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Également disponible en français sous le titre : Votre guide sur la santé post-partum et des soins pour votre bébé

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YOUR GUIDE TO POSTPARTUM HEALTH AND CARING FOR YOUR BABY

If you are pregnant or you have just welcomed a new baby, this guide is for you!

Having a baby can be a happy and wonderful time, but it can also bring worry and uncertainty. Parents often have questions and concerns as they face the changes a new baby brings. This guide will give you accurate information to help you make good decisions about taking care of yourself, your family and your new baby.

COVID-19

For the latest information on COVID-19, visit canada.ca and search: COVID-19: Pregnancy, childbirth and caring for a newborn.

In this guide, you will find important facts, answers to your questions and helpful resources to keep you and your baby healthy. They include:

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CARING FOR YOURSELF

Bringing home your new baby can feel overwhelming. Giving birth takes a physical and mental toll on you. Your body and your daily routine have changed. Be patient with your body as it recovers and heals. It takes time and energy to learn how to care for your newborn baby.



TIPS FOR TAKING CARE OF YOUR BODY AND YOUR MIND

- Drink lots of water, especially if you are breastfeeding.
- Rest when your baby is sleeping. If you are tired, ask your friends and family to visit another time.
- Eat a variety of healthy foods each day. Canada's Food Guide offers great advice and recipes.
- Build physical activity into each day. Start by taking daily walks with your baby.
- Ask for support when you need it. Accept when someone offers to help.
- Make time for yourself. Do some of the things you enjoyed doing before baby.
- Talk to your partner, family and friends about how you are feeling.
- Connect with other new parents at early years programs, parenting classes, support groups and fitness classes.

In the first few days and weeks, you and your baby need time to get to know each other. It is normal to feel emotional. Some days may be easier than others. If you don't feel physically or emotionally well, reach out to your health care provider.





BODY CHANGES AFTER BIRTH

Your body continues to change after your baby is born. Some changes are physical and others are emotional. It can take 4 to 6 weeks or more before you feel like yourself again. Be realistic about what your body will look like and what you will be able to do after giving birth.

Medical follow-ups after childbirth

See your health care provider 2 to 6 weeks after you give birth to make sure your body is recovering. If you have questions or concerns before your appointment, contact your health care provider or a public health nurse. If you have a midwife, they will visit you the week after you deliver. They will continue to see you and your baby regularly for 6 weeks.

Changes to your body

This chart will help you understand the changes your body will go through after you give birth.

- Learn what to expect
- Find out what you can do
- Know when to get help

COMMON SYMPTOM	WHAT IS NORMAL?	WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Bleeding and vaginal discharge	You will have vaginal bleeding and discharge that can last up to 6 weeks. This happens with both a caesarean birth or a vaginal birth First few days: heavy, red, bloody discharge you may notice small clots After a few days: decreases and changes to pink or brown After 10 days: changes in colour to pink and then to white or yellow	 Use pads (not a tampon or menstrual cup) Change your pad every time you go to the bathroom (at least every 4 hours) Rinse your perineum (between your vagina and anus) with warm water using a squeeze bottle Don't rinse inside your vagina (douche) 	If you experience: • heavy bleeding or discharge (1 soaked pad in an hour, twice in a row) • blood clots larger than a plum or an egg • discharge that smells bad • ongoing stomach pain • a fever: - 38.0°C or higher taken by ear - 37.6°C or higher taken by mouth or under armpit
Changes to your perineum (area between your vagina and anus)	Stretching and tearing is very common. You may have had an episiotomy You may feel bruising, swelling and pain that slowly decreases If you had stitches, they will dissolve within 2 to 4 weeks (you may find pieces of them on your pad or underwear) Your vulva (outer part of your vagina) may look different and seem more open	 Apply a cold pack or ice (wrapped in a towel) to your perineum for 15 to 20 minutes every hour for the first 24 hours Use a squeeze bottle to rinse your perineum with warm water when you go to the bathroom Wipe from front to back after going to the bathroom Soak your perineum in a few inches of warm water each day Use a sitz (warm, shallow) bath after a bowel movement Change your pad every time you go to the bathroom (at least every 4 hours) Sit on a pillow or donut shaped cushion Take pain medication as directed by your health care provider Try Kegel exercises to strengthen your pelvic floor muscles (see page 21) 	If you feel you are not healing or you have: new or severe pain, bleeding or discharge yellow or greenish discharge from your stitches or vagina foul-smelling discharge fever flu-like symptoms pain that does not go away with pain medication

COMMON SYMPTOM	WHAT IS NORMAL?	WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Afterpains and cramps	You will have menstrual-like cramps, known as afterpains. These pains help your uterus go back to its original shape and size within about 6 weeks. These can: I last between a few days to a week after birth be stronger if you breastfeed feel more intense if this was not your first baby	 Take pain medication as directed by your health care provider Apply a warm compress to your stomach Go to the bathroom often 	If you experience: new or worse pain in your stomach new or severe bleeding or discharge pain that does not go away with pain medication
Breast changes	As your breasts fill with milk, they may feel: • swollen • warm • tender • sore This often lasts between 2 to 5 days after birth. Some people don't experience any discomfort. If your breasts become engorged (too much milk) they may feel: • hard • warm • swollen • throbbing The skin may look tight, shiny and your nipple may look flat. This can last between 24 to 48 hours.	 Wear a supportive, loose-fitting bra Wear nursing pads in your bra if you are leaking If your breasts are engorged, express (squeeze) a small amount of milk a few times a day to release pressure Apply a cold compress for 10 to 15 minutes every couple of hours Take pain medications as directed by your health care provider If you are breastfeeding: do it often (8 times every 24 hours) follow the guidance above express (squeeze) a small amount of milk by hand or with a breast pump before you breastfeed if your breasts are engorged take a warm shower or apply a warm, moist towel on your breasts to help with milk flow before breastfeeding If you are formula feeding: the pain and tenderness usually improve in a few days do not apply warm compresses on your breasts 	If you experience: • swollen, red, hot and painful breasts for more than 48 hours • a sore, hard, red, painful area on your breast • painful or cracked nipples, which could be a sign your baby is not latching properly • a fever: - 38.0°C or higher taken by ear - 37.6°C or higher taken by mouth or under the armpit



COMMON SYMPTOM	WHAT IS NORMAL?	WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Constipation and changes in your bowel movements (pooping)	Constipation is common after giving birth. Bowel movements can be painful and hard to pass. They may happen up to: • 2 to 3 days after a vaginal birth • 3 to 5 days after a caesarean birth	 Drink lots of water – your urine should be pale yellow or clear Go to the bathroom as soon as you feel the need Slowly eat more fruits, vegetables and whole grains, which contain fibre Gradually increase your physical activity Talk to your health care provider about medication for constipation 	If you experience: • ongoing constipation beyond the normal time frame You may need a stool softener or other medication. Take them as directed by your health care provider. If they don't work, follow up with your health care provider.
Hemorrhoids (veins around your anus bulge)	Hemorrhoids are caused from pregnancy and pushing during birth and usually goes away after a few weeks. Symptoms include: itching bleeding pain	 Move often and try not to stand or sit for long periods Drink lots of water Avoid straining when you have a bowel movement Clean often from front to back Try baby wipes or hemorrhoid pads instead of toilet paper Slowly eat more fruits, vegetables and whole grains, which contain fibre Apply a cold pack or ice for 10 to 20 minutes a few times each day Take hemorrhoid and pain medications as directed by your health care provider 	If you experience: • ongoing pain • hemorrhoids that don't go away after a few weeks

COMMON SYMPTOM	WHAT IS NORMAL?	WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Changes to urination (peeing)	Difficulty when trying to pee Discomfort, stinging, burning and problems when you pee Leaking that can last for a few weeks Peeing more than normal	Use a squeeze bottle to rinse your perineum with warm water when you go to the bathroom Drink lots of water Run water in the sink or try peeing in the shower to help encourage your body to pee Do Kegel exercises to strengthen your pelvic floor muscles (see page 21) Take pain medications as directed by your health care provider	If you experience: ongoing pain when peeing pain in your bladder (in lower abdomen) can only pee in small amounts or you can't pee an urgent need to pee or you need to pee often, with a burning feeling a fever: 38.0°C or higher taken by ear 37.6°C or higher taken by mouth or under armpit leaking urine longer than 6 to 8 weeks after birth
Menstruation (period) changes	If you are exclusively breastfeeding, you may not have your period while your baby is taking only breast milk (your period often starts again around 6 months when your baby starts solid foods). This varies from person to person. If you are formula feeding, your period will likely start within 6 to 12 weeks	Consider birth control options and timing for another baby Your body will ovulate (release an egg) the month before your period returns	Talk to your health care provider about birth control options and any concerns you may have about your period.



COMMON **SYMPTOM**

WHAT IS NORMAL?

WHAT CAN I DO?

WHEN SHOULD I **CONTACT MY HEALTH** CARE PROVIDER?

Caesarean birth (C-section)

After a C-section, it can take up to 6 weeks for your body to heal. You may experience:

- fatique
- pain at the incision and in your lower stomach
- difficulty and pain when
- bleeding from your vagina

Any stitches should dissolve on their own. If you had staples to close your incision, your health care provider will remove them

- Take pain medication as directed by your health care provider
- Get rest when you can (sleep when your baby sleeps)
- Ask for help with things you cannot do because of your surgery (lifting, bending, housework)
- Take a shower (it is ok for your incision to get wet) and pat the incision dry after your shower
- Wait to take a bath until your incision is fully healed
- Don't lift anything heavier than your baby for the first 6 weeks
- Support your incision with a pillow when you cough or sneeze
- Use a pillow to support your stomach when breastfeeding
- Move often, even a little bit
- Gradually increase your physical
- Avoid high-impact exercise and anything that strains your stomach muscles
- Talk to your health care provider about when it is safe to drive

If you feel unwell or experience:

- pain that does not go away when you take pain medication
- a fever
 - 38.0°C or higher taken by ear
 - 37.6°C or higher taken by mouth or under armpit)
- signs of infection in your incision: pain, oozing, redness and warm to touch
- an increase in vaginal bleeding
- pain in your calf, behind your knee or in the thigh or groin
- redness and swelling in your leg or groin



Other reasons to seek help

Contact your health care provider if you experience any of the following symptoms:

- swelling in your hands, feet or face
- blurry vision or seeing spots
- severe headache
- pain in your calf, thigh or groin
- redness or swelling in your leg or groin
- pain in your chest, stomach, back or legs
- dizziness and feeling faint
- vomiting and trouble keeping fluids down

When to call 911

Call 911 if you experience any of these rare but serious symptoms:

- shortness of breath
- chest pain
- coughing up blood
- seizure
- fainting or passing out
- thoughts of harming yourself or your baby

This is not a complete list. When in doubt, consult your health care provider or seek emergency medical care.







SLEEP

Sleep is important for your physical and emotional health. It can be a challenge to get enough sleep when you are a new parent. Your newborn will eventually sleep through the night, and so will you!

IMPORTANT FACTS

Your baby's sleep patterns are different from yours.

A newborn will:

- wake up easily and often
- sleep for short periods
- maintain a light, unsettled sleep pattern during the day and night

You may feel physically exhausted.

The interrupted sleep you experience while caring for your baby makes you physically exhausted and can affect:

- how you think and cope
- your safety, such as your ability to drive safely
- your risk of postpartum depression

KEY MESSAGE



It is common to suffer from a lack of sleep when taking care of your newborn. Be patient. Parenting is hard and can be exhausting! Find ways to get more sleep and ask for help when you need it.

COMMON QUESTIONS ?

How much sleep do I need?

Adults should try to get 7 to 9 hours of quality sleep each night, but that is not easy with a newborn. You can expect to sleep 2 to 4 hours at a time during the first few weeks and months. How much sleep you need depends on what is normal for you. Get as much rest and sleep as you can but be realistic. Work towards going to bed and waking up at the same time every day.

What can I do to get more sleep?

- Sleep when your baby sleeps
- Focus more on taking care of your baby and less on things like housework
- Extend your sleep at night by going to bed earlier and sleeping longer in the morning
- Share the nights with your partner, family member or a friend
- Limit the number of visitors
- Ask for help with housework, meals and taking care of other children
- Help your baby develop healthy sleep patterns
- Make time to go for walks and be active





NUTRITION

What you eat and drink is important for your health and to help care for your baby. You may feel too tired and overwhelmed to think about eating healthy while taking care of your newborn. Eating healthy will help your body recover and feel better.

