SALT LAKE COUNTY UNPACKED: RIGHTS, RESOURCES, AND EVERYTHING INBETWEEN

LEAVE POLICIES HEALTH INSURANCE AND BENEFITS HOSPITAL PACKING

lealthy

LISTS & BABY ITEMS MUST HAVES POSTPARTUM

Parenthood Welcome To









Issue 1 **PARENTHOOD**

Leave Policies

SLCo Paternity/Maternity Leave Federal Laws

Affording Baby

Average Hospital Costs Baby Check Lists

Feeding Baby

Formula vs. Breastmilk Exclusively Breastfeeding Bottle Nipple Sizes Baby Led Weaning

Nourishing You



The Fourth Trimester

Sleep Baby Blues Post-Partum Depression

Resources

FROM YOUR EMPLOYEE WELLNESS TEAM

Welcome to Motherhood.

This part of life is exciting and thrilling while also confusing and scary. Nine months can pass in a blink of an eye. Our hope is that this booklet will help validate your emotions, offer answers to your questions and give resources for your preparation.

First, remember you are not alone. While your experience is unique, the journey of pregnancy, birth, fostering and adoption has been walked for thousands of years and there are plenty who are ready and willing to offer their support.

Second, knowledge is power. When you arm yourself with an understanding of your rights, the latest research, and the resources available to you, you can better advocate for yourself and others.

Lastly, throughout this booklet, acknowledge that YOU know best. You know yourself and your baby better than anyone. Trust yourself and don't let the world get too loud. We live in a world where every 'right' or 'wrong' answer is just one click away. Try to take a step back, and trust your instincts!

YOURS IN HEALTH,

estyles

SLCo Employee Wellness Team

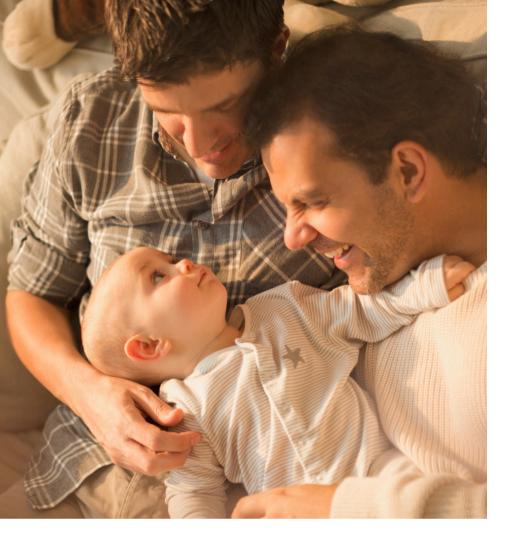




YOU ARE HAVING A BABY: LEAVE POLICIES

Understanding what your next steps should be after finding out that you are pregnant can be daunting and confusing. Here is where you can find the answers to the most common questions when it comes to preparing for maternity/paternity leave at Salt Lake County.





I am expecting or adopting a child. Now what?

The first thing you need to do is report your birth or pending adoption to your supervisor, as soon as is practicable.

From here your supervisors will take the necessary steps to allow the correct administrators to become aware of your situation.

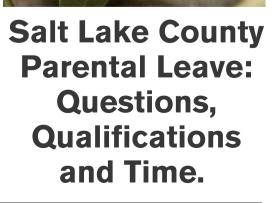
The human resources administrators are then responsible for approving parental leave requests and will require documentation verifying the birth or adoption.

HR FMLA

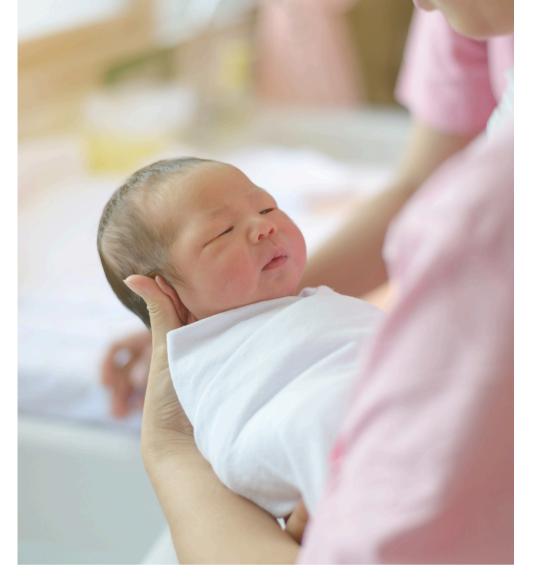
Do I qualify for parental leave?

To qualify for parental leave a Benefits Eligible employee must meet **all** of the following conditions at the time of the birth or adoption:

- The employee must have worked for Salt Lake County for 12 months or 52 weeks (2080 hours) with no break in employment;
- The employee must have worked at least 1,250 hours during the 12-month period immediately prior to the requested leave date (paid leave time does not count toward this requirement);
- The employee must be taking the leave for:
 - the birth of a child and to care for that child;
 - the placement of a child for adoption and to care for the newly placed child.







How much parental leave am I eligible for?

Benefits eligible employees who meet the above stated requirements are entitled to receive six weeks (240 hours) of consecutive **paid** leave.

- The eligible birth mother or parent giving birth is entitled to an additional six weeks (240 hours) of consecutive paid leave immediately after the birth to recover from the physical and medical effects of pregnancy and childbirth.
- Employees may accrue holiday leave for holidays that occur during parental leave.
- Parental leave must commence within six months of the birth or adoption of the child.
- If an employee on parental leave is required to attend a work-related activity, and records paid time, that does not violate the requirement that the leave be taken consecutively.

Confused? Here is the simplified version: benefits eligible employees will receive 6 weeks of paid parental time, *birthing* parents are entitled to an additional 6 weeks, totaling 12 weeks of paid time. Leave must be taken within 6 months of adoption or birth of the child and employees can still accrue holiday leave during parental leave.

Example Email from HR upon Approval of Maternity/Paternity Leave

To Whom it May Concern,

This is to inform you that you have been approved for 480 hours of consecutive paid maternity leave, starting ______, or the date you deliver, for 12 weeks.

As soon as you are able, please send documentation of your child's delivery date (this can be a copy of the birth certificate or your hospital discharge paperwork showing the delivery date).

Remember, paid maternity leave is consecutive starting the date your child is born.

If you need to be out longer, you will need to apply for other accommodations such as ADA or Long Term Disability.

During your period of leave, you are responsible for entering your hours into the timecard system. Please be sure your hours are entered correctly and in a timely manner.

You will use Time Reporting Code "MTRNL" (maternity leave) for the first 240 hours and then "PTRNL" (parental leave) for the remaining 240 hours. Please see the attached Maternal & Parental Leave Timesheet Instructions for directions on how to enter and keep track of allowed time.

Please call County HR/Benefits (385-468-0570) to discuss your benefits during this time, if you have any questions.





MISCARRIAGE AND TILLBIRTH BEREAVEMENT

Lost my baby. What are county leave policies?

We are so sorry for your loss. Our thoughts and hearts go out to you and your grieving family. As a county employee we recognize your need and right to grieve. The following is a list of the county leave policies for these situations.

up to 3 days of bereavement

- In accordance with Utah Code Ann. 10-3-1103, any employee may take up to three workdays of paid bereavement leave in the following circumstances:
 - Following the end of the employee's pregnancy by way of a miscarriage or stillbirth; or
 - Following the end of another individual's pregnancy by way of a miscarriage or stillbirth, if:



Benefit eligible employees may take The employee is the individual's spouse or partner; or

- the employee is the individual's former spouse or partner; and the employee would have been a biological parent of a child born as a result of the pregnancy; or
- The employee provides documentation to show that the individual intended for the employee to be an adoptive parent, as that term is defined in Utah Code Ann. § 78B-6-103, of a child born as a result of the pregnancy; or
- Under a valid gestational agreement in accordance with Utah Code Ann. 78B-15-8, the employee would have been a parent of a child born as a result of the pregnancy.

For Benefits Eligible employees, this bereavement leave following a miscarriage or stillbirth runs concurrently with, and is not separate from, Funeral Leave.

FEDERAL LAWS

Family Medical Leave Act (FLMA) & Fair Labor Standard Act (FLSA)

Who are protected under FMLA and what does it provide?

Eligible employees are entitled to twelve workweeks of leave in a 12-month period for:

- The birth of a child and to care for the newborn child within one year of birth;
- The placement with the employee of a child for adoption or foster care and to care for the newly placed child within one year of placement;
- To care for the employee's spouse, child, or parent who has a serious health condition;
- A serious health condition that makes the employee unable to perform the essential functions of his or her job;

Be sure to work with your supervisor and HR representative, in advance, to get approved for FMLA coverage.

It is estimated that the Family Medical Leave Act has been used over 463 million times since it was passed in 1993.

What is the FLSA?

The FLSA is was created in 1938 as a way to safe guard rights to minimum wage, overtime pay, and child labor laws. It has evolved to protect the rights of full time and part time employees in all sectors of business. This is the act that protects the rights of employees to pump breast milk at work and have the proper break times and location to do so.



