A Healthy Start for Baby and Me

Ontario’s easy-to-read guide about pregnancy and birth
# Who I Can Call for Help

## My Personal Help

<table>
<thead>
<tr>
<th>Name and Title</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>(partner, family, friends, neighbours, peer support, community drop-ins, blogs, etc.)</td>
<td>(phone numbers, emails, web links, and addresses)</td>
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</tbody>
</table>

## My Health Care Providers

<table>
<thead>
<tr>
<th>Name and Title</th>
<th>Contact Information</th>
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</thead>
<tbody>
<tr>
<td>(doctor, midwife, doula, nurse, nurse practitioner, lactation consultant/clinics, dietician, doula/labour support person, exercise coach, etc.)</td>
<td>(office number, cell numbers, emails, web links, addresses)</td>
</tr>
</tbody>
</table>

Emergency (Fire / Police / Ambulance): **911**

FASD Ontario: [www.fasdON.ca](http://www.fasdON.ca)

Telehealth Ontario: **1-866-797-0000**


Bilingual Online Ontario Breastfeeding Services Directory: [www.onotiobreastfeeds.ca](http://www.onotiobreastfeeds.ca)

See page 87 for more resources and services.
A Message to Pregnant Women

Pregnancy is a special time that can bring many questions. We hope that this book will help you learn about how to take care of yourself and your growing baby. We suggest that you read this book and talk with your health care provider, your family, your partner, and friends about what you have learned and questions you may have.

For Fathers and Partners

Learning to be a father and/or a partner takes time. A partner can be the mother’s best friend, a parent, family or any person she relies on.

Read this guide and share with your partner, family, friends, and health care provider questions you may have. This guide helps you learn how you can be supportive during and after pregnancy. It also provides information on caring for your baby. You can do a lot to help.

Note: If you are pregnant with more than one baby, have health problems or other special situations, you will probably need some additional advice beyond the information found in this guide. Talk with your health care provider as you may get different advice. You can find a list of reliable resources and websites at the end of this guide.
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Important Things to Know

Being pregnant brings many changes. Most of these changes are normal and some are not. You need to know the signs to report to your health care provider.

In this section you will learn:

(1) The signs in pregnancy that are not normal.

(2) The signs of preterm labour.

(3) What to do if you have any of these signs.
When to Get Help

Call your health care provider or go to the hospital if you notice any of these signs:

- Bleeding from your birth canal (vagina).
- Feeling dizzy or like you might faint.
- Loss of consciousness.
- Sharp pain in your tummy.
- High fever (temperature).
- Chills or rash after you have had a fever.
- Vomiting or throwing up a lot.
- Feeling more sad, worried, or angry than usual.
- Crying a lot.
- The baby stops moving or moves less often.

- Smelly fluid comes from your vagina and makes you feel itchy.

- It hurts or burns when you pass urine.
- Your urine becomes red or dark in colour.

- Lots of swelling in your face, hands, legs, ankles (especially if it gets worse or changes).
- Bad headaches that last for a long time.
- Gaining weight quickly.
- Blurry vision or spots in front of your eyes.
- Pain in your chest or stomach area.

- Spots on your face and body that are not normally there.
Preterm Labour

What is it?
Normally, pregnancy lasts between 37 and 42 weeks. Preterm labour is labour that starts too early (before 37 weeks). It can cause your baby to be born too soon.

Babies who are born too soon may have health problems. They may need special care in the hospital.

What are the signs of Preterm Labour?

<table>
<thead>
<tr>
<th>Bleeding from your vagina.</th>
<th>Feeling that something is not right.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sudden increase in the amount of discharge from your vagina.</td>
<td>Cramps like when you have your period.</td>
</tr>
<tr>
<td>Sudden change in the type of discharge (mucousy, watery, bloody).</td>
<td>Pressure that feels like the baby is pushing down.</td>
</tr>
<tr>
<td>Water leaking from your vagina.</td>
<td></td>
</tr>
<tr>
<td>Low dull backache below the waist that feels different than usual.</td>
<td>Contractions (tightening of the uterus) that come often and do not go away.</td>
</tr>
<tr>
<td>An urgent need to pass urine, or the need to pee often.</td>
<td>Contractions that get stronger and closer together.</td>
</tr>
<tr>
<td></td>
<td>Stomach pains that do not go away (with or without diarrhea).</td>
</tr>
</tbody>
</table>

What should I do if I have any of these signs?
Go to the hospital right away.
There are things that your health care provider can do to help.
It is not possible to prevent all preterm births, but there are things you can do to reduce the chances of preterm labour.

**What can you do to help your baby be born at the right time?**

- Start seeing your health care provider as early as possible in your pregnancy.

- Go to a group program for pregnant women early in your pregnancy (see page 12).

- Try to stop smoking or smoke less often.
- Ask others not to smoke near you.
- See page 28 to learn more.

- Take time to rest every day.
• See your health care provider if it hurts when you pass urine.

• See your health care provider if smelly fluid comes from your vagina and makes you itchy.

• Eat healthy foods (see page 15).

It is important that you:
• Learn the signs of preterm labour and what to do if you have them.
• Be aware of how your body changes with pregnancy.
• Find ways to manage stress in your life.
• Talk with your health care provider, midwife or a public health nurse, about any concerns you have. Tell them about anything that does not feel right. Tell your support person as well.

Find more information in the resource section on page 87.
It is important to see a health care provider to help you have a healthy pregnancy and a healthy baby. Make an appointment as soon as you know you are pregnant.

In this section you will learn about:

(1) The choices you have when looking for a health care provider.

(2) What happens during prenatal visits.

(3) Group programs for pregnant women.
Choosing a Health Care Provider

A health care provider is someone who provides health services. In your community, you may find these kinds of health care providers for pregnant women:

1. **Obstetricians**
   - Doctors who care for women during their pregnancy, labour, and birth.
   - They do not look after babies.

2. **Family Doctors**
   - Doctors who care for pregnant women, babies, and families.
   - Some deliver babies.

3. **Midwives**
   - Midwives provide care for women with normal (low risk) pregnancies and births.
   - With a midwife you may choose to give birth at home, at the hospital or at a birthing centre.
   - Midwives provide care to mothers and their babies for the first few weeks after birth.

4. **Nurse Practitioners**
   - Nurse Practitioners provide care for women with normal (low risk) pregnancies, babies, and families.
   - They provide ongoing care to mothers and their babies.
   - They usually do not provide care during labour and birth.

5. **Doulas**
   - Doulas provide support and care to a woman (and her partner) during and after the birth. They do not provide any medical care.
   - There is a fee for this service.

6. **Lactation Consultants**
   - Lactation consultants provide care to support the breastfeeding mother and her baby.

To find a health care provider refer to page 94.
When choosing a health care provider you may want to ask yourself these questions:

- Is the person easy to talk to and understand?
- Do they listen to you and answer your questions?
- Can you get to their office easily?
- Can you reach them by phone, email or text?
- Can you have more than one person with you during your labour and birth?
- Do they speak your language well?
- Do you feel at ease with them?
- Will they be there for the birth?
- What medical procedures may this health care provider use during labour and birth?
- When would they recommend a cesarean and why?
- Where will the baby be born (at home, in a birthing centre, at a hospital)?
- Will they provide care for your baby?
- What percentage of their patient’s births do they attend?
- Can you meet other health care providers who will you see at your labour and birth?
- What do other mothers say about their health care providers?
Prenatal Visits

Your first health care provider appointment should be once the pregnancy is confirmed (usually through a home pregnancy test). Regular prenatal check-ups ensure that you and your baby receive the best possible care and follow-up during your pregnancy. Encourage your partner/support person to attend prenatal appointments to become familiar with the caregiver and to discuss his/her role in pregnancy, labour, and birth.

During the visit, your health care provider will:

- Ask you about your health before you got pregnant.
- Ask you about your health during your pregnancy.
- Give you a physical examination.
- Check your weight.
- Check your blood pressure.
- Discuss what you can do to have a healthy pregnancy.
- Discuss what you can do to have a healthy baby.
- Listen to your baby’s heart rate.
- Measure the growth of your uterus.
- Talk to you about where you will give birth.
- Answer your questions.
- Discuss your concerns.
- Give you information on group programs for pregnant women and helpful community services.

Your health care provider will also talk to you about common tests and procedures offered during pregnancy. You and your partner/support person should get enough information about tests and procedures to make informed choices. Ask questions to know:

- The benefits of having the tests.
- The limitations.
- The risks for your baby and for you.
- The alternatives.
- What the tests cannot tell you.
- What happens if you do not have the tests.
It is up to you to decide if you want to have these tests and procedures. For more information, refer to:


After your first visit, you will usually see your health care provider:

- Once a month until 28 weeks of pregnancy.
- Every two weeks until 36 weeks of pregnancy.
- Every week until the baby arrives.

Remember to:

- Know whom to call if you have questions or concerns.
- Make your next appointment while you are at the health care provider’s office.
- Write down any important information, including follow-up tests or procedures.

## Having Someone to Talk To

Being pregnant brings many changes to your life. It is important to have someone to talk with about your feelings. This person can help you make healthy changes.

Try to think of someone in your life that you feel comfortable with and can trust. It could be your partner, the father of your baby, a neighbour, a close friend, a colleague, or a family member. You may also get the support you need at a group program for pregnant women.

Group programs may offer information, food, and a chance to talk to other women. To find out more about programs you can attend in your community during your pregnancy and after the birth of your baby see Community Resources on page 92.
Group Programs During Pregnancy

Prenatal Classes
Your local public health unit, hospital, or health centre may offer classes for pregnant women and for their partners. Prenatal classes can be offered in person or online. Ask about the costs and what will be taught. Some classes are free. Others are not. The classes may provide information about a healthy pregnancy, birth, breastfeeding, and becoming a parent.

Pregnancy Support Programs
There are many different types of drop-in programs for new parents and for pregnant women. All offer information and time to talk with other pregnant women or new parents. Some provide food. In most cases, they are free. See Community Resources on page 92.

Support at Home
Some programs provide help in your home. Usually this is free. Healthy Babies Healthy Children (HBHC) helps children have a healthy start. It offers information and support to pregnant women and new parents. A nurse or lay home visitor may come to your home. Call your local public health unit at 1-800-267-8097 or visit www.health.gov.on.ca/en/common/system/services/phu/locations.aspx
Fathers and Partners

As a father or partner, there is a lot you can do during her pregnancy:

• Ask her how you can help.
• Go to the medical appointments and prenatal classes.
• Learn about pregnancy and birth.
• Talk about how you would like to parent your child.
• Talk about breastfeeding. Breastmilk is the healthiest food for your new baby.
• You can often help her decision to quit smoking, encourage her quit attempts, and help to stay smoke-free. Your family will be healthier if you also quit or smoke less. Your local health unit can help you with this.
• Talk about not drinking alcohol. The safest choice is to have alcohol-free drinks instead. If you also stop drinking, it may help your partner not to drink alcohol during the pregnancy and when she is breastfeeding.
• Encourage her to be active. Decide together what you can do.
• Go for a walk and exercise with her every day.
• Understand that she may feel moody at times.
• Help her rest when she is tired.
• Share household chores (e.g., meal preparation, cleaning, walking the dog, etc.)
• Change the cat litter box (see toxoplasmosis on page 31).
• Carry things that are too heavy for her.
• Understand that her interest in sex may change. Talk to her about how you feel. Together explore ways to feel close.
• Learn how to take care of your new baby.
• Help prepare the stuff your baby will need at the hospital and once home. Get your home ready for the baby.
• Find out about groups for new parents or fathers in your community.
• Talk with others about what it is like for you to be expecting your baby.

During pregnancy is a good time to start bonding with your baby. Getting involved early with the pregnancy helps you to get ready to be a parent. You can:
• Ask your partner to tell you when the baby is moving. Place your hand on her belly so you can feel your baby’s movements.
• Listen to your baby’s heartbeat.
• Talk to your unborn child through mom’s belly. You can read stories, sing songs, or just talk to your baby.

For more information for fathers and partners, refer to page 93. Find out how you can be involved and how important this is to you and your baby.
When you are pregnant, the food you eat is important. Eating healthy foods helps you feel better and also helps your baby grow and develop.

In this section you will learn:

(1) The importance of eating healthy foods for pregnancy and breastfeeding.

(2) Which healthy foods to choose.

(3) What is healthy pregnancy weight gain.

(4) What is food safety.
Nutrients You Need

Healthy foods provide the nutrients you and your baby need. In addition to eating healthy, pregnant women need a daily multivitamin with folate and iron in it.

