

Pregnancy Stories

A Guide for Expecting Inuit Moms and Dads



Pregnancy stories:

A Guide for Expecting Inuit Moms and Dads

Welcome! This resource provides information in two streams: one for mothers-to-be (in 40 weekly pages), and one for fathers-to-be (in 9 monthly pages). These streams will help you learn more about the enormous joy and responsibility of pregnancy. In the pages to come, you will find information about the baby's development, health and wellbeing tips, information about what to expect through the health care system (for instance, roles of a midwife, and what medical tests you'll have, and why), as well as information from a traditional perspective. This can be read online, or if you prefer, the pages can be printed at your convenience.

A family's knowledge about these aspects of pregnancy will empower the expecting mom and dad to choose actions that will encourage a healthy and well pregnancy for them, and for that growing baby.

Read about the joyous, challenging, and sometimes humorous milestones to come through the experiences of these characters.



Jean and Jack: Jean and Jack have a five year old daughter, Paisley, and have struggled to get pregnant again. Jean has had many miscarriages, and wants to get her weight under control so that this pregnancy will be as healthy as possible. Jack is a wonderful husband and father, but even so, Jean still finds herself up at night worrying about her and her family's wellbeing. She's from a smaller community and moved to Iqaluit because of her husband's work after their daughter was born. The city seems overwhelmingly big at times, yet there doesn't seem to be anyone Jean can talk to. Jean is tempted to take comfort in alcohol when she starts to feel lonely.



Grace and Alex: Grace is a 15 year old who gets pregnant after her 'first time'. The relationship was getting serious but Grace isn't sure if she can rely on much support from Alex. They both still live at home and are trying to get through high school to go into programs at the Arctic College. Grace's social relationships and behaviours are going to have to change now. Up until recently, she would stay out late most nights with friends. She smokes about 15 cigarettes a day, has a few joints a week, and usually gets drunk on Saturday nights. It's really stressful for Grace to think about having to get a more stable job, and having to rely on her family for their support with the baby, not to mention it's already so crowded at home.



Esther and Nick: Esther is in her mid-twenties and just returned from university down south. While in Ottawa, she met Nick, and they eloped after dating for three years. Nick's still finishing school for another 7 months, and won't be moving up to Esther's community until then. Anxious to start a family, Esther became pregnant during their last weekend visit together. During her pregnancy, she's only going to see Nick a couple of times. Thank goodness she is really happy with her midwife and has a few friends and family members she can talk to about their experiences while pregnant.

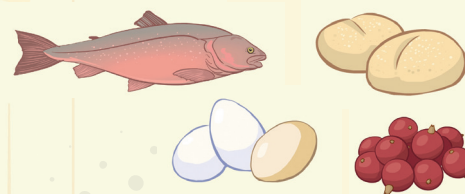
Click here to view the [MOMS-to-be](#) information.

Click here to view the [DADS-to-be](#) information.

If you haven't already, start a vitamin D supplement and a multivitamin every day (one with at least 0.4 mg of folic acid). Folic acid is essential for the normal development of your baby's spine, brain and skull.



Enjoy
a variety of foods
from **each food**
group *every day*



see the Nunavut food guide

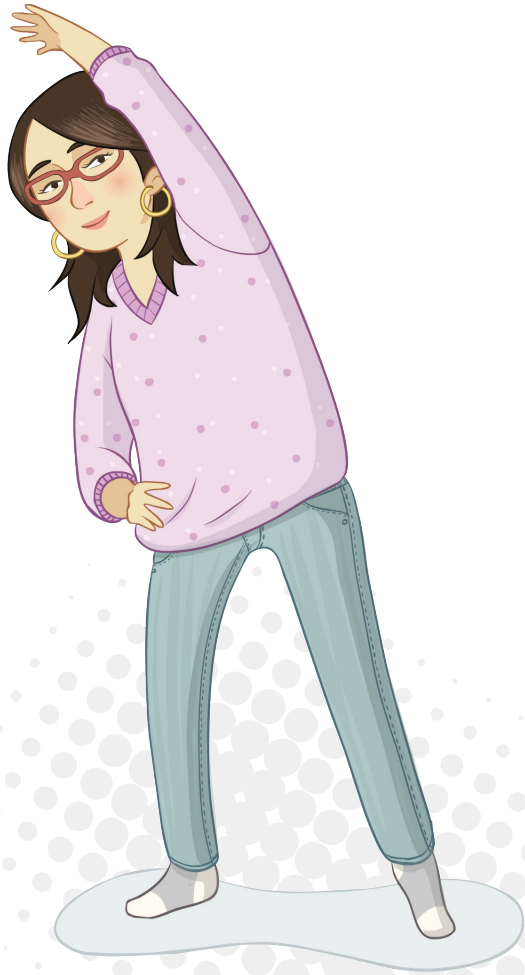
WEEK 1



“[Traditionally,] women were encouraged to eat a variety of foods, especially caribou, char, muktuk, and seal ... and never to eat aged food while pregnant.”
(Suvaguuq, page 8, Volume X, Number 1, 1995)

GENERAL TIP

on physical activity



WEEK 2

Ovulation: One of the ovaries expels a mature egg. This happens about mid-cycle.



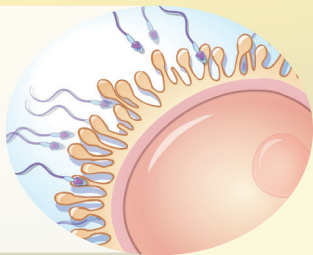
Regular physical activity while you are pregnant is smart and worth it.

It will: help increase your energy levels; promote better sleep; improve your mood and self-image; help ensure appropriate weight gain; help you relax and reduce stress; increase your muscle tone and strength; help build your stamina for labour and delivery; and will speed up your recovery after labour and delivery.



“Traditionally, pregnant women and nursing mothers led a healthy lifestyle with lots of physical activity and a nutritious diet. Pregnant women throughout the north were advised to keep active, beginning with rising early each morning and going immediately outside to “smell the fresh air.” Keeping active was seen as essential to promoting quick labours and ensuring that the placenta did not stick in the womb. However, women were warned not to over-exert themselves, fall, or walk in deep snow.”
(Suvaguuq, page 8, Volume X, Number 1, 1995)

Fertilization: The egg cell is fertilized by a sperm cell. The fertilized egg cell, called an embryo, divides into two cells, four cells, and so on, forming a tight ball.



WEEK 3

Any smoking, drinking alcohol, or taking illegal drugs will harm your baby for his or her life. So stay as healthy as you can for your baby's sake.

