

HEALTHY BABIES
HEALTHY CHILDREN

# A Guide for New Parents

Congratulations on the birth of your baby!





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Adapted with permission from Public Health Wellington-Dufferin-Guelph



This guide has information to help you after the birth of your baby. You can also talk to a public health nurse for professional advice and support on many parenting topics.

The Healthy Babies Healthy Children program and Timiskaming Health Unit offer Well Baby appointments for you and your new baby.



Do you have questions about:

- feeding your baby
- infant care
- parenting
- immunization
- car seats
- anything related to your child's care

Please contact your local Timiskaming Health Unit office for more information or to book an appointment.



New Liskeard 705-647-4305 1-866-747-4305



**Kirkland Lake** 705-567-9355 1-866-967-9355



**Englehart** 705-544-2221 1-877-544-2221

This document uses the term breastfeeding. Some people may prefer the term chestfeeding rather than breastfeeding, and may describe themselves with words other than woman, mother, mom, etc. Breastfeeding has traditionally been understood to involve individuals who identify as women and this document is written as if those who are breastfeeding are cisgender mothers. That is, their gender identity is the same as the sex or gender they were identified with at birth. The authors acknowledge individuals who do not identify as female that are in a human-milk-feeding relationship with their infant (BFI Strategy Ontario, 2019). We recognize, acknowledge and honor that parents and families come in all forms and though certain terms are mostly used, it is meant to be inclusive of parents, caregivers and significant others.

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**Keeping Mom Healthy** 

PART 3

## **PART 1** | Preparing for Your Baby

## **Prenatal Nutrition**

To promote a healthy pregnancy, it's important to follow Canada's Food Guide at <u>food-guide.canada.ca/en/</u> and ensure you are getting enough energy and essential nutrients such as calcium, vitamin D, vitamin C, iron, omega 3, and B vitamins.

- Eat balanced meals with vegetables, fruits, whole grains, and protein foods while limiting added sodium, sugars, and saturated fats.
   Foods rich in healthy fats, such as nuts, seeds, and fatty fish, can support the growth of your baby's brain and tissues.
- · Choose fish with low mercury levels.
- During the second and third trimesters, eat a little extra food each day than you would normally do to meet your baby's nutrient needs. For example: eat an extra snack or small meal.
- Avoid foods like raw seafood, undercooked meats, raw sprouts, and unpasteurized foods and beverages to prevent food poisoning.
- Folate deficiency is common among pregnant women; Health Canada recommends taking a multivitamin with 0.4 mg of folic acid daily for those planning a pregnancy, pregnant, or breastfeeding.



 Avoid herbal teas such as chamomile, aloe, coltsfoot, juniper berry, pennyroyal, buckthorn bark, comfrey, labrador tea, sassafras, duck root, lobelia, stinging nettle and senna leaves, as well as kombucha tea as they are not safe to drink during pregnancy. Other herbal teas, such as citrus peel, ginger, orange peel and rose hip, are considered safe in moderation (two to three cups per day).

- Drink plenty of water and make water your drink of choice.
- Keep your caffeine intake below 300 mg a day, including all sources of caffeine. Note: 300 mg is about two 8-oz (237 mL) cups of coffee or less per day.
- The safest option is to avoid alcohol, tobacco, vaping, and cannabis during pregnancy due to safety concerns.

For more information, speak to your prenatal care provider or contact a Healthy Baby Healthy Children (HBHC) Nurse at the Timiskaming Health Unit.

## **Physical Activity While Pregnant**

In general, most women can engage in physical activity during pregnancy.

It's recommended that pregnant women get at least 150 minutes of moderate intensity physical activity per week. If you have a medical condition or concerns about participating in physical activity, consult with your primary care provider for guidance.



## **Mental Health**

Pregnant people are at risk of experiencing postpartum depression up to a year after having the baby. Perinatal mood and anxiety disorder (PMAD) can be experienced by both mothers and fathers. If you need support, call a public health nurse to talk about how you are feeling or see your doctor/nurse practitioner as soon as you can. If you are in crisis, call or text 9-8-8 to reach the Suicide Crisis Helpline.



## Pregnancy and life with a new baby are not always what you expect.

1 in 5 mothers will have depression or anxiety during pregnancy or postpartum.

Depression and anxiety during pregnancy and postpartum are often referred to as perinatal mood and anxiety disorders (PMAD). In this leaflet we will use the short form PMAD when talking about these conditions.

### If you have PMAD you may:

- ☐ Have little or no interest or enjoyment in things you used to enjoy.
- Feel sad most of the time.
- Feel nervous, anxious or on edge.
- Feel like you can't stop or control worrying.

## You may also feel:

- Really tired.
- Irritable and/or angry.
- Restless.
- Slowed down.
- Worthless.
- Guilty.
- Ashamed.
- Numb or empty.
- Alone.
- Frustrated.
- Hopeless.
- Panicky.

## You may also:

- Have no energy.
- Have no appetite.
- Eat too much.
- Sleep too much.
- Not be able to sleep.
- Not be able to concentrate.
- Have aches and pains.
- Have chest pain or shortness of breath.
- Have a "lump" in your throat.
- Have numbness or tingling.
- Not want to spend time with your baby, partner, or family.
- Cry for no apparent reason.
- ☐ Keep checking things, e.g., baby's breathing.
- ☐ Have negative or disturbing thoughts or images that keep coming back.
- Think bad things may happen to you or your baby.
- Think you are not a good mother.
- Think your family would be better off without you.
- Think about death or suicide.
- Think about hurting yourself or your baby.

If you have had any of these symptoms for more than two weeks, talk to a health care provider. Together make a plan to help you get better. This could include therapy and/or medication.

If you feel like hurting yourself or your baby, or are thinking about suicide, get help right away.

- Call 911.
- Go to the nearest hospital emergency room.
- Contact the mental health crisis line in your area.

### You can get help from:

**Your health care provider** (family physician, midwife, nurse, nurse practitioner, obstetrician, psychiatrist, or psychologist).

**Your public health unit:** Call 18002681154 or visit <u>www.serviceontario.ca</u> to know the location and services of your local public health unit.

The Mental Health Helpline: Call 18665312600 (24 hours a day 7 days a week) or visit www.connexontario.ca/en-ca/ for information about mental health services in Ontario.

**Ontario Telehealth:** Call 18667970000 TTY: 18667970007 (24 hours a day 7 days a week) to get health information from a Registered Nurse.

Remember...
This is not your fault.
You are not alone.
There is help
for you and
your family.

## What you can do:

- ✓ Share your feelings with someone you trust.
- ✓ Ask for help.
- ✓ Take care of yourself.
- ✓ Take time for yourself.
- Get counselling or join a support group.
- ✓ Talk with your health care provider about taking medications.

## What you can do, if you are a partner, family member, or friend:

- Listen and support her feelings.
- ✓ Be helpful and don't judge her.
- ✓ Encourage her to seek help.
- Develop your relationship with the baby.
- Educate yourself about PMD.
- ✓ Take time for yourself.
- ✓ Find someone you can talk to.

1 in 10 fathers may also have PMAD. As a new father you may be at risk of PMAD. Get information and support as well.



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For more resources check www.resources.beststart.org/for-parents/

2021  $\mid$  This document has been prepared with funds provided by the Government of Ontario.

## **Vaccination and Pregnancy**

It is recommended that all pregnant people get their annual flu shot, as well as the Tdap vaccine in every pregnancy. Tdap protects against Tetanus, Diphtheria, and pertussis (Whooping cough).

Whooping cough and influenza are common diseases that can have serious complications in newborns and infants. These vaccines protect your baby in the first few months of life before they can start their childhood vaccines.

Contact your primary care provider or THU to book an appointment.

## **Car Seats**

When purchasing an infant car seat, you can use either a rear-facing only seat or a larger, rear-facing convertible seat as long as your baby fits correctly. In the event of a sudden stop or crash, a rear-facing car seat gives the best protection for your baby's head, neck and spine. To ensure your baby's safety, read the car seat manual and follow the instructions for your seat.

Staff at THU are trained to ensure your car seat is installed properly so your baby is safe for their first ride home. To get help with installing your car seat, call 1-866-747-4305 and ask about getting a car seat inspection.

## **Infant Feeding**

Choosing to breastfeed or formula feed is a personal choice. Regardless on what you decide is best for your family, THU has HBHC Nurses & a Lactation Consultant available to provide support and answer any breastfeeding or feeding questions you may have. It's ideal to ask newborn feeding questions while pregnant to ensure you're prepared and informed when your baby arrives.

Your second trimester is a good time to start asking questions. This will ensure you are ready whether your baby arrives early or close to your due date. Talk to your healthcare provider for more information on infant feeding. THU Healthy Babies Healthy Children (HBHC) Nurses are also available to answer questions. For more information on breastfeeding or formula feeding, go to beststart.org and search.



## Prenatal Classes

Prenatal classes help prepare expecting parents to feel more confident about labor, delivery and caring for their newborn.

Free prenatal classes are available from THU & Brighter Futures. THU also offers breastfeeding classes and one on one support as needed.

Brighter Futures offers postnatal and parenting classes as well as other activities for families.

### **Contact Information:**

Timiskaming Health Unit (THU): 1-866-747-4305

Brighter Futures: Kirkland Lake 705-567-5926 Englehart 705-544-5437 North Cobalt 705-672-3333

## **Preterm Labour**

Preterm labour can happen to anyone. There are ways to reduce the risk. Here are some signs of preterm labour:

- Regular contractions of the uterus before your baby is due.
- · Low dull backache.
- A feeling of pressure in the lower abdomen, the pelvis, or the lower back.

Learn the signs. Act right away, and find a way to get to the nearest hospital safely if you experience any of these:

- · Bleeding.
- Leaking or a gush of fluid from your vagina.
- Pain in your abdomen that you cannot explain.
- A decrease in your baby's movement.
- · Unusual and constant headaches.
- · Blurred vision or spots before your eyes.
- · Feeling dizzy.
- Dull pain in your lower back that does not go away.
- · Being in a motor vehicle collision.

## Signs You're in Labour

The difference between true labour and pre- labour contractions (Braxton Hicks). True labour contractions will gradually get stronger over time as opposed to Braxton Hicks, which are considered lighter and less painful. True contractions usually become quite regular and start to occur in a pattern so you can predict them. Braxton Hicks contractions are NOT regular and never really settle down into a pattern.

## When to go to the hospital:

It's recommended you go to the hospital when one or more of the following occurs:

- your water breaks in a gush or is leaking steadily.
- your contractions are regular:

If you are 30 mins or LESS from the birthing centre:

- **5** Contraction every 5 mins
- •
- 1 Contractions lasting 1 min
- .
- 1 For 1 hour

If you are 30 mins or MORE from the birthing centre:

- **10** Contraction every 10 mins
- .
- 1 Contractions lasting 1 min
- .
- 1 For 1 hour

## PART 2 | Keeping Your Baby Healthy

## **Skin-to-skin contact**

Skin-to-skin is a way of holding your baby that both babies and parents find enjoyable. The baby wears only a diaper and is held in an upright position on the mother's bare chest. A light blanket can be draped across the baby's back. When babies are held skin-to-skin they can hear their mother's heartbeat and breathing, and smell and feel her skin. This is familiar and comforting to newborns.