<table>
<thead>
<tr>
<th>Name of nutrient</th>
<th>Foods that contain this nutrient</th>
<th>Why this nutrient is important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Folate (Folic Acid)</td>
<td><img src="image" alt="Folate foods" /></td>
<td>Folate is a vitamin that helps build healthy blood and tissues for you and your baby. Take a prenatal vitamin every day. Some women need more folic acid. Talk to your health care provider.</td>
</tr>
<tr>
<td>Calcium and Vitamin D</td>
<td><img src="image" alt="Calcium foods" /></td>
<td>Calcium and vitamin D work together to keep your bones strong. They also work together to build strong bones and teeth for your baby. Foods high in calcium include milk, yogurt, cheese, fortified soy beverages, beans, canned salmon and sardines with the bones mashed in, tofu, and almonds. Good sources of vitamin D are milk, fortified soy beverages and fish.</td>
</tr>
<tr>
<td>Iron and Vitamin C</td>
<td><img src="image" alt="Iron foods" /></td>
<td>Iron helps build the red blood cells that carry oxygen and iron to your baby. It is important that babies have a good supply of iron when they are born. Vitamin C helps your body use iron. Eat foods high in iron with foods high in vitamin C. Foods high in iron include meat and meat alternatives such as beef, fish, tofu, beans and lentils as well as cereal. Fruit and vegetables are all a source of vitamin C.</td>
</tr>
<tr>
<td>Protein</td>
<td><img src="image" alt="Protein foods" /></td>
<td>Protein helps your uterus and placenta become strong and helps your baby grow. Sources of protein include meat, meat alternatives (tofu, egg, beans, nuts, seeds), fish as well as milk and milk products such as yogurt and cheese.</td>
</tr>
<tr>
<td>Omega-3 Fats</td>
<td><img src="image" alt="Omega-3 foods" /></td>
<td>Omega-3 fats are important for baby’s brain, nerves, and eyes. Foods high in omega-3 fats include fatty fish like salmon, trout, mackerel, sardines, herring, and char. Omega-3 eggs also contain omega-3 fats.</td>
</tr>
</tbody>
</table>
In your first trimester, focus on meeting Canada’s Food Guide recommendations. You do not need extra servings yet. During your second and third trimesters, you need to eat 2 to 3 extra Food Guide servings per day. For examples, choose from:

- 1/2 cup mixed frozen fruit + 3/4 cup yogurt
- 1 cup raw vegetables + 1/2 cup hummus + 1 cup of milk
- Home-made smoothie (1 cup fruit + 1/2 cup yogurt + 1/2 cup milk)
- 1/3 cup unsalted trail mix + 1 piece of fresh fruit
- Spinach salad (1 cup spinach + 1 hard-boiled egg + 2 tbsp walnuts)
- 3/4 cup of cooked oatmeal + 2 tbsp sliced almonds + 1/4 cup raisins and cinnamon
- 2 cups of plain popcorn, sprinkled with your favorite seasoning (cinnamon, garlic, hot sauce) + 1 cup fresh fruit
- 1 whole grain tortilla + 1/2 cup tuna + lettuce, tomato, peppers etc.

For more information on using Eating Well with Canada’s Food Guide go to www.hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php and click on “My Food Guide”.

If eating healthy is too costly at times, call Telehealth Ontario at 1-866-797-0000 to speak to a dietitian or contact your local public health unit at www.health.gov.on.ca/en/common/system/services/phu/locations.aspx. If you are having trouble eating the recommended amounts of food (i.e. nausea, morning sickness or loss of appetite), talk to your health care provider or visit www.pregnancyinfo.ca/your-pregnancy/healthy-pregnancy/nausea-and-vomiting. You can also talk to a health care provider.
Food Safety

Take extra care with food when you are pregnant. Food poisoning can be dangerous when you are pregnant.

- Wash your hands before, during, and after you handle food.
- Wash the skin of all raw vegetables and fruit well.
- Cook meat, poultry, seafood, fish, and eggs well.
- Reheat cooked food until steaming hot.
- Check “best before” dates on food packages. Do not eat the food after that date has passed.
- Eat leftovers stored in the refrigerator within 3 to 4 days.
Avoid these foods when you are pregnant:

- Unheated hotdogs and deli meats.
- Patés, meat spreads, smoked seafood, and fish products that are not in a can.
- Foods made with raw eggs, or that contain eggs that are not fully cooked.
- Unpasteurized milk and foods made from unpasteurized milk.
- Soft cheeses made from unpasteurized and pasteurized milk such as brie, camembert, feta, goat cheese, queso blanco, and blue cheese.
- Juices that are not pasteurized, such as unpasteurized apple cider.
- Raw sprouts, especially alfalfa sprouts and bean sprouts.
- More than 1 serving (75g) of liver every 2 weeks.
- Undercooked meat, poultry, and seafood.
- Raw fish and food made with raw fish (for example, sushi).
- Fish liver oil.
- Raw seafood such as oysters and clams.


If you have questions about healthy eating, talk to your health care provider or a dietitian. See Healthy Eating on page 95.

Pasteurizing = when milk or juice is heated to kill bacteria
Raw = not cooked
Common Questions About Eating

Is it okay to drink coffee, tea, or soda pop?
Coffee, tea, pop, and energy drinks may have caffeine in them. Too much caffeine is not good for your unborn baby. Try to limit the tea, coffee, pop, and diet pop you drink. It’s best not to drink more than two cups (500 mL) of coffee each day.

All energy drinks and some kinds of herbal teas are not safe to drink when you are pregnant or breastfeeding. Ask your health care provider for a list of safe teas. Water is the best thing to drink when thirsty. Try adding fresh fruit, lemon or cucumber to make your drinking water refreshing and tasty.

Do I need to stop eating salt?
Sodium, which is part of salt, should be limited. You and your baby will get enough sodium from a healthy diet. Many foods have sodium that naturally occurs in food. Limit adding extra salt to your food.

Choose foods that don’t have added sodium or are low in sodium more often than processed or fast foods.

Will I need to take prenatal vitamins?
Vitamin pills cannot take the place of healthy foods. Eat healthy foods and take a prenatal vitamin every day with folic acid and iron. Some women need more folic acid or other vitamins. Talk to your health care provider.

What if I don’t drink milk?
If you do not drink milk, you can have other foods high in calcium such as cheese, yogurt, fortified soy drinks, fortified orange juice, sardines, tofu, broccoli, and almonds. Talk to your health care provider to make sure you are getting enough calcium and vitamin D.

What if I do not eat meat?
If you do not eat meat or animal products, choose foods such as beans, lentils, tofu, nuts, and seeds. Talk to your health care provider about getting enough iron and protein.

Can I drink alcohol?
It is safest not to drink any alcohol when you are pregnant and breastfeeding. Choose an alcohol-free drink instead. This is the safest choice. See page 29 for more information.
Healthy Pregnancy Weight Gain

Healthy weight gain during pregnancy is important. It helps:

- Your baby to grow.
- Your uterus and placenta to grow.
- Your breasts to get ready for breastfeeding.
- Your blood volume increase so it carries nutrients and oxygen to your growing baby.

What is a healthy pregnancy weight gain?


Most pregnant women should gain between 11.5 and 16 kilograms (25 to 35 pounds). If you were overweight before getting pregnant, your health care provider may recommend gaining only 7 to 9 kg (15-25 lbs) during pregnancy.

During your first trimester, your weight gain should be between 1 to 2 kg (about 2 to 4 lbs). Most of the weight gain happens in the second and third trimesters.

Talk about healthy weight gain during pregnancy with your health care provider before your pregnancy or very early in your pregnancy. Together you can decide what to expect for a healthy weight gain per trimester. Eat “twice as healthy”, not “twice as much”.

You and your baby will benefit if you choose healthy foods and are active during your pregnancy.

A healthy pregnancy weight gain helps you to:

- Have lower risk of complications in pregnancy and during delivery.
- Feel healthier and have more energy.
- Be at a healthier weight faster after the baby is born.

A healthy pregnancy weight gain helps your baby to:

- Have a better chance of being born at a healthy weight.
- Have lower risk of complications at birth.
- Spend less time in the hospital.
- Have a lower risk of diabetes and disease later in life.
Where does the weight go?

Breasts 1 to 1.5 kg (2 to 3 pounds)

Placenta and Amniotic fluid 2 to 2.5 kg (4 to 6 pounds)

Uterus 1 to 1.5 kg (2 to 3 pounds)

Baby 2.5 to 3.5 kg (6 to 8 pounds)

Extra fluids 1 to 1.5 kg (2 to 3 pounds)

Energy stored as fat 2 to 3.5 kg (5 to 8 pounds)

Blood 2 kg (4 pounds)
Being healthy and enjoying a healthy lifestyle is good for you and your baby.

In this section you will learn about:

(1) Physical Activity
(2) Work
(3) Mental Health
(4) Drugs
(5) Medication
(6) Sexuality
(7) Smoking
(8) Alcohol
(9) Things to Avoid
(10) Abuse
(11) Infections
Physical Activity

Being active during pregnancy is important for you and your baby. It helps with healthy weight gain during pregnancy and helps you return to a healthy weight afterwards. Being active also helps with leg cramps, feeling tired, constipation, sore back, and shortness of breath.

When you feel good it is also very good for the baby’s health.

Speak to your health care provider before you increase your physical activity. Give your health care provider the PARmed-X for PREGNANCY. It is a guideline for health screening before you start a prenatal fitness class or other exercise. For more information visit www.csep.ca/cmfiles/publications/parq/parmed-xpreg.pdf

What kind of physical activity can I do?

During pregnancy you can do many physical activities like:

- Swimming (take pregnancy swimming classes).
- Walking outside.
- Yoga and relaxation techniques.
- Gardening.
- Prenatal fitness classes.
- Kayaking or canoeing.
- Low impact aerobics.
- Biking outside on safe bike paths or on a stationary bicycle.
- Stretching.
- Kegel exercises (see page 36).
- Weight training with low weights and high repetitions.

If you are already active and doing light to moderate physical activity, you can continue to do your activities. If you already do vigorous-intensity aerobic activity, such as running, you can continue doing so. If you are not active, try to do light to moderate physical activity.

Talk to your health care provider about your plans to be active. Check your local community for physical activity programs in your area. Ask your friends, spouse and/or a partner to be physically active with you.
When you exercise:
- Drink plenty of water (before, during, and after you are active).
- Try not to get too hot or too tired.
- You should be able to talk when you are active.
- If it hurts or feels uncomfortable, slow down or stop the activity.

See page 98 under Physical Activity for more information.

Work

Most jobs are safe during pregnancy. A few small changes at work can add to your comfort and will help you to have a healthy pregnancy and a healthy baby. Some women must stop working or must change to a different type of work when they are pregnant. Talk to your health care provider about the type of work that you do.

You may need to make some changes or take extra care at work while you are pregnant if:
- You must stand up for long periods of time.
- You must lift, push, or pull heavy items.
- You are in contact with chemicals.
- You work with X-rays.
- You work in a noisy work place.
- Your work place is very hot or very cold.
- You work with animals, young children, or sick people.
- You work long hours or do shift work.
Mental Health

For many women, being pregnant involves dealing with a lot of change. Your body is changing. You may think differently. People may treat you in a different manner. You may be thinking about your new baby. You may be thinking more about your future.

All of these changes and feelings are normal. If they begin to make you feel tense and anxious, you may need to seek help. Pregnancy can be a time when you may be at risk of becoming depressed.

It is important to take care of yourself especially when you are pregnant or have a new baby.

What you can do:

- Eat well.
- Exercise regularly.
- Get enough sleep.
- Take a prenatal multivitamin.
- Be around people who make you happy. This can include your family, neighbours, co-workers, friends, partner and others.
- Take time to relax and laugh.
- See your health care provider regularly.
- Ask for help if you feel down, sad and/or overwhelmed.
- Talk to your partner. He or she may have similar feelings.
- Go for counseling. You can go alone or with your partner.
- Talk about your feelings.
- Accept help from others.
- Go to a group program for pregnant women. Talking to people who understand what you are going through is helpful.
- Do something you enjoy like listening to music, yoga or reading.
- Avoid using drugs or alcohol.

Following the above tips will help you have good mental health and help to prevent depression.

Ask yourself these questions: For more than two weeks have I been feeling:

- Anxious?
- Worried more than usual?
- Less interested in my usual activities?
- Feeling down, sad, irritable or hopeless?

If you answered yes to any of the four questions, talk to your health care provider. Don’t wait. There is help for you and your family.

See page 96 for more information on mental health.
Drugs

Drugs such as marijuana, heroin, crack/cocaine, LSD, and other street drugs are not safe to use when you are pregnant. They could harm both you and your baby.

Babies born to mothers who take drugs may:

- Be born too soon and too small.
- Have medical problems.
- Go through drug withdrawal.
- Have problems learning.

What you can do:

- Do not use street drugs during pregnancy.
- Talk to your health care provider
- Ask about programs to help you quit.
- If unable to quit, ask about programs to help you to use less and less often.

See the section Alcohol and Drugs on page 90.

Medications

It is important to let your health care provider know if you are taking any medications or herbal products during your pregnancy.

- Prescribed medications, over-the-counter medications and natural health products such as some herbal teas can affect your unborn baby.

- Some products that are unsafe during pregnancy can be taken safely while breastfeeding.

- It is always important to let a health care provider know that you are breastfeeding. A health care provider will then consider different medication options for you.
Sexuality

It is safe to have sex when you are pregnant. There may be changes in your sexual needs and desires. Both of you need to discuss how you feel and discuss what you expect from one another. Explore comfortable activities that please both of you.

Your health care provider may advise you to avoid sex with certain health conditions. If you, or your partner are anxious about having sex during pregnancy, or if sex is painful, talk to your health care provider.

Smoking

Smoking or being around people who smoke during your pregnancy and after your baby is born, can harm both you and your baby.