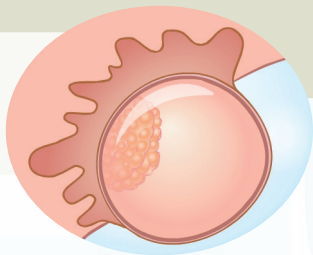


“A pregnant woman should not look outside, but instead go out to look.”

(Traditional responsibilities of women, page 51, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)



Implantation: The embryo implants into the lining of the uterus. Congratulations, you are pregnant!



Morning sickness can cause tooth decay. Vomit can damage the surface of your teeth. While you are pregnant, take extra care to brush your teeth, gums and tongue at least twice a day.



“As soon as a girl woke up, she was to get up immediately, go outside and check the weather (anijaaq). She was told that by doing this, it would ensure quick labour.”

(Traditional responsibilities of girls, page 59, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)



WEEK 4

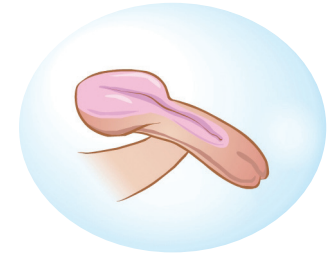
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GENERAL TIP on smoking

Past analyses have shown that more than 80% of women in Nunavut reported smoking during pregnancy. One study showed that non-smokers and women who smoked less than 5 cigarettes a day had perinatal outcomes equal to or better than other Canadians. Smoking during pregnancy increases the chances that your baby will be born premature, have ear infections, breathing problems, among other things.



Embryo is now visible with the naked eye, and the head becomes distinguishable from the body.



WEEK 5



“The midwives understood that it takes more than the body to give birth. It involves the mind and the soul and the midwives knew what to do. The midwives were able to manage emergencies like bleeding. Because the women were always moving constantly they gave birth on the move too. Women were more physically active--today the mothers are less active and their babies are “more solid.” They could measure, using fist width, how far apart a woman’s legs should open to give birth.

Today, women give birth in the hospital, usually lying down on their backs and their labours are prolonged. It was a very hard thing for women to adjust to giving birth in the hospital – it was cold and uncaring.

Women were homesick and used more coffee and cigarettes.”

[Martha Greif, President, Pauktuutit Inuit Women of Canada (meeting notes)]

The embryo now measures the width of your little fingernail, and the brain is growing very rapidly.



WEEK 6



Nowadays, it's not always easy to meet people when you're new to a community. Socializing with alcohol isn't safe for the developing baby, or for you. There is no known safe amount of alcohol to consume while pregnant. Binge drinking, which is having more than 5 alcohol drinks at a time, is particularly dangerous for the developing baby and increases the chance of fetal alcohol spectrum disorder (FASD). FASD cannot be cured. If you need help to stop drinking, you should talk to your community health nurse.

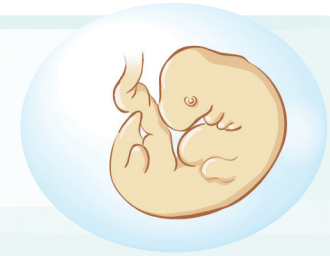


“Traditionally, men and women had different roles for the benefit of the family and camp.”
(Family and kinship, page 41, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

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GENERAL TIP on genetic malformations

The arms and legs are continuing to form. The face, nose, ears, and eyes are now beginning to develop.



About one in thirty newborns will be born with a major malformation. Genetic factors might increase this risk, as well as exposure to alcohol, smoking and other substances.

So continue
to stay **healthy.**



“When we were pregnant, we were taught not to sleep too long and not to stay in bed for way too long. And if you put your clothes on, don’t just sit there.”
(Audience member, transcript of Maternity TV show, Qanuqtuurniq – Finding the Balance. Birth, a joyous community vent, May 12, 2009)

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The elbow and wrist regions are becoming clearly visible.



Most miscarriages occur before week 8. The most common reason for a miscarriage is a problem with the developing baby. Miscarriages are common and normal.

WEEK 8



“A women having difficulty getting pregnant or carrying a child to birth, adopted a child to ensure she would become pregnant.”

(Traditional responsibilities of women, page 51, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

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Your baby measures about an inch from crown to rump, and the beginnings of fingers appear.



Integrated prenatal screening is a combination of ultrasound, nuchal translucency measurement, and two blood tests to determine your risk of having a baby with a chromosomal abnormality or neural tube defect.



WEEK 9



“[Traditionally,] like pre-natal classes today, young women received basic information on what to expect during pregnancy and how to recognize the first signs of labour.”

(Suvaguuq, page 9, Volume X, Number 1, 1995)

Fingers and toes have completely separated, eyelids are formed, and the heart rate is about 130 beats per minute.



How much weight should I gain? Well, it depends...

Recommended weight increase

Pre-pregnancy BMI-value	kg (kilos)	lbs (pounds)
Less than 18.5	about 12.5 - 18 kg	about 28 - 40 lbs
18.5 - 24.9	about 11.5 - 16 kg	about 25 - 35 lbs
25 - 29.9	about 7 - 11.5 kg	about 15 - 25 lbs
over 30	about 5 - 9 kg	about 11 - 20 lbs



WEEK 10



“If a girl carried a heavy rock in her amauti, she would grow up to have large heavy babies.”
 (Traditional responsibilities of girls, page 59, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

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Your baby has begun transferring waste products to you through the placenta.



WEEK 11

Your emotional health:

During pregnancy, your thoughts and feelings are heightened. Many women suffer from depression, while others experience a lot of anxiety (or happiness). Whatever is on your mind, it's normal. Staying active and eating well can help with your mood changes.



“Separate shelters would have ensured that the labour was less disruptive within the regular household shelter. Other sources suggest the birthing igloos or huts were very small with room only for the labouring woman. Those assisting or giving instructions remained in the doorway.”

[Martha Greif, President, Pauktuutit Inuit Women of Canada (meeting notes)]

If feelings of depression seem overwhelming, please contact your community health nurse immediately.

GENERAL TIP

on health professionals

Health professionals you may meet during your pregnancy

- A **midwife** is thoroughly trained to provide complete care for low-risk women during pregnancy, childbirth, and the first few weeks after childbirth. Midwives are certified and provide care according to regional regulations. Midwives provide a natural approach to childbirth. Midwives can deliver babies in a hospital or home setting.
- A **family physician** is a medical doctor with several years extra training in primary care. Family physicians provide care for the entire family and therefore can treat both you during pregnancy and your baby after he/she is born. Ideally, the family doctor is interested in all aspects of your family's health, and not just your pregnancy. Family physicians deliver babies in a hospital setting.
- A **pharmacist** is a health care professional with special expertise in drug preparation.



