

GUIDES TO PROMOTE

Your Health and Well-Being



GRASSROOTS MCH



MOTHERS ON THE RISE



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Acknowledgments

Thanks to Riley Children's Foundation for their support of the staff who created this set of health promotion guides. Information in this guide was synthesized from the CDC, WHO, NIH, and ACOG.



General healthcare

- Visiting your doctor yearly
- At your appointment with a primary care physician
- Schedule a doctor's appointment
- What should I take to the doctor?
- Your medical and family history
- Be in charge of your healthcare
- Advocate for yourself and your health
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- Pick up prescriptions at a pharmacy
- Refill your prescription
- Vaccines

Visiting your doctor yearly

Your **primary care provider (family medicine doctor)** specializes in helping you manage your health and treating any general sickness concerns.

This appointment is called your **annual check-up** or **physical** or **wellness check**.

This appointment is your protected, private time - talk to your doctor about your concerns and worries.



Everyone should visit a physician **once a year**, even if you don't feel sick.

This is important to make sure you are not at risk for serious illness.

Services offered at your check-up:

- Physical exam
- Vaccinations
- Cancer screenings
- Healthy lifestyle counseling
- Treatment for chronic illnesses like diabetes, heart disease, and high blood pressure



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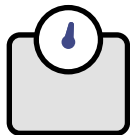
At your appointment with a primary care physician



1 A nurse or medical student will check your:



Height



Weight



Blood pressure



General questions

2 You will be asked to wear a medical robe

You will be asked to remove your clothing and wear a medical robe to cover yourself.

3 Your doctor will conduct a general physical exam



Check your
head and neck



Breast
exam



Abdominal
exam



Listen to your
heart and lungs

4 Your doctor may give other special instructions

Based on your exam, your doctor may request additional steps, such as:



Blood tests



Radiology
(x-rays)



Vaccines



Medication



Appointments
with specialists

Schedule a doctor's appointment

Here's how you can schedule a doctor's appointment on the phone.

1 Find a hospital or clinic

- Check if they have the services you are looking for, like women's health
- Look for types of healthcare providers, such as a **primary care physician** or **OB/GYN**

2 Call the hospital's number

- When you call, usually there will be an automated voice directory
- **Choose the option to schedule an appointment**

3 Ask to schedule an appointment

Here's an example **script** that you can use:

*"Hi, my name is **Jane Doe**. I am a new patient. I would like to set up an annual check-up with a doctor."*

You can also request:

- A **female** doctor
- A specific **type** of appointment or healthcare provider
- **Dates** and **times** for your appointment

4 Confirm details

Take note of appointment details here:

Date: _____

Time: _____

Location: _____

Doctor: _____

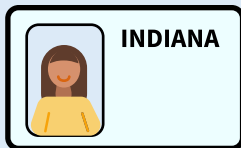
If you get sent to **voicemail**:

*"Hi, my name is **Jane Doe**. I am a new patient. I would like to schedule an appointment. Please call me back at **(317) 555-1235**."*



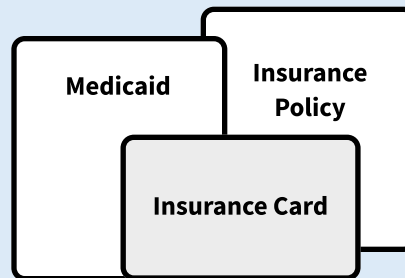
What should I take to the doctor?

Relevant documents



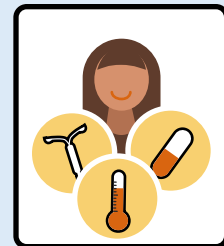
A government-issued ID
(valid and NOT expired)

AND



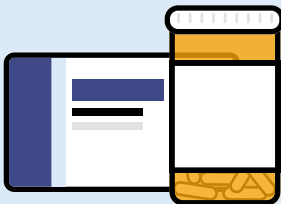
Insurance information

AND



Your medical history sheet

Past and current medical history



List of medications
you are taking



Medical conditions
and allergies



Symptoms you may
be experiencing



Past surgeries



History of diseases or
illnesses in your
immediate family



First day of your last
menstrual cycle
(period)

Your medical and family history

When you go to the doctor, you will be asked to fill out a form about your family and medical history.

- If there's something you don't know, that's ok. Let your doctor know you're not sure.
- If there's something you don't want to talk about, you can let your doctor know.

Here's some common information you might be asked about:



Personal Information

- Full Name
- Address
- Birth Date
- Gender
- Social Security Number
- Occupation
- Phone Number
- Email
- Marital Status
- Children



Your Medical History

- Allergies and descriptions of allergic reactions
- Any medications, dosage information, and the number of times per day you take these medications
- Any past surgeries
- Vaccination History
- Any diseases or illnesses either you or your immediate family has
- *Examples: diabetes, high cholesterol, high blood pressure, asthma, cancer, depression/anxiety, kidney disease, stroke, thyroid disease, migraines, alcoholism, COPD, heart disease*



Women's Health

- Date of last menstrual cycle
- Age at first menstruation
- Age at onset of menopause
- Number of pregnancies
- Number of live births
- Number of abortions
- Pregnancy complications
- Breastfeeding
- Plans to become pregnant



Drug Use

- Alcohol
- Tobacco use
- Marijuana use
- Smoking
- Drug use



Sexual Activity

- Number of partners
- Birth control method(s)
- Gender(s) of sexual partners



Habits

- Exercise habits
- Sleep habits
- Diet and nutrition



Other

- Recent travel outside the country
- Service in the military



Symptoms

There will be a list of symptoms and you will be asked if any apply to you.
Examples: cough, runny nose

Be in charge of your healthcare

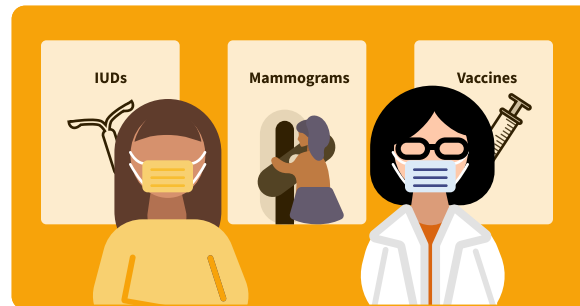


Before the appointment

- Write down a list of questions and concerns before your appointment.
- Consider bringing a close friend or family member with you to the appointment.



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At your appointment

- This appointment is your protected, private time - talk to your doctor about your concerns and worries.
- Take notes about what the doctor or health care provider says.
- Ask how to access your medical records, so you can keep track of:
 - Test results
 - Diagnoses
 - Treatment plans
 - Medications
 - Your appointments
- Ask for the contact information of your doctor or health care provider.



After your appointment

- Follow the treatment plan that you and your doctor discussed.
- Remember that nurses and pharmacists are also good sources of information.
- If you were prescribed medication, pick it up at the pharmacy.
- If you have questions, you can call the doctor's office and ask to speak with a nurse.

“Shop” for your doctor

- You can choose the doctor you want to see.
- On the hospital website, there will be a list of providers and their backgrounds.
- You can choose to make an appointment with that specific provider.

Bring notes with all your questions and concerns

- Write down any questions you have about your health, medications, or lifestyle.
- Having a list will help you cover all the topics you want.

Be specific with your explanations

Use specific language when talking about your symptoms and concerns.

- When did it start?
- How long has this been going on?
- Does your pain come and go or is it constant?
- How severe is your pain? Does your pain prevent you from doing activities?

If you do not understand something, ASK for clarification.

- It is the doctor’s job to explain what is wrong.
- If you do not understand a medical word or do not understand the treatment plan, ASK.

Advocate for yourself and your health

Refuse treatment you are not comfortable with.

- If you are not comfortable with any of the procedures or tests, you have the right to refuse them.
- You have control over your body. You will not be subjected to anything you do not want to do.

Do not agree to anything or sign any papers without fully understanding the documents.

- Ask your doctor about anything that you are not sure about or do not understand.
- For most decisions, you do not have to decide immediately. You can take your time and get a second opinion.

Make sure you have access to all your medical records and tests

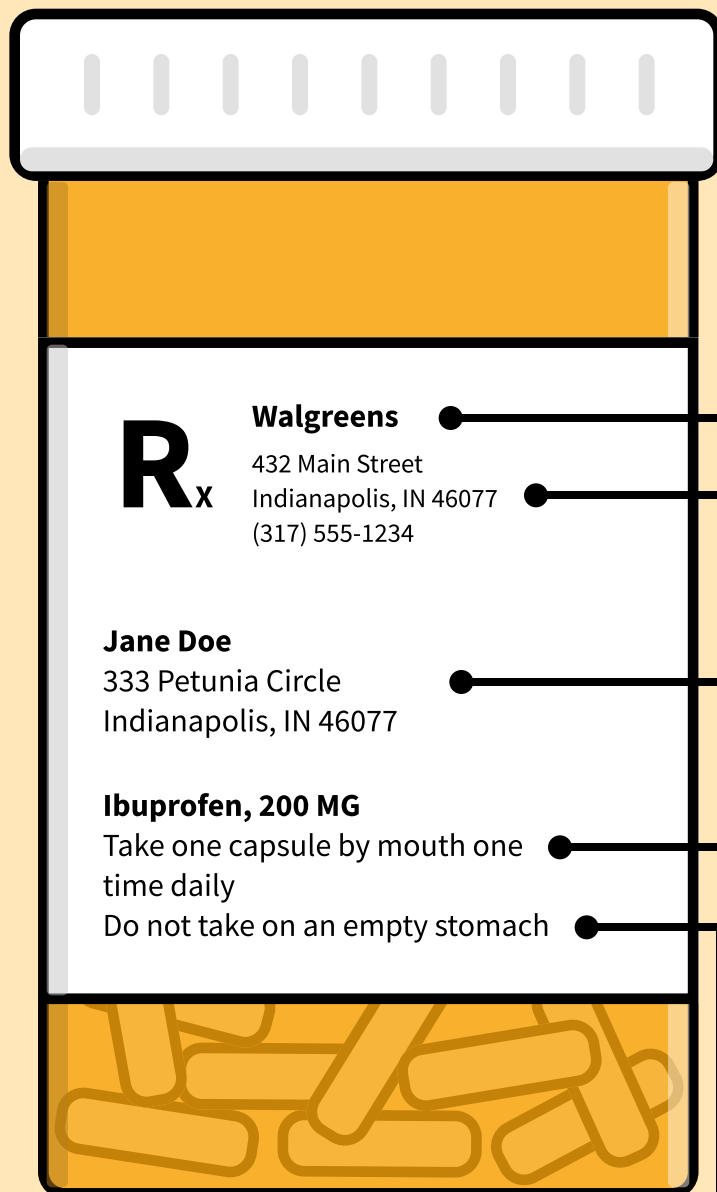
- You have the right to see your medical records.
- Many providers now put records online. Ask how to set up an account to access your records.

If you feel that your doctor is mistreating you, file a complaint.

- Ask to speak to their supervisor, or ask the front desk if there is a formal complaint process.



What you need to know about your prescription



At your doctor's appointment, they will ask for a specific pharmacy to send the prescription to. Make sure you **know the street where your pharmacy is.**

Pharmacies are often located in grocery stores (e.g., Walmart, Meijer, Kroger) and convenience stores (e.g., Walgreens, CVS).

Choose a pharmacy that is closest to your home where you can pick up your medications easily.

The pharmacy of your choosing will prepare your medications for you to pick up.

IMPORTANT
Ask your pharmacist about special instructions, precautions, and side effects for your prescription.

Pick up prescriptions at a pharmacy



1

Call the pharmacy

*"Hi, my name is _____.
I am calling to ask if my
prescription is ready to be
picked up."*

2

Confirm your details

The pharmacist will ask for:

- Your full name
- Your date of birth
- What prescription(s) you are looking for

3

Pick up your prescription

If the pharmacist has the prescription from your doctor, they will tell you when to pick up your medication. **Bring your insurance information and ID.**

If they have not received the prescription, call back later.

Refill your prescription



IMPORTANT!

Do this **BEFORE** you run out of medication

1

Check how many refills you have

Usually, there is a specific number of refills for each medication. Check the label on your pill bottle for how many refills you have left.

Some medications don't require refills, like antibiotics.

2

Call your pharmacist or doctor

If you have refills left:

Call your pharmacy to have your prescription prepared for pick up.

If you have run out of refills:

- Call your doctor (there is usually an auto-response system).
- Follow the voice prompts and select "refill medication."
- Leave a voicemail with your name, number, and the name of the medication you would like refilled.
- After a few days, call your pharmacy to confirm that the prescription has been filled.

