

Healthy Family



A NEW LIFE

Your First Weeks at Home

Welcome home and welcome to life as a parent!

After a few days in the hospital, you may be looking forward to going home and being a family.

On the other hand, many new parents are worried about looking after the baby on their own. A new baby seems so tiny and helpless. You may wonder how you will manage.

There are many places to learn about baby and childcare. Family, friends, public health nurses, and community groups can help. So can books. You may want to get a childcare book you enjoy reading. It can come from your local library or bookstore.

In this section we talk about baby's first six weeks. We focus on taking care of your baby, taking care of yourself, and getting used to life as a family.

During these first weeks as a parent, you may feel excited and tired. Do not forget that being a parent is something we need to learn. It's a new skill! No one is born knowing how to be a good parent. You will learn over time. It is on-the-job training!

Relax. Get as much rest as you can. Focus on loving and looking after your new baby.



What's Normal for a Newborn?

New babies seem helpless, but they can see, hear, smell, taste, and feel. When they are born, they have what they need to live, to grow, and to learn about the world.

What can babies see?

Newborns can see light and dark, shapes and patterns. They can focus and see clearly when things are 18 to 25 cm (7 to 10 inches) away. When you hold your baby in your arms, this is about the distance between her face and yours. Babies like to look at faces more than anything else.

During the first few months, you may notice that your baby's eyes wander or cross once in a while. Many babies do this until they learn to control the muscles around their eyes. If you are worried about your baby's eyes, talk to your health care provider. You can do this when you take the baby for a checkup.

What can babies hear?

Newborn babies have excellent hearing. In fact, while they are still in the womb, they can hear their mother's heart beating. They can also hear noises from outside the womb.

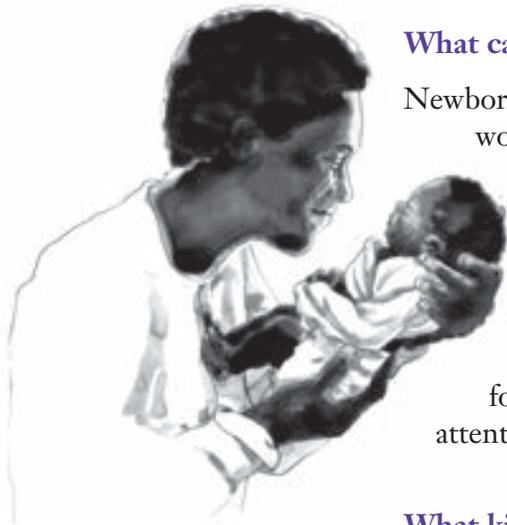
Babies like to listen to voices, music, and humming sounds like a washing machine or a dishwasher.

Sudden loud noises may make a baby cry or wake them up if they are sleeping. Even so, there is no reason to try to keep the house quiet for the baby. Babies get used to normal noises. They do not pay a lot of attention to them.

What kind of sounds can babies make?

New babies can cry. After a few weeks, they can gurgle and make small sounds in their throats. Later, they begin to coo and babble and laugh.

The best way to help babies speak is to talk to them. Sing and talk to your baby as much as you can. Talk while you are feeding, washing, and dressing him. Talk about what you see when you are on a walk together. What you say does not matter. The baby needs to hear your voice.



What kind of movement is normal for a newborn?

Newborns have some control over their muscles. They can move their arms and legs, hold your finger, and turn to face the breast or bottle.

Babies' heads wobble. You need to support the head when you pick up a baby. Your baby will not be able to balance her head alone until she is about 4 months old.

Babies' bodies, minds, and feelings all grow at the same time. Even in the first weeks of life, you are teaching your baby about life.

When you respond to your baby's cries you are teaching her that when she needs something, someone will come and help her.

When you talk and sing to your baby, you are helping him to develop hearing and language skills.

When you smile and make faces at your baby, you're helping her to control her eye muscles so she can focus and see clearly.

When you blow bubbles on your baby's tummy, rub and kiss his little hands and feet, stroke his soft head and cheeks, you're helping him to learn how his body feels and what it can do.

As you play with your baby, love your baby, and look after your baby, you are helping him to develop into a happy, healthy little person.

How Can I Help My Baby Develop?



Caring for Your Baby

Caring for a baby takes skill and practice. No one is born knowing how to bathe, dress, feed, and diaper a baby. Most parents learn these skills as they go along.

Don't worry if you feel awkward and uncertain at first. Before you know it, looking after your baby will seem natural, you will hardly remember that it was something you had to learn.

How Should I Feed My Baby?

For the first six months of life, breast milk is all your baby needs. If you decide to use formula, that is all your baby needs for the first 6 months. Babies can have trouble with solid food if they have it before 6 months.

This means that for now, you only have to decide whether to give you baby breast milk or formula. Your local Public Health Office, prenatal instructor, or your health care provider can give you advice and information to help you.

Breastfeeding

Breastfeeding gives your baby the healthiest possible start. Section 4 - Breastfeeding, explains why breastfeeding is important and talks about building breastfeeding support. Now is the time to start calling on that support.

Breastfeeding is the natural way to feed your baby. But that does not mean that you will naturally know how to do it. Most mothers need advice and support. This is most true during the first month when everything is new.

Love and support from you partner and your family can help you. Friends who have enjoyed breastfeeding their babies can also help. So can a public health dietitian, health care provider, and support groups like La Leche League, breastfeeding clinics, breastfeeding support groups, and Family Resource Centres.

You need to take care of yourself while breastfeeding. Get plenty of rest, eat well, and drink lots of fluids. Eating healthy food will help you feed your baby and keep your energy high. While you are breastfeeding, you need the same amounts and kinds of food as you did when you were pregnant. This means that each day, you need at least:

	Teens (14 to 18)	Adults (19 or older)	Breastfeeding women
Vegetables and Fruit	7	7 to 8	Include an extra 2 to 3 Food Guide Servings each day
Grain Products	6	6 to 7	
Milk and Alternatives	3 to 4	2	
Meat and Alternatives	2	2	

Tips to help you breastfeed

- Do not do too much during the first few weeks. Focus on relaxing and getting used to breastfeeding. If you can, ask friends or relatives to help with cleaning the house or cooking, so you can spend these first weeks taking care of yourself and your baby.
- At first, breastfeed whenever the baby wants to feed. This is called “nursing on demand”. The more your baby nurses (or drinks breast milk), the more milk your body will produce. Feeding the baby small amounts often is the best way to establish a good milk supply.
- During these first weeks, your milk supply will change all the time to meet your baby’s needs. At first you may need to nurse every 2 or 3 hours. The time between feedings will increase until your baby wants to nurse every 3 or 4 hours. Most babies grow a lot when they are 10 days old and at 3 and 6 weeks and again when they are 3 months and 6 months. When this happens, your baby will need to nurse more often.
- Do not give your baby a bottle of milk. If your baby has milk from a bottle, she will drink less breast milk. If your baby is not drinking your milk, your body will not make milk. It is better to wait until you have nursed for at least 6 weeks and have a good supply of milk before you give your baby any bottled milk.
- If you find that you need to give your baby breast milk other than at the breast before the first 6 weeks, talk with your health care provider or a public health dietitian about the best way to do this.

How to breastfeed your baby

Your baby gets milk by sucking on the breast, not the nipple. The baby uses its lips, gums, tongue, cheeks, jaw muscles, and hard and soft palates to feed. It is good exercise! It can help make the baby’s gums, jaws, and teeth healthy and strong.

When you are breastfeeding, you should be sitting in a comfortable way and you should be in a position that allows your baby to “latch on” to your breast. Doing this will keep things going well for you both. Good position and good latching can also prevent problems later on.

When you breastfeed, you need to relax. There should be no tension in your shoulders or back. Make sure that your arms and back have support so you will not strain your muscles. You may want to use pillows and a footstool for more comfort. If you are sore from childbirth, you may need help to put the pillows in the right place.

Once you are in a good position, you can offer your baby your breast. Babies often nurse better when they have skin contact with their mothers. Many babies find the nipple easily, latch on to the breast, and seem to know what to do. Others need some help. Here are some ways to help your baby latch on:

- Have your baby at the level of your nipple before you begin. Use pillows or a rolled blanket to get your baby at the right level.
- Support your breast with your free hand by making your hand look like the letter “C”. This means that your thumb is on top of your breast, and your fingers are under it, far behind the darker skin around your nipples (areola).
- Help your baby’s mouth to open wide. To do this, lightly touch your baby’s lips with your nipple. Move the nipple from the baby’s upper lip, to lower lip, and back again.
- When your baby’s mouth is open as wide as a yawn, pull the baby close to you. Your nipple should be centred upward in your baby’s mouth. Baby’s chin should touch the breast first.
- Make sure that the baby’s mouth is wide open and the baby’s lips are curled out and that his chin touches your breast.
- Allow your baby to suck at the first breast for as long as he or she wants. Then you can offer the second breast, if she is still hungry. Babies will often leave the breast on their own when they are full or need to burp.

