

Beginning Journey: First Nations Pregnancy Resource

best start
meilleur départ

by/par health **nexus** santé

Important Information and Phone Numbers

My Name:

My Phone:

My Health Care Provider

Name:

Phone:

Close Friend:

Name:

Phone:

My Hospital:

Name:

Phone:

Labour Support Person:

Name:

Phone:

Partner or Family Member:

Name:

Phone:

Public Health Nurse:

Name:

Phone:

Emergency

(Fire / Police / Ambulance):

911

Talk4Healing : A culturally grounded fully confidential HELPLINE for Indigenous women in Ontario available in 14 languages 1-855-554-HEAL

Telehealth Ontario

(24 hours a day, 7 days per week):

1-866-797-0000

24/7 anonymous online support for your mental health with trained counsellors, peers, self-help programs:

otn.ca/bigwhitewall

A Message to Pregnant Women, their Families and Communities

boozhoo! aaniin! tansi! se:koh! tawnshi! Hello! Bonjour!

Pregnancy is a special time. It can be a time of joy and celebration. It can also be a time of uncertainty filled with many questions. It is a time of many changes – there is a lot to learn.

Remember that there are people who can help.

This book has information to support and help you prepare for pregnancy, have a healthy pregnancy, and to welcome a new life into your family. It shares cultural knowledge from Elders, community members, and First Nations care givers. It also provides medical information. At the end of each chapter there is a page where you can make notes about your pregnancy and about your thoughts and plans.

The book includes teachings from First Nations in Ontario. As you know, traditions and teachings vary by Nation and sometimes by community. You can learn about your traditions from Elders in your community.

You may live in a remote community, in an urban setting, on-reserve or off-reserve. Since First Nations women in Ontario live in many different situations, a variety of information is provided, for example there is information about travelling to another community to give birth. Some information will be helpful to you, and some may not apply to you.

You may already know some of the information in this book. Other information may be new to you. We hope you find this book useful on your journey of new beginnings.

Note: This book has information for people with healthy pregnancies. If you have health problems, your health care provider may give you additional or different health advice. Some healthy pregnancies, such as carrying more than one baby, also mean different health advice. The information in this book does not replace the advice of a health care



You and Your Baby

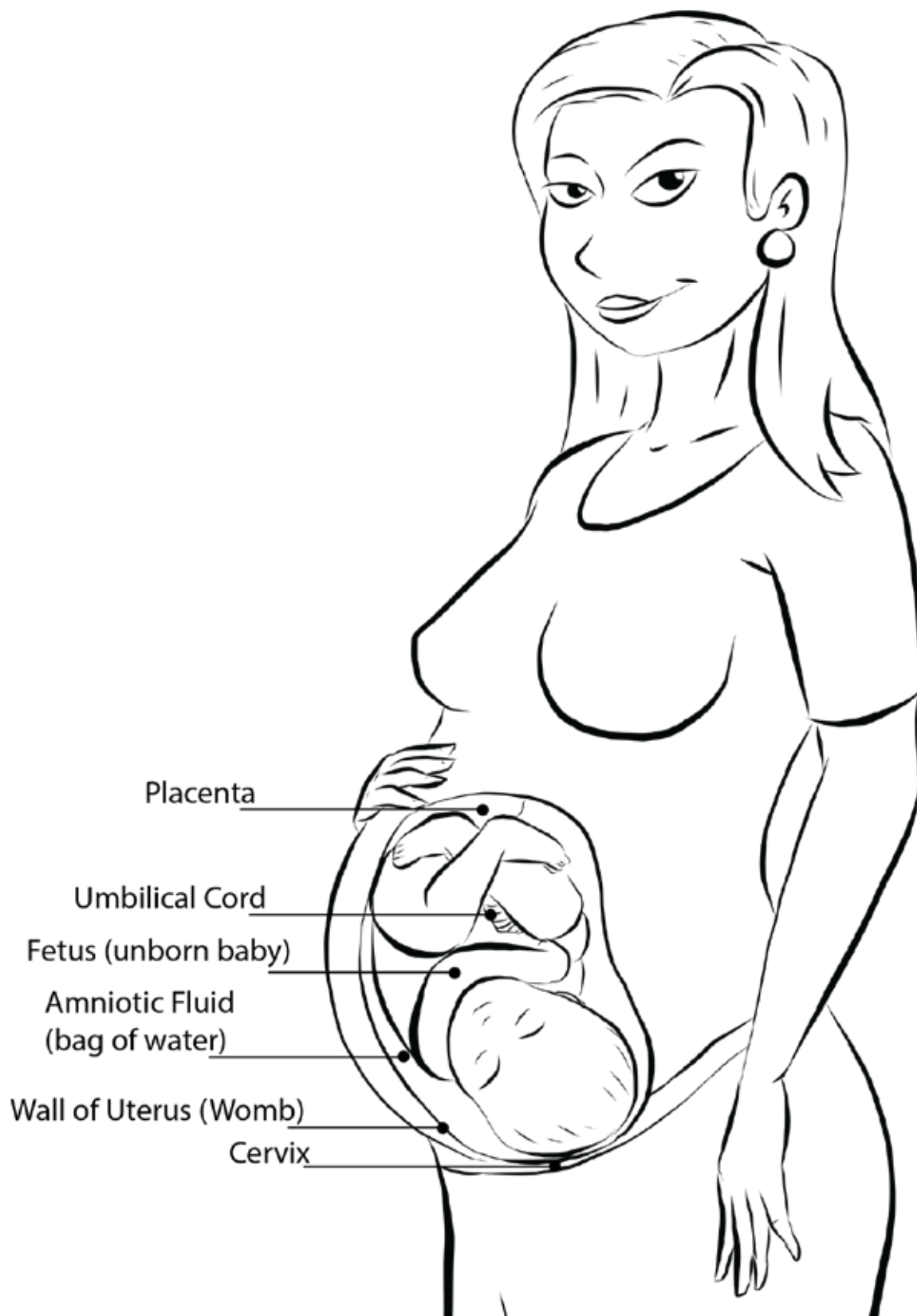


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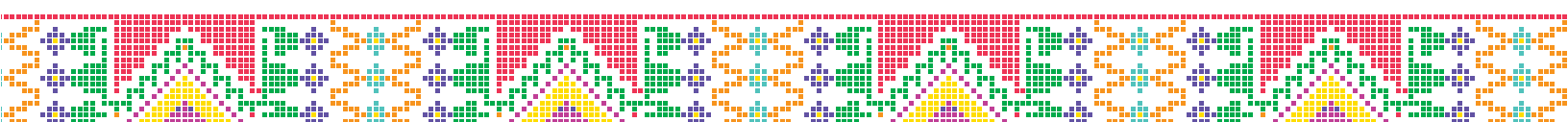


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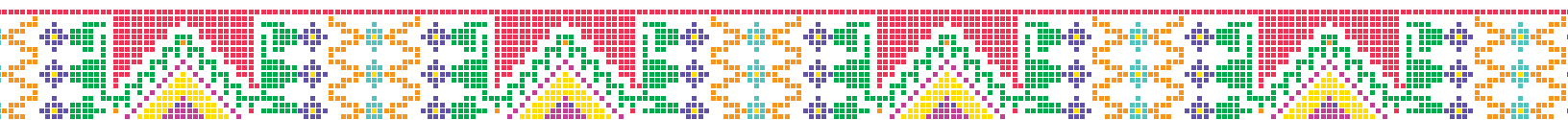
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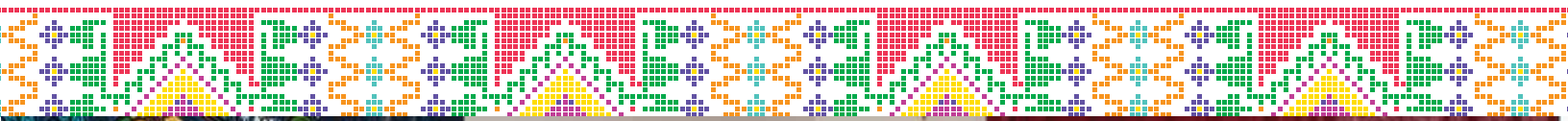
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1. Teachings and Customs



1. Teachings and Customs

Introduction

This book is for people of First Nations background who are pregnant or planning a pregnancy. It has cultural stories and information in each chapter. In addition, there is information in this chapter about teachings and customs related to pregnancy.

Bringing Culture Into My Life

Some people haven't received traditional teachings or knowledge. One woman explained, "It's a real shame that I haven't received teachings. I'm Ojibwa. I'm on a journey of bringing the Ojibwa culture into my life as well as my daughter's."



Teachings

Each community has its own teachings and customs about women, pregnancy, and childbirth. The knowledge keepers, Elders, grandmothers, and grandfathers, may have this information. Many people find learning about these traditions and cultural teachings comforting and helpful during pregnancy. Talk to people you trust and who make you feel comfortable, about the knowledge in your community.

Building a Bond

There is not just one thing that is done to create a mother/baby bond, but rather a series of teachings that begin from adolescence. For instance, there is a rite of passage for young girls where they choose to give up something for a year (i.e. I know someone who gave up raspberries for a year), which has to do with being able to sacrifice, so that when these young girls grow up they are able to put their babies first. There is another that says expectant women should not stand in a doorway, but rather on one side or the other. Another belief says that if you plan to do something, follow through, rather than changing your mind and turning around, for fear that labour will not progress.

I suppose our teachings are more about compromise and building a bond by creating the most ideal environment for baby while they are inside. So it's more about learning to nurture, and this bond starts early.

Here are some teachings that you may hear:

- Have a good mind. Be peaceful. This will help your baby to be calm. There is help available to achieve this.
- Sing songs, tell stories, and talk to your baby. Your baby will feel your love.
- Caress your belly. Your baby will sense your touch.
- Food is medicine. Eat well to help your baby grow strong. Cravings are normal. It is fine to eat less healthy food or sweet things sometimes. Be careful not to eat too many of these foods to make sure you and your baby get the nutrients you need.
- Keep your body strong. Get up early. Exercise and stay active.
- Get plenty of rest. This is good for you and your baby.
- Attend ceremonies that are safe. This will introduce your baby to community customs.
- Stand near the drum. Your baby will hear the heartbeat of Mother Earth and hear the songs.



Knowledge Carriers

You have to find those people who are knowledge carriers. There may be a knowledge carrier in your family or community. If you are living in an urban setting there are many resources available. Aboriginal organizations such as Friendship Centres, Aboriginal Health Access Centres, etc. may be able to connect you to a knowledge keeper.

For information and support



www.children.gov.on.ca/htdocs/English/topics/earlychildhood/health/index.aspx

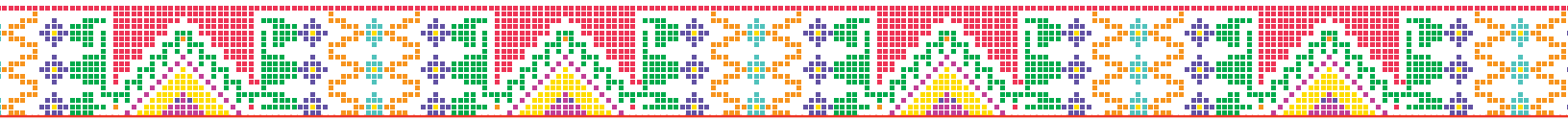
National Council of Aboriginal Midwives
1-514-807-3668 (choose language then press
6 in main menu)
www.indigenousmidwifery.ca

Ontario Federation of Indian Friendship Centres

www.ofifc.org



1-800-267-0077



My Notes about Teachings and Customs

Think about writing your thoughts on teachings and customs on this page. Or you can ask someone to write down information for you.

Whether you are a traditional person, or wanting to learn about teachings and customs, you may have questions for the knowledge keepers at this time. Here are some questions you might have if you are pregnant or a new parent:

- *In my culture, are there things I should do or not do during pregnancy?*
- *Does my community have ceremonies for when a baby is born and when a baby is named?*
- *Are there traditional medicines that are helpful during pregnancy?*

Questions I want to ask:

I plan to learn more by:

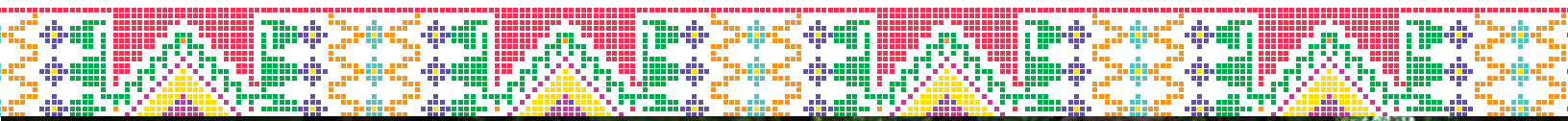


My parents passed along the following teachings and beliefs to me:

These are teachings and beliefs I want to pass on to my child:

My notes about teachings and customs for my growing family:

2. Support People Before & During Your Pregnancy



2. Support People Before & During Your Pregnancy

Introduction

Pregnancy brings many changes to your life. It can be a time of joy and happiness. Some say that they feel strongest when they are pregnant. It can also be a time when you might need information and support.



Think about people who can give you support during this time. It is important to have someone to talk to and share feelings with. A partner, family, and friends can give much needed support, especially if you are trying to make changes during pregnancy. You may want to speak to someone who can give you spiritual guidance. Knowledge keepers and/or Elders can provide cultural teachings related to pregnancy and parenthood. A counsellor can help you address past negative experiences, for example, how you were parented and what it was like growing up. Pregnancy is an emotional time and counseling can help. Health care providers like nurses, midwives, and doctors are there to help you have a healthy pregnancy. See a health care provider before becoming pregnant, or as soon as you think you are pregnant. They can help you to learn how to stay healthy. It is okay to take a friend with you if you do not know the person you are meeting with, whether that is an Elder, counsellor, or care provider, if that means greater comfort and safety for you.

Male Partners

In some indigenous cultures male partners were also considered pregnant. Those men could not go hunting just as the women were not to go hunting--not to take a life, while connected to a new-life-to-come.

Remember that not everyone is able to give you the kind of support you may need (see page 40). Connect with people you trust and who make you feel good about yourself.



Fathers, Partners and Family

If your partner or a family member is pregnant, there is a lot you can do during the pregnancy:

- Ask how you can help.
- Go to the health care provider appointments.
- Join in on the prenatal classes.
- Learn about pregnancy and birth.
- Talk about parenting.
- Talk about breast feeding. Breast milk is the healthiest food for babies.
- Help your loved one quit smoking. The baby will be healthier if you quit too.
- Help your loved one to stop drinking alcohol. Alcohol is very dangerous to the baby. Don't drink around pregnant people.
- Encourage an active pregnancy. Go for a walk with your loved one.
- Understand that pregnant people feel moody at times. Learning to cope with this helps to be ready for the rapidly changing moods of the newborn.
- Help your loved one rest when tired.
- Change the cat litter box (see page 38).
- Carry things that are too heavy.
- Understand that interest in sex may change during pregnancy. Talk about and explore other ways to feel close.
- Learn how to take care of a new baby.
- Think about the things the baby will need.
- Help to get the home ready for the baby.

Support from Elders

Elder's knowledge is important and very much real. I've had wonderful Elders help us with loss, joy, and celebration of culture.

Sometimes, support is difficult to find

My family is still figuring out what we need in terms of support as a queer/lesbian Aboriginal family...

For information and support

Dad Central

Online information for fathers

www.dadcentral.ca and www.newdadmanual.ca/manual.php?SectionID=9&Article=25

LGBTQ2S Parenting - Rainbow Health

Promotes the rights and well-being of lesbian, two-spirited, gay, bisexual, trans, and queer people and can help to recommend LGBTQ2S supportive care providers.

1-416-324-4100 (press 9) or email info@rainbowhealthontario.ca
www.rainbowhealthontario.ca

With Dad: Strengthening the Circle of Care

Online multi-media information about Aboriginal fatherhood.

https://www.nccah-ccnsa.ca/495/With_Dad__Strengthening_the_Circle_of_Care_.nccah?id=43

Programs for Pregnancy

In your community, there may be free group programs for pregnant people. They may offer information, food, and a chance to meet other folks who are expecting. To find out about programs in your community, call your local public health department, or 1-800-267-8097, or visit [http:// www.health.gov.on.ca/en/common/system/services/phu/locations.aspx](http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx)

Childbirth Classes

Your local public health unit, hospital, or health centre may offer pregnancy and childbirth classes. Ask about the costs and what will be taught in the classes. Some classes are free. Others are not. The classes may provide information about a healthy pregnancy, birth, and becoming a parent.

Pregnancy Support Programs

There are many different types of drop-in programs for new parents, and for those who are pregnant. They offer information and time to talk with other pregnant women or new parents. Some provide food. In most cases, they are free.

Support at Home

Some programs provide help in your home. Usually this is free. Aboriginal Healthy Babies Healthy Children helps families so that children have a healthy start. This program offers information to those who are pregnant and new parents. A nurse or lay home visitor may go to your home if you need extra help.



Connecting

In the past, pregnancy was not centered around the individual, it permitted interconnectedness. Other people are responsible for the health and support of the pregnant people too.



For information and support

Aboriginal Healthy Babies Healthy Children

Information for all parents, and additional support for parents who need it. Call Service Ontario for more info:

1-800-267-8097 or

www.children.gov.on.ca/htdocs/English/topics/earlychildhood/health/index.aspx

Canada Prenatal Nutrition Program (CPNP)

Services provide food, nutrition information, support, education, referral, and counselling on health issues.

www.canada.ca/en/public-health/services/health-promotion/childhood-adolescence/programs-initiatives/canada-prenatal-nutrition-program-cpnp.html

Ontario Federation of Indian Friendship Centres

www.ofifc.org

Your Local Public Health Department

Public health nurses provide information and support. Call Service Ontario for more info:

1-800-267- 8097 or

<http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx>

Health Care Providers

It is important to see a health care provider regularly during pregnancy. In Ontario, midwives (Aboriginal Midwives or Registered Midwives), family doctors, and obstetricians deliver babies. Nurse practitioners and registered nurses provide prenatal care in some communities. All health care providers help women have healthy and safe pregnancies and births. Your baby may be delivered at home, in a hospital or in a birthing centre.