Smoking can cause the following problems during pregnancy:

- Not get enough food or oxygen.
- Be born too soon or too small.
- Have health complications.
- Be more at risk of Sudden Infant Death Syndrome (SIDS).
- Have learning problems.

What you can do:

- Ask friends and family not to smoke near you while you are pregnant and after the baby is born.
- Make your home and car smoke-free areas.
- Once the baby is home, smoke outside and away from your baby.
- Ask for help to quit smoking or to smoke less.
- Join a stop-smoking program. You can contact Smoker’s Helpline at 1-877-513-3333 or visit www.smokershelpline.ca. They offer specialized services for pregnant women.
- Contact your local public health unit at 1-800-267-8097 or www.health.gov.on.ca/en/common/system/services/phu/locations.aspx

No smoking at all is best for your baby and you. Smoking less at any time will help you have a healthier pregnancy and a healthier baby.

See page 100 for more information and resources to help you or your partner smoke less or quit.
Alcohol

There is no safe amount of alcohol during pregnancy. There is no safe kind of alcohol. There is no safe time to drink alcohol during pregnancy. It is best not to drink alcohol at all if you are pregnant.

Mothers who drink alcohol when they are pregnant may have a baby who has:

- Brain damage.
- Vision and hearing problems.
- Trouble walking and talking.
- Organs that do not work properly.
- Birth defects.
- Problems learning, remembering, and thinking things through.
- Problems getting along with others.

During pregnancy and breastfeeding, many mothers choose an alcohol-free drink instead. This is the safest choice. If you decide to drink while breastfeeding, limit the amount you drink to one or two standard drinks per occasion. For more information, see *Mocktails for Mom* at www.beststart.org/resources/alc_reduction/LCBO_recipe_cards_bro.pdf

If you need information, contact a health care provider or a pharmacist. More resources are available at page 90 in the section *Alcohol and Drugs*.

Things to Avoid

Some things at home and work can harm your unborn baby.

**What you can do:**

Talk to your health care provider about:

- Pesticides (used for killing insects).
- Mercury (in some fish).
- Lead (in some paint).
- Asbestos (in some home insulation).
- Solvents (in some paints).
- Extreme heat (for example hot tubs and saunas).
- Plastics.
- X-rays.
- Some cleaning products.

For more information, see the video *Creating Healthy Home Environments for Kids: Top 5 Tips* at www.healthyenvironmentforkids.ca/resources/creating-healthy-home-environments-kids-top-5-tips.
Abuse

Does your partner...

- Yell at you or call you names?
- Break your things?
- Threaten to hurt you?
- Always need to be in charge?
- Keep you from seeing your friends, family, doctor, or midwife?
- Control the money?
- Threaten to take the kids away?
- Hit or kick you?
- Force you to have sex?

If you answered YES to any of the above questions, this is abuse. Abuse usually gets worse over time. **It will not stop when your baby is born.**

Abuse during pregnancy could cause you to:

- Feel anxious, sad and alone.
- Feel bad about yourself.
- Lose your baby.
- Not eat or sleep well.
- Have pain, injuries and die.

Abuse may cause your baby to:

- Be born too small or too early.
- Have later health problems.
- Be abused after birth.
- Be hurt or die.

What you can do:

- Tell someone you trust what is going on.
- Find people to help you.
- Get help to leave safely.

Where to Get Help:

- **If you are in immediate danger call 911.**
- Assaulted Women’s Help Line 1-866-863-0511.
  Crisis line with help in 150 languages: 24 hours a day, 7 days a week.
- Sheltersafe connects women to nearby shelters. Visit [www.sheltersafe.ca](http://www.sheltersafe.ca)

Do not feel ashamed. It is not your fault. Refer to page 89 for more information.
Infections

There are certain health problems that can harm your unborn baby if you get them during pregnancy. **If at any time during your pregnancy you think you may have any of the problems listed below, call your health care provider.**

Early treatment of health problems is the best thing you can do for you and your baby.

### Bladder Infection

**What is it?** Your bladder holds urine. When you are pregnant, the baby may put more pressure on your bladder. A bladder infection is caused by germs called bacteria. These germs live outside the body and can move into the bladder.

**How do I know I have it?** You may:
- Feel the need to pass urine often and in a hurry.
- Have a burning feeling when you pass urine.
- Feel pain in your lower stomach or back area.
- Have a fever or feel sick to your stomach.
- Have bloody or cloudy urine.
- Notice a strange smell in your urine.

**Why is it a danger?** It can hurt your kidneys and cause your baby to be born too soon.

**What can I do to protect myself and my baby?**
- Drink lots of fluids (mostly water and at least 8 glasses a day).
- Wipe yourself from front to back after using the toilet.
- Go to the toilet as soon as you feel the urge to pass urine, before sex, and after sex.
- See your health care provider right away if you think you have a bladder infection.

### Toxoplasmosis

**What is it?** Toxoplasmosis is an infection that people can get from eating raw meat or meat that is not cooked well. It also comes from unwashed vegetables, and from touching cat feces.

**Why is it a danger?** It can make your baby very sick.

**What can I do to protect myself and my baby?**
- Cook meat well. Wash vegetables well.
- Ask someone else to change the cat litter.
- Wash your hands and any surfaces that you use to prepare food.
- Do not drink or eat unpasteurized milk products.
- Wear gloves when gardening or if you must change the cat litter box. When you are done, wash your hands.
### Streptococcus B (Strep B)

**What is it?**
- Strep B or Group B Streptococcus (GBS) is a common bacteria that is often found in the vagina, rectum or bladder. Often, there are no signs that you have Strep B. All pregnant women are tested for GBS bacteria.

**Why is it a danger?**
- After the delivery, it can make your baby sick.

**What can I do to protect my baby and myself?**
- If you tested positive for GBS bacteria, you will be treated with antibiotics when you go into labour and during birth.
- Talk with your health care provider if you have questions about GBS bacteria.

### Sexually Transmitted Infections (STIs)

**What are they?** STIs are infections that can spread from person-to-person during sex. Examples of STIs are herpes, chlamydia, syphilis, gonorrhea, and hepatitis B. You can get an STI before, during, or after you are pregnant.

**Why is it a danger?** STIs can harm both you and your unborn baby.

**What can I do to protect myself and my baby?**
- Talk to your health care provider about getting tested for STIs.

### HIV/AIDS

**What is it?** – HIV is a virus that can lead to AIDS. You can get HIV by having unprotected sex with someone who has the virus. You can also get HIV from needles that have been used by someone who has the virus. If you have HIV, it may be passed on to your baby when you are pregnant, during birth, or during breastfeeding. If you have HIV, medications can help protect your unborn baby.

**Why is it a danger?** The virus can attack your immune system and your nervous system. It can do the same to your baby, making you both very sick.

**What can I do to protect myself and my baby?**
- Do not share needles with others.
- Ask your health care provider about having an HIV test early in pregnancy.
- Talk with your health care provider about how to protect yourself, or to treat HIV/AIDS.

For more information, talk with a health care provider.
The Three Trimesters of Pregnancy

This section gives you information about each stage of pregnancy.

(1) For the first trimester, it will tell you about:
- Your Growing Baby
- Changes You May Feel
- Getting Healthy for You and Your Baby

(2) For the second trimester, it will tell you about:
- Your Growing Baby
- Changes You May Feel
- Getting to Know Your Baby

(3) For the third trimester, it will tell you about:
- Your Growing Baby
- Changes You May Feel
- Getting Ready for Your Baby
- What to Take to the Hospital
How Long Does Pregnancy Last?

Pregnancy usually lasts 40 weeks (about 9 months). It takes this much time for a baby to develop.

Pregnancy has three parts. Each part is called a trimester. Each trimester is about 3 months long.

**Pregnancy Time Line**

Use a coloured pencil or pen to colour in the months. Then you will know where you are in your pregnancy.

By the end of the 1st trimester your baby begins to look like a human baby.

By the end of the 2nd trimester your baby sucks his thumb, and opens and closes his eyes.

During the 3rd trimester your baby is well developed. Your baby still needs stronger lungs and other organs. Your baby needs to grow and put on weight.
First Trimester (1 to 3 months of pregnancy)  
Your Growing Baby

By the end of the first trimester:

- Your baby will be 7 to 10 cm long (3 to 4 inches) and weigh 28 grams (1 ounce).
- The heart is beating.
- The eyes, ears, and nose are forming.
- The arms, legs, fingers, and toes are forming.
- The fingernails and toenails are forming.
- The arms and legs move now but you cannot feel the kicks.
- The bones are forming.
- The brain is growing quickly.
- The spine is forming.
- The face is forming but the eyes are closed.
- The digestive tract is forming.
- Your baby is beginning to look like a real person.
- The sex of your baby is determined.
## Changes You May Feel

<table>
<thead>
<tr>
<th>What to expect</th>
<th>What to do</th>
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</table>
| You may have mood swings (happy for a while and then sad). This is caused by changes in your hormones as your body adjusts to being pregnant. | • Talk to your partner, close friends, or family about your feelings.  
• Talk to your health care provider if these feelings do not go away or if you always feel sad. |
| “Morning Sickness” (feeling sick and throwing up). It usually stops by the fourth month. You may feel sick in the morning, or all day. | • Eat dry toast or crackers before you get out of bed in the morning.  
• Get out of bed slowly.  
• Eat small amounts of food every 1 to 2 hours, before you feel hungry.  
• Avoid spicy, fried, or fatty foods.  
• Drink fluids between meals. Do not drink fluids with meals.  
• Talk to your health care provider if the vomiting continues. |
| You will pass urine more often. This is caused by your uterus pressing against your bladder and by changes in your hormones. | • Drink less in the evening.  
• Try Kegel exercises. Kegel exercises help to strengthen the muscles and can decrease the chance of urine leaking:  
  – Tighten the muscles around your vagina and anus and hold for several seconds. These are the same muscles you that you use when you are urinating.  
  – Try to tighten your muscles 25 times each day. It is important to repeat this exercise several times during the day.  
• Make sure that your bladder empties each time you pass urine. |
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<tr>
<th><strong>What to expect</strong></th>
<th><strong>What to do</strong></th>
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<tbody>
<tr>
<td>You may feel tired.</td>
<td>• Rest.</td>
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<td></td>
<td>• Eat small amounts of food many times during the day.</td>
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<td>• Drink lots of fluids.</td>
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<td>• Try to work less.</td>
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<td>• Accept help from others.</td>
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<td>• Ask for help from your partner.</td>
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<tr>
<td>Thin milky fluid may flow from your birth canal (vagina).</td>
<td>• Wear small liners in your underwear or change your underwear often.</td>
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<td>• Keep the area clean and dry.</td>
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<tr>
<td></td>
<td>• Avoiding douching (pushing fluid into your vagina).</td>
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<td></td>
<td>• Call your health care provider if the fluid smells bad or makes you feel itchy.</td>
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<td>Your breasts may become larger. This is to prepare for breastfeeding your baby.</td>
<td>• Wear a bra that provides good support.</td>
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<td>• Wear your bra at night if your breasts are uncomfortable.</td>
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<tr>
<td>You may feel like you are going to faint. This is caused by demands on your blood system.</td>
<td>• Get up slowly.</td>
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<tr>
<td></td>
<td>• When you change position, move slowly.</td>
</tr>
<tr>
<td>Your interest in having sex or in other activities may change. This may be caused by feeling tired and sick.</td>
<td>• Talk to your partner or a close friend about your feelings.</td>
</tr>
</tbody>
</table>
Getting Healthy for You and Your Baby

During this time you may have many different feelings and questions.