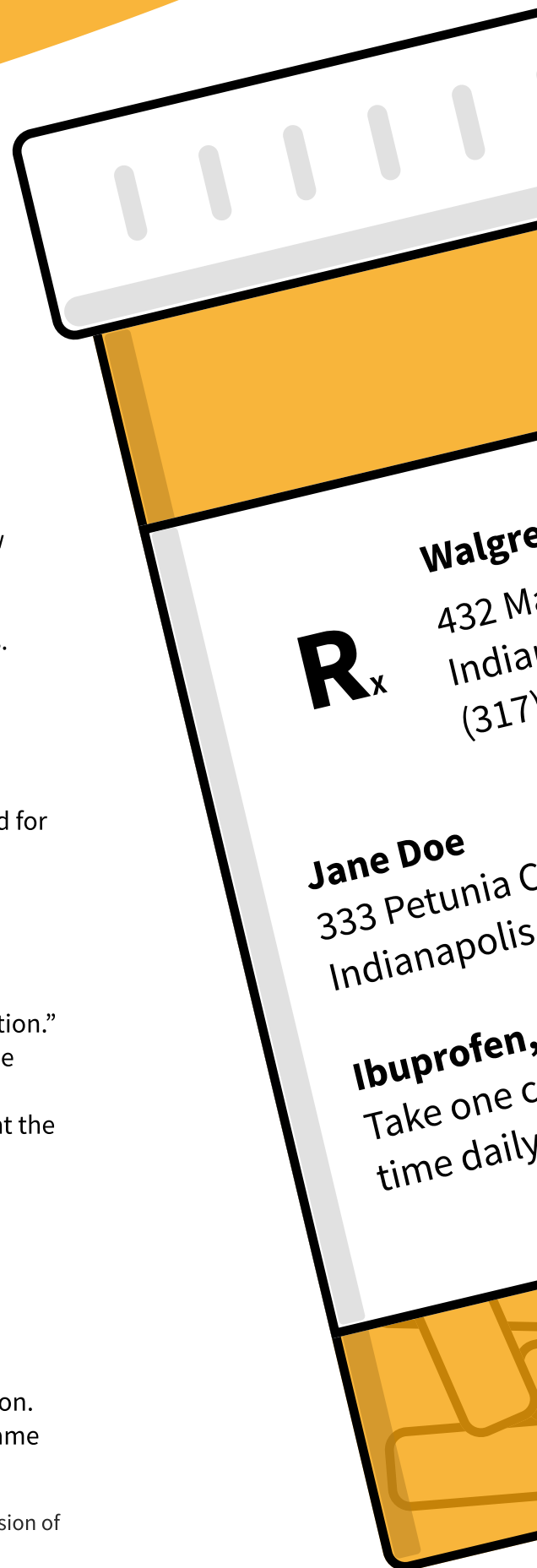
3

Go to the pharmacy to pick up your prescription

If something goes wrong with your order:

- You can call your pharmacy to request that they coordinate with your doctor to refill your medication.
- Have your doctor's contact information and the name of the hospital at which they work.

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Vaccines

They save your life and prevent disease.



All adults are recommended to get a vaccine for:

- Hepatitis A vaccine
- Hepatitis B vaccine
- Human papillomavirus (HPV) vaccine
- Measles, Mumps, Rubella (MMR) vaccine
- Meningococcal serogroups A, C, W, Y vaccine
- Meningococcal serogroup B vaccine
- Tetanus and diphtheria vaccines
- Varicella vaccine
- Zoster vaccine
- Influenza (flu) vaccine - **yearly**
- COVID-19 vaccines and boosters

All babies are recommended to get a vaccine for:

- Hepatitis A
- Hepatitis B
- Rotavirus (RV)
- Diphtheria (DTaP)
- Hib (*Haemophilus influenzae*)
- Pneumococcal (PCV13)
- Polio (IPV)
- Influenza (flu) vaccine - **yearly**
- Measles, Mumps, Rubella (MMR) vaccine
- Varicella

! IMPORTANT!

- **Ask your doctor** about your vaccination status and which vaccines you need.
- **Ask when your baby** should get each vaccine.
- **Keep personal records** of vaccinations you and your children have received.
- Sometimes, you need **multiples of the same vaccine** (boosters).

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Visiting your OB/GYN

An **OB/GYN (obstetrician/gynecologist)** is a doctor who specializes in the female reproductive system. They treat and counsel you on all issues regarding women’s health.

This appointment is called your **annual women’s health check-up.**

This appointment is your protected, private time - talk to your doctor about your concerns and worries.



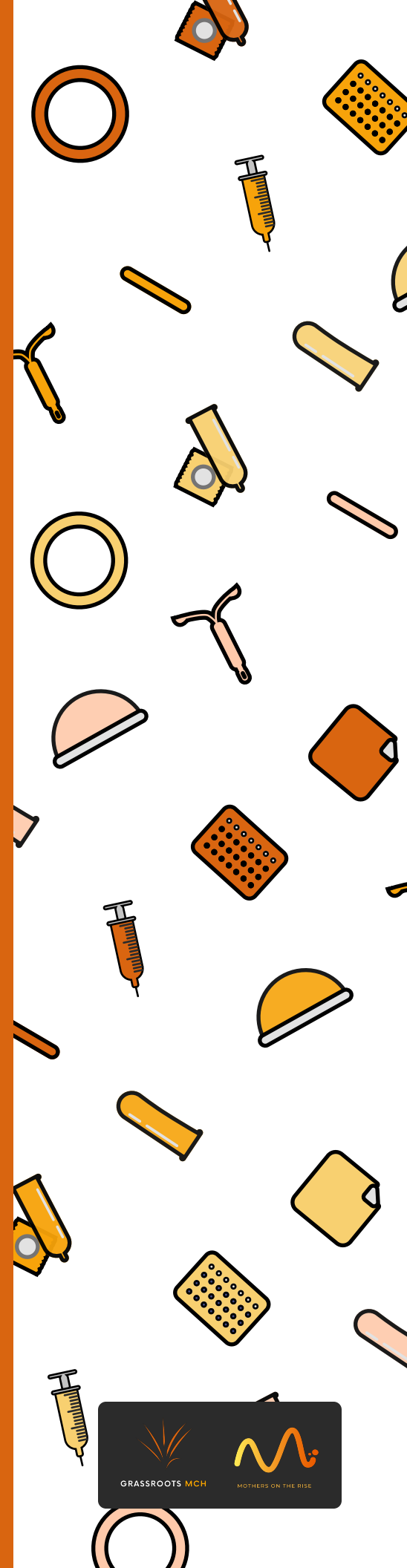
Every woman should visit an OB/GYN **once a year.**

This is important to make sure you are not at risk for serious illness.

Services an OB/GYN provides:

- Pap smears (cervical cancer screening)
- Birth control options
- Pelvic exams
- Cancer screenings
- Sexually-transmitted disease (STD) screenings and treatment
- Family planning services
- Treatment of vaginal infections
- Genetic counseling
- Surgery (hysterectomies, tubal ligation, C-sections)

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At your appointment with an

obstetrician/gynecologist (OB/GYN)

1

A nurse or medical student will check your:



Height



Weight



Blood pressure



General questions about your reproductive health

2

You will be asked to wear a medical robe

You will be asked to remove your clothing and wear a medical robe to cover yourself.

3

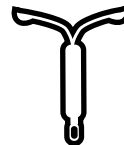
Your doctor might provide these services:



Breast exam



STD screening



Insert an IUD or implant



Mammogram



Internal and external pelvic exam



Prescribe refills on medications/birth control

!

If you are not comfortable with any of the procedures or tests, **you have the right to refuse them.** You have control over your body. You will not be subjected to anything you do not want to do.



What is a breast exam?

Breast exams are important to check for breast cancer.

You will lay down and your OB/GYN will inspect your breasts by feeling for lumps or any abnormalities.

It will only last a couple of minutes.

What is a pelvic exam?

A pelvic exam is used to check a woman's internal pelvic organs.

The health care provider inserts two fingers into the vagina and then places pressure with the other hand on the lower part of the belly.

This only lasts a couple of minutes.



IMPORTANT

You can ask your doctor to explain the procedure before they perform it and any other questions you may have.

If you feel uncomfortable at any time, you have the right to say no.

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Prepare for a pap smear

A pap smear is a test to screen for cervical cancer.

If you have a low income or do not have health insurance, you may be able to get a free or low-cost screening test through the National Breast and Cervical Cancer Early Detection Program.

To find out if you qualify for a free or low-cost mammogram and Pap test and where to get screened, call: (317) 233-1325







Breast and Cervical Cancer Early Detection Program

Indiana State Department of Health
2 North Meridian Street
Mailstop 6B-F4
Indianapolis, IN 46204
Phone: (317) 233-1325






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If you are going to have a test in the next 2 days, DO NOT :

-  Schedule your test for a time that's during your period
-  Douche (rinse the vagina with water or another fluid)
-  Use a tampon
-  Have sex
-  Use birth control foam, cream, or jelly
-  Use medicine or cream in your vagina

When should you get a pap smear?

-  Starting at age 21
-  When you start being sexually active
-  Once a year

During the pap smear:

- You will lay down.
- Your feet will be placed in stirrups to allow your doctor to access your pelvic region.
- The doctor will use a plastic or metal instrument, called a speculum, to widen your vagina.
 - This helps the doctor examine the vagina and the cervix, and collect a few cells and mucus from the cervix and the area around it.
 - The cells are sent to a lab for testing.

What is a mammogram?

A mammogram is an X-ray picture of the breast. Doctors use a mammogram to look for early signs of breast cancer or other problems.



If you're 40 or older, ask your doctor about yearly mammograms.

Having a mammogram is often uncomfortable, sometimes painful. However, a mammogram takes only a few moments and the discomfort is over soon.

Tips for Getting a Mammogram

- **Schedule around your period** - Try not to have your mammogram the week before you get your period or during your period. Your breasts may be sensitive, tender, or swollen then.
- **Avoid products** - On the day of your mammogram, don't wear deodorant, perfume, or powder. These products can show up as white spots on the X-ray.
- **Wear a top and bottom** - You will need to undress from your waist up for the mammogram. Some women prefer to wear a top with a skirt or pants, instead of a dress.



Free Mammograms

If you have a low income or do not have health insurance, you may be able to get a free or low-cost screening test through the National Breast and Cervical Cancer Early Detection Program.

To find out if you qualify for a free or low-cost mammogram and Pap test and where to get screened, **call: (317) 233-1325**

Breast and Cervical Cancer Early Detection Program

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Mailstop 6B-F4
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(317) 233-1325

Types of birth control

There are many different types of birth control, each with pros, cons, and side effects. Determine which birth control options are the best for you.

Your OB/GYN can suggest and help you access birth control options to prevent unwanted pregnancies. Discuss any concerns you have with your OB/GYN.



Permanent birth control



Sterilization

Permanent

Tubal ligation (having your “tubes tied”) and vasectomies prevent sperm from fertilizing eggs

Male sterilization (vasectomy)

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **Failure rate:** 0.15%
- **How does it work?** This keeps a man’s sperm from going to his penis, so his ejaculate never has sperm.

The procedure is typically done at an outpatient surgical center. The man can go home the same day. Recovery time is less than one week.

After the operation, a man visits his doctor for tests to count his sperm and to make sure the sperm count has dropped to zero (this takes ~ 12 weeks).

Another form of birth control should be used until the man’s sperm count has dropped to zero.

Female sterilization (tubal ligation / “getting your tubes tied”)

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **Failure rate:** 0.5%
- **How does it work?** Your fallopian tubes are “tied” (closed). This method is effective immediately.

The procedure can be done in a hospital or in an outpatient surgical center. You can go home the same day and resume normal activities within a few days.



You do not need permission from a partner (husband, boyfriend) or family member to get birth control.

Birth control



IUD

Hormonal or non-hormonal, reversible

An intrauterine device (IUD) is a small T-shaped device that is placed inside your uterus by a doctor.

- **Pregnancy prevention:** Yes. It is one of the **most effective** types of birth control.
- **STD protection:** No

Copper T intrauterine device (IUD)

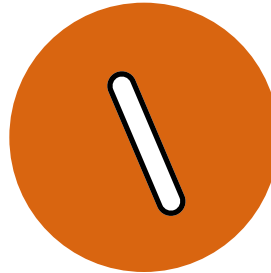
- **How long can I have it?** Up to 10 years
- **Failure rate:** 0.8%
- **How does it work?** Prevents pregnancy by not allowing the sperm to fertilize the egg.

Paragard is the brand available in the US.

Levonorgestrel intrauterine system (LNG IUD)

- **How long can I have it?** 3-6 years
- **Typical failure rate:** 0.1 - 0.4%
- **How does it work?** It releases a small amount of progestin each day to keep you from getting pregnant.

Mirena is a common brand.



Implant

Hormonal, reversible

A small, single, thin rod that is inserted under the skin of your upper arm.

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How long can I have it?** Up to 3 years
- **Failure rate:** 0.1%
- **How does it work?** The rod contains a progestin that is released into the body. Nexplanon is a common brand.



Injection

Hormonal, reversible

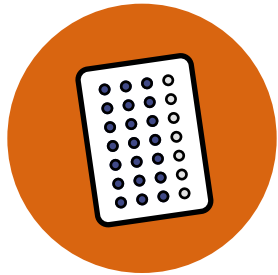
A progestin shot you get in the buttocks or arm every 3 months

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How long does it last?** 3 months
- **Typical failure rate:** 4%
- **How does it work?** Progestin is a hormone that provides protection against pregnancy.

“Remember, the pull out method **is not an effective birth control method**. Talk to your doctor about other birth control options.”



Hormonal birth control



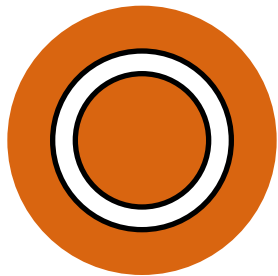
Oral contraception

Hormonal, reversible

“The pill” is a prescription medication that you take at the same time each day.

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How often do I use it?** Take a pill at the same time each day. Each pack lasts 28 days.
- **Failure rate:** 7%
- **How does it work?** There are two types: 1) combined estrogen and progestin 2) progestin-only. Both hormones will prevent pregnancy. Discuss with your doctor the best option for you.

If you are older than 35 years and smoke, have a history of blood clots, or have breast cancer, your doctor may not recommend the pill.



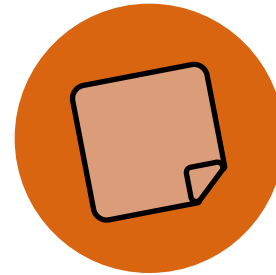
Ring

Hormonal, reversible

A small soft plastic ring that you place inside your vagina

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How long do I use it?** Insert and wear the ring for 3 weeks. Take it out for the 4th week (when you have your period).
- **Failure rate:** 7%
- **How does it work?** Progestin and estrogen

NuvaRing is a common brand of the ring.

