

Chapter 3—Birth and the Newborn Baby: In the New World

MULTIPLE CHOICE

1. What are Braxton-Hicks contractions?
- contractions that signal the beginning of the delivery process
 - false labour contractions that can begin as early as the sixth month of pregnancy
 - contractions that signal birth is imminent
 - contractions that are caused when a baby has the hiccups

ANS: B PTS: 1 REF: p. 47 OBJ: LO1
KEY: WWW BLM: Remember

2. What change occurs in most women a day or so before the beginning of labour?
- a rush of warm liquid from the vagina
 - blood appears in vaginal secretions as a sign of danger
 - the amniotic sac breaks
 - indigestion, diarrhea, backaches, and cramps

ANS: D PTS: 1 REF: p. 47 OBJ: LO1
BLM: Remember

3. Diana is experiencing regular labour. What is she most likely to notice about her contractions?
- They are painful.
 - They are irregular.
 - They are unexpected.
 - They can be confused with indigestion.

ANS: A PTS: 1 REF: p. 47 OBJ: LO1
KEY: WWW BLM: Higher Order

4. What initiates labour?
- Time alone determines the onset of labour.
 - It is initiated by the secretion of hormones by the fetus.
 - It is initiated by the release of dopamine in the mother's brain.
 - It is initiated by the secretion of pitocin from the mother's endocrine system.

ANS: B PTS: 1 REF: p. 47 OBJ: LO1
BLM: Remember

5. What causes contractions strong enough to expel the baby?
- the weight of the child
 - the release of oxytocin from the mother's pituitary gland
 - the secretion of hormones by the adrenal and pituitary glands of the fetus
 - the weight of the mother.

ANS: B PTS: 1 REF: p. 48 OBJ: LO1
BLM: Remember

6. According to developmentalists, how many labour stages does a woman typically experience?
- 2
 - 3
 - 4
 - 5

ANS: B PTS: 1 REF: p. 47-48 OBJ: LO1
BLM: Remember

7. Barbara has been told she is ready to deliver. Which of the following has most likely occurred?
- She has received an episiotomy.
 - Her amniotic sac has ruptured.
 - She has been in labour for about 12 hours.
 - The cervix is effaced and dilated to 10 cm.

ANS: D PTS: 1 REF: p. 48 OBJ: LO1
KEY: WWW BLM: Remember

8. During the first stage of pregnancy, which of the following does NOT occur?
- The mother is prepped by having her pubic hair shaved.
 - Contractions become more powerful, frequent, and regular.
 - Fetal monitoring begins.
 - An episiotomy is performed.

ANS: D PTS: 1 REF: p. 47 OBJ: LO1
BLM: Higher Order

9. Fetal monitors are electronic sensing devices. Which of the following do they NOT measure?
- fetal heart rate
 - duration and strength of the mother's contractions
 - the mother's heart rate and blood pressure
 - fetal distress

ANS: C PTS: 1 REF: p. 48 OBJ: LO1
KEY: WWW BLM: Remember

10. Jane's doctor just performed an episiotomy on her. Which of the following is her doctor most likely to tell her?
- It is routinely done in hospitals around the world.
 - It may cause itching and discomfort during healing.
 - It is necessary to get the baby out of the birth canal.
 - It is more commonly performed today than 20 years ago.

ANS: B PTS: 1 REF: p. 48 OBJ: LO1
BLM: Higher Order

11. Martha is in her second stage of childbirth. Which of the following can Martha expect?
- It will end with the birth of the baby.
 - It will usually last only a few minutes.
 - It will end when Martha is ready to "push" during contractions.
 - It will end when the cervix is effaced and dilated to 10 cm.

ANS: A PTS: 1 REF: p. 48 OBJ: LO1
BLM: Higher Order

12. Alice's baby has "crowned"? What has occurred?

- a. The baby is being born feet first.
- b. The baby is stuck in the birth canal.
- c. The baby has turned and is now head-down in the uterus.
- d. The baby's head has started to emerge from the birth canal.

ANS: D PTS: 1 REF: p. 48 OBJ: LO1
KEY: WWW BLM: Higher Order

13. Cindy is pregnant for the first time and is concerned that if she has a vaginal delivery, her doctor will perform an episiotomy. What is her doctor most likely to tell her?

- a. Most women in Canada have an episiotomy.
- b. Episiotomies are rarely performed in Canada.
- c. Doctors know well in advance whether an episiotomy will be required.
- d. Most women in Canada do NOT need an episiotomy.

ANS: D PTS: 1 REF: p. 48 OBJ: LO1
BLM: Higher Order

14. Jack is concerned that his wife may need an episiotomy. Which of the following is the physician most likely to say?

- a. It is an essential part of the delivery process.
- b. It is more common with second and later pregnancies.
- c. It is controversial and its use has declined over time.
- d. It is necessary and should be used without hesitation.

ANS: C PTS: 1 REF: p. 48 OBJ: LO1
KEY: WWW BLM: Higher Order

15. Brenda is in the second stage of labour. What is the best predictor of whether her doctor will perform an episiotomy?

- a. Brenda's baby is in distress.
- b. Brenda has been in labour for several hours.
- c. The doctor usually performs an episiotomy.
- d. Brenda's has decided to use anesthesia.

ANS: C PTS: 1 REF: p. 49 OBJ: LO1
BLM: Remember

16. Jennifer is having a vaginal delivery of her baby. She learns that she needs an episiotomy. According to the Ottawa Hospital Research Division, what is an advantage of having an episiotomy performed during delivery?

- a. It reduces the stress of a vaginal delivery.
- b. It reduces the pain of a vaginal delivery.
- c. It reduces the length of time required for a vaginal delivery.
- d. It reduces the risk associated with a vaginal delivery.

ANS: C PTS: 1 REF: p. 49 OBJ: LO1
KEY: WWW BLM: Higher Order

17. What procedure happens to the baby soon after birth?
- The baby is put on a heart rate monitor.
 - The umbilical cord is clamped and severed.
 - The baby is given an injection of vitamin C.
 - The baby is held upside down and slapped on the buttocks.

ANS: B PTS: 1 REF: p. 49 OBJ: LO1
BLM: Remember

18. What is the key event of the third stage of childbirth?
- The child is finally delivered.
 - The newborn is given a vitamin K injection.
 - The placenta and fetal membranes are expelled.
 - The fetus moves into position to begin the final delivery process.

ANS: C PTS: 1 REF: p. 48 OBJ: LO1
KEY: WWW BLM: Remember

19. Each baby born in Canada is immediately screened for more than 50 obscure anomalies and disorders that may be treatable if detected early. What test is used?
- an Apgar test
 - a blood test
 - an ultrasound test
 - an X-ray

ANS: B PTS: 1 REF: p. 49 OBJ: LO1
KEY: WWW BLM: Higher Order

20. What is the most common birthing practice in Canada?
- delivery at a hospital
 - use of a midwife during delivery in hospital
 - delivery at home with a midwife present
 - the LeBoyer method

ANS: A PTS: 1 REF: p. 49 OBJ: LO2
KEY: WWW BLM: Remember

21. Approximately what percentage of babies in Canada can expect to be born with the help of a midwife?
- fewer than 5%
 - 10%
 - 20%
 - more than 30%

ANS: A PTS: 1 REF: p. 49 OBJ: LO2
KEY: WWW BLM: Remember

22. Chalmers et al. (2012) surveyed mothers' experiences of the birthing process in Canada. What experience was reported by 53.7% of the mothers?
- a. lying flat during the delivery
 - b. delivering in stirrups
 - c. receiving an epidural
 - d. an induced delivery

ANS: C PTS: 1 REF: p. 49 OBJ: LO2
BLM: Remember

23. Anya was given an injection into her spinal canal, which temporarily numbed her body below the waist. What type of anesthesia was Anya given?
- a. a barbiturate
 - b. a tranquilizer
 - c. a local anesthesia
 - d. a general anesthesia

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Higher Order

24. The Smiths are expecting a child but the doctors suspect some complications will occur during delivery. What type of delivery can the couple expect for their child?
- a. a vaginal delivery
 - b. a vaginal delivery requiring an episiotomy
 - c. a cesarean section
 - d. a delivery using a midwife

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Higher Order

25. A newborn is lethargic and less active than is normally expected. Which of the following most likely occurred?
- a. The mother smoked during the pregnancy.
 - b. The mother experienced a faster than normal labour.
 - c. The mother was given a tranquilizer during delivery.
 - d. The mother experienced a longer than normal labour.