If your baby takes only the nipple, gently break the suction and start again. Break the suction by placing your clean finger into the corner of baby’s mouth and pressing against your breast. If you allow your baby to suck without getting a good latch, two things may happen. One, your nipples may get sore. Two, your baby may not get enough milk.

Breastfeeding is a special time for you and your baby. Relax and enjoy it. If you have questions or concerns, talk with your public health dietitian or health care provider.



Commercial Infant Formulas

If you decide to use a commercial formula, your health care provider may suggest a brand. There is not much difference between them.

You must prepare infant formula correctly. Germs can spread and your baby can get sick if you do not.

To learn more about how to prepare formula, contact your local public health office.

If either parent has milk allergies in the family, talk to your health care provider about how to tell if your baby has this kind of allergy.

Commercial Infant Formulas

Vitamin D

- Health Canada recommends that all breastfed babies be given a daily Vitamin D supplement of 10 ug (400 IU).
- You should start giving your breastfed baby Vitamin D at birth. You should continue:
 - until your baby is getting at least 10 ug (400 IU) per day of vitamin D from food (such as drinking 2 cups (500 ml) of milk or formula a day), OR
 - until the breastfed child is one year old.

To learn more about breastfeeding and Vitamin D, talk to your health care provider.

IMPORTANT: Babies fed commercial formula **should not** be given any extra vitamin supplements.

Do I Need to Give My Baby Vitamins?

Fluoride

Fluoride helps make strong bones and teeth. Your baby should not need to have a fluoride supplement. If your family has poor dental health or if you want to know whether fluoride is right for your baby, talk to your dentist.

Do I Need to Give My Baby Fluoride ?

How Much Do Babies Sleep?

New babies nap and sleep when they need to. They do not know about being “awake” or “asleep.” Each new baby develops a pattern of sleeping and waking. As you learn about these patterns, you will know when your baby is sleeping, awake or lying there quietly.

Something you can do to help your baby learn the difference between sleeping and waking is to put him to bed when he is very sleepy and get him out of bed when he is awake. This will help him connect the bed with sleep.

All new parents are tired. It may be months before you will be able to get more than a few hours of solid sleep.

Here are some things you can do to make night feedings easy.

- Make sure the baby is comfortable when you put her to bed. She should be fed, burped, and dressed in comfortable clothes. Be sure the room is warm and dark enough. (You may want to leave a dim light on so you can see during the night.)
- The baby will wake up because he is hungry. The night is too long for him to not have food. Make night feedings as quick and quiet as you can. The baby will go back to sleep faster if he stays sleepy and calm during the feeding. You do not need to go to the baby every time he makes a noise, but do go as soon as you are sure he is crying. Do not give him a chance to be wide awake. Have everything you need ready, such as a diaper. If you burp the baby and change the diaper half way through the feeding, the baby can go back to sleep right away at the end.

To reduce the risk of Sudden Infant Death Syndrome (SIDS):

- Provide a smoke-free and drug free environment before and after your baby is born.
- Breastfeed your baby. Breastfeeding offers some protection against SIDS or crib death. Fewer breastfed babies die from SIDS.
- Always place your baby on his or her back to sleep, at naptime and night time.
- Place your baby to sleep in a crib, cradle or bassinet next to your bed. This is called co-sleeping. Bed-sharing is when the baby sleeps in the same bed as an adult. Bed-sharing can increase the risk of SIDS.
- Provide your baby with a safe sleep environment that has a firm surface and no pillows, comforters, duvets, bumper pads or stuffed toys.
- Make sure your baby is not too hot.

Link: <http://www.phac-aspc.gc.ca> (search for SIDS)

Babies who lie in one position for a long time can develop flat spots on their heads. This happens because the baby's skull bones are very soft in the first year of life. As well, babies have weak neck muscles. They may turn their heads to one side when lying on their backs.

Why do some babies have flat spot on their heads?

To prevent your baby from getting flat spots on his head:

- Change where you put him in the crib each day. For example, one day place his head at the head of the crib, and the next day place his head at the foot of the crib.
- Avoid leaving your baby a long time in car seats, swings, and baby seats where his head will be in the same place.
- Change the way you hold him for feedings. If you use different positions, this will put less pressure on one spot on your baby's head.
- Move toys and mobiles to different places so your baby will turn his head in many directions.
- Put him on his tummy and side to play with him when he is awake. This is also good for your baby's development.



Why Is My Baby Crying?

All babies cry and most babies cry a lot. They cry because crying is the only way they have to let you know that they need something. Babies cannot say “Please change my diaper” or “Feed me” or “I want to have fun.” All they can do is cry.

When your baby cries, try to find out why. The chart on the next page can help. As time goes by, you will know what different cries mean and what to do. The key is to watch and learn your baby’s signals.

Don’t be afraid of “spoiling” your baby by going to him when he cries. Babies cry because they need food, love, hugs or a smile. When you respond to crying, you are helping your baby learn that the world is a good place to be. He is learning that help comes when it is needed. A baby whose needs are met will feel safe, secure, and loved, not spoiled.

Sometimes, no matter what you do, your baby keeps crying. This can be hard to deal with.

WARNING: Babies can be hurt if you treat them roughly or shake them. Shaking your baby can cause death or permanent damage to your baby’s brain. Make sure all the people around your baby know about “shaken baby syndrome.”

It is easy to say “stay calm,” but it can be very difficult to do. If you feel angry and are afraid you might hurt your baby:

- Put your baby safely in his crib and leave the room
- Do something to get rid of the anger. Run, jump, yell, or hit a pillow
- Call for help. Call a friend, family member, help line or Tele-Care 811. Sometimes just talking to another adult can help you feel better.



My baby is crying?	What can I do?
Hungry or thirsty	<ul style="list-style-type: none"> • Feed the baby, especially if more than 2 hours have passed since the last feeding.
Uncomfortable	<ul style="list-style-type: none"> • Burp the baby. • Check diaper pins. • Change wet or dirty diaper. • Change the baby's position. • Gently rub the baby's back. • Make sure the room isn't too warm or too cold. • Make sure the baby is not wearing too many clothes, or not enough.
Not feeling safe (Insecure)	<ul style="list-style-type: none"> • Wrap the baby up in a light blanket. • Help the baby feel safe by moving slowly and calmly. Do not rush or move quickly. • Hold the baby close and cuddle.
Lonely or bored	<ul style="list-style-type: none"> • Talk or sing to your baby. • Move the baby to a room with other people. • Play music. • Rock the baby. • Take the baby for a walk. • Give the baby a toy or mobile to watch.
Too tired	<ul style="list-style-type: none"> • Move the baby to a quiet place. • Give the baby something to suck — your breast or a soother (if you are formula feeding). • Try quiet motion — rocking, patting, riding in a car or carriage. • Turn on the dishwasher, clothes dryer, or washing machine. Babies often enjoy these kinds of sounds. They remind them of the sounds they heard in their mother's body before they were born. • Take a warm bath with your baby (make sure you have someone to hold the baby while you get in and out of the bathtub).
Fussy time of day	<ul style="list-style-type: none"> • This often happens late in the afternoon or early evening. Try the ideas for helping an overtired baby. • Try to plan ahead to make this time of day calmer. For example, get supper ready ahead of time and plan activities to keep your other children busy. • Ask for help during busy times. Ask your partner or someone else to take the baby or to do the chores so you'll be free to care for the baby. You can also use a snuggler (Snuggli™) so you can hold your baby close and still have your hands free. Babies who are held and cuddled for longer periods cry less.

What is Colic?

Colic is not a disease. A baby with colic cries a lot more than other babies. Nothing seems to comfort the baby or stop the crying. It is painful for the baby and very hard for parents. If your baby has colic, do not blame yourself. It is not your fault.

No one knows what causes colic or why only some babies get it. Colic is most likely to occur in the evenings. It starts during the first few weeks of life and, in most cases, ends when the baby is 3 or 4 months old.

Check with your doctor or public health nurse to make sure there is not some other reason for the crying.

If your baby has colic, get as much rest and help as you can. Let other people help with the baby, meals, and other children. Remind yourself that this will not last forever.

A baby with colic:

- Cries as if in pain after a feeding
- Pulls his knees up to his chest as with a bad stomach ache
- May pass gas or vomit
- Does not stop crying for long, no matter what you do

You may find these ideas helpful if your baby has colic:

- If you are using a commercial formula, check to be sure the nipple is full of milk so your baby does not swallow too much air during feedings.
- Burp before, during, and after each feeding.
- Try to stay calm and keep your baby calm. Play soft, soothing music. Hum or sing. Walk or rock your baby. Rub the baby's back for comfort and to help pass gas. Lay your baby on his tummy and rub his back. Or, lay your baby on his back and rub his tummy. Place a warm cloth on the tummy or bath the baby in the tub.
- Use an infant carrier that straps on your shoulders (Snuggli™). It allows you to carry and comfort your baby when you have to do other things.
- Take the baby for a car ride or go for a walk using the carriage. Sometimes the noise and movement help.
- If you smoke, the nicotine goes into the baby with your breast milk. This may be making the baby upset. You may want to stop or reduce your smoking. Or you could only smoke after you feed the baby.
- Do not change your baby's commercial formula without first talking to a health professional.