Consider:

- Are they easy to talk to?
- Do you feel comfortable?
- Do they understand and respect your cultural needs? For example, caring for the placenta after birth?
- Do they understand and respect the kind of childbirth you want? For example, you may want a natural childbirth.
- Do they listen to you and answer your questions?
- Can you get to their office easily?
- Will they also deliver your baby?
- Will they provide care for your baby?

Midwives

Registered midwives provide care to women who have a healthy pregnancy. Midwives provide support to women during pregnancy, deliver the baby, and provide care to the woman and her baby until 6 weeks or sometimes more after the birth. Some midwives work with doctors or obstetricians for higher risk pregnancies. Midwives deliver in home or hospital. If you want to find a midwife, call early in your pregnancy.

1-866-418-3773

www.ontariomidwives.ca

Aboriginal Midwives

Aboriginal midwives are trained in both western and indigenous approaches to childbirth. Some Aboriginal midwives are also registered midwives.

National Aboriginal Council of Midwives

1-514-807-3668 (choose language then press 6) or www.indigenousmidwifery.ca

Six Nations of the Grand River Aboriginal Midwives

www.snhs.ca/bcBackground.htm

1-866-446-4922

Nurse Practitioners

Nurse practitioners are registered nurses who have extra training. They provide health care services for women in pregnancy and after the baby is born. They do not deliver babies.

1-800-445-1822

<http://npao.org/resources/find-a-nurse-practitioner/>

Family Doctors

Family doctors may care for pregnant women and deliver babies. Some family doctors only care for pregnant women but don't deliver babies. Ask your family doctor what type of care they provide.

For help in finding a doctor, contact:

Ontario's Health Care Connect at

1-800-445-1822

www.health.gov.on.ca/en/ms/healthcareconnect/public/





College of Physicians and Surgeons of Ontario at

1-800-268-7096

www.cpso.on.ca/docsearch/

Obstetricians

Obstetricians are trained doctors with a specialty in pregnancy and childbirth. Your family doctor or nurse practitioner can help you find an obstetrician or you can contact Ontario's Health Care Connect at:

1-800-445-1822

www.health.gov.on.ca/en/ms/healthcareconnect/public/

Doula Services

Doulas help women in labour and childbirth. They may also help after the baby is born by coming to your home. Doulas are not trained to provide medical care, or deliver babies.

1-888-788-3662

auntiesontheroad.ca or www.dona.org/contact.php or www.ontariodoulas.org/

Prenatal Visits

When you see your health care provider during pregnancy, this is called a prenatal visit. This is your pregnancy and you have the right to ask questions. Pregnant people often make a list of questions or topics they would like to talk about. Make an appointment with your health care provider as soon as you know you are pregnant.

Here is a list of things your health care provider might do during a prenatal visit:

- Ask about your health before you were pregnant and during your pregnancy.
- Give you a physical examination.
- Check your weight, blood pressure, and listen to your baby's heart.
- Schedule lab tests for your blood and urine.
- Measure the growth of your womb (uterus).
- Discuss what you can do to have a healthy baby.
- Answer your questions.
- Schedule an ultrasound.
- Discuss genetic testing.
- Give you information about programs for pregnant people, partners, and family members.
- Talk to you about where you plan to give birth.
- Let you know if/when you need to travel to another community to give birth.

Someone Who Understands

Find someone who understands. Talk a lot with your care provider. Find people who understand your needs, who you are, and what you want.

My Notes about Support People for My Pregnancy

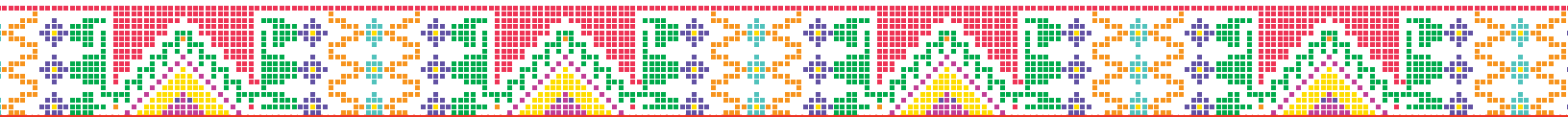
**Think about writing your thoughts on support people for your pregnancy on this page.
Or you can ask someone to write down information for you.**

Things I could use help with during pregnancy:

People I can go to for information, help and support (Partner/father, family, friends):

Pregnancy support programs:

Prenatal classes:



In-home support:

Knowledge keepers or Elders:

Health care providers:

Counsellors:

Other support people:

My notes about support people for my pregnancy:

[illegible]

3. Getting Healthy Before & During Your Pregnancy



3. Getting Healthy Before & During your Pregnancy

Introduction

This chapter has information to help you make healthy changes for the healthiest pregnancy possible. There are many things you can start doing before pregnancy, and during pregnancy, towards helping have a healthy baby.

Some people planned their pregnancy and others did not expect to be pregnant. The sooner health changes are made, the better for you and your baby. Talk to your health care provider if you are planning a pregnancy. If this is not possible, talk to your health care provider as early as possible in your pregnancy. The information in this chapter will help you make healthy changes for you and your baby.

Healthy Changes

Make healthy and positive changes whenever you can. You are doing the right thing for you and your future children.

Preparing for Pregnancy

Getting ready for pregnancy, being pregnant and giving birth involves physical, emotional, spiritual and mental/intellectual changes. There are things you can do to prepare yourself, in each of these areas.

Physically

- Eat healthy food and keep active. This will help you be strong. Before getting pregnant take a multivitamin containing folic acid every day. Once you are pregnant, switch to a daily multivitamin that has 0.4 mg of folic acid and 16 to 20 mg of iron. This helps your baby's brain and spine grow well.
- Let your health care provider know if you are planning a pregnancy, and when you think you are pregnant. They can share information that will help your physical health.
- Avoid smoking and second hand smoke, drinking alcohol, and using drugs before getting pregnant and during pregnancy. Knowledge keepers have said that this cleanses the body to put you and your baby's spirit in a good place for the pregnancy.

Emotionally

- Prepare your mind by talking to those you trust. Share your feelings about getting pregnant with people you trust.
- Find out about programs and services in your community that can help you during your pregnancy. There may be other pregnant people to talk with at the programs.
- Get information about pregnancy so you can have a strong mind to help you to stay healthy.



Spiritually

- Pregnancy and parenting bring many changes. Some days are full of joy. Other days you may feel anxious. Some people find comfort in exploring their spirituality, as they plan for their journey of new beginnings as a parent. Spirituality can be expressed in many different ways.
- Talk to your partner, family, friends, and people you trust. Talk about how you want to raise your baby. Think about the kind of parent you want to be.
- The knowledge keepers, Elders, grandmothers, and grandfathers have knowledge about customs, traditions, and teachings. They can help you prepare for pregnancy and during pregnancy. Talk to those you trust.

Mentally/Intellectually

- Think about how you will support yourself financially, as well as the children you are planning.
- Learn about yourself and about pregnancy. Talk to wise people. Talk to other people who are expecting. Ask them what you can do to have a healthy pregnancy.
- Talk to your partner and support people about the changes that pregnancy and a new baby will bring. Talk about how you will get ready for parenting.

For information and support

Aboriginal Sexual Health

Information about pregnancy and sexual and reproductive health for Indigenous people.

www.nativeyouthsexualhealth.com

Best Start Resource Centre

Online resources about planning a pregnancy, prenatal and child health.

www.beststart.org

Diabetes Canada

Information about diabetes.

www.diabetes.ca

Due Date Calculator

www.yourduedate.com

Health Before Pregnancy

Information about preparing for pregnancy.

www.healthbeforepregnancy.ca

Men's Information

Online brochure about what men can do before and during pregnancy.

www.beststart.org/resources/preconception/men_health_bro_2012.pdf

[https:// thingsdadsdo.wordpress.com/2012/06/21/aboriginal-fathers/](https://thingsdadsdo.wordpress.com/2012/06/21/aboriginal-fathers/)

www.newdadmanual.ca/manual.php?SectionID=9 (videos)

Public Health Agency of Canada

Information about pregnancy, and planning a pregnancy

www.healthycanadians.gc.ca/hp-gs/index_e.html

The Sensible Guide to a Healthy Pregnancy

<https://www.canada.ca/en/public-health/services/health-promotion/healthy-pregnancy/healthy-pregnancy-guide.html>

Society of Obstetricians and Gynaecologists of Canada

Information about pregnancy, birth control, and sexual health.

www.sogc.org

Your Local Public Health Department

Public health nurses provide information and support. Call Service Ontario

1-800-267-8097

Medicines

Sometimes we need to take medicine to get healthy and to stay healthy. For example, you may take prescription medicine to help with diabetes, or over-the-counter medicine to help with a cough etc. You might also use traditional medicines. Some medicines are safe in pregnancy and some are not. It is best to make needed changes to medicines before getting pregnant.

Tell your health care provider when you are planning a pregnancy, and when you become pregnant. Your health care provider can talk to you about medicines that are safe and not safe in pregnancy. If needed, your health care provider can adjust your prescription medicine to help you have a healthy pregnancy.

You must also be careful about medicines you get without a prescription. This includes herbal products, cough syrup, eye drops, headache and allergy pills, etc. Check with your health care provider or pharmacist before you take any over-the-counter medicines.

If you have any questions about medicines, check with your care provider, health unit, or Telehealth.



Diabetes

Some people have diabetes before they get pregnant. There is also a kind of diabetes that starts during pregnancy (gestational diabetes). Both kinds of diabetes are more common in First Nations people than in the general population. Most people are tested for gestational diabetes during pregnancy. If you have diabetes or gestational diabetes, there are things you can do during pregnancy to help you and your baby be as healthy as possible. Talk to your health care provider to learn more.

Traditional Medicine

If you are using traditional medicine (teas, herbs etc.), find out more. Some are considered helpful during pregnancy. Others are not safe in pregnancy. Talk to your doctor, midwife or community health nurse about the traditional medicine that you use.

Smoking

Tobacco is considered one of the most sacred of the plant medicines by many First Nations. It is used for prayer and connection to the spirit world. The treatment and use of tobacco as a sacred medicine is carried with respect and gratitude. When offered in traditional ways and ceremonies, such as the birth of a child, the sacred gift of tobacco allows one to connect with the Creator and the spirit world. This provides opportunities for healing, teachings, gratitude, love, health and

protection. Many First Nations families want to ensure the sacred relationship with tobacco is passed on to their children.

Tobacco can be misused through smoking cigarettes, chewing tobacco or snuff. Many First Nations families and Elders believe that misusing tobacco shows a lack of respect for the sacred medicine's spiritual and traditional purposes. Also, cigarette smoke is not healthy for you and your baby.

Care of the Water

The amniotic fluid that the pregnant woman carries is seen as sacred water, the water of life in Anishinaabek culture. As Anishinaabekwe (Anishinaabe women) traditionally we are the caretakers of the water, that is one of our most important roles. This midewaboo or amniotic fluid is essential to the well-being of the developing baby. The pregnant woman takes care of her water by only putting good things into her body—good clean water, good food, good thoughts—as much as is possible in these stressful contemporary times. Her family and the community help her by trying to protect her from stressful situations and negative emotions, work that is too arduous or tiring, and harmful environmental exposures.

In addition, in many Indigenous cultures such as in Anishinaabek and Haundenosaunee cultures, traditionally the man or partner is seen to be pregnant as well as the woman. He must also take care of himself with awareness—watching what he drinks and eats, how he conducts himself—because the spirit of that little one to come is attached to him too and is aware and affected by what he does. That was one of the old teachings. Not only does he have a role to protect and care for the pregnant woman, he needs to care for himself in order to nurture that little spirit that is connected to the developing baby.

By doing so the parents-to-be show the baby that they are prepared to parent that one, that it is okay for that one to come into the world—when it is time. The woman is encouraged not to drink alcohol or smoke and to put good food into her body—but the man should also be abstaining from drinking and smoking and should also be focusing on only healthy ways of living! This is important and makes it easier on the young family when they are dealing with a newborn and have already made healthy changes to their lives.

Smoking during pregnancy may cause your baby to:

- Not get enough food or oxygen.
- Be born too soon or too small.
- Increases the risk of stillbirth during pregnancy or after baby is born. Smoking during pregnancy is one of the greatest risks for Sudden Infant Death Syndrome, or SIDS (see page 106).
- Have health problems or learning problems later in life.

No smoking is best for you and your baby's health. Smoking less can help your baby too. If you are pregnant or planning a pregnancy, ask your health care provider for help to quit or cut back. Ask family and friends not to smoke in your home. Also, ask people not to smoke around you.

For information and support

Aboriginal Tobacco Strategy

Promotes “tobacco wise” Aboriginal communities.

www.tobaccowise.com

Canadian Lung Association

Information about smoking and tobacco, and a phone line for help to quit smoking.

1-888-566-5864

www.lung.ca

On the Road to Quitting Program

Self-help online program to help you quit smoking.

<https://www.canada.ca/en/health-canada/services/publications/healthy-living/road-quitting-guide-becoming-non-smoker.html>

Ontario Ministry of Health website

Tips and resources to help you quit smoking.

www.mhp.gov.on.ca/en/smoke-free/quitting-smoking.asp

PREGNETS

Online information, resources, and support about smoking and pregnancy.

www.pregnets.org

Smoker's Helpline

Support and information about quitting smoking and tobacco use.

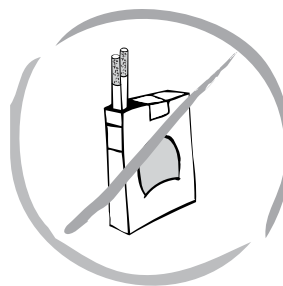
1-877-513-5333

www.smokershelpline.ca

Your Local Public Health Department

Public health nurses provide information and support. Call Service Ontario for locations:

1-800-267-8097



Alcohol

People drink alcohol for many different reasons – to socialize, have fun, due to addiction, to try to cope with difficult life problems, etc. Stopping drinking is easy for some but hard for others. It is okay to ask for help. We all want what's best for our children. Deciding not to drink when you are pregnant is best for you and your baby.



Drinking alcohol during pregnancy can cause permanent birth defects and brain injury to unborn babies. **No amount of alcohol is safe during pregnancy** and there is no safe time to drink during pregnancy. Binge drinking and heavy drinking are especially harmful to unborn babies. It is safest to stop drinking before you get pregnant. Stopping at any time will help your baby.

Strong People

Gather strong people around you so they can pass their strength and knowledge to you.

FASD – Fetal Alcohol Spectrum Disorder

This is the term used to describe the types of harm to an unborn baby caused by alcohol use in pregnancy. These disabilities will not disappear as the child grows. They may include:

- Difficulty learning and remembering
- Difficulty thinking things through
- Difficulty focussing on a task
- Difficulty getting along with other people, including family members
- Difficulty with hearing and with seeing
- Problems with bone, arm, leg and finger growth
- Slow growth overall
- Damage to the heart, kidney and liver

I want to stop but....

For many people, the support of partners, family and friends is all they need to not drink while pregnant. Quitting can be especially hard if you do not have supportive people in your life. Some people need more help in order to stop drinking. Even though they want what's best for their unborn babies, it can be a struggle to avoid alcohol. Remember: You aren't alone and there are places to go for help and support.

For information and support

Alcoholics Anonymous

Help to stay sober.

www.aa.org

National Native Alcohol and Drug Abuse Program Treatment Centre Directory

Information on treatment centres that accept pregnant women.

www.hc-sc.gc.ca/fniah-spnia/substan/ads/nnadap-pnlaada_dir-rep-eng.php

Ontario Drug & Alcohol Helpline

Information about services for drug and alcohol use.

1-800-565-8603

www.drugandalcoholhelpline.ca

Center for Disease Control and Prevention

Information about alcohol use during pregnancy.

www.cdc.gov/ncbddd/fasd/alcohol-use.html

Other Substances

Most pregnant women who use harmful substances (such as street drugs, solvents, or prescription medicines that were not meant for them) want to stop or use less. Many of these substances are harmful to you and your unborn baby. It is best to make changes before getting pregnant – but it is never too late to make healthy changes. Talk to family members and service providers that you trust.



Talk to your health care provider about ways to stop or cut back. There are many people, services, and programs to help.



Being Mindful

Think about the things you are putting into your body. Be mindful of your body and the decisions you make.

For information and support

All Addictions Anonymous

Help with any addictive behavior.

1-416-468-8603

www.alladdictionsanonymous.org

Cocaine Anonymous of Southern Ontario

Help to stay free from cocaine and other substances.

1-866-622-4636 (1-866-6-CA-INFO)

www.ca-on.org

Ontario Drug & Alcohol Helpline

Information about services for drug and alcohol use.

1-866-531-2600

www.connexontario.ca

Healthy Eating

Eating healthy is important for you and your growing baby. Eat as healthy as you can when you are planning a pregnancy and during pregnancy. Eat a variety of foods from the food groupings – vegetables and fruit, whole grains and protein foods. Make water your drink of choice. Limit processed foods high in salt, sugar or saturated fat. It is normal to gain weight in pregnancy. Your health care provider will talk to you about weight gain in pregnancy.

If you are thirsty, drink safe clean water. If you have concerns about the safety of your water, talk to your public health nurse or Public Health Ontario at 1-866-532-3161.

Ontario Groundwater Association

<http://www.ogwa.ca/>

How much should you eat every day?

Eat healthy food every day. Choose food with the assistance of the Canada Food Guide

www.Canada.ca/FoodGuide

Learning about healthy food

Community health and prenatal programs are a good place to get information about food and healthy pregnancy. They can help you find information on questions you have about food and nutrient needs. They may also be able to direct you to programs that teach about cooking or to help access food and prenatal vitamins. See page 35.