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

26. What has research found regarding the effects of medications given to the mother during delivery?
- a. It is unclear to what degree medications affect the newborn.
 - b. It is clear that medications permanently damage the newborn.
 - c. The effects of medications appear to depend on the age of the mother.
 - d. There is no compelling evidence that medications negatively affect the newborn.

ANS: A PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

27. Mona had a "natural childbirth." What occurred?
- The Lamaze method was used.
 - Local anesthetics were administered.
 - Tranquilizers given during third stage of labour.
 - The baby was delivered without the use of stirrups.

ANS: A PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Higher Order

28. Janet lives in the first province in Canada to regulate and legislate midwives. Where does she live?
- Alberta
 - British Columbia
 - Ontario
 - Quebec

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Remember

29. Which statement characterizes the Lamaze method?
- It speeds up the delivery process.
 - It has no effect on fear and pain during the delivery process.
 - It involves breathing and relaxation exercises during delivery.
 - It increases the amount of time for delivery, but reduces trauma to the infant.

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

30. What is a childbirth "coach"?
- the person who teaches the Lamaze classes
 - a term used only when the biological father is present
 - the person who is integrated into the birthing process with the mother
 - a medical assistant assigned to work with the mother during delivery

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

31. What is taught in a class on the Lamaze method?
- The expectant father is taught how to deliver the baby, should it become necessary.
 - The expectant mother is taught which pain medications to ask for during delivery.
 - The expectant mother is taught self-hypnosis, so she will experience no pain during delivery.
 - The expectant mother is taught the use of breathing and relaxation techniques during contractions.

ANS: D PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

32. Ashley has never heard of the Lamaze method. Which of the following would you tell her?
- a. It has no apparent impact on the birthing process.
 - b. It is associated with the reporting of less pain during the delivery process.
 - c. It eliminates pain during the birthing process.
 - d. It is commonly used in Europe, but NOT in Canada.

ANS: B PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Remember

33. What female companion may be present during the birthing process to provide emotional support to the mother?
- a. a doula
 - b. a midwife
 - c. a cesarean
 - d. a Lamaze coach

ANS: A PTS: 1 REF: p. 50 OBJ: LO2
BLM: Remember

34. What is the typical experience of women who use midwives?
- a. They report having less pain.
 - b. They have fewer breech births.
 - c. They are more satisfied with their prenatal care.
 - d. They have shorter labours.

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
BLM: Remember

35. What experience has been reported by women who used a midwife?
- a. a shorter labour
 - b. a lower rate of fetal distress
 - c. less pain
 - d. fewer medical interventions than other patients

ANS: D PTS: 1 REF: p. 50 OBJ: LO2
BLM: Remember

36. In Canada C-sections account for what percentage of all births?
- a. less than 5%
 - b. approximately 10%
 - c. approximately 20%
 - d. approximately 30%

ANS: C PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Remember

37. Dr. Smith is a presenter at a prenatal and birth practices workshop. When does he suggest performing a C-section is necessary?
- a. when the baby is too large
 - b. when the baby is unusually small
 - c. when the baby is being born headfirst
 - d. when maternal anxiety complicates the delivery process

ANS: A PTS: 1 REF: p.50 OBJ: LO2
BLM: Higher Order

38. A mother who has HIV wants to reduce the risk of transmitting HIV to her baby. What strategy is her physician most likely to recommend?
- a. She should elect to have a cesarean delivery.
 - b. She should elect to have a vaginal delivery.
 - c. She should NOT use any anesthetics.
 - d. She should deliver using a natural childbirth technique.

ANS: A PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Higher Order

39. Which of the following is rich in stem cells that can be preserved and potentially used to save the life of the baby or a member of the baby's family?
- a. the placenta
 - b. the newborn's umbilical cord
 - c. the newborn's lanugo
 - d. the newborn's vernix

ANS: B PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

40. What term means "without oxygen"?
- a. anoxia
 - b. toxemia
 - c. hypoxia
 - d. plastemia

ANS: A PTS: 1 REF: p. 51 OBJ: LO3
KEY: WWW BLM: Remember

41. Which term is most closely related to anoxia?
- a. hypoxia
 - b. toxemia
 - c. plastemia
 - d. formidia

ANS: A PTS: 1 REF: p. 51 OBJ: LO3
BLM: Remember

42. During childbirth, when is prolonged oxygen deprivation most likely to occur?
- a. during a cesarean delivery
 - b. when the baby is in a breech position
 - c. when fetal monitors are NOT used
 - d. during the use of general anesthetics

ANS: B PTS: 1 REF: p. 51 OBJ: LO3
KEY: WWWBLM: BLM: Remember

43. When is a baby considered to have a low birth weight?
- a. when it weighs less than about 1.5 kg
 - b. when it weighs less than about 2.5 kg
 - c. when it weighs less than about 3.5 kg
 - d. when it weighs less than about 4.5 kg

ANS: B PTS: 1 REF: p. 51 OBJ: LO3
BLM: Higher Order

44. In Canada, what percentage of babies were born at low birth weight in 2010?
- a. 4.2%
 - b. 5.2%
 - c. 6.2%
 - d. 7.2%

ANS: C PTS: 1 REF: p. 51 OBJ: LO3
KEY: WWW BLM: Remember

45. Janet works at the prenatal clinic. Of the four expectant women she has seen today, three are at risk for having a baby small for dates. Which woman is NOT at risk for having a baby small for dates?
- a. the woman who abuses drugs
 - b. the woman who is malnourished
 - c. the woman who is obese
 - d. the woman who smokes

ANS: C PTS: 1 REF: p. 51 OBJ: LO3
BLM: Higher Order

46. Colleen was shocked when her physician told her that her age puts her at a slightly higher risk for developing a low-birth-weight baby. How old is Colleen?
- a. younger than 20 years old
 - b. 21 to 30 years old
 - c. 31 to 35 years old
 - d. more than 35 years old

ANS: D PTS: 1 REF: p. 51 OBJ: LO3
BLM: Remember

47. Pregnant women identified as being at risk for delivering preterm babies may be injected with corticosteroids to increase their babies' chances of survival. What concern does this treatment address?
- a. prenatal malnourishment
 - b. hypoxia
 - c. respiratory stress syndrome
 - d. drug addiction

ANS: C PTS: 1 REF: p. 52 OBJ: LO3
BLM: Higher Order

48. After reading the textbook, what do we know about the potential to overcome deficits associated with prematurity?
- a. It is greater for boys than for girls.
 - b. It can be predicted with great accuracy.
 - c. It appears to depend upon how premature the child was.
 - d. It is greater for second and subsequent births than for first-born children,