IMPORTANT FACTS

Eat a variety of healthy foods each day while breastfeeding and recovering from childbirth.

- Choose vegetables, fruits, whole grain foods and protein foods
- Fill half your plate with vegetables and fruits at meals and snack times
- Choose foods that have little or no added sodium (salt), sugars or saturated fat

Choose foods with healthy fats.

Choose foods like nuts, seeds, fatty fish and vegetable oils, which contain mostly unsaturated fat (healthy fats). Limit your intake of saturated fats (butter, cheese and red meats).

KEY MESSAGE



Eating well and drinking lots of water will give you the energy you need to care for your newborn and support breastfeeding. Follow Canada's Food Guide and take a daily multivitamin that contains folic acid.

Take a daily multivitamin that contains folic acid.

Folic acid helps support your baby's healthy growth and development during pregnancy and while breastfeeding. Take a multivitamin with 0.4 mg of folic acid every day.

Healthy eating is more than just the foods you eat.

- Be sure to take the time to eat (limit distractions like your phone or TV)
- Plan your meals and snacks to help you make healthier food choices
- Culture and food traditions can be a part of healthy eating

Make water your drink of choice.

It is important to drink lots of water while you recover from childbirth. Water carries nutrients to your body, takes away waste and helps prevent constipation and swelling. Other healthy options include white milk and unsweetened fortified plant-based beverages (like soy or almond beverage). Make water the easy choice by carrying a reusable water bottle.

Breastfeeding can make you more dehydrated. Drink water when you feel thirsty. It helps support milk production. Try to have a glass of water every time your baby breastfeeds.

If you are breastfeeding, eat a small amount of extra food each day.

You need more calories and nutrients for your breastmilk to meet the needs of your growing baby. This can be an extra snack or small meal, such as whole grain cereal with milk or yogurt and sliced fruit, seeds or chopped nuts.

COMMON QUESTIONS ?

Can I eat anything when I am breastfeeding?

Many of the foods you may have avoided during pregnancy are safe to eat after giving birth. But it is safest to continue to avoid some things:

- Avoid drinking alcohol: This is the safest approach, and it is especially important when your baby is very young.
 Their body is developing very fast and cannot process alcohol well. An occasional drink can be okay, as long as
 you plan for it. Breastfeed or express your milk before you have a drink, then wait at least 2 hours per drink before
 breastfeeding again.
- Be mindful of your caffeine intake: It is safe to have caffeine while breastfeeding, but only in small amounts. Too
 much caffeine and your baby may have trouble sleeping. Caffeine is found in coffee, tea (black, oolong, white and
 green), soft drinks (cola), energy drinks, chocolate, and herbs such as guarana and yerba mate. Keep your caffeine
 intake below 300 mg a day (two cups of coffee).
- Choose fish that is low in mercury: Some types of fish contain mercury, which can harm your baby's brain development. To limit your exposure to mercury in fish, follow advice from Health Canada. Vary the types of fish you eat and choose fish that are low in mercury. Check with your local, provincial or territorial government for any advisories on local fish.

What are some healthy postpartum snack ideas?

Healthy snacks can help keep you energized. Prepare snacks ahead of time so you can grab them easily. Here are some tips to help:

- Keep fruit on the counter
- Chop extra vegetables when cooking
- Ask family and friends to make muffins or granola bars you can store in the freezer
- Keep roasted chickpeas and nuts in your bag for when you get hungry on the go

What should I do to lose my baby weight?

You do not need to make drastic changes to lose weight after your baby is born. You will gradually lose weight with a healthy and active lifestyle. Breastfeeding also helps, as your body uses energy to make milk. Make sure breastfeeding is going well before you try to lose weight. Talk to your health care provider about a healthy goal for weight loss.



PHYSICAL ACTIVITY

Exercise is part of a healthy lifestyle. Get creative to find ways to stay active with your newborn.

IMPORTANT FACTS

Start slowly and listen to your body during exercise.

- Start with simple after-birth exercises, like taking your baby for a walk
- Slowly increase the intensity of your exercises
- If you had a normal, healthy birth, you should be able to build up to your pre-pregnancy exercise routine soon after birth
- If you had complications or a caesarean birth, talk to your health care provider about what level of exercise is safe
- If your bleeding changes to bright red or becomes heavy, it is a sign to take it easier next time
- If you pass urine or stool during exercise or experience pain or increased bleeding, talk to your health care provider

KEY MESSAGE



Enjoy daily physical activity with your baby to help you stay healthy and feel your best. Build it into your routine, like going for walks.



Exercise is safe and has many benefits.

Regular exercise is important after your baby's birth and can:

- improve your energy level
- help you sleep better
- relieve stress
- improve your mood
- help you lose weight

Aim for 150 minutes of moderate physical activity each week.

- Begin with mild activities like a walk with your baby (even 10 minutes each day will help)
- Gradually increase to at least 150 minutes each week
- Aim to be active at least 3 days each week
- Try splitting exercise into smaller, 10-minute sessions throughout your day if you do not have longer time periods to exercise

COMMON QUESTIONS

When can I start exercising after having my baby?

If you had a healthy pregnancy and a normal vaginal birth, you can slowly start exercising soon after delivery. If you had a caesarean birth, or complications during your pregnancy or vaginal birth, talk to your health care provider about when it is safe to start exercising.

Will exercising impact my breastmilk?

Exercise should not affect your ability to breastfeed. Moderate exercise will not affect how much breastmilk you have or the quality of it. If your baby does not breastfeed well after you exercise, try breastfeeding before. This can also make exercise more comfortable for you by decreasing the size of your breasts.



What about pelvic floor exercises?

Pelvic floor exercises, known as Kegel exercises, help to strengthen the pelvic floor muscles that support your uterus, bladder and bowels. These muscles control the passage of urine and stool and support your baby during pregnancy. Pregnancy and childbirth can stretch and weaken these muscles. This can lead to urine control problems when you cough, laugh or exercise.

Practicing Kegel exercises in the first few days after your baby is born may help improve your bladder control. Here is how to get started:

- Get into a comfortable position by lying down, sitting or standing
- Relax your hips and bum
- Tighten your pelvic floor muscles by pretending you are stopping urine midstream
- Hold for 5 to 10 seconds and keep breathing normally
- Relax for 10 seconds
- Repeat 5 times until it becomes easy, then increase to 10 times
- Practice 3 to 5 times each day

Talk to your health care provider about how to do pelvic floor exercises.





SEXUAL HEALTH

Physical and emotional changes after you have a baby can affect your sex life. Before you start having sex again, make sure you have a plan for birth control.

IMPORTANT FACTS

It can take time to be physically and emotionally ready to have sex after childbirth.

Most couples resume their regular sex life sometime during the first year after their baby is born. Talk openly with your partner about your worries, feelings and expectations. If you have concerns, talk to your health care provider. This can be a difficult discussion, but it is important to be open and honest.

Several options are available to prevent pregnancy and sexually transmitted infections (STIs).

It is important to have a plan to prevent pregnancy if you do not want another baby. It is also important to prevent STIs if you are at risk. Talk to your health care provider about your options. The most common options for contraceptives (birth control) and STI prevention are:

KEY MESSAGE



Your physical recovery, hormone changes and fatigue all play a role in your desire to have sex. Before you begin having sex again, decide on a method of birth control if you want to prevent pregnancy. You can get pregnant soon after birth, even before you get your period.

TYPE OF CONTRACEPTIVE OR METHOD	DESCRIPTION	THINGS TO CONSIDER
Hormonal	There are four types of hormonal contraceptives: • pill • patch • ring • shot Your choice of hormonal contraceptives and when you can start taking it depends on whether you are breastfeeding.	Does not prevent STIs
Barrier	Can include: • Male or female condom • Diaphragm or cervical cap • Sponge • Spermicide	 Safe to use while breastfeeding Less effective than other methods to prevent pregnancy Condoms may help to prevent STIs Diaphragm, cervical cap, sponge and spermicide do not prevent STIs
Intrauterine device (IUD)	Small, T-shaped device that is inserted into your uterus. There are two types: copper IUD (contains no hormones) hormonal IUD (levonorgestrel-releasing intrauterine system – contains progesterone)	Safe to use while breastfeeding Does not prevent STIs
Sterilization	Female: fallopian tubes are tied, cut, clipped or burned (tubal occlusion) to prevent pregnancy Male: tubes that carry sperm are clamped, cut or sealed (vasectomy)	Usually a permanent solution to pregnancy prevention Does not prevent STIs
Lactational Amenorrhea Method (LAM)	Breastfeeding causes your body to release hormones that interfere with the hormones that cause you to ovulate. LAM can be an effective method of birth control after giving birth if you are exclusively breastfeeding, but only if: • your baby is less than 6 months old • you are breastfeeding at least every 4 hours during the day • you are breastfeeding at least every 6 hours at night • you have not had your period since giving birth	Does not prevent STIs Does not always prevent pregnancy, as you may ovulate before your period returns

COMMON QUESTIONS ?

Is it normal to not want to have sex after giving birth?

Each person is different. Some people want to resume their sex life soon after birth. For others, it can take longer. Talk to your partner about your feelings and make sure you are physically and emotionally ready.

Intimacy may feel like an afterthought when you are exhausted and busy taking care of your new baby, but it is important to a healthy relationship. You can express intimacy towards your partner by hugging, kissing and cuddling. Talk to your health care provider if you have concerns about your sex drive.

When can I start having sex again after childbirth?

Your body needs time to heal. Wait until your bleeding has stopped and you don't feel pain while having sex. This usually takes 4 to 6 weeks. It is also important that you and your partner feel ready. Talk to your health care provider if you are concerned about when to start having sex again, or if you experience pain or discomfort during sex.

Can I get pregnant while breastfeeding?

Yes, you can get pregnant while breastfeeding. It is difficult to predict when you will start ovulating again. While breastfeeding, you may not ovulate for months, while others start much sooner. Many factors play a role in when you start ovulating, including:

- your baby's age
- how often you breastfeed
- whether your baby is exclusively breastfed



How long should I wait before I try to get pregnant again?

It depends on your current health, previous pregnancies and how your baby was born. There are risks involved with having another baby too soon or waiting too long to get pregnant again.

If you had a healthy pregnancy and a normal vaginal birth, it is best to wait 18 to 24 months after giving birth before trying to get pregnant again.

If you had a caesarean birth, think about whether you want to try to have a vaginal birth the next time. If you do, to reduce the risk of uterine rupture, it is best to have at least 18 months between your caesarean birth and your next birth.

Other things to consider:

- any medical condition that may impact your pregnancy
- any medical complications during your previous pregnancy
- your relationship, your family and the support around you
- a previous need for fertility treatments, which may also be needed in a future pregnancy and can increase stress, costs and the time needed
- your finances and age





MENTAL HEALTH

Your baby's birth changes your life. It is normal to feel a range of emotions that can impact you. Be aware of your feelings and ask for help and support when you need it.

IMPORTANT FACTS

It is common to experience the "baby blues."

It is common to experience the baby blues a few days after giving birth. You may feel restless and tense, sad and teary, or overwhelmed. This is a normal part of adjusting to life with a new baby. These feelings usually get better in a couple of weeks and pass more easily with support and self-care. Take care of your emotional needs: take a break, ask for a hug, go for a walk or ask for help.

You may experience more severe and longer lasting symptoms beyond the baby blues. This could be postpartum depression. Experiences and symptoms of postpartum depression can vary widely. What you are feeling could be quite distressing. Getting medical help is the most important thing you can do to help yourself feel better. If you feel that something is not right and think you might need help, talk to your health care provider as soon as you can.

KEY MESSAGE



It is normal to feel a range of emotions after giving birth. Some feelings and symptoms may mean you need help and support. Getting help early can help you feel better faster.

You may experience postpartum anxiety.

It is natural to worry about your newborn and your new responsibilities. You may experience postpartum anxiety. Postpartum anxiety often presents as recurring intense worry or disabling fear that is hard to control. Anxiety is a common feature of postpartum depression but can also be present on its own. While struggling with recurring worries is one of the most common types of postpartum anxiety, some people may have periods of very high anxiety or panic attacks. Some people also experience intrusive thoughts, which are thoughts or images that are really hard to get rid of. These can occur on their own, with postpartum depression, with anxiety disorders, or as part of a condition called obsessive-compulsive disorder that can also sometimes start after giving birth. These conditions can be treated, and your health care provider can help direct you to support based on your symptoms.

