

NE LESSON CODE MN-000-15

A More Comfortable Pregnancy

OBJECTIVES

- Clients will be able to state one or more ways to relieve nausea, constipation or heartburn during pregnancy.
- Clients will be able to state at least one sign that a woman is having prenatal depression.

MATERIALS

Paper and pens for clients

Handouts:

- *A More Comfortable Pregnancy*, stock no. 13-172 pamphlet, (Bilingual, English and Spanish) for everyone in the class.
- *Someone to Talk to During Pregnancy*, attached, make copies as necessary. Cut the sheet in half before handing it out.

Optional:

- A flip chart or black board and markers

Note about New Lesson Survey Forms:

The first few times a new lesson is presented, staff and participants need to complete the survey forms attached at the end of this lesson. Please note that the *Staff Survey Form* is different from the *Participant Survey Form*. Only 10-20 *Participant Surveys* need to be completed. Please mail completed new lesson surveys to:

Delores Preece
Texas Department of State Health Services
Nutrition Education/Clinic Services Unit
Nutrition Services Section
1100 W 49th Street, Mail Code 1933
PO Box 149347
Austin, TX 78756

About This Lesson:

This lesson is written in a less structured style than previous WIC lessons. It is designed to be somewhat flexible. Clients are able to determine exactly what is discussed within the topics the class covers. You have a list of questions that can guide the discussion during the class.

You will need to prepare for the class by becoming familiar with the class topics. Look at the lesson, read the handouts and the information below. When you get questions that you cannot answer, tell the class you cannot answer that now and make arrangements to download from the website and get back with the client.

To Learn More:

1. Read the *Prenatal Nutrition Module*, stock no. 13-81. Look at the sections on depression during pregnancy (page 4-7), domestic violence (page 4-11) and common discomforts of pregnancy (part 5).
2. For additional information on prenatal depression see <http://pregnancy.about.com/od/conditionscomplications/a/pgdepression.htm>

Openers:

Review your class ground rules and take any suggestions from the class. Examples of ground rules are:

- Be respectful of others.
- Let only one person speak at a time.
- Focus what you say on the topic being discussed.
- Do not share other people's personal information that you hear in this class.
- Be responsible for your children.

At the beginning of class, let members add rules. Post all the rules in the classroom where everyone can see them.

ICE BREAKER

Can some of you tell us the best thing about your pregnancy? Now, can some of you tell us the harder parts of your pregnancy?

Pass out *A More Comfortable Pregnancy* to all class members.

Discussion Questions:

You do not need to ask every question. Use the ones that best suit the discussion.

1. Does everyone know what morning sickness is? (Does anyone want to tell us what it is?) Who has had morning sickness? What made it worse? What helped you deal with it? What advice have you gotten on how to handle it. Who gave you the advice? (Use the suggestions on the flier as necessary.)
2. Do you know any ways to help prevent constipation? What are some foods high in fiber? What are whole grain foods? What are some foods that are low in fiber? What have you heard about beverages or water intake when you eat a lot of fiber? Does exercise play a role in preventing constipation? What is a healthy way to treat constipation during pregnancy? Use the suggestions on the flier as necessary.
3. Can anyone tell us what heartburn is? Has anyone had heartburn? What advice did you get on how to treat it? Who gave you the advice? What did you do that helped relieve it? What foods made your heartburn worse? (Use the suggestions on the flier as necessary.)

Note: You may need to caution women not to use antacids, laxatives, herbal products or any medicine, including over the counter medicine, without first talking to their doctor.

Some women may take baking soda to relieve heartburn. Ask any woman who is using it to call her doctor and get his advice on what to do instead.

4. This section deals with prenatal depression. The lead in to the section can be your telling WIC clients this story about Sylvia:

“During your friend Sylvia’s first pregnancy she was constantly worried about taking care of the baby. She wanted to know just exactly how to put the baby on his back to prevent crib death, she asked about how she would know when to change her baby’s diapers, what toys were safe and the list went on. She asked questions all the time about caring for her baby. She even lost sleep worrying about her baby’s welfare after birth. Most of the time during her pregnancy, Sylvia felt like she would be a terrible mother.