New babies like to be warm, dry and wrapped up. When you begin to give your baby a bath, she may cry until she gets used to it. This is normal. Do not worry about it.

Most babies begin to enjoy their baths after a few months. It becomes a time for play and exercise, tickles and giggles. It can be fun for all the family.

Babies do not need a bath every day, but you should keep their faces, hands, bottoms, and the folds in their neck, groin, and legs clean. It is not safe and you should NOT clean inside the baby's ears and nose, or under a boy's foreskin.

How Do I Give My Baby a Bath?

Making the Bath Safe

- Do not leave your baby alone in the bath or on the table. Do not turn your back for even a second. Have all you need for the bath with you and ready before you start. If you have to look away or reach for something, keep one hand on the baby.
- Put water in first. Then put the baby in the water. Never add hot or warm water after the baby is in the tub. Test the water in the tub with your wrist or elbow. It should feel warm, not hot. If it feels fine to you it will be fine for your baby.
- When you have put all the water in the bath, be sure that the water in the tap is cold. This way, the baby won't be burned if the tap is turned on by accident.
- Hold the heavy parts of your baby— his head and hips — when you lift the baby in or out of the bath. Use both hands and hold the baby close to your body. Babies are slippery when wet!

Bath Time Tips

Before you begin your baby's bath, be sure you have all the things you will need. They are:

- Basin or tub
- Mild soap with no perfume (scent)
- Towels
- Washcloth
- A soft hairbrush
- Clean clothes and diaper

Choose a room that is warm, with no drafts. Spread out a large towel to lay the baby on. Take off your rings, watch, or other jewelry. Wash your hands and fill the basin with lukewarm water — not hot. Test the water with your wrist or elbow.



When you give your baby a bath, start at the top and move toward the feet. Use only clear water when you wash your baby's face. Use a mild soap on the rest of her body and be sure to rinse well. You need to be sure to rinse the folds on the baby's neck, groin, and legs.

After the bath, wrap your baby in a towel and dry gently. It is best not to use baby powder.

Can I Prevent Cradle Cap?

During the first few months, babies sometimes get cradle cap. This is a yellow, dry crust on the scalp.

To prevent cradle cap:

- At bath time, rub your baby's head using small circles. Dry the head by rubbing with a towel.
- Brush baby's hair and scalp every day.
- If you use soap or shampoo to wash your baby's head, rinse well. Make sure every bit is removed.

If your baby gets cradle cap:

- Do not try to pick it off.
- Rub mineral oil, baby oil or vegetable oil into your baby's scalp.
- Leave for 15 or 20 minutes.
- Shampoo the scalp. Rinse well with clear water. Then gently brush or comb the baby's hair to remove the crusts.

How Do I Take Care of My Baby's Cord?

During the first week, your baby's cord will get smaller and darker. It will dry up and fall off. All you need to do is keep the skin around it as clean and dry as you can. Moving the cord or cleaning around it will not hurt the baby.

In the past, parents were told to gently clean the base of the cord two or three times a day with a bit of cotton dipped in rubbing alcohol. The goal was to keep the cord dry during the baby's bath. This meant it was easier to give sponge baths, rather than tub baths.

Today there are more ideas about how to care for the cord. No one knows for sure what is best. You will get information on how to take care of your baby's cord while you are in the hospital.

Giving your baby a bath in a tub and drying the skin around the cord is safe. It will not stop the cord from dropping off.

Fold the top of the baby's diaper down. The air around the cord will keep it dry. Be sure to change the baby's diapers often.

If you do use alcohol to clean the cord and your baby boy has been circumcised, be careful to keep the alcohol away from his penis.

IMPORTANT Call the doctor if:

- The skin around the cord becomes red or inflamed
- It smells bad
- It is leaking pus or fluid

A baby's bowel movements (BM) change colour and texture over time. They are also different for babies who breastfeed and those who have formula.

The first BM is black, sticky, and does not smell very much. During the first week, the BMs can be greenish black, greenish brown, brownish yellow, greenish yellow, or yellow. You may also notice some mucus.

It is normal for babies to grunt and get red in the face when they have a bowel movement.

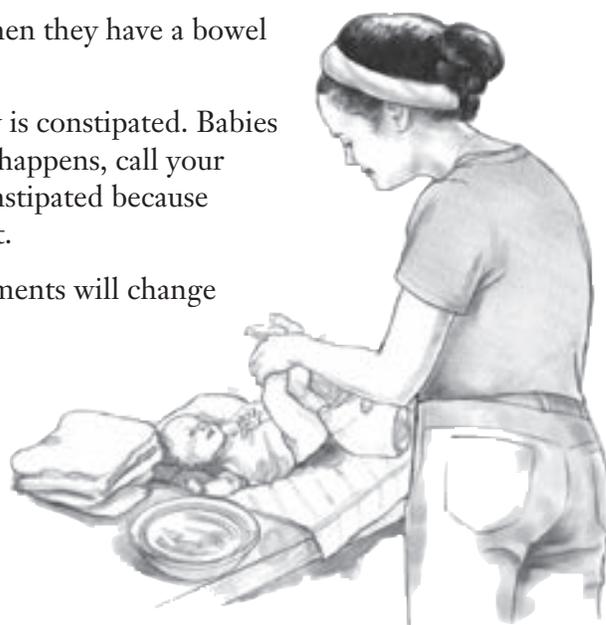
Not having a BM each day does not mean that your baby is constipated. Babies are constipated when their BMs are hard and dry. If this happens, call your health care provider. Breastfed babies are hardly ever constipated because breast milk contains enough water to keep their BMs soft.

When a baby's milk or food is changed, the bowel movements will change as well.

IMPORTANT Call your doctor if:

- BMs are watery and have a strong smell. This could be "the runs" (or diarrhea). The runs can make your baby very sick very quickly.

Bowel Movements (BMs)



Can I Prevent Diaper Rash?

Diaper rash is very common. It can be just a few red spots (a mild case). Or it can be blisters and sores (a severe case). Diaper rash is caused by many things:

- Urine and bowel movements in diapers
- Rubbing against a wet diaper
- Allergic reaction to laundry soap, foods, disposable diapers, or diaper wipes
- A skin infection, but this is less common

To avoid diaper rash:

- Change diapers often. Use a clean cloth to wash and dry the baby's bottom each time.
- If you use cloth diapers, wash them well. Rinse the diapers twice and put 1/2 cup (125 mL) of vinegar in the rinse. Do not use bleach, i.e. Javex™ or fabric softeners like Downey™.
- If you use cloth diapers, use “breathable” diaper covers.

If your baby gets diaper rash:

- Leave the baby's diapers off as much as you can. Lay him on his tummy on top of a few diapers or a soaker pad. Dress the baby in a shirt and cover him with a sheet to keep him warm.
- Change diapers often. Be careful to use clean cloths to wash and dry the baby's bottom each time.
- Use rubber pants as little as possible.
- If you use disposable diapers, change to another brand or try cloth diapers.
- Rub a zinc-based ointment on the diaper rash. Ask your doctor, public health nurse, or pharmacist to suggest a good brand.

Call the doctor if:

- The diaper area smells like yeast
- Diaper rash still won't go away, after you have tried all these tips.

How Many Wet Diapers Can I Expect?

Babies use between 6 and 10 diapers each day. If you change the wet diaper right away, you can prevent diaper rash.

If your baby has less than 6 wet diapers a day, or if the pee (urine) is dark yellow and has a strong smell, it likely means that your baby needs more fluids.

Most babies go for their first check-up when they are 2 to 6 weeks old. During a check-up, the doctor will weigh and measure the baby and check to see how your baby is developing.

Immunizations are also part of babies' health care. It is important that your baby is immunized on time and on schedule for the best protection. In New Brunswick, your baby gets the shots (immunizations) listed below.

When Do I Take the Baby for Check- Ups and Shots (Immunizations)?

Child's Age	Name of Vaccine	The vaccine protects your child from:
Birth	Hepatitis B	Hepatitis B
2 months	DTaP-IPV-Hib, Hepatitis B, Pneumococcal conjugate	Diphtheria, Tetanus, Pertussis, Polio, and Haemophilus influenzae type b, Hepatitis B, Pneumococcal disease
4 months	DTaP-IPV-Hib, Pneumococcal conjugate	Diphtheria, Tetanus, Pertussis, Polio and Haemophilus influenza type b, Pneumococcal disease
6 months	DTaP-IPV-Hib, Hepatitis B	Diphtheria, Tetanus, Pertussis, Polio and Haemophilus influenza type b, Hepatitis B
12 months	MMRV, Meningococcal conjugate C, Pneumococcal conjugate	Measles, Mumps, Rubella, Varicella (Chickenpox), Meningitis Type C, Pneumococcal disease
18 months	DTaP-IPV-Hib, MMRV	Diphtheria, Tetanus, Pertussis, Polio and Haemophilus influenza type b, Measles, Mumps, Rubella, Varicella (Chickenpox)
6 months to 18 years	Influenza (yearly)	Influenza
4 years	DTaP-IPV	Diphtheria, Tetanus, Pertussis, Polio
Grade 7	HPV (girls only), Tdap	Human Papillomavirus, Tetanus, Diphtheria and Pertussis
Grade 9	Meningococcal conjugate	Meningitis

After they have all their baby shots, children need a booster shot at age 4, before they start school. Talk with your doctor or public health nurse to learn more about check-ups and immunizations.