“In general, midwives were expected to be experienced, open, caring, and comforting and to have the following skills: a knowledge of women’s bodies including “what’s inside”; know how to cut and tie the umbilical cord; the ability to instruct the women in labour, tell her what to expect, and make her mentally and physically comfortable; know which birthing positions promoted quick deliveries; and have the ability to deal with complications.”

(Suvaguuq, page 6, Volume X, Number 1, 1995)

The central nervous system, heart, limbs, eyes, and ears are in their critical stages of development this month.



- An **obstetrician** is a medical doctor who has received many years of training in the care of women during pregnancy, labour and delivery, and the first few weeks after childbirth. Obstetricians are trained to handle normal and complicated pregnancies and deliveries. Obstetricians deliver babies in a hospital setting, where there is immediate access to pain relief and medical interventions if necessary.
- **Nurses** are health care professionals who provide comprehensive care for you and your baby. Nurses may be involved in all aspects of your pregnancy and your baby's care. They provide a link between you and the rest of the health care team. Nurses will likely be involved in educating you about the special care your child may need.
- A **nurse practitioner** is a registered nurse with additional education. Nurse practitioners are able to perform some of the diagnostic and treatment functions that previously only doctors were allowed to do. They have advanced knowledge and decision-making skills that apply to assessment, diagnosis, drug prescription, and health promotion.
- **Anaesthesiologists** are the medical professionals who deliver anaesthesia to patients, in case you require surgery during delivery. You may also hear general anaesthetic called “sleep medicine.” While in this deep sleep you will not feel any pain.

Social workers are integral members of the health care team and offer a variety of supportive services including: individual, family, or group counselling, patient and family education, information regarding community resources, and referral to community based services. Social workers are professionally trained to help children and families who are dealing with difficult situations.

WEEK 12

Bone is now beginning to replace cartilage. As well, the baby can now open and close its mouth.



WEEK 13

During your first medical visit, your health care provider will ask you questions about your health and medical history, your family's medical history, and possibly your job, to help spot any potential risks to the pregnancy.

Your health care provider will also:

- run urine and blood tests to confirm the pregnancy and check for certain conditions that could affect your pregnancy
- conduct a pelvic examination to confirm the pregnancy, check for cysts, and assess the pelvic bones, vagina, and cervix
- do a Pap smear during the pelvic examination, to rule out abnormalities of the cervix, and swabs to check for infection
- measure your height and weight
- press or palpate your abdomen to feel the top of your uterus
- check your blood pressure



Try to eat some extra berries, fruit and vegetables. Don't forget meat, fish, birds, eggs and beans for strong muscles and bones.

Your baby measures about three inches in length. The external genitals are well developed and it is possible to determine if the baby is a boy or girl.



Stop changing cat litter. The litter box may contain toxoplasmosis that can harm the baby since the little one's immune system has not developed yet.

WEEK 14



To help with any constipation drink lots of fluids. Do not use laxatives during your pregnancy.

Your baby's heart is pumping about 24 litres of blood per day.



WEEK 15

If you are still in school, here are some tips for finishing school while pregnant. Life is going to get busier, but you can do it. Others before you have too.

- Schedule an appointment to meet with your guidance counsellor to discuss your options at your specific school. You may need to plan in case you will be missing any classes for medical appointments, or if your due date is during the school year.
- Notify your teachers as soon as you know about any classes you will be missing.
- If your school has a nurse, try to meet with him or her regularly to discuss your physical and mental wellbeing.
- Speak with other moms to find out about how they were able to stay on top of their course work while pregnant, and possibly working.



[One woman from Pond Inlet] describes how she was instructed by her mother to practice the squatting position so she would be comfortable during her first labour.

(Traditional responsibilities of women, page 51, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

Your baby's eyes' have started to move and fingernails are growing.



WEEK 16

Second-hand smoke is just as bad as if you were smoking. Ask smokers around you to quit or please smoke outside.



“Most elders described the presence of one or more birth assistants who were usually a family member.”

[Martha Greif, President, Pauktuutit Inuit Women of Canada (meeting notes)]

Please smoke outside.



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GENERAL TIP on ultrasounds

Your baby is moving around in the uterus and touching its toes and face.



“A pregnant woman must keep moving the baby around or it will get stuck to her womb.”

(Traditional responsibilities of women, page 51, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

What is an ultrasound and why do I need to have it done?

Ultrasound uses sound waves to scan the unborn baby in the uterus, and shows a video of the baby on screen. Having an ultrasound done is very exciting because you can see the baby’s image for the first time. Ultrasound is used to determine the age of the unborn baby, monitor the beating heart, and check for abnormalities of the head and spine. This technique can also confirm the presence of twins and pinpoint the exact position of the placenta. Ultrasound is usually done just once during pregnancy, between weeks 16 and 20, but sometimes it is also done late in pregnancy to make sure that the baby is growing properly. Ultrasound can be done regularly throughout the pregnancy if needed.

WEEK 17

Your baby's tooth buds have appeared.



Time to
start thinking
about baby names.

How about
Madeleine?



How about
Nick Jr.?



WEEK 18



Traditionally, the midwife or birthing assistant played an important role in the naming of the newborn.

(Inuit Tuttarvingat. Exploring models for quality maternity care in First Nations and Inuit communities: Final report on the Inuit women's needs assessment. 2004)

Your baby has started to suck and swallow.



Be sure to stay comfortable. Don't wear clothes that are too tight. Whatever you wear, you and your growing belly will look beautiful.

WEEK 19



“If a girl wore her clothing backwards, her babies would be breech deliveries.”
(Traditional responsibilities of girls, page 59, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)



In baby girls, her ovaries contain eggs, the uterus is formed, and her vagina has begun to develop.



WEEK 20

If you are a single parent-to-be, you are not alone. Many women face unplanned pregnancies without the support of the father. Whether you will be a single parent or not, have a good idea about your financial situation before the baby arrives. Whatever your financial situation is, it is doable. If money is tight, there are services available for you in your community. Find out about these while you are pregnant so that you will be better prepared if you later need these services. Know where you and the baby will live. If you are unsure, talk to your family and friends about options now. Remember, connecting with other moms who face similar challenges will be incredibly helpful.



