

# The Baby-Friendly Initiative (BFI) in Canada

Status Report  
February 19<sup>th</sup> 2012

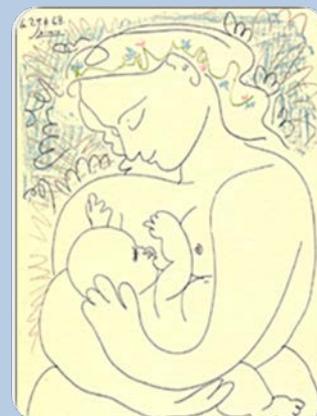


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## Status Report February 19<sup>th</sup> 2012

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Pablo Picasso



### Abstract

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Twenty years after the launch of the WHO/UNICEF Baby-Friendly Hospital Initiative, the context and progress of the Initiative in Canada has evolved and a need has been identified to document the current status of implementation. The objective is to reflect the status of the Baby-Friendly Initiative (BFI) in Canada.

## Introduction

Twenty years after the launch of the WHO/UNICEF Baby-Friendly Hospital Initiative (1991), the context and progress of the initiative has evolved across Canada. Breastfeeding is becoming the cultural norm for infant and child feeding in more of our communities, but significant challenges remain. In 2009/2010, the national rate for breastfeeding initiation was 87%, however, the variation across jurisdictions ranged from 61% to 97% (Canadian Community Health Survey). Exclusive breastfeeding is recommended for the first six months of life for healthy term infants...with the addition of complementary foods and continued breastfeeding for up to two years and beyond (Health Canada 2004). The national rate of exclusive breastfeeding at six months remains at 26% (2009/2010 Canadian Community Health Survey).

In 2011, with emerging health issues such as childhood obesity, early onset diabetes and rising health care costs, the promotion, protection and support of breastfeeding has become even more critical as research explores relationships between breastfeeding and the onset of disease.

The Baby-Friendly Initiative (BFI) is an integrated approach for hospitals and community health services, based on the Baby-Friendly Hospital Initiative, and provides ten evidence-based steps to optimally support maternal-child health for all mothers and babies. Although the degree of implementation of the BFI varies across Canada, all provinces and territories are working towards this internationally recognized maternal-child health strategy.

Since its inception in 1991 as a Health Canada initiative to support breastfeeding and the Baby-Friendly Hospital Initiative, the Breastfeeding Committee for Canada has supported implementation and assessment processes and standards to build capacity for the Baby-Friendly Initiative in Canada.

### Purpose

The Public Health Agency of Canada contracted the Breastfeeding Committee for Canada to research and write a status report on the implementation of the Baby-Friendly Initiative. This report summarizes the status of the Baby-Friendly Initiative in Canada and provides direction for future work.

*“Interventions to improve breastfeeding practices are cost-effective and rank among those with the highest cost-benefit ratio. The cost per child is low compared to that for curative interventions.” World Health Organization*

*“Breastfeeding is both a primary food security and preventative health practice; it is a foundational child development health determinant.”*

*Canadian Perinatal Health Report (2000, 2003)*

## The Breastfeeding Committee for Canada:

The Breastfeeding Committee for Canada (BCC) is a registered not-for-profit organization dedicated to the protection, promotion and support of breastfeeding as the normal method of infant feeding and the implementation of the BFI in Canada.

The BCC is a volunteer organization that does not have any public or private funding and relies on the annual contributions of its devoted membership.

**Structure:** There are 2 standing committees:

- The **BCC Provincial/Territorial BFI Implementation Committee (P/T Committee)** has representatives from each Province and Territory, dedicated to building capacity and sharing experiences in the implementation of best practices.
- The **BCC BFI Assessment Committee** is composed of Lead Assessors, and works to build capacity across the P/Ts to assist and assess facilities engaged in the BFI journey.

**The BCC Board** has a streamlined “executive” function as the P/T committee continues to build capacity and take on more of the operational functions of the organization. The Board is composed of the chair of the BCC, the chairs of the standing committees (Assessment and P/T), Treasurer, Recording Secretary and Membership Secretary.

Please refer to the BCC Committee Annual Reports for more information on their work. [www.breastfeedingcanada.ca](http://www.breastfeedingcanada.ca)

**Meetings:** The BCC Board meets by ‘Accuconference’ teleconferencing service. This has proven to be an efficient and cost effective system with the potential for future growth e.g. webinars for training and development.

**Membership of the BCC** is open to Canadians interested in voluntarily furthering the objectives of the BCC, who are in no way associated with a company whose products fall within the scope of The World Health Organization International Code of Marketing of Breast-Milk Substitutes (WHO Code), and whose application has been approved by the Board. BCC membership categories and fees are described in the BCC Bylaws. Membership fees are due annually by the end of March. The new web design allows for automated reminders and on-line payment of membership fees. These fees support BCC expenses such as teleconference meetings of the BCC Board and Committees, participation of the BCC representative on the Canadian Pediatric Society Nutrition Committee, and participation of the BCC delegates to the WHO Coordinators for the BFI in Industrialized Countries.

Membership forms are available at <http://www.breastfeedingcanada.ca>.

The following recommendations were developed by the BCC Provincial/Territorial BFI Implementation Committee as a means to strengthen the BFI in Canada.

**Federal Recommendations:**

1. Fund the Breastfeeding Committee for Canada for the following deliverables:
  - 1.1 Develop a proposal and process for the development of a national breastfeeding strategy which includes the BFI and targeted approaches for specific populations such as northern and remote communities
  - 1.2 Lead BFI designation in Canada in partnership with Provincial/Territorial BFI/Breastfeeding Committees.
  - 1.3 Support the Breastfeeding Committee for Canada P/T Committee to increase collaboration and sharing of breastfeeding resources, strategies and information.
  - 1.4 Develop standards for national breastfeeding data collection in consultation with provinces and territories and national organizations such as the Canadian Community Health Survey, Canadian Perinatal Surveillance System.
  - 1.5 Develop a bi-annual national report on the status of progress on BFI designation to further inform the national strategy.
  - 1.6 Develop and implement a national breastfeeding social marketing strategy.
2. Establish a formal link between the Breastfeeding Committee for Canada P/T Committee and the F/P/T Group on Nutrition for the purpose of addressing breastfeeding and BFI related issues.
3. Develop and implement a federal workplace breastfeeding policy to protect the rights of federal employees and clients of federal services
4. Take a leadership role in collaborating with other federal departments and federally funded programs, services and resources to ensure they comply with the WHO Code and relevant World Health Assembly Resolutions.
5. Take a leadership role with other federal departments to ensure industry compliance with the Canadian Food Inspection Agency *Letter to Industry: Requirements related to nutrition information and nutrition and health claims for infant formula* (January 2007).
6. Promote the Human Milk Bank Association of North America (HMBANA) *Guidelines for the Establishment and Operation of a Donor Milk Bank* as the standard for human milk banks.

