are coming up today? Are there any appointments that cannot be moved?For the longer term, *Parental Assessment* is the start of proactive parenting, and encourages parents to work together, and to pray for wisdom to make the right choices.

- ❖ **Avoid the use of products and/or techniques which help your baby go to sleep (sleep props).**  
 Comfort your baby, enjoy your baby, but as a general rule, let your baby put herself to sleep. Use a range of methods to comfort your baby, familiarity (voice, face, music), singing, stroking/patting/motion, visual distraction, sucking.  
 Sucking provides comfort because it caters to one of their strongest reflexes. Some babies need it more than others. If you choose to use a dummy, use it while your baby is awake, in preference to bedtime, to help satisfy their need to suck.
- **Demonstrate cloth nappy folding and discuss cloth vs disposable nappies.**  
 There are many options available for parents these days. Have some fun with this – make the dads to a nappy change on a doll... time them... This is quite a valuable practical exercise.



**Please Note**

The 'sleep prop' reminder topic could also be asked as a question, 'what are sleep props', 'what did you use as a baby' or 'why should sleep props be avoided'...

## Homework Assignment

*Highlight the key activities listed below to encourage class members to apply the principles covered. Remind the class members to be prepared to share their insights and experiences as appropriate.*

1. **FPF Manual – Read Chapter 2, 'Feeding Philosophies' and Chapter 3, 'Babies and Sleep' and answer the questions.**

## Supplemental Resources

**Online**

Class Email Template

[growingfamilies.life](http://growingfamilies.life)    [growingfamiliesleaders.life](http://growingfamiliesleaders.life)



**Title**

Calm Baby, Confident Mum – Chap 8

**Author**

Simone Boswell

**ISBN**

978 0 646 47835 7

## Questions for Review – Chapter 2 & 3 – page 53-54 PFP manual

**1. What is the “Ripple Effect” and how does it apply to infant feedings?** (page 35-36)

The Ripple Effect is when every decision made and every action taken directed by our personal beliefs and assumptions, sets in motion rippling effects of corresponding outcomes. Those outcomes are tied to the nature of our beliefs. The feeding philosophy a mother and father decide to implement will produce an ever-expanding series of ripples, impacting every aspect of a baby’s life and takes parents in different directions and cause different outcomes.

**2. During the 20<sup>th</sup> century, what were the two predominant views of baby management? What did they emphasise?** (page 36 - 37)

Behaviourists – Clock Feeding: Their belief was that a child was moulded by his or her environment. A regimented feeding schedule of every four hours was considered to be the best for the child.

Neoprimitivism – Child-Led Feeding: Stressed the instinctual, animal-like qualities of infancy. Structure was not important – when the baby fussed you were to feed them. This satisfied both nutritional needs as well as presumed psychological needs.

**3. What is the birth-trauma theory? What does it require from a mother?** (page 37 - 38)

This theory postulates that the separation at birth momentarily interrupts the mother-child in utero harmony. The goal of early parenting is re-establish that harmony by the constant day and night presence and availability of the mother to the child.

**4. How is *Parent-Directed Feeding* philosophy different from demand-feeding?** (page 40)

Parent-Directed Feeding uses both the variable of the hunger cue and the constant progression of time together with parental assessment to make an informed decision. The parent can utilise the variable of the hunger cue when necessary and the constant of the clock when appropriate. Demand-feeding uses only the hunger cues.

**5. How and why do feeding philosophies impact night time sleep?** (page 45)

Your approach to feeding will have a profound influence on your child’s biological rhythms, ultimately affecting the establishment of healthy sleep patterns or sleep disturbances.

**6. Explain the relationship between babies who get full feedings and night time sleep?** (page 46)

Full feedings impact wake time; good wake times impact naps and a good napper is a better feeder. As the quality of each activity deepens, it leads to healthy night time sleep.

7. **Where does optimal alertness come from?** (page 46)

Optimal sleep in a twenty-four hour cycle impacts optimal alertness, which improves cognitive function that increases brain growth and a host of other neurologic benefits. This all begins with a quality feed at each feeding.