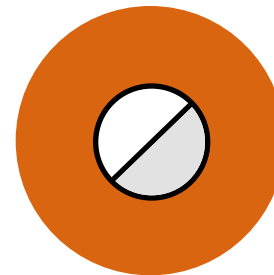


Patch

Hormonal, reversible

A skin patch is worn on the lower abdomen, buttocks, or upper body (not breasts)

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How often do I use it?** For 3 weeks, wear a new patch each week. On the 4th week, don't wear a patch (so you have a period).
- **Failure rate:** 7%
- **How does it work?** It releases the hormones progestin and estrogen into the bloodstream.



Emergency contraception

Hormonal

NOT a regular method of birth control.

Use the “morning-after pill” if you didn't use birth control during sex or your birth control failed (like your condom broke).

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **When do I use it?** As soon as possible, up to 3 days after unprotected sex
- **How does it work?** There are three types of hormonal pills: progestin, combined progestin and estrogen, and antiprogestin ulipristal acetate (Mifepristone)
- **Where do I get it?** Any pharmacy or clinic - no prescription needed

Plan B is a common brand. Plan B may not work well 72 hours after sex. Check weight limit for effectiveness.

Barrier birth control



Male condom

Barrier, reversible

Prevents sperm from getting into your body

- **Pregnancy prevention:** Yes
- **STD protection:** Yes - use with other birth control to protect yourself from HIV and other STDs
- **How often can I use it?** Only use a condom once.
- **Failure rate:** 13%
- **How does it work?** When a man wears a condom, it prevents sperm from getting into your body.

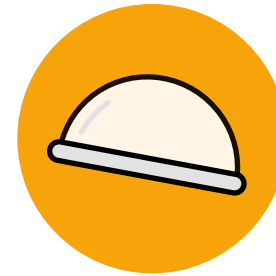


Female condom

Barrier, reversible

Prevents sperm from getting into your body

- **Pregnancy prevention:** Yes
- **STD protection:** Yes - use with other birth control to protect yourself from HIV and other STDs.
- **How often can I use it?** Only use a condom once.
- **Failure rate:** 21%
- **How does it work?** You insert the condom in your vagina up to 8 hours before intercourse. It prevents sperm from getting in your body.



Diaphragm

Hormonal, reversible

Also called a “cervical cap” - you put this cup in your vagina with spermicide

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How long do I use it?** Insert the cup in your vagina with spermicide to block or kill sperm
- **Failure rate:** 17%
- **How does it work?** It covers your cervix and prevents sperm from entering.

There are many sizes - visit a doctor for a fitting.

Types

- **Latex condoms** (most common): help prevent pregnancy, HIV, and other STDs.
- **Synthetic condoms:** help prevent pregnancy, HIV, and other STDs.
- **Natural or lambskin condoms:** help prevent pregnancy, but may not protect against STDs, including HIV.

You can buy condoms, KY jelly, or water-based lubricants at a drug store.

Do not use oil-based lubricants (massage oils, baby oil, lotions, petroleum jelly) with latex condoms. They weaken the condom, making it tear or break.

Do not use flavored condoms for intercourse - only use for oral sex.



Spermicide

Barrier, reversible

Spermicide comes as a foam, gel, cream, film, suppository, or tablet. Use with condoms and diaphragms.

- **Pregnancy prevention:** Yes
- **STD protection:** No
- **How long do I use it?** Less than 1 hour before intercourse and for at least 6-8 hours after intercourse
- **Failure rate:** 21%
- **How does it work?** The spermicide kills sperm.



Important

Any birth control is better than no birth control.

Whenever you have sex, use birth control AND condoms to protect against pregnancy and STDs.



“Birth control (the pill, IUD, implant) will make me gain weight.”

- **False.** There is no relationship between being on birth control and gaining weight.
- Staying physically active and eating healthy foods prevent weight gain.
- If you are worried about gaining weight from birth control, ask about non-hormonal birth control options, like a copper IUD.

“Birth control protects you from STDs.”

False. They do not protect against STDs. Whenever you have sex, **use a condom** to prevent STDs.

“The ring falls out and the patch can fall off.”

- Both the ring and the patch should stay in place during all activities.
- Once the ring is placed inside, it should not fall out. If it does, talk to your doctor about how to properly insert it.
- The patch is very sticky. It should not fall off once it is placed on your body.

“Being on the pill will give me cancer.”

False. There is no relationship between birth control pills and cancer.

“I can only get an IUD after having a kid.”

False. An IUD is a very effective and low-maintenance birth control option for all women.

“I won’t be able to have children in the future if I’m on birth control.”

- **False.** Birth control does not affect your fertility.
- As soon as you stop using your birth control, you can get pregnant immediately.
- Each person’s natural fertility is different. Once you stop birth control, you could get pregnant right after or after several months.
- All birth control methods are reversible, except permanent procedures like tubal ligation.



Myths about birth control

“The IUD can get lost in and tear my uterus.”

This could happen, but it is very rare. Most people do not have any problems with their IUD.

If the IUD is lost or tears your uterus, no lasting harm is done. Your doctor can fix these problems easily.

“It hurts to get an implant.”

Your doctor will administer a numbing agent, so you will only feel a slight pinch when the doctor is numbing your arm.

Soreness in your arm should not last longer than a week.

“IUDs are painful during sex.”

False. IUDs do not cause pain to either person during sex.

“I need my partner’s permission to be on birth control.”

False. Being on birth control is a decision ONLY YOU can make. Your partner has no say in what you do with your body.

If you want to be on birth control, talk to your OB/GYN to help decide what is the right one for you.

“I don’t have to be on birth control because my partner says he can’t get me pregnant.”

False. You must be on birth control to prevent pregnancy.

“My partner pulls out when we have sex, so I don’t need to be on birth control.”

False. Whenever you have unprotected sex, you have a chance of getting pregnant. The pull-out method has a **high failure rate of 27%.**

Sperm can leak out during sex and sperm can remain active in the vagina for days after having sex. Whenever you have sex, use birth control and a condom to prevent pregnancy and STDs.

Myths about birth control

“I can’t remember to take my birth control pill every day.”

If you can’t remember to take your pill every day, there are other easy options, such as an IUD or implant. Once an IUD or implant is placed, you do not have to do anything to maintain it. They can last many years.

“I had sex without a condom or birth control and I did not get pregnant, so I do not need to be on birth control.”

False. Whenever you have unprotected sex, you have a chance of getting pregnant. **Use birth control and a condom** to prevent pregnancy and STDs.

“The shot can make me gain weight and lose all my hair.”

The Depo shot has been shown to cause hair loss or a lack of hair growth in 5% of women. Your hair will start growing again if you stop receiving the shot.

If the shot is not the right birth control method for you, there are plenty of other options that do not cause these side effects.

“I only have sex right before or after my period, so I won’t get pregnant.”

False. Whenever you have unprotected sex, you have a chance of getting pregnant. Whenever you have sex, **use birth control and a condom** to prevent pregnancy and STDs.

“Being on birth control will make my hormones go crazy.”

False. Birth control is similar to your natural body’s hormones. If you are worried about gaining weight from hormonal birth control, you can talk to your doctor about non-hormonal birth control options, such as a copper IUD.

“I am not having sex right now. I don’t have a reason to be on birth control.”

There are many benefits of being on hormonal birth control, even if you are not having sex.

Birth control can help:

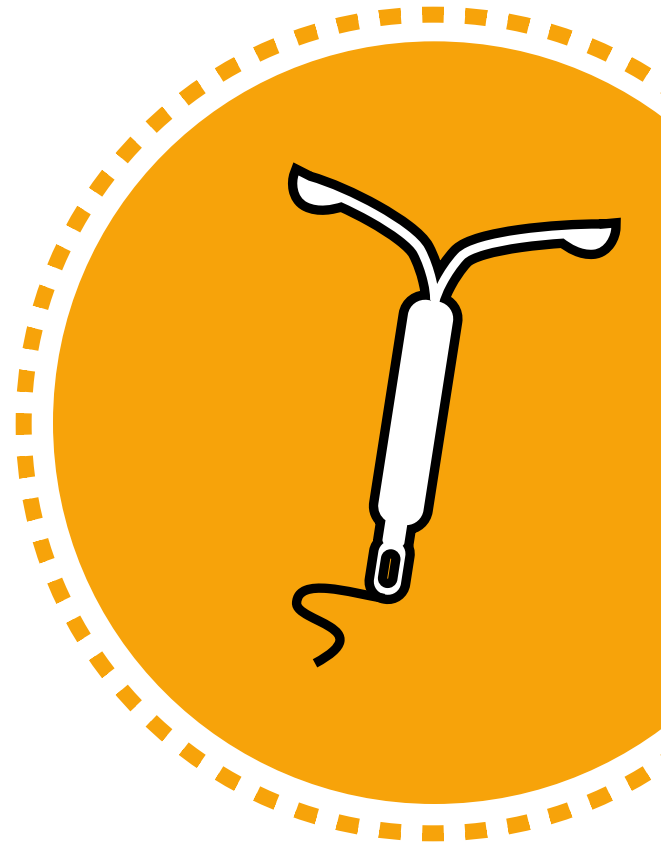
- Clear up acne
- make your periods less heavy or more regular and predictable
- Reduce cramping
- Manage chronic illnesses like PCOS
- Some birth control options (IUD, patch, and ring) can reduce the risk of ovarian cancer

What is an IUD?

The **intrauterine device (IUD)** is a t-shaped device that is inserted into the uterus as a form of long-term contraception (5-10 years depending on the brand).

There are two types of IUDs: **hormonal** IUDs and **copper** IUDs.

As long as you are not pregnant, IUDs can be inserted during any time of your cycle.



IUDs do not protect against STDs.
Always use condoms to prevent getting STDs.

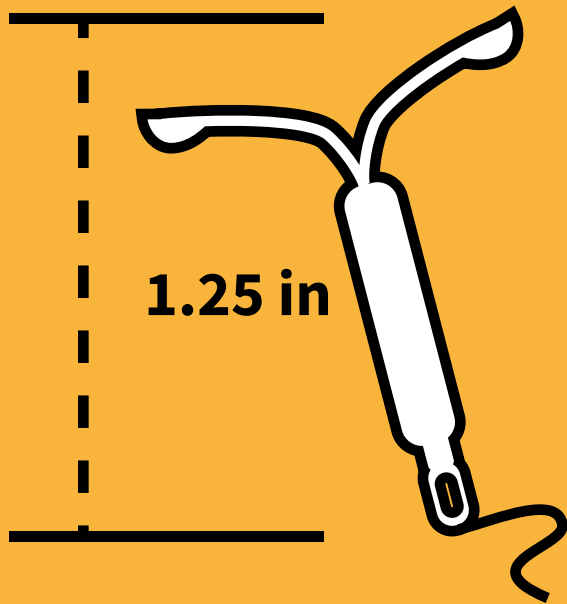
Types of IUDs

Hormonal IUD

- **What it's made of:** A plastic frame
- **Hormones:** Progestin
- **How it works:** Prevents pregnancy by blocking sperm from entering the uterus.
- **Popular brand:** Mirena is a popular brand available in the United States.
- **How long you can use it:** Mirena can be used up to 5 years to prevent pregnancy.
- **Benefits:** Patients do not suffer the negative side effects caused by estrogen hormonal contraceptives. Hormonal IUDs can also reduce severe menstrual pain, reduce risk of pelvic infection, and reduce risk of endometrial cancer.

Copper IUD

- **What it's made of:** A plastic frame with copper wires wrapped around it
- **Hormones:** None
- **How it works:** Makes the uterus a bad environment for sperm and eggs, preventing pregnancy.
- **Popular brand:** ParaGuard is the only copper IUD available in the United States.
- **How long you can use it:** It can be used for up to 10 years to prevent pregnancy.
- **Benefits:** Patients do not suffer the negative side effects caused by hormonal contraceptives.



What is getting an IUD like?

Preparing for an IUD

- Take some pain medicine (like Advil, Tylenol, ibuprofen) before you go to help with pain.
- Ask your doctor if you can receive a numbing injection or medicine to help open your cervix.
- You can get an IUD at any point in your menstrual cycle, even immediately after birth.
- Ask your doctor to walk you through the procedure.

During the procedure

- You will lay down and place your feet in stirrups to allow your doctor to access your pelvic area.
- The doctor will use a speculum (plastic or metal instrument) to widen your vagina.
- They will use an inserter to push the IUD through your cervix and place it in your uterus.
- You may feel intense temporary cramping or pain. Discuss pain relief with your doctor.

What happens after an IUD Insertion?

Your period

You may feel cramping or spotting for a few days after your IUD insertion.

It may take several months for your period to regulate. Your periods may become lighter with fewer cramps or your period may stop entirely.

IUDs don't prevent STDs

Remember that **an IUD does not protect you against STDs.**

Whenever you have sex, **use a condom to prevent STDs.**

If something goes wrong

There will be a small 1-2 inch string that comes out of your cervix. **DO NOT PULL ON THE STRING,** you will remove the IUD or displace it.

If your IUD falls out or you lose it:

- Make a doctor's appointment **immediately.**
- Use an alternate birth control method, like condoms.



IMPORTANT!

- You do not have to do anything to maintain your IUD. It will provide effective protection from pregnancy for years.
- **Make sure to find out when your IUD expires,** and when you need to get a new one.

Pregnancy

- Plan for a healthy pregnancy
- Schedule your pre-natal check-ups
- At your appointment: 1st pre-natal check-up
- At your appointment: pre-natal check-up
- Risks during pregnancy
- STDs and pregnancy
- Create a birth plan worksheet
- Identify that you're in labor
- Pre-term birth
- Common pregnancy symptoms
- Urgent pregnancy symptoms
- Breastfeeding

Plan for a healthy pregnancy



Whether or not you've written them down, you've probably thought about your goals childbearing goals and how to prepare. For example, if you don't want to have a baby, you use birth control.