ANS: C PTS: 1 REF: p. 51 OBJ: LO3
KEY: WWW BLM: Higher Order

49. What is lanugo?
- a. a Latin term for prematurity
 - b. a breathing problem in premature infants
 - c. a fine downy hair that covers the skin of some newborns
 - d. a white oily substance that covers the skin of some newborns

ANS: C PTS: 1 REF: p. 51 OBJ: LO3
BLM: Remember

50. What is vernix?
- a. a Latin term for prematurity
 - b. a breathing problem in premature infants
 - c. a fine downy hair that covers the skin of some newborns
 - d. a white oily substance that covers the skin of some newborns

ANS: D PTS: 1 REF: p. 51 OBJ: LO3
BLM: Remember

51. Which baby is most likely a preterm infant?
- a. a baby with a weak sucking reflex
 - b. a baby resulting from his mother's first pregnancy
 - c. a small baby that generally shows no deficits
 - d. a baby with a higher than normal body temperature

ANS: A PTS: 1 REF: p. 52 OBJ: LO3
KEY: WWW BLM: Higher Order

52. What is respiratory distress syndrome?
- a. a breathing disorder likely to affect high-birth-weight infants
 - b. a cluster of breathing problems likely to affect premature infants
 - c. a breathing disorder mothers sometimes develop during pregnancy
 - d. a breathing disorder that sometimes develops in infants during delivery

ANS: B PTS: 1 REF: p. 52 OBJ: LO3
BLM: Remember

53. Maggie and Ben's preterm baby has been diagnosed as having respiratory distress syndrome. How will their doctor most likely explain the baby's respiratory distress syndrome?
- a. It is due to anoxia during delivery.
 - b. It is due to maternal exposure to teratogens during pregnancy.
 - c. The air sacs in the baby's lungs are over-lubricated, making breathing difficult.
 - d. The baby's muscles may NOT be mature enough to sustain independent breathing.

ANS: D PTS: 1 REF: p. 52 OBJ: LO3
BLM: Higher Order

54. Some women are at risk for delivering preterm babies. What substance is injected into these women to increase their babies' chances for survival and to lower the risk of respiratory distress syndrome and severe lung disease?
- a. folic acid
 - b. vitamin K
 - c. corticosteroids
 - d. vitamin C

ANS: C PTS: 1 REF: p. 52 OBJ: LO3
BLM: Remember

55. Which of the following children is most likely to show the greatest cognitive deficits and developmental delays?
- a. a child born at or before 37 weeks of gestation
 - b. a child whose mother smoked
 - c. a child weighing less than 1.5 kg at birth
 - d. a child whose mother did NOT exercise

ANS: C PTS: 1 REF: p. 51 OBJ: LO3
BLM: Higher Order

56. According to the research, what is parents' typical behaviour toward their preterm infants?
- a. Parental behaviour depends on the gender of the parent.
 - b. Parental behaviour tends to depend on the sex of the child.
 - c. Parents tend to interact with preterm infants less and respond to them with less sensitivity.
 - d. Parents tend to respond to preterm infants in a highly sensitive way and interact with them frequently.

ANS: C PTS: 1 REF: p. 52 OBJ: LO3
KEY: WWW BLM: Higher Order

57. According to research, what is the most appropriate way to handle preterm babies?
- Current thinking is to handle them as little as possible.
 - They should NOT be handled for the first two weeks of life.
 - Research now shows that preterm infants benefit from stimulation such as cuddling and rocking.
 - Research now shows that how preterm babies are handled does NOT affect their development.

ANS: C PTS: 1 REF: p. 52 OBJ: LO3
BLM: Higher Order

58. Why do parents tend to treat full-term infants better than preterm infants?
- Full-term infants cry more than preterm infants.
 - The behaviour of preterm infants is more irritable.
 - Preterm infants demand more interaction time than full-term infants.
 - Bonding is delayed with preterm infants.

ANS: B PTS: 1 REF: p. 52 OBJ: LO3
BLM: Remember

59. Which baby is most likely to be a preterm baby?
- a baby that tends to be held more by her mother
 - a baby that is less likely to be abused later in childhood
 - a baby that invokes feelings of failure and guilt in her mother
 - a baby that is more aggressive and sociable than other babies

ANS: C PTS: 1 REF: p. 52 OBJ: LO3
BLM: Remember

60. Research has explored the effects of exposing preterm babies to stimulation such as massage and kangaroo care. What was the conclusion of these research findings?
- There is no known effect.
 - The effects appear to depend on the gender of the baby.
 - The infants showed weight gains and fewer respiratory problems.
 - The intellectual functioning of these infants matched that of full-term babies at a 2-year follow-up.

ANS: C PTS: 1 REF: p. 52 OBJ: LO3
BLM: Higher Order

61. The UNICEF report, *Leaving No Child Behind*, addresses infant mortality rates among different groups in Canada. According to the report, which group has a significantly higher infant mortality rate than the general Canadian population?
- the immigration population
 - the Aboriginal population
 - the rural population
 - the refugee population

ANS: B PTS: 1 REF: p. 53 OBJ: LO3
BLM: Remember

62. What was the conclusion of the UNICEF report, *Leaving No Child Behind*?
- a. Canada has an excellent record of caring for all of its children.
 - b. Aboriginal children are being left behind in Canada.
 - c. Canada is NOT properly looking after immigrant children.
 - d. Medical access in rural areas of Canada is below standard.

ANS: B PTS: 1 REF: p. 53 OBJ: LO3
BLM: Remember

63. Sandra is an average mother of a newborn who is concerned because rather than being joyful about the birth of her newborn, she finds herself tearful, sad, and irritable. According to the Canadian Paediatric Society, what lies at the root of this emotional state?
- a. manic depression
 - b. postpartum depression
 - c. post-delivery anxiety
 - d. baby blues

ANS: D PTS: 1 REF: p. 53 OBJ: LO4
BLM: Higher Order

64. Your sister recently had a baby and is struggling with postpartum adjustment. After reading about this disorder in your textbook, which of the following do you tell her?
- a. It is a Canadian problem.
 - b. It is more common in wealthy countries.
 - c. It is found in countries across the world.
 - d. It is more common in later births than in first births.

ANS: C PTS: 1 REF: p. 54 OBJ: LO4
BLM: Higher Order

65. Canadian hospital maternity wards have adopted a new practice that has been found to increase the likelihood of mother-child interaction for up to two years. What is this practice?
- a. reduced contact with newborns so that mothers can recover quickly from delivery
 - b. extended contact with babies during the hospital stay
 - c. breastfeeding
 - d. drug-free deliveries

ANS: B PTS: 1 REF: p. 53 OBJ: LO4
BLM: Higher Order

66. Nicole recently had her first child. Afterward, she felt depressed for about 10 days, and then she felt like her old self again. What did Nicole experience?
- a. Nicole had the "baby blues."
 - b. Nicole had postpartum depression (PPD).
 - c. Nicole experienced a "break with reality" due to PPD.
 - d. What Nicole experienced is unusual because most new mothers only experience positive emotions.

ANS: A PTS: 1 REF: p. 54 OBJ: LO4
KEY: WWW BLM: Higher Order

67. What distinguishes postpartum blues from postpartum depression?
- a. They are the same.
 - b. Postpartum blues are more severe.
 - c. Postpartum depression is more severe.
 - d. They involve entirely different symptoms.