What you and your partner can do:

- Think of healthy things you can do for yourself and your growing baby.
- Choose your health care provider.
- Ask your health care provider what you can do to have a healthy pregnancy.
- Sign up for a prenatal program.
- Make healthy changes as early as you can.
- Learn about pregnancy. You can read books or information on the web. See the suggestions on page 99.
- Talk to friends and family members who are pregnant or have had a baby.
- Think about how you were raised and how you want to raise your baby.
- Talk to your partner or support person about your feelings.
- Talk to your partner or support person about the kind of parent that you both want to be.
- Find out about supports and services in your community.
Second Trimester (4 to 6 months of pregnancy)
Your Growing Baby

By the end of the second trimester:

- Your baby will be about 36 cm long (14 inches) and weigh 1 kilogram (2 pounds).
- The eyes can open and the eyebrows and lashes appear.
- The heartbeat is stronger and can be heard by your health care provider.
- You can feel your baby moving.
- Your baby can suck their thumbs and hiccup.
- The teeth develop inside the gums.
- Soft, fine hair is growing on the body.
- A white coating (vernix) begins to cover your baby’s body.
# Changes You May Feel

<table>
<thead>
<tr>
<th>What to expect</th>
<th>What to do</th>
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<tbody>
<tr>
<td>You begin to feel closer to your baby and more interested in what the baby is doing. You feel the baby move inside you. It may feel like fluttering, bubbles, or like the baby is gently poking you.</td>
<td>• Get to know your baby.</td>
</tr>
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<td>• Enjoy the feeling.</td>
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<td>• Take note of the first day you felt your baby move. Tell your health care provider.</td>
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<td></td>
<td>• Tell your partner when the baby is moving. Place your partner’s hand on your belly to also feel your baby’s movements.</td>
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<td></td>
<td>• Both you and your partner can talk to your unborn child through your belly. You can also read stories and sing songs.</td>
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<tr>
<td>Fluid may leak from your breasts.</td>
<td>• Wear breast pads in your bra.</td>
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<tr>
<td>The colour of your cheeks on your face may change. This is caused by the hormones of pregnancy. These changes will slowly fade after the baby is born.</td>
<td>• Wear a hat.</td>
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<td>• Use a sunblock with at least SPF 15 when you go outside.</td>
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<tr>
<td>You may have throbbing legs and swollen veins. This is caused by the pressure of the growing baby.</td>
<td>• Walk to help the blood flow in your legs. Do not cross your legs when you are sitting down.</td>
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<td>• Put your feet up when you can.</td>
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<td>• Use support stockings.</td>
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<td>• Do not wear knee high socks or stockings.</td>
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<td>• Avoid tight clothing.</td>
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<td>• Tell your health care provider.</td>
</tr>
<tr>
<td>You may feel less sick and less tired. Your body is getting used to being pregnant. You may have to pass urine less often. Your growing baby is moving off your bladder.</td>
<td>• Enjoy this time.</td>
</tr>
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<td>What to expect</td>
<td>What to do</td>
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<tr>
<td>Your gums bleed more easily.</td>
<td>• Brush and floss your teeth every day. See a dentist at least once during your pregnancy. Remember to tell the dentist that you are pregnant.</td>
</tr>
<tr>
<td>You may feel low back pain. This is caused by your growing tummy and loose joints.</td>
<td>• Flatten your lower back by pulling in your stomach and buttocks. This is called the <strong>pelvic tilt</strong>.</td>
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<td>• Wear shoes with low heels.</td>
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<td>• Avoid standing for long periods of time.</td>
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<td>• Use correct posture to lift and carry objects.</td>
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<td>• Have a massage if you enjoy it.</td>
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<td>• Do some stretching exercises.</td>
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<td>You may have hard dry bowel movements. This is called constipation. This is caused by hormones and by pressure of the growing baby on the bowels.</td>
<td>• Drink at least 6 to 8 glasses of fluids a day.</td>
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<td>• Eat more foods that are high in fibre such as – whole grain breads, prunes, bran, etc.</td>
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<td>• Do activities such as walking or swimming.</td>
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<td>• Tell your health care provider.</td>
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<tr>
<td>You may have swollen ankles and hands. This is caused by extra fluid in your body and slower blood circulation.</td>
<td>• Put your feet up.</td>
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<td>• Sleep on your left side.</td>
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<td>• Do not lie on your back.</td>
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<td>• Avoid long periods of sitting or standing.</td>
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<td>• Do not cross your legs at the knee.</td>
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<td></td>
<td>• Avoid tight clothing.</td>
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<tr>
<td></td>
<td>• Tell your health care provider.</td>
</tr>
<tr>
<td>Your interest in sex may change because you are feeling less tired and less sick.</td>
<td>• Talk to your partner about your feelings.</td>
</tr>
</tbody>
</table>
Getting to Know Your Baby

This is the time for you and your partner to get to know your growing baby. At the start of your pregnancy, your baby may not seem real to you. For most women, this changes when they feel the baby move or hear the heartbeat. Enjoy this special time!

What you and your partner can do:

- Place your hands on your belly when you can feel your baby’s movements.

- Talk to your unborn child. You can read stories, sing songs, or just talk to your baby. As early as 21 weeks of the pregnancy, your baby can hear your voice.

- Think about what your baby may be doing. Is your baby moving his or her arms and legs, or sucking a thumb?

- Notice when your baby moves and what you are doing at that time.

- Think about names for your baby.

- Start thinking about the things that you will need for your baby.

- Go to your prenatal appointments and any tests for you or your baby.

- Sign up and go to prenatal classes.

- Prepare the stuff the baby will need at the hospital and once home.

- Talk with others about what it is like for you to be expecting your baby.
By the end of the third trimester:

- Your baby will be about 51 cm long (20 inches) and weigh 3.5 kilograms (7.5 pounds).
- The skin becomes less wrinkled as the baby gains weight.
- Your baby hears sounds, such as your voice.
- Your baby may not be as active, but will still kick and wiggle often.
- Your baby may move into a head-down position, getting ready to be born.
- Your baby’s head has hair.
- Your baby’s brain, lungs, and other organs continue to develop.
- Your baby responds to light.
- The sex organs are developed.
# Changes You May Feel

<table>
<thead>
<tr>
<th>What to expect</th>
<th>What to do</th>
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| You may have stretch marks on your tummy and breasts. They may feel itchy. This is caused by stretching of your skin. | • Use a lotion or skin cream to help with the itching.  
• Do not use lotion or skin cream on the nipple area unless recommended by your health care provider. |
| You may feel your uterus tighten all over and then relax. These are called pre-labour or Braxton-Hicks contractions (see page 52). | • Walk around.  
• Relax and take deep breaths.  
• If they do not go away, call your health care provider. |
| You may feel pain in your legs (leg cramps). | • Put your feet up.  
• Stretch your leg by bending your ankle and pointing your toes towards your nose.  
• Make sure you get enough calcium. Eat foods that are high in calcium, such as cheese, tofu, and yogurt.  
• If your leg is swollen or the pain does not go away, see your health care provider right away. |
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<th>What to expect</th>
<th>What to do</th>
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<tr>
<td>You may have a burning feeling in your chest and throat (heartburn). This is caused by the growing baby pressing on your stomach.</td>
<td>• Eat foods that are less spicy and not fried.</td>
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<td>• Drink fluids between meals instead of with meals.</td>
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<td></td>
<td>• Eat smaller amounts of food. Eat more often.</td>
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<td>• Stay upright after eating.</td>
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<td>• Rest or sleep with lots of pillows under your head and upper body.</td>
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<td>• If the pain does not go away, call your health care provider.</td>
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<td></td>
<td>• Talk to your health care provider before taking any medication.</td>
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<tr>
<td>You may get hemorrhoids (swelling in or around your anus) and have hard dry bowel movements. This is called constipation. Hemorrhoids and constipation are caused by the growing baby pressing on your bowels.</td>
<td>• Eat more foods that are high in fibre, such as whole grain breads, prunes, bran, etc.</td>
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<td>• Drink plenty of fluids.</td>
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<td>• Walk around.</td>
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<td>• Do not sit or stand for a long time.</td>
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<td>• Sleep on your left side.</td>
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<td></td>
<td>• Put your feet up when you are sitting.</td>
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<td></td>
<td>• Do your Kegel exercises. See page 36.</td>
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<tr>
<td></td>
<td>• Avoid straining or pushing hard when you are having a bowel movement.</td>
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<td>• Tell your health care provider.</td>
</tr>
<tr>
<td>You may feel shortness of breath. This is caused by the pressure of the growing baby against your lungs. Toward the end of the third trimester, your baby will move lower and your breathing will get easier.</td>
<td>• Sleep with your head propped on 2 or more pillows.</td>
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<td>• Wear clothing that is loose around your chest and tummy.</td>
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<td>• Stand up straight.</td>
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<td>What to expect</td>
<td>What to do</td>
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</table>
| You may begin to feel anxious about labour and birth. You may be tired of being pregnant. You may also be looking forward to giving birth and meeting your baby. You may be wondering what it will feel like to be holding your baby in your arms. | • Distract yourself by getting things ready for the baby.  
• Talk to your health care provider about your concerns.  
• Talk to your partner about your feelings.       |
| You may need to pass urine more often. This is caused by your baby pressing on your bladder. Many women notice that urine leaks when they sneeze, laugh, or cough. | • If it hurts or smells bad when you pass urine, call your health care provider.  
• Try Kegel exercises. See page 36.             |
| Your interest in sex may change. Your interest in sex may not change. Both are ok. Talk with your partner. | • Talk to your partner or your support person about your feelings.  
• If sex is painful, talk to your health care provider.                |
Getting Ready for Your Baby

This is a good time to start getting ready for labour and birth and to bring your baby home.

What you and your partner can do:

- Talk to other mothers about their labour and birth.
- Talk to other parents about how they got ready for their first few weeks at home.
- Talk to your health care provider about what your labour and birth may be like.
- Talk to your partner about his or her role in supporting you during labour.
- Go on a tour of the hospital or birth centre.
- Make a list of the things your baby will need. Ask friends or family if they have things you can borrow. Buy the things your baby will need, a few at a time.
- Prepare a safe place for your baby to sleep. For at least the first 6 months, share the same room with your baby. Place the crib, bassinet or cradle next to your bed.
- Arrange for family or friends to help out during the first few weeks at home.
- During pregnancy and after your baby’s birth, keep a list of all the people who offered to help.
- Learn why babies cry and what can be done to soothe them. Refer to Comforting Your Baby on page 64.
- Learn about breastfeeding. See page 60 for more information.
- Find out about taking time off work.
- Prepare a budget for all the extra baby’s expenses.
- Continue to be physically active and to eat healthy foods.
- Rest when you can. Ask for help if you need it.
- Learn about services and community programs in your area that help new parents (drops-ins, breastfeeding support, dads’ group, food banks, community closets, etc.).
- Ask what the hospital or birth centre will provide and what you need to bring with you. Pack a small suitcase or bag 3 to 4 weeks before your due date.

### What to Pack Before Going to the Hospital/Birthing Centre

**For You**
- Health card
- Pen and paper
- Underwear
- Nursing bra or good support bra
- Toiletries (toothbrush, hairbrush, lip balm, hairdryer etc.)
- Sanitary pads
- Nightgown, slippers and robe
- Loose fitting clothes for the trip home
- Plastic hospital registration card, if you have one

**For Your Baby’s Trip Home**
- Approved car seat
- Undershirt
- Diapers and wipes
- Sleeper
- Socks or booties
- Hat
- Sweater
- Thin blanket
- Warm blanket (for winter)

**For your partner or support person**
- Pajamas or comfortable clothes
- Toiletries
- Money
- Cell phone and charger
- Book and music
- Money for vending machines, hospital cafeteria or hospital parking
- Phone numbers for friends and family
- Camera
- Cell phone and charger
- Very light reading
- Your favorite music
The way labour begins and what happens during labour is different for each woman. It is normal to feel nervous, afraid, excited, happy, and sad all at once!

In this section, you will learn:

(1) How to tell if you are in labour. When to go to the hospital.

(2) The four stages of labour. Positions and tips to help you cope.

(3) The medical procedures your health care provider may use.
What is Labour?

Labour is the work your uterus does to help the baby come out. For many hours, your uterus will tighten (contract), rest, and then tighten (contract) again. This makes the opening of the uterus (cervix) get thinner (efface) and open (dilate).

A contraction occurs when the uterus gets tight, rests, and then gets tight again. You will feel many contractions when you are in labour. The “pain of childbirth” comes mainly from the contractions. When your cervix opens to 10 cm, your contractions and your pushing will move the baby down the birth canal (vagina) and out into the world.

The Thinning and Opening of the Cervix

![Diagram of the Thinning and Opening of the Cervix]

**Efface**
Your cervix gets thinner (effaces) before it opens (dilates).

**Dilate**
Your cervix will open (dilate) to about 10 cm (4 inches) before your baby comes out.

Labour and birth is a natural and important process for your body. Your hormones are preparing your body and your baby for the transition from the womb to the outside world. Trust the process.

How long does labour last?
Prepare yourself for the work of labour and be flexible with your plans as it is also unpredictable. Every labour and birth is different. It is hard to know how long your labour will last. For a first baby, labour may last 12 to 20 hours. For more information, see *Pathway to a Healthy Birth* at [www.nationalpartnership.org/research-library/maternal-health/pathway-to-a-healthy-birth-booklet.pdf](http://www.nationalpartnership.org/research-library/maternal-health/pathway-to-a-healthy-birth-booklet.pdf)
Signs of Labour

There are some normal signs that tell you that your labour may begin soon. Most women go into labour within a week of their due date. If you have signs of labour before you are 37 weeks pregnant, go to the hospital right away.

(1) **Lightening**
Near the end of your pregnancy, your baby will move down. When this happens you will be able to breathe better. You will feel less burning in your chest and throat after you eat. You will have to pass urine more often. If this is your first baby, this may happen 2 to 3 weeks before you go into labour. If this is not your first baby, this may not happen until closer to the time you will give birth.

(2) **Mucous Plug**
While you are pregnant, you have a thick mucous plug in your cervix. As the baby’s birth gets closer, your cervix begins to thin and open, and the plug may come out. If this happens you will notice thick mucous on your underwear, or in the toilet, or you may not notice it at all.

(3) **Bloody Show**
You may notice a pink, red, or brown discharge a few days before labour or during labour. This is called bloody show. It is a sign of your cervix changing shape and the mucous plug coming out. Tell your health care provider when this happens.
(4) Bag of Water Breaks

Your baby is inside a bag of water (amniotic sac) in your uterus. When the baby is ready to be born it is normal for the bag of water to break. This may happen before labour starts, early in labour or when the baby is almost ready to be born. When it happens, you may have a little or a lot of water leaking from your vagina. Sometimes women do not know whether this is water from their uterus or urine. If you are not sure, call your health care provider.

