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Summary Report
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Canada

Perinatal care and caring in Nova Scotia northern region

Northern Nova Scotia: Perinatal Care and Caring

Services and support during prenatal, antenatal and early postpartum periods use a significant portion of Public Health Services resources and are critical in the promotion of healthy child development. The first evidence-based cycle set out to determine strategies to increase the effectiveness and efficiency of Public Health Services and supports during the prenatal, antenatal and early postpartum periods (to the sixth week of infancy).

Evidence: In July 1997, 20 enumeration areas were visited. Approximately 4000 households were surveyed and interviews completed with 538 mothers, gathering information on the births of 614 children under the age of 3 years. Data was also collected on the services offered at the three hospitals with obstetrical units in Northern Nova Scotia. Self-administered questionnaires were completed by 98 service providers including staff nurses, public health nurses, social services case workers and counselors, family resource centres staff, and physicians.

Some of the key findings include:

Overall, three out of ten women attended prenatal classes. For mothers in their first pregnancy, two out of three women attended. Attendance was higher among younger women with more education and higher income. Those who went to prenatal classes were 80% more likely to start breastfeeding.

Some 35% of pregnant women continued to smoke an average of 12 cigarettes per day during pregnancy. This was a reduction from the 45% who smoked before they became pregnant. Pregnant women who smoke are eight times more likely to deliver a low birth weight baby, and twice as likely to deliver prematurely compared with one who did not smoke.

One in three infants was never breastfed. Almost half of the breastfed children were taken off the breast before four months, and 61% had been introduced to solids by then.

Two out of three women received free formula samples. Some 38% received them from a health service. Among women who receive samples, breastfeeding is stopped earlier and supplements and solids are introduced at a younger age. A mother who delivered at a hospital where free formula was not distributed was 49% more likely to breastfeed compared with a mother who delivered in a hospital where formula was freely distributed.

Planning and action to date:

Dialogue has been opened up between Pictou County Planned Parenthood and Public Health Services to promote early referral of clients to prenatal classes and to explore having special prenatal classes for young single mothers.

Discussions are underway with Department of Community Services staff to improve the Health Baby Programme for prenatal mothers on social assistance. Using the evidence from the cycle an information campaign was mounted with extensive local, provincial and national media coverage during National Breastfeeding Week , October 1998 and National Non-smoking Week, January 1999.

A package of prenatal information materials has been developed for distribution at regional hospital x-ray departments to expectant mothers when they have their ultra sound assessment.

The Zonta Club of Truro area, an international service club promoting the health and welfare of women and children, has agreed to advocate compliance with the WHO Breastfeeding Code in a letter writing campaign through its members in the Maritimes and across the nation.

The Northern Regional Health Board has asked the three delivering hospitals to review their policy on formula distribution on obstetrical wards. They plan to streamline this policy board wide.

At the health professional level, the Medical Society of Nova Scotia will be updating their policy statement about breastfeeding. A resolution to the Registered Nurses Association of Nova Scotia is also planned, asking them to produce a position statement about breastfeeding.

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