ANS: C PTS: 1 REF: p. 54 OBJ: LO4

BLM: Higher Order

68. What is thought to be the cause of postpartum depression?
- a. an increased surge of estrogen following birth
 - b. a combination of psychological and physiological factors
 - c. an increase in hormone production due to breast feeding
 - d. an increase in pre-birth anxiety

ANS: B PTS: 1 REF: p. 54 OBJ: LO4

KEY: WWW BLM: Remember

69. A new mother is experiencing a break with reality and is having hallucinations. What is most likely to be the cause?
- a. postpartum blues
 - b. postpartum depression
 - c. postpartum depression with psychotic features
 - d. postpartum mania

ANS: C PTS: 1 REF: p. 54 OBJ: LO4

BLM: Higher Order

70. What is the maximum parental leave benefit when a child is born in Canada?
- a. 24 weeks
 - b. 28 weeks
 - c. 35 weeks
 - d. 40 weeks

ANS: C PTS: 1 REF: p. 55 OBJ: LO4

KEY: WWW BLM: Remember

71. Caroline counsels women who are experiencing postpartum depression. Which of the following has she observed in the women she treats?
- a. They generally have low self-esteem.
 - b. They can benefit from drugs that lower their estrogen levels.
 - c. They generally have lower IQs.
 - d. They can benefit from social support.

ANS: D PTS: 1 REF: p. 55 OBJ: LO4

BLM: Higher Order

72. Which famous Canadian woman publicly discussed her struggle with depression following the birth of her second child?
- a. Margaret Trudeau
 - b. Alice Munro
 - c. Margaret Atwood
 - d. Alana Morrison

ANS: A PTS: 1 REF: p. 54 OBJ: LO4
BLM: Remember

73. Which statement best summarizes the story of Canadian Killinger-Johnson and her baby?
- a. Even loved ones can miss the signs of postpartum depression.
 - b. Hormonal treatment can positively enhance a mother's life.
 - c. Postpartum depression with psychotic features can be diagnosed and treated.
 - d. Expectant mothers can be taught self-hypnosis to avoid experiencing pain during delivery.

ANS: A PTS: 1 REF: p. 55 OBJ: LO4
KEY: WWW BLM: Higher Order

74. What test is typically used to assess a newborn's health?
- a. the Apgar scale
 - b. the Hadlar scale
 - c. the neonatal inventory
 - d. the Bornstein inventory

ANS: A PTS: 1 REF: p. 56 OBJ: LO5
BLM: Remember

75. Which of the following factors is NOT assessed by the Apgar scale?
- a. pulse
 - b. skin colour
 - c. muscle tone
 - d. brainwave activity

ANS: D PTS: 1 REF: p. 56 OBJ: LO5
KEY: WWW BLM: Remember

76. What is the highest Apgar score?
- a. 5
 - b. 7
 - c. 10
 - d. 15

ANS: C PTS: 1 REF: p. 56 OBJ: LO5
KEY: WWW BLM: Remember

77. How soon after birth do most healthy babies attain high Apgar scores?
- a. within 5 minutes
 - b. within 1 hour
 - c. within 12 hours
 - d. within 24 hours

ANS: A PTS: 1 REF: p. 56 OBJ: LO5
BLM: Remember

78. What does the Brazelton Scale assess?

- a. muscle tone
- b. colour tone of the skin
- c. physiological measures such as heart rate
- d. a newborn's reflexes and other behaviour patterns

ANS: D

PTS: 1

REF: p. 56

OBJ: LO5

KEY: WWW

BLM: Remember

79. Alicia is studying infants and whether they have simple, unlearned, and stereotypical responses to certain types of stimulation. Which of the following is she mostly likely to state about these responses?

- a. They define "reflexes."
- b. They are NOT possible in infants.
- c. They are NOT possible in preterm infants.
- d. They are possible only several days after birth.

ANS: A

PTS: 1

REF: p. 56

OBJ: LO5

BLM: Higher Order

80. What type of physical response is a reflex?

- a. a voluntary response
- b. a response that has survival value
- c. a response that appears to have no purpose
- d. a response that disappears within six months after birth

ANS: B

PTS: 1

REF: p. 56

OBJ: LO5

BLM: Remember

81. Which of the following is an example of the rooting reflex?

- a. The baby turns his head and mouth toward the stimulus that strokes his cheek.
- b. The baby sucks at any object that touches his mouth.
- c. The baby voluntarily seeks out objects to suckle.
- d. The baby is directed toward the suckling object.

ANS: A

PTS: 1

REF: p. 56

OBJ: LO5

KEY: WWW

BLM: Remember

82. You change a baby's position, and the infant's reaction is to arch its back, fling its arms and legs out, and then bring them back toward the chest. What reflex has occurred?

- a. the Moro reflex
- b. the palmar reflex
- c. the rooting reflex
- d. the grasping reflex

ANS: A

PTS: 1

REF: p. 56

OBJ: LO5

KEY: WWW

BLM: Higher Order

83. Which of the following is an example of the palmar reflex?
- a. A child moves its head in the direction of sounds.
 - b. A child voluntarily reaches for and grasps objects.
 - c. A child shows a startle response in reaction to sudden changes in position.
 - d. A child uses four fingers to grasp objects pressed against the palm of the hand.

ANS: D PTS: 1 REF: p. 57 OBJ: LO5
BLM: Remember

84. The newborn fans her toes in response to stroking of the foot from heel to toes. What is this response an example of?
- a. the Moro reflex
 - b. the Babinski reflex
 - c. the tonic-foot reflex
 - d. the fencing position

ANS: B PTS: 1 REF: p. 57 OBJ: LO5
BLM: Higher Order

85. Baby Paul turns his head to one side, extends his arm and leg on that side, and flexes the limbs on the opposite side. What reflex has Baby Paul demonstrated?
- a. the Babinski reflex
 - b. the palmar reflex
 - c. the tonic-neck reflex
 - d. the stepping reflex

ANS: C PTS: 1 REF: p. 57 OBJ: LO5
BLM: Higher Order

86. Baby Stephanie has developed excellent rolling skills in the early stages of infant mobility. What reflex was likely highly developed in Baby Stephanie during her infancy?
- a. the Babinski reflex
 - b. the palmar reflex
 - c. the tonic-neck reflex
 - d. the stepping reflex

ANS: C PTS: 1 REF: p. 57 OBJ: LO5
KEY: WWW BLM: Higher Order

87. What is the visual ability of newborns?
- a. Newborns are nearsighted.
 - b. Newborns can see clearly up to six metres away.
 - c. Newborns are blind for the first few weeks of life.
 - d. Newborns have 20/20 vision, unless they are born with a vision disorder.

ANS: A PTS: 1 REF: p. 57 OBJ: LO5
BLM: Remember

88. Candace is a researcher studying visual tracking in newborns. When asked about her work, which of the following is she most likely to state?
- a. Visual tracking develops several months after birth.
 - b. Many newborns can track objects the first day after birth.
 - c. Many newborns require several weeks of experience to track objects.
 - d. Newborns' tracking ability depends on the level of stimulation in the womb.

ANS: B PTS: 1 REF: p. 57 OBJ: LO5
BLM: Higher Order

89. Why is vision poor in newborns?
- a. Newborns sensory receptors have NOT yet developed.
 - b. Vision is a muscular ability that improves with practice.
 - c. The newborn's eyes are extremely light-sensitive.
 - d. Newborns have NOT yet developed tracking ability.

ANS: B PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

90. Which visual capability is missing in newborns?
- a. the ability to track
 - b. visual accommodation
 - c. the ability to actively search the visual field
 - d. the ability to see

ANS: B PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

91. What has research found regarding the colour vision of infants?
- a. Full-colour vision ability is present at birth.
 - b. Two-month-olds require large differences in colour stimuli to detect a difference.
 - c. Four-month-olds have almost no ability to detect colour differences.
 - d. Infants do NOT have colour vision until 1 year of age.