She was also very worried about her husband leaving her. He had to call her from work over and over to reassure her that everything was all right. She was anxious every time he went out to the store or even down to the neighbors. She felt vulnerable, especially when he was not around. The feelings spilled over, and she became cross with him. He could not do anything right. She felt totally alone in the world. She started feeling so bad that she stopped doing basic things to care for herself like eating regularly, changing clothes, or brushing her hair.”

What do you think was happening to Sylvia during her pregnancy? Have you ever known anyone like Sylvia? What could help her cope with all of her feelings? What parts of Sylvia's story sounds something like most pregnant women? Is pregnancy always a happy time? What do most pregnant women normally worry about? Do you think that Sylvia might have post partum depression after the baby is born?

Here is a list of places to call if you or someone you know needs extra help in coping with a pregnancy, a new baby or other family issues. (Pass out the handout *Someone to Talk to During Pregnancy*.)

Background information for staff:

The symptoms of prenatal depression can overlap the normal changes during pregnancy: difficulty concentrating, lost sleep, fatigue, changes in eating habits, feeling anxious or vulnerable, irritability and feeling blue. Because the changes in women due to prenatal depression are so close to normal changes in pregnancy, it is difficult to identify.

Extreme anxiety or obsessive compulsive disorder can be a sign of prenatal depression. Sylvia showed this anxiety by constantly asking questions about baby care, losing sleep worrying about her mothering skills and her extreme anxiety when her partner was not around. Lack of self-care was another sign of prenatal depression.

Some women are more likely to get prenatal depression. They have a history of depression in themselves or their family, stressful events in the pregnancy such as a move, pregnancy complications, difficulty getting pregnant, a history of pregnancy loss, or a history of emotional, physical or sexual abuse.

Social support is vital to all women during pregnancy, but is even more important for women who have prenatal depression. Partners, husbands, friends, family, psychologists and health care workers can help women cope with the normal ups and downs of pregnancy as well as prenatal depression.

Women who have prenatal depression are more likely to have postpartum depression.

<h2>EVALUATION</h2>

Pass out paper and pens.

Can everyone write down at least one thing that you learned today which you want to remember about handling morning sickness, constipation or heartburn. On the back of the same sheet of paper, will you can write down one warning sign that someone might have prenatal depression.

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A More Comfortable Pregnancy
Lesson Survey Form – Staff

Local Agency # _____

Date: _____

1. Was the lesson easy to read and follow?

- a. yes b. no

What changes would you suggest for improving the lesson? _____

2. Was participant feedback:

- a. positive
b. negative
c. indifferent

3. Was the Spanish translation appropriate for your participants?

- a. yes b. no

4. Do you plan to use this lesson again?

- a. yes b. no

Comments: _____

5. Additional comments: _____

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Participant Survey Form

1. **I am: (you may circle more than 1)**
 - a. pregnant
 - b. breastfeeding
 - c. parent of an infant
 - d. parent of a child
 - e. family or friend

2. **How much did you like the lesson?**
 - a. a lot
 - b. a little
 - c. not at all

3. **Do you plan to use this information?**
 - a. yes
 - b. no

4. **Do you think this is a good lesson to use at WIC?**
 - a. yes
 - b. no

Why? _____

5. **What is the most useful thing you learned from the discussion today?**

Comments: _____

Thank you for your comments!

Someone to Talk to During Pregnancy

If you are feeling blue and need some extra help, here are some places to contact. Your doctor, clinic or WIC nutritionist is also there to help you.

Dial 211. They can refer you to many services in your area of Texas: health care, WIC, financial help or help in dealing with emotions.

1-800-PPD-MOMS (800-733-6667): They will be glad to talk to you if you are feeling blue or your emotions are out of control.

National Hopeline Network 1-800-784-2433 or National Suicide Prevention Lifeline 1-800-273-8255:

National Domestic Violence Hotline 1-800-799-7233 or www.ndvh.org: They will help if you are feeling unsafe or uncomfortable with your partner or family.

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