Keeping Your Baby Safe

Making your baby's world as safe as you can is part of being a parent.

To keep your baby safe, you need to watch him. Never leave an infant alone — even for a second — except in a safe crib or playpen.

Childproofing

Another way to keep your baby safe is to childproof your home. New babies will not crawl around on the floor or put things in their mouth. But it is wise to prepare for when this happens. Start now. Make your home safe before your baby learns to roll over, sit up, or crawl.

Check the floor, shelves, tables, and cupboards.

REMOVE:

- Small things that a baby can swallow or put into his ears and nose
- Sharp or rough things that can cut or scrape a baby
- Plants low enough to be pulled over or eaten
- Lamp cords long enough for a child to get tangled in or cords that a baby can use to pull something down on himself
- Cords for blinds or drapes from baby's reach by tying them up. Make sure not to put your baby's crib near a window with blinds that have cords or near a window that does not have a window guard.



Start to buy:

- Safety gates for stairs
- Covers for electric plugs (Be sure they are not small enough for the baby to swallow.)
- Locks for cupboards
- Hooks to keep drawers closed

WARNING:

Because of the risk of Sudden Infant Death Syndrome (SIDS), you should not use a soft mattress, pillow, comforter, stuffed toys, or bumper pads in the baby's crib.

Safe Car Seats and Baby Furniture

A safe infant car seat is one of the first things you should buy for your baby. See page 20 in Section 1 - Healthy Start, to learn more about this. **The law says that babies must always ride in an approved infant car seat.** This includes the trip home from the hospital. Your baby's car seat should:

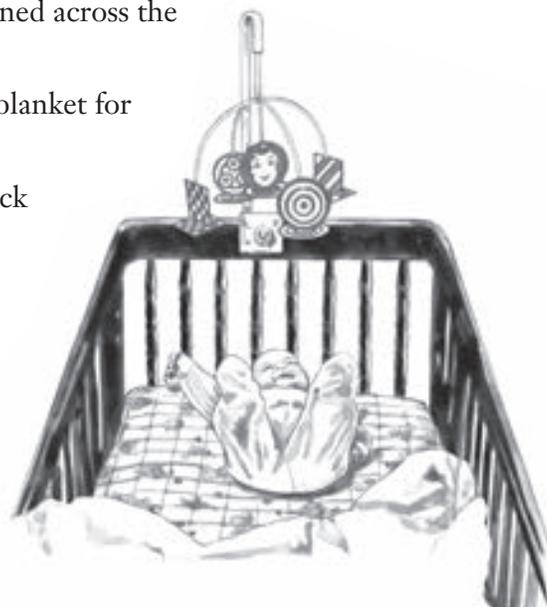
- Face backward
- Be fixed in place with the seat belt and have the harness fastened across the baby's chest
- Support your baby's head and neck. You can use a rolled up blanket for this.

The safest place for the baby's car seat is in the centre of the back seat. Never put an infant seat in front of an air bag.

Buying safe cribs and playpens is also important. See Section 1 - Healthy Start for details on safe car seats, cribs, and playpens.

All the things you buy for your baby should be safe and well made. This includes strollers, high chairs, clothing, toys, and soothers.

Talk with your public health nurse, Consumer and Corporate Affairs Canada, St. John Ambulance or the Red Cross to learn more about child safety.



Preventing Allergies

Parents need to protect their babies' health. This is just as important as keeping your baby safe from accidents. If people in your family have allergies, you may want to make it less likely that something in your home will trigger an allergic reaction in your baby. Ask your health care provider for more details on preventing allergies.

Buying for Baby

Clothing

The kinds of clothes, bedding, and diapers you choose for your baby will depend on how much you have to spend and where you live.

You may buy your baby new things, or you may choose to have second-hand things from a store that sells them, or from people you know. Check to be sure that they are safe, well made, and easy to keep clean.

The clothes your baby needs depends on the time of year and the way you will do laundry. If you have your own washer and dryer and can do laundry each day, you will need fewer clothes than if you have to go out to do your wash. Be sure to wash all clothing and cloth diapers before your baby wears them. Try to avoid laundry powders and fabric softeners such as Bounce™ or Downey™. They may cause a rash on your baby's skin.

Buy baby clothes that are:

- Soft and comfortable. Cotton works well.
- Easy to wash using a washing machine and dryer. Avoid clothes that need to be washed by hand.
- Easy to get on and off. Baby clothes should open up in the front and have large armholes. Sleepers and nighties with snaps and zippers are easier to handle than those with ribbons or ties.
- Loose clothing allows air to circulate. Your baby is less likely to get a skin rash. When you buy sleepers, make sure that the part where the feet go are big enough for baby's toes.

Basic baby clothes include:

- 4 to 6 undershirts
- 6 sleepers or nightgowns
- 1 sweater
- 1 snowsuit (if your baby is born in winter)
- 1 hat
- Socks or booties

Babies grow quickly. Do not buy too many clothes in very small sizes.

Diapers

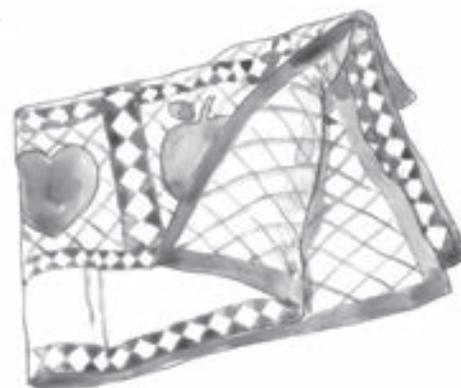
You can choose whether to use cloth or disposable diapers.

Disposable Diapers	Cloth Diapers
<ul style="list-style-type: none"> • Most expensive kind of diaper • Very easy to use • Good to use if you do not have a washer and dryer • May cause diaper rash • Some babies get a skin rash from the plastic cover • Buy only one package at first, in case your baby cannot wear them. 	<ul style="list-style-type: none"> • Come in many styles, such as flat squares, fitted diapers with Velcro closings, etc. • Many people use a diaper service to wash the diapers. (Ask your public health nurse if there is one in your area) • You will need to buy at least 24 diapers • You will need diaper pins, unless the diapers have Velcro closings • You will need waterproof pants to cover the diaper • You will need a diaper pail to soak the dirty diapers

You can find advice on buying a safe crib on page 21 in Section 1 - Healthy Start. Once you have a safe crib, you will need bedding. Cotton fabrics are comfortable for babies. Here's what you should have:

- 3 or 4 fitted crib sheets
- Waterproof mattress cover
- 2 baby blankets (for the crib). Do not use comforters or baby duvets
- 4 to 6 receiving blankets (to wrap the baby in)

Bedding



Toys

Babies are learning about the world and themselves. They need things to look at, things to listen to, and things to feel. New babies do NOT need many toys.

Babies can look at hanging mobiles, pictures, and toys. They can also look at your face and your smile.

Babies like to listen to music and rattles. They can also listen to your voice, as you sing and talk to them.

Babies can feel soft toys and pieces of cloth. They also like to feel the warmth of your body as you hold them close. They like to learn about their own bodies as you pat and stroke them.

People who love and look after their babies are the best “toys” a baby can have.

When you do buy toys, be sure that they are safe and correct for your baby’s age and size. They should have no parts small enough to swallow, no pieces that can come off, no strings long enough to choke or tangle, and no strong smells.

Safe toys are:

- Well-made
- Sturdy
- Washable
- Smooth, with no sharp points or rough edges

Do a careful check of all new toys before you give them to your baby. Check often for wear or damage. You can find out more about toy safety here:

Child Safety Link:
www.childsafetylink.ca
Phone: 1-866-288-1388

Consumer Product Safety (Health Canada):
www.healthycanadians.gc.ca/index-eng.php
Click on “consumer product.”
Phone: 1-866-662-0666

Parachute:
www.parachutecanada.org/safekidscanada
Click on ‘Injury topics’ and ‘Home safety’



Being a Healthy Mother

The first weeks after childbirth are a time of change. There are many new things to adjust to.

The best things you can do for yourself are:

- Get as much rest as you can
- Eat healthy, good foods
- Accept the help that people offer
- Talk about your feelings with your partner and other people you care about.

Taking good care of yourself is part of taking care of your baby.

Childbirth affects all parts of your life. It affects your:

- **Body.** You will leave behind the stress of pregnancy and start to deal with the physical demands of caring for your baby.
- **Feelings.** You may feel joy, excitement, fear, confusion, and love. Your feelings are very strong and change very quickly.
- **Social life.** You see that your role in society has changed. There may be tension between your new role as a mother and other roles, in the workplace and in your family.
- **Mind.** You are leaving behind who you used to be and you are starting a different stage of your life. It is a time of change, and it may not be easy.

All of these changes seem to come at once. They are all mixed together. You may not know why you feel so swamped you just know that you do. And you may be surprised that you feel this way!