## Why is skin-to-skin important?

Skin-to-skin contact is important for all babies because it:

- stabilizes your baby's heart rate, breathing and blood sugar.
- · keeps your baby warm through your body heat.
- promotes bonding and getting to know your baby.
- helps your baby be calmer and cry less.
- helps you to be more confident and relaxed.
- triggers feeding behaviours.
- · increases milk production.
- decreases baby's pain during injections.

Hold your baby skin-to-skin as soon after birth as possible for at least 1 hour. Continue holding your baby skin-to-skin often and for long periods. Sometimes this is called 'kangaroo mother-baby care.' Premature babies benefit from this too. Older babies will also enjoy skin-to-skin holding. Your partner, or another person close to you, can practise skin-to-skin to get to know, comfort and nurture your baby too.



## **Breastfeeding**

The Canadian Paediatric Society, Health Canada and the World Health Organization recommend exclusive breastfeeding for the first 6 months. This means your baby does not need anything else during this time.

Your breastmilk contains everything that your baby needs in exactly the right amounts.

At 6 months of age, continue to breastfeed as you begin to give your baby solid foods. Breastmilk remains the most important food as your baby gradually begins to eat more solid foods.

There are important health benefits for you and your baby as you continue to breastfeed for 2 years and beyond. Breastfeed as long as you and your baby want.



## Why is breastfeeding important?

## Importance for baby

- · safest choice
- easy to digest.
- right amount of nutrients and energy that change.

to meet baby's needs as they grow.

- promotes healthy tooth and jaw development.
- protects the immune system.
- protects against allergies, asthma, respiratory infections and ear infections.
- protects against gastrointestinal infections and diseases like Crohn's disease.
- protects against chronic diseases like diabetes, heart disease and some cancers.
- reduces the risk of Sudden Infant Death Syndrome (SIDS).
- · higher IQ scores.



## Importance for mom

- produces naturally soothing hormones which help increase calmness and confidence.
- helps prevent postpartum hemorrhage.
- protects against breast, ovarian and uterine cancers.

## Importance for family and community

- free
- convenient
- skin-to-skin contact promotes a loving and secure relationship.
- parents miss less work because children are healthier.
- · reduces healthcare costs.
- protects the environment.

## **Start out right**

Getting a great start in the early days of breastfeeding will make it easier for you and your baby. Begin breastfeeding as soon as you and baby are medically stable. If you and your baby are separated for health reasons, hand express or pump at least 8 times in 24 hours to establish your milk supply.

## Breastfeed as soon as you and baby are able

 Your baby's sucking reflex is strong. This will help establish proper latching.

- Place your baby skin to skin as soon as possible after birth. Hold your baby without any interruptions for an hour or more or as long as you wish.
- Colostrum is packed with immune protection. It is all the food your baby needs.

To establish your milk supply:

- Put your baby to breast at least 8 times in 24 hours, day and night.
- Make sure your baby has a deep latch.
- Offer both breasts at every feed.
- Hand express. See "Expressing milk by hand" on page 11, for more information.

## **Avoid bottles and pacifiers**

Bottles and pacifiers can interfere with breastfeeding. If you give your baby a bottle or pacifier, your baby:

- may prefer the rapid milk flow.
- may not latch well to the breast.
- · will feed at the breast less often.

This will lead to a decrease in your milk supply and may lead to quitting breastfeeding sooner than planned.

## **Give breastmilk only**

Formula supplements are rarely needed. Keep in mind:

- The best supplement is breastmilk.
- If supplements are needed, they can be given by lactation aid at the breast, by cup or spoon.
- It takes time and practice for you and your baby to learn to breastfeed. You can hand express or pump if needed. Your baby only needs a teaspoon of breastmilk per feeding on their first day!

## Get skilled help when you need it

Sometimes you might be worried about having a deep latch. Or you may want to feel sure your baby is growing well. Help is available in your community. Contact a THU HBHC Nurse at 1-866-747-4305 for more information about breastfeeding clinics and peer support programs in your area. THU also has an International Board- Certified Lactation Consultant available to help parents facing challenges with breastfeeding.

You can also get advice and referrals 24 hours a day, seven days a week from Health Connect Ontario by visiting <a href="https://health.gov.on.ca">health.gov.on.ca</a> or calling 811 (TTY: 1-866-797-0007).

## **Feeding your baby**

Breastfeeding is a wonderful and natural way to feed and nurture your baby. Your baby gets breastmilk and the warmth and comfort of your breasts and arms. Like any new skill, learning to breastfeed takes practice.

## How do I position my baby?

- Get into a comfortable position.
- Bring baby close to the level of your breast.
- Baby should be facing you tummy to tummy.
- Skin-to-skin contact keeps baby more awake.



## **Laid-back position** (see photo above)

This position is helpful when you are learning to breastfeed or if you are having difficulty obtaining a deep latch.

- Lean back, not lying down, but enough that when you put baby on your chest, gravity will keep their position.
- Your head, neck, shoulders and back should be fully supported with your body relaxed.
- Let baby's whole front rest on your body with their body molded to yours.
- Baby's thighs and feet should be touching you or something else like a blanket, bed or chair. This will stimulate baby's reflexes.
- Let baby's cheek rest near your bare breast.
- Gravity will help baby to latch. You can help as needed.
- Hold your breast if you choose.

## **Cross-cradle hold**

This position is helpful when you are learning to breastfeed.

- Hold baby with the arm opposite the breast you are feeding from.
- Lay baby on her side, facing you at breast height.
- Support baby's back with your forearm. Support their neck and shoulders with your hand.
- Squeeze baby's bottom in close to you with your elbow.

## Football hold

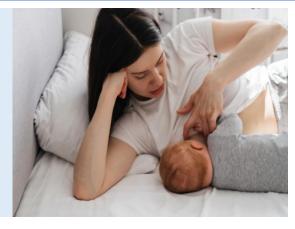
This position is helpful when you are learning to breastfeed, you had a C-section, you have large breasts, or you have flat and sore nipples.

- Put pillows behind your back to bring you forward.
- Hold baby in the same arm as the breast you are feeding from.
- Tuck baby's body under your arm by your side.
- Rest baby's upper back along your forearm while you support their neck with your hand. Baby's head will be under your breast.
- Squeeze baby close to you with your elbow.

### Cradle hold

This position works well after you are comfortable with breastfeeding and your baby is latching easily.

- Hold baby in the arm on the side you are breastfeeding from.
- Place baby on side, tummy to tummy.
- Rest baby's head on your forearm and support the rest of her body with your other arm.



**Side-lying position** (see photo above)
This position works well if you find it too painful to sit, if you want to rest when you breastfeed, if you had a C-section, or if you have large breasts.

- Lay on your side with a pillow to support your head.
- Lay baby tummy to tummy on their side facing you. Bring them in close to your body.

## How do I latch my baby?

Breastfeeding should be comfortable. If you have sore nipples, check to see if your baby is latched correctly.

## Tips to help you position and latch your baby

- 1. Choose a position to feed your baby.
- 2. Support your breast with your hand. Keep your fingers behind your areola (coloured part of your nipple).
- 3. Line up baby with their nose to your nipple at the breast. Baby's head should tilt back a little bit. Bring their chin to your breast. Tickle baby's top lip with your nipple. Wait for a wide-open mouth, like a yawn, and quickly bring baby onto the breast. Baby's bottom lip should touch first, followed by the top lip.
- 4. When your baby is properly latched and drinking milk from your breast:
  - Mouth appears full of breast, no dimpling of cheeks.
  - You will feel a firm drawing-in of your breast with no pain.
  - · Baby's lips will be rolled outwards.
  - Baby's lower jaw will move up and down.
  - Baby's lower lip will cover more areola than the upper lip.

- Nipple is round and longer when baby comes off breast (no creasing or flattening of nipple).
- 5. If there is pain, break the latch by placing your finger in the baby's mouth between the gums to release suction. Try to latch again. Poor latch can cause sore nipples that can reduce the amount of milk baby drinks from the breast, affecting baby's weight gain.
- 6. Listen for swallow sounds (like a soft 'k' sound). At the beginning of the feeding, the suck will be shallow and quick. Later in the feed, the sucks will become deep and slow. If you find it hard to hear the baby swallow, watch for a rhythm involving sucks and pauses. Watch for the pause as their chin drops before they start to suck.
- 7. Nurse the baby as long as they want on the first breast. When baby comes off the breast, or they are no longer actively swallowing, you can burp and change their diaper if needed. Offer the second breast. Most babies will feed from the second breast. Usually the feed is shorter on the second side.
- 8. Your baby should appear satisfied and content after a feed.
- 9. Your breasts should feel softer after feeding.

## Frequency and length of feeds

## How often should I breastfeed my baby?

Babies should feed whenever they appear hungry. Look for these feeding cues:

- · moves eyes quickly before waking.
- brings hands to mouth.
- licks/sucks.
- roots (moves head side-to-side to find the breast).
- increases body movements and makes small sounds.

Crying is a late feeding cue. If your baby is crying, they may have difficulty latching. Take a short break, settle them and try again.

Babies need to breastfeed at least 8 times in a 24-hour period., day and night. Some babies may sleep for 4 to 5 hours, once in a 24-hour period.



Newborn babies need to feed often because their stomachs are small (size of a walnut) and they digest breastmilk quickly. Babies often feed more frequently in the evening – sometimes every hour. This is normal and is called "cluster feeding."

## How long should a feeding last?

It is important that your baby feeds long enough to be satisfied. In the early weeks, offer both breasts to stimulate milk supply. While some babies continue to feed from both breasts at each feed, other babies are satisfied with one breast.

If your baby is asleep at the breast, stimulate

them by touching their skin. When they start to suck, squeeze your breast and they should start to swallow again. When they stop swallowing, stop squeezing. Repeat these compressions until your baby is finished on both sides.

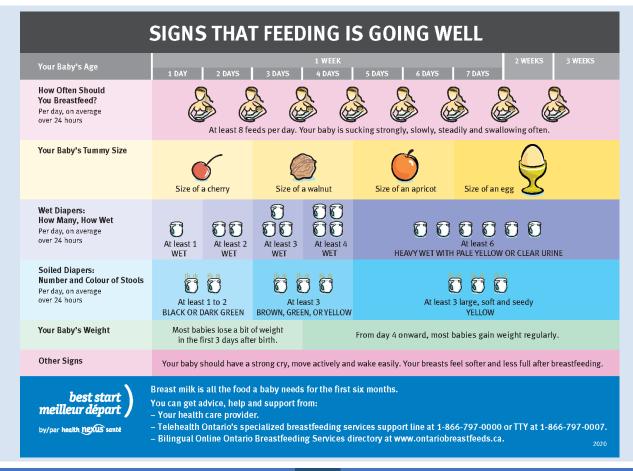
Your body will make milk in response to your infant's ability to remove it. Your breasts are never empty. Once breastfeeding is going well, your breasts may not feel as full as they did in the early days. There will be enough for your baby. As your baby nurses, more milk is produced.