Healthy Eating Tips

- Talk to your health care provider about taking a multivitamin with folic acid and iron. Prenatal vitamins are covered through NIHB.
- If you don't drink cow's milk, there are many other ways to get calcium. Some Indigenous people are lactose intolerant and need other sources. There are other sources of calcium like unsweetened fortified soy, rice or almond beverages, firm tofu, beans and canned salmon (with bones).
- The best drinks are water and lower-fat milk or milk alternatives such as unsweetened, fortified rice, almond or soy beverage. Juice is high in sugars. Limit juice to small amounts. It is recommended to replace juice with water.
- Coffee, tea, pop, and energy drinks may have caffeine in them. Keep your baby safe by having no more than 300 mg of caffeine a day, which is about two cups of coffee. Energy drinks are not recommended during pregnancy.
- Be careful if you use herbal teas or drinks. The safety of all herbal teas and drinks during pregnancy has not been tested. Talk to your health care provider about the safe use of herbal teas or drinks.
- Processed foods like chips, canned soups or meals, frozen meals and store-bought baked foods contain a lot of salt, sugar or fat. It is best to limit these foods. Eat more fresh foods and cook more at home. This allows you to control the ingredients in your foods
- Avoid unpasteurized dairy products, fruit juice and cider. Always choose pasteurized products or heat unpasteurized products thoroughly.
- Choose pasteurized cheeses like cheese curds, cheddar and cottage cheese. Avoid soft and semi-soft cheeses like Brie, Havarti and Camembert as well as blue-veined cheeses.
- Ensure eggs and egg dishes are well cooked. Cook eggs until the yolk is firm. Avoid raw or lightly cooked eggs found in some salad dressings, dough, sauces or drinks.
- Fish liver oil is not safe during pregnancy.
- Some fish can be high in mercury. For more information, contact the **Ontario Ministry of Environment Sport Fish Contaminant Monitoring Program** at 1-800-820-2716 or www.ontario.ca/environment-and-energy/eating-ontario-fish
- Avoid raw seafood, raw oysters, clams or mussels and refrigerated smoked seafood. Instead, choose fully cooked fish and seafood, canned smoked seafood or packaged seafood that does not need to be refrigerated until it is opened.
- Bean sprouts and alfalfa sprouts should be cooked before eating.

For more information about safe foods and safe food handling during pregnancy, go to: <https://www.canada.ca/content/dam/canada/health-canada/migration/healthy-canadians/alt/pdf/eating-nutrition/healthy-eating-saine-alimentation/safety-salubrite/vulnerable-populations/pregnant-enceintes-eng.pdf>

How Healthy Food Helps Your Baby

Energy stored as fat

Your body needs more muscle and fat to help you stay healthy during pregnancy.

Blood

While you are pregnant your body makes more blood. This helps to bring food and air to your baby.

Breasts

Your breasts increase in size to prepare for feeding your baby.

Placenta

The placenta forms during pregnancy to help pass nutrients from you to your baby. Waste from the baby passes to you through the placenta.

Baby

Uterus

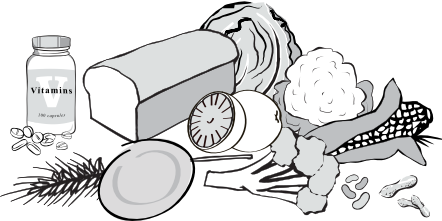


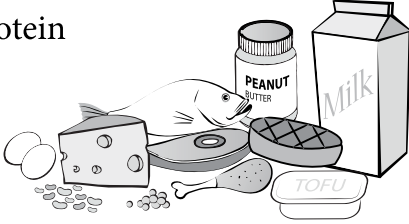
Your womb (uterus) gets about 20 times bigger to hold your growing baby.

Amniotic Fluid

This is the water that surrounds the baby. The baby floats and grows inside the bag of water (amniotic sac) which contains this fluid.



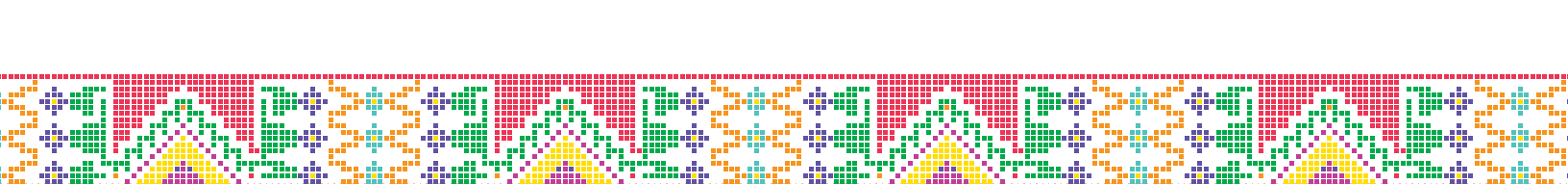
Here is a list of nutrients that will help you have a healthy pregnancy:

Name of nutrient	Foods that contain this nutrient & why it's important
<p>Folic Acid/Folate</p> 	<p>This helps the brain and spine grow, especially during the first few weeks of your pregnancy. Some good sources of folate are:</p> <ul style="list-style-type: none">• Dark green vegetables like spinach, wild greens, asparagus, romaine lettuce, or broccoli• Grain products like bread and pasta made with enriched flour• Beans, chickpeas, and sunflower seeds <p>Talk to your health care provider about folic acid vitamin supplements. Some women need more folic acid than others. These should be started when you are planning a pregnancy or as early as possible during pregnancy.</p>
<p>Calcium</p> 	<p>Calcium helps to build strong bones and teeth.</p> <p>Calcium is in milk products like cheese and yogurt. Some fish contain calcium. Choose canned salmon or sardines with bones.</p>
<p>Iron</p> 	<p>Iron makes healthy blood. Foods that contain iron include meat, poultry, certain fish like Rainbow trout, eggs, tofu, legumes like lentils or chickpeas, nuts and seeds, fortified cereals, and bannock.</p> <p>Try to eat foods with vitamin C when you eat iron-rich foods. Vitamin C helps you absorb iron. Foods with vitamin C include fresh fruits and vegetables such as tomatoes, oranges, broccoli, cabbage, cantaloupe, kiwi, peppers, and strawberries.</p>
<p>Protein</p> 	<p>Protein helps with muscle growth. Wild meat, red meat, chicken, fish, eggs, tofu, peanut butter, beans, milk, cheese, yogurt, nuts, and seeds all contain protein.</p>

How much should you eat every day?

The most important thing is to eat good healthy food every day and drink clean safe water. Try to cook more often and avoid processed foods as much as possible. Try to eat foods as close to their natural state as possible (whole foods). Choose a variety of foods from each of food group in the chart below. This will help you stay strong and help you have a healthy pregnancy.

- Listen to your body's signs for hunger and fullness.
- Eat regular meals and snacks in between.
- Eat when you are hungry and stop when you are full.
- Include a variety of foods at each meal from Canada's Food Guide. This includes:
 - Vegetables and fruit (e.g., wild greens, broccoli, tomatoes, berries).
 - Protein foods (e.g., wild meat, red, meat, fish, chicken, eggs, beans, nuts, seeds, milk, cheese, yogurt, fortified soy beverage).
 - Whole grains (e.g., bannock, bread, rice, pasta).
- Aim to include a vegetable or fruit at each meal or snack.
- Eating several small meals each day may help if you have nausea and/or vomiting.
- If you have gestational diabetes, ask your health care provider for a referral to a registered dietitian.



Some people do not have enough money to get the healthy food that they need during pregnancy. There are programs that offer free healthy food for pregnancy such as Canada Prenatal Nutrition Programs (see below). There are also ideas for cooking healthy meals on a small budget through these programs.

For information and support

Canada Prenatal Nutrition Program (CPNP)

Services provide food, nutrition information, support, education, referral, and counselling on health issues.

www.canada.ca/en/public-health/services/health-promotion/childhood-adolescence/programsinitiatives/canada-prenatal-nutrition-program-cpnp.html

Canada's Food Guide

www.Canada.ca/FoodGuide

Your go-to-place for easy to understand information from registered dietitians.

UnlockFood.ca

Ask your health care provider for a referral to speak to see a registered dietitian.

Telehealth Ontario

To speak with a registered dietitian for free contact Telehealth Ontario at 1 866-797-0000

Nutrition Resource Centre's Resource on *Healthy Eating for a Healthy Pregnancy*

<https://opha.on.ca/getmedia/a63ec7e8-52ab-4747-8573-fdeb6569937c/Healthy-Eating-for-a-Healthy-Baby-EN.pdf.aspx>

Physical Activity

Staying active before and during pregnancy is healthy. It can be as simple as going for a walk, snowshoe, or swim each day. Being active is good for you and your baby:

- It helps you to feel good and stay healthy.
- It may make labour and birth easier.
- You may recover more quickly after your baby is born.
- It may prevent constipation (difficulty having a bowel movement).
- It can help you gain a healthy amount of weight and reduce the risk of gestational diabetes.
- It can give you energy and make you feel better.

About Exercise:

- Drink plenty of water when you are exercising.
- Try not to get too hot or too tired.
- You should be able to talk when you are being active.
- If something hurts or feels uncomfortable, stop.

Talk to your health care provider if you are thinking about starting a new activity. If you are in a group activity, let the instructor know you are pregnant. Some exercise classes are specially designed for pregnant women, like prenatal yoga or aquafit. Talk to your health care provider if you have any questions about being active; if you have specific health concerns in your pregnancy you might have some restrictions. Generally, 30 minutes of exercise per day is recommended when pregnant.



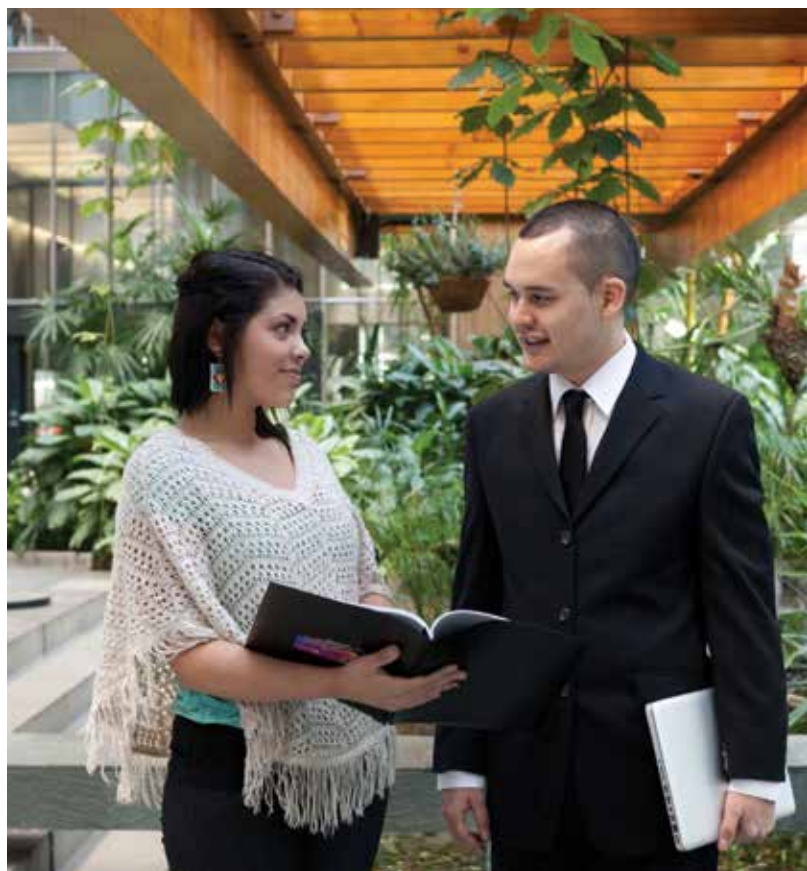
Work and School

You may be working or going to school during your pregnancy. A few small changes at work or at school can add to your comfort and will help you to have a healthy baby. Talk to your health care provider about the things that you do at work and at school.

Most jobs and classes are safe during pregnancy. Some women must stop working or must change to a different type of work when they are pregnant. If your work or classes include any of the items on the list below, you may need to make some changes or take extra care while you are pregnant:

- If you must stand up for long periods of time.
- If you must lift, push, or pull heavy items.
- If you are in contact with chemicals.
- If you use X-rays.
- If there is loud noise.
- If it is very hot.
- If you are in contact with animals, young children, or sick people.
- If you work long hours or do shift work.

There is **no** strong proof that computers can harm your unborn baby.



Employers cannot penalize an employee in any way because the employee will take a pregnancy or parental leave from work. Employers are responsible to accommodate the needs of the pregnant employee as much as is possible.

Pregnant people have a right to take time off for prenatal care. Employers also are required under the law, to provide a clean and suitable place to pump breast milk and have longer or extra breaks in order to do so.

Infections during Pregnancy

Some infections can be harmful to you and your unborn baby. When planning a pregnancy, and during pregnancy, your health care provider may suggest that you take extra care to avoid infections. Your health care provider may also test you for some infections. If you think you have one of the infections listed below, contact your health care provider.

Toxoplasmosis

You can get this infection from raw or undercooked meat, and from unwashed vegetables. You can also get it from cleaning the cat litter or working a garden where a cat has left feces (infected soil). A toxoplasmosis infection during pregnancy can make your baby very sick.

- Cook all meats well. Wash vegetables before eating them. Clean counters well after cooking. Be sure your drinking water is safe.
- Wear gloves and a face mask if you have to change the cat litter box or have someone else responsible for the litter box. Wear gloves if you are working in a garden where a cat may have left feces.
- Wash your hands regularly, especially before and after preparing food, changing the cat litter box and working in the garden.

Bladder Infection

This infection can hurt your kidneys and in

some severe cases, cause your unborn baby to be born too soon. If you feel any of these symptoms, contact your doctor or health care provider right away:

- You need to pee (pass urine) often and right away. Or you feel you have to go but cannot or very little comes out.
- You have a burning feeling when you pee (pass urine).
- Your pee (urine) is bloody or cloudy.
- Your pee (urine) has a strange smell.
- You have pain in your lower stomach or back.
- You have a fever or feel sick to your stomach.

You can protect yourself from getting a bladder infection:

- Drink about 6- 8 glasses of water every day.
- Wipe yourself from front to back after using the toilet.
- Go to the toilet as soon as you feel the urge to pee (pass urine), before sex, and after sex.
- Wear cotton underwear / avoid thongs which increase the risk of E. Coli bladder infections.
- Cranberry capsules are safe in pregnancy and can reduce bladder infections.



Tests for Other Infections during Pregnancy:

- **HIV**—The HIV virus causes AIDS. AIDS can make you and your baby very sick. A blood test is used to look for HIV. Pregnant people who are HIV positive can take medication to help prevent their baby from getting HIV.
- **Streptococcus B (Strep B)**—During birth, a baby can come into contact with Strep B and some may get very sick. A vaginal and rectal swab is used to test for the Strep B bacteria. Women who have Strep B have access to antibiotics during labour. For more detailed information: www.ontariomidwives.ca/sites/default/files/2017-09/CPG-GBS-Prevention-and-management-in-labour-PUB_0.pdf
- **Sexually Transmitted Infections (STIs)**—Herpes, chlamydia, syphilis, gonorrhea, and hepatitis B are STIs. They can harm you and your unborn baby. Your health care provider can test for STIs.

There are options for treatment during pregnancy, and to help prevent your baby from getting the infection.

For information and support

Aboriginal Sexual Health

Information about sexual health for Aboriginal women.

www.aboriginalsexualhealth.ca

Action Canada for Sexual Health and Rights

Information and resources on sexual and reproductive health.

1-888-642-2725

www.srhweek.ca

HIV/AIDS Testing

Information about HIV/AIDS testing.

www.phac-aspc.gc.ca/aids-sida/info/4_e.html#find

Society of Obstetricians and Gynecologists of Canada

Information on sex, healthy sexuality, HIV/STIs, Consent, LGBTTTQ+.

www.sexandu.ca

Sexualityandu.ca

Information on sexual health.

www.sexualityandu.ca

Ontario Aboriginal HIV/AIDS Strategy

1-800-743-8851

www.oahas.org

Your Local Public Health Department

Public health nurses provide information and support. Call Service Ontario:

1-800-267-8097

Is Someone Hurting You?

If you are pregnant, or planning a pregnancy, think about the people in your life. Healthy loving relationships are good for you and your growing family. If someone is hurting you, get the help you need, for you and your baby.



What is a healthy relationship?

In a healthy relationship, your partner respects you for who you are. You treat each other with love and care. Ask yourself:

- Does your partner appreciate you for who you are?
- Does your partner listen to you and respect the things you like and don't like?
- Do you do activities on your own that interest you, as well as activities with your partner?
- Does your partner trust you?
- Do you trust your partner?
- Can you talk about things that are important to you?
- Are you able to be honest with your partner?
- Do you think your partner is being honest with you?
- Is your relationship equal?
- Is your partner supportive in bad times and in good times?
- Can you depend on your partner?

If you said **YES** to all of these questions, you are likely in a healthy relationship. All relationships take work, and most go through some difficult times. But an abusive relationship is never a healthy relationship. An abusive relationship is not healthy for you and your baby. Pregnancy and the first year of a child's life can be stressful - existing problems often get much worse without help or intervention to improve the situation.



What is abuse?

Does your partner:

- Yell at you or call you names?
- Control the money?
- Hide or break your things?
- Threaten to take the kids away?
- Hit or kick you?
- Keep you from seeing people?
- Always need to be in charge?
- Force or threaten you to have sex?

If you said **YES** to any of the above questions, this is not a healthy relationship. You are experiencing abuse. Abuse comes in many forms. It can be physical, emotional, or financial. Abuse usually gets worse over time. Abuse often starts during pregnancy. It does not stop after the baby is born, statistics tell us that often it gets worse. Abuse can make you feel bad, sad, anxious, and alone. You could be hurt or die.

If your relationship is not healthy:

- Tell someone you trust what is happening. This could be a friend, family member, doctor, nurse, or minister.
- Find people or community services to help you.
- Ask for help so you (and your children) can leave safely.