8. **What is a “sleep prop?”** (page 50-51)

A “sleep prop” is something that helps the child either get to sleep or back to sleep when awakened prematurely.

9. **What does the American Academy of Paediatrics say about co-sleeping with an infant?** (page 52)

They warn us of the death risk associated with co-sleeping with a baby. It increases the risk of SIDS.

## Visit Three

# The First Ten Days

Duration: 38 Minutes

### General Summary

This session looks at breast-feeding and gives facts on milk production. This is a very practical lesson as it also shows positions for feeding and burping your baby. What your feeding periods look like during the first few days are discussed in detail. Bottle-feeding is also discussed as alternative for those parents who decide to do so or who cannot breast-feed.

Monitoring your baby's growth is an important task for parents. Healthy growth indicators are listed in the recommended reading to help parents know what to watch for. In addition, a section on baby and mothers health covers a wide range of important topics. It is worth being familiar with the chapter material as it is not covered in detail in the session outline.

### Key Principles

- Many factors influence successful lactation – number 1 reason for giving up is stress and fatigue. Mum needs rest each day.  
Mum must keep own fluids and calories up as well as produce them for baby.
- Keep baby awake for a full feed (a key to success). Long feeds are important for establishing milk supply, establishing the routine, and for the baby to get the calories in the hind milk.  
Fore milk is like skim milk, whereas hind milk is likened to full cream, rich in calories  
Aim for 15 minutes per side, or 10/10/5/5. Maybe even 20 minutes per side while the baby is still learning.  
Feed on **both sides at every feed** to stimulate milk supply.  
Baby needs time to fully digest milk (breast or bottle), so during first four weeks, generally feed in a 2 ½ to 3 hour cycle (from beginning of one feed to beginning of the next).
- Monitoring your baby's growth is a vital concern. Parents need to be aware of objective indicators to assist them in the evaluation process. Healthy Growth Charts are found at the end of the manual to help parents with this process (Appendix 8).



## Suggested Session Outline

|                 | Flipped | Traditional |   |
|-----------------|---------|-------------|---|
| Open in Prayer  | ✓       | ✓           |   |
| Review          | ✓       | ✓           | Ask if there are any questions, insights or thoughts from the previous visit and go through the questions for review. |
| Video           |         | ✓           | Duration: 38 mins – Visit Summary page 57   |
| Refreshments    |         | ✓           | This may merge into your discussion time.   |
| Discussion      | ✓       | ✓           | Start your discussion using the possible discussion topics in this manual. Allow parents to ask their own questions.  |
| Close in Prayer | ✓       | ✓           | Encourage parents to implement the principles and complete any activities ready for the next class.                   |

## Visit Three Summary

### Chapters Four & Five

- 1. In terms of nutrition, babies will thrive both on breast-milk or formula. However when it comes to comparing the broader benefits between the two, breast milk is the perfect food.
- 2. During the first week to ten days, whether breast or bottle-feeding, the primary goal is to work with your baby to take a full feeding at each feeding rather than being concerned about actively establishing your baby's routine.
- 3. On average, PDF moms feed their babies about every two to three hours.
- 4. Babies typically lose between five and seven percent of their birth weight. This is not loss in actual body mass as much as it is a loss of excess fluids.
- 5. Parents need to be aware that their baby's initial alertness after birth gives way to sleepiness and the potential subsequent challenge of keeping their baby awake to take a full feeding.
- 6. There are three types of breast-feeding milk:
  - a. Colostrum is the first milk produced and continues for two to four days,
  - b. Transitional milk follows colostrum for two weeks,
  - c. Mature milk which contains both foremilk and hindmilk, stays with Mum until weaning.
- 7. At each feeding, your baby will first receive foremilk followed by the hindmilk. The hindmilk contains higher levels of fat that are necessary for weight gain.
- 8. Snack feeding, or 'clusters of snack feeding' through out the day do not equal a FULL FEEDING, and works against a baby's ability to organize and synchronize his hunger rhythms.
- 9. Signs of your baby receiving a full feeding include:
  - a. Hearing baby swallowing milk.
  - b. Baby stops feeding when he is satiated.
  - c. Baby burps well after feeding.
  - d. Baby is napping well.
  - e. Adequate time is provided for the baby to receive a full feeding.
- 10. Caesarean sections account for nearly one third of all births in the United States.
- 11. Remember, having a baby delivered via caesarean birth involves major abdominal surgery, requiring an incision through both the abdominal wall and the uterus.
- 12. The hormone changes Mum experiences after her baby's birth are normal, to be expected, and temporary.
- 13. Parents can learn to monitor your baby's growth by becoming familiar with the Healthy Baby Growth Chart provided in this manual.
- 14. Parents should not be concerned about or focused on 'sleep training' during the first four weeks of their baby's life.