## How do I know when my baby has had enough milk?

Here are some signs that your baby is satisfied:

- nurses well with a deep latch at least 8 times in 24 hours, day and night.
- mouth is wet and pink, and eyes look bright and alert.
- · wet and dirty diapers.
- gains weight (most babies are back to their birth weight by 2 weeks of age).
- cries loudly and moves actively.
- · relaxes and sleeps after feedings.

Your baby will be hungrier during growth spurts. When your baby is experiencing a growth spurt, they may cluster feed (feed more than usual). This is normal.



## **Caring for your breasts**

Your breasts have changed throughout your pregnancy and will again with breastfeeding. Your breasts can become heavy as the volume of milk increases. For your comfort, get a well-fitting bra without an underwire.

Breasts tend to feel fuller before feeding and softer after. Around the third day your breasts usually feel quite full and may be uncomfortable (engorgement). This will get better in a few days. To help reduce the swelling, try applying soft cold packs or a bag of frozen vegetables wrapped in a light towel to your breasts. Continue to feed frequently and call a THU HBHC Nurse if you would like more suggestions.

## Tips for taking care of your nipples

- Most babies will let go of the breast when they finish a feed. If you need to remove the baby yourself, be sure to first place your finger in the corner of her mouth to break the suction.
- Express breastmilk and rub it on your nipples after a feeding and let air dry.
- When you wear breast pads for leaking, change them often to keep your nipples dry. It is best not to use plastic-lined breast pads.

## Can I give my baby a soother or bottle?

Sucking at the breast is needed to establish and maintain your milk supply for your baby's growing needs. Soothers and bottles are not recommended for breastfed babies. Try calming your baby by walking, rocking and carrying them instead.

Soothers or bottle nipples can:

- confuse your baby's suck.
- lead to a poor latch, sore nipples and less milk.
- decrease the overall length of time you breastfeed your baby.

## When you can't feed your baby at the breast

If you need to supplement, give your baby expressed breastmilk and avoid using a bottle. The change in nipple, from your breast to a bottle or pacifier, can confuse your baby. Ways to feed your

baby without a bottle, include using a spoon, cup or finger feeding. Call THU HBHC for support with breast or chestfeeding.

## **Expressing and storing** breastmilk

You may need to express breastmilk if you are away from your baby because of illness or prematurity, or because you want to increase your milk supply.

## Getting ready

- Wash your hands and remember to wash your hands often throughout the day. Handwashing is your first line of defense against infections.
- Make sure you have a clean glass, a hard plastic container or plastic storage bags made especially for storing breastmilk.

## Learning to express milk takes time

- Relax and decrease distractions to help your letdown (milk flow). Think about your baby.
- Use warm compresses or take a hot shower and use gentle massage to stimulate your milk flow.
- Express as soon as possible after a feeding when your schedule allows. Your milk supply is usually most plentiful in the morning.
- If you are ill or away from your baby, express at least 8 times every 24 hours, day and night to keep your milk supply.
- The amount of milk you collect depends on many things such as time of day, how long since the last feeding and your stress level.

## Expressing milk by hand

- Cup your breast in your hand with your fingers below and above the areola (dark area) about 1 to 1 1/2 inches behind the nipple.
- Push straight back towards your rib cage.
- · Roll your thumb and index finger forward all the
- way to the end of the nipple.
- Repeat all around your breast to get as much milk as you can.
- Switch to the other breast when you see the milk slow down.
- Repeat for 10 to 15 minutes or until the milk flows very slowly.

Guidelines for storing breastmilk for healthy babies who are at home

	Room temperature	Cooler with ice packs	Refrigerator	Freezer inside a refrigerator	Refrigerator freezer with separate door	Deep freezer (chest or upright)
Freshly expressed breastmilk	4 hours optimal 6-8 hours acceptable under very clean conditions (no warmer than 25°C [77°F])	10 hours optimal 24 hours acceptable	4 days optimal 5 to 8 days under very clean conditions (at a temperature of below 4°C [<39°F])	2 weeks (not in the door)	3 to 6 months (not in the door)	6 months optimal 12 months acceptable (at a temperature below-20°C [-4°F])
Previously frozen breastmilk	Do not store	24 hours acceptable	24 hours	Never refreeze thawed milk	Never refreeze thawed milk	Never refreeze thawed milk

## Expressing milk using a pump

Use the manual when putting together a pump. Set the pump on your breast so that it is centered over the nipple. If you are using an electric pump:

- Ensure you have the proper flange size.
- Put the pump in place before turning it on.
- Set the pump to the lowest setting and increase slowly as tolerated. It should not be painful.
- Pump for 10 to 15 minutes or until the milk is flowing very slowly.
- Repeat with the other breast.

You can breastfeed or express at work/school. By law your employer should give you short breaks during your work day to breastfeed your child or express milk.

## What is the best way to store my breastmilk?

- Store breastmilk in 2 to 4 ounce portions to reduce waste in a glass bottle or milk bags for breast milk, with the date marked on it.
- Leave a 1-inch space so the milk has room to expand when frozen.
- Mark the date and time on each container.
- Place it in the back of a fridge or freezer where it is the coldest.
- You can add cooled milk to a partially filled container of already cooled milk expressed on the same day.

## How do I thaw frozen milk?

 Thawed milk may look and smell different but it is still safe to use. Swirl it gently to remix the fat. Do not add cooled milk into milk that has already been frozen or thawed.

- Use the oldest milk first. Place the frozen milk in the fridge overnight.
- For a faster thaw, put the frozen milk under cool running water, and then under warm running water or set the container in a bowl of warm water or use a waterless warmer.
- Important: Never thaw breastmilk at room temperature because this can cause bacteria to grow. Also, do not use a microwave to thaw or warm up breastmilk as hot spots can burn your baby's mouth. Microwaves destroy living cells and some of the benefits of breastmilk will be lost. Never mix fresh breast milk with chilled or frozen breast milk because it can cause bacteria to grow and lead to food poisoning.

## Formula feeding: risks and costs

## Breastmilk or formula?

Breastfeeding is the natural way of providing infants with the nutrients they need for healthy growth and development. It is your right to make an informed decision about how you feed your baby, and Public Health will support that decision. It is important to have all the information, including the risks and costs, before you decide how to feed your baby. It is also important to consider whether the feeding method is acceptable to you, feasible, affordable, sustainable and safe in your circumstances.

## What could happen if my baby is fed formula?

Mothers who want to breastfeed usually find that they have trouble establishing their milk supply if they give their newborn infant formula. Mothers who have an established milk supply find that their milk supply decreases once they introduce

Babies fed infant formula are at higher risk for:

	Chronic conditions	Acute diseases		
Diabetes Heart disease Childhood cancers Obesity Lower IQ scores	Gastrointestinal problems Allergies Crohn's disease Sudden Infant Death Syndrome (SIDS)	Lung infections and wheezing Diarrhea Ear infections Infection from contaminated formula Side effects of environmental poisons Severe bowel disease in premature and low birth weight babies		

Women who do not breastfeed are at higher risk for:

Post-birth conditions	Cancer	Chronic Illnesses	
Hemorrhaging Slow return to pre-pregnancy weight Reduced spacing between births	Breast Ovarian	Arthritis Diabetes Osteoporosis	

infant formula to their baby. Most mothers find it difficult to return to breastfeeding if they switch to formula feeding and decide they want to start breastfeeding again.

If you feed your newborn baby formula, they will have a higher risk of getting sick and being hospitalized during childhood and as an adult. This is because formula changes the lining in your baby's stomach and does not provide any immune protection for your baby.

## If I feed my baby formula, how does it affect my life and community?

- Increases costs to your family. There is less money for other things you need.
- Could increase the amount of time you will miss work to care for a sick child and go to medical appointments.
- · Creates more waste.

## What does it cost to feed a baby formula instead of breastmilk?

The average cost of feeding a baby with basic formula for one year in Ontario can be around \$1,500 or even more, depending on the formula. This does not include the cost of bottles, nipples, and other supplies needed for formula feeding.

Formula feeding can be affected by shortages, store availability, and price changes. Breastmilk, on the other hand, is always available and gives your baby everything they need to properly grow and develop.

## **Supplements and solid foods**

## Vitamin D supplement

Vitamin D is a nutrient that helps the body absorb calcium. Calcium and vitamin D work together to help maintain healthy bones and teeth. Vitamin D also helps the muscles, nerves and immune system work properly.

Health Canada recommends all breastfed and partially breastfed babies receive a liquid 400 IU (10 mcg) vitamin D supplement daily until 2 years of age. Discuss any questions you have about giving your baby a vitamin D supplement with your healthcare provider.

At 9 to 12 months old, continue to breastfeed and introduce pasteurized, unsweetened homogenized (3.25% M.F.) cow's milk.

If you are giving formula and your infant is eating a variety of foods two or more times a day, introduce homogenized (3.25% M.F.) cow's milk at 9 to 12 months.

Either way, offer 500 mL per day in an open cup and limit intake to no more than 750 mL (3 cups) per day.

## Starting solid foods at 6 months

The introduction of solid foods at 6 months is important because your baby needs extra iron at this age. Breastmilk will still be the most important food for your baby. Solid foods will provide a variety of nutrients, flavours and textures. Your baby is ready for solid foods when they:

- Can sit up, hold their head steady and lean forward.
- Open their mouth wide when you offer food.
- Can pick up food and try to put it in their mouth.

• Can let you know when they don't want food by turning their head away.

Make sure your baby shows all these signs of readiness before you start solid foods.



## **Texture**

- Provide a variety of textures such as lumpy, soft-cooked, finely minced, pureed, mashed and ground textures.
- Ensure that lumpy textures are offered no later than 9 months.
- Your child should be eating food from family meals by one year of age.
- Do not offer foods that contain salt or sugar.

### Iron

- Most healthy-term infants are born with sufficient iron stores to meet their iron needs until they are about 6 months old.
- At 6 months, infants should be offered ironcontaining foods 2 or more times daily.
- This includes meats such as beef, lamb, game, poultry, fish, eggs, tofu, legumes such as beans, lentils, and chickpeas, iron-fortified infant cereals, and other fortified foods.
- Add a source of vitamin C such as lemon juice or fruits and veggies to plant-based iron sources such as legumes to increase iron absorption.
- If your child is following a vegetarian or vegan diet, consult with a Registered Dietitian to ensure they meet their iron needs and other key nutrients.

## **Food Allergy**

- Common allergenic foods are dairy, eggs, peanuts, tree nuts, fish, shellfish, wheat, and soy.
- To prevent food allergies, introduce allergenic foods at 6 months one at a time, and monitor for any reactions.
- Continue to offer tolerated allergenic foods a few times each week to maintain tolerance and prevent allergies.

## Satter's Division of Responsibility

Babies have a natural ability to regulate their hunger and fullness and will show signs. Your job as a parent is to be aware of these cues to avoid under or over-feeding.

As a parent or caregiver, you are responsible for what food to offer, when, and where to feed your infant.

Your baby is responsible for how much and whether to eat the foods offered.

- Encourage responsive feeding as it promotes the development of healthy eating skills.
- Pay attention to your child's hunger and satiety cues.
- Promote offering finger foods to encourage selffeeding.
- Encourage the use of an open cup at 6 months, initially with help.