“Traditionally, the child was the responsibility of the whole community.”

(Family and kinship, page 39, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)



GENERAL TIP

on counting baby's kicks

Your baby's taste buds are developing.



Around this time, you should start monitoring your baby's kick counts, which is how often your baby kicks, swishes, rolls, and jabs in a given amount of time.

When? Choose the same time each day to do kick counts. This should be a time of the day when your baby is very active.

How? Begin by finding a comfortable position, perhaps sitting with a good back rest, or lying on your side. Record your start time in a notebook. Make a checkmark for each time your baby moves. After recording 10 such movements, write down the time again. Ideally, you should feel at least 10 movements in two hours.

When to contact your health care provider:

If you do not feel 10 movements within a two-hour time period, try again. If you still do not feel 10 movements in two hours, contact your health care provider. Also, if you notice a significant change from your baby's kick count pattern over three to four days, contact your health care provider. You know your body best. If you feel something is wrong, call your health care provider.

WEEK 21



“Making fun of someone could result in giving birth to a baby that looks like that person who was mocked.”

(Suvaguuq, page 9, volume X, number 1, 1995)

	Start time	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	End time	Less than 2 hours?
Monday	6:04pm	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	6:51pm	yes
Tuesday	6:12pm	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	7:19pm	yes
Wednesday	5:53pm	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	6:43pm	yes
Thursday													
Friday													
Saturday													
Sunday													

Your baby weighs about a pound!



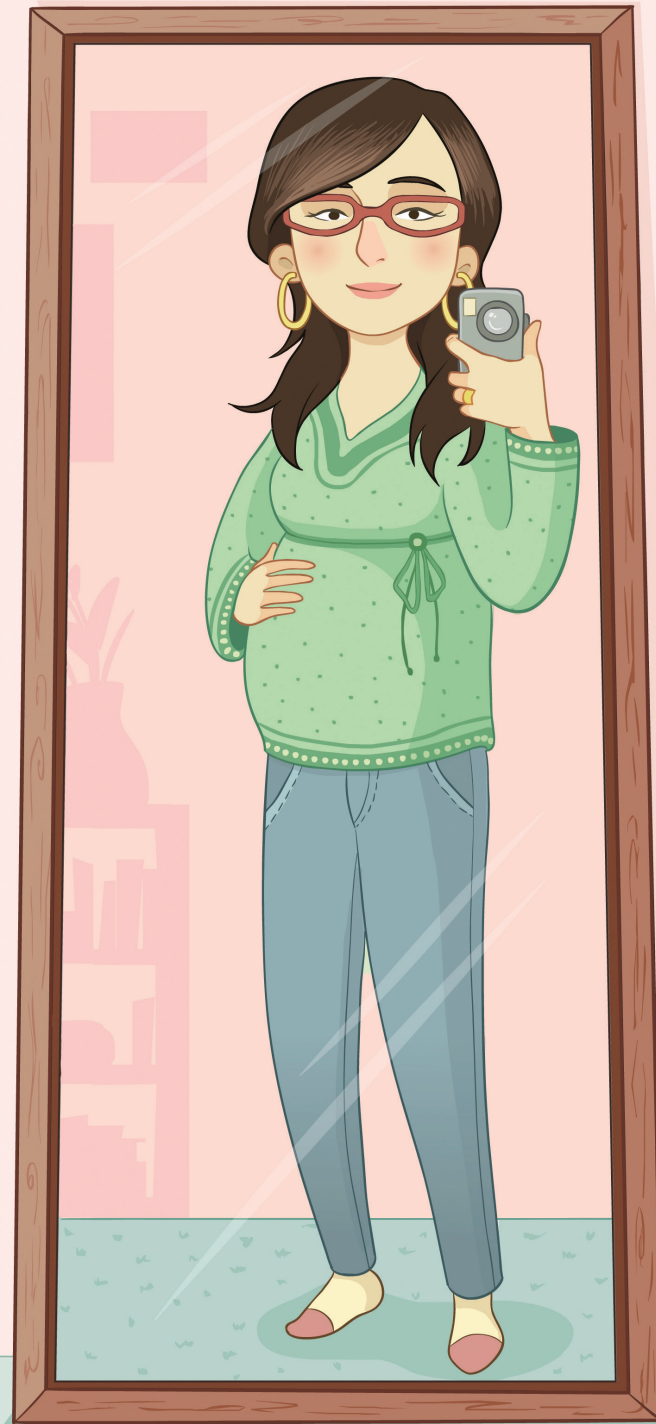
Start a journal or a blog. You can make it as formal as you want. It is a good idea to get in the habit of writing down the changes you are experiencing, since you will also want to keep track of your baby's development. He or she will have lots of questions for you when they grow up.

WEEK 22



“Pregnant women could not eat the heart of a caribou to make sure their baby would have a healthy heart through life.”

(Traditional responsibilities of women, page 51, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)



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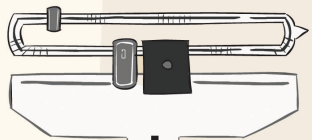
Your baby can hear your voice, and other sounds your body is making.



If you are pregnant with twins or multiples, you and the babies will have additional needs. During pregnancy, special attention should be paid to your diet, prevention of hypertension, and monitoring the developing babies.

We are having twins!

WEEK 23



“If you carry food in both hands, you will have twins.”

(Traditional responsibilities of girls, page 59, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996).



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Your baby's facial features are filling out.



WEEK 24

Normal physical symptoms that your body may experience now or soon:

- fatigue
- constipation
- heartburn
- flatulence (gas)
- nose bleeds
- bleeding gums
- increased appetite
- backache
- achy feet
- swollen ankles
- white vaginal discharge
- stretch marks
- breathlessness
- absent-mindedness
- varicose veins
- skin pigmentation changes

But it is all worth it for that beautiful baby you will be meeting in a few months.



“Adoption is an important part of tradition. Grandparents adopted the first grandchild of their eldest child.”

(Family and kinship, page 41, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)



GENERAL TIP

on the gestational diabetes test

Your baby now weighs 1.5 pounds, and is making breathing movements, even though there is no air in the baby's lungs yet.



Between weeks 24 to 28, you may have a gestational diabetes test. If your health care provider determines that you are high-risk for gestational diabetes, he or she may request the test as early as 13 weeks. In the screening test, you will be asked to drink a special high-sugar drink, and one hour later, some blood will be drawn and tested. If the screen is borderline positive for gestational diabetes, you will be asked to do an oral glucose tolerance test to confirm the condition. The oral glucose tolerance test involves fasting for four to eight hours, after which time your blood sugar will be measured. You will then be given a sugar drink and your blood sugar will be checked again two hours later. If you test positive for gestational diabetes, you will need to see an endocrinologist to help manage the disease during your pregnancy.