## Possible Discussion Topics

*Relating the following topics to real life situations that may have occurred within your own family will greatly assist your class members in understanding the principles in this lesson.*

*This section may include discussion questions (●) and reminder points (❖) and some practical activities (➤). Use your discretion on how to use these in your class.*

- **Did anyone have a key take-away from this visit that they would like to share?**  
You may like to first read over the summary points of the visit to help this discussion. As a leader, note take-aways as they are a great conversational starting point for the next visit.
- **What causes low milk supply? What can you do to increase supply?** (Refer to Appendix 7 for detailed information.)  
Stress and fatigue, mum's diet and low water intake, feedings too far apart, shallow feedings (too close together), poor attachment, not feeding from both breasts at each feed, removed the middle of the night feed too soon.  
To increase supply, introduce another feed, express at end of feeds, make routine more consistent.
- **How important is adequate nutrition for a newborn baby? How important is weight gain? How do you know if you have a problem? What should you do in that situation?**  
Adequate nutrition is critical, life-giving. Initial weight-loss is normal; babies typically lose between 5–7% of their birth weight. However beyond this initial loss, weekly gain in either weight or length is vital.  
Definitely notify your doctor or clinic nurse as soon as you have concerns, also take steps to isolate what the problem is, and call a Contact Mum. And use the Healthy Growth Charts in the back of workbook!
- ❖ **Feeding your baby may initially take between 25-45 minutes. By 1 ½ weeks, this generally comes down to 15-30 minutes. If you have a 'fast' feeder, take special care to use your Healthy Baby Growth Charts, to make sure they are getting enough. Keep your 'Healthy Baby Growth Charts' in a handy place to record daily.**  
Weight gain is one of the best growth indicators, weigh weekly for the first few months. Note feedtimes too.  
Your baby may be hungry if you are getting light-weight nappies, yellow urine, if you didn't hear much rhythmic suck/swallow at the last feed time, or if the last feed time was shorter than usual. If your newborn baby is not settling at all for more than 3 naps in a day, there may be a medical reason.  
If you have a caesarean, it may not be possible to feed directly after the birth, and this is ok!
- ❖ **If wanting to breast feed, avoid a bottle for the first two weeks and until breastfeeding is working well. You may then choose to introduce a bottle (with expressed milk) by two months, to help your baby get used to it.**  
Easier baby-sitting, ie. Have a date night, emergencies, or in case mother needs to take medication which prevents breastfeeding.
- **It can be helpful to show a manual breast pump and how it works; many mums will use one of these at some stage while they are breastfeeding.**  
Pumping and feeding can be difficult. Breast feeding may be difficult, but it does get easier.

## Homework Assignment

*Highlight the key activities listed below to encourage class members to apply the principles covered. Remind the class members to be prepared to share their insights and experiences as appropriate.*

1. PFP Manual – Read Chapter 4, ‘Facts on Feeding’ and Chapter 5, ‘Taking Care of Baby and Mum’ and answer the questions.
2. Read Appendix 3 “Expectation Worksheet,’ Appendix 4 “Colic, Reflux and the Inconsolable Baby” and Appendix 7 ‘Monitoring Your Baby’s Growth’.



### Please Note

There is a lot of reading for this week, however there nearly as much next week. Please encourage your class to try and get through it all.

