

Healthy Pregnancy and Childbirth

Through ongoing monitoring of progress in the area of pregnancy and childbirth, developing resources that target at-risk groups and collaborating with other agencies to effect change in attitudes and behaviours related to pregnancy and birth, CICH has helped ensure children receive the healthiest possible start in life.

Challenge

A healthy start includes the birth process itself. We now know that a minimally-invasive, family-centred approach to childbirth is best for both mother and baby. However, it is only since the mid-1970s that views of childbirth have changed. What was once a clinical procedure has now become a family-centred experience.



CICH action and impact

CICH has played a key role in implementing this change by conducting national surveys, coordinating expert working groups on maternal and newborn care and disseminating the groups' findings.

CICH's efforts have led to family-centred guidelines for the standard of maternal and newborn care, including Family-Centred Maternity and Newborn Care: National Guidelines (1987, 2000). This places the family back at the centre of the birth process and newborn period, and contributes to a supportive, caring environment for mothers and infants.

Challenge

While maternal and newborn care has improved significantly in the past three decades, there are still controllable risks to the health of fetuses and newborns that have not been adequately addressed. Each year, for example, more than five per cent of Canadian babies are born at low birth weight (under 2,500 grams), increasing the risk of health problems and disability. Compared with affluent children, economically disadvantaged children are almost twice as likely to be born prematurely with low birth weight and die before 30 days of age. Furthermore, one in four pregnant women smokes, increasing the risk of low birth weight and other complications.

CICH action and impact

CICH develops and implements strategies to address pre- and post-natal challenges. For example, we know prenatal folic acid supplementation is an inexpensive and simple way of substantially reducing neural tube defects, such as spina bifida. CICH's work contributed to the development of the Folic Acid National Consensus Strategy and fewer neural tube defects in Canada.

Similarly, there is increasing awareness of the impact of maternal

alcohol consumption on fetal development. Fetal alcohol syndrome (FAS) describes a set of preventable birth defects seen in children whose mothers consumed alcohol while pregnant. CICH is managing FASEout: Fetal Alcohol Syndrome/Fetal Alcohol Effects Outreach Project, a three-year initiative funded by Health Canada, designed to ensure agencies and organizations across Canada are using best practices with respect to preventing, diagnosing and intervening in cases of FAS/E.

The Institute also established the Coalition for the Prevention of Low Birth Weight and Prematurity to motivate communities to develop low birth weight reduction projects and networks for communication and support.

CICH's work has helped improve the life chances of children through:

- research programs, such as the first National Survey on Resuscitation of Newborns, which led to the creation of national guidelines for resuscitation training and services in hospitals;
- educational initiatives, such as the Back to Sleep campaign, which recommended infants sleep on their back in a smoke-free environment, resulting in a 60 per cent decrease in infant deaths due to sudden infant death syndrome; and
- advocacy efforts, such as working as a member of the Canadian Coalition for the Prevention of Developmental Disabilities to improve standards for perinatal care, improve resuscitation of newborn infants and develop standards for the role of nurses in reproductive care.

CICH's efforts contributed to a reduction in infant mortality from 7 per 1,000 live births in 1990 to 6 per 1,000 live births in 1995.

Challenge

Medical studies continue to reinforce the benefits of breastfeeding to the physical and cognitive health of infants. However, in the mid-1990s, a national survey showed that less than 50 per cent of babies in Canada are breastfed for a minimum of six months, the optimal period to support healthy development.

CICH action and impact

Educating health professionals has been key to changing attitudes towards breastfeeding. Recognizing the need for accurate, consistent information, CICH worked closely with the Breastfeeding Committee for Canada to revise the National Breastfeeding Guidelines for Health Care Providers, the only national resource to help professionals counsel parents on breastfeeding. Since the launch of CICH's breastfeeding support initiatives, more women in Canada breastfeed and do so for longer periods of time.