All of these feelings happen at a time when you are so tired. Some people feel tired deep in their bones. Everything seems worse when you are tired.

Talking with your partner about your feelings is important. If you feel tired, lonely or angry, say so. You may find that he feels the same way. Talk about what is bothering you. You need to know what the problem is before you can start to solve it.

Talking with other new mothers can also help you. When they tell you about their lives, you will hear that you are NOT the only one who feels this way.

Accepting Motherhood

Your Body After Childbirth (Postpartum)

Your life will get better. Your baby will begin to sleep at regular times. You will learn to give him a bath, dress him and feed him. You and your partner will be able to talk to each other without the baby crying or one of you falling asleep. And one day your baby will smile just for you, and you will know that being a mother is the best thing in the world.

The time after childbirth is called postpartum. It affects your body in many ways.

During the first 6 weeks after childbirth, your body is going through many changes:

- Your uterus is getting back to the size it was before you were pregnant.
- While you are breastfeeding, your body is getting used to making milk.
- You are losing the extra fluid your body made while you were pregnant.
- Your hormones are changing from the high levels of pregnancy to a lower level.
- You are recovering from the physical effort of giving birth. If you had a cesarean, you need to recover from the operation (surgery). If you had a vaginal birth, your stitches may be healing (if you had stitches).

Don't forget that you were pregnant for 9 months. It will take a while for your body to feel "normal" again.

You should have a postpartum checkup about 6 weeks after giving birth. Your health care provider will check to see if your uterus has gone back to its normal size and shape and that any stitches have healed. You will also have your blood pressure taken and may be asked to provide blood and urine (pee) for lab tests.

This checkup gives you a chance to ask questions or talk about your concerns or problems. It is also a good time to talk about birth control.

Vaginal Discharge (Lochia)

After childbirth, discharge from your vagina continues for several weeks. It will change from bright red to a pink or brown colour, and then it will be clear. You should have sanitary napkins at home. Buy them before you go into the hospital.

If the discharge changes from a small, brown discharge back to a bright red flow, this may mean that you are being too active. Try to rest more often.

Talk to your health care provider if your discharge becomes very heavy, has clots, or smells bad.

Getting Your Period Again

While you breastfeed your baby, you will not have regular periods for 4 to 12 months. If you are giving your baby formula, you will likely have your period 6 to 12 weeks after your baby is born. Your first period after delivery may be heavy and last longer than normal.

When your period returns, it may not be regular for a while. This is normal. You should be aware that you can get pregnant during this time. You should use birth control. For more information on this, go to the section called Sex and Birth Control on page 218.

It's hard to believe that looking after a tiny baby can take so much time and energy. Many new mothers spend their first few weeks feeling very tired.

Feeling tired

Here are ways to help you cope:

- Get as much rest as you can.

Nap when your baby naps. Unplug the phone. Put a note on your door: "Mother and Baby sleeping. Do not disturb."

Try to make night feedings easier. We provide advice on this on page 194 in the section called How Much Do Babies Sleep?

- Get organized.

Keep things simple. Think about all the things you have to do. Make a list that says "must do" and "should do". Focus on the "must do's." Do not do things that can wait until tomorrow.

Do things when you have the energy, not when you think it's "time." This may mean setting the table for supper at 10 am or making your lunch right after breakfast.

Talk with your partner about ways to share the load.

Be aware that it may take longer than you thought it would to get organized. It can take time to create new routines for yourself, your baby, and the rest of the family.

- Get as much help as you can.

If people offer to help, accept.

If someone asks you if there's a baby gift you'd really like, ask for a day of house cleaning, diaper service for a week, a prepared dinner, or an evening of babysitting.

- Be realistic.
Know that it is okay if you can't do things as quickly as before you had a baby. You may find that it takes twice as long to do housework or laundry.
Try not to measure the work you are doing at home against what you may have done at work before you had your baby. They are very different and really cannot be compared.
- Build a support network.
Look for other new mothers to talk to, exchange childcare, or help out. Check to see if your neighbourhood has a parent drop-in centre. Some church and community groups offer mother-baby groups or exercise programs.
- Take care of yourself.
This is not selfish. It is necessary.
Try to arrange for time to be alone, to go for a walk, or relax in the bathtub.
- Stay active.
Do postpartum exercises. You may feel so tired that this idea makes you laugh. But exercise will increase your energy.
- Eat healthy food.
Continue to make the healthy food choices you made when you were pregnant.
- Do something for yourself every day.
Wash your hair, watch a TV show, read, talk to a friend.
- Give yourself credit for doing a good job.

For most women, having a new baby is a happy time. But this is not always true. New mothers may feel both happy and sad.

About **80 per cent of all women, on the second or third day after the baby is born**, may notice they:

- Feel disappointed
- Feel sad and tearful
- Feel irritable
- Feel overwhelmed, and worried
- Feel very tired, and cannot sleep well
- Have mood swings
- Cannot focus

This usually goes away within 1 to 2 weeks, but for 1 out of 10 women, something called postpartum depression begins.

Postpartum depression (PPD) may begin a few weeks after birth or at any time during your baby's first two years. It typically begins between 6 weeks and 6 months postpartum. It is extremely common; affecting, approximately 15% of new moms. Some issues can contribute to having a history of depression, for example, increased stress, lack of social support and having a history of depression. A woman who has this kind of depression feels sad, anxious and worried. She feels this more strongly than other women, and her feelings can affect how she cares for her baby and herself. PPD can prevent mothers from interacting with their babies in a way that can lead to long term developmental delays in their children

The Baby Blues and Postpartum Depression

What is Postpartum Depression?

A woman with postpartum depression may feel:

- Very sad
- Weepy and cry a lot
- Guilty
- Angry
- Exhausted
- Worried
- Tense
- Irritable
- Overwhelmed
- Lonely and helpless
- Worthless
- Confused
- "Not herself"
- Very sensitive
- She may not be a very good mother

She may also feel that she:

- Eats too much or not enough
- Cannot focus
- Has low self-esteem
- Has panic attacks
- Has daydreams that make her feel afraid
- Has thoughts of hurting her baby or herself
- Is not interested in things that used to bring her pleasure
- Is not confident

If you have any or many of these signs, be aware that this illness can be treated, and you are not alone.

- Know that your feelings may have many emotional and physical causes.
- You may need professional help.
- Talk with someone who will listen.
- Accept help from others, and ask for help when you need it.
- Try to find some time for yourself.
- Do not think you have to be the perfect mother and have the perfect baby.

A website that can give more advice and help for women who may have PPD is:

A New Life: <http://nb.unvanl.ca>

Look under 'Healthy Family,' then 'Healthy Mother,' then 'Postpartum Blues' and 'Depression'



When to Go For Help!

See your doctor right away or go to the hospital emergency room if you have:

- Daydreams that make you feel afraid, or
- Thoughts of hurting your baby or yourself

If other feelings of depression last longer than 2 or 3 weeks contact:

- Your family doctor/obstetrician
- Local emergency room
- Public Health Services
- Chimo Provincial Crisis Line (506) 450-4357
- Local Mental Health Clinic, private counselor, psychologist, or psychiatrist
- Tele-Care 811

Tips for Good Postnatal Health

After your baby is born, here are some ways to help yourself:

- Get as much sleep as you can.
- Eat many small meals instead of three large ones
- Accept that you need help: go to your friends, neighbours, and family.
- Do not let motherhood take over your entire life. Being a little bit selfish can be a good thing.
- Find time for yourself without guilt. Learn to relax into motherhood. For example, take a nice long bath.
- Read all you can on the subject.
- Express your feelings. Write them down. Tell people how you feel.
- Find someone who wants to listen. It's good to find someone who is going through the same thing. Just talking about it may help.
- Join a group of new parents in your community. Share your problems with someone who will not judge you.
- Do not isolate yourself.
- Make a real effort to talk with your partner. Hold on to the love and friendship that you have.
- Solve the problems you can and accept the others.

Getting fit again

It's normal for you to want to look like you did before you were pregnant. But give yourself some time. You were pregnant for 9 months. Your body will not return to “normal” right away.

Eating healthy food and being active will help you to feel fit. See Section 5 - Healthy Eating and Section 6 - Healthy Activity, to learn more. See page 178 in Section 7 - Healthy Birthing, for postpartum exercises you can begin in the hospital.

In some places, the YM/YWCA and other organizations offer postpartum exercise programs. They are a good place to get fit, and a good place to meet other mothers and babies.

Good health matters as much now as it did when you were pregnant. Eat healthy food, rest, stay active, and avoid drugs and smoking. Taking care of yourself is one of the best ways to take care of your baby.

Going Back to Work/School

Many new mothers have 6 to 12 months maternity leave. Others go back to work or school much sooner, and you may be thinking about it. You do not want to decide on this too quickly.

When making your plans for going back to work, you will need to think about:

- Child care
- How your workplace supports parents when their children are sick
- Maternity/paternity benefits
- Maternity rights
- Whether or not you are ready to return to work or school

There is no “best” time to return to work or school.

Every mother, baby, and family are different. Each parent will need to decide how to balance work, study, and being a parent.