“Cold and frozen food helped to alleviate heartburn.”

(Suvaguuq, page 8, Volume X, Number 1, 1995)

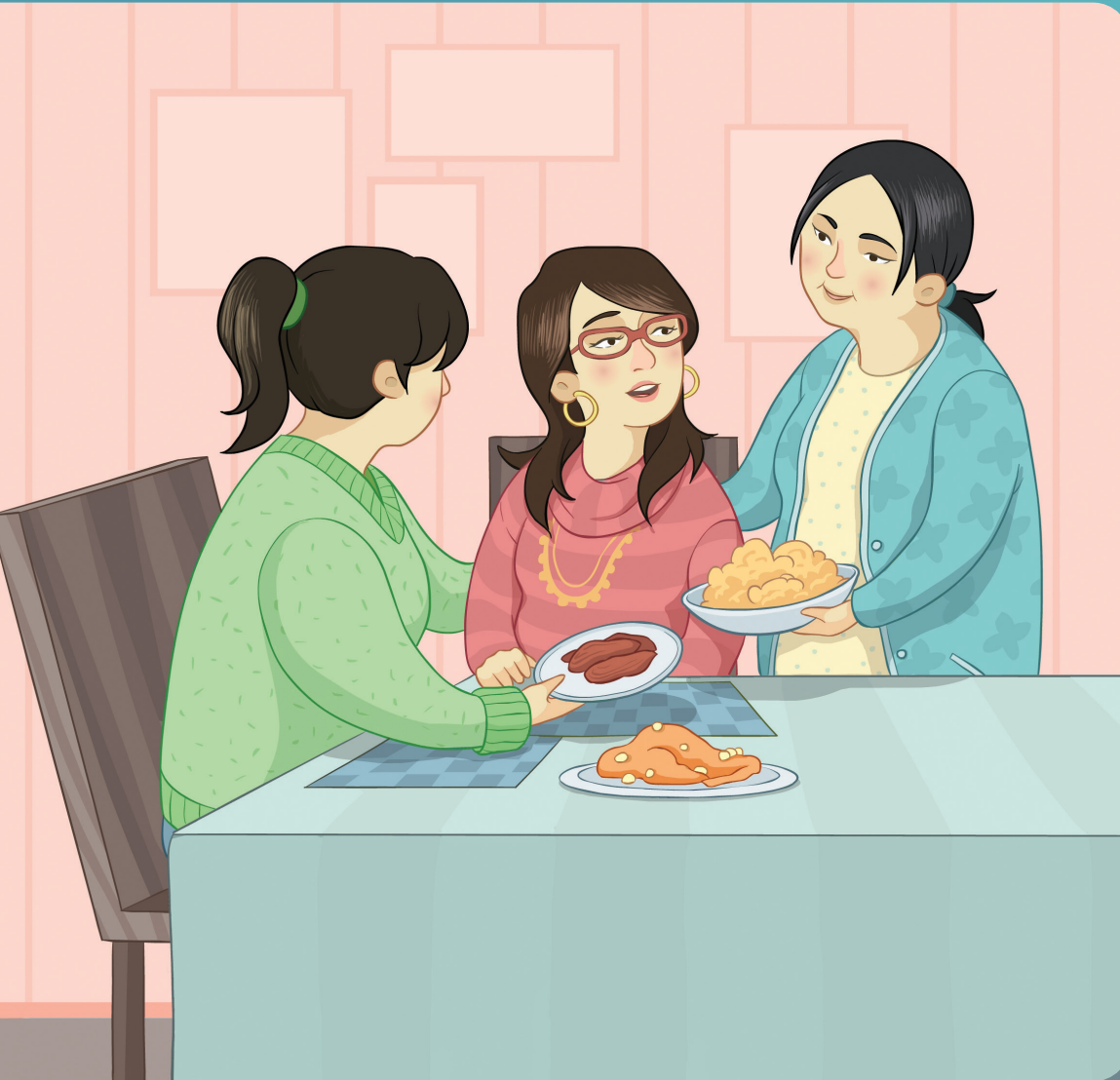
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You will probably be aware of your baby's movements by now, and may be able to tell when he or she is awake.



During your second and third trimesters, you need to eat a little extra to support your growing baby. Don't forget your vitamin D supplement and multivitamin (with at least 0.4 mg of folic acid).



WEEK 26



Your feet and ankles may start to swell around now. Try to put your feet up as often as you can. Avoid crossing your legs. Wear loose clothing, and try to keep up with plenty of rest and exercise.

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GENERAL TIP

on preparing for birth at a hospital or birthing centre

Your baby is now aware of light and dark.



You may want to pack:

- Your birth plan, if you have created one
- Photo ID, and your health card
- Eyeglasses or contact lenses, if you wear them
- Toiletries
- Something comfortable to sleep in, and slippers
- Whatever you think will help you relax, such as: music, and a music playing device, massage oil, playing cards, puzzles, something to read, photos of your other children
- Camera/video camera, film or a memory card, battery and charger
- Food for after the delivery
- Warm socks, a nursing bra, and extra underwear
- Comfortable outfits for you and your baby to wear home
- A swaddling blanket for the baby
- An infant car seat, if necessary



Birth positions, for example, tended to be in a kneeling or squatting position and not on a mother's back.

WEEK 27

Your baby has started blinking.



WEEK 28

Pain relief options for labour and delivery:

Now is a good time to learn about different pain relief options for during your labour in case you have difficulty coping with a natural birth. Medicine-free methods include changing your position, different movements, having a warm bath or shower, using a labour ball, massages or different breathing exercises. There are injectable painkillers, such as morphine, that may be given throughout labour. Nitrous oxide, which is a gas, is inhaled through a mask. Commonly, an epidural is given, which involves inserting a needle into your lower back to inject medicine to numb the pain.



“I had trouble expelling the afterbirth. I was told to stick my hand in my mouth to vomit, as soon as I did that, the afterbirth expelled.”
(Madeline Ivalu (Hall Beach), Suvaguuq, page 5, Volume X, Number 1, 1995)



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You may feel your baby hiccup now.



WEEK 29

Ask someone who has nursed their baby(ies) for breastfeeding advice.