**Provincial/ Territorial Recommendations:**

1. Identify a P/T government representative for participation on the Breastfeeding Committee for Canada P/T Committee and involvement on national BFI initiatives and opportunities.
2. Implement the BFI in hospital and community health services and monitor progress towards implementation.
3. Implement breastfeeding data collection using *the Breastfeeding Committee for Canada Breastfeeding Definitions* at the hospital and community health services level.
4. Develop a strong linkage between the Breastfeeding Committee for Canada P/T representative and the F/P/T Group on Nutrition representative for the purposes of addressing breastfeeding and infant and young child nutrition including BFI related issues.
5. Develop and implement a provincial workplace breastfeeding policy to protect the rights of provincial employees and clients of provincial services.
6. Establish/ensure access to a human milk bank that adheres to the HMBANA *Guidelines for the Establishment and Operation of a Donor Milk Bank*.

For a detailed history of the BCC and the BFI in Canada see *The Breastfeeding Committee for Canada BFI 10th Anniversary Report 2010*

## Part 1: Historical Overview of the BFI in Canada

The federal government supports the aims and principles of the World Health Organization (WHO) *International Code of Marketing of Breast-Milk Substitutes (WHO Code)*, developed to promote, support and protect breastfeeding. In 1981, with the unanimous support of the provinces and territories, Canada agreed that the WHO Code should be implemented through health promotion, education and collaboration, rather than through legislation or regulations. In response to the 1990 World Summit for Children, Canada created the *Brighter Futures Five Year National Plan of Action*, a component of which the *Child Development Initiative (CDI)* included support for breastfeeding promotion initiatives. As part of this, Canada supported the establishment of the Canadian Expert Working Group on Breastfeeding beginning in 1991, which later evolved to become the Breastfeeding Committee for Canada (BCC).

In 1991 the WHO and the United Nations Children's Fund (UNICEF) launched the Baby-Friendly Hospital Initiative (BFHI) in order to facilitate the implementation of its various initiatives and resolutions to support breastfeeding. The BFHI has a "simultaneous focus on the role of health services in protecting, promoting and supporting breastfeeding and on the use of breastfeeding as a means of strengthening the contribution of health services to safe motherhood, child survival and primary health care in general" (45th World Health Assembly (WHA) 1992). The BFHI is embodied in the *Ten Steps to Successful Breastfeeding*, also called the Global Criteria, and describes the minimum standard of care for newborn infants (including information supporting infants in the special care nursery as appropriate). The BFHI was revised, updated and expanded by WHO/UNICEF in 2009, based on current research and experience in many countries.

In Canada, funding from the Public Health Agency of Canada's Population Health Fund (previously Health Canada) was awarded to the BCC from 1998 to 2005 to support the infrastructure, implementation and evaluation of the WHO/UNICEF Baby-Friendly Initiative (BFI) in Canada. The BFI is an adaptation of the BFHI that reflects a continuum of care – from hospital to community. The BFI was launched in Canada in 1998, and since then has been implemented by the provinces and territories, with the BCC playing an important role overseeing the assessment and implementation on a national scale. Experience with the implementation and assessment of the BFI in Canada led to the development of the BCC's *10 Steps and Seven Point Plan and Practice Outcome Indicators For The Protection, Promotion and Support of Breastfeeding in Community Health Services* in 2004.

In 2010, the BCC BFI Assessment Committee undertook a major revision of the BFI Practice Outcome Indicators to integrate the *Seven Point Plan and Practice Outcome Indicators For The Protection, Promotion and Support of Breastfeeding in Community Health Services* and the *Ten Steps* and incorporate the WHO/UNICEF revisions into one document reflecting the Canadian context. The revised BCC *Integrated 10 Steps Practice Outcome Indicators* provides a single set of criteria for both hospitals and community health services.

The Summary of this work as well as the full document: *The Breastfeeding Committee for Canada (BCC) BFI Integrated 10 Steps Practice Outcome Indicators for Hospitals and Community Health Services* are available in the BFI Section of the website [www.breastfeedingcanada.ca](http://www.breastfeedingcanada.ca)

The BCC recognizes the increasing commitment to the BFI throughout the country. The support shown for the work is evident from the growing number of government representatives to the P/T Committee and the increasing capacity for implementation of the initiative at every level. British Columbia, Ontario, Nova Scotia, New Brunswick, Newfoundland & Labrador and Manitoba all have significant capacity to support the designation process, and Quebec is now fully responsible for BFI assessment and facility designation within the province.