Now that considering having a child, it's important to take steps to have a healthy pregnancy!

- See your doctor and OB/GYN**
Discuss your medical conditions, your lifestyle and behaviors, and any medications you may be taking with your healthcare providers.
- Get your vaccinations**
DO NOT RECEIVE THE RUBELLA VACCINATION (MMR vaccine) during pregnancy.
- Get tested for STDs** (sexually transmitted diseases)
- Take 500mg Folic acid every day**
- Take iron supplements**
Ask your doctor if you need iron supplements.
- Stop drinking alcohol, smoking, and using drugs**
If you are trying to get pregnant and cannot stop drinking, smoking, or using drugs—get help! Contact your doctor or local treatment center.
- Maintain a healthy weight**
- Eat a balanced, healthy diet**
- Get mentally healthy**
- Avoid toxic substances and environmental contaminants**
- Get help for domestic violence**
Check thehotline.org or call [1 \(800\) 799-7233](tel:18007997233)
- Learn about your family's medical history**
- Maintain your healthy habits throughout your pregnancy**

Schedule your prenatal check-ups



First Trimester

1st visit: between weeks 1-12



Second Trimester

2nd visit: Week 20

3rd visit: Week 26



Third Trimester

4th visit: Week 30

5th visit: Week 34

6th visit: Week 36

7th visit: Week 38

Birth: Week 40

You should see your doctor **at least 8 times** for prenatal check-ups throughout your pregnancy to make sure you and the baby are healthy.

If you have conditions that complicate your pregnancy, your doctor may ask that you return more frequently for monitoring.

If you have not given birth by 41 weeks, return to your doctor.



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At your appointment

1st pre-natal check-up



Your first prenatal visit will probably be **after Week 8** of your pregnancy. Your first visit will be one of your longest, so allow plenty of time.

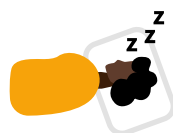
Your provider might ask about:



1st date of your last period



Medical history
(past conditions, surgeries, pregnancies, family history)



Lifestyle
(smoking, drinking, drugs, exercise, sleep)



Health
(stress, symptoms)



Vaccines you have received

Your provider will do these tests:



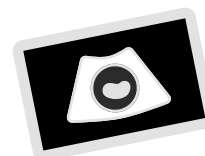
Urine sample to confirm your pregnancy



Blood pressure, height, weight



Blood tests



Ultrasound



Physical exam



Pelvic exam



STD testing



HPV/cervical cancer screening

At your appointment

pre-natal check-ups

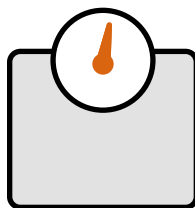


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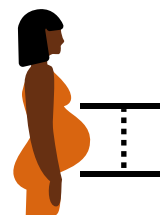
Your doctor may check your:



Blood pressure



Weight gain



Abdomen

Check your developing infant's growth and position



Fetal heart rate



Swelling in hands and feet



Ultrasound

2

Talk about your questions and concerns

Write down your questions and bring them with you.

3

Your doctor may order more tests or medication

Depending on your age and family history, your doctor may order tests.

Between 24 and 28 weeks, sometimes they check for diabetes during pregnancy (also called gestational diabetes) and other conditions.

Risks during pregnancy



Important growth and development occur throughout pregnancy. Babies born three or more weeks earlier than their due date have a greater risk of serious disability or even death.

Learn the warning signs and how to prevent premature birth.



Smoking

The best time to quit smoking is before you get pregnant, but quitting at any time during pregnancy can help your baby.

Smoking during pregnancy can have serious consequences for your baby, including tissue damage, cleft lip, miscarriage, preterm delivery, birth defects, and death.



Marijuana

Marijuana use during pregnancy can be harmful to your baby's health.

The chemicals in marijuana (THC) pass through your system to your baby and can harm your baby's development.



Alcohol

When you drink alcohol, so does your developing baby. **There is no known safe amount of alcohol to drink while pregnant.**

Alcohol consumption during pregnancy can have serious consequences for your baby, including birth defects, low birth weight, intellectual disability, and issues with major organ systems.



Caffeine

During pregnancy and breastfeeding, restrict your caffeine intake to 200mg per day, or 1-2 cups of coffee.

Too much caffeine can cause preterm birth, low birth weight, and miscarriage. Check the nutritional labels of foods and drinks to see how much caffeine they have.



Depression

Depression is common and treatable. If you think you have depression, seek treatment from your health care provider as soon as possible.

Postpartum depression:

Postpartum depression is depression that occurs after having a baby. Feelings of postpartum depression are more intense and last longer than those of “baby blues,” a term used to describe the worry, sadness, and tiredness many women experience after having a baby. “Baby blues” symptoms typically resolve on their own within a few days.



Medication

Taking certain medications during pregnancy might cause serious birth defects for your baby. Talk to your doctor or pharmacist about any medications you are taking. These include prescription and over-the-counter medications and dietary or herbal supplements.



Infections

You won't always know if you have an infection—sometimes you won't even feel sick.

HIV - If you are pregnant or are thinking about becoming pregnant, get a test for HIV as soon as possible and encourage your partner to get tested as well. If you have HIV and you are pregnant, there is a lot you can do to keep yourself healthy and not give HIV to your baby.



Diabetes

Poor control of diabetes during pregnancy increases the chance for birth defects and other problems for your baby. It can cause serious complications for you, too.



High blood pressure

Existing high blood pressure can increase your risk of problems during pregnancy.



Weight gain during pregnancy

Talk to your doctor about healthy weight gain during pregnancy. Too little and too much weight gain can be harmful to the development of your baby.



Radiation exposure

Radiation can damage the tissues of your body and hurt the health of your baby. Radioactive materials can be passed to babies through your breast milk.

If you are pregnant or breastfeeding, talk to your doctor if you are concerned about radiation exposure.



Environmental and workplace hazards

Chemicals from your work can come home on your skin, hair, clothes, and shoes. These chemicals can get in your home and car where your family members or pets can be exposed (“take-home exposure”). Some of these chemicals might be dangerous, especially for children.

What you can do to prevent take-home exposures:

The best way to keep chemicals out of your home is to keep them from leaving work:

- Wear protective clothing at work so that chemicals do not get on your clothes.
- Change your clothes and shoes before leaving work.
- Keep your dirty work clothes and shoes separate from your clean clothes (for example, store them in separate lockers).
- Wash contaminants off. If your workplace has a shower, take a shower before leaving work. Otherwise, wash your hands before you leave.

If you can't change clothes or shower at work, reduce the amount of chemicals that enter your home:

- Take off your work shoes in your garage or as soon as you enter your home, so you don't bring chemicals any further in.
- Change out of your work clothes right away. Wash your work clothes right away if you can.
- Wash your work clothes in a different load of laundry from your family's clothes. This keeps chemicals on your clothes from getting on theirs.
- Wash your hands or shower as soon as you get home.

STDs and Pregnancy



IMPORTANT!

Request a full STD panel of tests at the beginning of your pregnancy.



I'm pregnant. Can I get an STD?

Yes. Women who are pregnant can become infected with the same STDs as women who are not pregnant. Pregnancy **does not** provide women or their babies any additional protection against STDs.



Can STDs affect me and my unborn baby?

Yes. STDs can complicate your pregnancy and may have serious effects on both you and your baby.



Should I be tested for STDs during my pregnancy?

Yes. Testing and treating pregnant women for STDs is a vital way to prevent serious health complications to both mother and baby that may otherwise happen with infection.

Ask your doctor about getting tested for STDs. It's important to have an open, honest conversation with your provider. Discuss symptoms, partners, and any unprotected sex that you've had.

Even if you've been tested in the past, **you should be tested again when you become pregnant.**



Can I get treated for an STD while I'm pregnant?

It depends.

Yes, it is safe to take some medications to treat STDs while you are pregnant. Some STDs can be treated, but others cannot.

It is important to communicate with your doctor about the safest treatment for you and your baby. Medication can be important to reduce the risk of passing the infection to your baby.



How can I reduce my risk of getting an STD while pregnant?

The only way to reduce your risk of getting an STD while pregnant is using condoms the right way every time you have sex.



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Create a birth plan



Be prepared for when your baby comes by creating a birth plan.

1 Know your provider's contact info

Name: _____
Phone: _____
Email: _____
Hospital: _____

2 Decide where you'll have your baby

Circle One: Hospital Home Other

Address: _____

3 Choose how you'll get there

Circle One:

Your car A family or friend's car Bus
Train Uber/Lyft/Taxi Other

4 Decide who you want to be there

You can pick one main support person to be there in the room when you are delivering the baby.

Name: _____
Phone: _____

5 Pick how you will give birth

Discuss which option is best for you with your provider.

Circle One: Vaginal Caesarean

6 Pick a birth position

Discuss the differences between options with your provider.

Circle One:

Lying down Sitting Standing Squatting

7 Plan pain relief

Inform your doctor if you want medicine or an epidural to help manage pain during labor.

8 Decide on breastfeeding

Decide if you would like to breastfeed.

9 Discuss special instructions

If there are any traditions or cultural norms you would like respected in the delivery room, discuss them with your doctor.

If you're in labor, you'll experience:

Contractions

Contractions of your uterus will:

- Be strong and regular - you are not able to talk or walk during them
- Last 30 to 70 seconds (frequency will increase)
- Come every 5-10 minutes (frequency will increase)

Pain

You are experiencing pain in your abdomen and lower back that is:

- Constant
- Does not go away when you change positions

Vaginal discharge

You are experiencing bloody, pink, or brown vaginal discharge. This may occur a few days before labor or right before labor begins.

Your water breaking

You feel a trickle or rush of water. This is because the amniotic sac your baby has been growing in breaks.



Identify that you're in labor

Preterm birth



When is a pre-term baby born?

Before 37 weeks of pregnancy have been completed.

How common is this?

In 2019, 1 in 10 infants in the United States were born preterm.

Why is this important?

Babies born too early (especially before 32 weeks) are more likely to have complications.

Babies who survive preterm birth are at risk for:

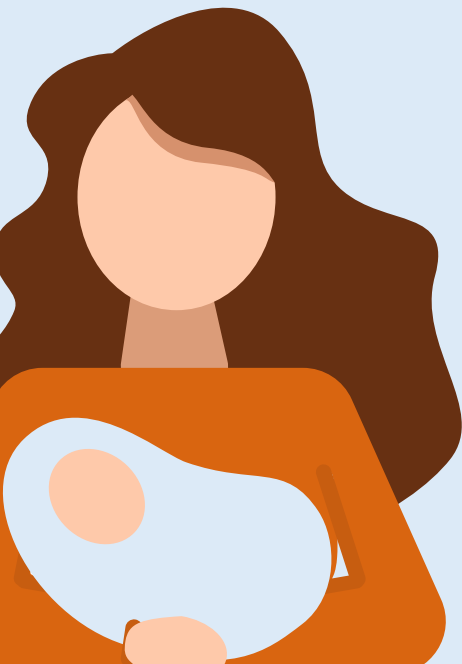
- Breathing problems
- Feeding difficulties
- Cerebral palsy
- Developmental delay
- Vision problems
- Hearing problems
- Preterm births may also take an emotional toll and be a financial burden for families.

Signs of preterm birth

Usually, pre-term labor begins unexpectedly. The cause is unknown.

Like regular labor, signs of early labor are:

- Contractions (the abdomen tightens like a fist) every 10 minutes or more often
- Change in vaginal discharge (a significant increase in the amount of discharge or leaking fluid or bleeding from the vagina)
- Pelvic pressure—the feeling that the baby is pushing down
- Low, dull backache
- Cramps that feel like a menstrual period
- Abdominal cramps with or without diarrhea



What should I do if I think I'm experiencing preterm labor?

See a healthcare provider right away.

If you are having preterm labor, your provider may be able to give you medicine so that the baby will be healthier at birth.

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Normal pregnancy symptoms

During pregnancy, your body goes through many changes. Pregnancy is often an uncomfortable experience. Talk to your doctor about ways to manage your symptoms.

