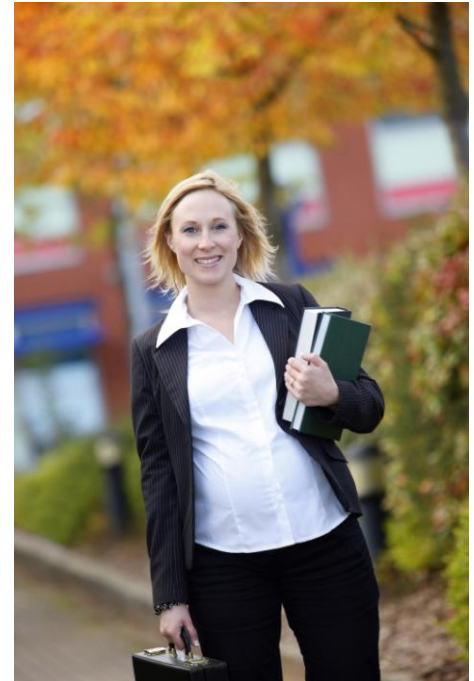


Healthy Pregnancy and Transition to Parenthood

Background Information/Rationale for Focus

In 2009, 58.3 per cent of women, representing 8.1 million women, were employed. ¹ For the first time in history, more Canadian women than men were in paid employment during the first half of 2009.² As 57.1 per cent of women aged 15–24 and 77.1 per cent of women aged 25–44 were employed in 2009,¹ there were a large proportion of women working in their potential childbearing years. Of women who become pregnant, many continue to work during their pregnancy and greater than 80% of new Canadian mothers return to work after one year.³

Employment rates of women with children, especially children under six years of age, grew dramatically between 1976 and 2009. In 1976 31.4 per cent of women with children under six were employed, compared to 66.5 per cent in 2009. For women with children 6 to 15 years of age, rates increased from 46.4 per cent in 1976 to 78.5 per cent in 2009.⁴ Savvy employers are educating themselves on the needs of pregnant families and improving the health of both women and men before, during and after pregnancy through comprehensive preconception (before pregnancy), prenatal (pregnancy) and postpartum (after pregnancy) benefits and health promoting policies.



Before Pregnancy:

Preconception is the period before a woman becomes pregnant. All women in their childbearing years are considered to be in the preconception period. The health of both women and men before pregnancy can affect the health of their future children. There are specific things women can do before pregnancy to improve their chances of a healthy pregnancy:

- Take a multivitamin with 0.4 mg of folic acid every day
- Eat healthy food, maintain a healthy weight and be physically active
- Stop smoking and avoid second-hand smoke
- Avoid alcohol
- Avoid stress
- Not use illegal drugs
- Avoid infections and ensure immunizations are up to date

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- Avoid hazardous substances and chemicals
- Speak with their healthcare provider about their family history

Since almost half of all pregnancies are unplanned, improving the general health of both women and men prior to conception is beneficial. For example, in men exposures to hazardous substances may result in abnormal sperm or a reduced sperm count which could affect their fertility and ability to father healthy children.^{5,6,7}

It is also worthwhile to note that many women often wait until their pregnancy is further along before telling others. Since the most sensitive period of time for a developing fetus is 17 to 56 days after conception, workplaces should not wait until they have a pregnant worker to put in place health education, policies and practices that support healthy pregnancies. Workplace health protection and preventative policies can not only help to reduce potential risks to women, but can also aid to protect male fertility.