Self-care is important

Parents take better care of their newborn when they take care of themselves, too. Eat well, get enough rest, take breaks and do something fun or relaxing. Find support and relieve stress by talking about your feelings and concerns with your friends and family. Talking to others about your emotions can help you respond to, process and address them better.



POSTPARTUM MENTAL HEALTH CONDITIONS

This table will help you better understand postpartum depression, anxiety and other mental health conditions that can happen after you give birth. If you are concerned about what you are feeling or symptoms you have, talk to your health care provider. There are many types of treatments and supports available.

•		
POSTPARTUM MENTAL HEALTH CONDITIONS	DESCRIPTION	SYMPTOMS Many conditions have overlapping symptoms, while other symptoms are unique to a specific mental health condition
Postpartum depression	Depression can begin before or during pregnancy or after childbirth. It can: start soon after you give birth or become obvious in weeks or months develop after a miscarriage or stillbirth be mistaken for baby blues at first, but the signs and symptoms are more intense, last longer and may interfere with your daily life make you feel hopeless, sad and unable to cope last months or longer if left untreated make you feel confused, alarmed and stressed over the symptoms you are experiencing	You may: feel like you can't get out of bed feel sad, worthless, anxious or guilty cry more than usual have trouble concentrating feel irritable or numb experience frequent mood swings feel very tired or restless sleep more or less than usual eat more or less than usual lose interest in things you used to care about have nightmares or scary thoughts have thoughts of death or suicide (wanting to escape, wishing you were not alive anymore, or thinking or planning how you could end your life)
Postpartum anxiety disorders	Postpartum anxiety is a frequent and intense worry or disabling fear. It is hard to control and: is often related to your baby and their well-being can happen with postpartum depression, but can be experienced on its own can include periods of very high anxiety or panic attacks may involve thoughts or images that are difficult to get out of your mind (known as intrusive thoughts) Those with panic disorder, a type of anxiety disorder, will experience shorter intense attacks of anxiety that occur out of the blue, and that make them feel quite afraid.	You may: • feel anxious or tense • feel very tired and irritable • have trouble concentrating or sleeping • feel excessive or uncontrollable worry

POSTPARTUM MENTAL HEALTH CONDITIONS	DESCRIPTION	SYMPTOMS Many conditions have overlapping symptoms, while other symptoms are unique to a specific mental health condition
Obsessive-compulsive disorder (OCD)	OCD includes troubling thoughts or images that are difficult to get out of your mind. These thoughts sometimes lead to repetitive behaviours that can start to interfere with daily life.	You may: • feel anxious or tense • have trouble sleeping or concentrating • have persistent, intrusive thoughts or images • repeatedly check, count or wash things
Post-traumatic stress disorder (PTSD)	PTSD usually involves exposure to trauma. You could have pre-existing PTSD and symptoms return after giving birth, or develop PTSD related to your childbirth experience. After a difficult experience, reactions and feelings usually start to fade on their own. If they don't or they are interfering with your ability to sleep, bond with your baby, or enjoy your postpartum experience, talk to your health care provider.	You may: • feel anxious or tense • have trouble sleeping or concentrating • re-experience the traumatic event • have vivid flashbacks or nightmares • have negative moods and thoughts • feel nervous or feel like something terrible is about to happen • feel numb or have a hard time feeling emotions
Postpartum psychosis	Postpartum psychosis is a very serious but rare condition that needs immediate emergency medical care. It can quickly get worse and put you or others in danger. If you or someone close to you suspects postpartum psychosis, you should not be left alone or with your baby. Go to the emergency department at the hospital right away.	Usually happens in the first 2 weeks after giving birth. You may: • see and hear things that are not really there • have beliefs that are untrue about yourself, your baby or others • have severe mood changes • have poor concentration, insomnia and confusion • behave in a hyperactive way, feel agitated and ramble (speaking quickly and not making sense)

COMMON QUESTIONS

What causes postpartum mental health conditions?

After birth, anyone can develop postpartum mental health issues. Some may be more vulnerable because they are naturally sensitive to the hormonal changes that occur with childbirth. Others can be sensitive to the lack of sleep that happens when you have a newborn. For some, there is no specific reason or trigger for their mental health issue.

You may be at higher risk if you have:

- a personal or family history of mental health issues or addiction, in particular depression or bipolar disorder
- little social, practical or emotional support
- experienced a major stressful event (domestic violence, sick child or traumatic birth experience)

Talk to your health care provider if you think you may be experiencing symptoms of depression, anxiety, OCD or PTSD. They can help you get the support you need.

How are mental health conditions diagnosed?

Your health care provider will ask about your symptoms and complete a physical exam. They may order blood tests to see if there is anything else that could be causing your symptoms, such as low iron, thyroid or vitamin levels. Be open and honest with your health care provider about how you are feeling. They will discuss treatment options with you and help you find the right one.

How are mental health conditions treated?

For those with mild symptoms, the benefits of more support, more sleep and time for self-care can be helpful on their own. Peer-led or nurse-led postpartum support groups in person or online may also be helpful for those experiencing mild symptoms.

Those with moderate to severe symptoms may benefit from psychological therapy or counselling from a trained mental health professional, either one-on-one or as part of a group.

When therapy alone is not helping or is not working fast enough, the next step may be medication. Some people are afraid to take medication, especially if they are breastfeeding or planning another pregnancy. For many medications, the benefits outweigh any potential risks. Your health care provider can explain the risks and benefits of all treatment options to help you make the best decision.



Are you having thoughts of suicide or of hurting yourself, your baby or someone else?

- Call 911 if your life or someone else's life is in danger
- Get support from a local crisis centre visit crisisservicescanada.ca and search local resources
- Call the Canada Suicide Prevention Service at 1-833-456-4566 (24 hours a day, 7 days a week) or text 45645 (4pm - 12am ET)
- Reach out to the First Nations and Inuit Hope for Wellness Help Line at 1-855-242-3310 (24 hours a day, 7 days a week)



SUBSTANCE USE

As a parent, it is important to think about how substance use can affect you and your family. Many people use substances for a positive experience to relax, for medical purposes or to celebrate. However, alcohol, tobacco (nicotine), cannabis or other drugs can have negative health impacts.

IMPORTANT FACTS

Substance use by parents can have negative and long-term health impacts on their child.

If you use substances, your child could face a greater risk of harm as they grow and develop. These harms may include:

- social, emotional and behavioural problems
- difficulty learning at school
- a higher chance that they will use substances when they grow up

The impact depends on the type of substance, level of exposure and other health factors.

KEY MESSAGE



Substance use can harm you, your partner and your newborn. Learn how to reduce the risks.

Alcohol, nicotine and cannabis can transfer through breastmilk to your baby.

- · Substances stay in a person's body after they are consumed. Alcohol and nicotine can take a few hours to leave your body, and cannabis can take a few weeks.
- The amount of time a substance stays in your body depends on the type of substance, your weight, genetics and how much and how often you use it.
- It is best to not use substances while breastfeeding to reduce the risks of exposing your baby.
 - If you are unable to stop, look for ways to decrease your baby's exposure.
 - Talk to your health care provider for help to reduce or stop substance use while breastfeeding. How you react to substances can change after you have a baby.

How you react to substances can change after you have a baby.

The physical and emotional changes you experience after bringing your baby home can affect how you react to substances, even if you have used them before.

Estrogen levels can slow down how your body breaks up substances and can make you feel more drunk or high, and for longer. A lack of sleep can affect how you feel after using a substance. Changes in what you eat can also impact how you feel after using a substance.

Second-hand smoke exposure is not healthy for your baby.

Second-hand tobacco smoke is a known risk factor for cancer, sudden infant death syndrome (SIDS), pneumonia, respiratory issues and ear infections. Smoke from cannabis contains many of the same chemicals as tobacco smoke.

To help reduce these risks, keep your home smoke-free. Smoke outside and keep your baby away from smoking areas. Wash your hands and remove all clothing exposed to smoke before you interact with your baby.

Using substances to self-medicate or improve your mood can be a sign of a mental health condition.

Everyone has a different experience with their new baby. Some parents may feel overwhelmed, and they may use substances to cope. If you are concerned, talk to someone you trust such as your health care provider, a family member or a friend. Share your feelings and ask for help to find the right support.

Substances can affect your ability to parent.

Positive interactions with your baby help with bonding. Alcohol and cannabis can change your mood and affect how you respond to your child's needs. They can reduce your ability to pay attention, make decisions or react in emergencies. They can also make you feel drowsy and tired.

If you or your partner consume substances, plan ahead together. Agreeing on the right time and place to use substances can help ensure it does not affect you or your baby's health. Make sure at least one adult (you, your partner or other family member) is sober and able to take care of your baby and react in case of an emergency.

COMMON QUESTIONS

Can I "pump and dump" if I want to use alcohol or cannabis while breastfeeding?

Pumping and dumping is a term used to describe expressing or pumping milk after drinking alcohol or consuming cannabis and then discarding it. But it does not decrease the risk of exposure because it is not an effective way of clearing breast milk of substances after they are consumed.

It is safest to avoid alcohol if you are breastfeeding, especially when your baby is very young. An occasional drink can be okay as long as you plan for it. Risks can be minimized if you breastfeed or express your milk for your baby before having a drink. Then wait at least 2 hours per drink before breastfeeding again.

It is safest to avoid using cannabis altogether while breastfeeding. It is difficult to know when babies can be breastfed without exposing them to cannabis. This is because the active ingredient, THC, stores in fat cells and releases over time. Depending on the frequency and dosage of cannabis consumed, trace amounts of THC can be found in breastmilk several days to several weeks after the last use. On top of the potential health risks for your baby, babies exposed to cannabis through breastmilk may become drowsy and have difficulty latching, which can affect how much breastmilk they take in.

If you are unable to stop using alcohol or cannabis completely, try using less, and using it less often. Talk to your health care provider or look for support in your community if you need help.

Will my partner's substance use affect the baby?

Your partner's substance use can affect your well-being and the well-being and safety of your baby. You are more likely to use substances if your partner is using. Your partner may be unable to parent safely if they are under the influence of substances. Talk to your partner about what they can do to help your family stay healthy and safe. This is especially important if you feel they need support to address their substance abuse.

I want to quit smoking. Where can I find help?

Talk to your health care provider for support and advice if you want to live a smoke-free life. You can find help to quit smoking in the resource section of this guide.

Is vaping a safer alternative to smoking around my baby?

Vaping products may lower risks to individual users compared to cigarettes, but even limited exposure to second-hand vaped cannabis or nicotine can be harmful to your baby. If you use an e-cigarette or other vaping devices, use them outside and away from your baby.







VACCINATION

Vaccines (immunizations) offer the best protection against serious diseases that can make you or your child very sick.

IMPORTANT FACTS

Vaccines work with your body's natural defenses to build protection (immunity) against a disease.

Vaccines help to:

- protect you from becoming very sick and possibly dying from exposure to a germ
- reduce and eliminate diseases in Canada that were once common
- reduce the chance of a disease outbreak when most people in a community have been vaccinated

You may need vaccines after your baby is born.

It is important to ensure your immunizations are up to date to reduce your chances of getting a preventable disease and spreading it to your baby.

KEY MESSAGE



Newborns can get very sick from certain infections. Getting vaccinated helps to protect you and those around you, including infants who are too young to be fully vaccinated. Talk to your health care provider or local public health office to find out what vaccines are recommended for you, your baby and your family.

Your child may receive their first recommended vaccines at birth or within the first 2 months.

Vaccinating your child on time is important for vaccines to provide the best protection. Routine vaccines are free in Canada. Begin when your child is young and follow the schedule outlined in your province or territory.

Your child needs to be vaccinated against different germs at several stages of life to be fully protected. Some vaccines need to be given more than once to provide strong and lasting protection.

COMMON QUESTIONS

Are vaccines safe?

Vaccines are safe and provide important benefits for you and your baby. Before Health Canada approves a vaccine, it is thoroughly tested to make sure it is safe. In Canada, vaccines are constantly monitored for quality and safety.

Is it safe to get a vaccine when I am breastfeeding?