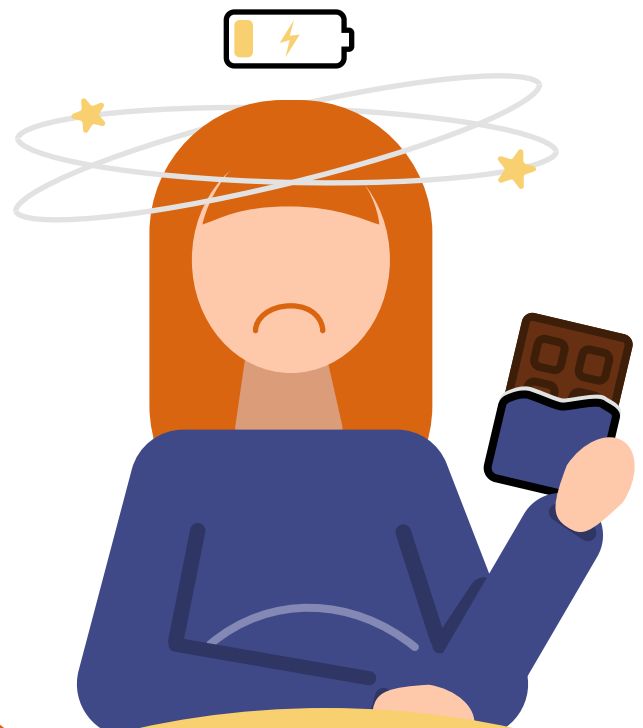
Normal symptoms during pregnancy include the following:

Early pregnancy symptoms:

- Body aches
- Breast tenderness
- Fatigue and drowsiness
- Food cravings and aversions
- Not having a period
- Mood swings and changes
- Nausea and vomiting (“morning sickness”)

Late pregnancy symptoms:

- Ankle swelling
- Bloating
- Constipation
- Darkening of areas of your skin
(your breasts, the line that runs down your belly)
- Dizziness
- Fatigue and drowsiness
- Going to pee often
- Growing pains
- Heartburn
- Mood swings and changes
- Shortness of breath
- Soreness in your lower back
- Trouble sleeping or staying asleep





Urgent pregnancy symptoms

If you are experiencing any of these, **seek medical attention immediately.**



Headache that won't go away or gets worse



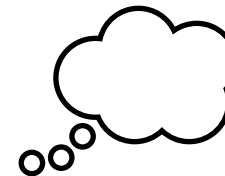
Dizziness or fainting



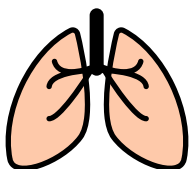
Changes in your vision



Extreme swelling of your face



Thoughts of harming yourself or your baby



Trouble breathing



Chest pain or fast beating heart



Severe belly pain that doesn't go away



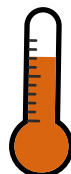
Baby's movement stopping or slowing during pregnancy



Severe nausea or throwing up



Severe swelling, redness, or pain in your hands, arms, or legs



Fever of 100° or higher



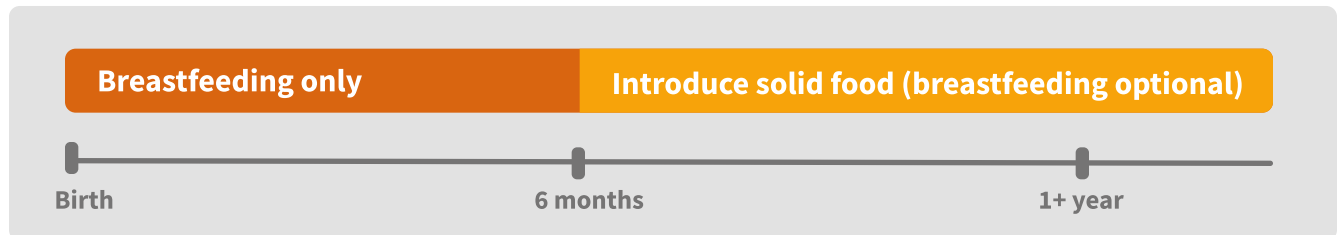
Overwhelming tiredness or fatigue



Heavy vaginal bleeding or discharge during or after pregnancy

Breastfeeding

Breastfeeding, also called nursing, is the process of feeding a mother's breast milk to her infant, either directly from the breast or by pumping out milk from the breast and bottle-feeding.



Tips

- Breastfeed your infant as soon as possible after birth.
- If you would like guidance, ask if a lactation consultant is available.
- Request the hospital staff to avoid feeding your infant any other foods or formula, unless it's necessary.
- Allow your infant to stay with you so that you can breastfeed often. If this is not possible, ask the nurses to bring your infant for breastfeeding.
- Avoid giving your infant pacifiers or artificial nipples so they get used to latching to your breast.

Benefits

Can help lower a mother's risk of:

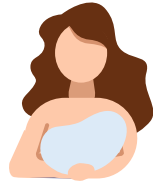
- High blood pressure
- Type 2 diabetes
- Ovarian cancer
- Breast cancer

Can help children with:

- Protection against common infections
- Better survival during baby's first year
- Lower risk of sudden infant death syndrome
- Physical and emotional benefits from early skin-to-skin contact
- Lower risk of allergies, asthma, obesity, Type 2 diabetes



The Basics of Breastfeeding



Know when your infant is hungry

Infants who are hungry will nuzzle against their mother's breast and make sucking motions or will put their hands in their mouths.

8-12
times per day

Nurse often

During the first weeks after birth, you may nurse your infant often, maybe as frequent as 8-12 times a day.



End a breastfeeding session

To break the suction and end a breastfeeding session, insert a clean finger between your breast and your infant's gums. After you hear a soft pop, pull your nipple out of your infant's mouth.

10-15
min per breast

Allow your infant to set their own nursing pattern

Many newborns will feed for 10 to 15 minutes on each breast. If your infant wants to nurse for a much longer periods (30 minutes or longer on each breast) they may not be getting enough milk.



Basics of breast milk



Pumping breast milk

Ask your OB-GYN for a referral for a lactation consultant if you would like guidance from a professional on breastfeeding.

If you are unable to breastfeed your infant directly, it is important to remove milk during the times that you would normally feed your infant.

Expressing milk

Removing milk from your breasts is called “expressing the milk.” Expressing milk will help you to continue making milk.

- Before expressing breast milk, wash your hands thoroughly.
- Only express milk when you are in a clean area. You do not need to wash your breasts or nipples before expressing milk.
- If you need help to get your milk flowing, place an item of your infant's near you.

There are three methods for expressing your breast milk:



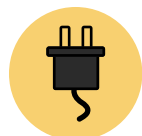
Hand expression

You use your hand to manually massage and compress your breast to remove milk.



Manual pump

You use your hand and wrist to operate a hand-held pumping device that removes milk from your breast.



Electric breast pump

An electric breast pump runs on a battery or through an outlet plug. It can pump milk from one breast or from both breasts at the same time.

Storing Breast Milk

Milk can be stored in clean glass bottles or hard, BPA-free plastic bottles with tight-fitting lids.

After pumping, refrigerate or freeze milk immediately.

- Store milk in small batches (2 to 4 ounces)
- For refrigeration, you can store very clean expressed milk for 5-8 days.
- If freezing, store the milk in small (2 to 4 ounce) batches. Frozen milk is good for 3 to 6 months. After thawing, use the milk within 24 hours and do not refreeze.

Latching



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Start feeding

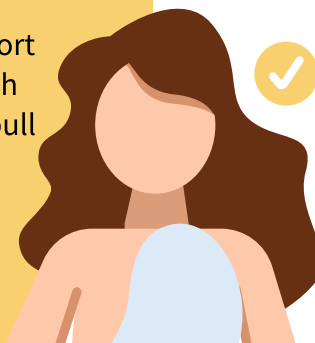
Infants will naturally move their heads while looking and feeling for a breast to feed. There are many ways to start feeding your infant, and the best approach is the one that works for you and your infant.

Getting your infant to "latch" on to your breast for feeding

- Hold your infant against your bare chest.
- Dress your infant in only a diaper to ensure skin-to-skin contact.
- Keep your infant upright, with their head directly under your chin.
- Support your infant's neck and shoulders with one hand and their hips with your other hand. Your infant may try to move around to find your breast.
- Your infant's head should be slightly tilted back to make nursing and swallowing easier. When his or her head is tilted back and the mouth is open, the tongue will naturally be down in the mouth to allow the breast to go on top of it.
- Allow your breast to hang naturally. Your infant may open their mouth when your nipple is near his or her mouth. You also can gently guide the infant to latch on to your nipple.

While your infant is feeding

- Your infant's nostrils may flare to breathe in air. Do not panic—this flaring is normal. Your infant can breathe normally while breastfeeding.
- As your infant tilts backward, support their upper back and shoulders with the palm of your hand and gently pull your infant close.



Signs of a good latch

A good latch is important for both successful breastfeeding and your own comfort. When you have a good latch:

- ✓ The latch feels comfortable and does not hurt or pinch. How it feels is more important than how it looks.
- ✓ Your infant does not need to turn their head while feeding. Their chest is close to your body.
- ✓ You see little or no areola (the dark-colored skin on your breast around your nipple). Depending on the size of your areola and the size of your infant's mouth, you may see a small amount of your areola. If more is showing, it should be above your infant's lip.
- ✓ Your infant's mouth will be filled with breasts when in the best latch position.
- ✓ Your infant's tongue is cupped under the breast, although you might not see it.
- ✓ You can hear or see your infant swallowing. Some babies swallow quietly - listen for or look for a pause in their breathing.
- ✓ Your infant's ears "wiggle" slightly.
- ✓ Your infant's lips turn outward, similar to fish lips, not inward. You may not even see your infant's bottom lip.
- ✓ Your infant's chin touches your breast.

Weaning



Weaning is the process of switching an infant's diet from breast milk or formula to other foods and fluids.

Choosing when to wean is a personal decision - it could be for a return to work, your or your infant's health, or just a feeling that the time is right.

Speak with your infant's health care provider before starting to wean your infant to make sure that they are ready.

Birth to 4 months

Infants need only breast milk or formula to meet their nutritional needs.

- Breastfeeding: newborn may need to nurse 8-12 times per day; by 4 months, 4-6 times per day.
- Formula-fed infants may need to be fed about 6-8 times per day, with newborns consuming about 2-3 ounces per feeding. The number of feedings will decrease as the infant gets older, similar to breastfeeding.

4 to 6 months

An infant needs to consume 28-45 ounces of breast milk or formula per day.

- They often are ready to start being introduced to solid food. Starting solid foods too soon can be dangerous. **Do not feed them solid food until they are physically ready.**
- Start solid feedings (1-2 tbsps) of iron-fortified infant rice cereal mixed with breast milk or formula, stirred to a thin consistency. Once your infant is eating rice cereal regularly, you may try other iron-fortified instant cereals.
- Only give one new cereal per week to watch for possible intolerances or allergies.



When should I not breastfeed?

If you cannot breastfeed or choose not to, formula is completely acceptable and will nourish your baby. Discuss with your OB/GYN and pediatrician how meet your baby's nutritional needs. You can get low-cost formula through WIC.



Medication

Some medications are dangerous to infants and can be passed through your breast milk.

Talk to your health care providers about breastfeeding if you are taking:

- Antiretroviral medications (for HIV/AIDS)
- Birth-control medications containing estrogen, until breastfeeding has been well-established
- Cancer chemotherapy agents
- Illegal drugs
- Medication for migraines
- Mood stabilizers (e.g., lithium, lamotrigine)
- Sleep-aid medicines
- Other prescriptions, over-the-counter medicines, vitamins, and herbal therapies.



Radiation therapy

If you are going through radiation therapy, you should not breastfeed. Some therapies may require only a brief interruption of breastfeeding - discuss with your doctor.



Some health conditions

If you have certain illnesses or infections, you could pass the illness or infection to your infant through breastfeeding.

If you have any of these conditions, breastfeeding your infant is NOT recommended.

- HIV/AIDS (increased risk of cancer)
- Infection with human T-cell lymphotropic virus type I or type II
- Untreated, active tuberculosis
- H1N1 (can feed pumped milk, but avoid being near your infant)



Chronic illnesses and other conditions

If you have a chronic illness, you may be advised not to breastfeed or to take steps to ensure you own health while breastfeeding.

- **Diabetes** - monitor your blood sugar levels regularly, may need to reduce your insulin, and may need a snack that has carbohydrates before or during breastfeeding.
- **Underweight, including if you have a thyroid condition or a bowel diseases** - you may need to increase your calories to maintain your health during breastfeeding.
- **Past breast surgery** - you may face some difficulties with breastfeeding.
- **Current or history of drug use or excessive alcohol intake** - may be advised not to breastfeed.



Contact your infant's health care provider if you see any signs of a reaction to your breast milk in your infant, such as diarrhea, excessive crying, or sleepiness.

Taking care of yourself

- Stay active - aerobic activity and muscle strengthening
- 6 ways to keep good oral health
- Relationship abuse, violence, and types of abuse
- Consent
- What to do if you've been assaulted
- Substance use disorder

Stay active

Physical activity is anything that gets your body moving. You need to do two types of physical activity each week: **aerobic activity** (activities that increase your heart rate) and **muscle strengthening**.

You don't have to do it all at once - you can spread your activity out throughout the week (such as 30 minutes a day, five days a week).

You don't need special equipment or clothes to stay active - you can modify activities to fit you and your lifestyle.

Why is physical activity important?

- Helps you achieve a healthy weight and keeping excess weight off
- Reduce the risk of diseases and illnesses, such as cardiovascular diseases, type 2 diabetes, cancer
- Reduces risk of depression and anxiety
- Promotes better sleep
- Strengthens your bones and muscles
- Improves your ability to do daily activities and prevent falls
- Increases your chances of living longer



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Aerobic activity

Aerobic activity or “cardio” gets you breathing harder and your heart beating faster. From pushing a lawnmower to taking a dance class, to walking or biking to the store – these types of activities and more count.

Intensity is how hard your body is working during physical activity.

Medium intensity

Medium intensity aerobic physical activity means you’re working hard enough to raise your heart rate and break a sweat. If it’s a medium intensity, you’ll be able to talk but not sing.

Examples of medium intensity activity:

- Walking fast
- Hiking
- Dancing
- Riding a bike
- Pushing a lawnmower

High intensity

High intensity aerobic activity means you’re breathing hard and fast, and your heart rate has gone up quite a bit. If it’s vigorous activity, you won’t be able to say more than a few words without pausing for a breath.

Examples of high intensity activity:

- Jogging or running
- Swimming laps
- Riding a bike fast or on hills
- Playing basketball
- Exercises you did in PE like mountain climbers, high knees, or burpees

Do **at least 150 minutes** of medium intensity aerobic activity per week



Muscle strengthening

Muscle strengthening activities work all the major muscle groups of your body—legs, hips, back, chest, abdomen, shoulders, and arms. You can do activities that strengthen your muscles on the same or different days that you do aerobic activity - whichever works best for you.

Do muscle-strengthening activities to the point where it's hard for you to do another repetition without help.

- **Repetition (rep)** - A repetition is one complete movement of an activity, like lifting a weight or doing a sit-up.
- **Sets** - Try to do 8-12 repetitions per activity, which counts as 1 set.
- **Intensity** - Try to do at least 1 set of muscle-strengthening activities. To gain even more benefits, do 2 or 3 sets.

Examples of muscle strengthening:

- Lifting weights or heavy objects that you have in your home
- Doing exercises that use your body weight for resistance (e.g., push-ups, sit-ups, planks)
- Heavy gardening (e.g., digging, shoveling)
- Yoga

Do muscle strengthening
at least twice a week



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6 ways to keep good oral health

You can keep your teeth for a lifetime.