Abuse may cause your baby to:

- Be born too small or too early
- Be hurt or die
- Have health problems later on

For information and support:

911 – Call the police

Assaulted Women's Help Line

A 24-hour telephone crisis line for women.

1-866-863-0511

www.awhl.org

National Domestic Violence Hotline

Phone line to get help if you are being abused.

1-800-799-7233

www.thehotline.org

Law and Abuse

Family Court Support Worker Program provides direct support to victims of domestic violence who are involved in the family court process.

www.attorneygeneral.jus.gov.on.ca

List of Women's Shelters in Ontario

www.sheltersafe.ca/ontario/

National Aboriginal Circle Against Violence

List of Aboriginal Shelters

Resources on Becoming Financially Self-Sufficient

<http://www.nacafv.ca>

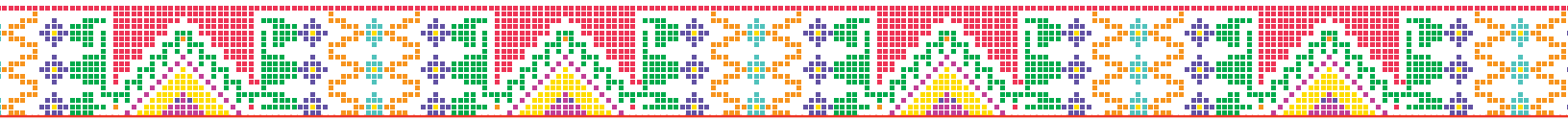
Indigenous Women's Helpline: Text, Call or Chat

Talk4Healing : A culturally grounded fully confidential HELPLINE for Indigenous women in Ontario available in 14 languages
1-855-554-HEAL

When to Get Help during Pregnancy

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

- Bleeding from your birth canal (vagina).
- Feeling dizzy or like you might faint.
- Loss of consciousness.
- High fever (temperature).
- Chills or rash after you have had a fever.
- Sharp pain in your tummy.
- Sharp pain in your tummy that is not going away.
- Vomiting or throwing up a lot.
- Feeling more sad, worried, or angry than usual.
- Crying a lot.
- Smelly fluid comes from your birth canal (vagina) and makes you feel itchy.
- It hurts or burns when you pee (pass urine).
- Your pee (urine) becomes red or dark in colour.
- Spots on your face and body that are not normally there.
- The baby stops moving or moves a lot less often.
- 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.
- Pain in your chest or stomach area that is severe and not going away.



My Notes about Getting Healthy Before and During Pregnancy

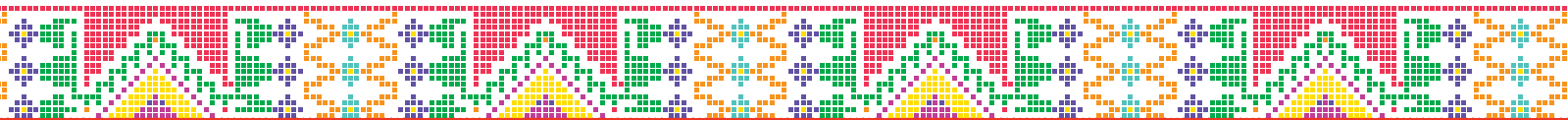
Think about writing your thoughts on getting healthy before and during pregnancy on this page. Or you can ask someone to write down information for you.

Those who are expecting a baby (as well as their families), often have questions about health and pregnancy, even if they already have children. Here are a few examples of common questions to ask your health care provider:

- *How can I get the help I need to be as healthy as possible before and during pregnancy?*
- *Where can I learn more about pregnancy?*
- *How can I become a good parent? What do you suggest for someone who didn't have good role models growing up?*

Questions I want to ask:

People I can go to for help and support:



I plan to learn more by:

Changes I plan to make:

My notes about getting healthy before and during pregnancy:

4. Your Pregnancy: First Trimester



4. Your Pregnancy: First Trimester

1st Trimester



2nd Trimester



3rd Trimester



Introduction

This chapter has information about your first trimester (months 1, 2 and 3 of your pregnancy). Congratulations on your pregnancy and the new beginnings that this brings! This is a time when you may feel tired or have morning sickness, although your pregnancy does not show yet. You may feel excited about the new life that is growing inside you. You may also have worries about the pregnancy and about becoming a parent. There are people who can help (see page 14).



Stages of Pregnancy

Pregnancy lasts about 40 weeks or about 9 months. Traditionally, we say 10 lunar months or moons. It takes this much time for a baby to grow and develop. A pregnancy is divided into 3 parts, or trimesters. Each trimester is about 3 months long.

First Trimester (months 1, 2 and 3): By the end of the 1st trimester, your baby begins to look like a human baby.

Second Trimester (months 4, 5 and 6): During the second trimester, your baby can open his/her eyes and can suck his/her thumb.

Third Trimester (months 7, 8 and 9): Your baby's lungs and organs are finishing their development. Your baby continues to grow and gain weight.



First Trimester (1 to 3 months): Your Growing Baby

By the end of the first trimester:

- Your baby will be about 7 to 10 cm long (3 to 4 inches) and weigh about 28 grams (1 ounce).
- The heart is formed and beating.
- The face is forming but the eyes are closed.
- Bones, eyes, ears, and nose are forming.
- Fingernails and toenails are developing.
- Your baby's arms and legs are moving, but you might not feel this.
- The brain is developing.
- The spine is forming.
- The digestive tract is forming.
- The sex of your baby is visible.

Getting Healthy for You and Your Baby

You may have different feelings as you get used to the idea of being pregnant and becoming a parent.

What you can do:

- Make healthy changes as early as you can. Think of healthy things you can do for yourself and your growing baby, like taking a walk, eating healthy food, and resting.
- Make an appointment with your health care provider as soon as you know you are pregnant. In some communities you may need to choose a new health care provider for your pregnancy (midwife, obstetrician etc.).
- Ask your health care provider what you can do to have a healthy pregnancy.
- Sign up for a prenatal program.
- Learn more about pregnancy by reading this resource, or ask someone to read it to you. You may also be able to learn more from library books, or from the internet, if these are available.
- Think about how you were raised and how you want to raise your baby. What would you want to do similarly and what would you do differently? How will you achieve this?
- Talk to your partner, family or friends about your feelings.
- Talk to your partner, family or friends about the kind of parent that you want to be.
- Find out about supports and services in your community.

First Trimester (1 to 3 months): Changes You May Feel

Changes you may feel

Tips to help

You may have mood swings.
You may feel happy for a while and then sad. Pregnancy hormones can cause these feelings.



- 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.

You may have morning sickness.
You may feel sick, nauseous, and/or throw up. You may feel sick in the morning, or all day. This usually stops in the 2nd trimester.

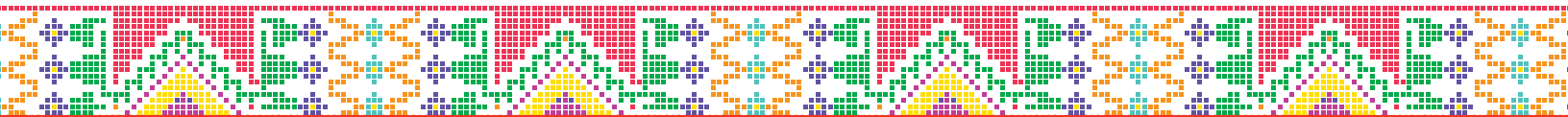


- Eat dry toast, crackers, or pretzels before you get out of bed in the morning.
- Get out of bed slowly.
- Eat small amounts of food every 1 to 2 hours, before you feel hungry.
- Avoid spicy, fried, or fatty foods.
- Drink fluids between meals, not during the meal.
- Tell your health care provider if you are feeling sick to your stomach or throwing up.
- Call the Nausea and Vomiting in Pregnancy Helpline for more information at 1-800-436-8477.

You will pee (urinate) more often. This is caused by pregnancy hormones. Your baby also begins to press on your bladder.



- Drink less in the evening.
- Try Kegel exercises (see page 65).
- After going pee (passing urine), stand up, and sit down again to empty any remaining pee. This can be very helpful during pregnancy.



Changes you may feel

Tips to help

You may feel tired.

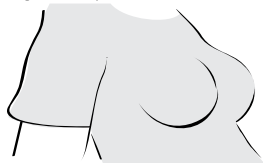


- Rest when you can.
- Eat small amounts of food many times throughout the day.
- Drink about 8 glasses of water every day.
- Try to work less, if you can.
- Accept help from others.
- Talk to your health care provider.

Thin milky fluid may flow from your birth canal (vagina).

- Wear a panty liner or change your underwear often.
- Avoid douching.
- Talk to your health care provider if the fluid smells bad, or if you are itchy.

Your breasts may become larger. They may be sore and tender. Your body is getting ready to breast feed.



- Wear a well-fitted support bra.
- Some women wear a bra to bed, or an undershirt with a shelf bra.

You may feel faint. This is caused by pregnancy hormones and the changes to your body during pregnancy.

- Get up slowly.
- When changing positions, move slowly.
- Talk to your health care provider.

Your interest in sex or other activities may change. Some women are more interested in sex and others are less interested. Both changes are normal.

- Talk to your partner about these feelings.





Cycle of Corn: A Mohawk Teaching

In our ceremonies we have a connectedness to Creation, a relationship with each other and Mother Earth. O:nenhste (corn) is the element of the spiritual, physical and emotional health of Onkwehónwe. There are similarities between the cycle of corn and the pregnancy cycle. Each requires ceremonies and nurturing by human beings. Women are special in the eyes of the Creator as they bring many seeds to the Earth.

For information and support:

Best Start Resource Centre

Online resources about prenatal and child health.

www.beststart.org

Public Health Agency of Canada

Information about pregnancy, and planning a pregnancy.

www.healthycanadians.gc.ca/hp-gs/index_e.html

Society of Obstetricians and Gynaecologists of Canada

Information about pregnancy, birth control, and sexual health.

www.pregnancyinfo.ca

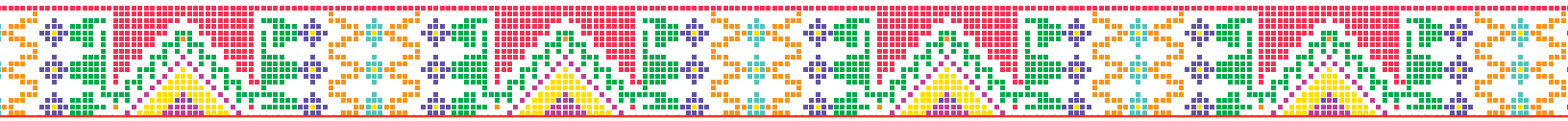
Your Local Public Health Department

Public health nurses provide information and support.

<http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx>

or Call Service Ontario:

1-800-267- 8097



My Notes about My First Trimester

Think about writing about your first trimester on this page. Or you can ask someone to write down information for you.

You will likely have lots of questions during your first trimester. Here are a few examples of common questions people ask their health care provider:

- *What can I do to help with my morning sickness?*
- *What kind of vitamins are best for me?*
- *Are my medications safe in pregnancy?*

Questions I want to ask:

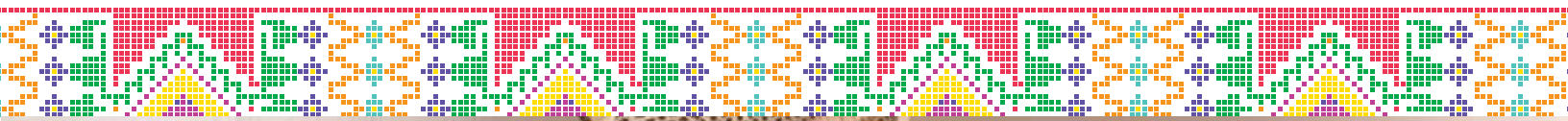
People I can go to for help and support:

I plan to learn more by:

Changes I plan to make:

My notes about my first trimester:

5. Your Pregnancy: Second Trimester



5. Your Pregnancy: Second Trimester

Introduction

This chapter has information about your second trimester (months 4, 5 and 6 of your pregnancy). You may feel less sick and less tired than in the first trimester. This is often a time when you feel comfortable in your pregnancy. Your unborn baby may seem more real to you, as pregnancy now shows, and you feel your baby move.



Second Trimester (4 to 6 months): Your Growing Baby

By the end of the second trimester:

- Your baby will be about 36 cm (14 inches) long and weigh about 1 kg (2 pounds).
- Her/his/their eyes can open. Eyebrows and lashes appear.
- Your health care provider can help you listen to your baby's heartbeat.
- You can feel your baby moving.
- You might feel your baby hiccup.
- The teeth develop inside the gums.
- Soft fine hair is growing on your baby's body.
- A white coating, called vernix, begins to cover your baby's body. Vernix protects the skin while submerged in the waters.


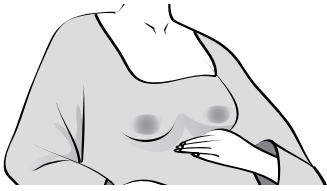

Nurturing Life

A woman is closest to the Creator when she is pregnant. It is when her medicine is most powerful. She sustains and nurtures life completely within her own body. - Mohawk Cultural Teaching

Pregnancy is a ceremony. The ten moons that make up a pregnancy, that whole time the woman is in ceremony. - Anishinaabe Cultural Teaching

All life is sacred. Creator made people who are different for a reason. Two-Spirit people bring their own unique gifts and experiences to their pregnancy journey. - Multiple Indigenous Nations.

Second Trimester (4 to 6 months): Changes You May Feel

Changes you may feel	Tips to help
<p>You may feel your baby move. Some women say that it is like fluttering, bubbles, or like their baby is poking! Some women begin to feel closer to their baby and more interested in their baby's growth.</p>	<ul style="list-style-type: none">• Get to know your baby.• Take note of when you first feel your baby move. Tell your health care provider. 
<p>Fluid may leak from your nipples.</p> 	<ul style="list-style-type: none">• This is normal.• Some women wear thin breast feeding pads in their bras.
<p>Some women get dark patches on their face or cheeks. This is caused by pregnancy hormones. These changes usually fade after birth.</p>	<ul style="list-style-type: none">• Sun may increase the colour changes.• Wearing a hat and/or sunscreen can help.
<p>Some women get varicose veins and/or discomfort in their legs. This is caused by the weight of your baby and pregnancy hormones.</p> 	<ul style="list-style-type: none">• Walking helps the flow of blood in your body. It may help your legs feel better.• Do not cross your legs when sitting.• Put your feet up when sitting.• Wear support stockings if needed.• Talk to your health care provider.
<p>When brushing and flossing your teeth, the gums may bleed more easily.</p>	<ul style="list-style-type: none">• Continue to brush and floss regularly.• See a dentist at least once during your pregnancy. Remember to tell the dentist that you are pregnant.

Changes you may feel

Tips to help

Some women have lower back pain
This is caused by the extra weight in
the front of your body.

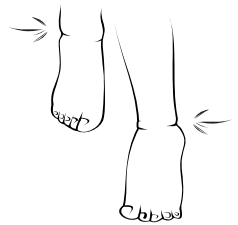


- Practice pelvic tilts. Flatten your lower back by pulling in your stomach and buttocks.
- Wear comfortable shoes with low heels.
- Avoid standing for long periods of time.
- Be careful how you lift and carry heavy children and objects.
- Some women get comfort from massage.

Some women become constipated
(difficulty having a poo). Having to
strain to have a poo (bowel
movement) can lead to hemorrhoids
(painful area around your anus).

- Drink about 8 glasses of water every day.
- Eat high fibre foods like whole grain breads, prunes, and bran.
- Activities like walking and swimming help.
- Talk to your health care provider.

Swollen hands and ankles are very
common, especially near the end of
the 2nd trimester. This is caused by
extra fluid in your body and
pregnancy hormones.



- Put your feet up.
- Sleep on your side.
- Avoid long periods of sitting or standing.
- Do not cross your legs when sitting.
- Drink about 8 glasses of water every day.
- Talk to your health care provider.
- Swelling on one side of your body could be a blood clot. Get medical help right away if this happens.

Your interest in sex may change.

- Talk to your partner about your feelings.

Getting to Know Your Unborn Baby

Feeling your baby move and seeing your body change and grow can be very exciting. It may also be scary! Take some time while you are pregnant to get to know your baby.

What you can do:

- Talk or sing to your baby.
- Play music that you enjoy for your baby.
- Read books to your baby.
- Think about what your baby may be doing. Sometimes you can tell when your baby moves. Sometimes it can even be seen on the outside!
- Think about baby names or having a naming ceremony.
- Begin planning for your baby's needs during this time. In some cultures, this happens after the baby is born.
- Your partner, other children, family, and friends may also be interested in getting to know your baby!
- Start reading about parenting an infant and consider which traditions you would like to incorporate into the early months and years of the child's life.

<https://resources.beststart.org/product/k67a-taking-care-of-our-children-childrearing-first-nations-workshop/>



My Notes about My Second Trimester

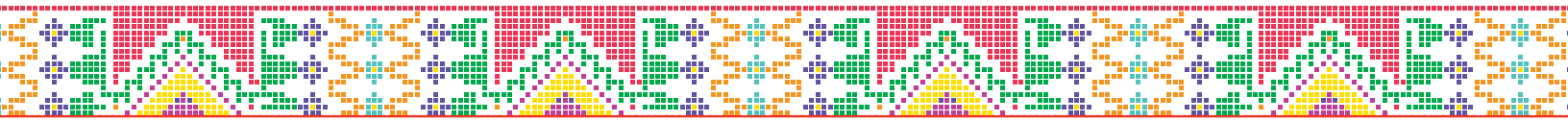
Think about writing about your second trimester on this page. Or you can ask someone to write down information for you.