Who is required to follow the FSLA in regards to breastfeeding?

The FLSA requires companies larger than 50 employees and who are nonexempt (all companies except airlines, railroads, and moto coach carriers) to comply with this law.

What does this mean for you? Salt Lake County is required to comply with FSLA breastfeeding laws and practices.

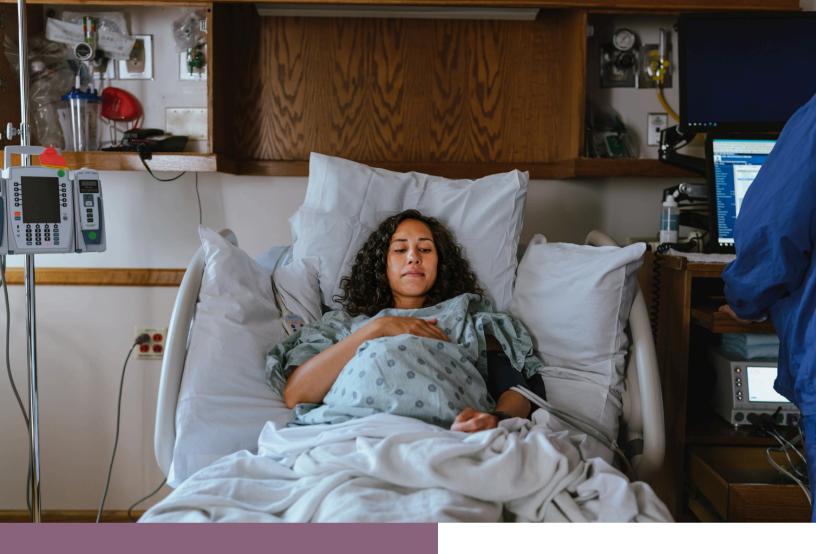


What does the FSLA require of companies regarding breastfeeding employees?

The FSLA requires employers to provide reasonable break time for an employee to express breast milk for their nursing child.

- This must be allowed for one year after the child's birth and each time such employee has need to express the milk.
- Employees are entitled to a place to pump at work, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public.
- US Department of Labor Pumping at Work





INSURANCE, BREAST PUMPS & HOSPITAL BILLS

AFFORDING BABY

Average costs in Utah for prenatal, labor and delivery care Choosing to start or continue a family is already a difficult decision, add the expenses on top, and it can feel down right stressful. However, we want to help you by breaking down the averages of costs across Utah, so you at least have a starting place and giving you some tips on where to start. However, the best place to go to know exactly what your medical costs will be to talk to your insurance and healthcare provider directly.

TIP 1: Often your OBGYN will offer you or be able to provided an expected cost breakdown for your pregnancy journey. You simply have to ask.

TIP 2: You can call the hospital you plan on delivering at and ask for a break down of average costs with and without insurance.

TIP 3: Do your own research on birth methods, as well as possible complications. Knowledge is power, and while we don't want to fear the unknown it is important to be prepared for it.

TIP 4: Have a birth partner, whether it be the baby's father, your life-partner, or even a doula. It is important to have someone in the room that can advocate and support you.



HOSPITAL BILLS

To get started in understanding the cost associated with conceiving and birthing a child, we have turned to the Peterson-KFF Health System Tracker and CDC collection data, to help us first assess the average cost on an uncomplicated childbirth. However, it is important to note that this cost ranges depending on whether or not you have a vaginal or cesarean delivery, if you are insured, and if you take part of a high deductible plan verses a PPO plan. The purpose in presenting this information to you is so you have the most current information available for potential costs related to your pregnancy.

Delivery Type	Average total cost of childbirth	Average out-of-cost for people with large employer group plans
Childbirth	\$18,865	\$2,854
Vaginal	\$14,768	\$2,655
Cesarean	\$26,280	\$3,214

But just knowing the averages is not enough. Because costs fluctuate so much and depends on location and services provided, it is important to try and find all information available to you.

KSL, a Utah based news outlet, conducted research in 2022 by using "the All-Payer Claims Database" to break down the average cost for *vaginal uncomplicated deliveries* across hospitals in Utah.

This research led to eye opening revelations about how the cost of childbirth varies so much by location and hospital. And when considering where to deliver should be factored into the decision.

- Panguitch, Garfield Memorial Hospital: \$10,208
- Tremonton, Bear River Hospital: \$8,074
- Salt Lake City, University of Utah: \$7,894
- St. Mark's Hospital: \$6,677
- St. George, Dixie Regional Medical Center: \$6,135
- Orem, Timpanogos Regional Hospital: \$5,630
- Murray, Intermountain Medical Center \$4,819
- Tooele, Mountain West Medical Center \$2,539

So when looking for which hospital to deliver at, consider calling and asking what their average delivery costs are, as well as what insurance plans they accept.

The best way to keep costs low, are to deliver at a hospital that is considered 'in-network.' This is because insurances will broker deals with the hospitals to help lower your bill. But do not go with simply the closest innetwork hospital, if you have the ability and transportation to shop around at in-network hospitals, try and do so.

Look at the data above, St. Marks and Timpanogos Regional are both Mountain Star Hospitals, and have little variation in the insurances they accept, yet their average delivery costs are a \$1000 difference. So don't be afraid to call the billings department and start asking questions. Ultimately, they work for you and are providing a service to you, and you get to choose where you receive that service.

Another important reminder is that you can always apply for financial assistance through your chosen hospital, as well as talk to them about payment plans. remember that it never hurts to ask questions and see what other resources are out there for you to receive financial help in bringing home baby. And the earlier you do so the better, because once baby is here it is hard to think of anything else.

INSURANCE

The best place to start your journey, is by understanding what benefits are available to you through the county. And while the total cost of your pregnancy and delivery will depend on a variety of variables, the most important one is what insurance you have and what type of coverage you maintain. Since those are personal and individual choices, below you will find a list of all insurance plans and additional benefits the county offers along with their contact information.

Please do not hesitate to reach out to HR Benefits or any of the other resources available and listed for you. They are there to answer your questions and give you guidance on whatever is troubling you.

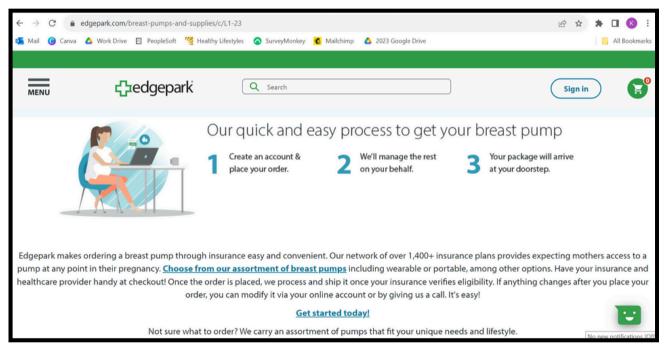
Plan	Phone	Email
Select Health Insurance	801-442-5038	www.selecthealth.org
PEHP Insurance	801-366-7555	www.pehp.org
Fidelity Health Savings Account	800-544-3716	www.netbenefits.com
ASI Flexible Spending Accounts	800-659-3035	www.asiflex.com
Vest Employee Assistance Program	385-205-6789	www.vesteap.com
Short-Term Disability-The Standard	800-368-2859	
Creative Learning Center Childcare	Government Center: 385-468-7133 District Attorney: 385- 468-7751	htpp://clautah.net/





BREAST PUMPS

If you are choosing to breastfeed and pumping may be in your future. It is important to note that most insurance plans while pay for or at least part of the cost of a breast-pump. To know which pumps are covered and how much other ones will cost. Edgepark is your best resource. Edgepark is the easiest way to get a breast pump through insurance since they do most of the work for you. All you need to do is create an account, pick your breast pump and they do the rest including contacting your doctor, getting a prescription and making sure insurance covers the pump, once all that is done they send it right to your door.





Use the QR code to link to the website and find out if you are eligible for a free breast pump.





WHO CAN JOIN?

ALL SLCo employees & spouses or adult designees who are eligible for benefits (i.e. merit, appointed, time-limited)



HOW DO I JOIN?

Sign-up for Healthy Lifestyles by scheduling a biometric screening on the slco.org/healthy-lifestyles or call 385.468.4062





HOW DO I PARTICIPATE?

Start by tracking health behaviors for points each month on WellSteps & joining Healthy Lifestyles challenges, events, and workshops.

HOW DO I RECEIVE MY CASH REBATE?

\$250: \$200: 900+ pts. 700 - 899 pts.

\$200: \$175:

450 - 699 pts. <450 pts.

\$50:

Rebates are based on a points system. The more points you accumulate the higher the rebate. Your rebate will be included in the SLCo employee's paycheck as a taxable benefit after your annual biometric screening.