Here are some things you can do to maintain a healthy mouth and strong teeth.



- 1 Drink water and brush your teeth with toothpaste**
Make sure your toothpaste has fluoride.
- 2 Visit your dentist at least once a year**
Even if you have dentures or no natural teeth, you should visit the dentist.
- 3 Do not use any tobacco products**
If you smoke or vape, consider quitting.
- 4 Limit alcoholic and sugary drinks**
This will help reduce your chances of getting a cavity.
- 5 Manage your diabetes**
If you have diabetes, managing it will decrease risk for other complications, including gum disease.
- 6 If your medication causes dry mouth, ask your doctor for a different medication**
Drink plenty of water, chew sugarless gum, and avoid tobacco products and alcohol.
- ! See your doctor or a dentist if you have sudden changes in taste and smell**



Relationship abuse and violence

A partner can gain control and act abusive to you.

It is not your fault, and it is never okay. All forms of abuse are strategic decisions a person makes to exert control and power over their partner.

You have the right to say no and to walk away from any situation or person that makes you uncomfortable.

We can't have sex unless you wear a condom.

I don't want to do that during sex.

Stop sending me messages.



Resources

If you need help to walk away from your partner, you can ask for help from these resources.



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Call

Domestic Violence 24/7 Statewide Hotline
Always confidential and you will always reach a live person
[1 \(800\) 332-7385](tel:18003327385)

Sexual Violence Crisis Hotline
[\(833\) 338-7277](tel:8333387277)

National Domestic Violence Hotline
[1 \(800\) 799-7233](tel:18007997233)

Families First Direct Line
[\(317\) 634-6341](tel:3176346341)

Online resources

Indiana Coalition against Domestic Violence
www.icadvinc.org

Statewide Safe Housing
www.safepathhome.org

Help for a loved one who is abusive
www.icadvinc.org/batterers-intervention-programs/

Low-cost legal help
Website: www.womenslaw.org/find-help/in/finding-lawyer/legal-assistance

Email: <https://hotline.womenslaw.org/public>

Types of abuse

Even if the wounds aren't physical, it doesn't make them any less concerning. Learn about the different types of abuse and warning signs.



Physical abuse

When a person hurts or tries to hurt you by hitting, kicking, or using another type of physical force.

Signs include: slapping, choking, threatening to or using weapons against you, forcing you to use drugs or alcohol, forcing you to stay at home or stopping you from leaving, and isolating you from friends and family.



Emotional and verbal abuse

Use of verbal and non-verbal communication to harm or control you mentally or emotionally.

Signs include: constantly monitoring you, controlling who you spend time with, throwing insults your way, cheating on you, gaslighting, saying that you do not deserve anyone better, and blaming you for their actions.



Sexual abuse and control

Forcing or attempting to force a partner to take part in a sex act, sexual touching, or a non-physical sexual event (e.g., sexting) when the partner does not or cannot consent.

Signs include: guiltting you into having sex with them, threatening to leave you if you do not have sex with them, forcing you to take drugs or alcohol to lower your inhibitions, forcing you to have sex, hurting you during sex, intentionally having sex with you to give you an STD, and having other people participate in sex without your consent.



Reproductive control

Your partner controls and has power over your reproductive system against your will.

Signs include: keeping track of your periods, refusing to use condoms or poking holes in condoms or removing condoms during sex, forcing you to become pregnant against your will, and removing birth control methods you may use, such as IUDs or rings.



Financial abuse

Your partner controls and exerts power over your finances and your ability to access money.

Signs include: preventing you from accessing your bank account, depositing your paycheck into an account you can't access, stealing your money, hurting your credit score, closely monitoring your spending, demanding to see receipts, and preventing you from working.



Digital abuse

Your partner uses the internet or social media to control, humiliate, or intimidate you.

Signs include: being verbally abusive on social media, forcing you to send explicit or compromising pictures of yourself, calling you explicit or hurtful names on the Internet, controlling your social media presence or accounts, creating fake accounts to follow and monitor your social media activities, and forcing you to tell them your passwords.



Stalking

A pattern of repeated, unwanted attention and contact by a partner that causes fear or concern for one's own safety or the safety of someone close to the victim.

Signs include: unexpectedly showing up to your workplace, home, or any other places you visit frequently, spreading gossip or false rumors about you, tracking where you are and/or your social media activity, and calling or sending unwanted messages or gifts to you.

Consent is...

Consent is an ongoing agreement that outlines what you are comfortable doing or not doing with your body and with your partner.



CLEAR

You CANNOT give consent when:

- You are underage (varies by state; in Indiana, the legal age of consent is 16)
- You are incapacitated due to drugs and/or alcohol
- You are not awake or not conscious

COMMUNICATED

Consent should be **clear, direct, and verbal**. You have the power to say what you are comfortable with before you step into the bedroom. Use that power!

It's not ok if your partner ignores you when you say "No" or express discomfort. It is not ok for them to pressure you into any physical acts that you are not comfortable with.

This doesn't only apply to sex - it includes kissing, touching, and more.

ONGOING

You can change your mind at any time, even if earlier you said yes.

Someone doesn't have your consent just because you have consented to the activity in the past.

- Are they asking, "Is this okay?" or "Do you like this?"
- Are they asking for permission before you change the type of sexual activity

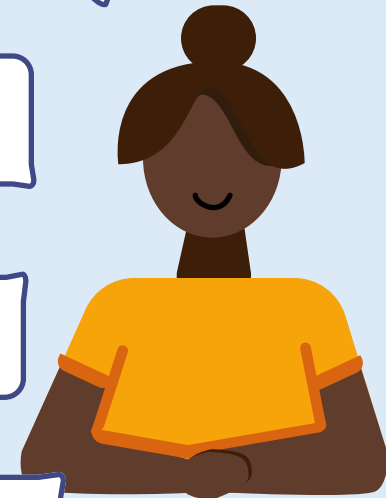
I don't want to do that anymore.

Do you like this?

Are you comfortable?

Is this ok?

YES! I love when you do that.



What should I do if I am assaulted?

What is sexual assault?

Unwanted sexual contact without your consent.

Assault isn't always done by a stranger - it can be someone you know and trusted.

Examples include rape, forcing the victim to perform sexual acts against their will (e.g., oral sex, penetrative sex), groping, and fondling.

What is force?

Force can be physically forcing you to commit sexual acts, but it can also be psychological or emotional.

A perpetrator can force you into sexual acts by intimidating you, threatening to hurt you or your loved ones, and emotionally manipulating you.



Know that what happened is not your fault.

Being sexually assaulted is a violation of your body and it is not okay. This is not your fault.



1 Make sure you are safe

If there is still danger, leave the place where you were assaulted. Find a place where you feel safe.



2 Call someone you trust

Call someone you trust to be with you and provide support.



3 Call the National Sexual Assault Hotline

1 (800) 656-4673

A trained professional will answer the phone and give you directions to a local health facility to care for people who have survived sexual assault.

They will help walk you through the process of receiving medical/mental help and pressing charges, if you wish.

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Substance use disorder

A substance use disorder (SUD) is a mental disorder that affects a person's brain and behavior, leading to a person's inability to control their use of substances such as legal or illegal drugs, alcohol, or medications.

Symptoms can range from moderate to severe, with addiction being the most severe form.

Signs and symptoms you may have a drug problem or substance use disorder:

- Consuming the drug every day or multiple times a day to function
- Needing more of the drug to feel the same effects
- Spending money on getting the drug, despite having financial problems
- Neglecting your work or personal responsibilities due to your drug use
- Wanting to stop using the drug but you are unable to
- Continuing to use the drug despite recognizing that your drug use is posing problems to your life
- Spending lots of time finding, using, and recovering from drug use
- Feeling unpleasant symptoms (withdrawal effects) when you are not using

Find help

There is no shame in getting help for a substance disorder.

If your loved one is thinking about harming themselves or others or attempting suicide, seek help right away:

Call the **National Suicide Prevention Lifeline (Lifeline)** at [1-800-273-TALK \(8255\)](tel:1-800-273-TALK) or text the **Crisis Text Line** (text HELLO to [741741](tel:741741)).

Seek help at recovery centers

<https://www.samhsa.gov/sites/default/files/virtual-recovery-resources.pdf>

Call the National Drug and Alcohol Treatment Referral Routing Service to speak with someone about an alcohol or substance use problem.

[1-800-662-HELP](tel:1-800-662-HELP)

Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA National Hotline: [\(800\) 662-4357](tel:800-662-4357)
Find substance use disorder treatments and programs across the country.
findtreatment.gov

Indiana Community Resources Navigator

[\(866\) 211-9966](tel:866-211-9966)

Syringe Exchange Program Locations

www.indianarecoverynetwork.org/content/?site=info_syringe

Request Narcan or Fentanyl Testing Strips

www.overdoselifeline.org/

National Cancer Institute

smokefree.gov

Smoking quitline

[1-877-44U-QUIT](tel:1-877-44U-QUIT)
[\(1-877-448-7848\)](tel:1-877-448-7848)



Nutrition

- Healthy eating for healthy weight
- Fruits
- Vegetables
- Grains
- Protein
- Dairy
- Beans, peas, and lentils
- SNAP
- WIC
- Eating disorders

SNAP

SNAP (Supplemental Nutrition Assistance Program) provides money to help families in need purchase healthy food and move towards self-sufficiency.

How do I apply?

Apply for SNAP by contacting your state SNAP office.

Call SNAP Indiana

(800) 403-0864

SNAP Indiana Website

<https://www.in.gov/fssa/dfr/snap-food-assistance/>

You can use SNAP online!

Retailers in Indiana that accept SNAP online: Aldi, Amazon, Meijer, Sam's Club Scan and Go, Schnuck's Market, Strack and Van Til, Town and Country, Van Til's Supermarket, and Walmart.



Any food, such as:

- Fruits and vegetables
- Meat, poultry, and fish
- Dairy products
- Breads and cereals
- Snacks
- **Non-alcoholic** beverages
- Seeds and plants to grow food

Some foods and drinks, like:

- Beer, wine, liquor, cigarettes, tobacco
- Vitamins, medicines, and supplements
- Live animals
- Foods that are hot when you buy them

Things that aren't food, like:

- Pet food
- Cleaning supplies, paper products, and other household supplies
- Hygiene items (toothpaste, toilet paper, pads/tampons)
- Cosmetics



SNAP



Am I eligible for SNAP?

If your state SNAP office determines that you are eligible, you will receive benefits back to the date you submitted your application. If you participate in another assistance program, you may be automatically income-eligible for WIC.

Work Requirements (if you are age 16 – 59 and able to work)

- Registering for work
- Participating in SNAP Employment and Training (E&T) or workfare if assigned
- Taking a suitable job if offered
- Not voluntarily quitting a job
- Not reducing your work hours below 30 per week without a good reason
- Additional work requirements for **Able-Bodied Adult Without Dependents (ABAWD)** to get SNAP for more than 3 months in 3 years

You are excused from the work requirements if you are:

- Already working 30+ hours per week (or earning at least \$217.50 per week)
- Meeting work requirements for another program (TANF or unemployment compensation)
- Taking care of a child under 6 or an incapacitated person
- Unable to work due to a physical or mental limitation
- Participating regularly in an alcohol or drug treatment program
- Studying in school or a training program at least half-time (but college students are subject to other eligibility rules).

Disqualification

If you are not excused and don't meet the work requirements, you are disqualified from getting SNAP for at least a month. You must meet the requirements to get SNAP again.

If you get back on SNAP and then don't meet the requirements again, then you are disqualified for longer than a month and you could be disqualified forever.

WIC



WIC (Special Supplemental Nutrition Program for Women, Infants, and Children)

provides for the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk.

Address

Indiana WIC Program
Indiana State Department of Health
2 North Meridian Street, 5th Floor
Indianapolis, Indiana 46204

How do I apply?

Call **(800) 522-0874** or
email **inwic@isdh.in.gov** with your questions
and to make a certification appointment.

How does WIC help?

- Provides nutritious food from all the major food groups
 - **Baby foods:** Infant cereal, baby foods, iron-fortified infant formula, iron-fortified infant formula, special infant formulas and medical foods (if medically indicated)
 - **Fruits:** Vitamin C-rich fruit
 - **Vegetables:** Vegetables or vegetable juice
 - **Grains:** Whole wheat bread and other whole-grain options, iron-fortified adult cereal
 - **Protein:** Eggs, tofu, peanut butter, canned fish
 - **Dairy:** Milk, cheese, yogurt, soy-based beverages
 - **Beans, peas, and lentils:** Dried and canned beans/peas
- Shares information on healthy eating and breastfeeding
- Health care referrals
 - Nutrition and breastfeeding
 - Substance abuse
 - Immunizations
- Health and immunization screenings

Am I eligible for WIC?

- I am a pregnant, postpartum, and breastfeeding woman or have children up to age 5
- I am income eligible (you may be eligible if you participate in another assistance program)
- I am an Indiana state resident
- A health professional or trained health official has determined me a “nutrition risk”

Healthy eating for healthy weight



A healthy eating plan:

- Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat dairy/non-dairy products
- Includes a variety of protein foods such as seafood, lean meats and poultry, eggs, legumes (beans and peas), soy products, nuts, and seeds.
- Is low in added sugars, sodium, saturated fats, trans fats, and cholesterol.
- Meets and stays within your calorie needs

Eat the rainbow

Add an array of colors to your plate:

- Dark, leafy greens, oranges, and tomatoes — even fresh herbs — are loaded with vitamins, fiber, and minerals.
- Adding frozen peppers, broccoli, or onions to stews and omelets gives them a quick and convenient boost of color and nutrients.