## Food Safety

- Do not offer honey before one year of age to avoid food poisoning.
- Prepare and store food safely to prevent foodborne illness.
- Avoid foods that are raw or undercooked such as meat, eggs, poultry, fish, unpasteurized milk and dairy products, and unpasteurized juices.
- Avoid cross-contamination between cooked and uncooked foods.

## **Fluids**

- Water may be introduced in an open cup no earlier than 6 months of age. There is no recommended amount of water for an infant to drink between 6 and 12 months of age; however, amounts should be limited to avoid interference with breastmilk and solid foods.
- Do not offer juices under 1 year of age as they are high in sugar and do not offer any nutritional benefit.
- After 1 year of age, avoid juice and replace it with water. If given, limit to at most 125 mL (4 oz) per day of 100% fruit juice as part of meal or snack in an open cup.

See <u>Unlockfood.ca</u> for more information about starting solid foods.



## **Babies and crying**

Crying is your baby's first form of communication. It is normal and is a 'signalling behaviour' because it brings the parents to the child. Be curious about why your baby might be signalling you.

Your baby's crying is an important call for help and one of the ways your baby shows their needs. Try to comfort them. If you respond quickly and warmly to your baby's cries, they will tend to cry less and may sleep better at night when they are older.

The first few weeks outside the uterus are insecure and lonely for a baby. Being held against mom or dad's body gives a sense of security and forms the basis of trust between parent and child. You cannot 'spoil' a baby by picking them up when they need you.

## Things to remember about crying

- Healthy babies may cry up to 2 or 3 hours in a 24-hour period.
- Most babies cry more at 6 to 8 weeks and less after 3 months.
- Babies often have fussy periods in the evening and cry more at night.

## Why is my baby crying?

Crying is your baby's first form of communication. Your baby may be crying because they:

- are hungry.
- have a wet or dirty diaper.
- · are too hot or too cold.
- need to be held or to suck.
- have tummy pain.
- are bored, overstimulated or tired.

## Other ways to help your crying baby

- Hold your baby close to your chest. Hearing your heartbeat can be comforting.
- Burp and gently rub your baby's back.
- Try quiet, rhythmic motions (e.g., car ride, stroller, rocking).
- Use slow repetitive noise (e.g., fan, hair dryer, vacuum cleaner) or play music.
- · Give your baby a warm bath.

## What should I do if my baby keeps crying?

Sometimes, no matter what you do, your baby keeps crying. This can make you feel anxious and frustrated, but it is important for you to take a deep breath and try to stay calm. Your baby cries for many reasons, but never to make you angry.

- · Never shake your baby.
- Put your baby down in a safe place (e.g., crib) and leave the room until you calm down.
- Let off steam away from your baby. Try deep breathing, physical exertion, meditation, take a shower, have a warm drink, listen to music ... anything to help you relax.
- If you need help, call a friend, family member, your healthcare provider, a THU HBHC Nurse or one of the help lines listed below:

## СМНА

Kirkland Lake 705-567-9596 New Liskeard 705-647-4444

## **Suicide Crisis Helpline**

Call or text 9-8-8



## **Babies and sleep**

Your baby's sleep patterns will vary as they grow. Newborns sleep an average of 14 to 18 hours a day. After 1 month of age, infants have more awake periods.

## **Infant sleep patterns**

Newborns typically have one long sleep period every day that lasts between 2 to 3 hours. They may have their days and nights mixed up and be more awake at night.

Newborns need to wake often to be fed because they have small tummies and are gaining weight quickly. Gradually, babies take more of their feedings during the day and sleep for longer periods at night.

## Is it too early to start a bedtime routine?

It is never too early to start a bedtime routine. An evening bath, feeding or quiet activity (singing, reading, rocking and nursery rhymes) can be part of a bedtime routine. A consistent, predictable daily routine helps children feel secure and develop regular sleep habits.

Many parents nurse or rock their baby to sleep. If you are comfortable with this routine, there is no evidence that your newborn will not learn healthy sleep patterns as they age.

## Share your room, not your bed

Studies have shown that when babies share a bed with parents, they are at greater risk for entrapment and suffocation. Share the same room with your infant for at least the first 6 months of life. Place the crib, cradle or bassinet next to your bed. This is known as room sharing.

## Benefits of room sharing

- decreased risk of Sudden Infant Death Syndrome (SIDS).
- your baby may sleep better.

- you may get more sleep.
- being more aware of your baby's nighttime feeding needs can help you breastfeed longer.

## Safe sleep practices: reducing the risk of Sudden Infant Death Syndrome (SIDS)

SIDS is the sudden and unexpected death of a healthy infant younger than 1 year of age. These unexplained deaths usually happen when the baby is sleeping.

The following recommendations can help reduce the risk of SIDS.

## **Babies should sleep on their backs**

The Canadian Paediatric Society recommends that babies younger than 1 year of age sleep on their backs in their own cribs. Once your baby can turn from their back to their tummy, you do not need to reposition them onto their back.

## Remove bed clutter

Remove pillows, comforters, quilts, stuffed animals, bumper pads, positional devices or other loose or soft bedding materials that could suffocate or smother your baby. Never let your baby sleep on a waterbed or couch.

## Keep your baby warm, not hot

Dress your infant in comfortable, fitted, one-piece sleepwear. You can check if they are too hot by placing your hand at the back of their neck. If their neck is moist, they are too warm. If their arms and legs are cool, consider warmer sleepwear. Keep in mind that it is normal for newborns to have cool hands and feet.

There are many factors to consider about swaddling. For more information, search for the "Sleep Well, Sleep Safe" booklet at <u>beststart.org</u> or contact THU to request a copy.

## **Breastfeed**

Breastfeeding reduces the risk of SIDS. Exclusive breastfeeding reduces the risk even more.

## **Keep your home smoke-free**

Do not allow smoking in your home. See p. 30 for more information about keeping your home smokefree.

## **Healthcare for your baby**

## When do I see my healthcare provider?

Follow up with your baby's healthcare provider in the first week of being home from the hospital. Your healthcare provider will tell you when your baby is going to need immunizations and regular checkups.

## When do I seek immediate medical attention? Call your healthcare provider if your baby:

- does not have the right amount of wet and dirty diapers (see p. 9).
- is too sleepy to feed or very lethargic.
- becomes more yellow.
- is crying inconsolably.
- has a fever of 38°C or higher.

## **Jaundice**

In most cases yellowing of the skin, known as jaundice, is normal. It usually peaks between days 3 to 7.



## **Treating jaundice**

Feed your baby more often. Feeding helps with frequent bowel movements, which will clear the jaundice more quickly.

Dress your baby only in a diaper and place them in a sunny room for short periods of time (5 minutes, 3 times a day is adequate). Do not place your baby in direct sunlight.

## **Call your healthcare provider if your baby:**

- becomes more yellow.
- has trouble staying awake for feedings.
- · refuses breastfeeding or bottle feeding.
- has less than 6 wet diapers each day after 1 week of age.

## **Fevers**

A fever is a normal body process to fight infections. A child is considered to have a fever when the axilla (armpit) temperature is 38°C (100°F) or higher. A temperature can vary as much as 0.5°C (1°F) throughout the day. Most fevers last no more than 3 days as they are due to minor infections that resolve in time.

If your baby has a fever and is younger than 6 months, see your healthcare provider right away. Never give Aspirin (ASA) or any drugs containing Aspirin to a child younger than 18 years of age. Use only medications that your healthcare provider recommends.

## **Rashes**

A baby's skin is sensitive, and rashes are common. Most rashes go away without treatment.

## How to prevent rashes

- Dry your baby well after changing their diaper and bathing them. Apply protective skin cream.
   Clean the area first before applying a new layer.
- Use unscented soaps, wipes and lotions.
- Wash new clothes before putting them on your baby.
- Use a small amount of laundry detergent, double rinse your baby's clothes, and avoid using bleach or fabric softener.
- To prevent a heat rash, do not overdress your baby. Check for sweat (a sign of overheating) by placing your finger in the folds at the back of baby's neck.

## **Cradle cap**

Cradle cap is the flaky crust or yellowish greasy scale found on a baby's scalp during the first few months of life.

## How to prevent cradle cap:

- Massage your baby's head while shampooing.
- Make sure that any soap or shampoo is rinsed away.
- · Gently brush your baby's hair every day.

## How to treat cradle cap

- Rub breastmilk, mineral oil or vegetable oil onto your baby's scalp. Leave on for 20 to 30 minutes.
- Comb out any loose flakes with a baby brush or a fine-toothed comb.
- Shampoo your baby's scalp and rinse well.
- Do not try to pick off the flakes.

## **Umbilical cord**

The umbilical cord does not require special care. Your baby can have a bath while the cord is still on. Let the umbilical cord dry and fall off naturally. Between 7 to 14 days after birth, it will get darker and smaller before falling off. It is normal to see small dots of blood when it falls off and for a day or 2 later.

## Call your healthcare provider if:

- the area around the cord becomes red and swollen.
- · there is a foul odour.
- the cord leaks pus, fluid or blood.

## **Soft spots**

Newborns have 2 soft spots. The one on the back of the head is usually not as noticeable. The bigger diamond-shaped one on the top of the head does not close for 12 to 18 months. Clean and touch the soft spots as you would any other part of the head.

## **Bathing your baby**

Bath time is an enjoyable way for you and your baby to spend time together. It is up



to you how often you bathe your baby. Some families bathe every day, others less often.

## **Bath tips**

- · Make sure the room is warm.
- Never use bath seats.
- Bath water should be slightly warmer than body temperature. Never add warm or hot water to the tub while your baby is in the water.
- Always support your baby's head and neck.
- Stay within sight and reach of your baby in the bathroom at all times. Do not turn your back, even for a second.



- Use clear water on their face. You do not need soap.
- Do not use a cotton-tipped swab in their nose and ears.
- Clean and dry the creases in your baby's neck, armpits and groin.
- Do not use baby powder on their body. Inhaled powder can bother their lungs.
- Drain the tub after bathing.

## **Trimming baby's fingernails**

Your baby's fingernails are soft and attached to the skin at birth. When nails grow past the fingertips, you can trim them. This is easier to do when your baby is sleeping.

- Hold the skin away from the nail and carefully cut straight across.
- If nails are ragged, you can use a file. Never bite your baby's nails.

## Your baby boy Uncircumcised

A baby boy's uncircumcised penis does not require any special care. His penis will soak clean in the tub. Never pull back the foreskin to clean as this will cause injury.

## **Circumcised**

The Canadian Paediatric Society does not recommend circumcision be performed routinely. The Ontario Health Insurance Plan (OHIP) no longer covers this procedure.

If you choose to circumcise your baby, follow the instructions given to you by your healthcare provider. For more information on circumcision go to <u>caringforkids.cps.ca</u> and search **"circumcision."** 

## **Call your healthcare provider if:**

- Your baby does not wet his diaper in 24 hours.
- There are signs of infection such as bleeding, discharge or foul smell.

## Your baby girl

When you change your daughter's diaper, wipe the diaper area from front to back so that germs do not get into her vagina and bladder. You may notice some blood-tinged mucus or some swelling of the labia in the early days. This is normal.

## PART 3 | Keeping Mom Healthy



## Take care of yourself, too!

Give yourself time to get used to how your body has changed and your new role as a parent.