Breast feeding has the potential of preventing infant mortality, reducing chronic diseases, improving immunity, and strengthening maternal-infant bond. However, in recent times, Inuit of Nunavut initiate breastfeeding less often than other Canadians.

Breastfeeding is recommended for the first six months of life and beyond with adding solid foods starting at six months of age. Breast milk is free and is always ready at the right temperature 24 hours a day. Seek assistance if necessary to train your baby to breastfeed, it is not always easy at first.



Traditionally, Inuit children were breastfed for prolonged periods, well into their third and fifth years. “Nursing mothers were fed caribou broth, often made with blood, and sometimes fish soup to encourage milk production.”

(Suvaguuq, page 5, Volume X, Number 1, 1995)

Your baby will now start shedding the lanugo, the fur-type hairs that have been keeping your baby warm, since he or she can now regulate its own temperature.



WEEK 30



Arctic Char Chowder

3 tbsp. butter or margarine
1 onion, chopped
2 or 3 stalks celery, chopped (optional)
2 or 3 carrots, peeled and chopped (optional)
potatoes, peeled and chopped
water
1/2 tsp thyme (optional)
2 lb. arctic char or salmon fillets (no skin or bones), cut into bite sized pieces
1 (15 oz.) can evaporated milk
salt & pepper to taste

Melt butter in large heavy pot on medium heat. Fry onion, celery, carrot for 5 minutes. Add potatoes and continue frying for another 5 minutes while stirring every minute or so. Add thyme and enough water to cover all ingredients by an inch or two. Cover, and bring to a boil, then simmer on medium/low heat for about 15 minutes, until potatoes are tender. Add milk and fish, and reheat for another 15 minutes without boiling. Once heated through, add salt and pepper to taste.

Try to cook
in large
batches!



Budgeting for life
with new baby

Your baby may suck its thumb, or cry.



WEEK 31

Like many pregnant women, you may be thinking about a space for the new baby, even in a crowded house. These thoughts are called ‘nesting’. Ask for assistance if you need to move heavy furniture around.



“We had to help by feeling, anyone with large hands could not do it, only the one with the smallest hands would do the feeling and only when absolutely necessary, when nothing else could be done. The feeling was done by the smallest hands in case the baby had to be better positioned for delivery, always having the welfare of the mother utmost in mind. If only the arm, belly, or some other unusual part of the body was coming out, it could be moved and better positioned by a midwife who had the smallest hands of those who were present.”

(Nancy Pamak (Nain), Suvaguuq, page 5, Volume X, Number 1, 1995)

Your baby's movements will peak this week.



WEEK 32

In case you were wondering, unless your health practitioner has told you otherwise, yes, it is safe to have sex during pregnancy. You may be more or less in the mood during different times of your pregnancy.

Feel like listening to some romantic music?



“Childbirth and rearing are an important part of our culture – we need to bring this back and remain strong in the next steps. We want traditional midwifery revived and brought back. Collective knowledge needs to be preserved and shared.”
[Martha Greif, President, Pauktuutit Inuit Women of Canada (meeting notes)]

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GENERAL TIP

on the importance of drinking lots of water

Your baby is developing its immune system now.



Drink water regularly. Water carries nutrients to your baby, and waste away from your baby.

WEEK 33



Traditionally, young Inuit women and girls would attend births as childbirth was a normal part of everyday life. Women grew up hearing stories about births. Through these stories, knowledge was passed on. (Pauktuutit Inuit Women's Association. Teenage Pregnancy in Inuit Communities: Issues and Perspectives. 2004)



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All the organs are in place and most systems are well developed, however the lungs may still be immature.



Talk to other moms about their experiences of pregnancy, labour and delivery. You'll soon learn that every pregnancy is unique.



WEEK 34



[One women from] “Inlet) describes how she was instructed by her mother to practice the squatting position so she would be comfortable during her first labour.” (Suvaguuq, page 9, Volume X, Number 1, 1995)

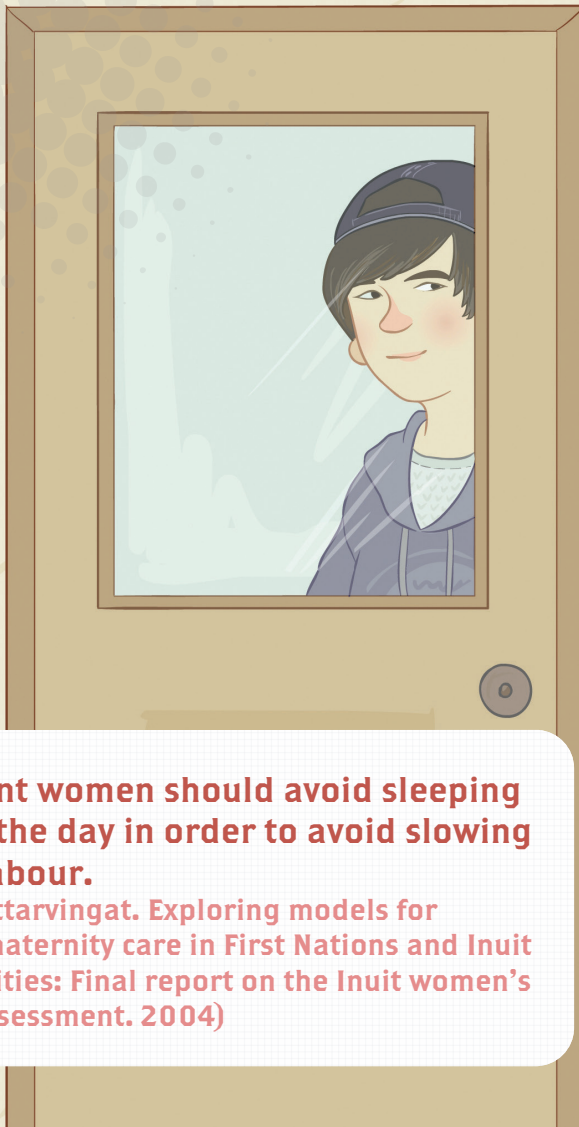
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Your baby is measuring about 20 inches in length.



WEEK 35

During weeks 35 to 37 of your pregnancy, you may be tested for Group B streptococcus. These infections are the most common cause of life-threatening infections in newborn babies. Any pregnant mothers who tests positive for group B streptococcus are then given antibiotics when labour starts. The group B streptococcus test is simple and painless. The doctor will do a swap of the vagina and rectum to check for the presence of the bacteria.



Pregnant women should avoid sleeping during the day in order to avoid slowing down labour.