When your bag of water breaks:

- Write down the time that your bag of water broke.
- Look at the colour of the water (it should be clear).
- Notice if there is a smell (it should not smell).
- Do not use a tampon – use a pad in your underwear or towel if needed.
- Call your health care provider or hospital for instructions.

(5) Contractions

Late in your pregnancy you may have contractions (uterus tightens, rests, and tightens again) that are very strong. They may come and go for hours or days and then stop. These contractions are helping your womb (uterus) get ready for birth and are called pre-labour or Braxton-Hicks contractions. The chart below will help you know when you are really in labour.

<table>
<thead>
<tr>
<th>Pre-labour contractions</th>
<th>True labour contractions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do not get stronger.</td>
<td>Get stronger.</td>
</tr>
<tr>
<td>Do not become regular.</td>
<td>Become regular and closer together.</td>
</tr>
<tr>
<td>Go away with walking.</td>
<td>Get stronger when you walk.</td>
</tr>
<tr>
<td>Feel strongest in front.</td>
<td>May begin in back and move to front.</td>
</tr>
<tr>
<td>There is no bloody show.</td>
<td>Bloody show is usually present.</td>
</tr>
<tr>
<td>Tend to go away with rest.</td>
<td></td>
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</tbody>
</table>

A HEALTHY START FOR BABY AND ME
How to Time Your Contractions?

By learning how to time your contractions, you will know when you are in true labour. Time your contractions when the contractions come closer together and/or the contractions get stronger or when your water breaks.

- It is also helpful to time for at least 3 contractions in a row to see what the pattern is.

Write down:
- When each contraction begins and ends.
- How far apart the contractions are.
- How long each contraction lasts.
- How strong the contractions feel.

Use a clock or watch with a second hand. To find out how long the contraction lasts, start timing from the beginning of the contraction to the end of the same contraction.

To find out how far apart contractions are, time the beginning of one contraction to the beginning of the NEXT contraction.

### Labour Record

<table>
<thead>
<tr>
<th>Start Time</th>
<th>Stop Time</th>
<th>Length of Contraction</th>
<th>Frequency of Contractions</th>
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<td></td>
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</tbody>
</table>
**When Should You Go to Your Place of Birth?**

- If you are bleeding from your vagina.
- When your contractions are 5 minutes apart and are also increasing in intensity (your health care provider may ask you to go to the hospital earlier).
- When your water breaks (if recommended by your health care provider).
- If you are planning a home birth, contact your midwife when you have signs of labour.

It’s best to labour at home during early labour. Resting, taking a shower, going for a walk or watching a movie are all great ways to cope with early labour.

**The Four Stages of Labour**

**Stage 1: Labour**  
Your contractions will slowly get stronger. They will happen more often and last longer. By the end of this stage your cervix will be thinner (effaced) and will open (dilate) to 10 cm. Your baby will move down into your pelvis.

**Stage 2: Birth of Baby**  
You will have more contractions. They will be very strong. You will feel the need to push. Your baby will be born.

**Stage 3: Release of Placenta**  
During this stage you will be pushing your placenta out.

**Stage 4: Recovery**  
During this stage you will be resting after all your effort during labour and birth. You will be spending time with your baby. Skin-to-skin contact with your baby will help you bond with your baby and will keep your baby warm. It will help your baby find your breast and latch on to your nipple. This is a good time to start breastfeeding.
Things to Help You During Labour

Here are some tips that you can use to stay comfortable during labour. By learning to relax, you will stay more comfortable. It helps your baby to move down into the birth canal.

Learn breathing techniques such as how to:
- Breathe slowly and rhythmically in through the nose and out through the mouth.
- Take light (shallow) breaths in and out of your mouth.
- Take short quick breaths in and out of your mouth.

You can learn the breathing techniques in prenatal classes or ask someone to show you. Practicing your breathing techniques alone or with your coach will help you to prevent hyperventilating.

Ask your support person to massage different parts of your body. If your lower back hurts, ask your support person to apply steady pressure on your lower back.

Have a shower or a bath.

Drinking juice or water, or chew on ice chips. Eat small amounts of food.

Try to find something to look at or think about during your contractions.

Some women want medications to help reduce the pain. Talk to your health care provider about the kinds of pain medications that might help. Ask questions about the benefits and risks to you and your baby, as well as the alternatives, so that you can make an informed decision about using them or not.

Listen to music.

Go to the toilet to pass urine at least every hour.
Positions

It is important to change positions during labour. Doing so will help you to stay comfortable and will help your baby move down. Try some of these positions to find the ones you like.
Medical Procedures

There are several medical procedures that your health care provider may use. Sometimes, babies need some help to be born. During your prenatal visits talk about what medical procedures your health care provider may use during labour and birth. This will help you to be aware of the risks and benefits, for you and your baby, of each procedure as well as the alternatives so you can make an informed decision during labour. When in labour, choose the method(s) that works best for you and your baby.

**Induction**
- Labour may need to be started for you because the baby is overdue, for special health reasons or because the bag of water breaks but there are no contractions.
- This can be done with special medication (oxytocin).
- If your bag of water is not broken, your health care provider may suggest breaking it for you before starting the medication.

**Augmentation**
Breaking your water and/or the use of oxytocin can help if your labour is slow to progress.

**Pain Medication**
- *Intravenous Infusion (IV)* may be used to give you fluids, medication, or pain medication through your arm.
- *An Epidural* may be used to give you pain medication through your back. An epidural anesthetic numbs the lower part of your body.

**Fetal Monitoring**
- During labour, your baby’s heart rate will be listened to.
- Your health care provider will use a hand-held stethoscope called a Doppler.
- A machine called a “fetal monitor” may be used to listen to the baby’s heartbeat.
- Monitoring also includes recording and measuring the contractions.

**Episiotomy**
- This is a small cut to make the opening of the vagina bigger.
- An episiotomy is not a routine part of labour.
- Freezing is usually given first.
- You will need to have stitches.
**Forceps and Vacuum Extraction**

- Forceps are a spoon-like tool that fits around the baby’s head.
- Vacuum extraction uses a soft cup that fits on top of the baby’s head and is attached to a machine.
- They are used when:
  - The baby is not in a good position to be born.
  - The baby needs to be born quickly.
  - The mother is very tired and can’t push any more.

**Caesarean Birth (C-section)**

- This involves the baby being born through a cut in your abdomen and uterus.
- There are many reasons why a C-section may be done:
  - The baby is very big.
  - The baby is lying with its legs down instead of its head.
  - Special health reasons.
  - Problems with the umbilical cord or placenta.
  - The baby needs to be born quickly.
  - Labour is not progressing normally.
- Having a caesarean birth may be unexpected. Your health care provider will let you know if a C-section is needed to help your baby be born safely.
As a parent you need to create a loving, safe, and healthy home for your baby. In this section you will learn:

(1) About breastfeeding.

(2) How to comfort your baby.

(3) About baby care.

(4) When to get help for your baby.

(5) How to keep your baby safe.
Breastfeeding is one of the best things you can do for your baby and yourself. Your baby needs only breast milk for the first 6 months. At 6 months, start solid foods and continue to breastfeed for up to 2 years and beyond.

Breastfeeding is healthy for your baby:
- Provides the best food that is always fresh and ready.
- Reduces the risk of Sudden Infant Death Syndrome (SIDS).
- Helps prevent an upset tummy and constipation.
- Provides closeness and warm touch from mom.
- Promotes good health and brain development.
- Protects against illnesses (e.g., coughs and colds, ear infection, type 1 diabetes, etc.)
- Helps protect against allergies.
- Helps to promote proper jaw and tooth development.

Breastfeeding is healthy for you:
- Helps your uterus return to its normal size more quickly.
- Lowers your risk of breast cancer, ovarian cancer, and diabetes.
- Saves you time and money.
- Helps you bond with your baby and make you feel happier.

Start breastfeeding as soon as your baby is born
- Ask your health care provider to place your baby on your tummy as soon as he is born.
- He will be naked, his back will be wiped dry and your health care provider may put a diaper on your baby and a blanket over both of you to keep you warm.
- Your baby will slowly adjust to where he is and will start moving towards your breast. It may take time and you may need to help your baby a little bit to reach your breast and find your nipple. He will try to latch on.
- Many babies are able to latch on and breastfeed well soon after birth. Keep your baby skin-to-skin until he has finished his first feed, or as long as you wish.
Holding your baby skin-to-skin will help him:
- Feel less stress from being born.
- Adjust to life outside your womb.
- Be calmer.
- Breathe better.
- Have normal blood sugar.
- Stay warmer.

Enjoy your first moments together. Continue to hold your baby skin-to-skin as often and as long as you can even after you leave the hospital and go home. Skin-to-skin is a great way to bond with your baby, encourage your baby to breastfeed, soothe your baby when he is upset, and lessen his pain during vaccination or other painful procedures.

If you are not well enough to hold your baby skin-to-skin right away, your baby can be placed skin-to-skin with your partner or support person if you wish. If your baby is not well enough to be placed skin-to-skin the moment he is born, begin as soon as you can.

**Encourage a good latch**

Some mothers find that their nipples feel tender. The two most common reasons for sore nipples are poor positioning and/or poor latch. These problems can be solved. Find good breastfeeding support to help you.

There are many breastfeeding positions. Find the one that you and your baby prefer. Be sure that your baby is latched deeply onto your breast and not just taking your nipple into his mouth.

If you are feeling pain or if you feel your baby is not breastfeeding well, get some help right away. You can phone the Telehealth Ontario 24/7 Breastfeeding Support Hotline day or night at 1-866-797-0000.
Your newborn will need to breastfeed often

Your newborn’s stomach is very small. This is why you need to breastfeed often both day and night. Expect to breastfeed your newborn at least 8 times in 24 hours. As he grows, he will be able to drink more breastmilk at a feeding.

Your baby will show that he is ready and eager to feed. He will show some signs called feeding cues:

Crying is a very late sign that your baby is hungry. He may be too upset to latch well. You will have to calm him before breastfeeding him.

Most mothers make more than enough milk for their babies

The amount of milk depends on how often and how well your baby latches on your breast. Your body will make more milk when your baby breastfeeds more often and has a good latch and suck. Start breastfeeding as soon as your baby is born. Learn your baby’s hunger cues and breastfeed as often as needed.

Breastfeeding gives you a lot of freedom

You can breastfeed your baby anywhere, and anytime. You have the right to breastfeed anywhere in public. This can be at a restaurant, in the park, on the bus, at a shopping mall etc. You do not have to cover-up with a blanket if you do not want to.

Breastfeeding saves you time. You do not spend time washing and sterilizing feeding equipment. Your milk is also at the perfect temperature for your baby.
Breastfeeding mothers can eat all foods
There is no special diet while breastfeeding. Enjoy a variety of foods and follow Canada’s Food Guide. Follow your thirst to know how much to drink. Water is the best choice.

See page 20 for information on limiting herbal teas, energy drinks, and sources of caffeine. If you think your baby has an allergic reaction to something you have eaten, stop eating that food and make an appointment to see your health care provider to find out what to do.

Breastfeeding mothers who smoke can breastfeed
Even if you smoke, breastfeeding is still the healthiest choice for your baby. If you can, try to cut down on smoking or quit. It is best to smoke after you breastfeed your baby. Smoke outdoors while the baby is left inside with family or friends. If you have smoked, wash your hands and change your outer clothing before holding your baby. For information, refer to page 100 under Smoking Cessation.

Father and partner can help with breastfeeding
They can:

• Change the diaper before feeding.
• Bring the baby to be breastfed.
• Burp the baby afterwards.
• Offer you a glass of water while you are breastfeeding. Also, keep you company when you breastfeed.
• Encourage you to keep breastfeeding.
• Find breastfeeding help if needed.
• Attend breastfeeding support groups or drop-ins with you.
• Encourage you to rest when you need it.
• Reduce the distractions such as answering the phone or doorbell, entertain visitors, take care of sibling, etc.

For more information on breastfeeding, refer to My Breastfeeding Guide at www.beststart.org/resources/breastfeeding/BSRC_My_Breastfeeding_Guide_EN.pdf. It answers breastfeeding questions you may have as an expectant or new parent. Also, go to page 91 for phone numbers to call and web links to get breastfeeding support and advice.
Comforting Your Baby

In the first year of life, parenting is about comforting your baby and making sure he is safe. Your baby will feel loved and safe if you comfort him when he is startled, scared, or upset. You will not spoil your baby by holding him. Your baby wants to be close to you. Being close to your baby may be enough to calm him.

Your baby may be happy one minute and then start crying the next minute. Crying means he needs something. He may be hungry, tired, wet, cold, hot or just want to be held. Try to respond before your baby is crying loudly. If your baby has been crying a lot he will be harder to comfort. Learn the early signs that your baby needs something. For example, when your baby is too tired he may rub his eyes, whine more, lose interest and yawn. See page 62 for early feeding signs.