In 2005, the Innocenti Declaration called on all governments to:

*“revitalize the BFHI, maintaining the Global Criteria as the minimum requirement for all facilities, expanding the Initiative’s application to include maternity, neonatal and child health services and community-based support for lactating women and caregivers of young children.”*



## A Time Line Providing Context to Breastfeeding Protection, Promotion & Support in Canada *BCC 10<sup>th</sup> Anniversary Report 2010.*

Year	International	Canada	Impact
1973		<i>The Lalonde Report</i>	New direction for health care policy
1974	WHA noted decline in breastfeeding		Infant morbidity and mortality
1978	Declaration of Alma Ata		Primary Health Care Conference
1979	International Year of the Child		Highlight challenges e.g. malnutrition
1980		<i>Canada's Children: National Agenda for Action</i>	
1981	WHO Code - protect breastfeeding through ethical marketing practice	Canada: education. & health promotion – informed choice, social comfort	Children and women's wellbeing is vulnerable to external forces.
	UN – <i>Convention on the Elimination of Discrimination against Women (CEDAW)</i>	Signatory 1981 Federal plan for gender equity 1995	Substantive gender equity concept.
1982	WHA35.26: call to legislate Code		
1986	<i>Ottawa Charter for Health Promotion</i>		Determinants of health and equity
1988		F/P/T Group on Nutrition	
1989	<i>UN Convention on the Rights of the Child (CRC)</i> based on '59 <i>Declaration of the Rights of the Child</i>	Canada led working group Ratified CRC in 1991	International Human rights treaty - child's right to health and breastfeeding (art 24)
	10 Steps published		Focus on maternity care practices
1990	World Summit for Children	UN invited Canada to convene	Plan of Action.
	UNICEF: <i>Innocenti Declaration</i> WHA 43.3 – protect working mother		Protect, promote, support breastfeeding: National coordinator & committee, 10 Steps, Code, protect working mother
1991	Babyfriendly Hospital Initiative (BFHI)- Implementation of 10 Steps WHA 44.33 Innocenti support	Canadian Expert Working Group on Breastfeeding (CEWGB)	First Breastfeeding Coalition meeting: multi-sectoral, multi-disciplinary Collaboration with Health Canada
1992	WHA 45.34 – BFHI + end free & low-cost formula to hospitals	Brighter Futures (1992 – 1997) <ul style="list-style-type: none"> <li>• Healthy Babies</li> <li>• Breastfeeding promotion</li> <li>• CAPC infrastructure</li> </ul>	<i>Child Development Initiative</i> <i>5 year National Plan of Action: 0 – 6 yrs</i> Health Canada & CEWGB collaboration.
1993		National Child's Day	
1994	WHA 47.5 – foster appropriate complimentary feeding	<ul style="list-style-type: none"> <li>• Canada Prenatal Nutrition Program (CPNP) announced</li> <li>• Breastfeed Anytime, Anywhere</li> </ul> Expert working Group initiates BFI in Community Health Services F/P/T Advisory Committee on Population Health (ACPH)	Social marketing strategy & resources  Support breastfeeding across the continuum of care Project to develop national health goals
1995		CEDAW Fed plan for gender equity Survey of Attitudes on BF	

Year	International	Canada	Impact
1997		<i>Survey of Breastfeeding Support Groups to Assess the Current Status of BFHI/BFI Activities in Canada and to Determine Future Needs</i>	Action plan to implement the BFI in Canada
1998		Breastfeeding: Stepping into Baby-Friendly conference Vancouver, BC	BFI was launched in Canada.
2000		'Giving Birth to the Future' report	Partnership Development between the BCC and the Canada Prenatal Nutrition Program (CPNP)
2001		Breastfeeding Now conference Moncton, New Brunswick	
2002	<i>Global Strategy for Infant and Young Child Feeding</i>		
2003		Canadian Community Health Survey	1st survey to collect exclusive breastfeeding rates
2004		Health Canada recommends 6 months exclusive breastfeeding with continued breastfeeding for up to two years and beyond	Brings Canada in line with Global Standards
2005	<i>Renewed Innocenti Declaration</i>		Declares that these actions are urgent and necessary to ensure the best start in life for our children, for the achievement of the Millennium Development Goals by 2015, and for the realisation of the human rights of present and future generations.
2007		Canadian Food Inspection Agency and Health Canada clarify the requirements related to nutrition information and health claims for infant formula (human milk substitutes).	The CFIA and Health Canada also strongly urge the infant formula industry to support and implement the principles of The International Code of Marketing of Breastmilk Substitutes.
2008		Federal Labor Standards updated	Breastfeeding in the workplace supported
2009		Stepping Up To Babyfriendly conference in BC	Celebrating 10 <sup>th</sup> Anniversary of BFI in Canada Vancouver, BC
2010		<i>BCC BFI 10<sup>th</sup> Anniversary Report</i>	
2011	20 <sup>th</sup> Anniversary of the launch of The Baby-Friendly Hospital Initiative	BCC BFI Symposium in Oakville Ontario.	Generates ' <i>BFI in Canada Status Report</i> '
		<i>BFI Integrated 10 Steps Practice Outcome Indicators for Hospitals and Community Health Services</i>	Strengthens the BFI throughout the health care system.

Year	International	Canada	Impact
		<p>BCC is invited by Health Canada to become a member of the Infant Feeding Joint Working Group to author revisions to <i>Nutrition for Healthy Term Infants-Recommendations from Birth to Six Months</i> document</p>	<p>BCC joins Health Canada, the Canadian Pediatric Society and Dietitians of Canada in the development of nutrition health recommendations for infants and children in Canada; helping to assure the integration of BFI principles in nutrition policy</p>

## Part 2: Key BFI Resources

### BCC Key BFI Documents

1. *BCC BFI Practice Outcomes Indicators for Hospitals and Community Health Services Revised 2011*
2. *BCC Integrated Ten Steps & WHO Code Practice Outcome Indicators for Hospitals and Community Health Services: Summary The WHO 10 Steps to Successful Breastfeeding (1989) and the Interpretation for Canadian Practice (2011)*
3. *Baby-Friendly Initiative Assessment Process & Costs (2011)*
4. *Calculation of Exclusive Breastfeeding Statistics: Hospitals & Birthing Centers (2007)*
5. Provincial and Territorial contact information
6. BCC list of Baby-Friendly Designated Facilities
7. BCC Annual Reports
8. *Breastfeeding Committee for Canada: Sustained Breastfeeding with the Integration of Complementary Feeding - a template for developing healthy public policy and providing health practitioners with tools to support mothers' informed decision to continue breastfeeding (draft)*
9. *Breastfeeding Committee for Canada: 10<sup>th</sup> Anniversary Report (2010)*