Here are a few examples of common questions women ask their health care provider in their second trimester:

- *If my back hurts, or I have heart burn or leg cramps, is there safe medication?*
- *Am I gaining a healthy amount of weight?*
- *When should I start feeling my baby moving inside me?*

Questions I want to ask:

People I can go to for help and support:



I plan to learn more by:

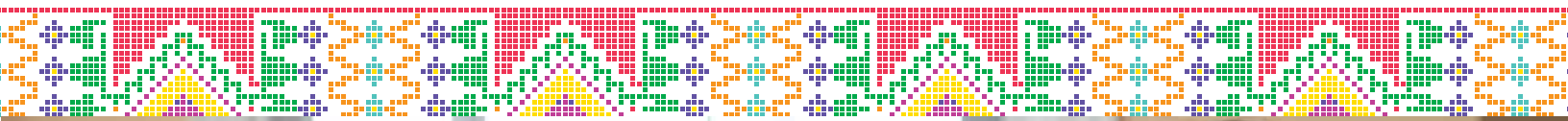
Changes I plan to make:

My notes about my second trimester:

Notes

[illegible]

6. Your Pregnancy: Third Trimester



6. Your Pregnancy: Third Trimester

Introduction

This chapter has information about your third trimester (months 7, 8 and 9 of your pregnancy), and about getting ready for the birth of your new baby. At this time you may start feeling more tired as your baby gets larger. You may feel excited, anxious or scared about the birth of your baby. Soon you will see your baby for the first time!



Third Trimester (7 to 9 months): Your Growing Baby

By the end of the third trimester:

- Your baby will be about 51 cm long (20 inches) and weigh 3.5 kg (7.5 pounds).
- Your baby's skin will begin to look less wrinkled as your baby grows and gains weight.
- Your baby can hear sounds, like voices and music.
- Your baby's movements will change. The movements become less big but may feel wiggly and squirmy.
- Your baby's head has hair.
- The brains, lungs, and other organs continue to grow and develop.
- Your baby responds to light.
- The sex organs are developed.
- Most babies will move lower and into a head down position, getting ready to be born.

Preparing a Sacred Bundle for Your Baby

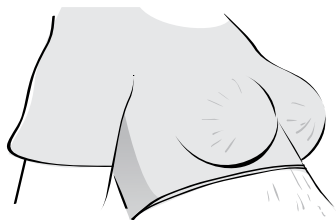
According to some First Nations customs, a sacred bundle is prepared for the baby. Tobacco, sage, cedar, and sweetgrass are the most common medicines to put into a bundle. The bundle contains things that will help guide the person through life. Some parents place a drum or rattle in the bundle. Gifts for the baby can also be added. After their baby is born, some parents put their baby's dried up umbilical cord in the bundle or in a pouch near where their baby sleeps.

Third Trimester (7 to 9 months): Changes You May Feel

Changes you may feel

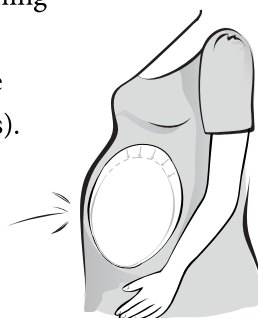
Tips to help

Some women develop stretch marks on the front of their body including their breasts. They may feel itchy.



- Putting lotion or oil on the itchy area can help.
- Use a small amount first, in case your body has a reaction to the lotion or oil.

Some women feel Braxton-Hicks contractions. This is the muscle of the womb (uterus) practising by tightening and relaxing. Braxton-Hicks contractions do not open the cervix (opening of the uterus).



- Talk to your health care provider.
- Walk around.
- Take a bath.
- Drink about 8 glasses of water every day.
- If they do not go away or get stronger and longer in strength and length, call your health care provider. This could be labour.

Leg pains or cramps are fairly common at this stage.



- Put your feet up.
- Drink about 8 glasses of water every day.
- Stretch your leg by bending your ankle and pointing your toes towards your nose.
- If your leg is swollen or the pain does not go away, see a health care provider right away.

Changes you may feel

Tips to help

Some women have heartburn. This is a burning feeling in your chest. It is caused by pregnancy hormones and your baby pressing on your stomach.



- Avoid the foods that cause your heartburn. Spicy and/or fried foods often cause heartburn.
- Drink fluids between meals, not during meals.
- Eat smaller amounts of foods, more often.
- Lying down after eating can bring on heartburn.
- Rest or sleep with pillows under your head so that your head is higher than your chest.
- If the heartburn becomes painful and does not go away, call your health care provider.
- Talk to your health care provider or pharmacist before taking any medication.

Constipation (difficulty having a poo) can be common in pregnancy. Straining to have a poo (bowel movement) can cause hemorrhoids (painful area around your anus). These can be very tender and even painful.



- Talk to your health care provider.
- **Drink plenty of water.**
- Do not sit or stand for long periods of time.
- **Eat plenty of high fibre foods like whole grains, vegetables, and fruits.**
- Activities like walking and swimming help.

Women often say they are short of breath. This can be caused by the size and position of their baby. When their baby moves lower, breathing is often easier.

- Talk to your health care provider.
- Wear loose clothing.
- Stand up straight.



Changes you may feel

Tips to help

Women often feel tired of being pregnant. They want to go into labour and have their baby.

- Talk to your health care provider, partner, family, and friends about your feelings.

Women may feel excited, anxious, or even scared.



- Every woman's experience is different.
- Some women take comfort in getting things ready for the new baby.

Many women have to pee (pass urine) more often near the end of their pregnancy. This is caused by their baby taking up even more room and pressing on their bladder.



- If you feel pain or notice a bad smell and/or blood in your pee (urine), contact your health care provider. You may have an infection.
- Kegel exercises help to strengthen the muscles and can decrease the chance of pee (urine) leaking:
 - Tighten the muscles around your birth canal (vagina) and anus and hold for several seconds. (These are the same muscles you use when you are peeing).
 - Repeat this several times during the day. Try to do this exercise 25 times each day.

Your interest in sex may change.

- Talk to your partner about your feelings.



Preterm Labour

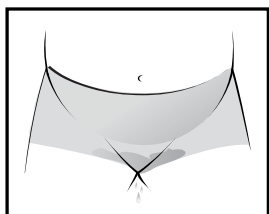
What is preterm labour?

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?

- Bad cramps or stomach pains that don't go away.

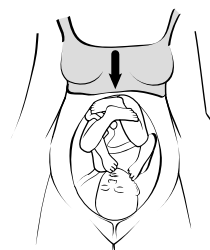
- Trickle or gush of fluid, or bleeding, from your birth canal (vagina).



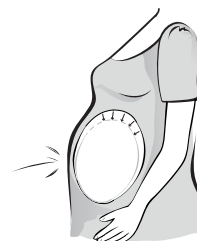
- Lower back pain or pressure that feels different than usual.



- A feeling that your baby is pushing down.



- Contractions (tightening of the womb (uterus) that come often and do not go away).
- Contractions that get stronger and closer together.



- An increase in the amount of discharge from your birth canal (vagina).

- A feeling that something is not right.

What should I do if I have any of these signs?

Get a hold of your Care Provider or go to the hospital right away.

There are things that your health care provider can do to help.

Raspberry Tea

Red Raspberry Leaf Tea helps to tone and get the womb (uterus) muscles ready for labor and delivery. I love this stuff and will be drinking a lot of it from now on! The nice thing is you can make it into an iced tea too! This can be safely used throughout the pregnancy and is full of vitamins (calcium and vitamin C). You can also add rosehips for flavour or mint and it is very healthy... 2 to 3 cups a day in the 3rd trimester is good to get that uterus in shape! This also helps after birth to get the uterus back down to size quickly and with less bleeding!

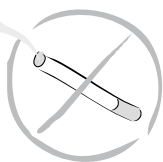
– Queen Sacheen, Nuuh Chah Nulth



What you can do

It is not possible to prevent all preterm births, but there are things you can do to reduce the chance of preterm labour:

- Try to stop smoking or smoke less often. Ask others not to smoke near you (see page 26 to learn more).



- Take time to rest every day.



- 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 14).



- See your health care provider if it hurts when you pee (pass urine).



- See your health care provider if smelly fluid comes from your birth canal (vagina) and makes you itchy.

- Eat healthy foods (see page 30).



- Learn the signs of preterm labour and what to do if you have them. Tell your support person as well.

- Be aware of how your body changes with pregnancy. Talk to your health care provider about anything that does not feel right.

- Find ways to manage stress in your life. Talk with your health care provider or public health nurse.



Getting Ready for Birth

The third trimester is a good time to start getting ready for labour and birth.

What you can do:

- Talk to your partner, family, and friends about your feelings about labour and birth.
- Talk to others about their labour and birth. Ask them how they felt during the first few weeks after their baby was born. Say no “horror stories” please! It is important to have a positive but proactive approach. This helps you keep a ‘good mind’ in pregnancy.
- If you can, go on a hospital tour with your partner, a family member or a friend. This can be helpful even if you plan to birth at home or in a birthing centre. Find out more about the services at the hospital. Many hospitals have staff who are familiar with First Nations cultures. Some hospitals have a special room for families who want to smudge. This may be an important ceremony for you and your family during labour and after the birth. Elders and/or drummers may be available to come to the hospital as well. Think about other traditions you might like.
- Think of who you want with you during your labour and birth. Some people want their parents with them during labour, but not during the actual birth. Some want this the other way around. Everyone has different needs.
- If you are giving birth in a hospital or birthing centre, find out how many people can be with you during labour.
- Make a list of things you and your baby will need. Family and friends may be able to give or lend you items on the list.
- Your baby’s sleep area will need to be set up. The safest place for your baby to sleep is in a crib, cradle or bassinet in your room (see page 106 for more information).
- Learn more about chest or breastfeeding. Many communities have lactation support groups or a lactation consultant who can help.
- Learn about caring for a new baby.
- Ask for help from family and friends for your first few weeks at home.
- Think about preparing extra meals and freezing them for after you and your baby come home. or get family and friends to sign up to a “bring a meal” list for postpartum.
- Rest when you can.
- Learn about community services for new parents. These can be great places to meet other parents.
- If you are working or in school, find out about taking time off. There may be benefits available when you are not working or in school.



Benefits

Learn more about benefits that may be available if you are sick, pregnant or caring for a young baby:

Canada Benefits

www.canadabenefits.gc.ca

Service Canada

1-800-206-7218 TTY: 1-800-529-3742

www.canada.ca/en/services/benefits/ei.html

Keeping the Placenta

I kept my placenta. It is traditional to our people to bury it closer to where you want their home to be. Different Nations have different traditions; usually tobacco is placed as well. In my case, it was buried with things that you wish for the baby's future. It was buried with a mini drum, a guitar pick, a pen, money, a knife, a fishing hook, and a few other things I can't remember.

Two-Spirited Teachings

Two-spirit individuals were considered good partners due to their highly developed ability to relate to and teach children, a generous nature, and having exceptional intellectual and artistic skills - all qualities that make a wonderful parent.

Reference: <http://www.dancingtoeaglespiritsociety.org/twospirit.php>

During the Delivery

It was considered important for men to be there at the delivery to help the mama and her spirit.

Making a Birth Plan

When you are expecting you may want to write a birth plan. This does not mean that everything will happen the way you want but caregivers should respect your wishes as much as possible. The most important things are your health and the health of your baby. A birth plan gives you a chance to think about what you would like or not like, if you had the choice. A birth plan also helps share information with your health care provider. It can help them know what you want.

Here are some things you can write in your birth plan:

- Who you would like to be with you while you are in labour and/or during the birth.
- Positions you would like to try in labour.
- Where you would like to give birth to your baby. Some people want a home birth, others want to give birth in a hospital or birthing centre.
- What types of pain relief you would like to use or not use. Some people never want an epidural while others want one.
- Your thoughts about episiotomy and Caesarean section (see page 90).
- Whether or not you want keeping the placenta and umbilical cord. These can be labelled and set aside for you.
- Your plans for feeding your baby.
- What you like to happen if plans change.
- If you want to smudge during your labour, or after the baby is born.
- Some parents request the first language their baby hears to be their First Nations language.



The health care team can help make this happen.

- Some people have a welcoming, naming and/or cord ceremony in hospital. Other women do this once they return home.
- There may be other ceremonies that you want during labour or birth.

For information

Birth Plan

www.pregnancyinfo.ca/your-pregnancy/preparing-for-birth/birth-plan/

www.healthlinkbc.ca/sites/default/libraries/healthwise/media/pdf/hw/form_abl1753.pdf

Birth Plan

Write down what you would like to happen for your birth, or ask someone else to do this for you. Keep in mind that things may not go as you planned. Fill out the sections that are important to you, or add information at the bottom of the page. Show this page to your health care provider. It is helpful if they make a copy of this page and put in your patient file. Sometimes things change and some wishes are not possible; for example newborn males are not circumcised during a hospital stay in Ontario any more.

My Name:

My Due Date

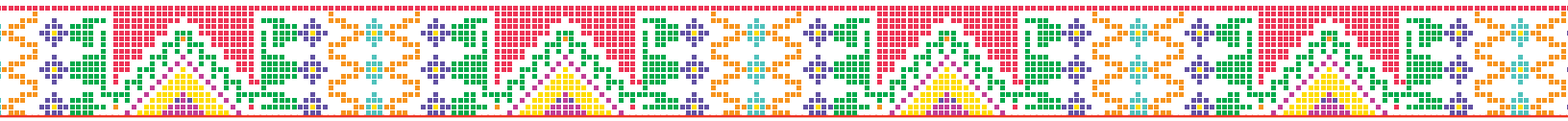
Where I Plan to Give Birth:

My support people and their role:

My preferences about pain control:

My preferences during labour:

My preferences during birth:



The most important issues for me are:

My concerns or fears are:

I plan to feed my baby by:

My preferences for the care of my baby:

These traditional practices are important to me:

Other:

Travelling to Give Birth

Some people have to travel to another community to give birth. Their community may not have a health care provider who delivers babies, or, due to health concerns, they may need to be in a specific hospital for their birth. This can separate you from your family, friends, community and culture.

It can be very difficult being away from your home community and your family at this time. Your health care provider may have information about the community where you will give birth. Talk about who can come with you, and options to cover their travel expenses. Find out about ways for important people to participate by phone, computer etc. Think about how you can get support while you are away from home. It is okay to ask for help and to accept it. It may be helpful to find out about services in the community where you plan on giving birth:

- Are there Aboriginal organizations in the area? Do they have doulas /labour support people working with them?
- Is there an existing Aboriginal community where programs & services are offered through Aboriginal Health Centres, Friendship Centres, Aboriginal Midwives, Outreach Services, Traditional Wellness, Counselling, etc.?
- Are there programs for those who are pregnant or for new parents

Let your new health care provider know if you:

- Take medications. Remember to bring these with you.

- Are keeping the placenta and umbilical cord. These can be labelled and set aside for you. This is a common request.
- Want help completing forms to register your baby in order to obtain a birth certificate (see page 95).
- Want help completing the paper work to register your baby with your First Nation/ Band (see page 95).

Talk to your partner and family members about how you will stay connected while you are away from home:

- Think about a way to call home.
- Talk about how you can let them know about the birth of your baby.
- Talk about when/where ceremonies that are important to you might take place, such as welcoming, naming and/or cord ceremonies.
- Make child care plans for your other children, well before your travel. Sometimes, women leave their communities early because of pregnancy complications.

- Prepare your home so it is ready for you and your baby when you return home. Have the baby's bed, clothing and supplies ready if you can. Think about freezing some meals ahead of time, to make it easier when you return home.

Pack your bag ahead of time, in case you need to leave earlier than expected. See page 76 for a list of things to pack. You will also need extra clothes and a bag for your laundry.

For information

Journey for Two: A guidebook for when you're away from your community to give birth

[www.nwac.ca/wp-content/
uploads/2015/05/2009-NWAC-Journey-for-
Two-A-Guidebook-For-When-Your-Away-
From-Your-](http://www.nwac.ca/wp-content/uploads/2015/05/2009-NWAC-Journey-for-Two-A-Guidebook-For-When-Your-Away-From-Your-)



Anishinabe Name

Parents choose an Elder from the community, one already chosen to be a name giver. They offer tobacco to that individual who by vision, dream or fasting will receive a name in the language for the child. They will give the child this name at a special naming ceremony. The parents select a couple of representatives, sponsors who are like godparents, who now have a lifelong role to advise, watch over, and protect the child. After this ceremony, a feast is held to honour the baby's new name.

The name is more meaningful and spiritual than a name in English that was chosen based on a favourite aunt or uncle, actor or actress or a name from a book. The name is to be acknowledged, and be used when referring to the child. The child must use this name in ceremonies, prayers, public duties and in healing rituals.

The Great Spirit, Creator will identify the child by this name. The name gives a feeling of belonging, embracing the spirit of who they are as Anishinabe, and enhancing the feeling of being loved/cared for.

What to Take to the Hospital or Birthing Centre

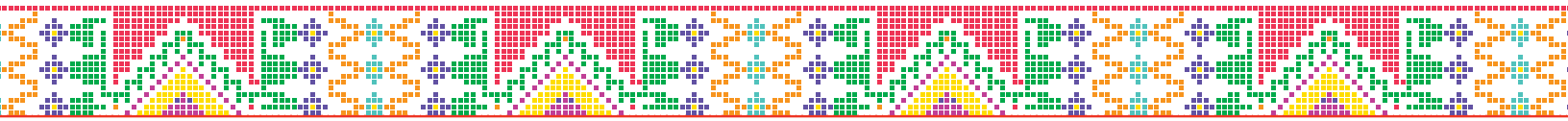
Ask what you are expected to bring to the hospital or birthing centre. Your health care provider can help with this list. Many people pack their bag 3 or 4 weeks before their due date. Even if you are planning to birth at home, have a bag ready in case your plans need to change.