Pregnancy:

A normal pregnancy lasts between 37 - 42 weeks. Woman who experience pregnancy complications will have higher rates of absenteeism and those who give birth to a low birth weight (birth weight less than 2500 g), preterm (birth that occurs before 37 weeks in pregnancy) or sick baby are likely to delay returning to work after parental leave in order to manage their infant's care. Premature babies are at much greater risk of hospitalization in their first year of life and often have disabilities that affect them throughout their lives.⁸ Absenteeism may result for both parents due to additional physician appointments and stress. Stress can reduce a person's ability to be productive at work. In the US, lost household and labour market productivity associated with preterm births totalled \$5.7 billion in 2005.⁹

Low maternal weight prior to conception, poor nutrition, high levels of stress, exposure to tobacco smoke and excessive heat during pregnancy have been associated with an increased risk of low birth weight and preterm term birth.^{8,10} As well, physical work demands in the workplace should be considered during pregnancy. Standing at least one hour without walking, climbing stairs frequently or working more than 5 consecutive days without a day off can increase a woman's risk of preeclampsia (leading cause of maternal and perinatal complications) in pregnancy.¹¹ Sustaining a demanding posture for at least three hours per day and whole body vibrations during pregnancy has shown an increased risk of preterm delivery.¹² Working longer than 40 hours/week and more than eight hours/day has also shown an increased risk of preterm birth, low birth weight and miscarriage.⁵ Shift work has also been associated with an

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increase in first trimester miscarriages, preterm birth and LBW.⁵ There is also evidence to suggest that excessive noise and heavy lifting may be linked to low birth weight.^{5, 13}

After Pregnancy:

Employers benefit from healthy families:

Creating a safe reproductive health environment within the workplace is not the only consideration for employers. Employers are encouraged to also consider the impact that adjustment to a new family will have on their employees work-life balance. Work-life conflicts may arise that have an impact on productivity, workplace equity and occupational health.¹⁴

Canadians with high work-to-family conflict are more likely to report¹⁵:

- Job stress and burnout (6 times more than low-conflict)
- Intent to turnover (2.8 times)
- Poorer physical health (2.3x)
- Absenteeism (1.3 times)
- Lower job satisfaction (67% lower than low-conflict)
- Being less committed to their employer (29% less than low-conflict)

Research indicates that flexible work arrangements, increasing employees' sense of control, making work demands and work expectation more realistic and increasing the number of supportive managers have an impact on both business and employees. It is however important to realize that supportive management is key. Data shows that managers are, through their behaviours, the transmitters of culture within their organization and the ones who make employees believe that they are able to exert some degree of control over their schedule.¹⁵

Workplaces that implement family friendly policies note:

- Employees using flexible work arrangements have lower absenteeism¹⁶
- Consumer/client satisfaction increases after the implementation of work-life initiatives¹⁶
- Management's recognition of the importance of personal and family life issues, directly impacts employee commitment¹⁶
- Employees who use flexible work arrangements show greater motivation and initiative¹⁶
- Work-life balance policies act as incentives to recruitment¹⁴



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Goals For The Workplace To Strive For

1. To provide a supportive and safe working environment to promote healthy lifestyles including reproductive health, preconceptional health (before pregnancy) and healthy pregnancies.
2. To recognize and reduce potential health risks or health hazards within the working environment, which may adversely affect reproductive health.
3. To encourage active and supportive communication between employees and employers who may be planning a pregnancy or who are pregnant, while maintaining confidentiality.

Getting Started – Utilizing a Variety of Health Promotion Strategies

Awareness Raising

- Utilize bulletin boards and displays featuring resources for preconception, pregnancy and transition to parenthood
- Provide resources in multiple languages
- Dedicate an accessible area to display pamphlets and resources regarding healthy lifestyle issues, preconception health promotion and healthy pregnancy topics and work-life balance information
- Provide employees with a list of relevant community events, resources and DVD's available through the Region of Waterloo Public Health Resource Centre, local libraries, as well as the Reproductive Health Information Line
- Include short articles/quizzes in an internal newsletter or e-bulletin/staff emails or as a pay check insert (check websites and local newspaper for relevant articles)
- Post information related to paternal and maternity leave, benefits, etc.
- Include pregnancy related health issues into existing wellness programs

Skill Building

- Offer presentations/workshops based on employee interest through “lunch and learn” sessions discussing issues of preconception and prenatal health
- Provide employees and management with the opportunity to attend training/courses related to reproductive health/healthy pregnancies (see also healthy eating, healthy weights, physical activity, substance misuse prevention, and tobacco-free living sections)

