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Disclaimer

This booklet is intended only to provide basic information about pregnancy and maternal-child health. In no way is the information in this booklet intended to replace the advice of a health-care provider. This guide only contains general information and it is recommended that you always follow the advice of your health-care provider.

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In 2009, the Métis Centre of the National Aboriginal Health Organization (NAHO) met with Métis in different parts of Canada to share and collect stories, teachings and information about maternal-child well-being. This DVD is the result of all the things we learned from Métis midwives, health professionals, Elders and parents. Our objective with this project was to collect and share experiences, traditions and health information for the benefit of Métis families. As we travelled from Ontario to British Columbia, we found that Métis culture and traditions are indeed diverse, but everywhere we visited we did find two things in common: a strong sense of pride in the Métis past and great hope for the Métis future. It is our sincerest hope that you find the health information and stories in this DVD informative and entertaining. Enjoy!



PHOTO: VICTORIA BOUVIER

You are going to be a parent. Congratulations!

You might be feeling a range of emotions; happy, anxious, nervous, excited or scared. The next year of your life is going to be a time of great change for you and your family.

Take care of yourself and give your new baby the best possible start!

There are different kinds of trusted health-care providers who can be with you throughout your pregnancy and labour.

Midwives work in a primary care model based upon principles of woman-centered care, informed choice, continuity of care and choice of birth place. Midwifery care varies from province to province. For more information on midwifery care available near you, visit the Canadian Association of Midwives at www.canadianmidwives.org or call (514) 807-3668.

An **obstetrician** is a medical doctor that is trained and specialized in the care of pregnant women. An obstetrician might be necessary if you have a high-risk pregnancy and/or birth. In the case of low-risk pregnancies, many women will see their family doctor or a general practitioner for prenatal care. For more information about pregnancy and childbirth, visit the Society of Obstetricians and Gynaecologists of Canada at www.sogc.org or call 1-800-561-2416.

Some women also use **doulas**, professionals who are trained to provide physical, emotional and informational support to the mother before, during and just after birth. For more information on doula care, visit Dona International at www.dona.org or call (888) 788-DONA.

Women who eat well and take a daily multivitamin that contains 0.4–1.0 mg of folic acid each day during the three months before they become pregnant — and throughout pregnancy — can reduce their risk of having a baby with certain birth defects. For more information on folic acid or other prenatal vitamins, speak with your health-care provider.

Develop a support system to help you throughout pregnancy, birth and the transition to parenthood. This can include your partner, family members, friends or other people in your community.

Eat a balanced diet. Pregnant women should also eat often. Try eating three meals and three small snacks spread throughout the day. For more information on nutrition, see Health Canada's *Eating Well with Canada's Food Guide-First Nations, Inuit and Métis*: www.hc-sc.gc.ca/fn-an/food-guide-aliment/fnim-pnim/index-eng.php.

If you are a smoker, try to quit or cut back on the number of cigarettes you smoke each day. Try to avoid all alcoholic beverages and street drugs. There is no known safe amount of these substances that can be consumed during pregnancy. Visit [motherisk](http://motherisk.org) at www.motherisk.org for more information or call their helpline at 1-877-327-4636.



PHOTO: RY MORAN AND FAMILY



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"[Having a child] is a period of time in your life where you're not just having a baby but it's a huge growth that you go through as a woman... the more support you have to be able to feel like you have some control and some power within that experience really helps you to grow as a person. Good birth experiences are very important in the growth of yourself as a woman."

— Darlene Birch, midwife

The First Trimester — The 13 weeks following conception

It is normal to experience nausea and vomiting or “morning sickness” during the first three or four months of pregnancy. Some simple tips to alleviate these symptoms are:

- Eating a few crackers or dry toast when you wake up.
- Getting up slowly.
- Not lying down right after eating.
- Eating small meals or snacks often so your stomach does not feel empty.
- Drinking small amounts of fluids throughout the day, but not during meals.

If your nausea or vomiting does not decrease, speak with your health-care provider.

Your breasts may feel tender or painful. Try to wear a bra with good support.

It is normal to feel more tired than usual during your first trimester. Take a nap if you need to.

You may experience headaches. Talk to your health-care provider if your headaches are severe or persistent.

Many women have a small amount of bleeding or spotting in their early pregnancy. This may not be anything to worry about, but talk to your health-care provider to rule out any serious issues.

Other symptoms you may experience early in your pregnancy include fainting, mood swings, and an increased need to urinate. If you are concerned about these or any other changes in your body, discuss them with your health-care provider.



It is important to gain a healthy amount of weight throughout your pregnancy. The correct amount of weight to gain during pregnancy depends on your body mass index before becoming pregnant. Speak with your health-care provider to discuss the amount of weight gain that is right for you.

“The bringing of a new life into this world is totally natural. Our ancestors have been doing this all right since the beginning. And we’ve all done it, we’ve all come through and so, don’t worry. Just leave it in the hands of the Creator that this is going to happen, it’ll work.”

— Ami Brosseau, father



PHOTO: LANA WHISKEY/JACK

The Second Trimester —

Weeks 14 to 25 of your pregnancy

You are probably now visibly pregnant and your baby is growing at a rapid pace. Soon you will be able to feel your baby as it moves and kicks.

To avoid backaches, try to sit up straight, avoid high heels, and avoid standing for long periods of time if possible.

To prevent constipation, drink at least eight glasses of liquid a day, stay active and eat high fibre foods. You can also ask your health-care provider about a stool softener.

To prevent hemorrhoids (swollen veins in the rectum), try to avoid becoming constipated. If you do develop hemorrhoids, speak with your health-care provider about a treatment.

Urinary tract infections are common during pregnancy. They can be treated with antibiotics. Speak with your health-care provider.