When you take care of your own physical and emotional needs, it is easier to enjoy and take care of your baby.

## **Get immediate medical help if you have:**

- painful, swollen or red areas on your legs or groin.
- trouble breathing or shortness of breath.
- · chest pain.
- severe headache that will not go away.
- blurred vision.
- extreme dizziness.
- large or increased amounts of bright red bleeding.

## Vaginal area care

- Use sanitary pads instead of tampons. You can talk about using tampons with your healthcare provider at your 6-week checkup.
- · Wash your hands before and after changing pads.
- Continue to use your plastic squeeze-bottle filled with plain warm water every time you go to the bathroom until your bleeding stops. This is soothing as well as cleansing.
- Pat yourself dry with toilet paper from front to back.

## **Stitches**

 The stitches used for your episiotomy or vaginal tear dissolve on their own, usually within 2 weeks. Most of the healing will happen in the first week, but the area can be tender for longer.

## Vaginal bleeding

- Vaginal bleeding happens for 2 to 6 weeks after your baby's birth. The colour will change gradually from red to pink to brown.
- If your blood changes back to a red colour, it could mean you are being too active. Slow down and rest as needed.
- If you are breastfeeding, it is normal in the early weeks to have heavier vaginal flow after a feeding.

## Call your healthcare provider if you have any of the following symptoms:

- sanitary pad soaks through in less than 1 hour.
- ongoing heavy flow.
- many clots or large clots (bigger than a toonie).
- bright red bleeding that continues after resting for 1 hour.
- blood flow has a strong, unusual odour.
- · fever or chills.
- pain when you urinate.
- vaginal area becomes hot, swollen and painful.

## **C-section recovery**

## Incision

After a C-section, your incision may feel itchy. The skin around the incision may feel numb or have a tugging feeling. Tenderness can last up to 2 months.

## **Caring for your incision**

- Shower every day to keep the incision clean, and use unscented soap.
- Uncover the incision as much as possible it will heal faster.
- If your clothes bother your incision, put a sanitary pad along the elastic of your underwear.

## **Your body**

- Do not lift anything heavier than your baby.
- · Rest often.
- Accept all offers of help.

## Call your healthcare provider if you have any of the following symptoms:

- increased redness, swelling or heat around the incision.
- incision starts to separate.
- · foul odour.
- bleeding or drainage comes from the incision.
- · fever or chills.

For more information on caring for yourself after the birth of your baby, contact your primary care provider.

## Your period

Your period may start as early as 6 weeks after your baby's birth but is usually delayed while exclusively breastfeeding. You may notice a change in normal flow. Remember, you can get pregnant before your first period returns!

## **Constipation**

Constipation is a common problem during pregnancy and after having a baby. This can lead to uncomfortable bowel movements.

## How to prevent constipation

Keep your bowel movements soft by drinking 6 to 8 glasses of water each day. It is important to rest after you give birth, but some light physical activity (like walking) will make bowel movements easier.

## Eat high-fibre foods, like:

- multigrain bread and bran products.
- fruit (including prunes) and vegetables.
- · dried peas, beans and lentils.

If you have uncomfortable bowel movements, or have not had one for a while, ask a healthcare professional about over-the-counter constipation medications.

## **Hemorrhoids**

Hemorrhoids are swollen veins inside and around the rectum. You may feel pain, burning and itching, and notice a lump on your rectum.

Some women develop hemorrhoids during pregnancy, and others can develop hemorrhoids during delivery. Sometimes they last for a few weeks after birth.

## How to treat hemorrhoids

- Soak in warm water (sitz bath).
- Apply an ice pack or cold compress to the anal area to help reduce swelling.
- Drink 6 to 8 glasses of water each day and eat lots of fibre to keep your bowel movements soft.

## **Bladder care**

In the first weeks after your baby is born, you may notice a difference in how often you need to empty your bladder. If you do not have the urge to empty your bladder, remind yourself to go to the bathroom often. Drink lots of water to flush out your bladder. Wipe from front to back to help prevent infections.

## Call your healthcare provider if you have any of the following symptoms:

- · dark-coloured urine.
- · pain when you urinate.
- frequent or urgent need to urinate.
- dribbling or leaking urine.
- strong, foul-smelling urine.

## **Kegel exercises**

Kegel exercises help strengthen your pelvic floor muscles. Stronger muscles can help decrease pain, restore bladder tone, heal an episiotomy or hemorrhoids, and increase sexual enjoyment during intercourse. These exercises can be done anywhere, anytime.

## How to do Kegel exercises:

- Squeeze your perineum muscles. Imagine you are trying to stop urine from flowing (but do not do Kegels while emptying your bladder!).
- 2. Hold the position, count to 5, then relax.
- 3. Repeat 5 times at first, then increase repetitions as you feel stronger.
- 4. Do as many and as often as you can.

Make Kegels part of your daily routine. Do them regularly to build and maintain strong pelvic floor muscles. Continue them throughout your life.

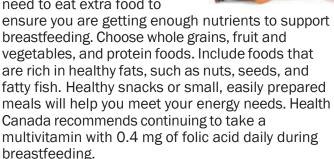


## **Nutrition**

Healthy eating is a good lifestyle habit. It means enjoying a wide variety of tasty food while limiting highly processed foods that are high in fats, sugar and salt. Canada's Food Guide recommends eating plenty of vegetables and fruits, whole grain foods and protein foods. If you have questions about healthy eating, contact a dietitian at your primary care office or go to Canada's Food Guide: https://food-guide.canada.ca/en/

## Nutrition for breastfeeding

While breastfeeding, you need to eat extra food to



Drink plenty of water and make it your drink of choice. Limit your caffeine intake to below 300 mg a day, including all sources of caffeine.

Note: 300 mg of caffeine is about two 8-oz (237 mL) cups of coffee or less per day.

## **Alcohol and Cannabis**

When you drink alcohol or use cannabis it passes into your breastmilk. While alcohol is a legal and regulated substance, alcohol can harm a baby's development, change sleep patterns and decrease your milk supply. The safest option is to avoid alcohol, tobacco, vaping, and cannabis during breastfeeding due to safety concerns.

If you have questions or concerns about your substance use health, ask your healthcare professional for advice or call **CMHA** (1-877-677-9596). Talk with your partner, family, friends and community members who can all support you with your concerns.

## **Exercise and activity**

Return to your daily routine only when you are ready. If you had a C-section, ask your healthcare provider about safe activity levels. When you are ready to start exercising again, start with moderate activity such as walking, or join a postpartum exercise class. Gradually add more exercise and activities into your daily routine. You can work towards Canada's Physical Activity Guide recommendation of being active for a total of 60 minutes each day in periods of at least 10 minutes each.

## If you have pain or increased bleeding:

- Stop activity.
- See your healthcare provider.





## **Rest and sleep**

Many parents feel very tired in the first several weeks after having a baby. Remember to take care of yourself, too.

## How to get the rest you need

- · Limit visitors.
- Nap when your baby naps, or rest and relax if you cannot sleep.
- When you need rest, hang a 'do not disturb' or 'mom and baby sleeping' sign on your door.
- Try not to answer your phone. Let calls go to voicemail.
- Make time for at least one break in your day.
- Talk with your partner or support people about ways they can help with parenting and household tasks.
- Accept offers of help.
- · Keep things simple.



## **Your emotions**

## What are postpartum mood disorders?

As many as 4 out of 5 mothers will experience 'baby blues' in the first 2 weeks after a baby is born. Up to 20 percent of women feel something stronger than 'baby blues.' This could be a postpartum mood disorder. Postpartum mood disorder can occur anytime over the first year. Usually, these feelings slowly get worse over several weeks instead of getting better. They often affect how you care for yourself and your baby.

There are several types of postpartum mood disorders, including postpartum depression, postpartum anxiety, obsessive compulsive disorder and postpartum psychosis.

## You may be at more risk for postpartum mood disorder if you have one or more of the following:

- history of mental illness including, depression or anxiety.
- history of depression or anxiety during pregnancy or after a previous birth.
- difficult birth experience.
- · high-needs baby.
- difficulties getting along with your partner.
- family illness, money worries or lack of support.

## Postpartum mood disorder symptoms include:

- sadness and crying for no apparent reason.
- difficulty sleeping or fatigue.
- · feeling overwhelmed and unable to cope.
- loss of appetite or wanting to overeat.
- · anxiety or panic attacks.

## What should I do?

- Talk to your partner, a friend, your healthcare provider or call an HBHC Nurse at THU.
- Take good care of yourself each day (get proper rest, eat well, take breaks, exercise).
- Find someone to help with household tasks.
- · Go outside. Get some fresh air.
- Join a self-help group for postpartum mood disorders or a parenting group.

## When to get help

Get help if symptoms last longer than 2 weeks or are severe enough to interfere with your daily routine. If you think about hurting yourself or your baby, get help immediately. Call your healthcare provider or:

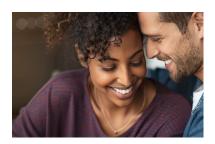
CMHA 1-877-677-9596

Suicide Crisis Helpline Call or text 9-8-8

## **Sexuality and family planning**

## When is the right time for sex?

New parents are sometimes so tired they lose interest in sex. Remember to talk to your partner about how you feel.



You can try to keep the romance alive in small ways like holding hands, hugging and spending time alone together.

The right time to have intercourse should be when both of you are comfortable. Couples often find it helps to try new positions and use lubrication.

## What are my birth control options?

Birth control is not usually on your mind in the postpartum period, but you can get pregnant before your first period returns. It is important to keep your 6-week postpartum checkup. Share your questions and concerns with your partner and healthcare provider so you can choose a birth control method that is right for you.

Check <u>sexandu.ca</u> for information on different birth control methods, including the Lactational Amenorrhea Method.

For information on birth control while breastfeeding, go to waba.org.my/resources/lam/ or contact a THU HBHC Nurse.

## **PART 4** | Keeping Your Family Healthy



## **Family life**

Don't try to be perfect. Just try to be the best parent you can be. Your confidence will grow as you learn about parenting and get handson experience.

## **Partners**

Partners need time to adjust to a new baby. Spending lots of time with mom and baby will help you feel connected. Partners who are involved and caring build closer and more enjoyable relationships with their child. This attachment bond will last a lifetime.

## Get to know your baby

The best way to know your baby is to care for them.

- Bathe and change your baby.
- Talk, read and sing to your baby they will love the sound of your voice.
- Help with feedings bring mom a glass of water or burp your baby after the feeding.

When your baby is upset, sick or hurt, they need to know you care. Responding to your baby's needs will make them feel safe.

- Comfort and hold your baby you will learn what they enjoy and what bothers them.
- Pick your baby up and soothe them you will learn how they like to be held.

## Tips for building your parenting confidence

- Accept that no one is perfect. Give yourself credit for learning to be a good parent!
- Be positive about the changes your baby has brought to your life.
- Care for and play with your baby. Follow your instincts.
- Help and support each other. Share your feelings with your partner, friends and family.
- Take care of your health eat well and stay active.
- Try to get 6 to 9 hours of total sleep each day. Nap or rest when the baby naps. Turn off your phone when you want to rest.
- Join a parent and child group.