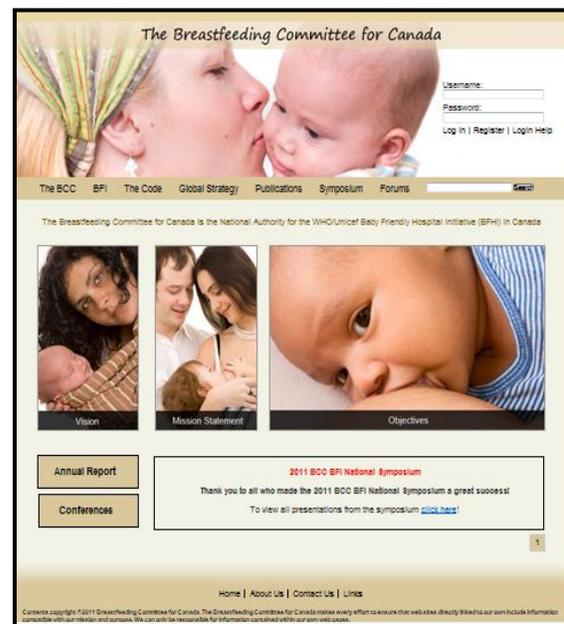
### BCC Website & Provincial websites

The new self-sustaining BCC website [www.breastfeedingcanada.ca](http://www.breastfeedingcanada.ca) can:

- ✓ Provide a modern, user-friendly interface with the Canadian and global public
- ✓ Provide a central 'station' from which communications with members can be facilitated
- ✓ Provide a forum for discussion
- ✓ Facilitate online payment of membership and assessment fees.
- ✓ Archive all minutes/documents/ publications

The new website went live in April 2011 and has already received very positive comments from members and 5,413 hits since it was launched. Visitors from United States, Spain, Italy, Romania, Netherlands, United Kingdom, China and Germany have accessed the site and 12,491 Web pages viewed and 1.7GB gigabytes of data about BFI implementation downloaded.

The BCC Website links to international, national, provincial, and territorial BFI and breastfeeding resources.



## Part 3: BFI Key Initiatives

*The implementation of the Baby-Friendly Initiative evidence-based practices creates environments that support and protect breastfeeding and family-centered care, which ensures that the family unit learns about healthy eating practices from birth.*

**The BCC Board and P/T Committee and members have had several opportunities to consult and collaborate on key issues:**

- *Nutrition for Healthy Term Infants* document revisions. In 2011 the BCC accepted the invitation from Public Health Agency of Canada (PHAC) to send a representative to the Infant Feeding Joint Working Group (JWG) to join consultation on the revisions resulting in *Nutrition for Healthy Term Infants - Recommendations from Birth to Six Months*.
- *Safe Sleep: 2011 Joint Statement on Sudden Infant Death Syndrome (SIDS) and Infant Deaths in Unsafe Sleeping Environments*, in Canada. BCC Members participated in discussions.
- *Obstetrical Care Services Standards for Accreditation*. The BCC has over the years had many discussions with Accreditation Canada with the goal of including BFI best practice standards into the accreditation process. In 2010/2011 BCC representatives worked closely with the working group revising Accreditation Canada's Obstetrics Standards on proposed revisions to the Qmentum standards for Obstetrics Services. To date BCC is optimistic that some key points of the BFI standards may be considered for inclusion in the final accreditation instrument.
- *Curbing Childhood Obesity: a Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights*.

### **Baby-Friendly Initiative As An Obesity Prevention Strategy**

*Addressing dramatic increases in childhood overweight and obesity in Canada is an important challenge; the cause is complex and the remedy difficult. The Curbing Childhood Obesity: a Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights endorsed by all Canadian health ministers highlights strategies that will shape sustained effort to curb obesity in children. In this framework for action, the Baby-Friendly Initiative (BFI) is identified as an important action under the 'Supportive Environments' key priorities (PHAC, 2011).*

The implementation of the BFI evidence-based practices creates environments that support and protect breastfeeding and family-centered care which ensures that the family unit learns about healthy eating practices from birth.

BFI is associated with an increased rate of exclusive breastfeeding in hospital (Braun et al., 2004) and four meta-analyses of existing studies have suggested that breastfeeding reduces the risk of obesity. These

studies support a dose-dependent association between longer duration of breastfeeding and a decreased risk of overweight. Harder (2005) reviewed 17 studies involving over 120,000 babies and concluded that every month of breastfeeding was found to be associated with a 4% decrease in risk of obesity. Arenz (2004) reviewed nine studies involving 69,000 babies and concluded that breastfeeding appears to have a small but consistent protective effect against obesity. Owen (2005) reviewed 61 studies, involving 29,800 babies and also found a reduced risk of obesity in later life even when confounding variables such as parental obesity, maternal smoking and social class were taken into account. Horta et al (2007) reviewed 33 studies and concluded that breastfeeding was associated with a lower prevalence of obesity.

The BFI fosters early skin-to-skin contact, mother and infant togetherness and baby-led feeding. Those practices help parents pay attention and respond to their baby's cues of hunger and fullness which help to prevent overfeeding and reduce the risk of early childhood obesity. It also helps the baby learn to recognize and respond to their hunger and fullness cues so that they are better able to regulate their food intake as young children and later as adults.

The WHO Code, which is encompassed within the BFI, establishes guidelines for protecting families from the pressure of unethical marketing of infant formula and the influences of false and misleading advertising. Research has demonstrated that marketing of infant formula within communities has a negative impact on breastfeeding.