ANS: B PTS: 1 REF: p. 58 OBJ: LO5
KEY: WWW BLM: Higher Order

92. How does a newborn's hearing compare with its vision?
- a. Its hearing is less highly developed.
 - b. Its hearing develops at a slower pace.
 - c. Its hearing is considerably more developed.
 - d. Hearing varies greatly from infant to infant.

ANS: C PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

93. What sounds are newborns most likely to respond to?
- a. sounds that are low in pitch
 - b. sounds that are repeated
 - c. sounds that are high in pitch
 - d. sounds that change, such as a rattle

ANS: C PTS: 1 REF: p. 58 OBJ: LO5
BLM: Remember

94. What advantages do the senses of hearing and smell provide to a newborn?
- a. These senses may assist in the attachment process.
 - b. The newborn can devote all its energy to developing other abilities.
 - c. These senses will alert the infant to danger, by triggering a startle reflex.
 - d. These senses will speed up how quickly the infant can leave the hospital.

ANS: A PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

95. What taste preferences do infants show?
- a. a preference for sour tastes
 - b. a preference for sweet tastes
 - c. a preference for bitter tastes
 - d. a preference for items with little or no taste, such as water

ANS: B PTS: 1 REF: p. 58-59 OBJ: LO5
BLM: Remember

96. Hailey is researching how she can promote a baby–caregiver relationship during the early months of her relationship with her new child. What increasingly popular Canadian trend might her doctor suggest?
- a. mother–baby exercise classes
 - b. napping together
 - c. breast feeding
 - d. baby massage

ANS: D PTS: 1 REF: p. 59 OBJ: LO5
KEY: WWW BLM: Higher Order

97. Which of the following can be used to teach a newborn to blink in response to a tone?
- a. classical conditioning
 - b. observational learning
 - c. social learning
 - d. information processing

ANS: A PTS: 1 REF: p. 59 OBJ: LO5
BLM: Higher Order

98. A mother chooses to reinforce her infant for engaging in a particular behaviour. What learning approach is this mother utilizing?
- a. social learning
 - b. operant conditioning
 - c. classical conditioning
 - d. observational learning

ANS: B PTS: 1 REF: p. 60 OBJ: LO5
KEY: WWW BLM: Higher Order

99. How do newborns' sleeping habits differ from adults' sleeping habits?
- Newborns sleep about 10% longer.
 - Newborns sleep about twice as much per day.
 - Newborns spend significantly less time in REM sleep
 - Newborns sleep less, but their sleep is broken into small segments across 24-hour periods.

ANS: B PTS: 1 REF: p. 60 OBJ: LO5
KEY: WWW BLM: Higher Order

100. Jenn and Dave are expecting their second child. They wonder whether their second child will have a similar sleep pattern to that of their first child. What would their pediatrician most likely tell them about infant sleep patterns?
- Sleep patterns are remarkably consistent across infants.
 - Infant sleep patterns are very similar to adult sleeping patterns.
 - Infant sleep patterns stabilize quickly and then do NOT change through life.
 - Infant sleep patterns are inconsistent and change dramatically as the child ages.

ANS: D PTS: 1 REF: p. 60 OBJ: LO5
BLM: Higher Order

101. According to the research cited in the textbook, what is the sleep pattern of newborns who are highly stimulated while awake?
- They will sleep less than normal.
 - They will sleep longer than normal.
 - They will spend more time in REM sleep.
 - They will spend more time in non-REM sleep.

ANS: D PTS: 1 REF: p. 60-61 OBJ: LO5
BLM: Higher Order

102. First-time parents may be surprised at how frequently their infant cries. Which of the following best represents what we have learned about infant cries?
- They appear to be entirely random.
 - They serve a functional purpose.
 - Each cry is indistinguishable from all other cries.
 - Baby cries differ across cultural groups.

ANS: B PTS: 1 REF: p. 61 OBJ: LO5
BLM: Higher Order

103. Some mothers choose to ignore their infants' crying. What may be the result for these mothers?
- Their infants will cry more.
 - They learn to shape the style of the crying.
 - They may strain the mother–infant relationship.
 - They can instill independence in their infants.

ANS: D PTS: 1 REF: p. 61 OBJ: LO5
KEY: WWW BLM: Higher Order

104. Baby Darcy has just passed away at the age of 6 months. What is the most likely cause of this infant death if Darcy was born in Canada?
- a. cystic fibrosis
 - b. heart disease
 - c. sudden infant death syndrome
 - d. Shaken Baby Syndrome

ANS: C PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

105. The Canadian Foundation for the Study of Infant Deaths has made recommendations to help young parents reduce the risk factors associated with sudden infant death syndrome. What is the name of the educational campaign?
- a. Back to Sleep
 - b. No More Fluffy Blankets
 - c. Butt Out
 - d. Belly Sleepers

ANS: A PTS: 1 REF: p. 62 OBJ: LO5
BLM: Remember

106. Education campaigns, such as “Back to Sleep,” educate new parents on the best sleep practices for children younger than 1 year of age. What have been the results of this campaign?
- a. a 20% decrease in infant deaths
 - b. a 30% decrease in infant deaths
 - c. a 40% decrease in infant deaths
 - d. a 50% decrease in infant deaths

ANS: D PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

107. Which of the following mothers has risk factors associated with sudden infant death syndrome?
- a. a teenage mother
 - b. a mother who drinks
 - c. a mother who smokes
 - d. a mother who returns to work early

ANS: C PTS: 1 REF: p. 63 OBJ: LO5
KEY: WWW BLM: Higher Order

108. The likelihood of sudden infant death syndrome is associated with the gender and age of the infant and exposure to cigarette smoke prenatally and after birth. What term refers to these influences?
- a. risk factors
 - b. causes
 - c. associated variables
 - d. correlations

ANS: A PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

109. What physical change does Shaken Baby Syndrome usually result in?
- a. spinal injuries
 - b. head trauma
 - c. bodily bruising
 - d. broken bones

ANS: B PTS: 1 REF: p. 63 OBJ: LO5
BLM: Higher Order

110. What term describes the injuries experienced as a result of Shaken Baby Syndrome?
- a. brittle bone syndrome
 - b. abusive head trauma
 - c. traumatic abuse syndrome
 - d. neurotic trauma

ANS: B PTS: 1 REF: p. 63 OBJ: LO5
BLM: Remember

111. Tragically, Baby Marie was found dead at the age of 6 months. Her mother had shaken the child, which resulted in the child dying. What is the most likely factor contributing to this death?
- a. the age of the mother
 - b. the socioeconomic status of the mother
 - c. the ethnicity of the mother
 - d. a lack of emotional supports for the mother

ANS: D PTS: 1 REF: p. 63 OBJ: LO5
KEY: WWW BLM: Higher Order

MATCHING

- a. the leading cause of babies' deaths in Canada
- b. breathing and relaxation exercises
- c. bringing objects into focus
- d. without oxygen
- e. common post-delivery occurrence
- f. assists in grasping objects
- g. 40 weeks of gestation
- h. a growing trend among Aboriginal Canadians
- i. a tragedy caused by frustration
- j. a measure of newborn health
- k. hormones that stimulate uterine contractions.
- l. low birth weight but full-term gestation
- m. cervix will become effaced and dilated
- n. associated with increased risk of neurological problems
- o. a sense associated with attachment
- p. stimulates the uterus and placenta to prompt labour
- q. when delivery of the infant occurs
- r. speeds up delivery
- s. assists in feeding
- t. statistical report on the health of Canadian children