AND JOIN OUR PARENT SUPPORT GROUP



VISIT HTTPS://SLCO.ORG/HEALTHY-LIFESTYLES/ OR SCAN THE QR CODE TO REGISTER FOR HEALTHY LIFESTYLE



WHAT TO EXPECT & HOW TO PREPARE

"Parenthood: a constant battle between wanting them to stay little and the love of watching them grow. It is wishing to rewind time, while begging for more. It can be a struggle. It can be confusing. But what a beautiful mess it is" - Scary Mommy

Y

ou've taken the test and that pink little line is staring up at you, confirming your hopes and suspicions. But now what? What does the

next 10 months actually look like? When should you call your doctor? How often are these appointment going to happen? No stress, we have got the answers to these questions, and list to help you know how to prepare and what to pack.

The most important thing is you make sure to get pre-natal care. Whether you choose to do so via Midwife or OBGYN, it is important that a professional is watching over you and baby. The Office on Women's Health has found that women, ho choose to forgo, prenatal care are 3 times more likely to deliver a low-birth weight baby and that baby is five times more likely to die. So, we cannot stress enough the importance of prenatal care.

To the right you will find a breakdown of common appointments, what to expect during them, how often you will be seen and common causes for concern. This cheat sheet has been adapted from Valley Women's Health here in Utah.

	Weeks by Gestational Age	Appointment Frequency	Typical Appointment	Typical Tests/ Procedures	Concerns and Reasons to Contact Us
Appointm Typia Scher betw 8 and 12 V 0 12 - Wer 0 12 - V 12 - V 12 - V 12 - V 12 -	2 - 12 Weeks First Appointments are Typically Scheduled between 8 and 12 Weeks	Approximately Every 4 Weeks	- Bedside Ultrasound - Complete Physical - Review of Medical History - Establishment of Obstetrical Care	- Lab Work - Pap Smear - Gonorrhea and Chlamydia Testing - Urine Testing	- Miscarriage - Bleeding - Pelvic Pain - Severe Vomiting
	12 - 18 Weeks	Approximately Every 4 Weeks	- Heartbeat Check - Blood Pressure - Weight - Discussion with Provider	- Quad Marker Screen - Gender Check* (see below)	- Bleeding - Abdominal or Pelvic Pain - Heavy Discharge or Pelvic Pressure
	19 - 28	Approximately Every 4 Weeks	- Heartbeat Check - Blood Pressure - Discussion with Provider Regarding Any Issues		- Bleeding - Abdominal or Pelvic Pain - Frequent Abdominal Cramps
	Weeks	20 - 21 Weeks (Ultrasound)	- The ultrasound replaces your monthly appointment	- Total Anatomy Ultrasound including Gender Check	
Ś		24 - 28 Weeks		- Gestational Diabetes Test	
e t t a s f	28 - 36 Weeks	Approximately Every 2 Weeks	- Heartbeat Check - Blood Pressure - Discussion with Provider Regarding Any Issues	- Any Non-Stress Test - AFI's - Ultrasounds Needed During Pregnancy	- Bleeding - Abdominal or Pelvic Pain - Frequent Abdominal Cramps - Persistent Headache - Visual Changes - Decreased Fetal Movement
	<mark>36 - 42</mark> Weeks	Approximately Every Week	 Discussion About What to Expect for Labor Cervical Checks in the Last Month of Pregnancy Stripping Membranes Evaluation for Other Obstetrical Issues 		 Persistent and Consistent Hard Contractions Bleeding Leaking Fluid Persistent Headache Visual Changes Decreased Fetal Movement
t		36 Weeks		- GBS Culture	
1 5 1	Post Partum Visit	6 Weeks After Delivery or 2 Week Visit if C-Section	- Physical Exam - Incision Checks - Evaluation		- Signs of Depression - Breast Infection - Heavy Bleeding

You've been to all your appointments. You are in the final stretch of pregnancy...now what??

Hospital Check-List

Time to start packing! We have everything you'll need for your stay in the hospital broken down. All you need to do is grab a pen and start checking!

For Admin/Murses O Driver's License/ID

- Insurance Card
- O Birth Plan

*If you are a mama that is passionate about your birth looking a certain way, it is important that you communicate that with your medical provider/team. You are your best advocate. Print and bring a few copies: one for your chart. some for your labor nurse(s) and perhaps another to tape up in your delivery room. It's a good idea to highlight some key points for quick reference.



For Mana

Pillow & Blanket:

*There is something about having your own pillow and blanket that adds another level of comfort during and after labor. Hospital temperatures can be cold, so bring a blanket you know will help you feel the most comfortable during this time of transition.

- O Toothbrush & toothpaste
- Hairbrush Ο
- Dry shampoo (or shampoo & Ο conditioner if you plan to shower at the hospital)
- Face wipes/washcloth \bigcirc
- Deodorant \bigcirc
- Hair ties Ο
- O Glasses/contact lenses
- Lip balm/lotion Ο
 - Robe and PJ's *Non-restrictive waistband - Avoid clothing too tight after labor or C-section
- Lightweight, loose fitted bottoms
- Supportive postpartum bra/nursing bra
- Cozy socks & slip on shoes \bigcirc
- Extra-long cell phone charging cord
- Reusable water bottle & snacks *You don't need to go overboard with snacks, but you'll be happy you brought a few things to eat in between meals.

- Pillow and blanket
- Snacks
- Toiletries
- Reusable water bottle
- PJ's and change of clothes
- Laptop/tablet
- Phone/camera

For Baby

- A car seat
- Going home outfit *2 different sizes (newborn & 0-3 months)
- Your pediatrician office \bigcirc information
- Bottles (if you plan to use) О

tional Extras

- ortable speaker Some expecting mama's like to deliver to music. If you fall into this category, you can create a birthing playlist and bring a portable speaker to enjoy your tunes.
- O Entertainment: Book/ipad/laptop
- O Gum/hard candy/gatorade
- O Bath towel

*If you are craving a shower after labor, you can take one! Our advice to you is bring your own soft, lush towel.

O Haakaa Silicone Manual Breast pump

*Nice for catching the let down on the other breast as you feed your baby.

tot V leed

X Dressy clothes *keep it simple and comfy for yourself

- Diapers or Wipes *The hospital will provide more than enough for your stay and extra to take home. So unless you have a specific preference you do not need to bring any of your own.
- 🗙 Formula *If you are formula feeding, the hospital will provide enough to get you through your stay and will often send you home with at least 1 days worth.

Partum Care for Home

- O Dermoplast
- Peri bottle for cleaning
- O Disposable underwear/adult diapers
- Tucks pads
- Nipple care:

*Nipple cream: ask your doctor to write you a prescription for the medicated cream, before you leave the hospital. And you can have your partner/support person can pick up on your way home.

**For the dermoplast, peri bottle, disposable underwear and tucks pad, these will all be provided for you at the hospital, we recommend bringing a reusable grocery bag and stocking up on these while you are at the hospital and bringing them home with you







BUSTING FORMULA AND BREASTFEEDING MYTHS

FED IS BEST

Opinions, opinions. It seems everyone has an opinion when it comes to how YOU choose to feed YOUR baby. With so many influencers and mommy bloggers telling you the how, what and why, lets spend some time busting myths and giving you all the information, so you can decide how YOU want to feed YOUR baby.

And remember, there is no right or wrong answer. Do what is best for your family, your mental health and your baby. NO GUILT REQUIRED.

Myth #1: Baby Won't Bond With You As Closely If You Formula-Feed

First, parents using newborn formula and baby formula aren't doing anything wrong. And formula-fed babies can develop just as well as their breastfed peers. In fact, baby formula can be crucial due to medical necessity and social barriers. Because while breastfeeding is great for babies, it's not always possible, and almost never easy. Second, bonding with baby comes down to two important factors: skin-to-skin contact and facial recognition, not just baby's connection to your breast. So don't worry that a bond won't form simply because you're bottle-feeding.

Need some tips for establishing that cherished attachment while using a bottle?

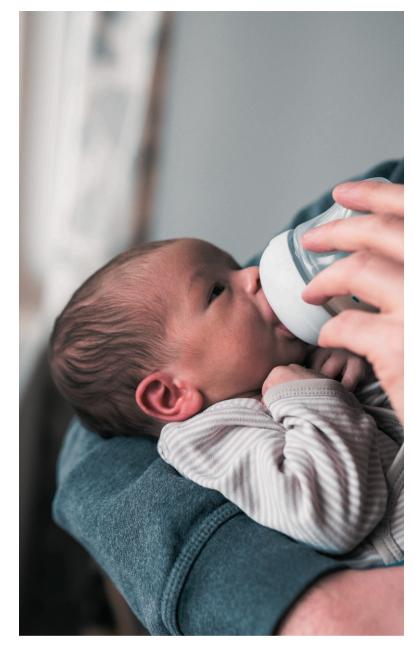
- Nina Pegram, PNP, IBCLC and a lactation consultant at SimpliFed, suggests a couple of ideas. "Practice skin-to-skin contact, look directly into baby's eyes and talk or sing to baby while you feed them a bottle...Whether it includes a bottle or a breast, never fear, bonding will occur."
- In fact, one benefit to bottle feeding is both partners can create special bonding time by practicing skin to skin contact during bottle feeds.