(Inuit Tuttarvingat. Exploring models for quality maternity care in First Nations and Inuit communities: Final report on the Inuit women's needs assessment. 2004)



Your baby's growth will slow down now.



Sudden Infant Death Syndrome (SIDS) was more than six times higher in Nunavut than the rest of Canada, so it is important to learn how to put your baby down to sleep. **Back to sleep!**



WEEK 36



Traditionally, a boy would have given a portion of his first successful hunt to the person who assisted in his birth, while a girl would have given away the first item she sewed or knit.



Your baby is now considered ‘full term’. Over the next few weeks, your baby will practice its new skills, like inhaling and exhaling amniotic fluid.



WEEK 37

Early signs of labour:

Your due date is expected to fall within the 40th week of pregnancy. However, only 4% of women actually give birth on their due date. Most women deliver their babies in the two weeks before or after their due date. Keep aware of the early signs of labour:

- loss of your cervical mucous plug, which is a bloodstained gel-like plug in your uterus that seals off your cervix
- a slow trickle or maybe even a rush of water from your vagina
- strong contractions that become progressively closer and closer to each other and last longer and longer over time.



“In most regions the elders described a lifelong relationship between a midwife and the child she or he assisted to be born. It is culturally important that a child knows their sanajiq, arnaqutiq, or maker.”

[Martha Greif, President, Pauktuutit Inuit Women of Canada (meeting notes)].

GENERAL TIP

Labour and Delivery

Stage 1 of labour and delivery

The early phase of stage one can last up to 20 hours. A typical labour might start with contractions coming every five to 20 minutes and lasting 30 to 60 seconds each. Every labour is different, however, and some women might not realize they are in labour until the contractions are relatively close together, about five minutes apart. The contractions will become stronger, longer, more frequent, and better coordinated. During the early phase, your cervix will open to about 3 cm. During a contraction, there is a wave of pain across the abdomen. The uterus hardens and tightens intensely, and holds this intensity for a few seconds before relaxing.

For the next few hours, you will enter the active phase of labour, where your contractions will be strong, painful, and regular. Usually during the active phase of labour, the contractions will become stronger and more frequent, occurring about every two to three minutes. In the active phase, your cervix will continue to open, to about 8 cm. The baby's head will descend further and further into the pelvis.

In the transitional phase, your cervix will open from 8 to 10 cm, which is the diameter that the baby's head needs to pass through the birth canal. At this point, your contractions will be intensely strong, occurring about every two to three minutes. Each contraction may last 60 seconds or more.

Your baby's lungs are continuing to develop. More surfactant is being produced so that his or her's lungs don't stick together after delivery.



Stage 2 of labour and delivery

This is the “pushing” stage where the baby is actually delivered! This is very exciting, and it usually lasts from 20 minutes to two hours. During this stage, you will still have strong and regular contractions, every one to three minutes. Some women find the second stage of labour easier to manage because they can bear down, which offers some relief to the pain. When you feel the unbearable urge to bear down, hold your breath and push like you are having a very large bowel movement. Follow what your body tells you to do. At some point, you may be asked to stop pushing. This allows the baby's head to work at its own pace to stretch out your vagina and perineum. The doctor or midwife will gently guide the baby's head through the birth canal, followed by one shoulder and then the other. The rest of the body follows easily.

Stage 3 of labour and delivery

The third stage of labour is the delivery of the placenta. Now that you have your newborn baby in your arms, you might not even notice the placenta coming out. The placenta is usually expelled with a few painless contractions. If you need stitches because you had a tear or an episiotomy, you will be given a local anesthetic so that the doctor can perform the suturing. You can hold your newborn baby while this is being done, if you wish.

WEEK 38



“...Children were named after relatives who had died so that the relatives would be remembered. And their sorrow for a dead relative would be gone once a child was named after him or her...”

(Names and naming, page 42, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

Your baby is continuously putting on that adorable healthy fat.



Your breasts, which began enlarging during pregnancy, are filled with a special clear fluid called colostrum for the first few days after childbirth. Colostrum contains more minerals and protein than regular breast milk, but less sugar and fat. Colostrum also contains antibodies that offer protection for your newborn baby against certain diseases. Your newborn baby needs colostrum in the first few days of life. Gradually over the next few days, colostrum is replaced by mature breast milk.

WEEK 39



“The old term for labour was ‘contemplating’.”
(Akinikie Qumaluk, transcript of Maternity TV show, Qanuqtuurniq – Finding the Balance. Birth, a joyous community event, May 12, 2009)



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There are approximately 800 births in Nunavut a year.

Your baby is one of them, so **love yourself** and *your baby* because you're **both important** and **special**.

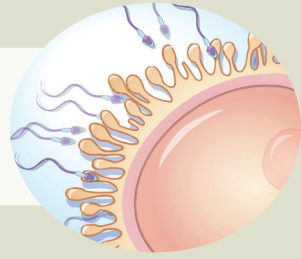


“When I was younger, they would say that the baby has arrived instead of the child is born. And thus we celebrated the arrival of the child. It is only recently that we say that the child is born. Inuit would celebrate the birth of the child, the arrival of the child by shaking the little infant’s hand. That is something that we try and practice. Every child that arrives into the community, we try and welcome them.”

(Akinikie Qumaluk, transcript of Maternity TV show, Qanuqtuurniq – Finding the Balance. Birth, a joyous community event, May 12, 2009)

WEEK 40

Fertilized egg becomes an embryo.



MONTH 1

Congratulations,
you are going
to be **a father!**

Remember over the next 9 months or so that a safe environment is needed for both mother and the expecting baby. Try to support them both in as many ways as you can.

Paisley, you are going to be an older sister!



“The role of the husband in traditional births varied from being present but uninvolved, to supporting his wife’s back or legs during labour, to providing skillful assistance. Occasionally, a husband would be away hunting or he was asked to stay outside until the child was born. Often, however, he provided crucial physical and emotional support.”

(Suvaguuq, page 8, Volume X, Number 1, 1995)

Many of the embryo's body parts have begun to form including either ovaries for females or testes for males.



Partner support, depression, and income all may contribute to the likelihood that your partner will smoke during pregnancy. Any exposure from smoking cigarettes or being exposed to others' smoking may harm the baby.