1. Full term
2. SIDS
3. SBS
4. Prostaglandins
5. First stage of childbirth
6. Rooting reflex
7. Baby blues
8. Lamaze method
9. Small for dates
10. Palmar reflex
11. Midwife
12. Second stage of childbirth
13. Episiotomy
14. Oxytocin
15. Respiratory distress syndrome
16. Apgar scale
17. Visual accommodation
18. Leaving No Child Behind
19. Smell
20. Anoxia

- | | |
|------------|--------|
| 1. ANS: G | PTS: 1 |
| 2. ANS: A | PTS: 1 |
| 3. ANS: I | PTS: 1 |
| 4. ANS: K | PTS: 1 |
| 5. ANS: M | PTS: 1 |
| 6. ANS: S | PTS: 1 |
| 7. ANS: E | PTS: 1 |
| 8. ANS: B | PTS: 1 |
| 9. ANS: L | PTS: 1 |
| 10. ANS: F | PTS: 1 |
| 11. ANS: H | PTS: 1 |
| 12. ANS: Q | PTS: 1 |
| 13. ANS: R | PTS: 1 |
| 14. ANS: P | PTS: 1 |
| 15. ANS: N | PTS: 1 |
| 16. ANS: J | PTS: 1 |
| 17. ANS: C | PTS: 1 |
| 18. ANS: T | PTS: 1 |
| 19. ANS: O | PTS: 1 |
| 20. ANS: D | PTS: 1 |

TRUE/FALSE

1. The infant signals to the mother that it is ready to be born.

ANS: T PTS: 1 REF: p. 47 OBJ: LO1
BLM: Higher Order

2. The first stage of childbirth is the shortest stage.

ANS: F PTS: 1 REF: p. 47 OBJ: LO1
KEY: WWW BLM: Higher Order

3. Transition occurs at the end of the first stage of labour.

ANS: T PTS: 1 REF: p. 48 OBJ: LO1
BLM: Higher Order

4. According to the Ottawa Hospital Research Institute, an episiotomy can speed the mother's recovery after childbirth.

ANS: F PTS: 1 REF: p. 49 OBJ: LO1
BLM: Remember

5. The strongest predictor of whether a practitioner will choose to use episiotomy is the condition of the mother and baby.

ANS: F PTS: 1 REF: p. 49 OBJ: LO1
BLM: Remember

6. An infant is born in the third stage of childbirth.

ANS: F PTS: 1 REF: p. 49 OBJ: LO1
BLM: Higher Order

7. General anesthesia strengthens uterine contractions and increases the responsiveness of the newborn.

ANS: F PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

8. Most women today give birth using general anesthetics.

ANS: F PTS: 1 REF: p. 50 OBJ: LO2
BLM: Remember

9. The Lamaze method has been shown to reduce fear and pain during childbirth.

ANS: T PTS: 1 REF: p. 50 OBJ: LO2
KEY: WWW BLM: Remember

10. No positive effects have been demonstrated from the use of midwives.

ANS: F PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

11. The use of cesarean sections has declined over the past 20 years.

ANS: F PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

12. Women who give birth according to the Lamaze method report experiencing less pain.

ANS: T PTS: 1 REF: p. 50 OBJ: LO2
BLM: Higher Order

13. Oxygen deprivation during delivery is associated with childhood schizophrenia.

ANS: T PTS: 1 REF: p. 51 OBJ: LO3
KEY: WWWBLM: BLM: Higher Order

14. Anoxia can impair the development of the fetus's central nervous system.

ANS: T PTS: 1 REF: p. 51 OBJ: LO3
BLM: Remember

15. A baby who is low in birth weight but full term is said to be small for dates.

ANS: T PTS: 1 REF: p. 51 OBJ: LO3
BLM: Higher Order

16. Low-birth-weight infants tend to do poorer in school and have more motor development problems than their normal-weight peers.

ANS: T PTS: 1 REF: p. 51 OBJ: LO3
BLM: Higher Order

17. Parents of preterm infants generally show them increased care and affection in comparison with parents of full-term infants.

ANS: F PTS: 1 REF: p. 52 OBJ: LO3
KEY: WWW BLM: Higher Order

18. Little can be done to help low-birth-weight infants improve as they get older.

ANS: F PTS: 1 REF: p. 52 OBJ: LO3
BLM: Higher Order

19. Preterm infants who are cuddled, rocked, talked to, and sung to tend to do better than preterm infants who are left alone.

ANS: T PTS: 1 REF: p. 52 OBJ: LO3
BLM: Higher Order

20. Infant health depends on a combination of economic, social, political, and environmental factors.

ANS: T PTS: 1 REF: p. 53 OBJ: LO3
BLM: Higher Order

21. Dr. Shea is practising medicine for the first time in a northern Aboriginal community. She can expect that, compared with Toronto, a lower percentage of this population will access health care.

ANS: T PTS: 1 REF: p. 53 OBJ: LO3
BLM: Higher Order

22. In Canada, the infant mortality rate in 2007 was 5.1 per 1,000 babies born.

ANS: T PTS: 1 REF: p. 52 OBJ: LO4
BLM: Higher Order

23. Maternal depression is experienced around the world.

ANS: T PTS: 1 REF: p. 54 OBJ: LO4
KEY: WWWBLM: Higher Order BLM: Higher Order

24. Maternal depression is rarely experienced by women.

ANS: F PTS: 1 REF: p. 54 OBJ: LO4
BLM: Remember

25. Women who experience postpartum depression can benefit from social support and medical interventions.

ANS: T PTS: 1 REF: p. 54-55 OBJ: LO4
BLM: Remember

26. It is critical that parents have contact with their infants in the first few hours after birth if attachment is to occur.

ANS: F PTS: 1 REF: p. 55 OBJ: LO4
BLM: Higher Order

27. The Apgar scale is used to assess the health of the mother postpartum.

ANS: F PTS: 1 REF: p. 56 OBJ: LO5
BLM: Higher Order

28. The Apgar scale assesses the newborn's well-being one minute after birth.

ANS: T PTS: 1 REF: p. 56 OBJ: LO5
KEY: WWWBLM: Higher Order BLM: Higher Order

29. Baby Ashlyn has just been assessed using the Apgar scale and has received a score of 10. She requires urgent medical attention.

ANS: F PTS: 1 REF: p. 56 OBJ: LO5
BLM: Higher Order

30. The Brazelton Neonatal Behavioural Assessment Scale screens for behavioural and neurological problems of newborns.

ANS: T PTS: 1 REF: p. 56 OBJ: LO5
BLM: Remember

31. Reflexes are learned behaviours.

ANS: F PTS: 1 REF: p. 56 OBJ: LO5
KEY: WWWBLM: Higher Order BLM: Remember

32. The Babinski reflex occurs when a baby's position is suddenly changed or a loss of support for the neck and head occurs.

ANS: F PTS: 1 REF: p. 57 OBJ: LO5
KEY: WWW BLM: Remember

33. The grasping reflex is strengthened after the fourth month of age.

ANS: F PTS: 1 REF: p. 57 OBJ: LO5
BLM: Remember

34. The stepping reflex develops just prior to the ability of a child to walk.

ANS: F PTS: 1 REF: p. 57 OBJ: LO5
BLM: Remember

35. The absence or weakness of a newborn's reflex may indicate immaturity, slowed responsiveness, brain injury, or neurological impairment.

ANS: T PTS: 1 REF: p. 57 OBJ: LO5
BLM: Remember

36. William James, a founder of modern psychology, wrote that the newborn must sense the world "as one great blooming, buzzing confusion."