If you plan to return to work or school, you will need to find good child care. This may not be easy, so it's wise to allow plenty of time to search. Talk to friends and neighbours about the childcare they use.

You can also contact groups like the YM/YWCA, churches, and early childhood development associations.

You can find out more about childcare centres, choices, and services from the Department of Social Development (www.gnb.ca/0000/ECHDPE/ELCC-DayCare.asp).

Single Parents

Whether you planned to be a single parent or not, you should be aware that you are not alone.

Being a new parent, finding a balance between work and home, dealing with money, and finding time for yourself are problems for all mothers. They can be even harder when you are alone.

All the advice for new mothers applies even more to you. Single mothers must take care of themselves, find a good support network, and try not to do too much.

We suggest that you find community services that can help you and your baby. Talk to your public health nurse, the Department of Social Development, or the Family Resource Centre.



Sex and Birth Control

Being a Couple

A new baby turns a woman into a mother, a man into a father, and a couple into a family. But the “couple” is still there.

Some couples have trouble working out a new relationship that feels good to both of them. You are not alone. As it was during pregnancy, good communication is the key. Talk about how you feel. Be as open with each other as you can. A sense of humour helps, too.

Most new mothers are ready to have intercourse when their stitches have healed and the discharge from their vagina is clear. Couples often try new positions to help them cope. Many new mothers are so tired that they lose interest in sex. Many new fathers feel the same way. If mothers are going through postpartum blues, this will also reduce their interest in sex.

We all need to be touched and held. Many new mothers find that caring for the baby meets their need to be touched. They find that they have little left for their partner. This can upset a man who is used to a close and warm relationship.

Why do babies seem to wake up just when you start to make love? This makes some people think they should forget about sex. Remember that your baby will soon be sleeping all night, or at least long enough for you to enjoy yourselves.

All of these feelings will pass. Talk to each other. Say “I love you” often. Try to keep romance alive by spending time alone with each other. Going for a walk, driving in the car, or going out for coffee can help remind you that you are friends and lovers as well as parents.



Right after childbirth, birth control may be far from your thoughts. Most new parents feel that they have plenty of time before they need to start thinking about birth control again.

But the time will come, sooner than you think, when you will want to have sex again. It's a good idea to be ready.

Women need to know that after childbirth you can produce eggs (ovulate), and get pregnant, even though you have not had your period. About half of all new mothers produce an egg before they have a period.

The time to think about birth control is now — before you need it. If you wait for your 6-week-postpartum checkup, it may be too late.

Choosing a method of birth control may take some thought. Talk about it with your partner and ask your nurse, nurse practitioner or doctor for more information.

When you are trying to decide, ask yourselves:

- Can I use it while I'm breastfeeding?
- If I breastfeed, can it affect the amount of milk I produce?
- How well does the method work? Do I feel confident using it?
- Is this easy enough that I will use it every time?
- Will I enjoy sex less if I use this method? Could using it become part of lovemaking?
- Do I have enough privacy to use this method? Do I need to use the bathroom to insert something? Is my bedroom close enough?
- Do I have all the facts and skills to use this method properly?
- Can I afford this method? Do I need to pay for something once, or will I need to keep spending money?

There are many things to think about and discuss. The information about some of the birth control methods on the next pages might help you choose a birth control method. Do not forget that if you try one method and you are not happy with it, you can always try another. For more information on sexual health, contraception or sexually transmitted infections, you may consult the following website: www.sexualityandu.ca.

Thinking about Birth Control

Birth Control Methods



Breastfeeding (LAM)

What is it?

LAM stands for Lactational Amenorrhea Method. It means that you use breastfeeding as a method of birth control. Lactational means breastfeeding. Amenorrhea means having no monthly period.

LAM makes use of the normal things that happen in a woman's body after childbirth and when she breastfeeds. The baby's sucking prevents her body from releasing an egg (ovulation). If a woman does not release an egg, she cannot become pregnant.

How well does it work?

This method works well if used correctly (see also the section entitled Breastfeeding on page 58). It will work **ONLY** if **ALL** these factors apply to you:

- Your baby is under 6 months old.
- Your monthly periods have not returned.
- Your baby is **ONLY** breastfed and is not receiving any other foods or liquids.
- Your baby breastfeeds on demand during the day and every night (minimum of 6 feedings every 24 hours).



If **ALL** conditions are met, this method is 98% effective. LAM does not protect you from sexually transmitted infections (STIs). You and your partner should use a condom. Talk to your health care provider for more information about this method of birth control.

Are there any side effects?

This method has no side effects, and it costs nothing. But if your period returns, no matter how old your baby is, start using another method of birth control right away.

Hormonal methods of birth control

What is it?

A vaginal ring is a flexible, almost transparent ring that you insert in your vagina yourself. It releases a continuous dose of hormones (estrogen and progestin) for three weeks. It is then removed for a week. That is when you have your period.

Contraceptive vaginal ring (NuvaRing)

How well does it work?

If used as directed, the vaginal ring works very well. It is 92% effective with typical use and 99.7% effective with proper use. The vaginal ring does not protect you from sexually transmitted infections. You and your partner should use a condom.

How do I use it?

To find out more about the vaginal ring, talk to your health care provider.

Are there any side effects?

Most women do not have side effects. The most common are feeling like you might throw up (nausea), cramps, sore breasts, headaches and feeling moody.

Your health care provider could suggest you stop smoking before giving you a prescription for the Nuva-Ring.

Contact your health care provider if you have any of these side effects:

- Headaches
- Blurred vision
- Leg cramps
- Bleeding from your vagina in the middle of the month (when you are not having your period).

Do not stop using the Nuva-Ring “to give your body a rest” unless you want to become pregnant.

Will this method have any effect on our sex life?

If the vaginal ring is properly positioned, neither you nor your partner should notice it.

How do I get it?

You need to visit your health care provider to get a prescription. The cost is about \$25 a month.

Breastfeeding and NuvaRing

It is suggested that you wait at least six weeks after childbirth or a caesarean section before you start using this method because it is preferable for your milk production to be well established and for you to be used to breastfeeding before starting. Be attentive to your milk production and to baby's growth and satisfaction at the breast. If you notice a problem, contact a lactation consultant, your health care provider, or a nurse.

Depo-Provera



What is it?

Depo-Provera is an injection or “shot” of the hormone progesterone. It is given once every 12 weeks to prevent pregnancy. It stops your body from making an egg each month.

You can use Depo-Provera when you are breastfeeding. It is best to wait until you have a good milk supply and you are settled into breastfeeding before you start Depo-Provera.

How well does it work?

Depo-Provera works well when used correctly. It is between 97% (typical use) and 99.7% effective (proper use). For more information talk to your health care provider.

Depo-Provera does not protect you from sexually transmitted infections. You and your partner should use a condom.

How is it used?

Depo-Provera works right away if you get it within 5 days after your period starts. It can be given 5 days after childbirth, or 5 days after an abortion or miscarriage. It provides complete birth control for 12 weeks. You must get a Depo-Provera shot every 10–13 weeks to stay protected. Follow the recommendations provided by your health care provider.

Are there any side effects?

For the first few months, the side effects are irregular periods, spotting, extra bleeding, or missed periods. It is normal for some women to have no bleeding at all after 6 to 12 months. Some women have sore breasts, get depressed or gain weight because they want to eat more (increased appetite). Once Depo-Provera is injected, any side effects will last until the shot wears off.

After you stop taking Depo-Provera, it may take 6 months to 2 years to become fertile again. You need to be aware that it could take that long to get pregnant again. You will also need to use other birth control if you do not want to get pregnant.

Treatment risks and benefits must be carefully (re)assessed periodically for all users of this medication. You should NOT use Depo-Provera if:

- You are pregnant or think you might be;
- You have abnormal bleeding from your vagina;
- You have a family history of breast cancer;
- One of many other contraindications are present.

Using Depo-Provera for a long time can reduce calcium in your bones. Ask your doctor about calcium pills and foods that have lots of calcium.

Will it affect our sex life?

Depo-Provera works well to prevent pregnancy, so some women find they enjoy sex more because they do not have to worry about this.

How can I get it?

You need to get a prescription from your family doctor or the doctor at a Sexual Health Centre. Go to a pharmacy to get the medication. Each shot costs about \$40. If you have a Social Development Health Card, it covers the cost of Depo-Provera. A public health nurse at the Sexual Health Centre or your doctor will give you the Depo Provera shot.

Breastfeeding and Depo-Provera

Be attentive to your milk production and to baby's growth and satisfaction at the breast. If you notice a problem, contact a lactation consultant, your health care provider, or a nurse.

The Pill



What is it?

All birth control pills contain hormones that are like the ones your body produces during pregnancy. Some, such as combined oral contraceptives, contain two types of hormones (estrogen and progestin). Others, like the mini-pill, contain only progestin (no estrogen). These work to prevent the ovary from releasing an ovum (egg).

How well does it work?

If you follow the directions, the pill works very well. It is 92% effective with typical use and at least 99.7% effective with proper use. For more information, talk to your health care provider.

The pill will not protect you from sexually transmitted infections. You and your partner should use a condom.