## Supplemental Resources

| Online                            | <a href="http://growingfamilies.life">growingfamilies.life</a> | <a href="http://growingfamiliesleaders.life">growingfamiliesleaders.life</a> |
|-----------------------------------|--|--|
| Class Email Template              |  | <input checked="" type="checkbox"/>  |
| Healthy Baby Growth Charts        | <input checked="" type="checkbox"/>                            | <input checked="" type="checkbox"/>  |
| Title                             | Author   | ISBN   |
| Calm Baby, Confident Mum – Chap 1 | Simone Boswell   | 978 0 646 47835 7  |

## Questions for Review – Chapter 4 & 5 – page 90 - 91 PFP manual

**1. List the basic infant hunger cues.** (page 60)

As a baby is nearing the end of a sleep cycle, he will often make a little sucking sounds and he may even bring his hand towards his mouth and begin sucking. When parents hear a slight whimpering which can grow into a full cry is also a hunger cue.

**2. Please finish the rest of the sentence: The Parent-Directed Feeding approach not only provides for sufficient demand but also promotes:** (page 61)

Full feeding at each feeding.

**3. List two indicators that your baby is receiving enough milk for healthy growth.**

Please note that this question may be taken two ways – both provide valid information.

Preferred answers from Chapter 4 – page 61

- A sufficient amount of time is provided to receive a full feeding.
- Ten to fifteen minutes per breast and twenty to thirty minutes for formula-fed babies is the minimum.
- Hearing the baby swallowing milk.
- The baby pulls away from the breast or bottle when satiated.
- The baby is burping well after feeding.
- The baby is napping well.

Answers from Appendix 7 – page 208 – Week One

- Baby goes to breast and nurses
- Baby is nursing a minimum of 8 times a day.
- Baby is nursing over fifteen minutes at each nursing.
- You can hear baby swallowing milk.
- Your baby has passed his first stool called meconium
- Your baby's stooling pattern progresses from meconium to brownie batter transition stools to yellow stools by the fourth or fifth day. An increased stooling pattern is one of the most positive signs that your baby is getting enough milk.
- Within 24-48 hours, your baby starts having wet nappies and increasing to at least two-three a day and by the end of the week becoming more frequent.

**4. What is colostrum and when does a baby receive it?** (page 65)

Colostrum is the first milk produced which is thick yellowish liquid. it is five times higher in protein while lower in sugar and fat compared to the more mature breast milk that has yet to come in.

5. **What is the difference between foremilk and hindmilk?** (page 65)

Foremilk is released first from the breast and is generally thin in consistency and lower in fat content, but higher in lactose, satisfying the baby's thirst and liquid needs. Hindmilk is released after several minutes of nursing. It is similar in texture to cream and has high levels of fat that are necessary for weight gain, brain development and healthy stooling patterns.

6. **What is the PDF first rule of feeding?** (page 64)

The first rule of feed states always feed a hungry baby.

7. **Why should you not be thinking about sleep training for the first ten days? Explain your answer.** (page 67)

Sleep training becomes a goal that first depends on a baby having achieved two things. First, routinely receiving full feedings and second, the ability to demonstrate some measurable waketime that is independent of feeding time. These two things take more than ten days to establish.

2. **In terms of averages, when should a parent be expecting baby's first and second growth spurt?** (page 68)

The first growth spurt is around 10 days after birth and the second is about 3 weeks.

3. **As it relates to infants, what is the difference between 'spitting up' and 'projectile vomiting'?** (page 70)

Spitting up is a common occurrence with infants. It may occur in the burping process when the 'bubble' is released. When this happens, some of the milk taken in comes along with it, and is spit up.

Projectile vomiting is a much greater volume and very forceful. It can literally travel four or six feet across a room.

## Visit Four

# The First Month

Duration: 44 Minutes

### General Summary

Parent Directed Feeding all revolves around three basic activities. Baby is fed. Baby is awake. Baby sleeps. This process is the heart of the PDF plan to help establish your baby routine. This session helps parents understand this and teaches them how to put this into practise.

Your baby's cry is the means in which your baby talks to you. Crying tells you when your baby is tired, wet, sick, bored, frustrated, out of routine, fed too often or simply because that is just what healthy babies do. It is important to learn your baby's cry disposition so with parental assessment you can make a wise choice as to what to do.