ANS: T PTS: 1 REF: p. 57 OBJ: LO5
BLM: Higher Order

37. Newborns have stronger vision for colour than for light and dark.

ANS: F PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

38. Newborns show little or NO visual accommodation.

ANS: T PTS: 1 REF: p. 58 OBJ: LO5
BLM: Remember

39. Newborns prefer to watch moving lights as opposed to stationary lights.

ANS: T PTS: 1 REF: p. 58 OBJ: LO5
BLM: Remember

40. Newborns are colour blind and farsighted at birth.

ANS: F PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

41. Babies placed in absolute darkness open their eyes wide and search around.

ANS: T PTS: 1 REF: p. 58 OBJ: LO5
BLM: Higher Order

42. Newborns have poor hearing at birth.

ANS: F PTS: 1 REF: p. 58 OBJ: LO5
KEY: WWWBLM: Remember BLM: Remember

43. Newborns prefer low-pitched sounds to high-pitched sounds.

ANS: F PTS: 1 REF: p. 58 OBJ: LO5
BLM: Remember

44. Newborns prefer the sounds of their own mother's voice to those of other women.

ANS: T PTS: 1 REF: p. 59 OBJ: LO5
BLM: Remember

45. Newborns can discriminate distinct odours.

ANS: T PTS: 1 REF: p. 59 OBJ: LO5
BLM: Remember

46. Both breast-fed and bottle-fed infants prefer their mother's underarm odour to odours produced by other women.

ANS: F PTS: 1 REF: p. 59 OBJ: LO5
BLM: Remember

47. Newborns are insensitive to different tastes.

ANS: F PTS: 1 REF: p. 59 OBJ: LO5
KEY: WWWBLM: Remember BLM: Remember

48. Newborns' sense of touch is important for developing attachment.

ANS: T PTS: 1 REF: p. 59 OBJ: LO5
BLM: Higher Order

49. Newborns are NOT capable of learning.

ANS: F PTS: 1 REF: p. 59 OBJ: LO5
BLM: Higher Order

50. Newborns can learn to blink to the sound of a tone, if classically conditioned with a tone being paired with a puff of air.

ANS: T PTS: 1 REF: p. 59 OBJ: LO5
BLM: Higher Order

51. The study in which newborns learned to suck on a pacifier to activate a recording of their mothers reading *The Cat in the Hat* demonstrates operant conditioning.

ANS: T PTS: 1 REF: p. 60 OBJ: LO5
KEY: WWWBLM: Higher Order BLM: Higher Order

52. Almost all newborns sleep through the night right after coming home from the hospital.

ANS: F PTS: 1 REF: p. 60 OBJ: LO5
KEY: WWW BLM: Higher Order

53. Newborns spend about half of their sleep time in REM sleep

ANS: T PTS: 1 REF: p. 60 OBJ: LO5
BLM: Higher Order

54. REM sleep in newborns appears to stimulate the brain.

ANS: T PTS: 1 REF: p. 60-61 OBJ: LO5
BLM: Higher Order

55. Parents can learn the meaning of their infants' cries.

ANS: T PTS: 1 REF: p. 61 OBJ: LO5
BLM: Higher Order

56. Parents should NOT pick up crying infants because doing so spoils them.

ANS: F PTS: 1 REF: p. 62 OBJ: LO5
KEY: WWW BLM: Higher Order

57. Certain high-pitched infant cries signal health problems.

ANS: T PTS: 1 REF: p. 61 OBJ: LO5
BLM: Remember

58. Sucking on a pacifier has NO soothing effect for infants.

ANS: F PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

59. More infants die from AIDS than from SIDS.

ANS: F PTS: 1 REF: p. 62 OBJ: LO5
KEY: WWW BLM: Higher Order

60. The Canadian awareness campaign, Back to Sleep, has helped to decrease the incidence of SIDS by 50%.

ANS: T PTS: 1 REF: p. 62 OBJ: LO5
BLM: Remember

61. Baby Lucy is 3 months old and Baby Elise is 10 months old. Baby Elise is more likely to die of SIDS than Baby Lucy.

ANS: F PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

62. Baby Sandra occasionally takes brief breaks in her breathing. These breaks are no cause for alarm.

ANS: T PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

63. SIDS is more common among male babies.

ANS: T PTS: 1 REF: p. 62 OBJ: LO5
BLM: Remember

64. Baby Tyler's parents smoke but never when Baby Tyler is in the same room. Baby Tyler is still at an increased risk of SIDS.

ANS: T PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

65. Sudden infant death syndrome is usually caused by parents.

ANS: F PTS: 1 REF: p. 62 OBJ: LO5
BLM: Higher Order

66. Babies of teenage mothers and babies of mothers who smoked during pregnancy are at greater risk for SIDS than other babies.

ANS: T PTS: 1 REF: p. 62 OBJ: LO5
BLM: Remember

67. In a Canadian study of Abusive Head Trauma, more than 80 percent of the children who survived had neurological impairments and ongoing care issues.

ANS: T PTS: 1 REF: p. 63 OBJ: LO5
BLM: Remember

68. A Canadian study of Abusive Head Trauma concluded that babies can easily recover from this trauma.

ANS: F PTS: 1 REF: p. 63 OBJ: LO5
BLM: Remember

SHORT ANSWER

1. Discuss what the text means when it suggests that "the fetus signals the mother when it is ready to be born."

ANS:

Fetal hormones are released from the adrenal pituitary glands. These hormones stimulate the placenta and the uterus to secrete prostaglandins that cause labour contractions by exciting the muscles of the uterus. Later during labour, the mother's pituitary gland releases oxytocin. This hormone stimulates the stronger contractions that are necessary to expel the baby.

PTS: 1 REF: p. 47 OBJ: LO1 BLM: Higher Order

2. Briefly describe the three stages of childbirth.

ANS:

Stage 1: Labour—This stage tends to be the longest stage of birth and includes the effacement (thinning) and dilation (widening) of the cervix, the opening to the uterus. Throughout this stage, the mother's uterine contractions occur more frequently and more regularly. At the end of this stage, transition, the cervix dilates from 6 cm to 10 cm. Next, crowning occurs, when the fetus reaches the vaginal opening.

Stage 2: Birth—During the second stage of birth, the baby is delivered.

Stage 3: Placental (afterbirth)—The third stage occurs when the placenta is expelled from the uterus.

PTS: 1 REF: p. 47-49 OBJ: LO1 BLM: Remember

3. You and your partner are nervous that your labour may result in an episiotomy. You ask your doctor for information on this procedure. What is your doctor likely to tell you?

ANS:

First, although many people fear an episiotomy, the rate of episiotomies has fallen dramatically in Canada. In 1992, almost half of all women experiencing a vaginal delivery had an episiotomy, but the rate fell to less than 25 percent in 2004. This procedure takes place only to speed the delivery of the baby and only after crowning has occurred. The episiotomy prevents random tearing of the area between the birth canal and the anus. The incision is feared by many but usually is NOT felt due to the pressure of the baby's head, which numbs the region. After delivery, the incision may cause itching and discomfort, but the episiotomy does NOT lead to significant, long-term consequences.

PTS: 1 REF: p. 48-49 OBJ: LO1 BLM: Higher Order

4. What are the pluses and minuses of using anesthetics during childbirth? What does the research indicate about the impact on mother and child?

ANS:

First, the use of anesthetics is a private decision that should be made by the person experiencing the labour—the mother. That in mind, however, we must also remember that anesthetics cross the placenta and can affect the unborn child. The effect and the duration of these effects depend on various factors, including the following: (1) the specific anesthetic used, and (2) how much anesthetic is used. Some women report greater dissatisfaction with the birthing process after deciding to be sedated. Opinions are mixed on whether these anesthetics have long-term effects on the child. Low doses appear to make the baby less alert. Larger doses may cause a lag in motor development and cognitive functioning at least up to the age of 7. The best advice is to use any anesthetics with caution and only when necessary.