The new *WHO Child Growth Standards* provide a single international standard that represents the best description of physiological growth for all children and establishes the breastfed infant as the normative model for growth and development. The rate of growth for breastfed infants can be quite different than formula-fed infants in that breastfed infants tend to weigh more than formula fed infants during the first 6 months and less than formula-fed infants between 6-12 months. These standards are an effective tool for detecting obesity as they allow for earlier and more accurate diagnosis of overweight and obesity in infants and children. <sup>i</sup>

## **Surveillance**

Surveillance is done in many ways throughout Canada: *The British Columbia Pan-Canadian Breastfeeding Jurisdictional Scan* project undertaken by the government of British Columbia will support interprovincial collaboration and information sharing and further build upon BC provincial and national successes in supporting breastfeeding women. The review will include both current and future initiatives with a particular focus on innovative approaches that have advanced the achievement of the Baby-Friendly Initiative. The information obtained has not yet been released. Enquiries can be made to Carolyn Solomon [carolyn.solomon@gov.bc.ca](mailto:carolyn.solomon@gov.bc.ca)

## **BFI in Northern Communities**

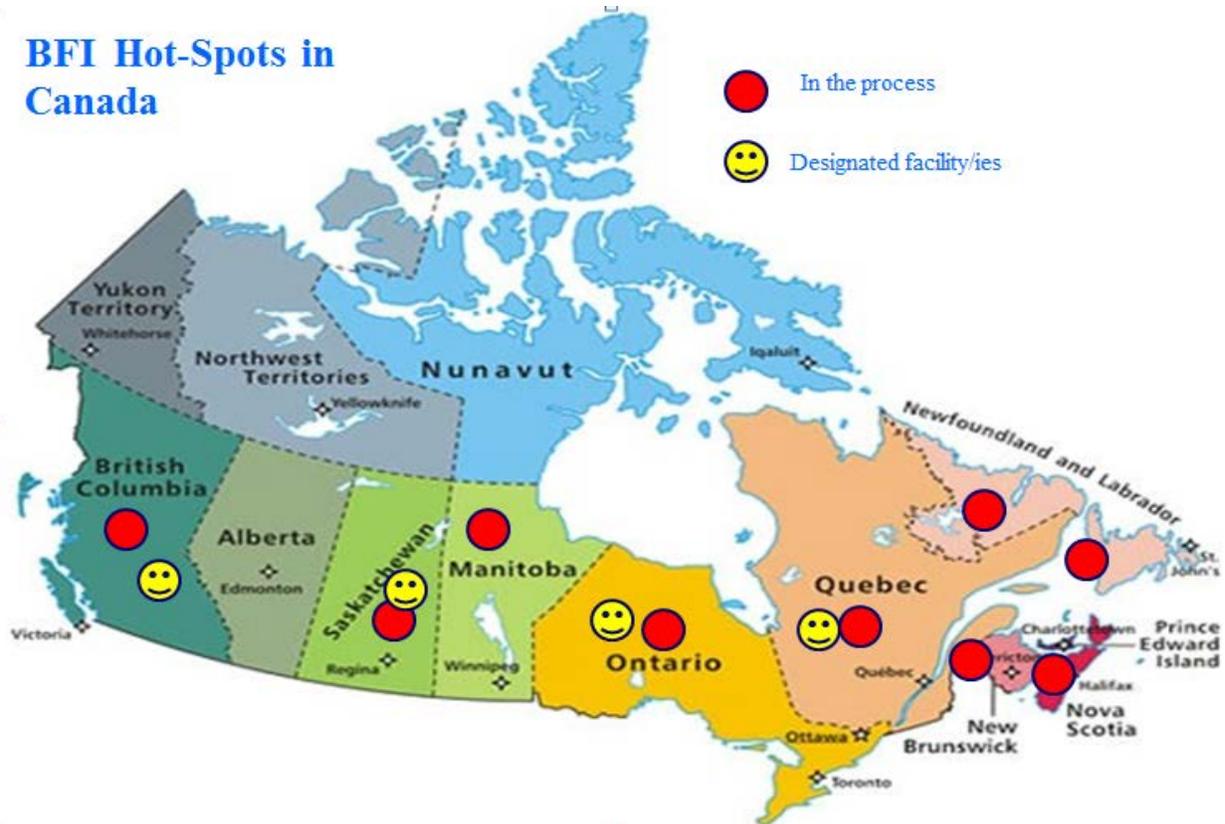
The BCC P/T BFI committee provides support to P/Ts for implementation of the BFI. Discussion at the committee recognized that there might be value in having members working in the north and more remote communities come together and address ways to move BFI forward in their communities. There is recognition that BFI implementation may be different in more rural isolated and First Nations communities. A new work group within the P/T Committee has been initiated (August 2011) to explore ways for the BCC to assist and support the BFI in these communities.

## **BFHI in Industrialized Countries Coordinators' Meetings**

These meetings are held every two years, and BCC representatives participate as part of the international BFI community. The next meeting will be held in Oslo, June, 2012.

## Part 4: Current State of BFI in Canada

### BFI Hot-Spots in Canada



The Canadian Lactation Consultant Association urges all players and partners in health promotion to immediately begin to address the need for development of a comprehensive national strategy that will promote, support and protect breastfeeding in a way that benefits all mothers and babies in Canada.

The document *Take Another Look at Breastfeeding* summarizes the role of breastfeeding as a population health strategy in line with the principles of the *Ottawa Charter for Health Promotion, 1987*. This document is used widely to guide the development of breastfeeding policies and strategies.

## Summary: Provincial and Territorial BFI Activity (2012)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	NT	YK	NU
P/T Breastfeeding/BFI Policy or Strategy	Y	N	Y	Y	N		Y	Y	N	Y			
P/T BF/BFI Committee/Coalition	Y	N	Y	Y	Y		Y	Y	Y	Y			
P/T Breastfeeding Education Opportunities	Y	N	Y	Y	N		Y	Y	Y	Y			
P/T BFI Survey - Monitoring of BF(I) Implementation	Y	N	Y	Y	Y		Y	Y	N	Y	Y		
Baby-Friendly Designated Facilities	2	N	1	*	12	20	N	N	N	N	N	N	N
Human Milk Bank	1	1	ℓ	ℓ	ℓ		N	N	N	N	N	N	N
P/T Government Financial Support	Y	N	N	Y	*		Y	Y	N	Y			*
P/T BFI Coordinator and/or Government Lead	Y	N	Y	Y	*	Y	Y	Y	N	Y			*
BCC BFI Assessor	Y	N	N	N	Y	Y	Y	Y	N	N	N	N	N
BCC BFI Assessor Candidate/apprentice	Y	N	Y	Y	Y	Y	Y	Y	N	Y	N	N	N

*	In progress
Y	Yes
N	No
ℓ	Investigating implementation opportunities
	No information

## Provincial/Territorial BFI Reports

### Alberta

**The Alberta Breastfeeding Committee (ABC)** is a multidisciplinary committee consisting of health care providers, representation from regional breastfeeding coalitions; and independent experts, along with consumers, who are interested in protecting, promoting and supporting breastfeeding in Alberta.