### Key Principles

- Feed-Wake-Sleep (yes, again) this is really that important.
- Throughout the first year, parental management is all about merging the changing needs of one growth stage with another.
- Flexibility and recognising context is very important.
- Crying is a baby's language; they speak it for many reasons. Different types of comfort are required for different needs; be it hunger, tiredness, full nappy, startled etc.  
Crying is normal part of baby's day, use parental assessment.  
Remember parents' emotions are very strong especially when crying is involved.  
Listen, Assess, Pray, Take Action - Proverbs 1:5.
- Understanding your baby's cry is an important parenting skill – which is harder than it may seem.

### Suggested Session Outline

|                 | Flipped | Traditional |   |
|-----------------|---------|-------------|---|
| Open in Prayer  | ✓       | ✓           |   |
| Review          | ✓       | ✓           | Ask if there are any questions, insights or thoughts from the previous visit and go through the questions for review. |
| Video           |         | ✓           | Duration: 44 mins - Visit Summary page 95   |
| Refreshments    |         | ✓           | This may merge into your discussion time.   |
| Discussion      | ✓       | ✓           | Start your discussion using the possible discussion topics in this manual. Allow parents to ask their own questions.  |
| Close in Prayer | ✓       | ✓           | Encourage parents to implement the principles and complete any activities ready for the next class.                   |

## Visit Four Summary

### Chapters Six, Seven & Eight

- 1. Infants thrive on routine and they love predictability.
- 2. Your baby's day is a continual repeat of three activities: feeding time, waketime and nap time in that order.
- 3. Between birth and two weeks, a baby's feeding time is his waketime.
- 4. Between weeks three and five, a baby's waketime begins to separate from feeding.
- 5. By week six, your baby's waketime is a distinct activity from feeding time.
- 6. The time between feedings is measured from the beginning of one feeding to the beginning of the next.
- 7. If you need to awaken your baby during the day to prevent him from sleeping longer than the 3-hour cycle, do so! Such parental intervention is necessary to help stabilize the baby's digestive metabolism and to help organize his sleep patterns.
- 8. A baby can sleep longer than 3 hours at night but breast-fed babies should not sleep longer than four to five hours during the first three weeks.
- 9. When attempting to establish a baby's routine, decide the first feeding time of the day and try to stay as close to it as possible.
- 10. Having flexibility in a baby's routine can only happen after the routine is consistently in place. The word "flexibility" means, "to stretch and return to normal." If there is no routine, there is no flexibility, just random chaos.
- 11. A growth spurt is a biological response that occurs when a baby requires additional calories for a specific growth transition or to restore depleted energy to the cells.
- 12. Growth spurts usually take place around ten days after birth, followed by 3 weeks, 6 weeks, 3 months, and 6 months.
- 13. Babies have abnormal and normal cry periods. Abnormal crying means baby is crying when baby shouldn't be, such as crying:
  - a. During a feeding.
  - b. Immediately after a feeding.
  - c. In the middle of a nap period.
- 14. There are times throughout the day when babies tend to cry. These times are normal expected cry periods, and include crying:
  - a. Just before a feeding.
  - b. When going down for a nap or nighttime sleep.



- 15. The four steps in answering a baby's cry include
  - a. Listen for the type of cry.
  - b. Think about where your baby is in his routine.
  - c. Pray for wisdom to accurately respond.
  - d. Take action based on actual need and context of the moment.

## Possible Discussion Topics

*Relating the following topics to real life situations that may have occurred within your own family will greatly assist your class members in understanding the principles in this lesson.*

*This section may include discussion questions (●) and reminder points (❖) and some practical activities (➤). Use your discretion on how to use these in your class.*