## **Siblings**

Siblings are often very excited to meet their new family member. Let your older children hold the baby or do little tasks for you and the baby.

Sometimes siblings need time to adjust to the changes a new baby brings. Some normal reactions to a new baby include:

- not seeming interested in the baby.
- · Jealousy.
- showing behaviour from a younger stage (like bed wetting or tantrums).



A GUIDE FOR NEW PARENTS 23 TIMISKAMINGHU.COM

## Tips to help siblings adjust

- Try to keep most of your older children's normal routines.
- Do not force your older children to spend time with the baby.
- Make time to do something special with your older children (like storytime or play time).



## **Extended family**

Parenting is easier when you have help! Family members will want to be involved with the new baby. Your child will benefit from contact with other loving adults. Encourage family members to spend time with your children.

Family can help in other ways, too. Ask them to help with household chores or run errands. This will give you time to focus on your baby.

## **Advice**

Family members offer well-meaning advice, and can pass along valuable parenting skills. You do not always need to follow the advice, but you can listen and thank them for sharing. Show them information from your healthcare provider or this booklet if you need to explain why you are choosing to care for your baby in a specific way.

## **Stress**

At times, parenting can be stressful! Talk with your partner, family and other parents about why you are stressed. Ups and downs are a normal part of parenting. Ask for help when you need it.

## Other helpful ways to cope with stress:

- Put your child in a safe place and take a short break.
- Talk to someone you trust about how you are feeling.
- Go outside to get some fresh air, or exercise.

## **Positive parenting**

As parents, you can provide your baby with experiences that allow them to reach their full potential. By responding to your baby's cues, your baby will attach to you in a positive way. Your time together will also help develop your baby's brain and shape their emotional and social well-being later in life.

Keep in mind that your child learns almost everything from watching others, especially you. You are your child's greatest role model and will shape their health, growth and development. As your baby grows you can learn what to expect and track their milestones by using the checklists found at lookseechecklist.com.

## Concerned about family violence? Call one of these help lines.

### **Pavilion Women's Centre**

online chat available at pavilionwc.com 1-888-871-9090 or 705-672-2128 or 705-567-1777

Assaulted Women's Helpline (over 200 languages)

24-hour crisis line 1-866-863-0511 / TTY 1-866-863-7868

Kids Help Phone (for kids/teens)

24-hour counselling 1-800-668-6868

## **Family violence**

Family violence is the use of abusive behaviour by one family member against another. It always involves someone using their power over another person in a way that is hurtful.

Violence may happen once or many times, forming a pattern of abuse. The violence is used to bully, shame or frighten in order to control a partner in an intimate relationship.

## Abuse may include:

- physical violence
- · sexual violence
- emotional abuse
- stalking or intimidation
- financial abuse
- neglect

If you are abused, you may have chronic pain, depression, anxiety or low self-esteem. You may find it hard to make decisions or to believe that things can change. Talk with someone you trust about what makes a healthy relationship. A public health nurse can help by introducing you to supports in the community.

Witnessing family violence can hurt children too. It is important to protect your children from violence. Children who live in a home where there is violence may find it difficult to sleep, eat, do school work and make friends.

Children learn a lot from the way parents live their lives. You can teach them self-respect by taking care of yourself and your children.

### Talk 4 Healing

24 hr crisis line, support & resources for Indigenous women 1-855-554-HEAL
Crisis Line: 1-888-200-9997
Text and online chat available at: beendigen.com/programs/talk4healing

**Fem'aide** (for Francophone women) 24h crisis line 1-877-336-2433

**LGBT Youthline** (for LGBT community members under 29) 1-800-268-9688 available 4:30-9:30 p.m. daily Text and online chat also available

## **Speech and hearing**

## How do babies learn to talk?

A baby learns to talk by listening to voices and sounds. It is important for you to sing, tell stories and play games like peek-a-boo.

Babies learn language from faces, not screens. Talk to your baby as you care for them and as you go about your day. Your baby's facial expressions and noises are their way of 'talking' back to you. Soon your baby will begin to make sounds to tell you how they feel and what they want.

## Is my baby's speech on track?

You may want to have your baby assessed by a speech-language pathologist if:

- your baby was small at birth (less than 2500 grams, or 5 pounds 8 ounces).
- your baby was born early (before 37 weeks).
- your baby had prenatal exposure to drugs or alcohol.

## Get professional help if your 6 month old is not:

- · watching your face.
- making sounds back at you when you talk.
- using different cries for different needs.
- smiling socially.

If you have any concerns or questions about your child's speech and language development, contact One Kids Place (705-476-5437) or Cochrane Temiskaming Resource Centre Infant Development Program (705-567-3598).

## **Hearing**

All newborn babies in Ontario can have their hearing checked by a professional at the hospital or in the community. The test is free, reliable, quick and comfortable for your baby. Contact the Northeastern Ontario Infant Hearing Program (WordPlay) at 1-705-522-6655. You can also contact an audiologist for a hearing test for an older child.

## Baby's teeth and gums

Oral health is an important part of your child's overall health. By caring for your baby's mouth early in life, you can:

- set up good cleaning routines.
- · soothe gums to ease teething.
- ensure a clean mouth for the arrival of first teeth.

## When will my baby get teeth?

Babies usually get their first bottom front teeth around 6 months. Some babies get teeth as early as 3 months, others as late as 10 months. It will take 2 to 3 years for your baby's 20 teeth to appear.

## **Teething**

## When teething, your baby may:

- be more cranky than usual.
- · need to chew on things.
- · drool more.
- have red cheeks and swollen gums.

Diarrhea and fever are not normal symptoms of teething. These are signs your baby is ill.

## How can I comfort my teething baby?

- · Give lots of hugs and cuddles.
- Offer clean, cool (not frozen) teething rings that are filled with water.
- Rub his gums with a clean finger or a rubber finger brush.

## Avoid:

- teething gels and medicines that cause numbing, which could cause problems with swallowing.
- teething biscuits as they may be high in sugar and cause tooth decay.



## How do I care for my baby's teeth?

What you need	What to do			
Before their first tooth				
Washcloth, baby toothbrush or rubber finger brush	Wipe mouth and gums			
After their first tooth				
Toothbrush and water (do not use toothpaste with fluoride until they can spit)	Brush baby's gums and teeth twice a day for 2 minutes			

## What is early childhood tooth decay?

Early childhood tooth decay, also known as baby bottle syndrome, is a serious dental disease.

Sweet liquids (e.g., formula, juice, soft drinks or breastmilk) that remain in the mouth for long periods of time can attack the teeth. These fluids are especially risky at sleep time. Sleeping with these fluids in the mouth can cause tooth decay and ear infections.

## Help prevent tooth decay

- Always hold your baby while feeding. Do not put your baby to bed with a bottle.
- Never dip a soother in anything sweet like sugar, corn syrup or honey.
- Never 'clean' the soother in your mouth or share spoons. Decay-causing bacteria from your mouth can be transferred to your baby.
- Begin cleaning your baby's mouth at birth before teeth appear. Wipe the gums with a clean washcloth, gauze or finger brush.
- Continue to clean your baby's mouth and teeth as they come in with a small soft-bristled toothbrush and water.
- Use a small amount (pea size) of fluoridated toothpaste once your child can spit at about age 3, unless a dental professional advises to start earlier.
- Help your baby learn to enjoy water. Offer small amounts of water to your baby when they are able to drink from a cup. Babies do not need juice.

## **Build a healthy smile**

- Once a month, lift your baby's top lip and check the 4 front top teeth for any changes. Contact a dentist if you see white lines or brown spots on the teeth.
- Encourage your child to brush at least 2 times daily for 2 minutes each time. Help your child brush until age 6 and supervise from age 7 to 10.
- Be a good role model by brushing and flossing daily. Visit a dental professional regularly.
- Take your child to the dentist for a quick checkup by their first birthday.

- Delay the introduction of sweets. Children do not crave something they have not tasted.
   Limit the amount and frequency of high sugar or acidic foods in your child's diet.
- Try to limit frequent snacking throughout the day, especially snacks high in sugar.

Talk to your healthcare provider or dentist if you are concerned about your baby's teeth.

## What if I cannot afford dental care for my children?

If you do not have dental insurance and cannot afford dental care for your children, Public Health can help. Our dental clinics provide free cleanings for children. We can help children with cavities and other urgent problems get the treatment they need.

To find out if you can use these services, call the Timiskaming Health Unit **Healthy Smiles Program** at 1-866-747-4305.



## **Immunizations**

Vaccines protect your child from illness caused by infectious diseases. In Canada, all vaccines undergo extensive testing and are licensed for use only after they have been proven safe.

The Ministry of Health and Long-Term Care suggests the vaccination schedule indicated in the chart below.

### **Common reactions to immunizations**

Your baby may experience:

- mild pain
- fever
- fussiness
- swelling and redness at the spot where the needle was given (use an ice pack on the affected area to ease the discomfort).

Breastfeeding right before, during and after immunizations reduces pain for your baby. Medication may help reduce fever and pain, and make your baby feel more comfortable. Speak to your healthcare provider or pharmacist about medications that may help.

Do not use products that contain acetylsalicylic acid such as Aspirin. They can cause a serious illness known as Reye's syndrome.

## The flu shot (influenza vaccine)

In addition to the vaccination schedule below, everyone 6 months of age or older who wants to protect themselves or others from the flu should get the influenza vaccine.

- The flu shot is available for anyone over 6 months of age.
- This free vaccine is usually available starting in October of each year. Contact your healthcare provider or visit timiskaminghu.com to find out how to get your flu shot.
- The flu shot is considered safe for breastfeeding moms.

Age	Diptheria, Pertussis, Tetanus, Polio, Hib	Diptheria, Pertussis, Tetanus, Polio	Pneumococcal Conjugate	Rotavirus	Meningococcal Conjugate	Measles, Mumps, Rubella	Chickenpox (Varicella)	Measles, Mumps, Rubella, Chickenpox
2 months	Х		х	х				
4 months	х		х	х				
6 months	Х							
12 months			х		Х	Х		
15 months							Х	
18 months	х							
4 years		х						Х

Check the Ontario Ministry of Health and Long-Term Care for updates at www.health.gov.on.ca

## Second-hand smoke

Second-hand smoke is dangerous for your baby. It is important that you protect your children from second-hand smoke in your home and in the community.

## How does second-hand smoke affect my baby?

Babies and children are particularly vulnerable when exposed to second-hand smoke.

- Their bodies absorb more chemicals than adults. Chemicals can change the development of their body cells.
- Their immune systems are less developed and weaker than the immune systems of adults.

Children who live in a smoke-filled home:

- · are more cranky and irritable.
- may refuse feedings and spit up.
- · cough and sneeze more often.
- have more ear infections, runny noses and throat infections.
- are more likely to have bronchitis, pneumonia and asthma that is serious enough to cause hospital visits.
- have an increased chance of dying from Sudden Infant Death Syndrome (SIDS).

## Make your home a smoke-free environment

Talk about it. Sit down with everyone who lives in your home and discuss ways to make your home smoke-free.

## Get ready by taking the following steps:

- Set up a smoking area outside.
- · Remove ashtrays from inside.
- Display a 'smoke-free home' sign on your front door.
- Ask visitors to smoke outside.