#### Key Provincial Resources/Education

***The first community-based private breast milk bank opened in Calgary, January 2012.***

- At least one International Board Certified Lactation Consultant is available within each of the Alberta Health Services zones across the province.
- Pediatric Registered Dietitians are currently being trained to become International Board Certified Lactation Consultants to improve promotion and increase the duration of breastfeeding during hospital visits.
- *Nutrition for Healthy Term Infants – Practice Guidelines*, has been created which include promotion of breastfeeding. These guidelines have been implemented throughout the province by health care professionals.
- A regional resource, *From Here to Maternity*, which promotes exclusive breastfeeding, is being used within areas of the province.
- All Alberta Health Services zones offer breastfeeding education during orientation and annually (STORC Modules provided through Alberta Perinatal Health Program) to public health nurses, labor and delivery staff, post-partum and well child nursing staff.
- Web-based resources are available to the general public through Healthy U at [www.healthyalberta.ca](http://www.healthyalberta.ca) and Raising Children at [www.alberta.ca](http://www.alberta.ca).

#### **The Alberta Breastfeeding Committee (ABC), accomplishments to date:**

A) Alberta Charter launched. (September 2009)

B) Breastfeeding Education Support:

Nils Bergman Conference – Time. A Neurobehavioral Approach To Newborn Care (2009)

Louise Dumas and Marianne Brophy Conference *Best Practices for Infant Feeding: Promote Health and Prevent Disease*. (2011)

Developed information sheets: (2010)

Breastfeeding Saves Lives (Cancer)

Breastfeeding Reduces Obesity and Diabetes

Outcomes of Infant Formula versus Breastfeeding

Skin-to-skin

Alberta Education Health Curriculum - sections on reproduction reviewed and recommendations submitted. (2010)

C) ABC represented on the following committees:

- Provincial Infant Safe Sleep Committee
- Breastfeeding Committee for Canada

D) Supported by the Alberta Health and Wellness to create standardized definitions for breastfeeding data collection.

### **Key Provincial Reports/ Data Collection**

*Becoming the Best: Alberta's 5-year Health Action Plan (2010-2015)* includes mid to long term actions which include the implementation of programs and policies which promote breastfeeding.

- *Alberta Reproductive Health: Pregnancies and Births Surveillance Report (2009)* includes province wide breastfeeding initiation rates.
- Health Information Standards Committee for Alberta accepted the Alberta Breastfeeding Committee Data Set for data collection standardization throughout the province (2009).

**Baby-Friendly Designated Facilities in Alberta – none as yet**

## **British Columbia**

*Perinatal Services BC: Postpartum and Newborn Nursing Care Pathways – provide evidence-based information on the provision of nursing care for mothers and infants in the postpartum period. Breastfeeding and infant feeding is a significant component and it is used by all acute care and public health nurses who provide postpartum and newborn care across BC.*

**All BC Health Authorities** are working on implementation of the BFI and each has formed a Breastfeeding (BFI) Best Practice Committee. Breastfeeding, including breastfeeding education, has been identified as part of the Provincial Health Services Authority obesity prevention strategy.

**BC Baby-Friendly Network (BC BFN)** - a multidisciplinary committee of health care providers, ministerial representatives, and consumers, work to protect, promote and support breastfeeding. The Minister of Health and the Minister for Children and Family Development have designated the BC BFN as the implementation committee for the Baby-Friendly Hospital Initiative in British Columbia. The BC BFN (in partnership with Perinatal Services BC) has conducted two provincial surveys to ascertain the status and progress of hospitals and health units in their work toward BFI designation. The latest report published September 2010 can be accessed from the BC BFN website at <http://www.bcbabyfriendly.ca/>

**Provincial breastfeeding education** using the “train-the-trainer” model – individuals from each health authority received training and resources to provide the 20-hour breastfeeding course *Breastfeeding: Making a Difference*® at the local level.

- 20-hour breastfeeding education using the course *Breastfeeding: Making a Difference*® provided in most health authorities with over 50 courses offered in the past two years
- One-day breastfeeding education included in Aboriginal Doula Training Initiative being held in 2011
- A 20-hour breastfeeding course provided by one of the provincial colleges offered in a number of communities
- Development of an on-line education session for a 20-hour breastfeeding course for BCs health care providers (in process)

**Exclusive breastfeeding rates** from birth to hospital discharge – captured and reported regularly via the PSBC Provincial Perinatal Database Registry – for breastfeeding exclusively from birth to discharge from hospital.

Breastfeeding data at the community level - provincial health authorities have ability to capture breastfeeding duration (at initial contact, CHCs and Immunization and other contacts)

**Provincial Government support includes:**

- *Baby's Best Chance: Parents' Handbook of Pregnancy and Baby Care* (BBC) (2<sup>nd</sup> Rev, 6<sup>th</sup> Ed) is a guide to healthy pregnancy, infant care and parenting a baby up to 6 months of age. It is used by expectant and new parents, health care providers and providers of prenatal education and meets the BFI criteria. It is available in both a print and online format and is purchased for use by jurisdictions in many other parts of Canada.
- *Toddler's First Steps: A Best Chance Guide to Parenting Your 6 to 36 Month-Old-Child* (TFS) (Rev, 2<sup>nd</sup> Ed) is a guide to infant and toddler care and parenting a child from 6 to 36 months of age. It is used by parents and health care providers, and meets the BFI criteria. Like BBC, TFS is available in both a print and online format.
- BBC key content information is included in the Best Chance Website (BCW) ([www.BestChance.gov.bc.ca](http://www.BestChance.gov.bc.ca)). The BCW provides up-to-date information, interactive tools and resources for women, expectant parents, and families with babies and toddlers up to the age of three.
- Toolkit including a survey for providers, WBW Evaluation Survey developed by the Ministry of Health in partnership with Perinatal Services BC and the Public Health Agency of Canada.
- Social marketing. World Breastfeeding Week Proclamation provided by the Provincial Government – signed by BC's Lieutenant Governor and Attorney General. Breastfeeding week activities are held in many hospitals that provide maternity care and in health units across the province.
- National Breastfeeding Conference in 2009 hosted by Perinatal Services BC and the Ministry of Health with support from the BCC and the BC Baby-Friendly Network.
- Ministry of Health: *Review of Breastfeeding Practices and Programs: The British Columbia Pan-Canadian Jurisdictional Scan*.
- Pregnancy Outreach Programming, Canada Prenatal Nutrition Program (CPNP), Aboriginal CPNP supporting vulnerable populations have a focus on promoting and supporting breastfeeding and/or prenatal education that includes breastfeeding.