- **Did anyone have a key take-away from this visit that they would like to share?**  
You may like to first read over the summary points of the visit to help this discussion. As a leader, note take-aways as they are a great conversational starting point for following up.
- **Should you ever wake a sleeping baby? What about at night-time?**  
You may need to wake her during the day, so that she learns when night-time is. This benefits your baby, so it's the action of kind and caring parents to gradually achieve an appropriate day/night routine.  
Wake them in the middle of the night to feed before the 4<sup>th</sup> week to build your milk supply, and to ensure adequate nutrition, but no wake-time. Also feed them in middle of night if your milk supply needs a boost.
- **When will you aim to have your first feed, and last feed of the day?**  
7am first feed therefore 11pm last feed; 6am first feed therefore 10pm last feed. Refer to page 99 to work through a routine with the class.  
You can g-r-a-d-u-a-l-l-y stretch your baby out to a later morning wake up time. It is all about merging two cycles into one.
- **Any other questions about implementing the routine?**  
Emphasize that it is a process. You may only have 1 or 2 'textbook' cycles in first few weeks, then moving up to 3 to 4, then gradually up to 3 to 7 textbook cycles. Also, babies commonly have one fussy cycle each day and one bad day each week.
- **What activities make up a baby's wake time?**  
The answer is age dependent on age.  
For babies less than 10 days old a baby's wake time and feed time are the same thing.  
For babies 10 days through 4 weeks activities may include:
  - Mum and baby together.
  - Time with other family members.
  - Baby wake time alone.(refer to page 117 – 121 for more activities).
- **When does a baby cry?**  
Abnormal crying times:
  - During feedings.
  - Immediately after feedings.
  - At times when baby wakes early out of a sound sleep.Normal crying times:
  - Just before a feeding.
  - When baby is put down for a nap or nighttime sleep.
  - Late afternoon/early evening period.

- ❖ **It's great to grasp the theory, but the practice is harder. Be realistic about the challenges for baby, mum & dad.**

Learning to feed is not easy. Learning to sleep is not easy.

- **How do you feel about nap-time crying? How long should a baby cry?**

Challenge in assessing cry (tone and character of cry, timing the cry). Normal-vs- abnormal cry periods.

Cry disposition / sleep disposition (you don't need to stifle sleep cries with a dummy, they serve a purpose).

What's wrong with controlled crying? Presumes psychological fragility, either they need you or they don't.

A baby can completely lose control, at which time a wise parent calms them down so they can try again.



#### **Please Note**

Another cry disposition is the F-111. It is particular difficult for parents to cope with as gets quite loud and persistent.

This is when a baby's cry would climb rapidly from a whimper to a wail, like an F-111 heading up into the stratosphere. Then at the height of the cry it would stop abruptly and the baby would then drop off to a sound sleep. This escalation can take 5 to 10 minutes.

- **What are the four steps in answering a baby's cry?**

- Listen for the type of cry.
- Think about where your baby is in his routine.
- Pray for wisdom to accurately respond.
- Take action based on actual need and context of the moment.

- ❖ **A baby's cry will evoke in you emotions that you did not expect.**

Baby's cry evokes in you emotions of uncertainty that you never knew before. You have never experienced as powerful an emotion that causes you to wonder if you have done something wrong. It's an unfamiliar feeling, and unpleasant. That is your baby, and this crying seems simply intolerable.

- **If you have a car seat available demonstrate correct fitting etc for babies.**

Shoulder straps should never come from behind the infant/child shoulders. Mention that an infant should never be wrapped in a car seat. Have a general discussion of safety in vehicles of infants. Be aware of legal requirements in your country; refer to appropriate associations etc for details.

## Homework Assignment

*Highlight the key activities listed below to encourage class members to apply the principles covered.  
Remind the class members to be prepared to share their insights and experiences as appropriate.*

1. **PFP Manual - Read Chapter 6, 'Managing Your Baby's Day', Chapter 7, 'Waketimes and Naps' and Chapter 8, 'When Your Baby Cries' and answer the questions.**
2. **Read Appendix 1, 'What to Expect and When', Appendix 2, 'Your Growing Baby Week by Week' and Appendix 8, 'Growth Charts'.**
3. **Do a quick preview of the remainder of the book, write down any topics you would like to discuss next week as it will be our last chance to discuss this in class.**

## Supplemental Resources

### Online

Class Email Template

[growingfamilies.life](http://growingfamilies.life)   [growingfamiliesleaders.life](http://growingfamiliesleaders.life)



### Title

Calm Baby, Confident Mum – Chap 9

### Author

Simone Boswell

### ISBN

978 0 646 47835 7

## Questions for Review – Chapter 6, 7 & 8 – page 141 - 142 PFP manual

1. **What is the first PDF feeding rule covering the first ten days to two weeks?** (page 107)

Work on getting a full feeding from your baby at each feeding. This is the same as for the first seven to ten days (refer to page 67 in Chapter 4).