According to a 2016 study from the Journal of Perinatal Education. 46% of mothers were combining formula and breastfeeding within 72 hours after birth.



Myth #2: Formula-Fed Babies Won't Be as Smart as Breastfed Babies

Infant formulas now include critical brain-boosting ingredients like DHA and ARA, two of the things that used to give breastfed babies an edge over their formula-fed counterparts. And while you can still find studies that assert that breastfed babies maintain an advantage, you can find others that state the relationship is inconclusive.



In one telling study published in the British Medical Journal, researchers looked at IQ levels of siblings with the same mother where one breastfed and the other did not, and found that there were no "cognitive advantages of breastfeeding."

"A child's intelligence level is influenced by a variety of factors, including many things that are largely outside of parental control, such as genetics," says Crystal Karges, RDN, IBCLC, a maternal child health specialist at Crystal Karges Nutrition. "There is no scientific evidence to suggest that formula-fed babies won't be as smart as breastfed babies."

Myth #3: Mixing Feeding from the Breast and Bottle Feeding Will Cause Nipple Confusion

Any issues with baby fussing or refusing the breast or bottle may just come down to baby's nipple preference, rather than nipple confusion. You can always experiment with different shaped nipples to see what works best, but for starters, try a wide-mouth, slowflow nipple to help mimic how they would feed at the breast. You'll also want to adjust baby's position to make sure they can pace their feed. "If milk is dripping out of the infant's mouth, it's flowing too quickly, so sit them up a bit more," Pegram says.

Ultimately, feeding from both the breast and bottle will not hinder baby's ability to eat, and it mostly comes down to finding the right nipple that encourages your baby to eat.



Myth #4: Supplementing with Formula Will Make Your Milk Dry Up

While this is far from a universal truth, it's not entirely false. That's because breastfeeding is a supply-and-demand process, and your body makes more milk depending on how often you breastfeed (or pump). "So in theory, if you're not draining your breasts when your baby takes the formula supplement, this can be true. Your body will think that the baby got all of the milk that it needs" and may scale back on production, Pegram explains. If your goal is to breastfeed exclusively for any amount of time (and the American Association of Pediatrics (AAP) recommends exclusively breastfeeding for baby's first six months), you'll need to keep supplementing with formula to a minimum, and if possible try to pump anytime you supplement.

Still, giving baby small amounts of formula does not mean your milk will dry up. "It can actually be the complete opposite in some cases," says Kathy Murphy, IBCLC, another lactation consultant at SimpliFed. "By supplementing, we can often give the baby the energy and calories needed to become a more efficient and vigorous feeder at the breast, especially if they've been struggling with calorie intake and weight gains." In fact, a recent study found supplementing with a limited amount of formula for babies with early weight loss can actually help with breastfeeding outcomes when baby gets older.

Myth #5: Formula Lacks the Complete Nutrition Baby Needs

While formula isn't an exact replica of a mother's milk, there's no need to worry if you end up formula-feeding when baby arrives—today's formulas are a top-notch alternative to breast milk. According to Karges, "infant formula is a complete and suitable nutrition source for babies. It's intended as an effective substitute to breast milk and is formulated to mimic the nutritional composition of breast milk." To make sure of this, the manufacturing oprocess is highly regulated, and infant formulas have to include proper amounts of water, carbohydrates, protein, fat, vitamins and



minerals (per established guidelines) to meet a baby's nutritional needs. As long as baby isn't overly fussy, excessively gassy or spitting up frequently, and is growing according to your pediatrician's recommendations, it's a good sign your child is getting enough nutrition regardless of whether you are breastfeeding or formula feeding.

EXCLUSIVELY PUMPING

Advantages and Disadvantages to exclusively pumping

With many full-time employees, a decision has to be made to supplement with formula or expressed breastmilk. When the decision to solely use breastmilk is made, another decision to whether or not exclusively pump is needed. Exclusively pumping means the baby is never laid at the breast to feed, instead the mother uses a pump (either mechanical or hand expressed) to express milk, and then the baby is fed via bottle.

Exclusively pumping, can be a wonderful decision and a necessary decision for a variety of reasons. But just like formula . there are a lot of differing ideas out there. So we have combined all the advantages and disadvantages we could find and abbreviated them, so you could make an informed decision for your family.

Advantages to Exclusively Pumping

<u>Bonding:</u> Breastfeeding requires privacy and can draw your attention away from other family members. Pumping allows your baby to feed without taking you away from your family.

<u>Someone else can help</u>: Unlike breastfeeding where only the mother is involved, pumping allows you to give charge of



feeding to someone else while you rest or do other things.

<u>Uninterrupted work:</u> With exclusive pumping, you can work a demanding job and still manage to feed your baby on breast milk.

<u>Protect your milk supply:</u> If you are unable to nurse for a period of time, pumping helps to keep your milk levels in check.

Disadvantages to Exclusively Pumping

Expensive: Most good pumps are a bit pricey, especially if you need a hands free one. When you consider other costs, like getting bottles and sanitizing products, breastfeeding from the breast can be significantly cheaper.

<u>A lot of extra cleaning</u>: The extra tools used for pumping need regular cleaning to make sure that you and and your baby are protected from germs.

<u>Time-consuming:</u> As opposed to picking up your baby and holding them to your breast to nurse (feed), pumping involves additional tasks, like thawing frozen milk you stored in the freezer.

Lifestyle change: Because it is recommended that you pump at least once, e every night to ensure a good milk supply, waking up every night can change your sleep patterns. Also, you may find it boring to wake up every night to pump all by yourself.

Remember, whatever you decide, it is your decision and there is not right or wrong way to feed your baby.



FEEDING BABY:THE WHEN AND WHAT OF BOTTLE NIPPLE SIZES AND STARTING SOLIDS

Bottle Nipple Sizes

There is no "right" time to change your baby's nipple level. Some babies are content using a 0 flow or size 1 nipple throughout their feeding days, while more aggressive eaters may advance sooner than expected.

Your baby will offer signs if the flow is not fast enough and it's time to move up a level. Typical signs include your baby:

- Taking longer to finish eating
- Becoming fussy or irritated while eating
- Falling asleep during feeding

With newborns, especially premature babies, the nipple flow rate can actually be faster than your infant can tolerate. If your baby is exhibiting any of these signs while eating, you may want to try a slower flow (lower level) nipple. Some signs that you need to size down are:

- Gulping
- Hard swallowing
- Coughing
- Choking/Gagging
- Milk dripping from the mouth
- Refusing the bottle.

So what are these sizes? Well let us break them down for you, so you can best decide what nipple size best fits your baby.

Preemie Nipple, 0 months+

- Designed for premature babies and babies who have a slower feeding preference.
- Slow flow is great for breastfed babies when switching between bottle and breast; mimics the slower flow of breastfeeding.

Level 1 Nipple, 0 months+

• Ideal choice for your infant if she is feeding well and shows no signs of feeding challenges.

Level 2 Nipple, 3 months+

- As a baby's feeding develops and they are taking a longer time feeding from a Level 1 nipple, many parents choose to move up to a Level 2 nipple.
- Consider Level 2 if your baby is accepting early solid foods, or if their pediatrician has recommended thickening their milk.

Level 3 Nipple, 6 months+

- As a baby's feeding develops and they are taking a longer time feeding from a Level 2 nipple, many parents choose to move up to a Level 3 nipple.
- Consider Level 3 if your baby is sitting up, if they are eating solid foods, or if their pediatrician has recommended thickening their milk.

Level 4 Nipple, 9 months+

- As a baby's feeding develops and they are taking a longer time feeding from a Level 3 nipple, many parents choose to move up to a Level 4 nipple.
- Appropriate if your child has shown consistent feeding with no difficulties, and is taking larger amounts at the breast and bottle.
- Consider Level 4 for your baby if they are eating finger foods, drinking from a sippy cup, or if their pediatrician has recommended thickening their milk.

Y-Cut Nipple (9 months+)

- Consider the Y-Cut nipple if your pediatrician has recommended thickening your baby's milk.
- Accommodates thicker liquids and cereals.

Starting Solids

Pediatrician Recommendations:

If your baby is able to hold their head and sit, then your pediatrician may recommend starting solids between 4-6 months. This is completely acceptable if you feel comfortable and your baby is ready. However, if you are feeling apprehensive or unsure another option is something called baby led weaning.

Baby Led Weaning

Dr. Kimberly Churbock, MD and pediatrician defines baby led weaning as, "Parents and caregivers ... follow[ing] a baby's lead. This means watching for signs of developmental readiness and, when a baby is ready, allowing them to self-feed."

Babies are also skipping many traditional baby foods such as purees, Dr. Churbock says. "With baby-led weaning, instead of buying or <u>making specific foods</u> to feed your baby, you're preparing the same meal for the whole family, with modifications as needed for your newest eater."