When your baby is crying or fussy:

• Try breastfeeding your baby.
• Always respond kindly and gently.
• Place a fussy infant skin-to-skin on your chest. The warmth and close contact will likely help to calm her. Always be sure that her nose is clear and that she can breathe easily.
• Check to see if your baby needs a clean diaper.
• Check to see if your baby is too hot or too cold.
• Try carrying or rocking the baby using very gentle movements.
• Take your baby to a quiet room and turn off the lights.
• Play soft music, talk, sing or stroke your baby’s forehead. Avoid loud, sudden noises.
• Give your baby a warm bath or massage.
• Show your baby bright, colourful objects.
• Take your baby for a walk outside.
If you are feeling upset because your baby is crying:

Some babies cry more than others. All babies have times in their first few months when they cry more often. Sometimes nothing you do will calm your baby. If you are feeling upset:

- Put your baby in his crib, cradle or bassinet and leave the room.
- Ask someone you trust to hold the baby for you while you take a break.
- Talk to a friend, family member, or someone you trust about your feelings.

Never shake a baby or child. It can cause brain damage or death.

It is important to know that sometimes it may take a long time to soothe your baby. This is normal. See more at www.purplecrying.info/what-is-the-period-of-purple-crying.php. If you are worried about your baby's crying talk to your health care provider, call your local public health unit or visit a drop in. For more resources see page 97.

Caring for Your Baby

Bathing

Before you leave the hospital, ask for a bath demonstration. Once at home you can also ask someone to show you and your partner how to give a bath to your baby.

Your baby does not need to be bathed every day. However, it is important that every day your baby stays clean and dry.

Bath time is another time to bond together. Your baby will enjoy your gentle touch, your voice and your closeness. Choose a time that you are both relaxed and when your baby is not hungry.

Set the temperature of your hot water at 49°C (120°F). Anything warmer, you may scald her.

Follow these tips to bath your baby:

- Get everything you need ready before you undress your baby: a mild unscented soap, wash cloths, diaper and supplies, baby’s clothing, and a soft towel opened up on a safe surface to lay her on after the bath.
• Test your baby’s bath water before you put her in the bath. It should feel warm, not hot. Use the inside of your wrist or your elbow to test.

• Do not add oil or liquid soap in the bath to avoid a slippery baby.

• Use soap only for the dirtiest areas. You do not need to use soap every day.

• Use clear water and a soft washcloth for bathing your baby. Start by washing her eyes, face and then move down her body.

• Shampooing is only needed once or twice a week. Use mild shampoo, rinse well and rub dry.

• Always be within arm’s reach when your baby is in the water. Never leave her alone, even for a brief moment.

• If using a bath seat always be within arm’s reach. Never rely on the bath seat to keep your baby safe. Health Canada doesn’t recommend their use.

• Take your baby with you if you have to leave the room. If you need to answer your phone during bath time, pick up your baby and take her with you.

• If your baby still has the stump of her umbilical cord, ensure it does not stay wet.

• To dry her, place her on a towel and pat dry. Pay special attention to drying skin folds.

For more information on bathing and skin care, refer to www.caringforkids.cps.ca/handouts/your-babys-skin and page 97 under Newborn Care.
You may also consider bathing with your baby.

In a tub of warm water, you will both relax and enjoy the extra closeness. This bonding time can also soothe your crying baby.

Follow these extra steps to make your bath time safer:

• Place your baby in a bouncy seat beside the bath or on a comfortable towel on the floor before stepping in and out of the tub. It is safer not to hold your baby. If you have a partner, ask him or her to hold her when you step in and out of the tub.

• Hold her with both hands at all times.

• Rest her against your thighs. She will enjoy facing you.

• Keep her warm in the water. You can use a plastic cup or a face cloth to pour water over her body from time to time.

You or your partner can share the experience of bathing your baby for many months to come.

**Immunize your baby**

Starting at two months of age, your baby will need to start her immunization schedule. Breastfeeding provides protection for your baby and immunization adds to that protection. Immunization will help your baby fight off vaccine-preventable diseases and stay healthy. It is also important for your baby to receive these vaccines in order to enter daycare and school.

When your baby is being immunized, breastfeeding and holding your baby skin-to-skin can help lessen the pain of the injection. Your health care provider will give you information about the vaccines and a booklet to keep track of the vaccinations your baby has had. Make sure you keep this booklet in a safe place.

Provide Supervised Tummy Time

Tummy time helps to prevent flat spots on your baby’s head (positional plagiocephaly). It is also important to develop healthy muscles.

Below are tummy time tips:

- Start tummy time right from birth.
- Place your baby on her tummy for short periods. You can try it after a diaper change.
- You can provide tummy time when she is tummy-down on your tummy.
- Gradually increase the time on her tummy, as she gets older.
- Always stay close to her and play with her during tummy time.
- When she is awake, give her lots of cuddle time. You want to avoid long periods in sitting positions like in the car seat, a stroller, a bouncer, etc.

Consult your health care provider if your baby develops a flat spot on her head.
Diapering your Baby

Most newborns need about 10 to 15 diaper changes per day. Your baby needs to be dry and clean to keep skin healthy and to help prevent diaper rash.

Changing a diaper is another time for you and your baby to bond together. Make that time special by talking to her, laughing, singing, caressing and playing with her.

When changing her diaper:

- Get everything ready before you change her diaper (e.g., diaper, wipes and towel).

- Wash your hands with soap and water before and after each change.

- Follow the manufacturer instructions for the change table and use the safety straps.

- Never leave her alone and never turn your head away even for a brief moment.

- Clean the area with an unscented baby wipe or a wet washcloth. To better reach all the dirty areas, gently lift your baby’s legs by the ankles.
• For a baby girl, always wipe from front to back and gently clean the dirty areas.

• For a baby boy, clean the dirty area from front to back and do not pull the foreskin back. Place his penis in a downward position before fastening the diaper.

• Dry the area. You can pat dry or let it air dry. There is no need to use cream, powder or cornstarch.

• Slide the open diaper under the baby while gently lifting her legs and feet.

• For a newborn, keep the diaper folded below the cord so it can dry better.

• The diaper should be snug but not tight.

For more information on steps to change a diaper visit www.caringforkids.cps.ca/uploads/wellbeings/diaper.pdf

Caring for Your Baby’s Nails

Baby’s fingernails grow fast. They are soft, pliable and sharp. You need to trim them to prevent your baby from scratching herself. Follow these few tips:

• Make sure you have enough light to see what you are doing.

• Cut her nails when she is sleeping.

• Use blunt scissors or clippers to cut her nails.

• Press her finger pad away from the nail to avoid nicking her skin.

• Hold your baby’s hand as you clip.

• To avoid infections or hurting her, do not peel off her nails or nibble on her nails to trim them.
Baby Safe Sleep Tips

For the first 6 months of life, place your baby’s crib, cradle or bassinet next to your bed. Place your baby in an appropriate crib, cradle or bassinet that meets current Canadian safety regulations.

To reduce the risk of Sudden Infant Death Syndrome (SIDS) and other sleep related causes of infant death also follow these important steps:

• Place him on his back to sleep, at naptime and nighttime.
• Provide a sleep surface that is firm and flat.
• Remove pillows, comforters, quilts, stuffed animals, bumper pads, positional devices or other loose or soft bedding materials that could suffocate or smother him.
• Dress him in comfortable fitted one-piece sleepwear.
• Ensure that the room temperature is comfortable for everyone.
• Use a baby seat, swing, car seat, bouncer, stroller, sling, and playpen only for what they are intended. None of them are a substitute for a crib, cradle or bassinet.
• Breastfeed your infant. Breastfeeding provides a protective effect against SIDS.
• Protect your baby from smoke and second-hand smoke. Smoke outside. Wash your hands after smoking. No smoking at all is best for your baby. Decreasing the number of cigarettes you smoke can also help to lower the risk of SIDS.
• Alcohol use and substance use pose a risk for SIDS and other unintended injuries in infants. It is safer to ask your partner or someone you trust to care for your infant until you are completely sober and not under the influence of substances.
• At 2 months of age, start your baby’s immunizations. Vaccines are important to protect your baby’s health and safety.
Baby Safety Tips

When your baby comes home, there are important safety tips you need to know. The following tips are to keep your baby safe.

**Remember:**

- Injuries are preventable. The best way to keep your baby safe is to stay close to your baby.
- You and all who care for your baby need to ensure that your baby’s environment is safe at all times.
- Prevention is the most important part of safety. As your baby becomes more active, he will explore and will develop new skills. Childproofing your house is necessary to keep him safe as he grows.

**What you can do to make your environment safer for your baby:**

The tips are mostly for a newborn to a 6 months old baby.

- Always support your baby’s head. Her head is bigger and heavier than her body.
- Keep one hand on your baby’s body at all times when she is on a high surface. For example, when changing your baby on a change table, a counter or a bed.
- Always hold your baby during feedings.
- Be sure that toys are sturdy and washable with no small parts.
- Keep small objects out of your baby’s reach.

Your child can easily choke on small toys and objects. Keep them away from your baby or toddler.
• Prevent burns. Your baby may reach out unexpectedly and burn herself. Avoid holding her when you smoke, cook or drink a hot drink. Avoid sitting too close to a fireplace.

• Check for strangulation or entanglement risks. Drawstrings on clothes, any object tied to baby’s clothing, necklaces, head bands, cords on toys, strings, window blinds or curtain cords, etc. can pose a risk to your baby.

• Make sure you have working smoke detectors, carbon monoxide detectors, and a fire extinguisher in the house. Always ensure any gas appliances are properly functioning.

• Avoid loud noises. For example, listening to loud music or high pitch noises. If you can talk over the sound, the level of the noise should be ok.

• Keep emergency phone numbers close. You can post them in an area where you can reach them quickly or enter them in your cell phone.
Is Your Baby Equipment Safe?

If you get second-hand items, check with the manufacturer and Health Canada to know if there are recalls on those items. Ideally check before buying or accepting them. See The Recalls and Safety Alerts Database at www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/index-eng.php

The following list is a guide to ensure the baby equipment you choose is safe for your baby.

**Cribs, cradles and bassinets:**

- Use a sturdy crib, cradle or bassinet that meets current Canadian safety regulations.
- Make sure it is built with screws and bolts, not hooks or clamps.
- It should have a firm flat mattress that fits snugly and a secure support system for the mattress. The mattress is too small if you can fit more than 2 fingers between the mattress and the side of the crib.
- Put it together carefully. Follow the instructions.
- Remove pillows, comforters, quilts, stuffed animals, bumper pads, positional devices or other loose or soft bedding materials that could suffocate or smother your baby.

**Playpens:**

- Choose a playpen with a sturdy floor with a thin foam pad.
- Make sure it has secure hinges that cannot pinch your baby.
- It should have sides made of very fine mesh with no rips.
- Read the instructions that came with the playpen and follow any recommendations.
- Remove pillows, comforters, quilts, stuffed animals, positional devices or other loose or soft bedding materials that could suffocate or smother your baby.
- Supervise your baby at all times.

The safest place for your baby to sleep is in his crib, cradle or bassinet. Playpens are not safe substitutes for a crib.
Strollers:
- Choose a sturdy stroller with brakes that work.
- Follow the instructions that came with the stroller.
- Do not carry an extra baby or child in a single stroller.
- Use the lap belt.
- Remove pillows or blankets to avoid suffocation.
- Supervise your baby at all times.
- The safest place for your baby to sleep is in his crib, cradle or bassinet. Strollers are not safe substitutes for a crib.

Slings and carriers:
- Use the right size for your baby’s age and size.
- Ensure you can see your baby’s face at all times.
- Check your baby often.
- Avoid overheating and suffocating. Never zip up your coat over your baby in the sling.
- Choose a sling or carrier with safety straps and always use them.
- Make sure your baby cannot slip through the leg openings.
- Slings and carriers are not safe substitutes for a crib. The safest place in his crib, cradle or bassinet.

High Chairs:
- Choose a high chair with a wide sturdy base and a safety belt.
- Make sure there are no sharp edges or parts on the tray that might pinch little fingers.
- Make sure there are no gaps between the tray and the back of the chair that might trap your baby’s arm or head.
- Place the high chair far from the stove and kitchen counters.
Baby Walkers:
No walkers are safe. They are banned in Canada.

Pacifiers:
Many babies never use a pacifier. Pacifier use has risks. Talk to your health care provider so that you can make an informed decision. See page 64 for strategies to soothe your baby.

If you decide to use a pacifier:
- Do not tie the pacifier ribbon or cord to your baby’s clothing.
- Inspect the pacifier frequently and throw it away when it starts to wear out.
- Keep it clean to lessen your baby’s chances of getting sick from germs on the pacifier.

Curtains and blinds:
- Consider having cordless curtains.
- Keep furniture, or anything else children can climb, away from windows.
- Never leave a child alone.
- Keep window cords out of the reach of a child.
- Test your window safety devices regularly. Make sure they are working the way they should and that the release lock can be opened in case of an emergency.

Clothes:
- Remove cords, drawstrings and ribbons.
- Do not use scarves or neck warmers.
- Check for loose buttons, loose threads or any other small part that can be a choking or strangulation hazard.
- Dress your infant in comfortable fitted one-piece sleepwear.
Car Seats:
A car seat used correctly can save your baby’s life. Car crashes are the most common injury to children.
Follow these tips when choosing the right car seat for your baby:

• Check the car seat label for date of manufacture and expiry date. If expiry date is not on the seat, read the car seat manual to find the expiration date. Note that expiration dates change from seat to seat.
• Make sure the car seat has not been involved in a car crash or dropped from a height of one metre (3 feet) or more.
• You must have all its parts and the instructions on how to use it and install it.
• Make sure the car seat has not been recalled with a safety problem. To find out, call Transport Canada 1-800-333-0371 or visit www.tc.gc.ca/eng/motorvehiclesafety/safedrivers-childsafety-notices-menu-907.htm.
• It must display a National Safety Mark.