## Make your car a smoke free-environment

In 2009 Ontario banned smoking in cars with kids under 16 years old. Any driver or passenger holding a lit cigarette in a vehicle with children under 16 years old can be fined \$125 to \$250.

If somebody smokes in a car, everybody smokes. Second-hand smoke is even more dangerous inside the small air space in a car because the smoke is 27 percent more concentrated. Opening a window is not enough. The wind blows the smoke to the back seat where children sit.

- Make the decision to ban smoking in your car at all times.
- Ask anyone riding in your car not to smoke.
- Schedule frequent stops on long trips. Ask smokers to take the smoke outside.
- Remove the ashtray and lighter to avoid temptation.
- Make cigarettes less accessible by locking them in the trunk.
- · Celebrate each smoke-free drive.

## How can I protect my baby outside my home?

- Do not let people smoke in the car.
- Find smoke-free childcare.
- Visit only smoke-free places and homes.

## Should I breastfeed if I smoke?

Even if you smoke, breastfeed your baby. It is still the healthiest choice.

- Smoke after feeding, not before.
- Wash your hands and change your outer clothing after smoking.
- Try to cut down the amount you smoke.
- Do not smoke while breastfeeding or holding your baby.
- · Best of all, stop smoking.

## How can I quit smoking?

- Set a date to quit and a decide on a plan (e.g., nicotine replacement therapy, attend a group).
- Ask family, friends and roommates for support and understanding.
- Throw out your cigarettes, lighters, matches and ashtrays.
- Get rid of reminders of tobacco in your home, office and car.
- Be aware of your smoking triggers and plan ahead for ways to cope.
- · Practise new ways to handle stress.
- Stock up on sugarless gum, hard candies and carrot sticks.

It takes planning and effort to quit smoking. The sooner you quit, the better.

You can increase your chances of quitting with help from Smokers Helpline (1-877-513-5333 or smokershelpline.ca), Pregnets (pregnets.org) or check out STOP on the Net

(nicotinedependenceclinic.com/en/stop).

## **Preventing injury at home**

Create a safe place for children to learn and grow. Always supervise children closely. Injuries for children under 5 in the home are most often caused by falls, burns, poisoning, choking, strangulation and drowning.

To learn more about injury prevention at home, go to parachute.ca/en/.

## **Choking and suffocation**

- Hold your baby when giving them a bottle.
   Do not prop a bottle in your baby's mouth this can increase the risk of choking.
- Keep small objects, bits of food and plastic away from your baby.
- Stay with children who want to help feed the baby.
- In the crib, use only a mattress and a fitted sheet. Do not use extra items like bumper pads, blankets, stuffed animals or pillows.
- Keep the crib away from cords and blinds.

## Choking is a risk for younger children under 4 years old

- Gagging is not the same as choking. Babies have a natural protective reflex to gag or cough when eating foods that helps avoid choking.
- Make sure your child is sitting upright and paying attention while eating.
- Always supervise your child during mealtimes and avoid offering hard, small, round, smooth or sticky solid foods to prevent aspiration and choking.

## Fragrances and essential oils

Do not use air fresheners, potpourri, incense and essential oils. These can cause problems for sensitive individuals, and some have added chemicals.

For more information, go to <u>healthyenvironmentforkids.ca</u> and search "fragrances."

## **Preventing falls**

- Always stay with your baby when they are on furniture and change tables.
- Use the straps and harnesses on baby equipment like strollers, baby carriers and car seats. Follow the manufacturer's instructions.
- Install safety gates at the top and bottom of stairs when your baby starts to move around.
   Follow the manufacturer's instructions.
- Do not use safety gates made before 1990 or accordion-style gates that open to form large, diamond-shaped gaps. A child's head can get stuck in these spaces, creating a potentially deadly situation.
- Be careful when buying used baby equipment and toys. For information about recalls and safety standards, go to canada.ca.
- Always set car seats and carriers down on the floor not on top of furniture.
- Never use a baby walker with wheels, use a stationary activity centre instead.
- Place all furniture away from windows and balcony door handles.
- Use window stops or guards and keep balcony doors locked.

### **Poisons**

- Lock up poisons and keep them out of reach. This includes cleaning products, alcohol, cannabis (including edibles), medications, vitamins, personal hygiene products, gasoline and other car products.
- Save the toll-free number for the Ontario Poison Centre (1-800-268-9017) in your phones. Post it for babysitters.
- Call 911 if you need help.

For more information on poison-proofing your home, go to <u>healthyenvironmentforkids.ca</u> and search "top 5 tips."

## Safe sleep for baby

The safest place for your baby to sleep is on their back in a crib, cradle or bassinet. Share the same room with your infant for at least the first 6 months of life. Your baby's crib should be completely empty, except for the mattress and fitted sheet.

- For information about safety standards for cribs, cradles, bassinets, playpens and sleepwear, go to <u>canada.ca</u> and search "crib safety."
- See p. 15 for more information on safe sleep for baby.



## **Car Seats**

The law requires parents and caregivers to use properly fitting car seats, including booster seats, for children who:

- weigh less than 36 kg (80 lbs).
- are less than 145 cm (4'9") tall.
- are younger than 8 years of age.

Babies must always ride in a rear-facing car seat approved for use in Canada. The law requires children who weigh less than 9 kg (20 lbs) to be rear-facing, but it is much safer to keep them in a properly fitting, rear-facing car seat as long as possible.

When your child outgrows the maximum height or weight limits of an infant rear-facing car seat, move your child to a larger, convertible car seat that can be installed in a rear-facing position. Follow the manufacturer's weight and height guidelines to know when your child should be turned to a forward-facing position.

Read your vehicle owner's manual to see where a car seat can be safely installed. The safest place for your baby is usually the centre of the back seat. Never place an infant in front of an airbag. If you have questions about car seat safety for children of any age, call THU.

For videos and more information about car seat installation and safety, go to **Ministry of Transportation** (mto.gov.on.ca) or **Transport Canada** (tc.gc.ca) and search "car seat."

THU provides free car seat inspections and teaching on how to properly install a car seat. Contact us to book an appointment.

## **Preventing burns**

## Water temperature

- Lower the temperature of your water heater to 49°C.
- Bath water should be slightly warmer than body temperature.
- When running water, turn on cold water first and hot water second. Reverse the order when turning off water.
- Check the temperature with your elbow.
- Never wash your baby's hair under running water because the temperature can change too quickly.
- Keep hot drinks away from your baby.

### **Fire**

- Make sure your family has a fire escape plan.
- Never leave burning candles unattended.
- Install Canadian Standards Association (CSA) approved smoke and carbon monoxide detectors and alarms: it's the law!
  - Install at least one smoke alarm on every storey of your home (including the basement) and outside each sleeping area. If you sleep with the doors closed, put a smoke alarm inside each bedroom.
- Change the batteries in your smoke and carbon monoxide detectors when you change your clocks in the spring and fall.

## **Sun safety**

The sun's ultraviolet (UV) rays cause sunburn, and babies get sunburns more easily. For more information, go to <u>dermatology.ca</u> and search "sun safety for babies."

- · Keep your baby out of direct sunlight.
- Cover up. Dress your baby in loose, light-weight clothing and a sun hat.
- Limit time in the sun between 11 a.m. and 4 p.m. (when the sun's radiation is strongest).
- Use a broad spectrum (UVA/UVB) sunscreen with an SPF of 30 or higher on exposed skin.
   Talk to your healthcare provider about using sunscreen on babies under 6 months.

## **Helmet safety**

It is important to stay safe when kids are being active. A helmet could save your child's life. Head injuries are a leading cause of serious injury and death for children on wheels.

Cyclists under 18 years of age are required by law to wear an approved bicycle helmet when riding a bike.

- Get the right kind of helmet. Different activities require different types of helmets.
- Make sure the helmet fits correctly. Follow the 2V1 Rule.
- Read the manufacturer's instructions.
   Information about when to replace helmets will be in these instructions.
- Model a safe lifestyle for your family by wearing a helmet.





For more information about injury prevention, go to parachutecanada.org.



## **Physical activity**

Healthy, active living will benefit your family in many ways, so get active together – any way, every day! The Canadian 24-Hour Movement Guidelines for the Early Years (0-4 years) recommend:

- Infants (less than 1 year) should be physically active several times daily in a variety of ways, particularly floor-based play.
- Toddlers (1 to 2 years) and preschoolers (3 to 4 years) should do at least 180 minutes of physical activity each day, including:
  - lots of different activities both inside and outside.
  - activities that use small and large movements.
  - at least 60 minutes of energetic play by 5 years.

Guidelines are also available at participaction.com for:

- children (5 to 11 years)
- youth (12 to 17 years)
- adults (18 to 64 years)
- adults (65 years and older)

## **Active parents have active kids**

All activity counts! Try these tips to get young kids moving:

- Create safe play spaces so kids can explore and move.
- Dance to music and learn action songs together.

- Dress for the weather and explore the outdoors.
- Make time for play with other kids.
- Walk or bike instead of driving or using the bus.

## **Screen time**

Although some screen time can be educational, it is easy to go overboard. Screen time is not just watching tv. It includes computers, tablets, video games and handheld devices. Use the guidelines below to keep your child's screen time in check.

- Children under 2 years: screen time is not recommended.
- Children 2 5 years: less than 1 hour of screen time per day. Less is better.
- Children 6 17 years: less than 2 hours of screen time per day.

These tips can help you keep screen time to a minimum:

- Be aware of your own screen time habits, and model good habits for your children.
- Make meal time screen-free.
- Keep television, computers and gaming equipment out of your child's bedroom.

## **Eating habits for your family**

To promote healthy eating habits, it is important to take time to eat together as a family without distractions. Offer a variety of foods such as vegetables, fruits, whole grains and protein foods throughout the day. Make water the drink of choice. Allow children to decide how much they want to eat and regularly offer small meals and snacks. Overcome picky eating by establishing routines and involving kids in meal preparation. Be a role model by enjoying a variety of foods yourself and use mindfulness during meals to help you and your family pay attention to hunger and fullness cues. Cooking with kids is a fun way to teach them about food.

Visit <u>Cookspiration.com</u> and <u>Canada's Food Guide</u> Kitchen at <u>food-guide.canada.ca/en/kitchen/</u> for recipes and meal-planning tips.

## PART 5 | Local Community Services & Resources

## **Parenting Supports**

The Timiskaming EarlyON ON y va Collaborative offers programs for children 0-6 and family in English, French and Indigenous culture across the District of Timiskaming.

We would like to invite you to join us for some engaging infant, family and parenting programming. Everyone is welcome!



We offer programs like Infant Massage, Baby Sign Language, Songs and Rhymes, Baby Club, Yoga, Tickles 'n Toes, Mothergoose, Swims and Drop Ins.

We have a variety of parenting programs that include topics like sleep, feeding, baby food making, parenting tips, resources and connecting with others.

You can check out our monthly calendar and events on the EarlyON ON y va Timiskaming Facebook page or visit Keyon.ca

Reach out to an EarlyON ON y va staff and/or connect with a parent/caregiver council or circle member.