Yes, if you are breastfeeding, it is safe for you to receive most vaccines. It is also safe for your breastfeeding baby when you receive these vaccines. There are exceptions among less common vaccines that should typically not be given if you are breastfeeding. They include vaccines against yellow fever and the Bacille Calmette-Guerin (BCG) vaccine for tuberculosis.

Is breast milk a substitute for vaccinating my child?

While breast milk has many qualities that help your baby's immune system, it is not a substitute for vaccination. It is important to vaccinate your child according to your province or territory's recommended schedule even if they are breastfed.

Should I get the flu vaccine?

Everyone 6 months of age and older should get a flu vaccine every year. The flu vaccine is safe to get during pregnancy and while breastfeeding.

During flu season, if you did not already receive the flu vaccine while pregnant, you should get it as soon as possible after your baby is born. This will reduce the chances of getting the flu and passing it on to your baby. This is especially important for babies under 6 months of age who can't receive the flu vaccine and who are at higher risk of serious complications if they get the flu.

What about vaccinations for people who are in contact with my baby?

All members of your household, visitors or anyone taking care of your baby (like friends, grandparents and caregivers) should have up-to-date vaccinations.





CARING FOR YOUR BABY

During the first few days and weeks with your new baby, you will get to know your baby and learn about how to care for them. Not only will you be learning about how to care for your baby, but you will also be learning about their temperament. Each baby is unique and born with their own temperament.

Your baby's temperament is the natural part of their personality. You may have noticed that some babies are quiet and others cry more, some are cuddly while others are more squirmy. These are differences in their temperament. You may start noticing certain behaviours in your newborn soon after birth. How you respond to them will also help form their personality. It will take time for you to get to know your baby and figure out how best to respond to their needs. As you respond to their needs in a loving, nurturing way, you will get to know their unique personality and build a strong foundation for your relationship.





NEWBORN CARE

Parenting a newborn can be hard and feel overwhelming. In the first few days and weeks, focus on holding your baby skin-to-skin and cuddling them often. Be sure to respond to their basic needs by feeding, diapering and putting them to sleep. If you are finding it difficult, ask for help from your partner, family and friends.

There are many things to know about your newborn baby. This section will help you:

- learn how to take care of your baby
- find out what to expect with a newborn
- know when to be concerned and when to call your health care provider

For information on feeding, see the section on Breastfeeding on page 52.

HYGIENE AND DAILY CARE

Taking care of your newborn's care and hygiene will help you get to know your baby and bond with them. Try talking, singing, playing and cuddling while you give them a bath or change their diaper. This helps with their development. It also builds a secure and loving relationship with you.

NEWBORN CARE	WHAT TO EXPECT	WHAT YOU CAN DO
Sleep	 Your newborn may sleep up to 18 hours a day Babies tend to sleep for short periods, about 3 to 4 hours at a time As they grow, they spend less time sleeping each day, but will sleep for longer periods at a time 	To help your baby learn ways to self-comfort and fall asleep on their own: Develop a soothing bedtime routine, such as a bath and lullaby. As they grow older, you can read them a book Develop the habit of placing them in their crib, cradle or basinet when your baby shows signs of being tired During bedtime and nap times, always place your baby on their back to sleep
Diapering	 Your baby's diaper needs to be changed regularly Clean their genitals (private parts) with every diaper change Make sure the skin is dry before you put on a clean diaper 	 To keep the area clean: Use unscented wipes or use a cloth with water for pee [add soap for stool (poop) when using a cloth] For female: wipe from front to back and be sure to clean in the creases For uncircumcised male: do not retract the foreskin For circumcised male: follow the care instructions your health care provider gives you To clean after a bowel movement (poop): Change the diaper as soon as possible (poop can irritate your baby's skin) You don't need to use creams or powders unless your baby's skin is red or irritated If your baby has diarrhea, apply a barrier cream or zinc paste to keep your baby's skin from being irritated To prevent a diaper rash: Change your baby's diaper often Use a barrier cream or zinc paste if their skin is irritated or to prevent a rash if they have diarrhea Give your baby a bath if their rash is causing them pain when you change their diaper Leave your baby without a diaper to help their skin heal

NEWBORN CARE	WHAT TO EXPECT	WHAT YOU CAN DO
Bathing	Your baby does not need a bath every day. Wash your baby's face and hands often and clean their genitals at each diaper change.	 To give your baby a bath: Make sure the room is warm Add only a few centimetres of warm water to the bottom of the tub or sink Hold your baby firmly Use soap if you like, but it is not necessary Use clean, fresh water to wash their face, eyes, ears, nose and mouth Clean female genitals (private parts) from front to back and be sure to clean the creases Wash male genitals gently (for uncircumcised boys, do not retract his foreskin) Dry your baby's skin completely Never leave your baby alone during a bath. A baby can easily drown in very little water. If you need to leave the room, take your baby with you.
Umbilical cord care	Your baby's umbilical cord will gradually dry up and fall off within 1 to 3 weeks. In the beginning, the cord will be pale yellow. It will slowly turn dark brown before falling off. There may be a small amount of bleeding when it falls off.	To care for your baby's umbilical cord: It is okay if it gets wet during a bath Gently dry off the cord after the bath to keep it dry Don't cover the umbilical cord or apply anything to it Fold the top of the diaper down to allow the umbilical cord to be exposed to the air and dry up Contact your health care provider if your baby has a fever or their umbilical cord shows any signs of infection, including: redness swelling yellow or green pus smelly discharge significant bleeding
Nail care	During the first week of life, your baby's skin is attached to their nails. Wait until your baby is at least 1 week old before trimming their nails. In the meantime, your baby can wear soft mittens to protect their face from scratches.	To trim your baby's nails: Use a nail file or baby scissors to gently trim the nails Follow the natural curve of the fingers when you trim Trim toenail nails in a straight line Try trimming after a bath or when they are sleeping if they don't like having their nails trimmed



CHANGES IN YOUR BABY

In the first few days following birth, you will notice that your baby is changing quickly. Although everything usually goes well, it is important to be aware of when things don't seem right. Always trust your instinct. As a parent, you will learn what is normal for your baby and when it is time to call to your health care provider or visit the hospital.

CHANGES IN YOUR BABY	WHAT IS NORMAL AND WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Skin	A baby's healthy skin colouring can vary depending on their ethnicity and race. It means your baby is breathing well and getting the right amount of oxygen (skin can appear red and blotchy when they cry) Their feet may look slightly blue in the first few days It is normal for babies to have pimples from the oil on their face (don't pop them; they will go away on their own) Your baby may have birth marks Jaundice is common in newborns (skin and the whites of their eyes may be slightly yellow). Jaundice may be hard to see, especially if your baby has darker skin. Jaundice often starts in the first few weeks, and usually goes away within a few days with extra feedings.	Contact your health care provider if: • your baby is not feeding well and seems more sleepy • you have concerns about your baby's jaundice, the colour of their skin or eyes • you have concerns about your baby's birth mark Call 911 if your baby's face and body are grey or blue.
Head	 Your newborn's bones are not yet fused together, so they will have soft spots in the front and back of their head Your baby's head and neck are very delicate Your baby's head may have an odd shape from coming through the birth canal (it will get more rounded within a few weeks) Cradle cap is a dry yellow crust that forms on your baby's scalp (it is very common and usually clears up on its own) To help prevent cradle cap, rinse your baby's head well at bath time and gently brush their hair and head every day. To treat cradle cap, you can apply a small amount of baby oil or vegetable oil on your baby's head and leave it on for an hour. Then wash your baby's hair with baby shampoo and brush. 	Contact your health care provider if: your baby's cradle cap does not clear up you have concerns about the shape of your baby's head
Sneezing	Babies sneeze to clear their nose. It is normal for your baby to sneeze many times a day.	Contact your health care provider if your baby is sneezing and has other symptoms such as a runny nose, fever or cough.

CHANGES IN YOUR BABY	WHAT IS NORMAL AND WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Breathing	It is normal for your baby's breathing to be irregular. They may: • breathe fast and then pause • take breaks and pause for up to 10 seconds between breaths • take 30 to 60 breaths a minute	Contact your health care provider right away if: • you are worried about your baby's breathing Signs of trouble breathing may include: • appearing short of breath • flaring their nostrils when breathing in • wheezing • gasping • breathing heavily and quickly • skin is drawn between their ribs when breathing in Call 911 if you think your baby needs immediate medical attention.
Mouth	It is normal for a baby to have a pink, moist mouth. Some babies get an infection in their mouth called thrush. Thrush happens when too much of the yeast that is normally found on the body grows. It: is very common causes white spots in your baby's mouth that don't disappear when you gently rub them with your finger may give your baby a red diaper rash If your baby is diagnosed with thrush by your health care provider, you can help prevent reinfection. Thoroughly clean all objects that have been in contact with your baby's mouth, including: pacifiers nipples bottles equipment toys	Contact your health care provider if you think your baby has thrush. If you are breastfeeding, you will also need treatment. Thrush can be passed on to you.

CHANGES IN YOUR BABY	WHAT IS NORMAL AND WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Body temperature (fever)	 It is easiest to check your baby's temperature under their armpit, but this method is not always accurate. Using the armpit method: A normal temperature is 36.5°C to 37.5°C (97.7°F to 99.5°F) A fever is 37.6°C (99.6°F) or higher A rectal temperature is more accurate, but only use this method if you have been taught by your health care provider. Using this method: A normal temperature is 36.6°C to 37.9°C (97.9°F to 100.2°F) A fever is 38.0°C (100.4°F) or higher Don't use forehead, ear or pacifier thermometers to check for fever in your newborn Watch for other signs of fever: warm back or neck sleepiness flushed and pale sweaty feeding less If your baby has a fever: Feed your baby more to decrease the chance of dehydration Put light, breathable clothes on your baby to keep them cooler 	If your baby is under 3 months and has a fever, contact your health care provider right away or visit the emergency department. If your baby is older than 3 months and has a fever, monitor them closely for other signs they are sick call to find out if your baby needs to be seen by their health care provider
Spit up	It is normal for babies to spit up a small amount of milk when they are burped or moved. This happens because the stomach and the valve that prevents milk from coming back up are not fully developed. Spit up: usually decreases after the first 6 months often stops around 12 months can be caused by some medical conditions like food allergies and lactose intolerance To help with spit up: keep your baby's head slightly raised during feeding burp your baby during and after each feeding avoid moving your baby for a short time after feeding	Contact your health care provider if your baby: • projectile vomits (throws up forcefully) often • spits up milk that has blood streaks • chokes or gags on their spit up • has spit up that concerns you

CHANGES IN YOUR WHEN SHOULD I CONTACT MY WHAT IS NORMAL AND WHAT CAN I DO? **BABY HEALTH CARE PROVIDER?** Crying Crying is normal and is one of the ways your baby expresses Contact your health care provider if themselves. Babies cry when they: your baby is inconsolable and has other symptoms you are worried about. are hungry • have a dirty diaper • feel hot or cold need affection feel uncomfortable are bored feel pain Pay attention to when your baby cries to ensure they don't cry for too long. When your baby cries, you can: • change their diaper • feed them • snuggle them on your chest sing or hum a lullaby · touch their skin to feel if they are too hot or cold • softly rock them in your arms If these tips don't calm your baby, try: creating white noise by running the vacuum or dryer placing them in a baby swing • taking them for a walk in the stroller or for a short ride in the car Genitals Female: Contact your health care provider if: (private parts) • Genitals may seem swollen in the first few days you are worried that something does not seem right • Vagina may produce a few drops of blood in the first few days (caused by the transfer of hormones between you and your baby a circumcision shows signs of bleeding or infection, such as: during childbirth) redness Male: swelling • Uncircumcised penis – do not retract the foreskin green, foul-smelling discharge • Circumcised penis – follow the care instructions your health care fever provider gives you

CHANGES IN YOUR BABY	WHAT IS NORMAL AND WHAT CAN I DO?	WHEN SHOULD I CONTACT MY HEALTH CARE PROVIDER?
Poop (stool)	In the first few days after birth: Your baby's poop will be thick and black or dark green (this is called meconium) Your baby should poop at least once a day After the first few days: Your baby's poop will become more liquid and will change to yellow, green or brown Your baby should poop 2 to 3 times a day After about 5 days: Your baby's poop will depend on whether they are breastfed or formula fed If you are breastfeeding: Your baby's poop will be golden yellow, soft, runny, lumpy or look like it has seeds in it In the first few weeks, your baby will have 3 small poops or 1 large poop a day After 1 month, your baby could poop once every few days and up to once a week If you are formula feeding: Your baby's poop will be pale yellow to light brown, pasty or thick In the first few weeks, your baby will poop 1 to 2 times a day After 1 month, your baby will poop once every day or two	Contact your health care provider if: • your baby's poop is black after the first few days • your baby's poop is red, grey, white or beige • you are worried that your baby may be constipated (trouble pooping)
	Poop can irritate your baby's skin and cause a rash. Change your baby's diaper as soon they poop. If your baby's skin is irritated, try a barrier cream or zinc paste when changing their diaper.	
Hiccups	It is normal for your baby to have hiccups. They often happen after feeding and go away on their own. If you want to calm your baby's hiccups, try feeding them.	Hiccups will stop on their own. There is no need to worry or to contact your health care provider.