NSM sample – the unique number assigned to a company is to appear in the center of the NSM maple leaf shaped logo.

• Make sure the car seat is in good condition:
  – Free of cracks or chips in the molded plastic.
  – Free of warping, rust, or broken rivets in the frame.
  – Free of cuts, frayed edges, or broken stitches in the harness straps.
  – Free of rips in the seat’s padding.
  – All the harness buckles work properly.

Using a Car Seat:
• Place your baby in a rear-facing car seat.
• Read the instructions to find out how to properly install your car seat.
• The safest place is in the back seat, but may not be the middle depending on the model of the vehicle. If the back middle seat has access to the trunk or does have UAS clips, for example, it may be better to place the car seat behind the passenger or driver. Passenger side is recommended as it is curbside when car is parked along a street.
• The car seat’s harness straps and buckles are supposed to be snug.
• Ensure that when secured, the harness strap cannot be pinched more than one inch at the baby’s collar bone.
• The chest clip should be at your baby’s armpit level.
• Read the car seat manual to find out how the carry handle should be positioned in the vehicle for proper installation.
• Change the car seat when your baby has reached the limits as outlined in the car seat manual.

For more information, see page 92 under Child Safety. To check for car seat recalls and more information contact Transport Canada at 1-800-333-0371 or visit www.tc.gc.ca/eng/motorvehiclesafety/safedrivers-childsafety-notices-menu-907.htm

Remember that your baby’s car seat is not a safe substitute for a crib. The safest place for your baby to sleep is in his crib, cradle or bassinet.

When to Get Help for Your Baby

If you feel something is not right, and/or if you are very worried see a health care provider right away. Do not wait. Call immediately if your baby:
• Is still having black stools at 4 days old.
• Is very sleepy and always has to be woken up to eat.
• Is hard to wake or seems very weak.
• Has a fever.
• Is breathing very quickly or has trouble breathing.
• Has lips or ear lobes that are blue or grey in color.
• Appears jaundiced or yellow in color.
• Is losing weight or not gaining weight.
• Has sunken eyes or the soft spot on top of the head is sunken.
• Has a dry mouth, lips, tongue, or nose.
• Has pale, cold, and moist skin.
• Is having a seizure (the whole body, arms, and legs are shaking).
• Vomits large quantities or forceful (projectile) vomiting twice or more per day (spit-up or bringing up small quantities of milk is normal, even at every feed).
• Has a high-pitched crying over prolonged periods and your baby has other symptoms like diarrhea or a fever. Note that babies can be extra-fussy late afternoon and evening hours. See the period of purple crying at www.purpurencrying.info
The first 6 weeks after birth is known as the postpartum period. During this time, your uterus will return to almost its pre-pregnant size and shape, your milk supply is establishing to breastfeed, your body is physically healing, and your hormone levels are stabilizing.

In this section you will learn about:

(1) Changes to your body after you had a baby.

(2) Your changing feelings.

(3) Having support.

(4) When to get help.
Changes to Your Body After Birth

There are many normal changes that will happen to your body after you have a baby.

**Afterpains**

After your baby is born you may feel painful contractions as your uterus goes back to its normal size. This is normal. Your health care provider will check to make sure that this is happening. You may feel these pains the most when you breastfeed because your baby’s sucking helps your uterus return to its normal size. Afterpains usually go away after a week. Call your health care provider if the afterpains do not go away or if they are very painful.

**Bleeding from your Vagina**

You will have bleeding from your vagina for 2 to 6 weeks. At first, the bleeding will be heavy and dark red. In a few days the bleeding will slow down. The colour will change to brown, pink, and then to white. It is important to keep this area clean and to change your pad often. Do not use a tampon during this time.

Call your health care provider if your flow is heavier than normal, is heavier than a period, smells bad, or has large clots.

**Sore Perineum**

The area between your legs may be sore or swollen. If you had stitches you may feel more pain. Try freezing a damp maxi pad and putting it in your underwear. Try sitting in a warm bath. Also, keep the area very clean by pouring warm water on the area between your legs after you pass urine or have a bowel movement. You should also do the Kegel exercises (see page 36) you learned when you were pregnant. Call your health care provider if the stitches open or if you notice smelly fluid.

**Constipation**

You may find it hard to have a bowel movement after your baby is born. Eat foods high in fibre and drink lots of fluids to make the bowel movement softer and easier to pass. Call your health care provider if you are constipated for more than 3 days.

**Breasts**

Your breasts will get firmer and bigger. Your breastmilk will be yellow at first (colostrum). Colostrum provides everything your baby needs. See pages 60-63 for more information.
Hemorrhoids
Women can get hemorrhoids during pregnancy and after they have a baby. Eat foods high in fibre and drink lots of fluids to keep the bowel movement soft and easy to pass. Ask your health care provider about medicines that may help.

Hard to Pass Urine
You may find it hard to pass urine for a couple of days after your baby is born. Drink lots of fluids and remind yourself to go to the toilet even if you do not feel like you have to go. If it burns or hurts when you pass urine or you really cannot pee, talk to your health care provider.

Getting your Period
Many breastfeeding mothers find that their period does not come back until they begin giving their baby solid foods at 6 months. Some mothers find that their period does not return until after they stop breastfeeding. Mothers who do not breastfeed usually find that their period starts within 2 months after giving birth.

Having Sex
It is safe to have sex when you feel ready. This can be after the bleeding from your vagina has stopped and the area between your legs has healed (tears or stitches have healed). The best thing is to talk to your partner about how you are feeling and what you would like. Choose activities that please both of you.

You need to see your health care provider 6 weeks after your baby is born for your check-up. Ask about birth control methods. If you are breastfeeding be sure to let your health care provider know because some birth control methods can affect breastfeeding.

Postnatal Physical Activity
Taking care of yourself helps you to take care of your baby. Being active after your baby is born will improve your blood flow and make you stronger. Ask your health care provider or public health nurse about activities to do after having your baby.

If You had a Caesarean Birth
If you had a caesarean birth, you will need to take extra care and will need extra rest. Ask for help. Talk to your health care provider.
Your Changing Feelings

The first few days and weeks after your baby is born are both exciting and tiring. You may have many new feelings.

Baby Blues

Many new mothers feel sad or cry easily for a week or two after the baby is born. This should be better after 2 weeks. If not, talk to your health care provider. This is called having the baby blues. These feelings are normal and happen for many reasons, such as:

- Changing hormones.
- Lack of sleep.
- Not feeling sure how to care for the baby.
- Worring about being a mother.
- Trying to do everything at once.
- Your changing relationship with your partner.

Here are some tips to help you cope during the first few weeks:

- Learn how to care for your baby.
- Try to get as much rest as you can when you get home. Sleep when your baby sleeps.
- Limit the number of visitors and keep the visits short.
- Arrange for family and friends to help with cooking and cleaning.
- Give yourself time to adjust to your new life.
- Ask for help.
- Take time for yourself.
Postpartum Depression
When the feelings of “baby blues” continue for a longer time and feel stronger or get worse, you may have postpartum depression.

You may be feeling:
Sad, alone, worried, or nervous. You may also feel overwhelmed, ashamed, guilty, angry, upset, or irritable. You may not enjoy being with other people (including your baby) or you may get angry very easily.

You may also:
• Be tired all the time.
• Want to sleep all the time.
• Have trouble sleeping or relaxing.
• Cry easily and for no reason.
• Have no appetite or want to eat all the time.
• Feel like your heart is beating too fast.
• Feel sweaty, numb, or tingling.
• Have a lump in your throat.
• Worry a lot about your baby.
• Feel rejected by your baby.

If these feelings last more than 2 weeks, get help right away. Talk with your health care provider or public health nurse. They will know how to help.

Some women think about hurting themselves or their baby. If you feel this way, get help right away. Go to the hospital or call your health care provider.

For more information refer to the section Mental Health at http://en.beststart.org/for_parents/do-you-have-baby-0-12-months and the list of resources on page 96.
Having Support

You can help a new mother get the care and support she needs. If you notice signs of postpartum depression, help her contact her health care provider right away.

To support the mother dealing with postpartum symptoms of depression you can:

- Know the signs and symptoms of postpartum depression.
- Tell her she is a good mother and the baby is doing great.
- Help with the care of the baby and household chores.
- Take the baby out to give her a break.
- Suggest she get outside for a walk. Go with her or have a friend join her.
- Listen without judging or trying to fix her situation.
- Limit the number of visitors.
- Arrange for other people to make meals and to help in practical ways.
- Go with her to medical appointments and psychological follow-ups.

What you can do for yourself

Life with a new baby is stressful for fathers/partners and other family members as well, especially if the mother becomes depressed.

It is important to take some time for yourself to do what you enjoy doing. You need a break too. Find someone to talk with. Here are some suggestions:

- Family, friends, other fathers.
- Your health care provider.
- 24-hour crisis line.
- Your local public health unit.
- Community services in your area.
- Men’s groups or fathers’ groups in your area.

Remember that:
- Having symptoms of depression is not a weakness of character.
- It is a treatable mental condition that does not go away by itself.
- Getting help is the best thing you can do.
- You need to look after yourself.

For more information, see the section *Fathers and Partners* on page 93 and section *Mental Health* on page 96.
When to Get Help

See a health care provider right away if:

• There is a bad smell coming from your vagina.
• Large blood clots come from your vagina.
• The amount of blood coming from your vagina is heavier than normal.
• Blood is still coming from your vagina after 6 weeks.
• Your stitches open.
• You have a fever.
• You have signs of postpartum depression (see page 83).
• You think something is not right.
The following pages provide you with helpful websites, phone numbers and services to help you answer questions you may have during your pregnancy or after the birth of your baby. The links and resources provide information on a number of topics.
**Resources List**

The resources list is organized into the following topics:

- Aboriginal Resources
- Abuse
- Alcohol and Drugs
- Breastfeeding
- Child Safety
- Community Resources
- Fathers and Partners
- Growth and Development
- Health Care Providers
- Healthy Eating
- Labour and Birth
- Mental Health
- Newborn Care
- Newcomers to Canada
- Physical Activity
- Pregnancy
- Smoking Cessation

The information in this booklet, including the resources and links in this booklet, does not replace medical advice from your health care provider. Everyone is different. Consult with your health care provider to give you the medical advice and care you need.

**Aboriginal Resources**

**Aboriginal Pregnancy and Alcohol Brochure**
Information on alcohol and pregnancy. It includes the effects of drinking, traditional teachings about pregnancy and where to get help in Ontario.

[www.beststart.org/resources/alc_reduction/FASD_Brochure_A20A.pdf](http://www.beststart.org/resources/alc_reduction/FASD_Brochure_A20A.pdf)

**Be Safe: Have an Alcohol-free Pregnancy – Printer-ready Handouts**
Find information and tips for expectant parents about alcohol use in pregnancy.

Available in English, French, Cree and Ojibway.

[www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources](http://www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources)

**Breastfeeding for the Health and Future of Our Nation**
Aboriginal women will find information about the art of breastfeeding.
Available in Cree and Ojibway.

[www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources](http://www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources)

**Beginning Journey: First Nations Pregnancy Resource**
A prenatal book to help First Nations women to prepare for pregnancy, to have a healthy pregnancy and to welcome a new life into their family.


**Sacred Tobacco, Sacred Children – Video**
It offers real stories from Aboriginal families who have smoke-free homes.

[www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources](http://www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources)
Sacred Tobacco, Sacred Children – Parent Handout
The fact sheet includes information about cultural use of sacred tobacco, recreational use of commercial tobacco, second and third hand smoke and smoke-free homes.
www.beststart.org/resources/tobacco/pdf/SACRED_TOBACCO_FACT_SHEET.pdf

Tobacco Has No Place Here
www.nuquits.gov.nu.ca/

You and your Baby…
www.en.beststart.org/for_parents/are-you-looking-aboriginal-parenting-resources

Abuse

Assaulted Women’s Help Line
Crisis line with help in 150 languages is open 24 hours a day, 7 days a week.
1-866-863-0511

CLEO (Community Legal Education Ontario)
Produces clear, accurate and practical legal information to help people understand and exercise their legal rights.
www.cleo.on.ca

Ontario Women’s Justice Network
Information on getting support and resources in Ontario
http://owjn.org/owjn_2009/getting-support

Shelters
To find a safe place to stay, for counseling or to have information to develop a safety plan for you and your children.
www.sheltersafe.ca

You and Your Baby
Provides a self-assessment questionnaire, strategies and contact information for seeking and getting help.
Alcohol and Drugs

Be Safe: Have an Alcohol-free Pregnancy
Information and tips for expectant parents about alcohol use in pregnancy.
Available in several languages.
www.en.beststart.org/for_parents/are-you-or-your-partner-pregnant

Bilingual Recipe Cards: Mocktails for Mom
Set of recipe cards for delicious non-alcoholic drinks.
www.beststart.org/resources/alc_reduction/LCBO_recipe_cards_bro.pdf

Drug and Alcohol Helpline
Free Health Services Information.
1-800-565-8603 or www.drugandalcoholhelpline.ca

FASD Ontario
www.fasdON.ca

Medications and drugs before and during pregnancy
Information to know before taking any prescription or non-prescription medication, herbal remedy or drug.