MONTH 2

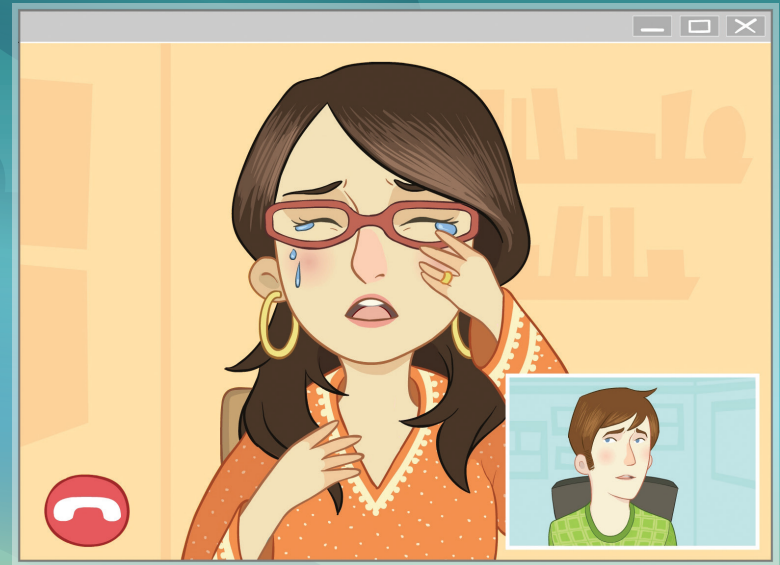
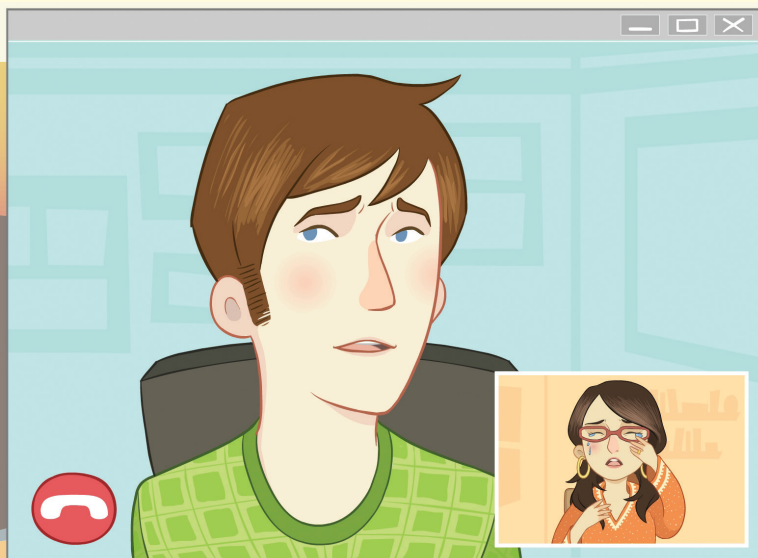


“When births took place at home or on the land, husbands, parents and in-laws often played important roles in the birthing process.”
(Suvaguuq, page 8, Volume X, Number 1, 1995)

The baby's central nervous system, heart, limbs, eyes, and ears are in their critical stages of development this month.



You may find your partner's mood swings to be especially hard to understand. Mood swings may be caused in part by the extra hormones that arise during pregnancy, especially in the first trimester. The emotional changes and demands of taking on the roles of pregnancy and impending parenthood can also contribute to mood swings. It is possible that you may also feel moody at times for the same reasons and need someone to talk to. Try not to become angry or frustrated with your partner if she has a sudden burst of emotion. Instead, be understanding and reassuring, and offer her a shoulder to cry on if she needs it.



Listen to her feelings and worries. Be aware of, and seek help for, any signs of depression, both in your partner and in yourself:

- feeling out of control
- unpredictable tearfulness and spontaneous crying
- feelings of sadness, melancholy, weary anger, or general despair

MONTH 3



“If a man and his family had nice, clean clothing made from good skins, that meant that he was a good hunter and a good provider for this family.”

(Joan Atuat, page 54, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

The baby is completely formed by the end of this month.



If possible, try to attend any medical appointments with your partner. You will get a kick out of hearing the baby's heartbeat. Continue to encourage your partner to eat a healthy diet, get enough sleep, exercise, and to stay away from cigarettes, marijuana (second-hand smoke too) and alcohol.

MONTH 4



“Men were told to move quickly through the entrance of the iglu, tupiq or qarmaq so their wife would always have a quick labour.”
(Traditional responsibilities of men, page 55, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

The baby's hair begins to grow on the baby's head this month, including eyebrows.



Pregnancy becomes a more positive experience when there is involvement and support from the baby's father: when father shares parenting responsibilities whether or not he is living with the mother.



MONTH 5



“Men played games with their sons that developed hunting skills.”
(Traditional responsibilities of men, page 56, Inuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)
“Little boys or new fathers were encouraged to pack babies to ensure they will someday kill a whale.”
(Whales, page 129, Inuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

By the end of this month, the baby will measure about 12 inches or a foot in length.



Start **talking**
to your **baby**.

He or she can
hear you now.



“Rebecca Arnaquak (Hall Beach) recalled that her husband made sure she ate well and that he “hunted for my cravings.”

(Suvaguuq, page 8, Volume X, Number 1, 1995)



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MONTH 6

You will be able to see the baby moving this month.



Try to make your partner's life as stress-free as possible. Take on some extra chores so that she can rest, and always be there when she needs your emotional support.

MONTH 7



“Fathers would talk to the wife before acting in any matters about raising the children.”
(Traditional responsibilities of men, page 57, Inuuqatigiit Curriculum, Northwest Territories Education, Culture and Employment, 1996)

The baby's brain grows an incredible amount this month. Also, the skin becomes less wrinkled.



While she is pregnant, your partner receives a lot of attention, and you may feel left out. If these feelings are allowed to grow, they might turn into resentment and jealousy. The best way to resolve your feelings are to get involved with the pregnancy. Part of this includes attending the health care provider visits, eating right, and exercising with your partner. Also, talk to your partner about how you feel and keep the lines of communication open.



MONTH 8



“Males were not sheltered from the birthing knowledge. They gained experience from watching their mothers, wives, and daughters give birth.”
(Suvaguuq, page 8, Volume X, Number 1, 1995)

Your baby's lungs are finally mature and ready for air. The baby will now settle down lower in your partner's abdomen to prepare for birth!



Discuss with your partner what your role will be during the birth, and afterwards. Support your partner with breastfeeding as this is the healthiest choice for the baby. Talk to other dads about how they assisted their partners with the new baby. Perhaps most importantly, enjoy your little bundle(s) of joy!



The baby's bonding with the mother and father begins right away.

MONTH 9



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