For you:

- ☐ Health card, NIHB information
- ☐ If the hospital gave you a registration card, pack that too
- ☐ Your medications
- ☐ Pen and paper
- ☐ Nursing bra or comfortable bra
- ☐ Nursing pads
- ☐ Cotton underwear
- ☐ Tooth brush, tooth paste, hair brush, lotion, lip gloss, deodorant, shampoo, conditioner, hairbrush etc.
- ☐ Swim suit (if there is a tub)
- ☐ Menstrual pads (overnight kind)
- ☐ Nightgown, robe, and slippers
- ☐ Change of clothing (comfortable!)
- ☐ Money
- ☐ Phone numbers for family and friends
- ☐ Camera/video camera or smart phone
- ☐ Books/magazines/games/hobbies
- ☐ Mp3 player/iPod for music/movies, if you have these
- ☐ Cultural/traditional items (feather, drum, medicines, tobacco, etc.)

For your baby:

- ☐ Car seat
(see page 109 for more information)
- ☐ Diapers and face cloths/wipes
- ☐ Clothing
- ☐ Socks, booties, moccasins
- ☐ Hat
- ☐ Sweater
- ☐ Thin breathable blanket
- ☐ In the winter, your baby will need to be as warm as you. Bring the right clothing for the weather.



My Notes about My Third Trimester

Think about writing about your third trimester and your plans for your birth on this page. Or you can ask someone to write down information for you.

You will likely have lots of questions during your third trimester. Here are a few examples of common questions women ask their health care provider:

- *Do I need to travel to another community to give birth?*
- *Are there any activities I should stop doing?*
- *Is my unborn baby growing well?*

Questions I want to ask:

People I can go to for help and support:

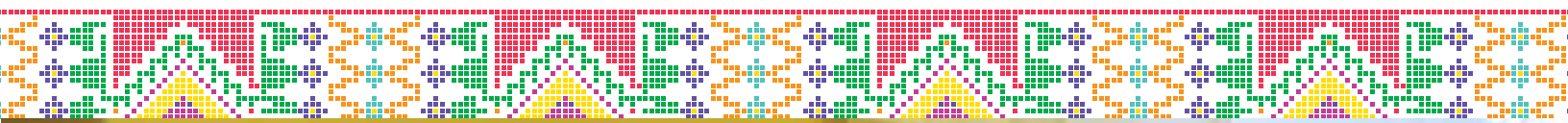
I plan to learn more by:

Changes I plan to make:

I can get ready for the birth of my baby by:

My notes about my third trimester:

7. Labour and Birth



7. Labour and Birth

Introduction

This chapter has information to help you prepare for labour and to give birth to your baby.

Remember:

Every labour and birth is different.

Usually, the first labour lasts between 12 and 20 hours.

What is Labour?

Labour is how your body works at birthing your baby. It happens when the womb (uterus) muscles tighten (contract) in a repetitive way that moves your baby into the birth canal (vagina) and to the outside. The contractions help to open the cervix (opening of the uterus) so that your baby can be born.

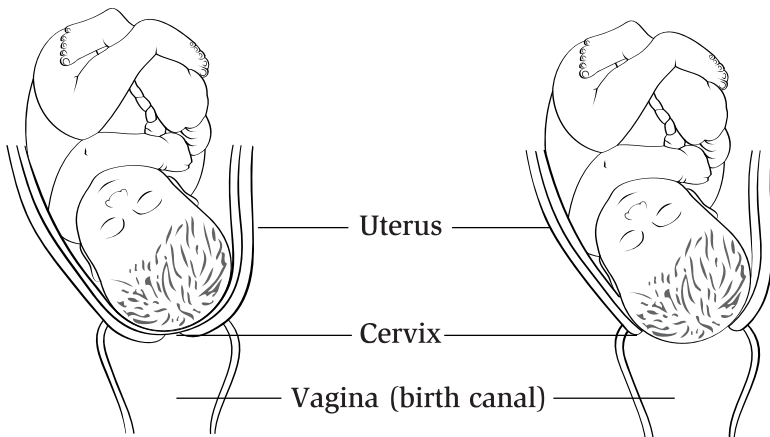
Usually labour begins between 37 and 42 weeks of pregnancy. Your health care provider will talk about what happens if you go into labour before 37 weeks or after 42 weeks.

How the Cervix Changes

The cervix is the opening of the womb (uterus). Traditionally, it is often referred to as the first doorway.

Efface: The cervix gets thinner (effaces) before it opens (dilates).

Dilate: The cervix opens (dilates) fully to about 10 cm (4 inches).



Three Birthdays in the Same Room

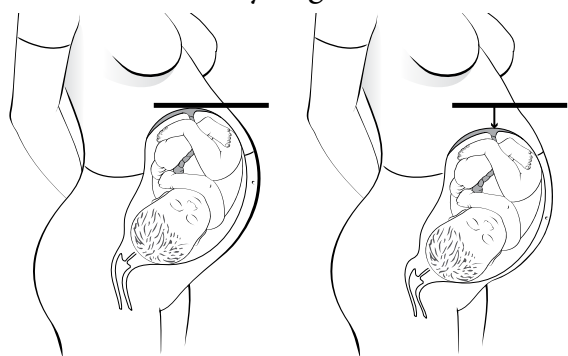
It was the Aboriginal midwife's birthday, the woman's birthday, and the day the woman gave birth! The woman, who was turning 20, had an evening labour. She laboured through the night and in the morning, she had a baby girl. The whole family came into the room, singing and drumming. The family brought sacred water from their community as well. All three birthdays were celebrated! It was really special for everyone! Consider how you can celebrate--if not at the time, then later with family and community.

Signs of Labour

There are 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, call your care provider or go to the hospital right away (see page 66).

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 pee (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 give birth.



Baby drops lower near the end of pregnancy.

Mucus Plug

While you are pregnant, you have a thick mucus plug in your cervix (opening of the womb or uterus). As the baby's birth gets closer, your cervix begins to thin and open, and the plug comes out. When this happens you will notice thick mucus on your underwear, or in the toilet, or you may not notice it at all.

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 like spotting, not like a period. Tell your health care provider when this happens.

Bag of Water Breaks

Your baby is inside a bag of water (amniotic sac) in your womb (uterus). When the baby is ready to be born it is normal for the bag of water to break. This is an important sign. When it happens, you may have a little or a lot of water leaking from your birth canal (vagina). Sometimes people do not know whether this is water or pee (urine). Sometimes the waters break before labour begins however the most common time for the water to break is 8 cm dilation. If you are not sure, call your health care provider.

When your bag of water (amniotic sac) breaks:

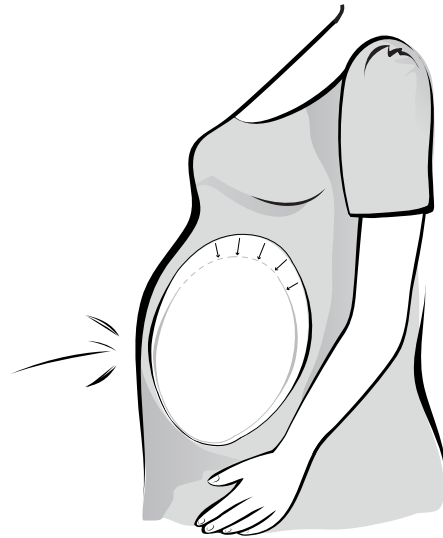
- Write down the time that your bag of water broke.
- Look at the colour of the water (it should be clear not brown or green). Some spotting of blood can be normal.
- Notice if there is a smell (it should not smell strongly).
- Do not use a tampon – use a pad in your underwear.
- Follow the instructions that your health



- care provider or hospital give you.

Contractions

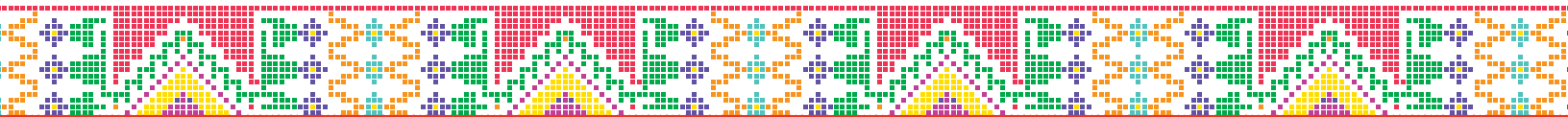
Late in your pregnancy you may have contractions (uterus tightens, rests, and tightens again) that are strong. They may come and go for hours or days and then stop. These contractions are helping your womb (uterus) get ready for birth and are called pre-labour or Braxton-Hicks contractions.



First Nations Beliefs

Our Nuu chah Nulth belief as shared with me by my dad, a spiritual person of our people: "The spirits of our people reside in the milky way. When a woman goes into labour, that is the moment the spirit begins its journey to earth to be one of the people. At the moment of crowning and the head coming out, the baby's spirit enters the body to reside there until the journey is begun again at death back to the milky way." Cree traditional beliefs are similar to this. Ask an Elder for more details.

"In Anishinaabe culture, the waters are considered sacred. A long time ago, they used to sing a special honour song when the waters broke."



Pre-labour or Braxton-Hicks contractions	True Labour contractions
<p>Do not get stronger.</p> <p>Do not become regular.</p> <p>Go away with walking.</p> <p>Feel strongest in front.</p> <p>There is no bloody show.</p>	<p>Get stronger.</p> <p>Become regular and closer together.</p> <p>Get stronger when you walk.</p> <p>May begin in back and move to front.</p> <p>A bloody show is usually present.</p>

The chart on the next page will help you know when you are really in labour.

When to go to the Hospital, Birthing Centre, or Call Your Midwife

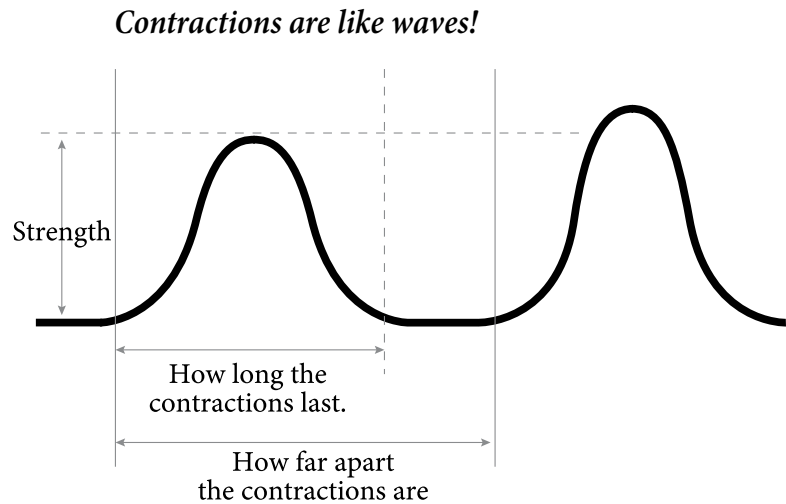
- When you are bleeding from your birth canal (vagina), more than light spotting.
- When your contractions are 5 minutes apart and about a minute long for an hour (your health care provider may ask you to go to the hospital earlier).
- When your bag of water (amniotic sac) breaks unless given other instructions by your care provider.

Beautiful Drumming and Singing

I was at a birth with an Anishinabeg woman who was having her first baby. She had planned a home birth, but it was a long birth. After lots of pushing, the woman became exhausted and the baby was not descending any further. We tried different positions for pushing, different tricks we had to bring the baby, and then thought, “Okay, what do we do now? We’ll have to move into the hospital.” Her sister picked up her drum, went to another room, and started singing and drumming. After hearing the sounds, the woman became revitalized and began to push with renewed effort and vigor. The baby was coming! We asked her sister to keep drumming. Soon after, the baby was born to the sound of that beautiful drumming and singing. It was amazing! The cultural aspects of care helped that woman and helped that baby come into the world. Everything was brought together in that moment. It was a really beautiful experience. As midwives, we were running out of ideas. It was up to the family, the community, perhaps the spirit world, to help out.

Timing Your Contractions

- Begin timing at the start of one contraction. Stop timing at the start of the next contraction.
- When labour first starts, the contractions are usually far apart.
- Confirm with your health care provider when you should call or go to the hospital.

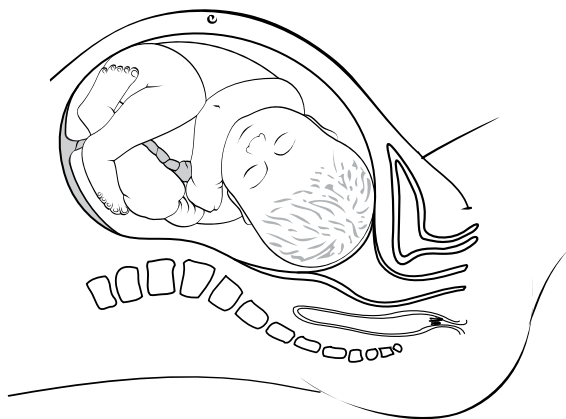


Labour Record				
Contraction # (e.g. 1,2,3...)	Start Time	End Time	How long was the contraction?	How strong was the contraction?

Birthing Songs

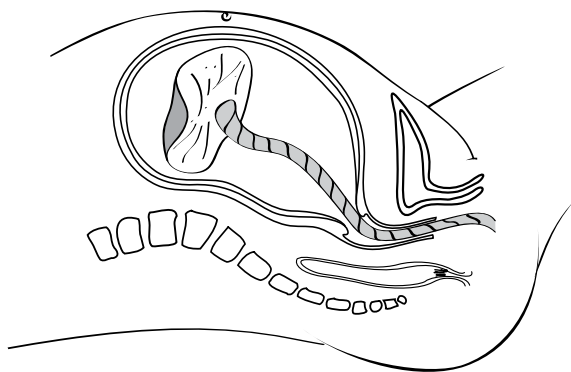
During labour, songs are sung to the woman and the baby. This is done to help ease her pain and as a guide for the baby's spirit. The songs are typically birthing songs and lullabies. The song that was sung to me was about a canoe full of warriors coming home from battle and it was a long row home and they were so tired so tired, their arms are weary and they are missing home. They can't wait and they need to be home and when they get there they will feast and be rested. It was a beautiful song with a very powerful rhythm.

The Four Stages of Labour



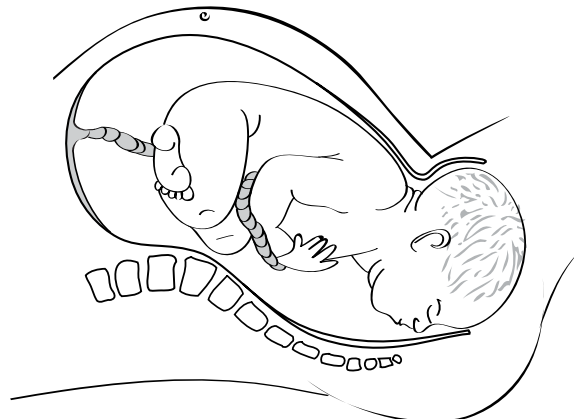
Labour

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 (4 inches). Your baby will move down into your pelvis.



Third Stage of Labour

During this stage you will be pushing the placenta out. Ask your care provider about delayed cord clamping. Who wants to cut the cord?



Delivery

You will have more contractions. They will be very strong. You will feel the need to push. Your baby will be born.



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. This is a good time to start breast feeding.

Contractions

Contractions feel like menstrual cramps at first, and then they get stronger. They come and go in waves, with shorter and shorter time between them. It is important to go with the flow and stay relaxed. It is your body expanding for the baby to come through the birth canal. It is important for your partner or support person to stay positive, tell jokes or offer encouragement, a hand to hold or to sing.

Staying Comfortable during Labour

Contractions come and go during labour. You will have a short rest period in between contractions.

Here are some ways to stay comfortable during a contraction:

- Try using a breathing exercise. You may learn this in a prenatal class, or ask someone to show you.

Cedar Bath

For some First Nations, cedar is a medicine. Some Elders say a baby's first bath should be with cedar to help the baby grow strong and healthy, and help the belly button heal. Women can also have a cedar bath when feeling tired or not well. Talk to a knowledge keeper in your community for more information.



Anishinabeg Teachings

I was taught to bring the placenta to my home territory. The placenta is then buried which brings it back to the land. I did not get to keep the placenta of my first child, but in my second pregnancy, I was able to keep the placenta. After my baby was born, the midwife showed me the placenta and how the veins and arteries formed the pattern of a tree.

The umbilical cords were kept once they dried up and fell off. These were put in the medicine bundle. In other Anishinabeg communities, some women put the cord in the home near the attributes the parents want the child to have. For example, one woman put the cord in a medical textbook because she wants her child to become a doctor.

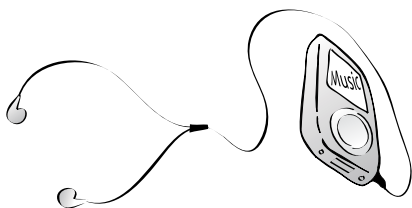
- Try to find something to look at or think about during your contractions. Some people look at a picture or repeat a saying or prayer.



- Have someone massage your lower back or press on the place where it hurts. It is very common to request a different kind of massage as the labour progresses.



- Listen to music.



- Have a shower or bath.



- If you are hungry, you can eat during labour. If you do not want to eat food, try drinking water/juice or chewing on ice chips/popsicles.



- Go to the bathroom every hour. Having an empty bladder gives your baby room to move down.



- Try changing position.

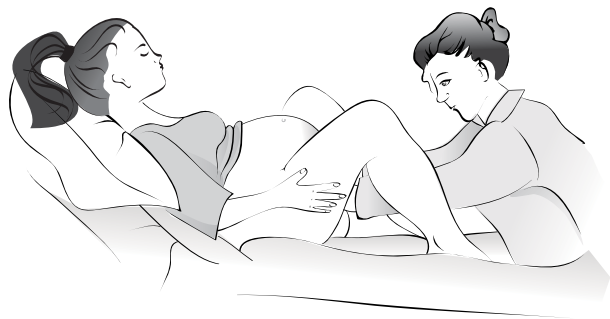


Medical Procedures during Labour and Birth

Sometimes babies need some help to be born. Here are some medical procedures that your health care provider may use. Talk with your health care provider about these during your prenatal visits. This will help you to know what to expect and to be aware of the risks and benefits of each procedure.