How do I use it?

- Begin taking the pill on the first day of your period.
- If you don't start the pill with your period, use condoms for that month.
- Take the pill at the same time each day. Pick a time that suits you the best. Many women find it easy to take the pill at noon or in the evening at dinner time.
- If you forget to take your pill one day, continue taking one every day AND use a condom for the rest of the month.
- If you have bleeding while taking the pill, call your health care provider but do not stop taking the pill.
- The pill does not work as well if you have diarrhea or vomiting.
- Use a back-up form of birth control if you are taking antibiotics. If you are taking other medicines, ask your pharmacist if they will stop the pill from working.

Are there any side effects?

With the kinds of pills used today, most women do not have side effects. The most common are feeling like you might throw up (nausea), cramps, sore breasts, headaches and feeling moody.

Your health care provider could suggest you stop smoking before giving you a prescription for the pill.

Contact your health care provider if you have any of these side effects:

- Headaches
- Blurred vision
- Leg cramps
- Bleeding from your vagina in the middle of the month (when you are not having your period).

Do not stop taking the pill “to give your body a rest” unless you want to become pregnant.

Will it affect our sex life?

Some women say that they enjoy sex more while they take the pill because they are not worried about getting pregnant.

How do I get it?

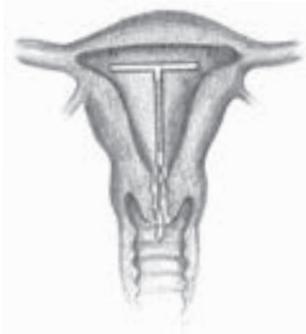
You need to visit your health care provider to get a prescription.

The pill costs about \$18 per month. If you do not have money to pay for it, talk to your health care provider about the Compassionate Pill Program.

Breastfeeding and the pill

It is possible to take the progestin-only pill (mini-pill) while you are breastfeeding. Make sure your milk production remains optimal. For combined oral contraceptives, i.e., all pills containing estrogen and progestin, it is suggested that you wait at least six weeks after childbirth or a caesarian section to start using this method as it is better for your milk production to be well established and for you to be used to breastfeeding before starting. Be attentive to your milk production and to baby’s growth and satisfaction at the breast. If you notice a problem, contact a lactation consultant, your doctor, or a nurse.

Mirena IUD



What is it?

An IUD is a small T-shaped device that a doctor puts into your uterus. It contains a hormone called levonorgestrel (a progestin, not estrogen) that is released slowly every day.

How well does it work?

The Mirena IUD works very well. It is 99.8% effective with typical and proper use.

The Mirena IUD will not protect you from sexually transmitted infections. You and your partner should use a condom.

How do I use it?

The IUD must be placed in your uterus by a doctor. This may cause some discomfort and cramping for a few hours. It can be left in place for up to 5 years. You will need to visit your doctor for a checkup at least once a year and when you want to have it removed.

Are there any side effects?

Irregular bleeding or bleeding between your periods may occur during the first months following insertion. Some women will stop menstruating.

Will it affect our sex life?

If the IUD is in the right place, neither you nor your partner should notice it at all.

How do I get it?

You will need to visit your healthcare provider, or a sexual health centre (only if you are 19 years of age or under). After childbirth, your health care provider can insert an IUD when you go for your 6-week checkup (it can be inserted after 4 weeks), provided your uterus is healing well and there is no sign of infection. The cost of the Mirena IUD varies from \$330 to \$360. Your IUD could be free if you have a social assistance card or if you are eligible for the compassionate assistance program. Talk to your health care provider.

Breastfeeding and the Mirena IUD

Be attentive to your milk production and to baby's growth and satisfaction at the breast. If you notice a problem, contact a lactation consultant, or your health care provider.

Contraceptive patch (EVRA)

What is it?

The contraceptive patch slowly releases hormones through the skin every day. It can be placed on the buttock, outer arm, lower abdomen, or upper torso but not on the chest.

A new patch is applied once a week for three weeks. No patch is worn during the fourth week. That is when you will have your period.

How well does work?

If used as directed, the contraceptive patch is very effective. It is 92% effective with typical use and 99.7% effective with proper use. The contraceptive patch does not protect you against sexually transmitted infections. You and your partner should use a condom.

How do I use it?

To find out more about the contraceptive patch, talk to your health care provider.

Are there any side effects?

Most women do not have side effects. The most common are feeling like you might throw up (nausea), cramps, sore breasts, headaches and feeling moody.

Your health care provider could suggest you stop smoking before giving you a prescription for the Patch.

Contact your health care provider if you have any of these side effects:

- Headaches
- Blurred vision
- Leg cramps
- Bleeding from your vagina in the middle of the month (when you are not having your period).

Do not stop using the patch “to give your body a rest” unless you want to become pregnant.

There is a possibility of skin irritation where the patch is applied.

Will it affect our sex life?

Some women say that they enjoy sex more while they are on the patch because they are not worried about getting pregnant.

How do I get it?

You will need to visit your health care provider to get a prescription. The contraceptive patch costs about \$24 for 3 patches.

Breastfeeding and the contraceptive patch

It is suggested that you wait at least six months after childbirth or a caesarean section before you start using this method because it is preferable for your milk production to be well established and for you to be used to breastfeeding before starting. Be attentive to your milk production and to baby's growth and satisfaction at the breast. If you notice a problem, contact a lactation consultant, or your health care provider.

Non-hormonal methods of birth control

What is it?

The male condom is a thin cover made of latex or other material (e.g., polyurethane or lambskin). The man puts it on his penis before intercourse. It prevents pregnancy by stopping the sperm from reaching the woman's ovum (egg).

How well does it work?

If used correctly, and each time you have sex, condoms work quite well. For more information talk to your health care provider.

The effectiveness of the male condom ranges from 85% (typical use) to 98% (proper use). Condoms (latex, polyurethane) are the only form of birth control that can protect you from STIs. Sheepskin condoms are less effective and do not protect against STIs.

How is it used?

The male condom is unrolled onto the erect penis prior to any contact with the vulva and before entering the vagina. When unrolling the condom, pinch the end to leave a 2-centimeter space at the end for catching the sperm. When using a condom, you need to be very careful that it does not slip off while you are having sex. After the man ejaculates, remove the condom while the penis is still erect. One of you will need to hold it at the base to prevent leaking. Do not use a condom more than once. If you use a lubricant with a condom, be sure that it is water-based. Do not use Vaseline™ with a condom.

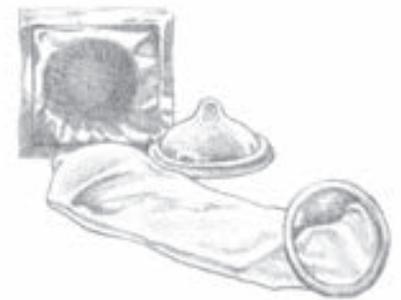
Are there any side effects?

Male condoms have no side effects. A few men and women have problems with the latex. They can choose to buy non-latex condoms. Condoms are an excellent form of birth control for the time right after your baby is born.

Will it affect our sex life?

Some men feel that it dulls the feelings they have in their penis. A drop of lubricant inside the condom can help the man feel more pleasure when he is using a condom.

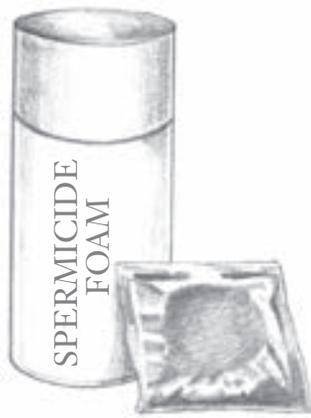
Condom: Male



How can I get it?

You can buy male condoms at any drug store. Check the “best before” date on the package, and do not buy condoms if they are expired. Do not leave them in extreme heat or cold. Also, do not buy a large box if you may not use them all before they expire. The cost per unit ranges from 50 cents to 2 dollars.

Spermicides



What is it?

Spermicides (foams, creams, films, suppositories, gel, and tablets) contain chemicals that:

- kill sperm before they reach the egg, or
- create a barrier to block sperm from moving through the cervix.

How well does it work?

Used on their own, spermicides do not work as well as some other kinds of birth control. Spermicide works much better if it is used with a barrier method of birth control, like a condom.

Spermicides will not protect you from sexually transmitted infections. You and your partner should use a condom.

How do I use it?

You can buy spermicides at the drug store. Follow the directions and pictures inside the package or on the box. The directions are different for different products. Read and follow the directions each time you have intercourse.

Spermicides must be left in place at least 6–8 hours after you have intercourse. Do not douche, or have a bath for at least 6–8 hours afterwards. You may wash the outside of your pubic area if you wish.

Does it have any side effects?

There are no serious side effects, but some people are sensitive or allergic to the products. Spermicides can cause itching, smelling or burning. If this happens, stop using it so you do not get an infection.

Will it affect our sex life?

Some spermicides add moisture to your vagina. Some people find this messy. Others find the extra moisture is good during intercourse.

Where can I get it?

You can buy spermicides in any drug store. You do not need a prescription.

What is it?