CHANGES IN YOUR BABY

WHAT IS NORMAL AND WHAT CAN I DO?

Pee (urine)

Your baby's pee should be pale yellow. How much your baby pees will change over the first few days. Here's an idea of what you can expect:

- day 1: 1 wet diaper
- day 2: 2 wet diapers
- day 3: 3 wet diapers
- day 4: 4 wet diapers
- days 5 to 7: 5 wet diapers
- after 7 days: 6 wet diapers

It is normal to find orange crystals in your baby's pee or for their pee to look pink in the first 2 to 3 days after birth.

Make sure your baby is feeding enough. This should stop on its own.

If you are using infant formula to feed your baby, be sure to follow the instructions and use the correct amount of water.

WHEN SHOULD I CONTACT MY **HEALTH CARE PROVIDER?**

Contact your health care provider if:

- you still see orange crystals or pink pee in your baby's wet diaper a few days after the birth (this could be a sign of dehydration)
- you are worried about the number of wet diapers



WHEN TO CONTACT A HEALTH CARE PROVIDER OR SEEK EMERGENCY CARE

It is not always easy to know the difference between an emergency and a routine health problem. Trust your instincts.

Consult your health care provider if your baby has any of the following symptoms:

- frequent projectile vomit
- not drinking much and unusually sleepy (hard to wake up)
- skin colour is pale or greyish
- under 3 months of age and has a fever:
 - rectal temperature of 38°C or higher
 - armpit temperature of 37.6°C or higher
- breathing quickly, even when calm and not crying (more than 60 breaths per minute)
- exerting extra effort to breathe, and has one or more of the following:
 - shortness of breath
 - flaring of nostrils when breathing in
 - skin is drawn between the ribs when breathing in
 - wheezing
 - gasping
- irritable and crying all the time (you are unable to console them)
- reacts little to interactions when awake
- has not peed in 24 hours
- has orange crystals in their diaper and they are more than 3 days old

Call 911 if your baby:

- may have ingested (swallowed) poison, alcohol, medication or drugs
- has trouble breathing or swallowing
- is choking
- is pale blue, grey or has very pale face or lips
- has a swollen tongue, mouth or throat
- has a hoarse voice or cry
- has fainted or passed out
- is not reacting to interactions when awake

This is not a complete list. When in doubt, consult your health care provider or seek emergency medical care.







BREASTFEEDING

Breast milk is the best food for your baby. Breastfeeding gives your baby the nutrients and calories they need to grow. It also helps develop a secure and loving relationship between you and your baby.

IMPORTANT FACTS

Breastfeeding is important for your baby's health.

Breast milk is the best food for your baby's growth and development. You produce it specifically for your baby. It is the only food or liquid your baby needs for the first 6 months of life. As your baby grows, your breast milk will change to meet their needs.

Breastfeeding helps reduce your baby's risk of diarrhea, ear or lung infections, sudden infant death syndrome (SIDS) or being overweight when they are older. It is a great way to give you regular skin-to-skin contact to support your bond with your baby.

KEY MESSAGE



Breastfeeding is the preferred way to feed your baby. Breast milk helps your baby develop their immune system, encourages their overall growth and development. It also offers you health benefits.

Breastfeeding is also good for your health.

Breastfeeding also offers you health benefits. It:

- encourages your uterus to return to its usual size by triggering mild contractions in the first days after birth
- helps your body to regain its shape sooner and in a natural way from the energy used to produce breastmilk
- can prevent some diseases, such as breast and ovarian cancer, diabetes and cardiovascular disease
- delays the return of your menstrual cycle (if you are exclusively breastfeeding)

Breastfeeding is convenient.

Breast milk is always fresh and at the right temperature. It is ready for your baby as soon as they are hungry. You don't have to heat it, boil water or sterilize bottles. Since breast milk is always with you, it is easier to do activities and errands with your baby.

Your baby will give you signs when they are hungry.

You will learn your baby's hunger signals in the first few weeks. Try to recognize your baby's signs of hunger before they start to cry. This includes:

- tongue clicking or lip smacking
- mouth movements that imitate suckling
- hands to their mouth

There are ways to relieve discomfort in your breasts.

Your nipples may become sensitive during the first few weeks of breastfeeding. Try expressing (squeezing) a few drops of milk at the end of each feeding and gently apply it to your nipples. This can be soothing and acts as a natural protective barrier.

If your breasts become swollen, apply hot compresses just before breastfeeding your baby. This softens the breast tissue, helps release milk and makes it easier for your baby to latch onto your nipple. If your breasts continue to be swollen between feedings, apply cold compresses for 10 to 15 minutes every couple of hours.

There are resources to help with breastfeeding.

Learning to breastfeed takes time and patience. It is a skill that you and your baby will learn together. Before you get discouraged, ask for help! There are many people and resources to support you:

- family and friends who have breastfed
- health care providers like nurses, doctors and midwives
- breastfeeding consultants or coaches
- support groups, including La Leche League, or others available through your local public health unit



Informal sharing of breastmilk is not recommended.

You may be unable or choose not to breastfeed. The most common alternative to breast milk is commercial infant formula. Talk to your health care provider to find the formula best suited for your baby, and to learn how to prepare, store and use it safely.

You may come across informal ways that people share untreated breast milk (online or from someone you know). This is not recommended as a safe way to feed your baby. Untreated breast milk can pose a serious risk to your baby's safety. The milk could be contaminated with bacteria or a virus like HIV. The only way to get safe, high-quality breast milk is through a milk bank that meets the Human Milk Bank Association of North America guidelines.

COMMON QUESTIONS ?

How do I know if my baby is getting enough milk?

Your baby will grow quickly in the first few months. During growth spurts, there will be days when your baby will be very hungry and feed more often. Your breast milk will change and increase to meet your baby's needs. The more you breastfeed, the more milk your body will make.

Watch for signs that tell you when your baby is hungry and when they have had enough. Some babies prefer many short feedings, while others prefer fewer and longer feedings. Try not to rush. Take your time.

Two signs your baby is feeding well:

- by the sixth day after birth, your baby has six or more wet diapers in 24 hours and regular bowel movements
- your baby is gaining weight (many babies lose a bit of weight over the first few days and gain it back by around 2 weeks old)

Should I give my baby water if they are breastfed?

If you breastfeed, you do not need to give your baby water. Your breast milk is perfectly adapted to meet your baby's needs. Its consistency is more liquid at the beginning of breastfeeding to hydrate and quench your baby's thirst. It gradually becomes creamier and richer in nutrients as breastfeeding continues.



How can I maintain my milk production if I have to stop breastfeeding temporarily?

If you need to stop breastfeeding for a short time, you can express your milk at regular intervals. You can do this by hand or using a manual or electric breast pump. Try to follow your usual breastfeeding schedule. This helps your body continue to produce milk as normal.

You can keep your pumped breast milk in the refrigerator or freezer for later, unless you have been told to discard it by your health care provider. Gently warm it up in a container of hot water when it is time to feed your baby. Be careful to check the temperature of the milk on your wrist before giving it to them. Make sure it is lukewarm and not too hot.

Should I give my baby vitamin D?

While you are breastfeeding, you should give your baby a supplement of 10 mcg (400 IU) of liquid vitamin D every day. You can find liquid drops specifically formulated for babies at most pharmacies. If you are not breastfeeding, your baby does not need a vitamin D supplement as commercial infant formula contains vitamin D.





GROWTH AND DEVELOPMENT

The first few months of your baby's life bring new and exciting milestones. There are ways you can help your baby grow and learn.

IMPORTANT FACTS

Your baby's early experiences help shape the way their brain grows and influences their lifelong health.

Babies change more in the first months of life than at any other time. It is important to learn about and look for milestones to understand your baby's development and behaviour.

Each baby is unique.

Babies learn and develop at their own pace. They are often ahead in some skills and behind in others. Talk to your health care provider if you are concerned about your baby's growth or development.

KEY MESSAGE



Help your baby learn and develop by cuddling, hugging and holding them skin-to-skin. Smile and make eye contact, talk, read and sing to them. Play with your baby. Learn to figure out their signals when they are hungry and how to soothe them when they are hungry or crying.



The main areas of a baby's development are cognitive (brain), physical, communication and emotional (social).

It is important to learn about milestones and what you can do to help your baby reach them.

YOUR BABY'S DEVELOPMENTAL MILESTONES

This chart will help you understand what most babies do by 2, 4 and 6 months. If you have any concerns about the milestones your baby is expected to reach at specific ages, talk to your health care provider.

5151//6	WHAT MOST BABIES DO AT THIS AGE AND STAGE		
BABY'S DEVELOPMENT	2 MONTHS	4 MONTHS	6 MONTHS
Cognitive (brain)	 Looks at your face Starts to follow objects with eyes Recognizes voices 	 Reaches for objects with one hand Follows moving objects side to side with eyes Recognizes people from a distance 	 Brings objects to mouth Starts to pass objects from one hand to another Tries to get objects that are out of reach
Physical	Lifts head up Starts to push up onto arms when lying on tummy	 Holds head up unsupported Tries to support their body by pushing feet down on surfaces May roll from tummy to back Puts hands in mouth Pushes onto elbows when lying on tummy 	 Starts to sit without support Supports weight on legs and starts to bounce Rolls over from tummy to back and from back to tummy Pushes up onto hands and knees (crawling position), rocks back and forth
Communication	Coos and makes gurgling sounds Turn head to sounds	Starts babbling Starts to copy sounds	 Responds to name Starts babbling two letter sounds – ah, eh and oh May babble with consonant sounds – m and b
Emotional and social	Starts to smile Tries to look at people Starts to self-calm or soothe	Smiles at people Likes to play with people instead of toys	Enjoys playing with othersLikes to look at their reflection



WHAT YOU CAN DO TO ENCOURAGE THE DEVELOPMENT OF YOUR BABY

2 MONTHS	4 MONTHS	6 MONTHS
 Hold and cuddle your baby Talk, sing and read to them Give them lots of supervised tummy time (try lying down on your back and holding them skin to skin on your chest) Imitate sounds back to your baby Smile back when they smile at you 	 Talk to your baby about what you are doing, such as during bath time or when diaper changing Read to them and talk about the pictures Continue to give them lots of supervised tummy time When lying on their back, play games by dangling safe toys for them to reach Imitate sounds back to your baby 	 Play in front of a mirror together Keep talking, singing and reading to them Respond back when your baby is babbling to you Play games like peek-a-boo and make funny faces

Source: Adapted from the Centers for Disease Control and Prevention, CDC's Developmental Milestones.



What should I do if my baby is not meeting their milestones?

Remember, we measure milestones by time period instead of exact date. Some milestones will take longer to develop. For example, walking up steps may take longer than pulling to standing. If you are worried about your baby's growth and development, talk to your health care provider.

Can I give my newborn too much attention or spoil them by picking them up when they cry?

Don't worry about giving your newborn too much attention. When you respond to your baby crying, it teaches them that they are safe and loved. Support your baby when they cry by hugging and holding them often. This helps you bond with your baby and helps with their development.



SAFE SLEEP

Every parent wants their baby's sleep to be safe and restful. There are important steps you can take to help your baby sleep safely and lower the risk of sudden infant death syndrome (SIDS)

IMPORTANT FACTS

Babies who always sleep on their backs have a lower risk of SIDS.

It is important to make sure that you always place your baby on their back for every sleep, including naps. Never use sleep positioners or rolled up blankets to keep your baby on their back. This increases your baby's risk of suffocation. Even babies who spit up a lot are safer sleeping on their backs. Healthy babies will naturally swallow or cough up fluids.