2. **Explain why you do not have to begin actively working on sleep training in the first month of your baby's life.** (page 109)

Night time sleep training comes after baby's daytime naps are established, which comes after routinely receiving full feedings. When parents keep their baby's routine fairly consistent, the baby tends to naturally extend his sleep time at night. That means in the first month, mum & dad are helping him organise his 'future sleep'.

3. **When should you wake a sleeping baby, and why?** (page 109)

You should wake a sleeping baby during the day to prevent him or her from sleeping longer than the 3 hour cycle. If you find that your baby just won't wake up enough to feed, than give him an extra 30 minutes sleep and try again.

Let you baby sleep until he wakes up naturally after the late night feed. During the first month don't let the baby sleep longer than four hours.

4. **Why is it important to establish and maintain the first morning feeding time?** (page 101)

Without the establishment of the first morning feeding time each day has a different rhythm and you can not plan ahead and this does not aid in the stabilisation of hunger metabolism, sleep wake cycles or an orderly day.

5. **What is the 45-minute intruder?** (page 130)

This is where you baby all of a sudden wakes 45 minutes into her sleep.

6. **List the three abnormal cry periods and please give examples?** (page 134 - 136)

Abnormal cry periods are those that require attention by looking at the root cause.

- a. crying during feedings, e.g. not enough milk or isn't receiving milk fast enough.
- b. crying immediately after feeding, e.g. trapped gas, your diet or milk quality.
- c. at times when baby wakes early out of a sound sleep, e.g. trapped gas, your diet, milk quality or a general sleep pattern disturbance.

7. **List the three normal cry periods and please give examples?** (page 136 - 137)

Normal Crying Periods are those that are normal and should be expected

- a. just before feeding.
- b. when baby is put down for a sleep.
- c. during the late afternoon/early evening period.

## Visit Five

# Eight Weeks and Beyond

Duration: 43 Minutes

### General Summary

*Preparation for Parenting* is more than a title of a book and Video series; it is a lifestyle that encourages preparedness and readiness for the unexpected challenges that might be lurking around the corner. The Topic Pool chapter covers a range of topics parents should take the time to work through – they are pertinent to the first stage of infancy.

Visit Five covers some new material, but primarily focuses on pulling all the previous material together. It reinforces many of the principles adding some more depth and context.

### Key Principles

- Be realistic: having a ‘perfect textbook’ experience void of any surprises is unrealistic. Realize there will be unexpected challenges to work through.
- Neither, choosing the breastfeeding or to use formula is a measurement of a woman’s devotion, care of love for her child.
- The four temperament types are introduced (sanguine, choleric, phlegmatic and melancholy).

### Suggested Session Outline

|                 | Flipped | Traditional |   |
|-----------------|---------|-------------|---|
| Open in Prayer  | ✓       | ✓           |   |
| Review          | ✓       | ✓           | Ask if there are any questions, insights or thoughts from the previous visit and go through the questions for review.   |
| Video           |         | ✓           | Duration: 43 mins - Visit Summary page 145  |
| Refreshments    |         | ✓           | This may merge into your discussion time.   |
| Discussion      | ✓       | ✓           | Start your discussion using the possible discussion topics in this manual. Allow parents to ask their own questions.  |
| Close in Prayer | ✓       | ✓           | Encourage parents to implement the principles and complete any activities as if they were coming back for another visit. If they have any further questions encourage them to call you or a Contact Mum in the area. Remind them of next course – Babyhood Transitions. |