Fruit

- Fresh, frozen, or canned fruits are great choices.
- Dried and canned fruit may contain added sugars or syrups. Choose canned varieties of fruit packed in water or its own juice.

Comfort Foods

Healthy eating is all about balance.

- You can enjoy your favorite foods, even if they are high in calories, fat or added sugars.
- Eat them only once in a while and balance them with healthier foods and more physical activity.

Calcium-rich foods

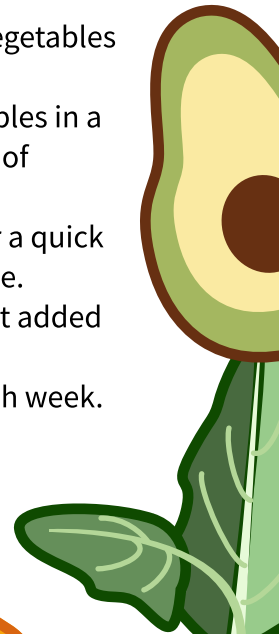
- In addition to fat-free and low-fat milk, consider low-fat and fat-free yogurts without added sugars. These come in a variety of flavors and can be a great dessert substitute.

Meats

- If your favorite recipe calls for frying fish or breaded chicken, try healthier variations by baking or grilling.
- Try dry beans instead of meats.
- Ask friends and search the Internet and magazines for recipes with fewer calories — you might be surprised to find a new favorite dish!

Vegetables

- Add variety to grilled or steamed vegetables with an herb such as rosemary.
- You can also sauté (pan fry) vegetables in a non-stick pan with a small amount of cooking spray.
- Try frozen or canned vegetables for a quick side dish—just microwave and serve.
- Look for canned vegetables without added salt, butter, or cream sauces.
- For variety, try a new vegetable each week.



Fruits

Goal: 1.5 - 2 cups a day



Benefits

Reduced risk of some chronic diseases; vital nutrients for health and maintenance

Nutrients

Potassium, dietary fiber, Vitamin C, folate

Ways to eat fruit

Fresh, frozen, canned, dried/dehydrated, whole, cut-up, pureed, cooked, 100% fruit juice

Potassium

- Potassium helps maintain healthy blood pressure.
- Find it in: bananas, prunes, prune juice, dried peaches, apricots, cantaloupe, honeydew melon, and orange juice.

Dietary Fiber

- Dietary fiber from fruits, as a part of an overall healthy diet, helps reduce blood cholesterol levels and may lower risk of heart disease.
- Fiber is important for proper bowel function.
- Whole or cut-up fruits are sources of dietary fiber; fruit juices contain little or no fiber.

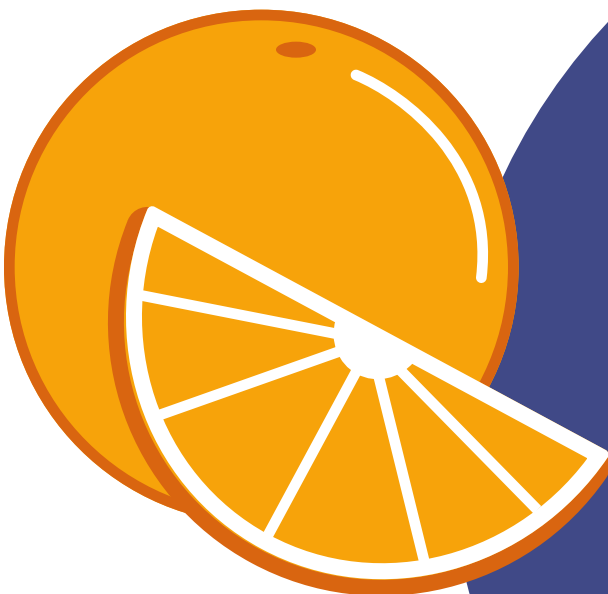
At least half of the recommended amount of fruit should come from whole, fresh fruit

Vitamin C

- Vitamin C is important for growth and repair of all body tissues, helps heal cuts and wounds, and keeps teeth and gums healthy.
- Vitamin C helps your body absorb iron more easily.
- Find it in: oranges, grapefruits, tangerines, and strawberries

Health Benefits of Fruits

- **Lower calorie intake:** As part of an overall healthy diet, eating fruits instead of higher-calorie food may be useful in lowering calorie intake.
- **Prevent disease:** Eating a diet rich in vegetables and fruits can help reduce risk for heart disease, including heart attack and stroke, and may protect against certain types of cancers.
- **Add nutrients:** Fruit can help increase your intake of fiber and potassium, which are important nutrients that many Americans do not get enough of in their diet.



Vegetables

Goal: 2 - 3 cups a day



Benefits

Reduced risk for chronic illness, important for health and maintenance

Nutrients

Potassium, dietary fiber, folate, Vitamin A, Vitamin C

Ways to eat vegetables

Raw or cooked; fresh, frozen, canned, or dried/dehydrated; whole, cut-up, or mashed

All food and beverage choices matter – focus on **variety**, **amount**, and **nutrition**.

Fat and calories

- Most vegetables are naturally low in fat and calories.
- Vegetables that are lower in calories per cup instead of higher-calorie food may help lower calorie intake.
- Sauces or seasonings may add fat and calories.

Potassium

- Maintain healthy blood pressure
- Find it in: sweet potatoes, white potatoes, white beans, tomato products (paste, sauce, and juice), beet greens, soybeans, lima beans, spinach, lentils, kidney beans, and acorn squash

Dietary fiber

- Reduces blood cholesterol levels and may lower the risk of heart disease.

Vitamin A

- Keeps eyes and skin healthy and helps to protect against infections.

Vitamin C

- Heals cuts and wounds and keeps teeth and gums healthy.
- Absorb iron more easily.



5

types of
vegetables

- Dark green
- Beans, peas, and lentils
- Starchy
- Red and orange
- Other

Grains

Goal: 1 cup a day



Benefits

Prevent heart disease, improve digestion, manage weight, reduce blood cholesterol

Nutrients

Fiber, complex carbs, B vitamins (thiamin, riboflavin, niacin, and folate), and minerals (iron, magnesium, and selenium)

Ways to eat grains

Whole grains, fortified grain products

Dietary fiber

- Support healthy digestion
- Reduce blood cholesterol levels and may lower the risk of heart disease
- Helps you poop regularly!

Fortified with folate

- Prevent birth defects in the nervous system of your baby

B vitamins (thiamin, riboflavin, and niacin)

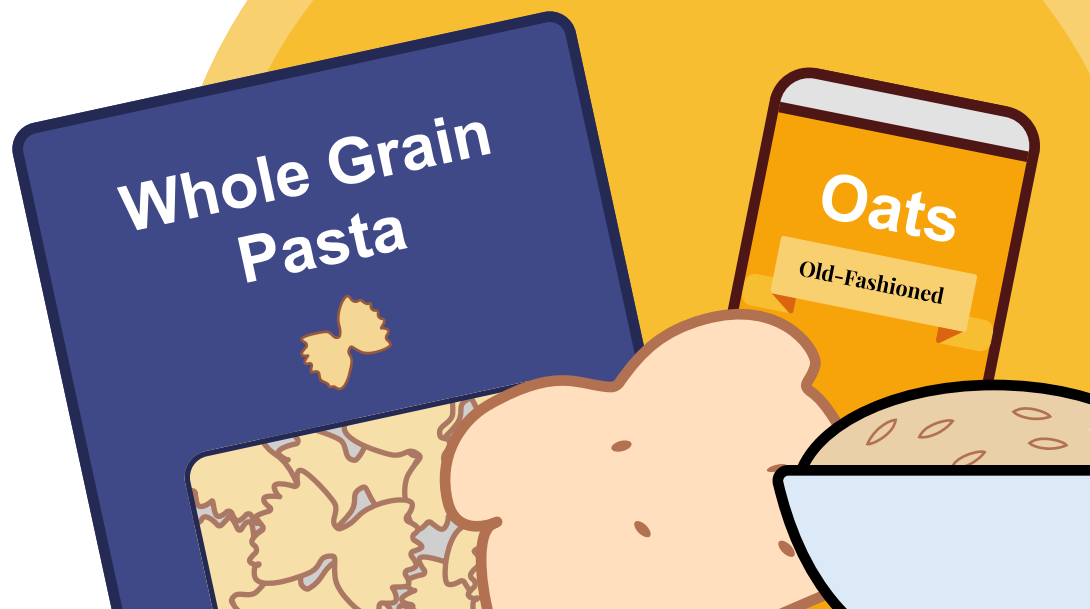
- Essential for a healthy nervous system. Many refined grains are enriched with these B vitamins.

Iron

- Used to carry oxygen in the blood.
- Many teenage girls and women have iron-deficiency anemia, so it is important to eat iron-rich foods.
- Fortified whole and refined grain products, including many ready-to-eat cereals, are major sources of iron.

Eat whole

- Whole grain pasta
- Whole wheat bread
- Oatmeal
- Brown rice
- Quinoa





Protein

Goal: 5 - 6.5 ounces (140 grams - 170 grams) a day

Benefits

Building bones, muscles, cartilage, skin, blood

Nutrients

Unsaturated fats, dietary fiber, vitamin B (niacin, thiamin, riboflavin, and B6), vitamin E, iron, zinc, magnesium

Ways to eat protein

Meat, poultry, seafood, beans, peas, lentils, nuts, seeds, soy products

How does protein help the body?

- Proteins function as building blocks for bones, muscles, cartilage, skin, and blood.

Nutrients

B vitamins

- Help build tissue
- Aid in forming red blood cells

Minerals

- Iron helps prevent anemia.
- Magnesium helps build bones and supports muscle function.
- Zinc can support your immune system.

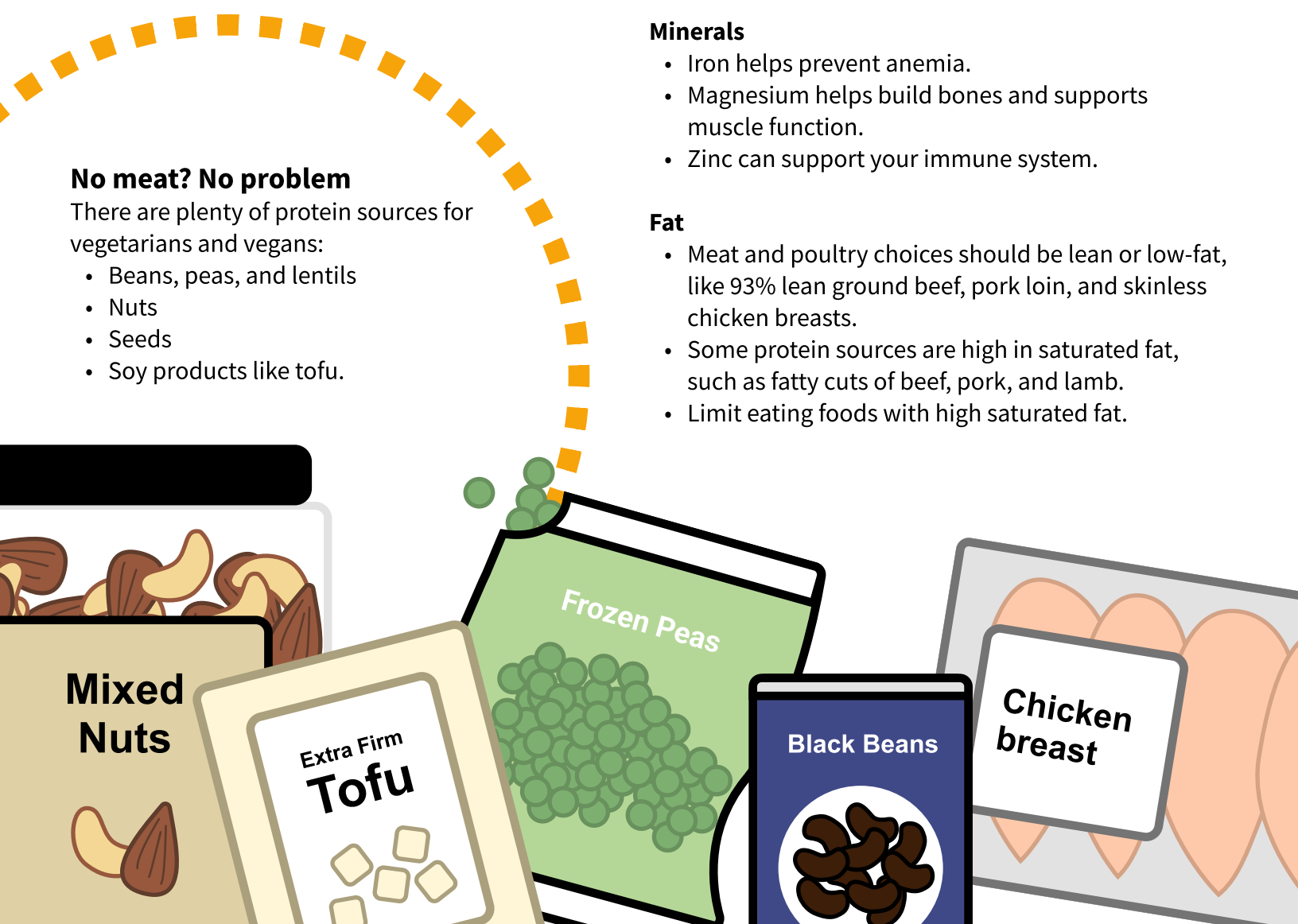
Fat

- Meat and poultry choices should be lean or low-fat, like 93% lean ground beef, pork loin, and skinless chicken breasts.
- Some protein sources are high in saturated fat, such as fatty cuts of beef, pork, and lamb.
- Limit eating foods with high saturated fat.

No meat? No problem

There are plenty of protein sources for vegetarians and vegans:

- Beans, peas, and lentils
- Nuts
- Seeds
- Soy products like tofu.