Once your baby can roll over on their own (usually around 5 months old), you do not need to reposition them if they roll onto their side or tummy while sleeping.

KEY MESSAGE



Parents and caregivers, including grandparents and childcare providers, can help babies stay safe by following safe sleep practices for every sleep. This includes nap time and nighttime at home, in childcare settings and when travelling.

Being smoke-free before and after birth decreases your baby's risk of SIDS.

Not smoking at all is best for your baby. Reducing how much you smoke can also lower the risk of SIDS. Don't let anyone smoke cigarettes, cigars or cannabis, or vape around your baby.

Breastfeeding your baby lowers their risk of SIDS.

There are many reasons to breastfeed. One important reason is that breastfeeding can help protect your baby from SIDS. If you breastfeed your baby for at least 2 months, you can lower their risk of SIDS by about half. The longer you can breastfeed, the more protection your baby will have. Breastfeeding is the only food or drink your baby needs for the first 6 months. Many babies continue to breastfeed through their toddler years.

The safest place for your baby to sleep or nap is in a crib, cradle or bassinet, including a bassinet attachment for a playpen.

A safe infant sleep surface has:

- a firm, flat mattress with a tightly fitted sheet
- no gaps between the mattress and sides
- no loose, soft items like blankets, quilts, pillows, bumper pads, mattress toppers, sleep positioners or toys

Avoid older cribs, drop-side cribs and inclined sleeping products.

Do not use drop-side cribs or cribs made before 1986. Avoid cribs that are more than 10 years old. These are more likely to have broken, worn, loose or missing parts. Do not use any product that does not have a flat sleep surface. Examples include inclined sleepers, baby hammocks and crib wedges (even for babies who spit up a lot). These products can cause your baby to move into a position where they cannot breathe.

Highchairs, baby swings, bouncers, strollers and car seats are not made for sleep.

Sleeping in a sitting position can cause your baby's head to fall forward, making it hard or impossible to breathe. This is especially important for younger babies. If your baby falls asleep in a highchair, bouncer or swing, move them to a crib, cradle or bassinet.

If your baby falls asleep while travelling in a car seat or stroller, it is important to move them to a crib, cradle or bassinet once you reach your destination. Take off your baby's snowsuit, raincoat, jacket and other outerwear before moving your baby to a safe sleep space to prevent overheating and suffocation.



Dress your baby safely for sleeping

- Overheating increases your baby's risk of SIDS. Keep your baby's room at a comfortable temperature. If it is comfortable for you, it will be good for them.
- Your baby is safest when sleeping in fitted sleepwear. They don't need a hat. It can make them too hot.
- Babies don't need blankets for sleep. When babies move their arms and legs, the blanket can cover their head. This can cause them to overheat or suffocate. If you use a blanket for your baby, make sure it is thin and lightweight.
- If you use a sleep sack, make sure it is the right size for your baby. Your baby may slip down inside a sleep sack that is too big. This can cause them to overheat or suffocate. A sleep sack that is too small can restrict your baby's movements.
- Check sleepwear and sleep sacks regularly. Check for loose buttons, snaps and zipper pulls. These can cause your baby to choke. Loose threads can wrap around your baby's arms, legs or neck and cause injury.

Lower your baby's risk of SIDS by sharing a room with them.

The risk of SIDS is the highest in the first 6 months. If possible, place your baby to sleep in a crib, cradle or bassinet in the same room with you. This also makes it easier to breastfeed and check on your baby at night. Room sharing is not the same bed sharing. Bed sharing is when a baby sleeps on the same sleep surface (bed, armchair or sofa) with another person. Bed sharing increases a baby's risk of SIDS and suffocation.



What are the risks of bed sharing?

Some parents plan to bed share. Others end up bed sharing with their baby, even though it was not planned. Bed sharing increases your baby's risk of SIDS and suffocation. It is important to understand the risks and know the situations that make bed sharing especially unsafe for babies, so you can avoid them. Your baby is at greater risk when bed sharing if:

- they are less than 4 months old
- they were born pre-term or with low birthweight
- the person bed sharing with the baby has taken alcohol or drugs, or medication that makes them tired
- the person smoked during pregnancy
- the person bed sharing with the baby is a smoker or there is smoking in the household
- the sleep surface is soft sleeping with your baby on a sofa, armchair, air mattress, waterbed or bed with a mattress topper
- more than one other person (or a pet) is bed sharing with the baby
- loose bedding, pillows, blankets and other objects are near the baby



If you bed share, be sure to follow all the safe sleep steps:

- always put your baby on their back
- make sure the sleep surface is firm and flat, with no gaps where your baby can get trapped
- keep soft, loose bedding, pillows and other objects well away from your baby
- dress your baby so they do not overheat

Are products like baby nests, nursing pillows and bedside sleepers safe?

Baby nests or pods (small, portable pads with soft, padded sides) and other soft products like nursing pillows should never be used for sleep. They increase your baby's risk of suffocation. These products don't keep your baby safe when bed sharing and should not be used on an adult bed.

Bedside sleepers that attach to an adult bed are not recommended. Babies can get trapped in the space between the bed and the bed-side sleeper.

How do I give my baby a safe sleep space while travelling or away from home?

It is important to give your baby a safe place to sleep for every sleep. If your baby sleeps away from home:

- make sure your baby continues to sleep on a firm, flat surface that is free of soft bedding
- place your baby to sleep in a crib, cradle or bassinet, if possible
- place your baby's sleeping area away from hazards like windows, blind cords, patio doors, lamps, candles, electrical cords and small objects
- only use a bassinet attachment for your playpen as a sleep option until your baby starts rolling over or reaches the attachment's weight limit - whichever come first

Playpens are not recommended for unsupervised sleep because they are not as durable and as safe as cribs. If you use a playpen for your baby to sleep in while travelling:

- be sure to set it up according to the manufacturer's instructions
- never add an extra mattress or padding
- keep it free of soft items, bedding and toys while your baby is sleeping
- don't place your baby to sleep on a change table attachment for a playpen.



BONDING AND EMOTIONAL HEALTH

Your baby is growing and developing very quickly, both physically and emotionally. They are developing the ability to form close relationships (attachment), manage and express their emotions and explore their environment. This is all part of their emotional health.

IMPORTANT FACTS

The foundation for attachment and emotional health starts early in life.

Your baby's relationships with you and other caregivers are very important to their emotional health. This is known as attachment, or the deep emotional bond between your baby, their parents and caregivers. Attachment influences your baby's lifelong physical and emotional health. As babies grow and explore the world around them, they form attachments. They also learn about social interactions and relationships and take in information through their five senses.

KEY MESSAGE



As a parent, one of the most important things you can do is to build attachment with your baby by responding to their needs. Caring for your baby in a nurturing, responsive way affects their brain development and ultimately improves their emotional health.

Your baby's brain develops rapidly.

Your baby's brain is not fully developed at birth. It continues to actively change and develop in response to their experiences and environment. How your baby's brain develops will affect many things, such as their ability to learn, solve problems and get along with others. It impacts their future physical and emotional health.

Positive experiences help your baby's brain develop and protect them from stress.

Your baby's day-to-day experiences help their brain to develop. These experiences also help your baby to form an attachment with you and other caregivers. Loving, consistent, positive relationships help build healthy brains. This protects your baby's brain from the negative effects of stress.

COMMON QUESTIONS ?

What can I do to build attachment?

Attachment usually happens naturally as you go about your daily routine and care for your baby. When your baby cries, try to respond to what they need by feeding, cuddling or changing their diaper. Always respond to your baby in a warm, sensitive and loving way. This helps your baby feel safe and secure. It also lets them know they can trust and depend on you. It gives them confidence to explore and learn about their world.

What can I do to help develop my baby's brain?

- · Talk to your baby as you care for them throughout the day. Point out interesting things and explain what is happening around them
- Read and sing to your baby
- Play simple games like tummy time or peek-a-boo
- Make eye contact, smile and enjoy skin-to-skin contact during feeding
- Provide a safe environment for your baby to be free to explore as they grow and become more active



SAFETY

Having a new baby involves shopping for new products like strollers, playpens and toys. You may receive used products from friends and family. Whether your baby products are new or used, make sure they are safe for your baby.

IMPORTANT FACTS

The only safe place to leave a baby unsupervised is in a crib, cradle or bassinet.

The safest place for a baby to sleep is alone in a crib, cradle or bassinet, including a bassinet attachment for a playpen.

- Bassinet: A bassinet (including a bassinet attachment for a playpen) is a safe place for a baby to sleep until they can roll over or they reach the manufacturer's recommended weight limit
- Cradle: A cradle is a safe place for a baby to sleep until they can push up on their hands and knees or they reach the manufacturer's recommended weight limit
- **Crib:** Use a crib until your child can climb out on their own or they are taller than 90 cm

KEY MESSAGE



To protect your baby's safety, read and follow all instructions for each product you use. Inspect your baby products regularly. Make sure they are clean and in good condition. Check for product recalls. The only safe place to leave your baby unsupervised is in a crib, cradle or bassinet.

Make bath time safe.

Always stay with your baby while they are bathing. Never leave your child unsupervised while in the tub.

Baby bath seats are not recommended because there is a risk of drowning. Babies can climb or slip out of the bath seat. Also, suction cups can come loose and the seat can tip over.

Make sure the temperature of the hot water from the tap is no more than 49°C (120°F). If possible, set your hot water heater thermostat at 49°C (120°F) or lower. Turn on the cold water before the hot water when filling the tub. When you are finished filling the tub, turn off the hot water first, then the cold water. Test the water before placing your baby in the tub.

Keep your baby safe while travelling in a vehicle.

Infants and young children travelling in a car should face the rear of the vehicle. Riding rear-facing in an infant car seat with a detachable base or in a convertible seat helps protect your baby's head, neck and back while the vehicle is moving, during sudden stops or in a crash.

Each province and territory may have its own age, height and weight restrictions for car seats. Consult your province/ territory's website for more information as you choose the right car seat for your baby and as they grow older. Remember to:

- Follow the manufacturer's instructions when installing a car seat
- Make sure your baby is properly secured each time you put them in the car seat
- Be sure your car seat has a National Safety Mark (this shows that it meets current Canada motor vehicle safety standards)
- Check with the car seat manufacturer for the expiry date (an expiry date is not regulated or required by Transport Canada)

Keep your baby away from cords on window coverings, baby monitors or lamps.

Do not leave blind or curtain cords hanging. These can strangle your baby. Remember to:

- Always keep cords high and out of your baby's reach
- Consider using only cordless window coverings, especially in children's bedrooms and playrooms
- Keep your baby away from electrical cords to prevent strangulation and the risk of shock
- When your baby is visiting or being cared for in another home, look for hazards that could strangle them
- Talk to your family, friends and your baby's caregivers about using cordless window coverings and keeping all cords out of your baby's reach

Prevent your baby from falling off the change table.

It only takes a moment for your baby to roll over and fall off the change table. To limit the risk of falls, use a changing pad on the floor instead of a change table.

If you use a change table:

- Choose a table with safety straps and use them each time your baby is on the change table
- Take your baby with you if you need to leave the room for any reason

If you use a playpen with change table attachment:

Check that the change table is stable when attached to the playpen

Regularly check pacifiers, bottle nipples and toys to avoid choking hazards.

Babies and young children can choke on damaged pacifiers and bottle nipples, or small toys.

- Pacifier: Inspect it daily. Check the nipple for changes in texture, tears or holes. Check that the nipple and any ring or handle remains firmly attached when it is pulled forcefully.
- Baby bottle: Regularly inspect nipples carefully. Make sure they are in good condition and are not damaged or worn.
- Toys: Make sure they are suitable for your baby's age. Read and follow all warnings, safety messages and instructions. Keep all small toys, balls and loose parts out of sight and reach from children under 3 years of age, or older children who still put toys in their mouths.

Throw away any pacifier, bottle nipple or toy showing signs of wear or damage.

Protect your baby from suffocating while being carried in a baby carrier or sling.

Use baby carriers and slings carefully. Follow the manufacturer's instructions. Make sure nothing is blocking the baby's nose or mouth. Make sure their chin is away from their chest.



COMMON QUESTIONS ?

How can I check the safety of my baby products?