PTS: 1

REF: p. 50

OBJ: LO2

BLM: Remember

5. What is a cesarean section? Why it is used and what is its rate of occurrence in Canada.

ANS:

In Canada, nearly 1 of every 5 births is by cesarean section. Today, this trend of opting for a cesarean section is increasingly being considered by young couples worldwide. In 2012, 8.1 percent of Canadian mothers requested a cesarean section before their delivery. Fear of vaginal delivery and concern for the safety of the baby are two reasons for this new trend. Some mothers view a C-section as providing convenience (Gallagher, 2012). C-sections are also performed when the physician wants to prevent the circulatory systems of the mother and baby from mixing, as might occur when (normal) bleeding occurs during vaginal delivery. In such cases, c-sections help prevent transmission of the viruses that cause genital herpes and AIDS.

PTS: 1

REF: p. 50

OBJ: LO2

BLM: Higher Order

6. What factors specifically affect the health of Aboriginal children?

ANS:

Key factors affecting the health of Aboriginal children include poverty; lack of education; substandard housing; poor nutrition; lack of access to health care and social services; and a legacy of family, community, and cultural breakdown as a result of the policies of residential schools.

PTS: 1

REF: p. 53

OBJ: LO3

BLM: Higher Order

7. How should preterm babies be physically handled? What controversies surround the physical handling of preterm babies?

ANS:

As with many medical decisions, over time, our viewpoints have changed about how to physically handle preterm babies. Early thinking was to physically handle preterm babies as little as necessary. The belief was that because infants were NOT ready for a great deal of stimulation, understimulation was better than to overstimulation. But these views have been altered by concerns about the need for mothers to attach and bond to their infants as soon as possible. Current thinking is that close physical contact and stimulation are beneficial for the preterm infant, just as such contact is beneficial for full-term infants. Unless the infant has physical impairments that require oxygen or extended time in an incubator, the physical handling of the preterm infant does NOT appear to be harmful.

PTS: 1

REF: p. 51

OBJ: LO3

BLM: Higher Order

8. Provide a brief overview of the UNICEF report entitled *Leaving No Child Behind*.

ANS:

Infant mortality rates have been reduced by 30 percent worldwide. However, Canadians wondered why a growing disparity exists between mortality rates of Aboriginal children and their Canadian peers. Health depends on a web of economic, social, political, and environmental factors. We know that more than twice as many Aboriginal children live in poverty than other children in the larger Canadian population. We also know that infant deaths are three times higher in Aboriginal communities. Children in Aboriginal communities are also NOT as likely to access health care as children living in metropolitan areas. Children in Aboriginal communities are also more likely to become parents or to commit suicide. Canadians must work together as a community to change the reality that some of our children are being left behind.

PTS: 1

REF: p. 53

OBJ: LO3

BLM: Remember

9. What are some of the risks for low-birth-weight and preterm babies?

ANS:

Low-birth-weight babies are those who weigh less than 2.5 kg (5.5 lb.) at birth. They are at a greater risk for infant mortality. They also tend to perform more poorly in school, given that they may have neurological impairment. They may also suffer from motor development problems, including delays and disabilities. They may also have mild to severe learning disabilities. Preterm babies, those born before 37 weeks gestation, may also have problems associated with respiratory distress syndrome, which is related to having immature lungs, and may lead to problems in cognitive, language, and motor skills. The disabilities of low-birth-weight and preterm babies are often related to the degree of prematurity and the weight at birth; those born earliest and those weighing the least usually experience the most problems

PTS: 1

REF: p. 51

OBJ: LO3

BLM: Higher Order

10. Many women appear to experience some level of the blues or depression after pregnancy. How many women experience these feelings? Is this experience a cultural phenomenon? Why might women experience such feelings?

ANS:

According to the textbook, up to 70 percent of new mothers experience feelings that could be described as "the blues," or, in some cases, depression. These feelings do NOT seem to be a cultural phenomenon, but a natural side effect to all the changes that accompany birth. The birth process can be an emotionally charged event, whether the child was a wanted child or not. Mothers who deliver premature babies, for example, often report feelings of guilt. Along with this guilt, mothers experience the psychological impact of considering the responsibility of raising a child. Most experts suspect that a combination of psychological thoughts and physical changes following pregnancy (such as the drop in estrogen levels) explain why these feelings are so common. Only a smaller number of women (1 in 5 to 10) experience the more severe state of postpartum depression, and even fewer (1 in 500 to 1,000) experience postpartum mood episodes accompanied by psychotic features.

PTS: 1

REF: p. 54-55

OBJ: LO4

BLM: Higher Order

11. Describe at least four (4) infant reflexes and discuss how they might prepare the child to survive in the post-birth world.

ANS:

Perhaps the most important reflexes that enhance the infant's chances for survival are the following:

1. the rooting reflex = the baby turns the head and mouth toward a stimulus that strokes the cheek, chin, or corner of the mouth
2. the sucking reflex = the infant will suck on almost anything that touches the lips
3. the Moro reflex = a startle reflex that occurs in response to sudden changes of position or loud noises
4. the grasping reflex = the infant will grasp objects (e.g., fingers) that touch the palm of the hand

Each of these reflexes aids in survival. The infant must learn to suckle or it will die. The rooting reflex allows the infant to position the head and mouth in such a way that breast-feeding or bottle-feeding is possible. The sucking reflex takes over once the nipple has touched the mouth. The Moro reflex is very important. The infant can be startled by loud noises, sudden movements, and other environmental circumstances that could be dangerous. Lastly, the grasping reflex helps the child to learn to grab objects, which allows for experimentation with the world, eventually feeding oneself, and even using the hands to pull oneself into a standing position. All in all, newborns are competent.

PTS: 1

REF: p. 56-57

OBJ: LO5

BLM: Higher Order

12. Briefly describe the quality of a newborn's vision and hearing.

ANS:

Newborns' vision tends to be nearsighted and limited in its refinements. There is unclear evidence whether newborns can detect colours, although their ability to discern colours develops within the first two months. Newborns have limited or no visual accommodation (focusing) ability and can see best at a range of 17–23 cm. Newborns also lack the ability to control their eye muscles, so they are unable to look at very close objects. They are also able to track objects. They prefer to view objects that are moving.

A newborn's hearing is more advanced than its vision, with the level of hearing about even with that of adults. Newborns are able to detect differences in pitch and amplitude, although they prefer high-pitched sounds. Newborns recognize the sound of their mother's voice, are responsive to human voices, and can detect differences in speech sounds.

PTS: 1

REF: p. 57-58

OBJ: LO5

BLM: Higher Order

13. Describe how infants have been classically conditioned.

ANS:

In a training situation, infants have been trained to respond to the sound of a tone by blinking. First, an unconditioned stimulus, a puff of air, is paired with the sound of a tone, a conditioned stimulus. After enough pairings of the two stimuli, the puff of air is removed, but the infants still respond to the tone by blinking their eyes (a conditioned response).

PTS: 1

REF: p. 59-60

OBJ: LO5

BLM: Higher Order

14. Do infant cries mean different things? Do adults respond to these differences? Explain your answers.

ANS:

Infant cries can mean many things. For example, they may signal hunger, pain, anger, or something else. Some high-pitched cries may signal health problems, such as exposure to drugs, neurological abnormalities, and other problems. Some cries may signal colic, which involves pain from gas or other digestive tract problems. Adults, especially parents, become attuned to their infants' cries, which also become more recognizable over time. Through this experience, adults may also learn when they can safely ignore a cry and when they need to respond.

PTS: 1

REF: p. 61

OBJ: LO5

BLM: Higher Order