Medications and drugs while breastfeeding
Information on what you need to know before taking any prescription or non-prescription medication, natural or herbal remedy, or drug.
https://sogc.org/publications-resources/public-information-pamphlets.html?id=14

Mixing Alcohol and Breastfeeding
To help make an informed choice when it comes to drinking alcohol while breastfeeding.
www.beststart.org/resources/alc_reduction/breastfeed_and_alcohol_bro_A21E.pdf

Risks of Cannabis on Fertility, Pregnancy, Breastfeeding and Parenting
Offers current information about the effects of cannabis.
http://en.beststart.org/for_parents
Breastfeeding

Bilingual Online Ontario Breastfeeding Services
Search for breastfeeding services near you.
www.ontariobreastfeeds.ca

Breastfeeding Hotline
Telehealth Ontario offers 24/7 breastfeeding advice and support service.
1-866-797-0000

Breastfeeding Information for Parents
An interactive breastfeeding course for parents.
www.breastfeedinginfoforparents.ca

Breastfeeding Matters: An Important Guide to Breastfeeding for Women and their Families
This booklet will help women and their families explore breastfeeding from prenatal decisions, learning breastfeeding basics to gaining confidence.
http://en.beststart.org/for_parents

Breastfeeding Your Baby – Magnet
It is a good reminder for nursing mothers on how to assess their infant’s breastfeeding effectiveness during the first three weeks. Available in several languages.
www.en.beststart.org/for_parents

Breastfeeding Your Early Preterm Baby
This booklet supports families who have an early preterm baby born prior to 34 weeks gestation who plan to breastfeed and/or provide breast milk to their baby.
http://en.beststart.org/for_parents/do-you-have-baby-0-12-months

Breastfeeding Your Late Preterm Baby
This booklet supports families who have a late preterm baby born between 34 and 37 weeks gestation and who plan to breastfeed and/or provide breast milk to their baby.
http://en.beststart.org/for_parents/do-you-have-baby-0-12-month

Find a Lactation Consultant
A tool that allows you to search for a practicing lactation consultant who works in either private practice or in clinical settings.

La Leche League Canada
Breastfeeding support.
1-800-665-4324 or www.lllc.ca
My Breastfeeding Guide
Answers breastfeeding questions you may have as an expectant parent or as a new parent.
http://en.beststart.org/for_parents

Breastfeeding Videos:
www.youtube.com/watch?v=Oh-nnTps1Ls
www.breastfeedinginc.ca/informations/breast-compression

Breastfeeding apps:
• Breastfeeding Solutions
  www.nancymohrbacher.com/app-support/
• Mom and Baby to Be
• WYNI – When You Need It: Breastfeeding Information

Child Safety

Install a child car seat
The Ontario Ministry of Transportation web site provides information on how to correctly install a child car seat, booster seats and seatbelts to help protect children from serious injury.

Is Your Child Safe? Series
Health Canada information on keeping young children safe from health and safety hazards.

Keep Kids Safe
Transport Canada information to keep your kids as safe as possible in your car, mini-van or pickup truck.

Parachute
Parachute provides a number of injury prevention resources available free to download.
www.parachutecanada.org/resources
Community Resources

211 Ontario
Find programs and services in your area. Open 24 hours a day, 7 days a week, in over 100 languages.
www.211ontario.ca

Canadian Association of Family Resource Programs
Resources and links for community organizations and newcomer families.
www.frp.ca

Canada Prenatal Nutrition Program (CPNP)
Search for a program for pregnant women near you.
www.cpnp-pcnp.phac-aspc.gc.ca/

Local public health unit
Find the nearest health unit. Ask about prenatal and postnatal programs and services near you. 1-800-267-8097 or www.health.gov.on.ca/en/common/system/services/phu/locations.aspx

EarlyON child and family centre
Find free drop-in programs for children from birth to 6 years old. You can learn and play with your child, meet people or get advice.
www.ontario.ca/page/find-earlyon-child-and-family-centre

Fathers and Partners

Dad Central Ontario
Information for dads.
www.dadcentral.ca/dads

Daddy and Me On the Move
Find activities that fathers can do with their children.
www.beststart.org/resources/hlthy_child_dev/BSRC_Daddy_and_Me_EN.pdf

Men’s Depression
This website shares the things most commonly said in conversations and the content here can help to recognize men’s depression.
www.mensdepressionhelpyourself.ubc.ca

The right time. The right reasons: Dads talk about reducing and quitting smoking
Information for partners.

24HR Cribside Assistance
A site developed by fathers for fathers. Answers basic questions about babies, new moms and new dads.
www.newdadmanual.ca
Growth and Development

Baby Wants
A booklet to encourage parents to do simple things to help develop their young child: playing, reading, singing, etc. Available in several languages.
www.en.beststart.org/for_parents/do-you-have-baby-0-12-months

Is my Child Growing Well?
Information on child’s growth.

My Child and I – Attachment for Life
To help you understand the principles of attachment and learn ways to promote it. Available in several languages.
www.en.beststart.org/for_parents/do-you-have-baby-0-12-months

Nipissing District Developmental Screen (ndds)
Find information on child’s development and suggested activities from birth to age 6.
www.ndds.ca/ontario

Tips for Parents – Brain Development
View a series of 15 lists of tips for parents on topics associated with brain development.
www.en.beststart.org/resources-and-research/tips-parents-brain-development

Health Care Providers

Association of Ontario Doulas (AOD)
Information about doulas, and directory of doulas.
www.ontariodoulas.org

Association of Ontario Midwives
Information about midwifery services in Ontario.
1-866-418-3773 or www.aom.on.ca

Public Health Units
Get information about healthy life-styles, immunization, healthy growth and development, parenting education, health education for all age groups and selected screening services. Find the closest health unit in your area.

Find a family doctor or nurse practitioner
To find or change a family doctor or nurse practitioner visit Health Care Connect.
www.ontario.ca/page/find-family-doctor-or-nurse-practitioner

Telehealth Ontario
A free Ontario Government phone service to get health advice from a nurse.
1-866-797-0000
Healthy Eating

Canada Prenatal Nutrition Program (CPNP)
Community-based services provide food, nutrition information, support, education, referral, and counselling on health issues.

Drugs and Health Products
Information about natural health products.

Eating Well with Canada’s Food Guide
Get information on healthy eating.
www.hc-sc.gc.ca/fn-an/food-guide-aliment/index_e.html

Food safety for pregnant women
Offers helpful advice on how to reduce your risk of food poisoning.

Healthy Eating for a Healthy Baby
Provides information for pregnant women on nutrition in pregnancy. Available in several languages.
www.en.beststart.org/for_parents/are-you-or-your-partner-pregnant

Pregnancy and Breastfeeding
Following Canada’s Food Guide can help women eat the amount and type of food that is right for her and her baby.
**Labour and Birth**

**Healthy Birth Practices**
The Lamaze Healthy Birth Practices are designed to help simplify your birth process with a natural approach that helps alleviate your fears and manage pain.

[www.lamaze.org/healthybirthpractices](http://www.lamaze.org/healthybirthpractices)

**Normal, Healthy Childbirth for Women & Families: What You Need to Know**
A woman’s guide to understanding normal, healthy birth and how it can improve the health of her baby and her health.


**Pathway to a Healthy Birth**
Information about birth hormones and their job of guiding you and your baby on the path to a healthy birth.


**Preterm Labour Signs & Symptoms Brochure**
Provides critical information on how to recognize preterm labour signs and symptoms and when to seek help. Available in several languages.

[www.en.beststart.org/for_parents/are-you-or-your-partner-pregnant](http://www.en.beststart.org/for_parents/are-you-or-your-partner-pregnant)

**Mental Health**

**Managing Depression – A Self-help Skills Resource for Women Living With Depression During Pregnancy, After Delivery and Beyond**
A workbook with information about depression and tips for a healthy lifestyle and for managing depression.


**Pregnancy Is Not Always What You Expect**
A booklet about strategies to help women take care of their mental health before and during pregnancy.


**Postpartum Depression**
Offers information on understanding postpartum depression.

[www.cmha.ca/mental_health/postpartum-depression](http://www.cmha.ca/mental_health/postpartum-depression/)
Newborn care

Infancy (Birth – two years of age)
Find information to help your child with the best possible start in life.

Early Childhood Tooth Decay
Tips from the Canadian Dental Association on oral health and preventing tooth decay.

OMama
A website and mobile app for women and families. Information about pregnancy, birth and early parenting.
www.omama.com

Parents
Online fact sheets and resources about parenting from the Canadian Child Care Federation.
www.qualitychildcarecanada.ca

Sleep Well, Sleep Safe
Information on healthy sleep tips for infants and for parents. It also provides information on how to reduce the risks of Sudden Infant Death Syndrome (SIDS) and other sleep related causes of infant death.
http://en.beststart.org/for_parents

Safe Sleep
Information about SIDS and safe infant sleep environments.
www.publichealth.gc.ca/safesleep and

The Period of Purple Crying (National Center on Shaken Baby Syndrome)
Find information on preventing shaken baby syndrome and how to calm an infant.
www.purplescrying.info/#sthash.DPDZ1Gpo.dpuf

Your newborn: Bringing baby home from the hospital
Find answers to questions you may have about bringing your baby home.
www.caringforkids.cps.ca/handouts/bringing_baby_home
Newcomers to Canada

Canadian Association of Family Resource Programs
Offers resources, information and links for immigrant families.
www.welcomehere.ca

Giving Birth in a New Land – A guide for women new to Canada and their families
Find information for newcomer women who are pregnant and expect to deliver their baby in Ontario. The booklet has information on local practices related to the prenatal and postnatal period, as well as services and resources available. The booklets are available in several languages.
www.en.beststart.org/for_parents/are-you-or-your-partner-pregnant

Settlement.org
For newcomers to find answers to common questions about their new home.
www.settlement.org

Physical Activity

Active Pregnancy – booklet
Guidelines to ensure pregnant women are exercising safely.
www.niagararegion.ca/living/health_wellness/workplace/pdf/PARC-ActivePregnancy.pdf

Active Pregnancy – guidelines
A list of guidelines to follow before starting physical activity.
www.ophea.net/sites/default/files/archive/resource/2010/05/parc_activepregnancyresourcefinal_14se09_pdf_14027.pdf

Exercises and Pregnancy Lab – Western Health Sciences
Information for expectant mothers to achieve healthy pregnancies.
www.uwo.ca/fhs/EPL/resources/index.html

Move for Two
Easy to follow DVD that answers many questions about how to be active in a safe and healthy way during pregnancy.
www.healthunit.com/physical-activity-pregnancy

PARmed-X for PREGNANCY
A guideline for health screening prior to participation in a prenatal fitness class or other exercise.
Pregnancy

Due Date Calculator
To estimate when your baby will be born.
www.pregnancyinfo.ca/your-pregnancy/healthy-pregnancy/due-date-calculator/

Healthy Pregnancy
The Public Health Agency of Canada’s website provides information about healthy pregnancy.
www.healthycanadians.gc.ca/hp-gs/index_e.html

Nausea and Vomiting in Pregnancy
A few tips for managing nausea and vomiting.
www.pregnancyinfo.ca/your-pregnancy/healthy-pregnancy/nausea-and-vomiting/

Maternity and Parenting Leaves
Information on length of maternity, parental, and adoption leave.
www.servicecanada.gc.ca/eng/sc/el/benefits/maternityparental.shtml

Multiple Births Canada
Support, education, research, and advocacy about multiple births.
1-866-228-8824 or www.multiplebirthscanada.org

OMama
A website and mobile app for women and families. Information about pregnancy, birth and early parenting.
www.omama.com

The Sensible Guide to a HEALTHY PREGNANCY
A guide to help you to make good decisions about how to take care of yourself before, during and after your pregnancy.

Your journey starts here
Information about pregnancy and childbirth from The Society of Obstetricians and Gynaecologists of Canada (SOGC).
www.pregnancyinfo.ca

Women’s Health Matters – Pregnancy
To help you learn about what to expect during the months of your pregnancy.
www.womenshealthmatters.ca/health-centres/sexual-health/pregnancy
Smoking Cessation

Couples and Smoking – What You Need to Know When You are Pregnant
www.thiswaytoahealthybaby.com/wp-content/uploads/2013/01/CouplesAndSmoking1-2010-UBC.pdf

Exposure to second-hand smoke during pregnancy

Information on Second and Third-Hand Smoke
www.beststart.org/resources/tobacco/pdf/tobacco_handout_eng_FINAL.pdf

Make your home and car smoke-free: A guide to protecting your family from second-hand smoke

PREGNETS
Find several resources: Smoking During Pregnancy; Smoking After Giving Birth; Second Hand Smoke; Statistics and Facts; Stressors; Cues; Partner Support; Nutrition; Exercise Common Questions; Dealing with Cravings; How to Talk to your Health Care Provider.
www.pregnets.org/mothers/DuringPregnancy.aspx

Smoker’s Helpline
Offers specialized services for pregnant women.
1-877-513-3333 or www.smokershelpline.ca
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www.beststart.org

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