Dairy

Goal: 3 cups a day

Benefits

Build and maintain strong bones

Nutrients

Calcium, potassium, Vitamin D, protein

Prevention

Improve bone health at all ages; prevent osteoporosis



No dairy? No problem

Fortified soy milk and yogurt have calcium, vitamin A, and vitamin D added, so their nutrition content is similar to dairy milk and yogurt.

Plant-based milk (e.g., almond, rice, coconut, oat, hemp) may contain calcium, but they aren't part of the Dairy Group because their nutrition content is not similar.

For non-dairy sources of calcium:

- Calcium-fortified juices and plant-based milk (rice or almond milk)
- Canned fish (sardines, salmon with bones)
- Tofu
- Some leafy greens (collard and turnip greens, spinach, kale, bok choy)

Nutrients

Calcium

- Calcium helps build bones and teeth and maintain bone strength.
- Dairy products are the main source of calcium in American diets.

Potassium

- Many people do not get enough potassium
- Diets rich in potassium may help to maintain healthy blood pressure.
- Find it in: dairy products and fortified soy milk

Vitamin D

- Vitamin D helps maintain proper levels of calcium and phosphorus, which helps build and maintain bones.
- Find it in: Milk and soy milk that are fortified with vitamin D, some fish (like salmon), and other foods fortified with vitamin D.

Saturated Fat

- Milk products that are low-fat or fat-free forms provide very little saturated fat.

What is dairy?

Dairy includes milk, yogurt, cheese, lactose-free milk, fortified soy milk, and yogurt.

It **does not** include foods made from milk that have little calcium and high-fat content, such as cream cheese, sour cream, cream, and butter.



Cheese

Beans, peas, and lentils



Benefits

Can count as both vegetables and proteins

Nutrients

Protein, fiber, folate, potassium, iron, zinc

Find it

Dry, canned, or frozen

Manage your nutrition

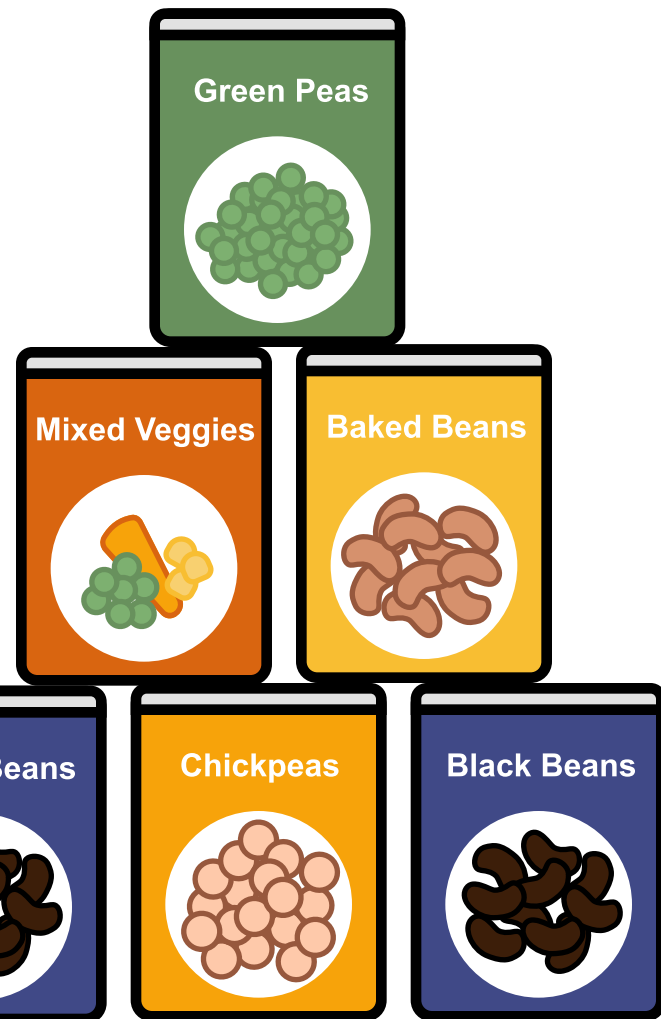
You can count beans, peas, and lentils as vegetables or proteins depending on how they fit into your overall diet.

Vegetables

- Like vegetables, they are excellent sources of dietary fiber, folate, and potassium.
- If you regularly eat meat, poultry, and seafood: count beans, peas, and lentils in the vegetable group.

Protein

- Like foods in the protein group, they are excellent sources of plant protein and provide nutrients, such as iron and zinc.
- **Vegetarian option** - Because they are similar to meats, poultry, and seafood in nutritional value, you can substitute beans, peas, and lentils for other foods in the protein group.
- Consuming beans, peas, and lentils is highly **recommended for everyone** because of their high nutritional value.
- If you are vegetarian, vegan, or don't eat meat, poultry, or seafood often, count some of the beans, peas, and lentils you eat in the Protein Foods Group.



Eating Disorders

Eating disorders are serious mental health illnesses. Primary symptoms include severe changes to eating or exercise.

Although many people are concerned about their health, weight, or appearance, some people become obsessed with weight loss, bodyweight or shape, and controlling their food intake. These may be signs of an eating disorder.

Eating disorders are not a choice.

These disorders can affect your physical and mental health. In some cases, they can be life-threatening. People with eating disorders may appear healthy, yet be extremely ill. With treatment, people can recover completely.

Common Types of Eating Disorders

- Anorexia nervosa
- Bulimia nervosa
- Binge-eating disorder

How are eating disorders treated?

Eating disorders can be treated. Early detection and treatment are important for a full recovery. People with eating disorders are at higher risk for suicide and medical complications.

Treatments may include:

- Psychotherapy (“talk therapy”)
- Medical care and monitoring
- Nutritional counseling
- Medication(s)

Typical treatment goals include:

- Restoring adequate nutrition
- Bringing weight to a healthy level
- Reducing excessive exercise
- Stopping binge-eating and vomiting
- Treating other mental disorders (such as depression, anxiety, substance use problems)



Where can I find help?

If you are struggling with keeping healthy eating patterns, **talk to your primary care physician first.**

They can refer you to mental health and nutrition professionals to provide you with the care you need, such as:

- Psychologists and psychiatrists
- Dieticians and nutritionists
- Social workers
- Occupational therapists and rehabilitation therapists
- Nurses and mental health nurses

A positive support system can play an important role in treatment and could improve treatment outcomes.

National Eating Disorder Help Line

1 (800) 931-2237

www.nationaleatingdisorders.org



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Anorexia

Anorexia nervosa is a condition where people avoid food, severely restrict food, or eat very small quantities of only certain foods. They also may weigh themselves repeatedly. Even when dangerously underweight, they may see themselves as overweight.

Anorexia nervosa can be fatal.

It has an extremely high death rate compared to other mental disorders. People with anorexia are at risk of dying from medical issues related to starvation. Suicide is the second leading cause of death for people with anorexia nervosa.

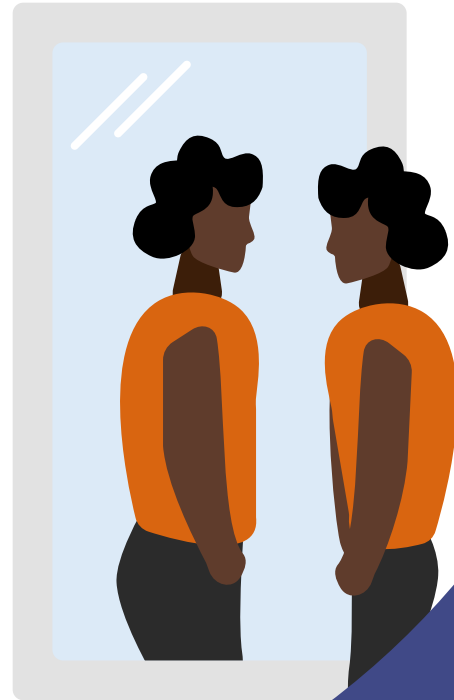
Types of Anorexia

Restrictive

- Severely limiting the amount and type of food you consume

Binge-Purge (also known as vomiting)

- Restricting the amount and type of food you consume
- Having binge-eating and purging episodes (eating large amounts of food in a short time followed by vomiting or using laxatives or diuretics or excessively exercising)



Symptoms

- Extremely restricted eating and/or intensive and excessive exercise
- Extreme thinness (emaciation)
- A relentless pursuit of thinness and unwillingness to maintain a normal or healthy weight
- Intense fear of gaining weight
- Distorted body or self-image that is heavily influenced by perceptions of body weight and shape
- Denial of the seriousness of low body weight

Anorexia can lead to many serious health issues, such as:

- Thinning of the bones
- Anemia
- Muscle wasting and weakness
- Brittle hair and nails
- Dry and yellowish skin
- Severe constipation
- Low blood pressure
- Damage to the heart
- Drop in internal body temperature
- Feeling tired all the time
- Infertility
- Brain damage
- Multiple organ failure

Bulimia



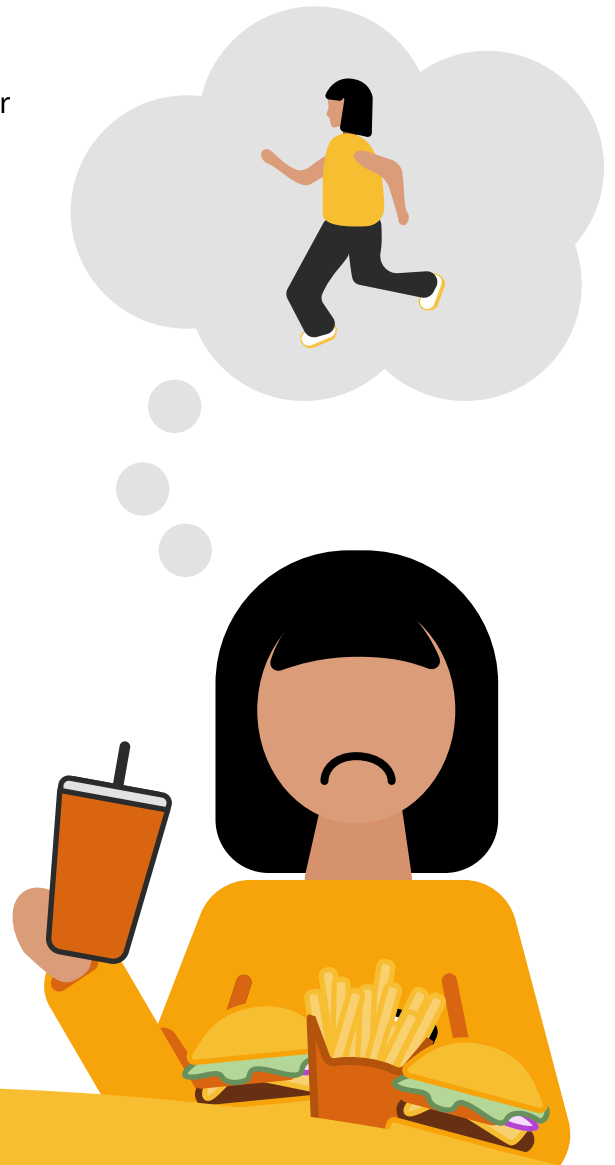
Bulimia nervosa is a condition where people have recurrent episodes of eating unusually large amounts of food and feeling a lack of control over their eating.

This binge-eating is followed by behaviors that make up for the overeating to prevent weight gain, such as forced vomiting, excessive use of laxatives or diuretics, fasting, excessive exercise, or a combination of these behaviors.

Unlike those with anorexia nervosa, people with bulimia nervosa may maintain a normal weight or be overweight.

Symptoms

- Chronically inflamed and sore throat
- Swollen salivary glands in the neck and jaw area
- Worn tooth enamel and increasingly sensitive and decaying teeth from exposure to stomach acid when vomiting
- Acid reflux disorder and other gastrointestinal problems
- Intestinal distress and irritation from laxative abuse
- Severe dehydration from purging
- Electrolyte imbalance (too low or too high levels of sodium, calcium, potassium, and other minerals), which can lead to stroke or heart attack



What's the difference?

Bulimia, anorexia, and binge eating can seem similar, but are all different disorders.

All disorders:

- Are mental health conditions
- Affect how you eat
- Can affect how you exercise
- Threaten your health

People with bulimia:

- Often have a normal weight
- Purge (try to get rid of the food or weight through vomiting or exercise)

Binge-eating

Binge-eating disorder is a condition where people lose control of their eating and have reoccurring episodes of eating unusually large amounts of food.

Unlike bulimia nervosa, periods of binge-eating are not followed by purging, excessive exercise, or fasting. As a result, people with binge-eating disorders are often overweight or obese.

Symptoms

- Eating unusually large amounts of food in a short amount of time, for example, within two hours
- Eating rapidly during binge episodes
- Eating even when full or not hungry
- Eating until uncomfortably full
- Eating alone or in secret to avoid embarrassment
- Feeling distressed, ashamed, or guilty about eating
- Frequently dieting, possibly without weight loss
- Other serious mental health disorders such as depression, anxiety, or problems with substance use

Obesity

Many, but not all, women with binge eating disorders are overweight or obese.

Obesity raises your risk for many serious health problems such as:

- Type 2 diabetes
- Heart disease
- High blood pressure
- High cholesterol
- Gallbladder disease
- Certain types of cancer, including breast, endometrial (a type of uterine cancer), colorectal, kidney, esophageal, pancreatic, thyroid, and gallbladder cancer
- Problems with your menstrual cycle, including preventing ovulation, which can make it harder to get pregnant



We believe in you!

You have a right to quality healthcare. Now, you have the information you need to navigate the healthcare system and succeed as a mother, woman, and person.

We wish you luck on your healthcare journey.

All the best,

**Grassroots Maternal and Child Health Initiative +
Transitional Healthcare team at the Indiana Women's Prison**



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