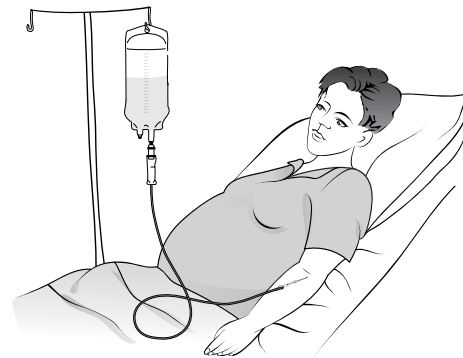
Induction

- Ways to start your labour with special medications that mimic your hormones
- Labour may be induced because the baby is overdue, the bag of water (amniotic sac) breaks but there are no contractions, or for special health reasons.



Pain Medication

- Intravenous Infusion (IV) may be used to give you fluids, medication, or pain medicine through your arm.
- An Epidural may be used to give you pain medicine through your back, into the spinal spaces.



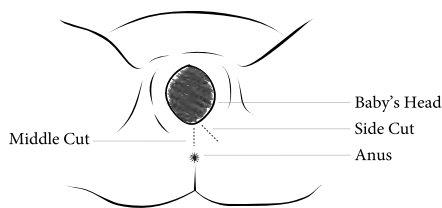
Fetal Monitoring

- A machine called a fetal monitor may be used to listen to the baby's heart beat. It can also be used to check your contractions.



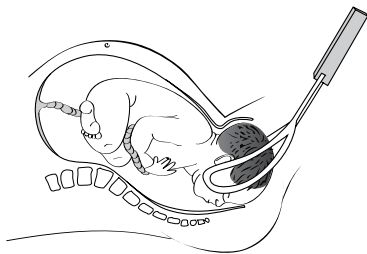
Episiotomy

- This is a small cut to make the opening of the birth canal (vagina) bigger.
- The cut may be in the middle or on the side.
- It helps the baby to come out if the baby needs to be born quickly.
- You will need to have stitches.

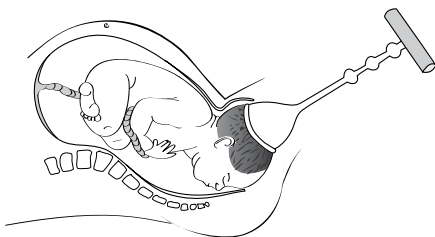


Forceps and Vacuum Extraction

- Forceps are a spoon-like tool that fits safely around the baby's head.



- Vacuum extraction uses a soft cup that fits safely on top of the baby's head and is attached to a machine.



They are used when:

- The mother is too tired to push effectively on her own.
- The baby is not in a good position to be born.
- The baby needs to be born quickly.

Caesarean Section (C-section)

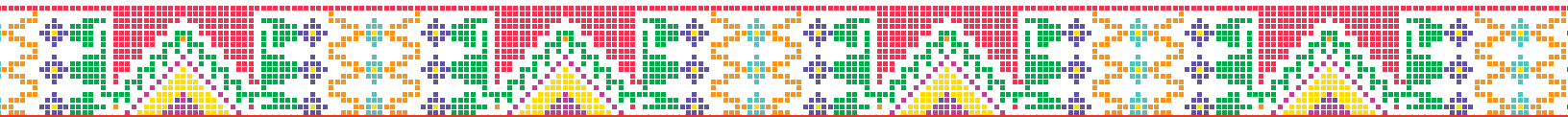
- This involves the baby being born through a cut in your abdomen and womb (uterus).

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.

Having a C-section may be unexpected. Your health care provider will let you know if a C-section is needed to help your baby be born safely.

- Labour is very strong with little progress.



My Notes about Labour and Birth

Think about writing about your labour and birth on this page. Or you can ask someone to write down information for you.

You will likely have lots of questions about labour and birth. Here are a few examples of common questions to ask your health care provide:

- *Are there classes in my community to help me learn about labour and birth?*
- *How can my traditions be included?*
- *Is my baby healthy?*

Questions I want to ask:

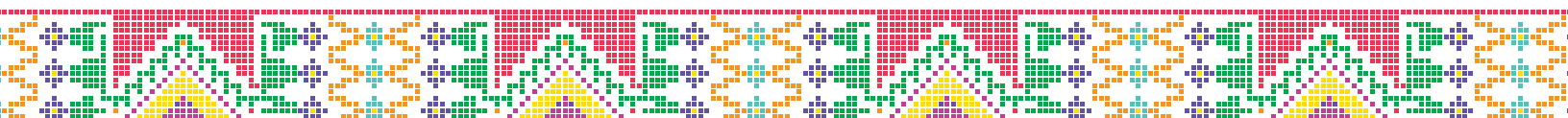
People I can go to for help and support:

I plan to learn more by:

Changes I plan to make:

My notes about the birth of my baby:

8. After Your Baby is Born



8. After Your Baby is Born

Introduction

This chapter has information to help you prepare for your baby. It will also help you and your baby in your first few days at home.



If your baby was born in the hospital, you will stay about 24 hours if all is well. If you have midwifery care, this might be a home visit. If you had a c-section, you will likely stay a few days. This is a good time to ask questions about yourself, your baby, and about breast feeding. For many women, this is a time of joy and celebration with family and friends.

If you gave birth away from your home community, think about how you can stay connected with your family.

Perhaps:

- You can bring small items or photos with you that remind you of home and family members to hold or to look at.
- You can talk on the phone or computer with family (Skype / Whatsapp etc).
- You take pictures or videos of your new baby to share with family when you get home.
- You can show your baby pictures of your home community and family members.
- Family members can send gifts for the baby, or plan a welcome when you return home.

It is important to care for yourself after you have a baby. You may be tired. Your body has gone through many changes. Take the time to rest. It is a good idea to try sleeping when your baby is sleeping. In some communities, the mother is expected to rest for 10 days after the birth. The first 4 days are especially important, by many they are considered a part of the ceremony that is birth and arrival of a new life.

Changes to your family life are normal with the birth of a new baby. The way things worked before your baby was born might be different now. This is also normal. Talk to important people in your life. You can also talk to your health care provider about new feelings, roles, or responsibilities.

A public health nurse or your midwife may visit you in your home to offer care towards keeping you and your baby healthy and well. This is a good time to ask about birth control, if you are interested. Women can get pregnant before their first period returns after birth.



Birth Registration

Registering a Birth in Ontario

You can register your baby's birth online, or you can ask someone to help you do this. You can also request a birth certificate in the same way.

www.ontario.ca/page/register-birth-new-baby#section-3

Applying for Indian Status

Applications for Indian Status can be completed online or you can ask someone to help you do this.

www.ontario.ca/page/indian-status-and-identification-cards

Sense of Belonging

Once the child is born, how does the community support welcoming and nurturing and a sense of belonging right from day one? In some communities, each community member would welcome the baby. The baby would be passed around or greeted while in their parent's arms. The baby belongs to the collective, and is supported by the collective. Thus the child knows responsibility to the community.

Changes to Your Body after Birth

There are many changes that will happen to your body after birth.

Afterpains

- You may feel contractions after birth – this is normal. Your womb (uterus) is going back to a smaller size.
- Afterpains are not usually felt after the first birth.
- You may feel afterpains most during breast feeding. This is normal because breast feeding helps the womb (uterus) return to its usual size.
- Afterpains usually go away after one week.
- If the afterpains don't go away after a week, or are very painful, talk to your health care provider.

You might be considering spacing your children apart and how much time to wait. Now is a good time to consider your birth control options if you are interested. It is possible to become pregnant again before your period /moontime returns to you. Some birth control methods can effect breastfeeding. Have a discussion with your health care provider and/or go online to see options that would work for you. No one should be pressuring you into making permanent birth control decisions at this time.

www.sexandu.ca/contraception/

Bleeding from Your Birth Canal (Vagina)

- You will have bleeding from your birth canal (vagina) for 2 to 6 weeks.
- At first, the bleeding will be heavy and dark but will slow down after a few days.
- The colour should change from red to brown to pink to white.
- Use a pad during this time. Do not use a tampon. Tampons can be dangerous and increase infection at this time.
- If the flow becomes heavier than usual or if large clots are coming out, contact your health care provider.
- If your blood smells bad, contact your health care provider.

Sore Perineum

- The area between your legs (perineum) may be sore or swollen.
- You can reduce the pain by freezing a damp maxi pad and putting it in your underwear.
- Some people find comfort by sitting in a warm bath. Sitz baths can also be helpful.
- Keep the area clean by washing with warm water after you use the toilet; usually midwives or hospitals provide squirt bottles to do this.
- If your stitches open, or you notice a bad smell, contact your health care provider.

Constipation

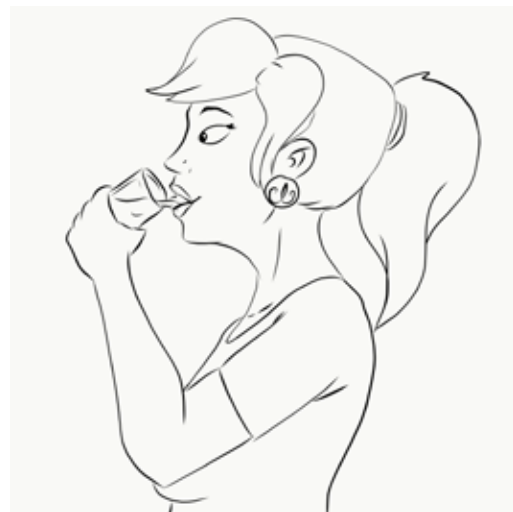
- Having a poo (bowel movement) after having a baby can be difficult. Eating foods high in fibre like whole grains, fruit, and vegetables, and drinking lots of water helps. A glass of prune or pear juice a day can really help!

Breasts/Chest

- Most people's breasts/chest get firmer and bigger because milk is being made.
- Breast milk is yellow or clear at first. This is called colostrum. It is very healthy for your baby.

Hemorrhoids

- Some people get hemorrhoids (painful bumps around your anus) during and after pregnancy. Eat foods high in fibre and drink lots of fluids. You can ask your health care provider for help.



Hard to Pee (Pass Urine)

- It may be hard to pee (pass urine) for a couple of days after your baby is born.
- Drink lots of fluids. Go to the toilet often, even if you don't feel the need to pee (pass urine) this will help reduce your bleeding.
- If it burns or hurts when you pee (pass urine), contact your health care provider.



Getting Your Period

- Your period may not start until after you stop breast feeding.
- If you are not breast feeding, your periods will probably start within 2 months of having your baby.
- Remember, you can still get pregnant even if you do not have your period. Talk to your health care provider about birth control options that are right for you.

Having Sex

- You may be very tired after your baby is born. You need time to heal and recover after giving birth. Taking care of a new baby can make parents very tired.
- Talk to your health care provider about when it is safe for you to have sex, usually it will be a month to six weeks.
- Wait until you are ready to have sex. Talk to your partner about how you are feeling. Explore other forms of intimacy if you feel up to it.

www.whattoexpect.com/family/6-common-sex-after-pregnancy-problems-and-solutions

www.mayoclinic.org/healthy-lifestyle/labor-and-delivery/in-depth/sex-after-pregnancy/art-20045669



Physical Activity after Giving Birth

- Taking care of yourself helps you to take care of your baby. Being active after giving birth is good for your body, mind, and emotions.
- Ask your health care provider or public health nurse about activities after having a baby - avoid doing too much, too soon!

If you had a Caesarean section

- If you had a Caesarean section (C-section), you will need to take extra care and have extra rest while you heal internally.
- Talk to your health care provider about how to take care of yourself in the first few weeks after the baby is born.
- Ask for help.



Changing Feelings

After your baby is born, you may feel excited and tired. You may have many new feelings.

Baby Blues

It can be normal to feel sad or cry easily for one or two weeks after your baby is born. This is called the baby blues. The baby blues happen for many reasons:

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

Here are some tips to help you cope with the baby blues:

- Before leaving the hospital, ask a lot of questions. Write things down or get a handout if you need to. Memory doesn't work as well when you are hormonal or tired.
- Try to get as much sleep as you can when you get home. Sleep when your baby sleeps.
- Ask your partner, family, and friends to help with cooking, cleaning, and doing errands.
- Don't try to do too much. Keep visits short.
- Be patient with yourself. Give yourself time to adjust. Know you are the best parent for your baby - your baby chose you.



Postpartum Depression

For some people the baby blues don't go away. Other people begin to have these feelings a few weeks or even months after the baby was born. If these feelings last for 2 weeks or longer, you may have postpartum depression or anxiety disorder. You need to contact your midwife, doctor, or nurse practitioner right away.

You may be feeling:

- As if you are not yourself any more.
- Like you have no interest in things you used to enjoy.
- Like you have no interest in your baby and may even feel scared to be alone with your baby.
- Like you can't relax or sleep.
- Like eating all the time or not wanting to eat.
- Like your heart is beating too fast.
- Like you have a lump in your throat.
- Sad, tearful, alone, worried, or nervous.
- Overwhelmed, ashamed, guilty, upset, or angry.
- Upset when you are with other people, or scared when you are alone.
- Tired all the time and wanting to sleep.
- Unable to sleep, even though you are very tired and your baby is sleeping.
- Sweaty, numb, or tingling.

Some people have strange thoughts or pictures in their mind. These thoughts and pictures keep coming back and are usually negative. They may scare you and you may feel scared to talk about them. This happens to many mothers. Talk to your health care provider about your

thoughts and pictures. Once you have talked about them, you may find they don't come back as often and after a time they may go away. Mindfulness exercises can be extremely helpful for helping with this.

If you feel like hurting yourself or your baby

Rarely, some people may feel like hurting themselves or their baby. If you have these feelings, call 911 or your local emergency number.

For information and support

Online Mental Health Help from Ontario Telemedicine Network and Ontario Ministry of Health /Peer Support

www.bigwhitewall.ca/v2/Home.aspx?ReturnUrl=%2f

Mental Health Helpline

1-866-531-2600 (24 hours a day 7 days a week)
www.mentalhealthhelpline.ca

Ontario Telehealth

1-866-797-0000 TTY: 1-866-797-0007
(24 hours a day 7 days a week)

Best Start Resources on Maternal Mental Health

www.resources.beststart.org/product-category/resources/mental-health/

Mood Disorder Society of Canada

www.mdsc.ca

Your Local Public Health Department

1-800-267-8097

When to See a Health Care Provider

See a health care provider right away if:

- There is a bad smell or large blood clots coming from your birth canal (vagina).
- The amount of blood coming from your birth canal (vagina) is suddenly heavier than usual.
- Blood is still coming from your birth canal (vagina) after 6 weeks.
- Your stitches open.
- You think you have postpartum depression or anxiety disorder (see page 99).
- You are having thoughts of harming yourself or your baby.
- You have a fever (greater than 37.5°C).
- You think something is not right.

Caring for Your Baby

There is a lot to learn with a new baby. This book gives you information that you may need in the first few days after your baby is born. You can learn more by talking with other parents and family members that you trust, or talking with public health or your community health nurse.



Birth of a Child - A Haudenosaunee Teaching

What happens when a child is born? We need to be patient teachers and treat babies as able-free-thinking-capable individuals—just like you reading this now. Afford them that respect because we say the place where they come from they speak Kanienkehá. I've even heard it said, that in some houses they call them Sotha (Grandfather/Grandmother) because of the knowledge they carry as they are tied to the Sky World when they arrive here. So, when they are born this is the most Powerful and Vulnerable time. The first few minutes of birth set the stage for their entire life and our people understand this. So, that is why we say, "They are a Gift from the Creator" and that they have arrived. Words that are passed are said to make the child feel welcome that they have chosen to come here.



For information or support

About Kids Health

Information about child health.

www.aboutkidshealth.ca

Best Start Resource Centre

Online resources about prenatal and child health.

www.beststart.org

Families Canada

Parenting resources, including a directory of family resource programs across Canada.

www.familiescanada.ca or (613)237-7667

Caring for Kids

Child health information.

www.caringforkids.cps.ca

Community Action Program for Children (CAPC) (Canadian Government)

Programs to address health and development of young children (Aboriginal Head Start, Canadian Prenatal Nutrition Program, Nobody's Perfect Classes)

www.canada.ca/en/public-health/services/health-promotion/childhood-adolescence.html

Growing Healthy Canadians

Information on how to promote the well-being of children.

www.growinghealthykids.org/

Infant Care

Information about infant care.

www.canada.ca/en/health-canada/services/infant-care.html

EarlyON Child and Family Centers

Parenting information and parenting programs.

www.ontario.ca/page/find-earlyon-child-and-family-centre

Ontario Federation of Indian Friendship Centres

www.ofifc.org

Your Local Public Health Department

Public health nurses provide information and support.

<http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx>

When to Get Help for Your Baby

If your baby has any of the following signs, or you feel something is not right, call your health care provider right away. Do not wait.

- Your baby is hard to wake or seems very weak.
- Your baby is breathing very quickly or has trouble breathing.
- Your baby's lips or ear lobes are blue or grey.
- Your baby is losing weight, or not gaining weight.
- Your baby has a fever (has a temperature above 37.5° C or above 99.5F).
- Your baby has sunken eyes, or the soft spot on the top of the head is sunken.
- Your baby has a dry mouth, lips, tongue, or nose.
- Your baby's skin is pale, cold, and moist.
- Your baby's whole body, arms, and legs are shaking (having a seizure).
- Your baby vomits more than twice in one day (spitting up is normal, vomiting is not).
- Your baby is passing less pee (urine) than usual, or the pee is a dark yellow in colour.
- Your baby has a lot more poops (bowel movements) than usual, and they are watery.
- If your baby's poops are staying very dark after the fourth day or have stopped completely, contact your care provider.
- Your baby usually has regular poops (bowel movements), but these suddenly stop.
- Your baby feeds poorly or refuses to eat.
- Your baby cries more often or differently. Nothing you do seems to help.