Some of the benefits of baby led weaning are:

- It saves time and money. Dr. Churbock explains, " instead of buying or <u>making</u> <u>specific foods</u> to feed your baby, you're preparing the same meal for the whole family, with modifications as needed for your newest eater."
- Babies experience valuable social interactions.
- They are exposed to diverse foods.
- It helps hone important developmental skills.

So when can you start baby led weaning? When they display certain signs of developmental readiness (usually around 6 months) including:

- The ability to sit upright, with minimal to no support from a parent or caregiver.
- Reaching for an object and then picking it up and bringing it to their mouth — and a diminishing tongue-thrust reflex (that's the term for when they use their tongue to spit something out of their mouth).





First Foods

Great first foods

Cut soft foods into "finger-sized" slices that are made for grasping. The goal is for the "food [to be] firm enough that they can pick it up and hold it, long enough that they can have a little portion sticking out of their hand that they can see, and soft enough to gum and chew." Examples of these types if food could include:

- Spears of soft ripe fruits, such as banana, pear, avocado, kiwi and mango.
- Strips of roasted, baked or steamed vegetables, such as sweet potatoes, carrots and squash.
- Ground meat or soft, shredded strips of meat that you can move your fingers through.

Foods to avoid

Because baby-led weaning exposes babies to foods with different textures, you should avoid serving up foods that are choking hazards. These include:

- Firm, round foods, such as whole berries and whole grapes.
- Hard, crunchy foods like tortilla or corn chips, popcorn, nuts.
- Raw, hard-textured vegetables like carrots.
- Peanut butter offered alone, which can be too sticky for babies to safely manage.



Baby Led Weaning Recipe Ideas

3 Ingredient Banana Oat Pancakes

These 3 ingredient pancakes are full of protein, potassium and fiber! Top with your favorite fruit and pure maple syrup for an extra delicious breakfast!

Ingredients :

- 2 ripe bananas
- 2 eggs
- 1 cup oats
- Mix-ins and toppings of your choice (vanilla, cinnamon, berries, nuts, etc.)

Directions:

- 1. Preheat skillet on low heat.
- 2. **Mix** bananas, eggs, oats and mixins in a blender until smooth.
- 3. Grease your skillet and poor batter onto pan (make pancakes small - medium size).
- 4. **Flip** and cook the other side until done; repeat for the rest of the batter.
- 5. **Serve** with syrup, butter, peanut butter or your favorite pancake toppings.
- 6. Enjoy!



Prep Time: 10 minutes

Cook Time: 15 minutes

Servings: 2-3

Notes :

- If you are using any mix-ins like walnuts or blueberries, you can push them into the uncooked side of the pancakes before flipping.
 Do not mix them with the batter because they are more likely to fall apart.
- Ask Alexa to play Banana Pancakes by Jack Johnson and enjoy a delicious breakfast!



Prep Time: 15 Minutes

Cook Time: N/A

Servings: 10

Notes :

• Fruit can be chopped 1 day in advance (except banana) and dressing can be made 1 day in advance and kept separate and chilled, toss together just before serving.

Honey Lime Rainbow Fruit Salad

Colorful food is the yummiest food! Topped with a honey lime dressing this salad will have you drooling every time.

Ingredients :

- 1 lb fresh strawberries, chopped
- 1 lb chopped fresh pineapple,
- 12 oz fresh blueberries
- 12 oz red grapes, sliced into halves
- 4 kiwis, peeled and chopped
- 3 mandarin oranges
- 2 bananas, sliced (optional)
- DRESSING:1/4 cup honey
- 2 tsp lime zest (zest of 2 medium limes)
- 1 1/2 Tbsp fresh lime juice

Directions:

- 1. Add all fruit to a large mixing bowl.
- In a small mixing bowl, whisk together they honey, lime zest and lime juice.
- 3. **Pour** over fruit and toss to evenly coat, serve immediately**.

Southwest Butternut Squash Casserole

You had me at butternut squash... The southwest flavors paired with the butternut squash flavor is heavenly.

Ingredients:

- 1 lb frozen butternut squash, cubed (about 3-4 cups)
- 1 large bell pepper (sliced or chopped)
- 1 Tbsp olive oil
- 1 tsp paprika
- 1/2 tsp garlic powder
- salt/pepper (to taste)
- 1 15 oz. can black beans (drained)
- 1 cup cooked ground turkey (optional)
- 1 cup shredded cheese
- 1 cup chopped kale

Prep Time: 5 Minutes

Cook Time: 30 Minutes

Servings: 4

Directions:

- 1. Preheat the oven to 375 degrees F.
- 2. **Place** the squash and pepper in the casserole dish and drizzle with olive oil.
- 3. **Bake** for about 20 minutes, or until squash just begins to soften.
- 4. **Drain** any extra liquid in the casserole dish.
- 5. **Mix** in the paprika, garlic powder, salt and pepper, black beans, cooked ground beef, half of the cheese, and kale to the casserole dish.
- 6. **Top** with remaining cheese.
- 7. **Bake** for another 10 minutes (or until everything is soft).
- 8. Serve and enjoy!







e all do it. We have this tiny new baby in our arms that takes up all of our thoughts, time and energy. We are so focused on providing for

them that we forget to provide nourishment for ourselves.

Here is your first reminder that you matter! And you deserve and need to take care of yourself. This starts by first throwing out any and all ideas of 'bounce back culture.' Taking care of yourself does NOT mean trying to fit back into those pre-pregnancy jeans, or getting back to that pre-baby weight. In fact we highly recommend throwing out your scale.

Taking care of yourself, means learning how to love and appreciate your post-partum body. It means respecting your body for all it has accomplished in the last 10 months. Here are a couple of reminders:

You are worthy of your body. You are beautiful. You deserve respect. You are amazing. You deserve nourishment.



Bounce back culture would tell that you need to focus on shrinking your body. We are here to tell you, you need to focus on nourishing your whole body, starting with your mind.

Nourishing Your Mind

Start by nourishing your mind. Throw out negative thinking, and replace those thoughts with truthful, positive statements.

"My body fed, housed and protected a baby for 10 months, that is incredible."

"I did one of the hardest things on this earth, I had a baby."

Take time each day thinking about your experience over the last 10 or so months, think about your experience now. Consider bringing meditation into your routine, a great time to do this is while feeding baby before bed, or in one of the early morning feeds before the rest of the house has woken. "You are braver than you believe, stronger than you seem, smarter than you think, and loved more than you'll ever know." –A.A. Milne

As you nourish your baby, close your eyes and nourish your mind. Spend time quieting the outside world, and reflect on how you feel. Reflect on the positive and the negative and find ways to honor those negative thoughts and experiences, while also releasing yourself from them, and giving yourself grace and love. As you begin to nourish your mind, you may discover ways you want to nourish yourself physically.

Nourishing your body.

Nourishing your body, comes through several means. The first we are going to discuss is an intuitive eating principle, honoring your hunger.

Honoring Your Hunger

No matter how you gave birth, your body just underwent an extreme amount of trauma. It needs food to fuel its recovery and aid in its healing. If you have chosen to breastfeed, your body is still providing nutrients for 2 bodies, and one that is growing at an incredible rate, you need calories and nutrients to aid in your baby's growth. Now is not the time to start a diet, count calories or worry about any of that.

Instead listen to your body, eat when you are hungry, stop when you are satisfied. And eat foods that you enjoy, and that taste and feel good. If



you are reading this before babe, try to consider meal prepping. There are a ton of amazing recipes out there that you can prep and freeze ahead of time, to make meal time much easier.

If babe is here, consider buying more ready prepared snacks, such as mini cucumbers and peppers, preportioned hummus cups, precut meat and cheese for quick protein, and yogurt with granola. All of these are easy to grab and can provide quick and easy snacks.

Also consider simplifying meal time with pastas, pre-cooked meats, hard boiled eggs and quick salads. If cooking is not your favorite, it may be time to enlist the help of your partner and turn this task over to them.

Gentle Movement

Movement, is a great way to nourish your body. We aren't talking about

going hard at the gym. We are talking about respecting your body and all it has done. Yoga and core exercises are a great slow way to start. Walking every day and stretching and moving our legs. We spend a lot of time sitting and feeding baby, finding time for intentional *gentle* movement, can help our mental health and help our body recover.

Getting Outdoors

And last but not least, part of nourishing yourself, is taking your body outside to experience the sun. You don't need to be outside for hours, even 10 minutes can do wonders for our mind and health. So try and get outside everyday.

Remember, you just performed an incredible feat. You brought a baby into this world and you deserve to nourish yourself.

Car Seat Safety

Car Seat Safety is often at the fore front of all parents minds, but there is so many different types of car seats and recommendations, it is hard to know what it right or wrong. When it comes to strapping your car seat in it is incredibly important that everything is latched correctly and that the straps are tight enough around the child. It is so important that Salt Lake County has an entire webpage with recommendations and locations on where to get a fit test. Here are the county's recommendations:

A properly fitting, properly installed car seat is essential to a child's safety while riding in a motor vehicle. Follow these tips to protect your most valuable cargo!