There are two hospitals, GR Baker in Quesnel and BC Women's Hospital and Health Centre in Vancouver which are designated "Baby-Friendly".

**Vancouver has the only donor human milk bank in Canada, located in BC Women's Hospital,**

**Baby-Friendly Designated Facilities in BC = 2**

## Manitoba

*The Provincial Breastfeeding Strategy has set targets to improve provincial breastfeeding initiation, duration and exclusive breastfeeding rates.*

**The Baby-Friendly Manitoba Committee** is the provincial authority for implementing the BFI. Manitoba Health has developed a Baby-Friendly Hospital Working Group; a Baby-Friendly Healthy Baby Working Group; and a Baby-Friendly Community Health Working Group to assist RHA and Nursing Station staff to implement the Baby-Friendly designation standards. Manitoba currently has four BFI assessors in training.

- In 2002, Manitoba Health initiated a performance deliverable initiative to set measurable expectations for Regional Health Authorities (RHAs) and other funded health care organizations to focus improvements on key health issues and improve reporting on those issues to increase accountability. Breastfeeding was identified as a key deliverable. The breastfeeding deliverable specified that RHAs develop frameworks and activities to improve breastfeeding rates. Additionally, RHAs were asked to target percentage improvements in breastfeeding initiation, duration and exclusive breastfeeding to six months as recommended by Health Canada.
- In 2002 Manitoba Health developed a Provincial Breastfeeding Strategy that is operationalized by Regional Breastfeeding Frameworks. The Provincial Breastfeeding Strategy has set targets to improve provincial breastfeeding initiation, duration and exclusive breastfeeding rates. The full Provincial Breastfeeding Strategy and RHA Frameworks may be found online at <http://www.gov.mb.ca/health/nutrition/bfi2.html>
- In 2002, Manitoba Health developed a breastfeeding policy template available on the Manitoba Health website. Several regions now have a breastfeeding policy.
- *The Chief Provincial Public Health Officer: Report on the Health Status of Manitobans* emphasizes prevention as one of the most promising ways to improve the health of Manitobans, to reduce inequalities of health among Manitobans and to sustain the publicly funded health system and other public programs and services that directly or indirectly prevent disease and injury (eg Education, Family Services). This report recommends exclusive breastfeeding for six months and continued breastfeeding links the development of asthma with exclusive breastfeeding for less than four months, calls for better data collection and increased support for breastfeeding initiation in institutional and other settings. It includes the recommendation of the Baby-Friendly Manitoba Hospital working group for a human milk bank to support maternity units in the province. <http://www.gov.mb.ca/health/cppho/>
- *The Manitoba Women's Health Strategy (2011)* recognizes the distinct health needs of women in the planning, implementation and delivery of health care services. One of the strategic actions called for in this document is to "Enhance breastfeeding support, services and education by continuing to develop the Baby friendly Manitoba breastfeeding initiative." <http://www.gov.mb.ca/health/women/>

### Breastfeeding Education Opportunities

- In addition to the annual Baby-Friendly Manitoba conference, twelve Breastfeeding Clinical and Research Rounds through Manitoba's Telehealth network have been held to increase prenatal and postpartum education. Annually 12 CERPs are available for Lactation Consultants.
- In 2009 and 2010 the committee organized "Train the Trainer" days (one-day and two-days respectively), which were attended by facility educators and breastfeeding champions from almost every RHA in the province to help provide breastfeeding clinical training on an ongoing basis.
- Through Women's Hospital and the University of Manitoba, a 3 hour on-line multi-disciplinary interactive BF education program has been developed for health providers (2011).  
[http://www.umanitoba.ca/faculties/medicine/units/obstetrics\\_gynecology/breastfeeding.html](http://www.umanitoba.ca/faculties/medicine/units/obstetrics_gynecology/breastfeeding.html)

### **BFI Survey - Monitoring of BFI Implementation**

- Manitoba Centre for Health Policy (MCPH) provides breastfeeding data for the province *Manitoba Child Health Atlas Update 2008; What Works? A First Look at Evaluating Manitoba's Regional Health Programs and Policies at the Population Level 2008*  
<http://mchpppserv.cpe.umanitoba.ca/deliverablesList.html>
- At each monthly meeting, Manitoba BFI Hospital Implementation and Community Implementation working group members offers an update about the progress towards BFI implementation in their region.

### **Baby-Friendly Designated Facilities**

- A hospital facility is in the advanced stage of BFI assessment.

### **Human Milk Bank**

- Two Winnipeg hospitals are purchasing pasteurized donor breast milk (DM) (from Ohio Milk Bank) in NICU (2011).
- Women's Hospital (Winnipeg) has put forth a proposal to have a milk bank in the new hospital.
- St. Anthony's Hospital (Nor-man RHA) is pursuing an offer of grant money to start a milk bank that could be used by Manitoba hospitals.

### **Provincial Government Financial Support**

- The plan is to continue defraying costs for assessment travel with provincial educational events.
- All telehealth presentations are offered free to health care providers and peer support.
- Conference costs are kept to a minimum to make it affordable for participants to attend.