## Locations:

Kirkland Lake: 6 Tweedsmuir Road 705-567-8837

Englehart: 54 Third Street 705-544-8837

Haileybury: 76 Rorke Ave 705-672-2100

Virtual programs & programming in outlying communities are offered.

www.Keyon.ca

## **Brighter Futures**

Brighter Futures is a program that offers assistance and support to families and caregivers who have children 0 to 6 years old to ensure that their young children have the very best start in life. All services are free.



## Services offered in partnership with other services:

- Prenatal care and breastfeeding support
- Nutrition and cooking workshops
- Mental health promotion
- Injury prevention
- Parenting workshops
- Positive Parenting Program (Triple P)
- Playgroups
- Workshops on various topics
- Physical activity
- Monthly Calendar

Call us at 705-360-7100 or 1-866-229-5437 (toll-free) to learn more about what we offer.

## <u>Locations in Timiskaming:</u> Kirkland Lake:

6 Tweedsmuir Road 705-567-9201 Jennifer ext. 4295 Marie Ext. 4253

## **Englehart:**

40 Third Street 705-544-5437, Ext. 4456

## North Cobalt:

379 Lakeview Avenue 705-672-3333 Diane Ext. 4809



SCAN ME

In addition to healthcare. childcare, employment training and cultural programs, Keepers of the Circle offers Family Support and On-the-Land Learning Cultural Support.



Call us toll-free at 1-855-647-7874

### Locations:

Kirkland Lake: 109 Burnside Drive

Matachewan First Nation: House 37

Temiskaming Shores: 21 Scott St

keepersofthecircle.com

In addition to healthcare services. **CSCT** offers French community programs and activities for children from 0-12 years old and their families.



Centre de santé communautaire du Témiskaming

> Find us on Facebook!



## Locations:

New Liskeard:

705-647-5775 or 705-647-5939

Toll free: 1-800-835-CSCT

Earlton: 705-563-8110

Kirkland Lake: 705-567-1414 Larder Lake: 705-643-2442 Virginiatown: 705-634-2223

www.csctim.on.ca

Through the Healthy Babies. Healthy Children (HBHC) program, THU offers prenatal services as well as services for families with children ages 0-6 years old.



Programs offered include:

- Prenatal education
- **Home Visiting Program**
- Breastfeeding Support & **Lactation Consultations**
- **Immunizations**
- Well Baby Clinic Appointments
- Car Seat Inspections & Education
- Parenting Health Promotion





## Locations:

Kirkland Lake:

31 Station Road 705-567-9355; 1-866-967-9355 (toll free)

**Englehart:** 

63 Fifth Street 705-544-2221: 1-877-544-2221 (toll free)

New Liskeard:

247 Whitewood Ave, Unit 43 705-647-4305: 1-866-747-4305 (toll-free)

www.timiskaminghu.com/

## **Mental Health Services**

Provides recovery-focused programs and services for people of all ages and their families.



Canadian Mental **Health Association** Cochrane-Timiskaming Mental health for all



Toll-free: 1-877-677-9596 Email: cmhatmsk@cmhact.ca

## **Locations in Timiskaming:**

Kirkland Lake: 5 Kirkland Street West 705-567-9596

New Liskeard: 20 May Street 705-647-4444

cmhact.ca

We are here to listen. If you are thinking about suicide, or you're worried about someone else, we want to help.



Suicide Crisis Helpline

Call or text 9-8-8 toll free, any time — lines are open 24/7/365



## **Child Care Support**

Childcare spaces are limited. If you are planning on using child care services, it's best to consider your options early to ensure you have a space for your child.

## **Child Care Fee** Subsidy

What is fee subsidy?



District of Timiskaming Social Services Administration Board Conseil d'administration des services sociaux du district de Timiskaming

The childcare fee subsidy is a program to assist families with the cost of licensed centre-based or licensed home child care.

## Who can apply?

Some examples of families who may qualify for fee assistance may include the following:

- parents with current employment
- parents may be students
- parents with children who have special needs
- parents who have special needs
- · parents with medical restrictions from working and caring for children and other exceptional circumstances

Contact Children's Services at **1-800-627-2944** to start the application screening process (new client), or to make an appointment (existing client).

www.dtssab.com/childrensservices



## **Licensed Child Care Providers in Timiskaming**

**NOTE:** All child care centres marked with a \* are operated by Timiskaming Child Care and have a Centralized Waiting List.

More information on this can be found online at <a href="https://www.timiskamingchildcare.ca/centralized-waiting-list/">www.timiskamingchildcare.ca/centralized-waiting-list/</a> or contact their head office at 705-672-2100, Ext. 224

Kirkland Lake	Garderie Francofleur et Miel: 705-568-6565  Keepers of the Circle Aboriginal Family Learning Centre: 1-855-647-7874  Second Street Day Care Centre/ Queen Street Site: 705-567-4225  Second Street Day Care Centre/ Government Road Site: 705-567-6930
Englehart	Englehart and Area Child Care Centre: 705-544-2448 Little Learners Child Care Centre: 705-544-2198 *
Earlton	Garderie d'Earlton: 705-563-2135 *
Temiskaming Shores	Centre des petits explorateurs 705-647-1443 *  Keepers of the Circle Aboriginal Family Learning Centre: 1-855-647-7874 (Scott Street Site, Hospital Site)  New Liskeard Stepping Stones Day Care Centre: 705-647-8816 Garderie des Moussaillons: 705-647-8705 *
Temagami	Temagami Day Care: 705-569-2720 *

## **Licensed Home-Based Child Care Centres**

In Timiskaming, Licensed Home-Based Child Care Centres are operated by Timiskaming Child Care & Keepers of the Circle.

To learn more about Licensed Home Child Care or to inquire about availability in a Licensed Home Child Care near you, please contact:

## **Timiskaming Child Care**

Christine Charette Brazeau, RECE Home Child Care Consultant 705-672-2100. Ext. 229 ccbrazeau@timiskamingchildcare.ca



## **Keepers of the Circle**

Lisa Sloan, RECE Home Child Care Supervisor 1-855-647-7874, Ext. 4140 l.sloan@keepersofthecircle.com





## **BRIGHTER FUTURES**

The years before six are the most important to a child's development.

We provide you with the tools and resources to give them the best start at life!

Call us at 705-360-7100 or 1-866-229-5437 (toll-Free) to learn more about what we offer.

All our services are FREE and we welcome families with children aged 0-6 years of age.

Welcome to our space!
We look forward to serving you and linking you to
the resources needed to serve you best in
our community.

## BRIGHTER FUTURES GRANDIR ENSEMBLE

Safe and supportive Environment

**Explore parenting skills** 

Child health and development

Nutrition / Healthy Weights

Injury prevention

Building positive relationships

Maternal and children's mental health





## HEALTHY BABIES, HEALTHY CHILDREN

Prenatal services and for families with children ages 0 to 6 years old

Contact the Timiskaming Health Unit for resources, support or more information.



Join our private
Facebook group!
Timiskaming
Breastfeeding
Buddies!







Prenatal Education

Home Visiting Program

Breastfeeding
Support &
Lactation
Consultation

**Immunizations** 

Well Baby Clinic
Appointments

Car Seat Inspections & Education

## BOOK YOUR APPOINTMENT WITH US:

1-866-747-4305

New Liskeard (705) 647-4305 Englehart (705) 544-2221 Kirkland Lake (705) 567-9355 www.timiskaminghu.com



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## **Libraries**

Library Children's Departments are hidden gems in Timiskaming. Many sites offer a variety of programming beyond checking out books.



**McGarry Public Library** 

27<sup>th</sup> St., Virginiatown 705-634-2145 www.mcgarry.ca/en/residentsvisitors/library.aspx

Teck Centennial Library

10 Kirkland St., Kirkland Lake 705-567-7966 Email: <u>library@tkl.ca</u> www.teckcentennialpl.ca

**Earlton Public Library** 

35 10<sup>th</sup> St., Earlton 705-563-2717 armstrong.olsn.ca

**Hudson Outreach Library** 

29 Second St., Hudson www.hudson.ca/hudson-outreach-library/

Northern College Haileybury Campus Library

(Partnership with Temiskaming Shores Public Library. Resources available to the general public)

640 Latchford St., Haileybury 705-672-3376, ext. 8806

Email: libraryh@northern.on.ca

https://libguides.northernc.on.ca/home

**Larder Lake Public Library** 69 Fourth Ave., Larder Lake

705-643-2222 www.larderlakepubliclibrary.ca

**Englehart Public Library** 

71 4th Ave., Englehart 705-544-2100

Email: <a href="mailto:swilliams@englehartpubliclibrary.ca">swilliams@englehartpubliclibrary.ca</a>

www.englehartpubliclibrary.ca

Elk Lake Public Library

19 First St., Elk Lake 705-678-2340 jamestwppl@gmail.com

**Temiskaming Shores Public Library** 

285 Whitewood Ave., New Liskeard 705-647-4215

<u>www.temiskamingshores.ca/en/resident/conta</u> ct-library.aspx

**Paul Penna Library** 

30 Lang St., Cobalt 705-679-8120

Temagami Public Library

7 Lakeshore Dr., Temagami

705-569-2945

Email: <u>library@temagami.ca</u> https://temagami.library.on.ca/

## **Online Resources**

## Child Development

## **Best Start Resource Centre**

Best Start: Ontario's Maternal Newborn and Early Child Development Resource Centre supports service providers across the province of Ontario working on health promotion initiatives to enhance the health of expectant and new parents, newborns and young children. https://www.beststart.org/

### **New Dad Manual**

Created by Dad Central, an organization committed to strong, healthy children by affirming and valuing the bond between fathers and their children. https://dadcentral.ca/newdadmanual/

## Looksee Checklist

Created in Ontario, the Looksee Checklist monitors a child's development from 1 month to 6 years of age with tips to help your child grow. https://lookseechecklist.com/en/

## **Healthy Living**

## Caring for Kids

Developed by the Canadian Paediatric Society, Caring for Kids provides parents with information about their child's health and well-being. <a href="https://caringforkids.cps.ca/">https://caringforkids.cps.ca/</a>

## Unlock Food (ENG/FR)

A bilingual site by Dietitians of Canada to help Canadians connect with a dietitian and find nutrition and food information.

### Government of Canada

- Canada's Food Guide (<u>ENG</u>/ <u>FR</u>)
- Your Guide to Healthy Pregnancy Health Canada (<u>ENG</u>/<u>FR</u>)
- Safe Food Handling for Pregnant Women Health Canada (ENG/FR)
- 10 great reasons to breastfeed your baby (ENG/FR)
- 10 valuable tips for successful breastfeeding (<u>ENG</u>/ <u>FR</u>)

Ellyn Satter Institute - Division of responsibility (sDOR)

Bilingual Online Ontario Breastfeeding Services (ENG/FR)

**Breastfeeding Matters:** An Important Guide to Breastfeeding for Women and their Families ( $\underline{EN}/\underline{FR}$ )

My Breastfeeding Guide (EN/ FR)

Infant formula: What You Need to Know (EN/ FR)

## **Nutrition Connections:**

- Feeding Your Baby
- Healthy Eating for A Healthy Baby

Pregnancy and Breastfeeding - Ontario Human Rights Commission (ENG/FR)