Visit Canada.ca and search:

- "Recalls and Safety Alerts" Check for product recalls on the make and model of any product. If a product recall has been published, it will be displayed in the search results.
- "Consumer Product Safety Newsletter" Sign up to receive recall alerts and advisories when they are posted.
- "Safety alerts and notices for child car seats" Transport Canada provides the latest safety information on car seats.

Follow Health Canada's Twitter, Facebook, LinkedIn and Instagram – Get the latest safety tips and notices on recalled products.

How can I check the safety of second-hand products?

Check for recalls before buying or using a second-hand product. Carefully inspect your second-hand baby products on a regular basis. Before you use a second-hand product, make sure:

- it is in good condition with no broken parts
- its labels are attached and readable
- its safety features are working
- it comes with warnings and instructions

Health Canada does not recommend using cribs older than 10 years. Older cribs are more likely to have broken, worn, loose or missing parts and to be missing warnings or instructions. Certain baby products, such as infant self-feeding devices and baby walkers, are illegal to sell or give away in Canada.

What should I do if I think a baby product is unsafe?

It is important to report injuries and other product-related health and safety concerns so Health Canada can make important safety decisions about the products you use. You can report a health or safety-related issue with a consumer product to Health Canada. Call 1-866-662-0666 toll free or report an incident online at Canada.ca search report an incident involving a consumer product.





FAMILY HEALTH

There are all types of parents: opposite sex, single, divorced, same sex, stepparents and blended families. Postpartum health includes the entire family. When everyone in a family takes care of their health, it will help to promote the healthy growth and development of your baby and make your family's transition with the new baby easier. This includes supporting partners as they adjust to being a first-time parent, helping children and step siblings welcome a new baby, and learning about parenting.



PARTNER HEALTH

It is important to be involved and take an active role in nurturing and taking care of your baby. Parenting can bring a lot of joy, but it can also be a challenge. Your experience as a father/partner will be unique.

IMPORTANT FACTS

Birth brings changes.

The birth of your baby can bring challenges to your life. You may experience:

- loss of sleep
- a change in your role in the family
- an increased need for care and attention from your partner
- an inability to do everything you would like to do
- financial strain

Talk to your partner, family and friends about how you feel about these changes. If you feel you are not coping well, reach out for help and support from your health care provider, community or online groups.

KEY MESSAGE



Being a new parent can be tough. To be the best parent you can be, spend time getting to know your baby. Learn how to look after them and find ways to play together. Make sure you look after your own emotional and physical health.



Being active and present while taking care of your newborn has benefits - now and for life.

Holding your baby skin-to-skin soon after birth will help you bond and increase your confidence as a parent. It will also help decrease anxiety and stress in you and your baby. The first few days can be a tough transition. Try to continue having skin-to-skin contact over the first days and weeks to help your baby get used to being in the world. Focus on your baby's basic needs. Feed and soothe them, change their diapers, put them to sleep and keep them safe.

Partners can get postpartum depression too.

Postpartum depression is the medical term for depression after the birth of a child. It can affect any new parent, including partners and adoptive parents. It is easy for new parents to neglect their own needs. You may not get enough sleep, eat well or get enough social support. This can contribute to postpartum depression.

If left untreated, postpartum depression can impact your ability to care for your partner and your baby. It can also lead to chronic (or long lasting) episodes of depression. If you think you are depressed, it is important to get the help you need.

Learn to recognize the signs of depression:

- feeling like you can't get out of bed
- feeling sad, worthless, anxious or guilty
- crying more than usual
- having trouble concentrating
- feeling irritable or numb
- experiencing frequent mood swings
- feeling very tired or restless
- sleeping more or less than usual
- eating more or less than usual
- losing interest in things you used to care about
- having nightmares or scary thoughts
- having thoughts of death or suicide (wanting to escape, wishing you were not alive anymore, or thinking or planning how you could end your life)

There are things you can do if you feel depressed.

If something is bothering you, talk to your partner, friend, family member, health care provider or someone you trust. Joining a peer support group for fathers, partners or adoptive parents can be helpful as they can relate to your situation.

Talk to your health care provider if you think you may be depressed. Be honest about your feelings. Your health care provider may offer treatment options like counselling or medication.

It is normal to feel like you don't know what you are doing at first.

All new parents need time to adjust and feel comfortable in their new roles. Each day, you will get to know your baby better and learn how to do things with them. The more time you spend with your baby, the more you will learn. Talk to other fathers/partners about how they coped during the first few days and weeks with their new baby. Reach out to community supports for fathers/partners. Government organizations, your local public health unit or community groups offer credible information that can help you gain confidence.

TIPS TO TAKE CARE OF YOUR HEALTH

- Make time for yourself and do things you enjoy
- Talk to people who have been through a similar situation
- Try to eat well
- Get enough sleep
- Ask for help when you need it or when you feel overwhelmed

Where can I find support in my community?

There are many places that offer support, depending on where you live. Start by looking up your local public health unit to see if they offer information or programs for fathers/partners. There may be community organizations that offer father/partner support groups or classes. If you prefer online support, look for information on credible websites, including your provincial or territorial health department, or your local public health unit.

For more information on supports available, see page 87.

I did not grow up around babies and young children. How do I care for my newborn?

Many people have not grown up with babies or young children in their lives. It will take time for you to learn about your role as a parent and how to care for your baby. Be patient with yourself and your partner. Read, watch videos or look for classes in your community on how to care for a newborn.

My partner is breastfeeding. What can I do to help?

Breastfeeding can be difficult and sometimes stressful. Your support and help are a big part of successful breastfeeding.

TIPS TO SUPPORT YOUR PARTNER

- Bring the baby to your partner when it is time to breastfeed
- Burp and cuddle the baby after feeding
- Bring a glass of water or snack to your partner while they are feeding the baby
- Change diapers before and after feeding
- Reassure and encourage your partner
- Talk to each other about shopping, cooking meals, taking care of siblings, laundry and cleaning

What can I do if think my partner has postpartum depression?

After giving birth, your partner may experience mood swings, or the "baby blues." They may feel happy one moment and start crying the next. They may feel angry, irritable or discouraged. These mood swings are partly due to hormone changes after birth and usually go away on their own within a few weeks.

Sometimes these symptoms don't go away, and they can develop postpartum depression. There are some factors that may put them at higher risk of developing postpartum depression. These include:

- a history of depression
- depression during or after a previous pregnancy
- little social support
- a lack of support from partners
- stressful life events such as domestic violence, sick child or traumatic birth experience

If your partner has postpartum depression, it can add strain to your relationship and impact your family. Support your partner and get help from your health care provider if you have concerns.





PARENTING

Having a baby can be one of the most exciting times in your life. At the same time, it can be overwhelming. Being a parent is physically and emotionally demanding. Many things will influence your parenting choices, including your childhood, experience with children, values, culture and beliefs.

IMPORTANT FACTS

Taking care of your new baby can be hard.

Many new parents feel anxious about taking care of their baby when they first bring them home. You will become more comfortable and confident as you care for your baby. Spend time cuddling, holding and comforting them. Sing, talk and tell stories to your baby. It develops their brain and helps you bond.

Ask for help if you feel you are struggling. Ask family and friends to help with the baby or with household chores, shopping or meals. Remember to take time for yourself. Try to do activities you enjoyed before your baby was born.

KEY MESSAGE



Parenting a new baby is wonderful, but some days can be hard or even overwhelming. Talk to your partner, family members or other parents. This will help you get through new challenges and find your own parenting style. Remember, no parent is perfect. You will learn as you go.

It also helps to connect with other new parents. Sharing your experiences can be reassuring as you realize other parents feel the same way. Reach out to community resources like your local public health department and communitybased baby and parenting programs.

For more information on supports available, see page 87.

Your relationship with your partner may change

If you have a partner, the new challenges that come with a baby will change your relationship – especially if this is your first child. Because taking care of a baby takes so much time, it can be hard to find time for each other. It helps to work as a team. Share your baby's care. You will learn new things together.

Your natural instincts may make you feel that you need to take care of your baby's needs on your own. Talk openly with your partner about how you feel, what you need and how you can both help take care of your baby. If you find it difficult to spend time together, schedule it. It is important to stay connected.

Taking care of a new baby as a single parent is demanding.

If you are a single parent, it is important to look for support. Reach out to your family, friends and community to watch your baby while you sleep, do errands and household chores, or prepare meals. They can also provide emotional support and friendship or much-needed company. It is a good idea to plan ahead in case you need emergency help or childcare.

You can find support online as well. Connect with other single parents through community or online groups.

Some babies go through a period when they cry a lot.

Many babies go through a period when they cry more. This usually starts a few weeks after birth and can last up to 3 to 4 months.

During this period, your baby may not respond to the typical methods that usually stop their crying. Nothing seems to soothe them, and they cry hard for a long time. This is known as colic. It is not known what causes colic. There is not strong evidence that the colic is caused by gas or food allergies. Newer research shows colic is a normal part of your baby's development. It is not caused by anything you are doing wrong. Some babies will naturally cry more and have trouble soothing themselves.

When your baby is crying, try different approaches to soothe them. What worked the last time may not work every time.

Talk to your health care provider before giving any medications or supplements to your baby for colic.

It can be stressful when babies cry a lot, and nothing seems to soothe them. It is normal to get frustrated. Never shake your baby. If you feel you are losing your temper, put the baby down in a safe place, like their crib, so you can leave the room and calm down.

Remember that colic is temporary. It is not caused by something you are doing wrong. It you are having a hard time coping, reach out to family or friends. They can help care for your baby so you can take a break, get some sleep, exercise or do an activity you enjoy.

TIPS TO SOOTHE YOUR BABY

- Change their diaper
- Feed them
- Snuggle them on your chest, hold them skin-to-skin and rock them
- Play soft music or sing and hum quietly
- Feel their skin to see if they are too hot or cold
- Turn off the lights and keep the room quiet
- Swaddle them
- Create white noise by running a fan, vacuum or dryer
- Place them in a baby swing
- Walk with them in a baby sling or stroller
- Go for a ride in the car
- Give them a bath

Where can I find parenting support and information?

There are many resources to help new parents, like books and websites. Make sure you get your information from credible, trustworthy sites.

How to find credible and trustworthy resources online:

- · Government websites, including Canada.ca, your provincial or territorial websites, or local public health websites
- Trusted professional and medical organizations, like the Canadian Pediatric Society, children's hospital websites and health organizations

For more information on supports available, see page 87.

If you prefer in-person support, look for programs offered by organizations in your community, your local public health unit, or your provincial or territorial health department. If you are not sure where to find help, ask your health care provider.

How will I know how to care for my baby?

There is a lot to learn as a new parent. Start with what you need to know in the moment, like feeding, diapering, sleep, hygiene and safety. Once you feel more comfortable in your new role, you can start to think about longerterm parenting goals and learning in advance about your baby's next stages of growth and development. By thinking ahead, it will help you feel more prepared as your baby grows and develops.

How do I help my other children adjust to the new baby?

Older siblings respond to a new baby in different ways. It is a big change for them at any age. Although you prepared older siblings during your pregnancy, keep talking to them about the baby after the birth. Some siblings get jealous. Others may regress in their development, such as start wetting the bed again or return to sucking their thumb. Be patient. Give them lots of love and affection to help them adjust. Keep their routine as normal as possible and include them in taking care of the new baby. Make a point of spending one-on-one time with them doing things they enjoy.



FAMILY VIOLENCE

In the weeks and months after giving birth, there is an increased risk of family violence. This can lead to children being exposed to family violence. If you are in this situation, you may find it hard to tell someone. You may feel alone and afraid for yourself or your children. If you experience violence in your relationship with your partner or your family, reach out for help. Everyone deserves to feel safe.

IMPORTANT FACTS

There is an increased risk of family violence after giving birth.

Family violence is any form of abuse that a person experiences from an intimate partner or family member. It is an abuse of power when someone hurts and controls a person who trusts or depends on them. Violence can be physical, emotional, financial, sexual or verbal. In some cases, you may be threatened or forced to do something you don't want to do. If you were living with violence while you were pregnant, it may continue after your baby is born. It may get worse or happen more often than before.

KEY MESSAGE



You deserve respect in a healthy and loving relationship. No one has the right to abuse you. If you experience any type of abuse, reach out for help. It is not your fault.

Violence during this period can have many harmful impacts.