To avoid indigestion and heartburn, eat small amounts of food more often, eat slowly, drink fluid between rather than during meals, avoid caffeine and greasy or spicy foods, and stay seated upright after a meal while you digest.

Studies show that women who have regular prenatal care have better pregnancies and healthy babies. Make an appointment to see your health-care provider as soon as you know you are pregnant. Set up your appointments in advance—especially if you live in a remote area.



PHOTO: SASKATCHEWAN ARCHIVES BOARD, S-B1141



PHOTO: RY MORAN AND FAMILY

If you feel groin pain, lean into it (bend toward the pain) to help relax the tension in the muscles. Lie down and rest.

You may feel dizzy when you lie flat on your back. Find another position where you feel comfortable and lets you get some rest.

A certain amount of swelling in your legs, ankles and feet is normal during pregnancy. Remember to drink plenty of fluids. Speak with your health-care provider if you become concerned about excessive swelling.

“Birth is not a really clean and precise ceremony, but birth in itself is a ceremony even with everything happening all around it, what seems like chaos, what seem like overwhelming feelings... When a baby comes, it’s something so special, for the person delivering or for the family receiving that baby for the first time, it really is a miracle.”

— Cherylee Bourgeois, midwife



PHOTO: SASKATCHEWAN ARCHIVES BOARD, R-A11719



PHOTO: VICTORIA BOUVIER

A birth plan is a document that tells your health-care provider what kind of childbirth you would like and how you would like your baby cared for after he or she is born. Visit www.sogc.org/health/pregnancy-birth-plan_e.asp to find out more about writing a birth plan that will work for you.

The Third Trimester — Weeks 26 to 40 of your pregnancy

If you have cramps in your legs, calves or feet, stretch and massage the muscles.

Some women have problems sleeping late in their pregnancy. Support yourself with pillows to find a comfortable position. Keep your bedroom temperature cool.

It is normal to have vaginal discharge late in your pregnancy, but contact your health-care provider if it is accompanied by pain, itching or soreness.

You may experience pre-labour contractions. Also known as Braxton Hicks contractions, these are normal and not a cause for worry. They are characterized as being light and painless and do not occur in any regular pattern.

“That makes a person strong, when they can say, ‘I’m a Michif, I’m a Métis, and these are my parents, this is who they are.’ Now we have a big Métis movement, and people know they’re Métis, and they have to tell their children to have self-esteem, to be proud of who they are... When they have their culture, their language, they’re a whole person.”

— Rita Flamand, Elder

Your baby has arrived!

Not only are you adjusting to being a mother and caring for an infant, but your body is recovering from a very significant event: birth. Try to make time to take care of yourself and don't be afraid to ask others for help.

If your breasts feel tender, try applying cold compresses between feedings and warm compresses just before feeding. Wear a good support bra.

For vaginal pain, get plenty of rest with your feet up. Keep your vaginal area clean if you've had stitches.

To ease cramping, try taking a warm bath or use a heating pad.

It is normal to experience some constipation after giving birth. Drink plenty of fluids, eat high-fibre foods, or speak to your health-care provider about a stool softener.

Some women develop hemorrhoids after giving birth. Talk to your pharmacist or health-care provider about the best course of treatment.

Always check with your health-care provider before taking any medications while you are pregnant or breastfeeding. Everything that goes into your body is passed to your baby through the placenta or through breast milk and may be harmful to the baby.



PHOTO: MOSSBAG, BABY, GABRIEL DUMONT INSTITUTE



The Baby Blues

Many new mothers feel depressed or experience the “baby blues” after birth. If these feelings persist for longer than two weeks, however, or seem to be getting worse instead of better, you may be suffering from postpartum depression. For more information, talk with your health-care provider. If you feel that you might harm yourself or your baby, contact a family member, friend, or call your local crisis line or hospital emergency room immediately.



Breastfeeding

Most experts agree that breastfeeding is the healthiest way to feed your baby. If you are able to breastfeed successfully, breast milk is the only food that your baby will need for the first six months of life. After six months, you can introduce other foods to your child while continuing to breastfeed. Breast milk contains antibodies, growth factors, enzymes, and other things that affect your baby’s short- and long-term health. Unfortunately, no type of formula has these benefits. Breast milk is easier for your baby to digest than formula, always the perfect temperature, always available, and does not cost anything! If you choose not to breastfeed, talk to your health-care provider about feeding options that are best for you.

For support and advice on breastfeeding, speak to your health-care provider or contact La Leche League Canada at www.lllc.ca or 1-800-665-4324 for information about breastfeeding support near you.

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BOTTOM PHOTO: RY MORAN AND FAMILY

Healthy Babies Cry

Crying is the way babies express their needs and communicate with the people around them. All babies go through a time early in life when they cry more than at any other time, often between three and eight weeks. This time of intense crying can end as quickly as it started, or it may slowly decrease over time. In most cases, it ends by the time your baby is three to four months old.

Soothing your crying baby:

- Check to see if the baby needs something — a diaper change, a feeding, or relief from being too hot or cold.
- Hold your baby or wrap them up in a soft blanket.
- Try turning the lights off or playing soft music.
- Use motion to sooth your baby by walking or swaying with them. Or try going for a ride in the car.
- Sucking sometimes helps babies relax. You can provide this by breastfeeding or offering a pacifier.



PHOTO: RY MORAN AND FAMILY

If your baby continues to cry excessively after three months of age, contact your health-care provider or pediatrician.

A crying baby can be stressful and adjusting to life as a new parent can be overwhelming. Be sure to take care of yourself. Try to get at least three hours of sleep in a row, twice a day. Find a friend or family member to watch your baby for short periods while you take a break. You are not alone. If you are not sure where to go for support, talk to your pediatrician, family doctor or public health nurse.