BreastFeeding/Chestfeeding

Breastfeeding or chestfeeding is one of the best things you can do for your baby and yourself. For the first 6 months, human milk is the only food a baby needs. Most parents can develop a good supply to exclusively provide human milk.

All babies need vitamin D. It is recommended to give 400 IU of vitamin D daily to breastfed babies starting at birth. Some infants may need more vitamin D. Talk to your health care provider.

After 6 months, babies start eating other foods. Continue to provide breast milk for 2 years or more. It is important for your baby to receive breast milk. Breast or chestfeeding for any period of time is better than not breastfeeding at all.

Breast milk is good for your baby because it:

- Protects your baby against illness.
- Helps prevent your baby from having an upset tummy.
- Helps your baby's jaw and teeth to develop properly.
- Is always fresh and ready.
- Provides closeness and warmth from you to your baby.
- Promotes good health and brain development.
- Protects your baby from Sudden Infant Death Syndrome (SIDS).



Learning about Breastfeeding or Chestfeeding

Learn about how to do this before you have your baby. Talk to people in your prenatal class, explore resources, or talk to your health care provider.

- Breastfeeding/chestfeeding is good for you because it:
- Helps your womb (uterus) to quickly return to its normal size.
- Helps protect you from cancer.
- Saves time and money.
- Helps you bond and communicate with your baby.

Best for Baby





















Breastfeeding is best for baby. human milk is medicine – it is medicine for the baby.

Facts about breastfeeding/chestfeeding:

- Providing human milk to your baby can provide a lot of freedom as well as present challenges. You can feed your baby anytime and anywhere you feel comfortable. You do not need to take along bottles or formula. There is no need to worry about where to warm up the formula or about sterilizing bottles.
- People who breastfeed or chestfeed can eat all foods. You can eat what you like. There are no restrictions on what you can eat while producing human milk. Only rarely do babies react to the food a parent eats. If that happens, speak with your health care provider.
- If you smoke you can still breastfeed/chestfeed. If you cannot quit smoking, it is best to smoke after you offer milk to your baby.
- In Canada, everyone has the right to breastfeed/chestfeed in public. Some people feel more comfortable putting a thin blanket over their shoulders when breast feeding in public. Do what makes you feel safe and protected.
- Most people make more than enough milk to feed baby. The amount of breast milk depends on how often and how well your baby feeds. The more your baby suckles, the more milk your body will make. Some people may be prescribed medications to boost their milk supply.
- Breastfeeding/chestfeeding does not hurt. In the first few weeks of breast feeding, it is common to have sore or tender nipples. The most common reasons for pain are poor positioning or a poor latch. If you feel pain after the first week, be sure to get help.
- You can usually tell if your baby is getting enough milk. You can tell that your baby is getting enough to eat by the number of wet and dirty diapers and by baby's weight gain. You also can tell by the way your baby feeds. Sometimes new babies are sleepy and parents need to wake them for feedings.
www.lllc.ca/joint-statement-use-term-chestfeeding
- www.llli.org/breastfeeding-info/transgender-non-binary-parents/
- www.theatlantic.com/health/archive/2016/08/chestfeeding/497015/



SIGNS THAT FEEDING IS GOING WELL

Your Baby's Age	1 WEEK							2 WEEKS	3 WEEKS
	1 DAY	2 DAYS	3 DAYS	4 DAYS	5 DAYS	6 DAYS	7 DAYS		
How Often Should You Breastfeed? Per day, on average over 24 hours	       							At least 8 feeds per day. Your baby is sucking strongly, slowly, steadily and swallowing often.	
Your Baby's Tummy Size	 Size of a cherry		 Size of a walnut		 Size of an apricot		 Size of an egg		
Wet Diapers: How Many, How Wet Per day, on average over 24 hours	 At least 1 WET	 At least 2 WET	 At least 3 WET	 At least 4 WET	 At least 6 HEAVY WET WITH PALE YELLOW OR CLEAR URINE				
Soiled Diapers: Number and Colour of Stools Per day, on average over 24 hours	 At least 1 to 2 BLACK OR DARK GREEN		 At least 3 BROWN, GREEN, OR YELLOW		 At least 3 large, soft and seedy YELLOW				
Your Baby's Weight	Most babies lose a bit of weight in the first 3 days after birth.			From day 4 onward, most babies gain weight regularly.					
Other Signs	Your baby should have a strong cry, move actively and wake easily. Your breasts feel softer and less full after breastfeeding.								

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Breast milk is all the food a baby needs for the first six months.

You can get advice, help and support from:

- Your health care provider.
- Telehealth Ontario's specialized breastfeeding services support line at 1-866-797-0000 or TTY at 1-866-797-0007.
- Bilingual Online Ontario Breastfeeding Services directory at www.ontariobreastfeeds.ca.

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For information and support

Canadian Lactation Consultant Association

Find a lactation consultant.

www.ilca.org/why-ibclc/falc

Chestfeeding Information

www.lllc.ca/joint-statement-use-termchestfeeding

Your Local Public Health Department

www.health.gov.on.ca/en/common/system/services/phu/locations.aspx

La Leche League Canada

Information, videos and support for breast feeding.

1-800-665-4324

www.LLlC.ca

Public Health Agency of Canada

Breastfeeding Information

www.publichealth.gc.ca/breastfeeding

Keeping Your Baby Safe

Keeping your baby safe includes having a safe home, choosing safe baby equipment, and

knowing how to keep your baby safe.

Safe Sleeping

Your baby will sleep a lot in the first month. These tips will help your baby sleep safely. They may protect your baby from Sudden Infant Death Syndrome (SIDS).

- The safest place for your baby to sleep is in a crib, cradle or bassinet beside your bed. It is not safe for your baby to sleep on a couch, waterbed, or in a bed with another adult or child. See page 107 for information crib safety.
- Lay your baby on her or his back to sleep, **not on the tummy or on the side.**
- Remove pillows, comforters, quilts, toys, stuffed animals, bumper pads, plastics, and mattress wrapping from the crib.



- Use a firm mattress and a fitted sheet.
- Keep your baby warm but not hot. If your baby is sweating, this means your baby is too hot.
- Step outside to smoke. Ask friends and family not to smoke in your home. Keep smokey clothes away from baby.
- Breastfeed/chestfeed your baby.
- Keep emergency phone numbers near your phone.

For information

Safe Sleep for Your Baby

www.youtube.com/watch?v=rZ2NXdZ_sHo

Is Your Child Safe? Sleep Time

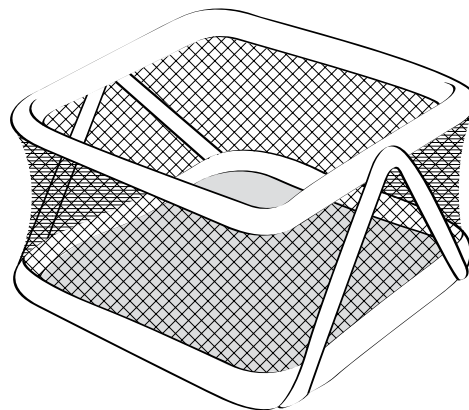
www.hc-sc.gc.ca/cps-spc/pubs/cons/child-enfant/sleep-coucher-eng.php

Safe Baby Equipment

If you borrow baby furniture or equipment, make sure it is safe. Health Canada has information on the safety of baby products. Go to www.canada.ca/en/health-canada/services/consumer-product-safety/reports-publications/consumer-education/your-child-safe/sleep-time.html or call 1-866-662-0666. The Canadian Safety Standards Association (CSA) regulates some types of baby furniture and equipment. The CSA symbol shows that the equipment is safe for use in Canada.

Playpens must

- Not be used for unsupervised sleep.
- Be in good repair.
- Have a sturdy floor with a thin foam pad.
- Have secure hinges that cannot pinch your baby.
- Have sides made of very fine mesh with no rips.



Cribs must

- Be made after 1986 and must not be a drop side crib, prohibited since 2016.
- Be put together carefully. Follow the instructions.
- Be sturdy. Make sure the crib is built with screws and bolts, not with hooks or clamps.
- Have a secure support system for the mattress.
- Have a firm mattress that fits snugly. The mattress is too small for the crib if you can fit more than 2 fingers between the mattress and the side of the crib.
- Have no pillows, toys, or bumper pads in them.



Baby swings, bouncers, strollers and car seats are not for unsupervised sleep. Sleeping in a sitting position can cause your baby's head to fall forward which can make it hard for your baby to breathe. For this reason, it is important to move your baby to a crib, cradle, or bassinet to sleep, or when you arrive at your destination.

Baby Seats must

- Have a wide and sturdy base.
- Have safety straps.
- Have a non-slip base.
- Always be set down on the floor, never on a table.

High Chairs must

- Be far away from the stove and from kitchen counters.
- Have a wide and sturdy base.
- Have a safety belt.
- Have no sharp edges or parts on the tray and the back of the chair.



Strollers

- Must be sturdy.
- Must have brakes that work.
- Should be the right size for your child's height and weight.
- Do not carry extra children in the stroller.
- Make sure to use the belt system.
- Do not use pillows or blankets as padding.

Walkers

- No walkers are safe. They are banned in Canada because they are not safe.



For information

Parachute Canada

Information for parents on car seats to reduce children's injuries and deaths.

1-888-537-7777

<http://www.parachutecanada.org/injury-topics/topic/C2>

Health Canada Consumer Product Safety

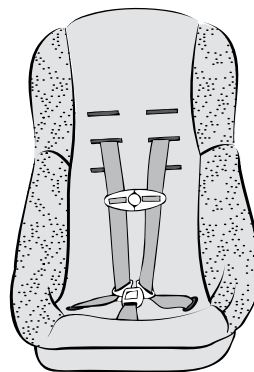
Is Your Child Safe?

www.canada.ca/en/health-canada/services/consumer-product-safety/reports-publications/consumer-education/your-child-safe/is-your-child-safe.html

Car Seats

If your baby was born at a hospital or a birthing centre, the nurses will check that you have a baby car seat before you go home, however you must know how to use it safely.

- Check the car seat to make sure it has a label showing that it meets the Canadian Motor Vehicle Safety Standards (CMVSS).
- Check the car seat's label to make sure it is less than 10 years old.
- A car seat is not safe if it was in a car crash or dropped from a height of 1 metre (3 feet) or more.
- Make sure the car seat comes with instructions and that it has all of its parts. Call the company that makes the car seat if something is missing.
- Make sure the car seat does not have a safety problem. Call Transport Canada at 1-800-333-0371 to find out.



Make sure the car seat is in good condition:

- The plastic has no cracks or chips.
- The frame is not warped, rusted, or has broken rivets.
- The harness straps are not cut, frayed, or have broken stitches.
- The seat padding is not ripped.
- All the harness buckles work properly.

Using a car seat

Car seats for babies must face the back of the vehicle. When your baby has reached a certain age, weight, or height, you may need to use another car seat. Read the instructions to find out how to use your car seat. Check to see if there is a car seat clinic in your community to help you learn how to use your car seat safely.

Ask your midwife, nurse practitioner, nurse, or doctor for information.

- Make sure the car seat fits well in your vehicle.
- The safest place for the car seat is in the middle of the back seat of the vehicle.
- The harness straps and buckles are supposed to be snug around your baby. No more than one finger should fit between the harness strap and baby's collar bone.
- The chest clip should be at level of your baby's armpit.
- Read the instructions for your car seat to find out how to position the carry handle.

For information

Ontario Government

Information about choosing and installing car seats.

www.mto.gov.on.ca/english/safety/carseat/choose.htm

Transport Canada

Information about safety in the car for children.

1-800-333-0371

www.tc.gc.ca/eng/roadsafety/safedrivers-childsafety-index-53.htm





Moss Bag and Cradle Board

The moss bag has many uses. It helps in the healthy development of First Nations children. The pregnant woman usually creates a moss bag while the baby is growing in the womb. While she is making the moss bag she is thinking positive thoughts about her baby and putting all her good wishes for the baby into the creation of the moss bag. The moss bag gives the feeling of security felt in the womb.

Creating the moss bag strengthens the bond between the mother and the unborn child. It puts positive energy into the bag. This protects and nurtures the baby while they are snuggled inside. The moss bag gets its name from a bag with moss in it. Before the days of cloth and disposable diapers First Nations people used moss bags made out of animal hide. Spagnum Moss was placed between the baby's legs and all around the bottom. When the baby peed, the moss would absorb the urine and not cause irritation to the skin. The baby was taken out and fresh moss was then placed in the bag again.

Today, we place our baby in the moss bag with their diaper on. There is no need for moss, but placing the baby in the bag is still beneficial. When a baby is wrapped in a moss bag they become calm. By securing their arms, legs, and full body, they are comforted. When the baby is wrapped snug in the moss bag we then can place the baby into a cradle board.

We place our babies in a cradle board (also called a Tikanagan in Algonquin/Cree/Anishinaabe languages) after they have been wrapped in a moss bag. We place the baby inside the moss bag and then attach and secure the bag to the cradle board. The board secures the baby and creates a feeling of safety, like being in the womb. It relaxes the baby, allowing them to sleep or to watch quietly what is going on around them.

A cradle board is a bonding tool that keeps babies close to their mothers. The board allows the baby to develop in a healthy way. They have a chance to use their eyes more. They use other senses to explore the environment around them when they are snuggled and wrapped securely and are unable to use their hands. Their sense of sight and hearing sharpen early. Also by looking around, the baby has to use his/her brain to try to figure out what they are seeing.

Children brought up on a cradle board tend to wait and look over situations before reacting. Babies do not spend all of their time in a cradle board, and most parents see when their babies are ready to get out of the cradle board. Cradle boards are decorated with designs and special items so that the child's spirit will be happy and protected. Great care goes into creating a cradle board. This reflects the great care for the baby.

*There are teachings that go with the use of a moss bag and/or the cradleboard.
Ask a knowledge keeper or an Elder for a teaching.*

Safety Tips

When your baby comes home, here are some important safety tips:

- Never leave your baby unsupervised, except in a crib, cradle, or bassinet that meets current Canadian regulations.
- Always place your baby on his or her back to sleep, at naptime and night time.
- Always support your baby's head. Your baby's neck muscles are weak.
- When changing your baby's diapers or clothes, or bathing your baby, always keep one hand on your baby at all times. Do not turn away or leave the room.
- Never leave your baby alone in a bathtub.
- Test the water before you put your baby in the bath. It should feel warm, not hot. Test the water temperature on your wrist or elbow.
- Do not prop a bottle in your baby's mouth. Your baby could choke. This also puts baby at risk for problems like early dental caries and aspiration infection.
- Be sure toys are sturdy and washable with no small parts.
- Keep small objects out of your baby's reach.
- Tap water should be no hotter than 49°C (120°F). Water heaters can be adjusted in your home to be safer
- Never hold your baby when you are drinking something hot, like tea or coffee, or cooking.
- Avoid smoking near your baby. Smoke outside, away from your baby. Ask friends and family to smoke outside.
- Keep emergency phone numbers where you can see them quickly.
- Make sure you have working smoke detectors, carbon monoxide detectors, and a fire extinguisher in your home.

The best way to keep your baby safe is to stay close to your baby.



When Your Baby is Crying or Fussy

If your baby is crying or fussy:

- Try feeding your baby.
- Check to see if your baby needs a clean diaper.
- Check to see if your baby is too hot or cold.
- Carry or gently rock your baby.
- Take your baby to a quiet room and turn off the lights.
- Softly sing or talk to your baby.
- Read to your baby.
- Give your baby a warm bath or massage.
- Show your baby bright colourful objects.
- Take your baby for a walk outside.

Some babies cry more than others. Sometimes nothing you do will calm your baby. If you are feeling upset because your baby won't stop crying:

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

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

- It's okay to walk away.
- If your baby is crying and you are very frustrated, it's okay to put your baby in a safe place and take a break for 10 minutes to calm yourself down.

It is important to calm yourself before trying to calm your baby. If your baby continues to cry, get medical advice. Your baby may be sick or hurt.

For Information

The Period of Purple Crying

www.purplecrying.info



My Notes about Life with My New Baby

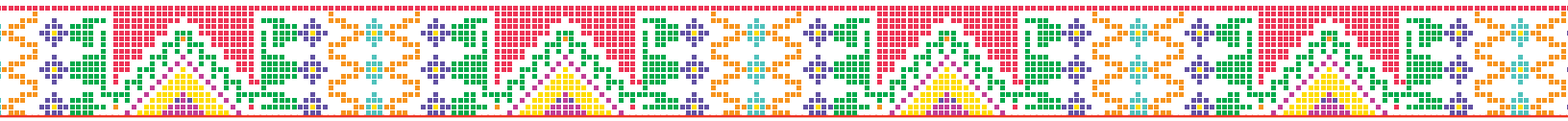
Think about writing about your life with a new baby on this page. Or you can ask someone to write down information for you.

You will likely have lots of questions about the changes in your life. Here are a few examples of common questions new parents ask:

- *How can I help my baby sleep?*
- *When does my baby get immunizations?*
- *When is a good time to think about having another baby?*

Questions I want to ask:

People I can go to for help and support:



I plan to learn more by:

Changes I plan to make:

My notes about my life with my new baby:

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Miigwech! Hiy-Hiy! Niá:wen! Marsee! Thank you! Merci!

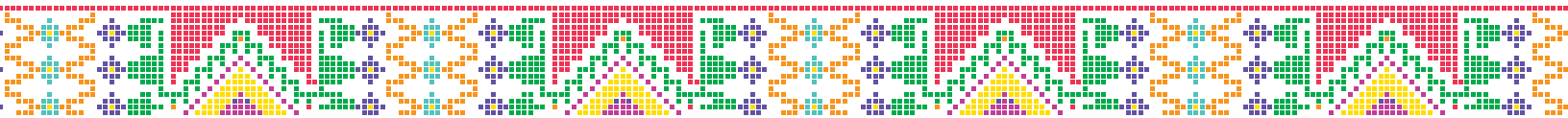
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Best Start by Health Nexus helps service providers to improve the health of pregnant women, parents and young children. Best Start is a key program of Health Nexus.

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