- Select a car seat based on your child's age and size.
- Select a car seat that fits your vehicle.
- Read the owner's manuals for your vehicle and your car seat so you understand where and how to properly install the seat.
- Keep children in the back seat until age 13.
- Keep children in a properly fitting car seat until they're 57 inches tall.
- · Ensure that your car seat has not been recalled
- When installed correctly, a car seat should not move more than one inch side-to-side and front-to-back.
- Attend a car seat installation class or schedule a one-onone safety check with a certified car seat technician to ensure your car seat is installed correctly.



- You should not use a car seat: older than 6 years past its expiration date (usually stamped into the plastic) that has been involved in a crash (even if the car seat appears unharmed—there could be internal damage that decreases the safety of the seat)
- We do not recommend using a secondhand car seat unless you know the full history of the seat (meaning that it has not been involved in a crash, is less than 6 years old, and is not past its expiration date).

Car Seat Fit Tests:

The county also offers car seat fit tests where you can find a local expert to make sure that the car seat is installed correctly and is the correct fit for you child, There are a few ways to do this. During the summer months the county offers drive-through safety checks. They typically take 20 minutes, and you and the child must be present. You can also schedule a free one-on-one safety check in West Jordan by calling 385-468-5284. And then lastly, the Utah Department of Public Safety maintains a list of car seat inspection stations organized by county and city.

The Law: Legally children need to be rear facing until 2, forward facing in a 5 point harness until 4, and in a booster until age 8



Car Seat Safety Myths and Facts

You need to flip your child forward facing on their 2 year birthday

• Myth: Studies have shown that it is best practice to rear face until age 4 because of the development of the spine. However, rule of thumb is to max out your convertible car seat, so do not flip them forward facing until the have maxed out either at height or weight (for some car seats this isn't until 40lbs).

When their legs get scrunched up, it's time to move them forward facing

 Myth: Legs bend much easier than the spine. Kids are happy to throw their legs over the sides of their car seats or sit crisscrossed. Either way when it comes to a crash rear facing is always safer if they have not maxed out their rear facing car seats.

My kid is big enough for the front seat.

• Myth: It isn't about the size of the child, it is about the strength and density of the bones. Most car manufactures place warnings about anyone under the age of 13 sitting in the front seat.

Car Seat Covers/ Strollers are Safe

• Myth: You might be tempted to throw a blanket or even buy a specific car seat/stroller shade to keep your baby out of the sun and while it seems like a good idea, it has come to light that this can be quite dangerous. In a test done by child safety expert, Michelle Pratt, and founder of Safe in the Seat, after using 3 different shades and one stroller with just the built-in shade, the car seats all exceeded over 100 degrees Fahrenheit within 30 minutes of direct sunlight. Best practice? Leave the covers off, and avoid the sun when possible.

For more myths visit these websites: https://www.hopkinsallchildrens.org/ACH-News/General-News/Car-Seat-Safety-Facts-and-Myths https://safeintheseat.com/rear-facing-car-seat-myths/







CONGRATULATIONS!! You have a new little baby in your life, and your success in bringing them into this world, no matter how it was done, deserves celebration. You may be still riding the endorphin high that can come with holding that small bundle in your arms for the first time, or you may be in utter survival mode and feeling all the emotions that feel overwhelming and confusing, or maybe you are somewhere in the middle experiencing them both. No matter where your emotional state is we want to first normalize your experience. Everyone experiences post-partum differently, but that does not make your experience wrong, you are normal. Now let us introduce you to a concept you might now be familiar with. It is called the fourth trimester.

The Fourth Trimester

The fourth trimester, refers to the 12 weeks after baby is born. It is a time where you and your baby goes through huge adjustments. The fourth trimester involves you moving through many stages and changes fairly quickly, both hormonally, emotionally and physically. On top of the movement through all these rapid changes, you are learning how to become a mother to your newborn, whether this is your first, and everything is new, or your 5th where you may feel like a veteran, this newborn brings so many changes with it. This period of life also involves you learning how to care for your newborn and learning how to function as a changed family unit. This is also the time that your newborn is learning how to function outside the womb, and is learning how to receive it's daily needs and how to express what they need. It is a time of great change for everyone.

Because of all these changes it is incredibly important that you learn how to take care of yourself, as now your time is not only just yours anymore. This part, speaking from experience, is hard. But, however difficult - IT IS VITAL. With that being said, we will be talking about some things that don't necessarily get talked about as often, such as sleep, visitors. baby blues, post-partum depression, anxiety, bodily changes, and regaining even ground regarding your mental health and well-being.

SLEEP



Sleep

As you are reading this , you are probably finding yourself saying, wow do they even get it. And yes, as one mother to another, I hear you. Sleep is so hard to find these days - far and few in-between. Or maybe you are sleeping but it is constantly being interrupted by that little precious baby that is basically your 24/7 boss. Dictating your every move.

Every new parent learns quickly that babies have different time clocks than the average adult. Our hope is to provide you a few helpful tips to add to your parenting tool kit. A typical newborn wakes up every 2-3 hours and needs to be fed, changed and loved on. If this is your first baby, this ticking time clock can be very overwhelming and exhaustion happens very quickly.

You may not get a solid 8 hours of sleep for several months, as daunting as that phrase is, you will survive. There are some helpful tips that I am going to share that will help you not only survive, but thrive through this time period.

In the first few weeks, if you have the luxury, let someone else take care of



the all of the other responsibilities other than feeding your baby, and taking care of yourself.

If you are in a situations that doesn't permit for that delegation of responsibilities, please sit down now, and make a priority list.

Write down things that you HAVE to do to maintain health and safety for you and your baby, and then list out the other WANT to do. This way, when things start feeling overwhelming and you feel like you are not doing enough, you will be able to go back to your list that says: HAVE TO DO - maintain health and safety for me and my baby, and when you check that off, it will assure you that everything else is just 'icing on the cake' and that you are CRUSHING IT, at this whole new mom thing.

Examples of HAVE TO DOs:

- Eat- 3 meals a day
- Sleep 8 hours within a
- 24 hour period (this WILL be broken up but strive for 8 hours total a day)
- Shower- 3 times a week
- Clean dishes-once a day

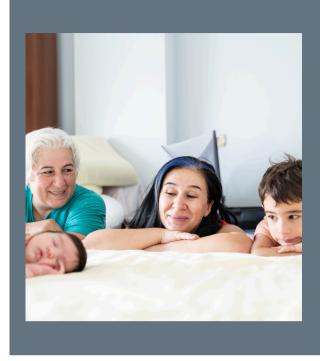
Laundry-once a week

Examples of WANT to DOs:

- Put away dishes
- Clean the house- sweeping, vacuuming, wiping things down
- Shower everyday
- Get dressed

Another important tip is to sleep when you can. This may be only a few minutes of rest several times a day, but these minutes can add up.

I remember that I was given the advice of 'sleep when the baby sleeps' as a new mom and thinking, 'Oh yeah, no way am I going to be able to do that, nor would I want to. I still have to maintain my life'. When you start thinking this way - please refer back to step number one. Please do this one thing for you - sleep when you can.



Visitors

It is nice to have visits from friends, family and loved ones, but make it knowing that you WILL NOT be entertaining them. It is so hard to fight the need to entertain when you have guests over, but fight it.

Set yourself up for success, and if possible set up expectations early on. Visitors can be wonderful, they want to love on your new babe and help you. So don't be shy (if you are up for it) inform them that you would love to have them over, if they are willing to abide by your rules (no kissing baby, washing their hands, and no coming over with even a sniffle), and with the intention to HELP you.

So when they ask 'is there anything I can do for you?' respond, yes! Ask them to watch baby while you sleep, or make you a sandwich while you feed baby, or to do your dishes. Don't hesitate to ask for help. We promise it will help.

You need this, your body needs this to heal, your mind needs this to continue to learn and process and care for not only just you but for your baby as well, you need to reset, and sleeping is going to do just that even if it is just for a few moments.

This will look different for everyone, if you are a first time parent, and have the opportunity to take the full 12 weeks off, please, please, please follow the advice of sleep when the baby sleeps. If you are a parent to more than one child, you have someone else other than the newborn you also have to keep alive, this might be a good time to give yourself some grace and throw out some of your rules. If you are minimal screen time family, it might be a good time to break that rule and give your other child and hour or 2 while the newborn sleeps so you can rest your eyes. It might also be time to call in reinforcements, find yourself a tribe and reach out for help. Send your kiddo on playdates, so you can sleep, hire a babysitter for a couple hours a week so you can sleep. Ask your partner for additional help, so you can get some rest. Sleep is necessary and pride is not worth risking your sanity, so please ask for help.

Save yourself steps and time - have your baby's bed near yours to make feedings at night close by and easy at night - this lessens the time you are having to walk back and forth and more time with your head on your pillow sleeping.

Our last recommendation to help you get sleep, is to get outside each day. Whatever season it may be, put a chair outside and sit for 10 minutes, go for a walk, whatever it may be, try to get outside. There are hundreds of studies that prove that getting outside improves mental health, and will help increase quality of sleep, for you and your baby.