Violence can negatively affect your emotional and physical health. It could lead to:

- anxiety
- depression
- post-traumatic stress
- sleep difficulties (insomnia)
- poor overall health
- loss of confidence
- chronic headaches, back pain, abdominal pain
- gastrointestinal disorders
- eating disorders
- substance use
- self-harm
- suicide attempts
- sexually transmitted infections
- disability
- homicide/murder

Abuse is wrong and it is not your fault.

If you are experiencing violence, you may feel confused, afraid, angry, ashamed or trapped. You may blame yourself or feel responsible for what happened to your relationship. These are normal feelings; the abuse is not your fault. Family violence is wrong and there is no excuse for it.

You are not alone.

Family violence happens in all kinds of families. It affects many people, no matter what the age, profession, location, income level or education. It happens to people of all backgrounds, cultures, races, religions, gender identities and sexual orientations.

Am I experiencing violence?

Family violence can take many forms:

- Physical abuse is when someone threatens you or uses physical force against you or your children.
- Neglect happens when someone prevents you from meeting your basic needs or those of your children, like food, shelter and clothing.
- Sexual violence involves sexual activity without consent, including any sexual activity with a child.
- Emotional (psychological) abuse includes using words or actions to scare you or make you feel badly. It is used to control you by deciding what you can do, where you can go, what you can wear and who you can spend time with.
- Financial abuse includes controlling or misusing your money, belongings or property. It can include taking your money without permission, holding back or controlling money, or not letting you work.

What can I do if I am experiencing violence?

If you are living with violence, reach out to family members or a trusted friend. There are crisis lines, shelters, hospitals and other support services available. Counsellors, social workers, police and lawyers can help you plan for safety and find supports for you and your family.

Where to get immediate help:

- If your life or someone else's life is in danger call 911
- Women's Shelters Canada sheltersafe.ca
- Assaulted Women's Helpline call 1-866-863-0511 or #SAFE (#7233) on Bell, Rogers, Fido or Telus mobile phones



PREGNANCY AND INFANT LOSS

If you have lost your baby, this is a deeply sad time for you, your partner and your family. If you have experienced a miscarriage, stillbirth, interrupted or terminated pregnancy, or infant death, you may need help. People respond and grieve differently after these experiences. It is important to take care of your physical and emotional health during this difficult time. Reach out for support.



IMPORTANT FACTS

People feel different emotions and grieve loss in their own way.

Losing a baby is an extremely personal experience. Each person is unique and grieves in their own way. They express the many emotions that accompany their grief differently. Common feelings include:

- anger
- anxiety
- blame
- denial
- disbelief
- quilt
- numbness
- sadness

If you experience any of these feelings, you are not alone. The emotional pain you may feel will change over time. Some days, you may be able to cope. Other times, your grief may come back strong. These feelings are normal.

Take care of your physical and emotional health.

The care you need will depend on when you experienced the loss. For example, if you experienced a miscarriage at home versus a stillbirth in hospital, the follow up care you need will be different. It will also depend on whether you received that care in a clinic, doctor's office, emergency room or birthing unit. Talk to your health care provider about your physical symptoms, including any bleeding and pain. It is also important to talk to them about how you are coping emotionally.

Getting support is important. There are many places to find support in your community to share your feelings and to process your emotions. Talk to family and friends, look for support groups in your community or online, or talk to an elder, or community or religious leader.

Where can I get help to cope with my loss?

Talk to your partner, family and friends. You may want to seek out a professional for help. Reach out to a health care provider, psychologist or social worker who specializes in pregnancy or infant loss and grief. There may be support in your community – search online for support groups or peer support. If you find help online, be sure it is offered by a credible organization.

My partner and I are grieving differently. How do we manage our relationship?

People go through grief in different ways. You may feel sad, while your partner feels anger. This can cause stress in a relationship. It is important to share your feelings with your partner and encourage them to talk to you. It can be helpful to connect with a peer support group or talk to a mental health professional regarding your relationship.

How soon after a loss can we try to have another baby?

Getting pregnant again after a loss can bring a mix of excitement, stress, anxiety and fear. When you are able to start trying again depends on the circumstances of your loss, such as how far along you were in your pregnancy. Your health care provider can advise you on when it is safe to start trying again. They will let you know what kind of care you may expect with a future pregnancy.

KEY MESSAGE



Experiencing the loss of a baby during pregnancy or after birth is a difficult emotional experience. Everyone grieves differently. If you experience a loss, be open about your feelings and connect with people who can provide support, such as family, friends, community or religious leaders and health care providers.





HELPFUL SUPPORTS AND RESOURCES

FOR EMERGENCY OR IMMEDIATE HELP

• If your life or someone else's life is in danger - call 911

Abuse/violence:

- Women's Shelters Canada: sheltersafe.ca
- Assaulted Women's Helpline: 1-866-863-0511 or #SAFE (#7233) on Bell, Rogers, Fido or Telus mobile phone

Mental health:

- If you or someone you know is thinking about suicide, call the Canada Suicide Prevention Service at 1-833-456-4566 (24 hours a day, 7 days a week), text 45645 (4pm – 12am ET), or visit crisisservicescanada.ca for the distress centres and crisis organizations nearest you.
- Wellness Together Canada: wellnesstogether.ca (24 hours a day, 7 days a week)
- Canadian Mental Health Association: cmha.ca
- First Nations and Inuit Hope for Wellness Help Line: 1-855-242-3310 (24 hours a day, 7 days a week)

COMMUNITY SUPPORTS AND SERVICES

Supports for families are available from all levels of government in Canada. What support is available will depend on where you live. Provinces and territories deliver programming and supports for families. Consult your provincial or territorial health department website for information. Also, most areas of Canada are serviced by a local/ municipal public health unit, which can be a great source of information and support. Public health units often provide many programs and services targeted to families. Contact your local public health unit to learn about the resources in your community that are available for families.

Alberta

- Visit Alberta.ca and search:
 - Family resource networks
- Visit Albertahealthservices.ca and search:
 - Breastfeeding support services

British Columbia

- Visit gov.bc.ca and search:
 - Find a StrongStart BC program
- Visit healthyfamiliesbc.ca and search:
 - Healthy Start Public Health Services

Manitoba

- Visit gov.mb.ca and search:
 - Child and youth programs

New Brunswick

- Visit horizonnb.ca and search:
 - Healthy Families, Healthy Babies
- Visit gnb.ca and search:
 - Breastfeeding support services

Newfoundland and Labrador

- Visit gov.nl.ca and search:
 - Parent and child health programs
- Visit babyfriendlynl.ca and search:
 - Breastfeeding support

Northwest Territories

- Visit nthssa.ca and search:
 - Healthy Family Program
- Visit hss.gov.nt.ca and search:
 - Breastfeeding support

Nova Scotia

- Visit novascotia.ca and search:
 - Healthy Beginnings: Enhanced home visiting
- Find your public health office at nshealth.ca/public-health-offices and look for:
 - Breastfeeding support

Nunavut

- Visit gov.nu.ca and search the health facilities map for:
 - Public Health pre- and postnatal clinics

Ontario

- Visit Ontario.ca and search:
 - Healthy Babies, Healthy Children Program
 - EarlyON Child and Family Centres

Prince Edward Island

- Visit princeedwardisland.ca and search:
 - Public health nursing for families
 - Breastfeeding drop-in clinic

Quebec

- Visit rcrpq.com to find:
 - a local Réseau des CRP du Québec
- Visit sante.gouv.qc.ca/en and search:
 - CLSC
- Visit quebec.ca/en and search:
 - Breastfeeding support

Saskatchewan

- Visit saskatchewan.ca and search:
 - Community programs for families with young children

Yukon

- Visit yukon.ca and search:
 - Babies' and children's health programs
 - Breastfeeding support



Community Action Program for Children (CAPC)

The Community Action Program for Children (CAPC) is a federally funded community-based program available across Canada that promotes the healthy development of vulnerable children from birth to age 6. CAPC programs may include nutrition support and collective kitchens, family resource centres, parenting classes and drop-in groups, child health and development activities, outreach and home visiting programs, and specialized programs, such as support for substance use.

For more information or to find if there is a CAPC project near you, visit Canada.ca and search "Community Action Program for Children".

RESOURCES

Some provinces and territories have dedicated webpages offering postpartum and newborn health information. You can also check if your local/municipal public health unit provides information on postpartum and newborn health.

PROVINCIAL AND TERRITORIAL RESOURCES

Alberta

Visit healthyparentshealthychildren.ca

British Columbia

- Visit healthlinkbc.ca and search:
 - Baby's best chance

Manitoba

- Visit gov.mb.ca and search:
 - Baby friendly Manitoba: Information for parents

New Brunswick

- Visit gnb.ca and search:
 - Healthy pregnancy and early childhood

Nova Scotia

- Visit nshealth.ca and search:
 - Loving care
 - Breastfeeding basics

Nunavut

- Visit livehealthy.gov.nu.ca and search:
 - New parents

Ontario

Visit OMama.com

Quebec

- Visit inspg.gc.ca and search:
 - From tiny tot to toddler guide

Saskatchewan

Visit momsandkidssask. saskhealthauthority.ca



HELPFUL RESOURCES

Breastfeeding

- Visit Canada.ca and search:
 - 10 great reasons to breastfeed your baby
 - 10 valuable tips for successful breastfeeding
 - Infant nutrition
 - Breastfeeding your baby

COVID-19

- Visit Canada.ca and search:
 - COVID-19: Pregnancy, childbirth and caring for a newborn

Dad and partner health

- Visit Canada.ca and search:
 - Nobody's perfect tip sheets for fathers
- Dad Central: dadcentral.ca

Emotional health and attachment

- Visit Canada.ca and search:
 - Nobody's perfect parenting tip sheets
- Caring for Kids: caringforkids.cps.ca
- Wellness Together Canada: wellnesstogether.ca
- Canadian Mental Health Association: cmha.ca
- Postpartum Support International: postpartum.net

Financial help and benefits

- Visit Canada.ca and search:
 - Family and caregiving benefits

Newborn care and development

- Canadian Paediatric Society -Caring for kids: caringforkids.cps.ca
- Visit Canada.ca and search:
 - Nobody's perfect parenting tip sheets

Nutrition

- Visit Canada.ca and search:
 - Healthy eating when pregnant and breastfeeding
 - Canada's food guide
 - Mercury in fish

Physical activity

- Visit Canada.ca and search:
 - Physical activity and your health
- Canadian Society for Exercise Physiology
 - Canadian 24-hour Movement Guidelines for Adults 18-64 years: csepguidelines.ca/ adults-18-64/

Pregnancy and infant loss

- Baby's Breath: babysbreathcanada.ca
- Pregnancy and Infant Loss Network: pailnetwork.sunnybrook.ca

Safe sleep

- Visit Canada.ca and search:
 - Safe sleep for your baby
 - Is your child safe sleep time
 - Children's sleepwear
 - Cribs, cradles and bassinets

Safety

- Visit Canada ca and search:
 - Is your child safe?
 - Child car seat safety
 - Baby sling and carrier safety
 - Bath safety
 - Bottles, pacifiers and teething necklaces
 - Change tables
 - High chairs
 - Playpens
 - Safety gates
 - Stroller and carriage safety
 - Suspended baby jumpers

Sexual health

- The Society of Obstetricians and Gynaecologists of Canada
 - Sex & U: sexandu.ca
 - Pregnancy info: PregnancyInfo.ca

Substance use (cannabis, alcohol, smoking)

- Visit Canada.ca and search:
 - Get help with problematic substance abuse
 - Quitting smoking or call 1-866-366-3667
 - Thinking about using cannabis while parenting?
- Canada's Low-Risk Alcohol Drinking Guidelines: ccsa.ca
- Canada's Lower-Risk Cannabis Use Guidelines: camh.ca
- Canadian Centre on Substance Abuse and Addiction: ccsa.ca
- The Society of Obstetricians and Gynaecologists of Canada: PregnancyInfo.ca
- BC Centre of Excellence for Women's Health
 - Women and cannabis: bccewh.bc.ca

Vaccinations

- Visit Canada.ca and search:
 - A parent's guide to vaccination
 - Pregnancy and vaccines
- Immunize Canada: immunize.ca

Violence

- Visit Canada.ca and search:
 - Stop family violence
 - How to plan for your safety
 - Abuse is wrong
- Women's Shelters Canada: sheltersafe.ca
- Crisis Services Canada: crisisservicescanada.ca