Creating Supportive Environments

- Encourage walking groups
- Provide a quiet room/environment for pregnant mothers to rest during breaks
- Offer preferred parking spaces for pregnant employees
- Offer healthy food choices in the cafeteria or vending machines, including availability of water and signage for foods pregnant women should avoid

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- Provide smoking cessation support
- Offer flexible work scheduling allowing employees to attend prenatal/health appointments
- Provide on-site childcare
- Offer counselling services (e.g. Employee and Family Assistance program)
- Provide incentives for healthy pregnancy behaviours such as joining prenatal focused fitness program or smoking cessation group

Creating Healthy Workplace Policy

- Develop flex time/flexible scheduling policies for employees to attend medical appointments for both the pregnant worker and her partner as well
- Adopt and implement smoke-free entrance/exit policy
- Provide worksite breastfeeding support to ease transition back to work
- Investigate the feasibility of creating a maternity/paternity leave policy, including flexible options, financial top-ups and extended leaves
- Develop job share/part-time policies
- When feasible, offer alternative work assignments if a pregnant worker is involved with heavy lifting, strenuous work, shift work or long hours of work
- Provide uniforms/protective clothing to fit pregnant employees
- Adhere to WHMIS/MSDS policy, with regular in-services for employees and managers on organizational safety guidelines



Telephone consultation is available through **Project Health: 519-883-2287**

Region of Waterloo Public Health Resources

Project Health has a number of resources available for planning, implementing and evaluating your workplace wellness activities. As well, we have a number of links to external resources that you may find helpful. Please see www.projecthealth.ca for further resources on this topics area.

Also, the Public Health Resource Centre has a number of displays, educational kits, DVDs, posters, books, and pamphlets relevant to workplace health. Search for resources using the online catalogue. Or simply contact Resource Centre staff with your topic and they will suggest resources for you. Note that resources may be booked in advance.

For more information, click [here](#) (link to:

<http://chd.region.waterloo.on.ca/web/health.nsf/DocID/1FB38293EBA4935785256B120060265E?OpenDocument>)

Phone: 519-883-2256

Email: phrc@regionofwaterloo.ca

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Local Community Resources

- Reproductive Health On-Call Line519-883-2006
Prenatal Health Fairs519-883-2308
(<http://chd.region.waterloo.on.ca/en/clinicsClassesFairs/prenatalhealthfairs.asp>)
- Special Delivery Club - Prenatal Classes for Youth519-883-2006
(<http://chd.region.waterloo.on.ca/en/clinicsclassesfairs/prenatalclassesforyouth.asp>)
- Healthy Children Info Line519-883-2245
Preparing for Parenthood: Prenatal Information and Support Program for Pregnant
Women – Ontario Early Years Centres
YMCA Ontario Early Years Centre519-741-8585
(<http://www.earlyyearsinfo.ca/cms/Programs/waterloo/YMCAFamilyZone.aspx>)
- Our Place Family Resource & Early Years Centre519-571-1626
(<http://www.earlyyearsinfo.ca/cms/Programs/ourplace.aspx>)
- Conestoga College Prenatal to Parenting Group Prenatal Classes ...519-748-5220 ext.3656
(http://www.conestogac.on.ca/ce/catlg/courselist.jsp?CatalogCode=C05_H6300)
- YMCA Childbirth Education Program519-743-5201
(<http://www.earlyyearsinfo.ca/cms/Programs/waterloo/YMCAFamilyZone.aspx>)
- Prebirth Service
Grand River Hospital519-749-4300 ext.2793
(<http://www.grhosp.on.ca/Prebirthservice>)
- Cambridge Memorial Hospital519-621-2333
(http://www.cmh.org/patients_services.php?pid=3&spid=10&ssid=1)
- Doula Care1-877-643-6852
(<http://www.doulacare.ca>)
- Telehealth1-866-797-0000
(<http://www.health.gov.on.ca/en/public/programs/telehealth>)
- Motherisk Information Line1-416-813-6780
(<http://www.motherisk.org/women/index.jsp>)

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