Tubal ligation is an operation to cut and tie the tubes that carry the egg from the ovary to the uterus. These tubes are called the Fallopian Tubes. When the tubes are cut, the egg and the sperm cannot join.

Tubal ligation is a permanent form of birth control.

How well does it work?

Tubal ligation works better than any other form of birth control.

Tubal ligation will not protect you from sexually transmitted infections. You and your partner should use a condom.

How is it done?

The surgeon makes a small cut in the lower abdomen, removes a piece from each tube, and ties off the ends. The operation is done when you are asleep (general anesthetic) or when your lower body is frozen (local anesthetic).

Are there any side effects?

There are no side effects, but all surgery carries some risk.

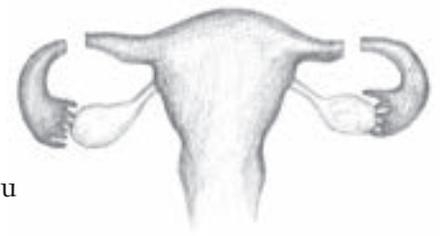
Will it affect our sex life?

Some women find that not having to worry about pregnancy makes them more interested in sex.

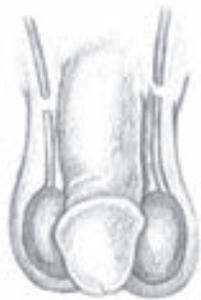
How can I get it?

You will need to talk to your health care provider.

Tubal Ligation (Female Sterilization)



Vasectomy (Male Sterilization)



What is it?

A vasectomy is an operation that cuts and ties the tubes that carry the sperm from the testicles to the penis.

When he has sex, the man still feels orgasm and still ejaculates, but the fluid contains no sperm.

How well does it work?

A vasectomy does not work right away. There may still be some sperm in the tubes, and the fluid that comes from his penis must be tested several times after the surgery to be sure it contains no sperm.

When the fluid is free of sperm, a vasectomy is almost 100% effective.

Like tubal ligation, vasectomy is a permanent method of birth control.

A vasectomy will not protect you from sexually transmitted infections. You and your partner should use a condom.

How is it done?

A vasectomy is a minor operation. It is done with freezing (an anesthetic) in the man's scrotum. Sometimes it is done in a doctor's office. Sometimes it is done in a hospital. Men do not need to stay in the hospital after the operation. Most men take a few days to rest at home.

Are there any side effects?

There are no side effects but all surgery carries some risk.

Will it affect our sex life?

Vasectomy does not affect the way a man performs or how he enjoys sex.

How can we get it?

You will need to talk to your health care provider.

Even if you use birth control, accidents can happen. People make mistakes.

If you had sex without using birth control or if your birth control fails, you can still prevent pregnancy by taking ECPs — Emergency Contraceptive Pills. They are also known as “Morning After Pills”.

You need to take ECPs within 3 days (72 hours) of having sex without birth control. The sooner you take them, the better they work.

If more than 72 hours have passed, a doctor can insert an emergency IUD. If this is done 5 to 7 days after sex, you may not get pregnant.

ECPs do not protect you from sexually transmitted infections.

You can get ECPs at sexual health centres, doctors’ offices, emergency rooms, and pharmacies. ECPs are available without a prescription in New Brunswick. Emergency rooms, Public Health, and doctors’ offices do not charge for the morning after pill, but pharmacies charge about \$50.

There are other methods of birth control that are generally less popular and/or less effective, e.g., female condom, diaphragm or cervical cap, copper IUD, natural family planning (rhythm method and sympto-thermal method), sponge and coitus interruptus. For more information about these methods, consult the website www.sexualityandu.ca.

Emergency birth control pill (plan B morning after pill)

Other methods of birth control

Family and Friends

A new baby creates new lives for many people. All of you will be learning to look at yourselves and each other in new ways. It takes time, patience, and love for a new family to settle into a new life.

Fathers



Many new fathers feel forgotten. When the woman was pregnant, everyone asked about her. Now everyone wants to know about the baby. Where does the partner fit in? New fathers may also feel that no one appreciates them. You feel tired, too. You have new things to worry about and new duties. You may be asked to do things that your own father did not do, like changing diapers, doing laundry, and getting up at night. As well, you have to go to work every day and earn a living!

You are not alone. Most new fathers feel confused for a while. It is not easy, but it's normal.

Here are some things that might help you:

- Take care of your health.

You need strength and energy to take care of your partner and your baby. Eat well. Be active and stay fit.

- Help and support your partner.

This may be a hard time for both of you. Remember that she has had the physical stress of pregnancy and childbirth. It takes time to recover. She needs your love and support. A new baby almost doubles the amount of housework to be done. You will need to do your share of the housework and take time to care for the baby.

- Talk about your feelings.

It's easy to hide from your feelings, especially when they are not happy ones. If you feel tired, lonely, worried, or left out, tell your partner. Do not be surprised if she says that she feels the same way. Talk about it. Listen to her. Say what you feel. When both of you have your feelings in the open, you can begin to solve problems together. This is not always easy, but it is worth the effort.

- Be an active father.

The more you offer, the more you get. Do your share of the daily work of looking after the baby. Try to spend time alone with your baby. Go for walks together. Give her a bath. Let her know who Daddy is.

- Accept that no one is perfect.

You will make many mistakes. So will your partner. Don't worry. This is how people learn to be parents.

- Face the fact that life will be different from now on.

This doesn't mean that it will be worse. Right now, it's easy to focus on how hard it is to have a new baby. But it is not all bad. Your new life as a father will bring joy, pride and a deep sense of purpose. So relax and grow into your new life. Life will be different. But so will you.

Having a new baby is very exciting for most children. But it can also cause mixed feelings. The new baby is the new focus in the family. Many older children feel a bit jealous and left out.

Brothers and Sisters

Here are ways to help your older children adjust to a new baby:

- Help them learn about babies before the baby comes.

Take them to visit friends with small babies. This can help children learn that a new baby will not be able to play with them for a while. Show them books with pictures and stories about babies.

Talk about all the things they can do that babies cannot do. Your "big" children can walk and talk and sing and play. Help them to feel pleased and proud of themselves.



- Make changes and plans ahead of time.

If you plan to move an older child to a new room, or to buy a new bed and give the crib to the baby, do it a few weeks or months before the baby comes. Then your children will not link these changes with the new baby. They will not feel that the baby is taking things away from them.

No child likes it when Mommy goes away. Let your children know what will happen and who will take care of them while you are away having the baby. Leave a list of meals, nap times, bedtimes, likes and dislikes for the person who will be looking after your children. Try to keep their lives as normal as you can while you are away. If it is allowed, have your children visit you and the baby in hospital. Do not be upset if your children are not very happy with you when you come home. It may take time for them to accept that you left them.

- Give children time to get used to the new baby.

This is a big change! Be patient. Older children often try to get attention by acting like a baby. Do not punish them for this. Let them know that you love them just the way they are.

Bring a present from the baby home from the hospital with you.

Try not to make too big a fuss over the baby. Don't use the baby as a reason for not doing something for the other children. Try not to say "Be quiet, you'll wake the baby" or "Be careful of the baby" too often.

Let your children help with the baby if they want to. But don't force it. And don't put your children in a situation where they could hurt the baby, even by accident.

Each parent should try to spend time alone with older children. They need to know that they are still special and loved.

Many parents don't feel instant love for a new baby. Neither will brothers and sisters. Bonding with a new baby takes time. Children who feel loved will find it easier to love their new sister or brother.

Grandparents

Just as you are learning to be parents, your own parents are learning to be grandparents.

They will be finding out what style of grandparenting feels right to them.

- Some grandparents are thrilled! They want to help and are looking forward to babysitting and spending time with their grandchild.
- Some may find that a grandchild means they are getting old. They may not like this idea very much.
- Others may be happy about the birth, but are not able to spend much time with you or your baby.

No matter what kind of grandparents your parents are, it helps to respect how they want to be involved with the baby.

Some new parents love to have help and advice from grandparents. Others find being around them is stressful. Don't forget that this is your baby. You have the right to parent in your own way. This may not be the way your parents raised you, and it may be hard for them to accept this.

Once again, talking about your feelings may help. Being silent and feeling bad is not the best way to get along with each other.



Looking Ahead

This book has covered 9 months of pregnancy and the first 6 weeks of your baby's life. We hope that it has been helpful and that you feel on your way to a happy and healthy family life.

Being a parent lasts longer than 6 weeks. There is a lot to look forward to: baby's first smile, first tooth, first step, and first word.

You will want to know more about what to expect, and about your baby's health, and growth as you move into the toddler and preschool years.

Find out if your community has:

- playgroups,
- parent resource centres,
- breastfeeding support groups,
- mother/baby exercise programs,
- parent/baby drop-in groups, and
- other places where you can meet other parents.

These kinds of programs also give your baby a chance to learn and play.

Talk to your health care provider about what your local Public Health Office has to offer. Look for childcare books in the library and in bookstores.

As a parent you will grow, change, and learn along with your children. You have a lot to teach them and they have a lot to teach you. Enjoy each other, love each other, and grow together in good health.