## Visit Five Summary

### Chapter Nine

- 1. New parents typically find the first several days at home with a new baby are challenging because everything they are experiencing is new and unfolding; changing sometimes moment-by-moment.
- 2. To help reduce some of the general stress associated with the first few days with a new baby in the home, it is beneficial for parents to establish a plan of mutual expectations. This is a list of responsibilities worked out before the baby arrives.
- 3. Be realistic: having a “perfect textbook” experience void of any surprises is unrealistic. Realize there will be unexpected challenges to work through and may include:
  - a. difficult delivery or c-section birth.
  - b. a premature birth.
  - c. a baby with jaundice.
  - d. a baby who has reflux.
- 4. Mild to severe forms of jaundice is found in three to five percent of all babies.
- 5. Neither choosing breastfeeding or to use formula is a measurement of woman’s devotion, care of love for her child.
- 6. Burping a baby during and after each feeding helps release the air swallowed during feeding that can cause discomfort.
- 7. A more alarming form of spitting up is called “projectile vomiting”, which is very forceful and produces a much greater in volume, that can literally travel four to six feet across the room.
- 8. Swaddling helps to calm and comfort a fussy baby, facilitate sleep and minimizes the startle reflex.
- 9. Pacifiers can be used between feedings such as when your baby may be fussy but not actually hungry. It can also be used to calm your baby during a fussy time, or stretch the time just before a feeding when Mum needs a few more moments to complete a task.
- 10 Four temperaments include:
  - a. sanguine.
  - b. choleric.
  - c. phlegmatic.
  - d. melancholy.
- 11. When visitors come to see you, do not be afraid to ask them to wash their hands before holding the baby. This is an important health and safety issue.

## Possible Discussion Topics

*Relating the following topics to real life situations that may have occurred within your own family will greatly assist your class members in understanding the principles in this lesson.*

*This section may include discussion questions (●) and reminder points (❖) and some practical activities (➤). Use your discretion on how to use these in your class.*

- **Did anyone have a key take-away from this visit that they would like to share?**  
You may like to first read over the summary points of the visit to help this discussion. As a leader, note take-aways as they are a great conversational starting point for the next visit.
- ❖ **Playpen is an invaluable tool. Begin as early as 1 month of age and use it as a regular waketime activity.**  
Perhaps demonstrate how to set up a playpen for play -a toy/book in each corner, so the area is not overloaded with toys and you are encouraging them to play with a toy for a length of time.
- **The Topic Pool chapter and Appendices 5 & 6 cover a lot of topics, are there any you would like to discuss?**  
You may have an experience you would like to share to get the conversation started.
- **Demonstrate wrapping techniques and burping with dolls or teddies.**  
Wrapping a baby to calm their frustrations is a helpful tool and can aid a baby in latching on. Wrapping a baby up to around 4 months is helpful to stop them from startling and therefore disturbing their sleep.

## Homework Assignment

*Highlight the key activities listed below to encourage class members to apply the principles covered.*

*Remind the class members to be prepared to share their insights and experiences as appropriate.*

1. **PFP Manual - Read chapter 9, 'The Topic Pool.'**
2. **Read Appendix 5, 'Multiples and Premature Infants' and Appendix 6, 'Problem Solving'.**



### **Please Note**

As this is the last week, remind the class that when their baby approaches about 5 months of age they should be ready for the next course. You may like to split the next course in half and do the first 2 visits initially and leave the last 2 visits until the babies are closer to 10 months. If you plan to run Babyhood Transition course – it is worth giving an indication of when you plan to run it.



## Supplemental Resources

**Online** [growingfamilies.life](http://growingfamilies.life) [growingfamiliesleaders.life](http://growingfamiliesleaders.life)  
Class Email Template

| <b>Title</b>                  | <b>Author</b>                                  | <b>ISBN</b>       |
|-------------------------------|--|-------------------|
| Spirit-controlled temperament | Tim Lahaye                                     | 978-0-8423-6220-7 |
| Personality Plus for Parents  | Florence Littauer                              | 978-0-8423-6220-7 |
| The Treasure Tree             | John & Cindy Trent and<br>Gary & Norma Smalley | 0-8499-0936-8     |



### **Please Note**

Contact Mum Ministry.

We encourage you to follow-up with the parents in your class once their babies are born to see how things are going. First time parents are the most likely to ask follow up questions once they have their baby. Class leaders are usually the first place that parents will go to for advice. You may also like to pass on the contact details of a local Contact Mum.