POST-PARTUM EMOTIONS

Baby Blues

The after baby blues affect all postpartum women. This is NOT postpartum depression. After pregnancy there is a surge of hormones throughout the body that often result in mental and emotional distress. And while the baby blues look different for everyone, it is normal. The most common symptoms of after baby blues are:

- crying
- anxiety
- moodiness
- irritability
- lack on concentration

However, the baby blues should only last about 2-3 weeks and then begin to level. This isn't to say they won't continue, you are going through huge emotional changes. If they are continuing after the initial 3 weeks, or are worsening you may have moved into post-partum depression. During your time of the Baby Blues, we do not want to diminish how difficult this time.

Bringing a new baby home is overwhelming and exhausting . In fact when research even says commons symptoms of the baby blues are feelings of overwhelm and trouble sleeping but we chose to exclude them the list above because, from regardless of hormones, bringing home a newborn is exhausting and verwhelming. Whether it be your 1st or 5th child, you are now responsible for a tiny humans needs. They are 100% dependent upon you, and require being fed every 2-3 hours 24/7



trouble sleeping, exhaustion and overwhelm does not go away after 2 weeks. The issue with all of these symptoms including the trouble sleeping, exhaustion and overwhelm, is when these symptoms 1) persist past 2-3 weeks and 2) are debilitating and dangerous for either mother, child or both. That is when we become concerned with post-partum depression.

Post-Partum Depression

Post-partum depression is a continuation and expansion of the feelings we described for baby blues. And while we call this post-partum depression it is important to acknowledge that it can occur anywhere from during pregnancy to up to 2 years after baby is born. That is because during these 3 years our

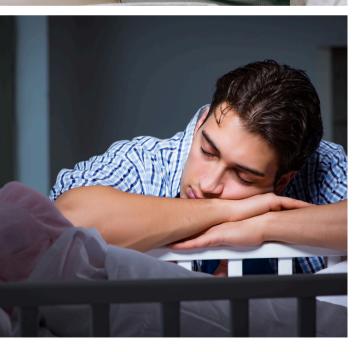
body is experiencing massive changes in hormones, increase in anxiety, and changes to our physical and emotional environment. In fact according to Lindsey R. Standeven MD from John Hopkins, says, "Untreated depression and anxiety in pregnancy is associated with preterm delivery, higher startle reflex in babies, gestational diabetes and more." So this is definitely something we want to be aware of from the beginning of pregnancy.











Post-Partum Depression Symptoms

Post-partum depression affect at least 1 in 5 women, and is both serious and treatable. Symptoms of post-partum depression are:

- Anxiety
- Sadness
- Anger and irritability
- Difficulty sleeping
- Intrusive thoughts (which may include thoughts of harming the baby)
- Severe mood swings
- Crying too much
- Difficulty bonding with your baby
- Withdrawing from family and friends
- Loss of appetite or eating much more than usual
- Less interest and pleasure in activities you used to enjoy
- Fear that you're not a good mother
- Hopelessness
- Feelings of worthlessness, shame, guilt or inadequacy
- Reduced ability to think clearly, concentrate or make decisions
- Restlessness
- Panic attacks
- Thoughts of harming yourself or your baby
- Recurring thoughts of death or suicide

While this list is not extensive, it is thorough, because everyone experiences depression differently. Once again, this is where we reiterate that your experience is NORMAL. You are normal, even though your emotions may feel different than everyone else. It is important to note that post partum depression can linger for months up to years, which is why seeking professional help us crucial. Admitting you are struggling does not make you a 'bad' mom, it makes you a great one. There is strength in saying I am not okay and need additional support. And there is additional support to be had! Please reach out to you primary care doctor or your OBGYN to get immediate help and relief. There are options. You do not need to continue to feel this way.

Partner Post-Partum Depression

Bringing home a new baby affects everyone in the family. And it is important to acknowledge that such drastic change can effect your partners mental health, as well. The symptoms for postpartum partner depression is the same as the mothers. It is also important to note that this depression can occur in couples that have gestational surrogates, adopt or foster. And there is treatment. Do not be embarrassed to ask for help. Babies need all of their parents healthy, and there is no need to go without treatment, or feel like you are in the wrong for having the emotions you do. If you or your loved one is struggling, once again please reach out to your primary care physician to receive the help you need.







Post-Partum Psychosis

Post-Partum Psychosis is rare and extremely dangerous. It usually occurs within the first week of giving birth, but can occur in the weeks after. If you or someone you love are experiencing any of the symptoms, please seek help immediately.

- · Feeling confused and lost
- Having obsessive thoughts about your baby
- Hallucinating and having delusions
- Having sleep problems
- Having too much energy and feeling upset
- Feeling paranoid
- Making attempts to harm yourself or your baby

I am seeking professional help but what can I do at home?

After seeking professional help you may still be wondering what you can do at home to support your treatment. While the list below is not exhaustive, it may provide some ideas.

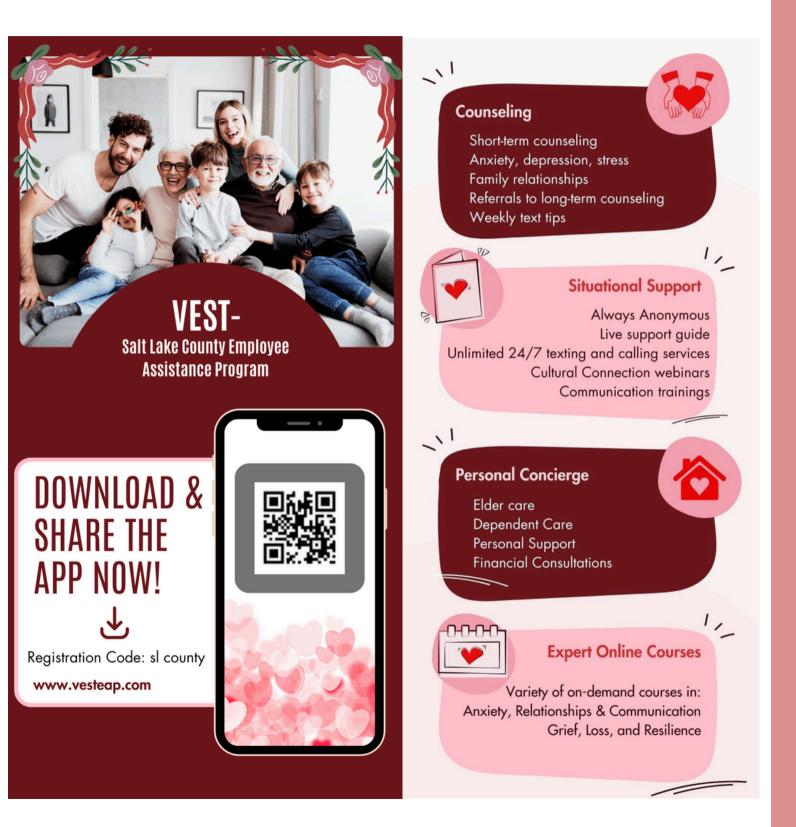
- As stated before, try to get at least 8 hours of sleep in a 24 hour period. This could come from one 4-5 hour stretch of sleep at night, by allowing your partner to help with one feed during the night. Or can happen by napping when the baby is napping. Or by starting your bedtime routine earlier and putting your house to bed around 4pm.
- Make nourishing food choices. It is easy to forget to eat or not havewhen you have a newborn. If your baby is not here yet, try meal prepping some easy oven and crockpot meals. If baby is here, ask your partner to help with meal times and try to keep a basket stocked with your favorite fruit, vegetables and easy snacks.

- Movement. Daily movement can help get endorphins flowing. You definitely need to take it easy for a while but try to get out on a daily walk or do some core and pelvic floor exercises. For for a walk in the fresh air will help with perspective and the movement will help soothe most babies.
- Make time for yourself. You are still a person! Don't forget to give yourself some you time. Whether that be a bath with candles, a night out for a couple hours, or just an hour alone with a book or paint brush. Whatever, helps rejuvenate you, do it.
- Talk to people! Motherhood can be isolating. Make time to have conversations with friends and loved ones. Avoid being alone all day and try to find ways to socialize. Even if that is just an extended conversation with the check out person at the grocery store.
- Ask for help. If you are struggling do not hesitate to ask for help and reach out to those around you. You are not alone. Even if it feels like it. There are people at home and at work that care about you.

Remember you can do this!

RESOURCES

SALT LAKE COUNTY EMPLOYEE ASSISTANCE PROGRAM



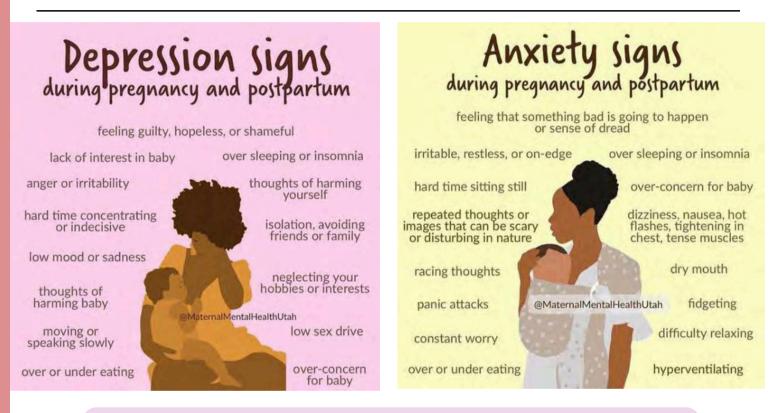
My Mental Health Plan for Pregnancy + Post-Partum



How do I know if my mental health is starting to decline?

I will take the EPDS screener using the QR code. 10 or above means I probably need extra help.

My typical signs and symptoms that I'm struggling are (circle signs below, and add them in here):



The things that usually help me are (check SUNSHINE for ideas):

Who are people I can call when I need help?

Professional help and support groups are listed on: MaternalMentalHeath.utah.gov

Therapist Name:		Phone:
Support	Group Date + Time:	
Friend's Name:		Phone:
Friend's Name:		Phone:
	If you are experiencing a	crisis, please contact the Suicide & Crisis Lifeline at 988

OPIOID ADDICTION

SALT LAKE COUNTY SUBSTANCE ABUSE PREVENTION

Opioids and Post-Partum:

According to a study published in 2019; It is estimated that more than 80% of mothers, who deliver via cesarean will fill an opioid prescription and 54% of woman who deliver vaginally will fill an opioid prescription.

In 2021 the age-adjusted drug poisoning death rate was 22.6 per 100,000 population.

During that year, 6.1% of **Utah drug poisoning deaths** were of undetermined intent, 10.7% were self-inflicted, and **83.3% were unintentional.**



Giving birth is almost always a physically painful experience. Put that with the reality of the baby blues, hormonal shifts and the emotional distress that labor delivery and a newborn can cause, it is easy to see why opioid addiction or overdose (especially accidental) is a real fear. We recommend ensuring that you have nalolxone on hand in case of an overdose, if an opioid prescription has been given.

Naloxone is a drug that can rapidly reverse an opioid overdose. It is a safe and effective medicine that attaches to opioid receptors and work to reverse and block the uptake of opioids. It is only effective if an opioid overdose has occurred and does not affect the person if one has not.

Where can I get Naloxone:

If you are a Medicaid-eligible and covered. You can get Naloxone free of charge under your medical coverage

You can also get Naloxone (Narcan) from any Utah pharmacy without a prescription. Out of pocket cost is between \$50-200. If you visit a Salt Lake County Library, you can ask any of the librarians for Naloxone free of charge.

FAMILY CRISIS CENTER

SALT LAKE COUNTY FAMILY SUPPORT CENTER

The family support center is an amazing resource for those anyone who could use a little extra help through out the week. They offer FREE babysitting for anyone who needs it. This could be for mamas who simply need a nap, have a doctors appointment, need to go grocery shopping or maybe you just need some self love and take yourself to the movie theater solo. There is no need to explain, just take some time for yourself. Remember a happy, healthy parent makes for happy, healthy children. So let's dive into the details:

Who: Anyone in the community- No income limits or qualification. Children must be ages 0-11.

How Often: 2x's a week for up to 4 hours. (Free) OR 5x's year full-time care for work or school purposes (Free)

How: You must reserve your spot ahead of time by simply calling the facility. (During you first appointment be sure to arrive 40 minutes early for paperwork purposes.)



CRISIS NURSERY

Provides emergency respite for stressed/overwhelmed parents, and a "safe-haven" for children at risk of abuse or neglect.

LIFESTART VILLAGE

A self-sufficiency based housing program for homeless singleparent families designed to lead them to sustainable independence.

SUGAR HOUSE CRISIS NURSERY

801-487-7778 2020 South Lake Street Salt Lake City, UT 84105 Monday—Friday De Lunes a Viernes 7:00 AM to 8:00 PM*

CLINICAL SERVICES

We provide affordable, accessible, and high-quality services to those who might otherwise not have access to them, with therapies including EMDR, ART, CBT, DBT, TF-CBT

WEST VALLEY CRISIS NURSERY

801-967-4259 3663 South 3600 West West Valley City, UT 84119 Monday—Friday De Lunes a Viernes 7:00 AM to 8:00 PM*

MIDVALE CRISIS NURSERY

801-255-6881 777 West Center Street Midvale, UT 84047 Monday—Friday De Lunes a Viernes 7:00 AM to 8:00 PM*

ADOPTION RESPITE

This unique in-home respite service is free to Salt Lake County parents who have adopted through DCFS or an equivalent Utah adoption agency

CHILDCARE ASSISTANCE

UTAH.GOV CHILD CARE ASSISTANCE



Looking for childcare is stressful for all parents, however the state has made it easy by providing several resources to help you narrow your search, and provide assistance if you qualify.



https://jobs.ut ah.gov/occ/ca

c.html

This website is a place where parents can search for childcare. You can search by cost, location, languages, etc. All of the childcare provided on this site is a registered center with the state.





https://childcare licensing.utah.g ov/parents-andpublic/childcare-facilityrecord/ This website provides compliance history for childcare centers. It is recommended to search a childcare center's history to see any and all violations they have had.





https://jobs.utah .gov/customere ducation/service s/childcare/ This website can help determine if parents are eligible to receive financial assistance for childcare. Assistance varies by number of kids, and income, so it never hurts to see if you qualify.

DON'T FORGET ABOUT THE COUNTY'S CHILDCARE AT THE GOVERNMENT CENTER AND DISTRICT ATTORNEY'S OFFICE

NATIONAL DIABETES PREVENTION PROGRAM

HEALTHY LIFESTYLE'S LIFESTYLE CHANGE PROGRAMS

What: the National Diabetes Prevention Program (DPP) is a CDC recognized program to help those who qualify, lower their risk of Type 2 diabetes

When: Healthy Lifestyles (the employee wellness team) hosts 1-2 cohorts a year. Scan the QR code to get on our waitlist.

Commitment: It is a year long program

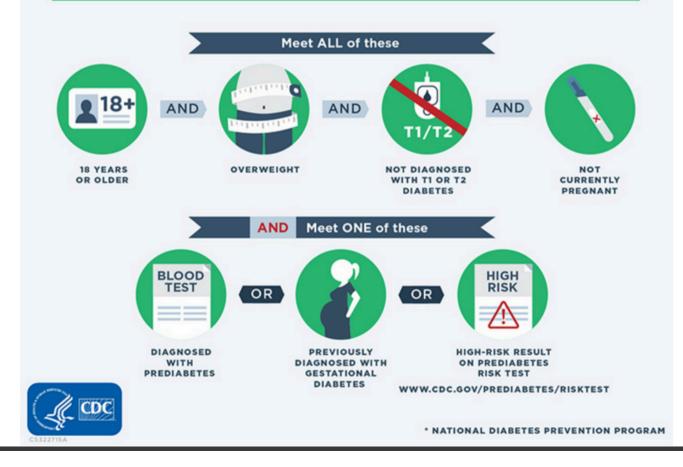
Why: Participants who follow the DPP program has seen a 58% risk reduction for Type 2 Diabetes.





Register Today! Scan the QR code or visit <u>https://slco.org/healthy-</u> lifestyles/programs/nationaldiabetes-prevention-program/

TO JOIN CDC'S NATIONAL DPP* LIFESTYLE CHANGE PROGRAM:



RESOURCES

INTUITIVE EATING

EVERGREEN PROGRAM HEALTHY LIFESTYLES



Is this class for me?

Are you sick of bounce back culture and feeling disconnected with your body?

Are you ready to reconnect with your inner cues, wanting a positive relationship with your food? Ready to face your personal thoughts and feelings around food and your body?

Class Structure

9 Week Course Hybrid Class Offered twice a year, spring and fall

Contact Healthy Lifestyles for more information myhealthylifestyles@slco.org

What *is* Intuitive Eating

Intuitive Eating is a self-care eating framework rooted in science and informed by clinical experience. Intuitive Eating is a practice, which honors both physical and mental health.

Ultimately Intuitive Eating helps create a healthy relationship with food, mind and body.

Intuitive Eating:

- Reconnects you to your hunger-fullness cues.
- Helps you overcome barriers that prevent you from listening to your body.
- Reminds you that enjoyment and taste are important factor of the eating experience.



TOBACCO CESSATION

EVERGREEN PROGRAM HEALTHY LIFESTYLES



Three Phases

- 1. Preparing to Take Action (60 days)
- 2. Taking Action and Using Resources (90 days)
- 3. Tobacco Free for 6 months (183 days)

**Progress takes time and sometimes needs incentive. At the end of each phase, a one time cash incentive is available.

Visit our resources page today to learn more information on how to get started on your tobacco cessation journey!



https://slco.org/healthy-lifestyles/resources/