- In 2004, Manitoba Health developed a number of breastfeeding resources to support BFI Hospital Accreditation and to replace resources provided for free by formula companies and provided at no cost to hospitals and community sites.
- In 2006 Manitoba Health provided the *Babies Best Chance* book to RHAs. *Babies Best Chance* provides pregnancy, breastfeeding and infant care information. The book is available at no cost to RHAs.
- In 2010 in collaboration with Nova Scotia, five posters provide Baby-Friendly and breastfeeding messaging (Family Friendly Pledge) to contribute to consistent approach to communicating the Baby-Friendly Initiative to families and staff across the province.  
[http://www.gov.mb.ca/healthyliving/hlp/nutrition/bfm.html#.TiyAjr\\_wHDE](http://www.gov.mb.ca/healthyliving/hlp/nutrition/bfm.html#.TiyAjr_wHDE)

#### **BFI Coordinator and/or Government Lead**

- A government lead has been working with regions and facilities since 2001.
- Since 2008, a consultant was contracted to provide support to the Baby-Friendly lead for on-going initiatives

**Baby-Friendly Designated Facilities – none as yet.**

### **New Brunswick**

*In 2006, the Minister of Health mandated all health care facilities to move forward with implementing the BFI best practices.*

**New Brunswick** is divided into two health networks which include all hospitals and public health services. Both health networks have a BFI policy.

There is also a provincial BFI policy statement (2006) which is currently being revised.

The NB BFI Advisory Committee was formed in 2005 - previously it was the NB Breastfeeding Committee. The mandate of the NB BFI Advisory Committee is to provide a foundation that informs, supports, and makes recommendations to the Minister of Health to meet the goals and objectives of the BFI. The membership of the NB BFI Advisory Committee includes representation from government, the health networks (including hospitals and public health) and multisectoral groups with a specific interest in breastfeeding.

**Education** was identified in a BFI self-assessment survey in 2005, as a major challenge in the province. The following education opportunities for NB health care professionals have been offered:

- The WHO/UNICEF 20 hour Breastfeeding Courses: 2006-2009 – a total of 764 health care providers trained. Since 2010, health care professionals are referred to the Health-e-learning Breastfeeding Basics online course. Staff and students are also encouraged to attend the “Prenatal breastfeeding course” that is offered to expectant parents (The NB breastfeeding prenatal curriculum is a standardized class based on the WHO/UNICEF requirements for prenatal education) and the Ontario “Best Start” BFI online course.
- Supervised breastfeeding clinical practicum: Designed to help address the three hours of hands on skills required, and is available for staff across the province using a “mentorship model”.

- Annual workshop for physicians and other health professionals has been offered since 2007. A total of 1650 physicians and health care providers participated.
- A series of case studies on breastfeeding was distributed in 2011 to the breastfeeding mentors to facilitate group discussions/learning sessions for continuing education.

**BFI Capacity building:** An annual provincial *BFI roundtable* has been held since 2006. Attendees are members of the BFI committees and key decision makers across the province. The focus is networking and capacity building around BFI.

2006-2007: the first *BFI self-assessment survey* was completed by all hospitals with a maternity unit and public health offices. A provincial roll-up report with recommendations was prepared:  
<http://www.gnb.ca/0053/bfi/pdf/BFI%20provincial%20final%20report%20E%202010.pdf>

**Mock assessment** exercises were conducted in four facilities (one hospital with a maternity unit & NICU, one hospital with a maternity unit and no NICU, one public health office and one hospital without a maternity unit which is more like a community health center) in 2010. The objective of this exercise was to highlight the good things being done and to discuss strategies to improve. The results of the mock assessment were shared and discussed with the members of all the BFI committees at the roundtable in 2010.

**The Department of Health committed \$100, 000/year for a five year period (2005-2010).** In fiscal year 2011/12, the funding allocated for the BFI has been reduced to \$50,000.

**Baby-Friendly Designated Facilities – none as yet**

## Newfoundland & Labrador

*Healthy Eating and Child and Youth Development are priorities in the Provincial Wellness Plan 2011.*

The Breastfeeding Coalition of Newfoundland and Labrador ( “the Coalition”) was established in 1992 under the leadership of the Newfoundland and Labrador Provincial Perinatal Program (NLPPP) and is supported by the Department of Health and Community Services (DHCS). The Coalition is the designated provincial group to monitor the implementation of the BFI in Newfoundland and Labrador.

The Coalition receives annual funding for a part-time Provincial Breastfeeding Consultant position and for initiatives outlined in the *Breastfeeding Strategic Plan Newfoundland and Labrador (2008-2011)*. Additional funding has been provided for social marketing and enhancements to the provincial babyfriendlynl.ca website.

The Coalition, chaired by the Provincial Breastfeeding Consultant, includes designated representatives from all four regional health authorities as well as the DHCS, the NLPPP, Memorial University Schools of Nursing and Pharmacy, Faculty of Medicine, and LaLeche League Canada. Coalition members are strongly connected to regional breastfeeding committees, Healthy Baby Clubs and Family Resource Centre Programs, Aboriginal Health Services and Regional Wellness Coalitions.

The Coalition oversees five working groups related to: BFI Assessment; Health Professional Education; Public Education and Awareness; Research and Surveillance; and Building Community Capacity. Membership in the working groups includes other individuals with an interest in the topic area (e.g., social media consultants, researchers, epidemiologists, physicians, dietitians, community health nurses).

## Strategies/Initiatives

The Coalition produced a *Breastfeeding Strategic Plan* that sets its priorities and initiatives. At the provincial level, Healthy Eating and Child and Youth Development are priorities in the Provincial Wellness Plan. Key actions include the promotion of breastfeeding through the development, implementation and support of a provincial breastfeeding policy, developing and marketing key parenting messages and prevention of childhood obesity. In addition, through the Wellness Grants Program one region developed a mother-to-mother breastfeeding support initiative. Breastfeeding and the BFI are recognized and supported in other key provincial initiatives such as the *Poverty Reduction Strategy* and in the *Education and Support Standards for Pregnancy, Birth and Early Parenting*.

## Policy Initiatives

A number of policy initiatives have been supported including:

- *Breastfeeding: A Public Health Priority* (2006) position paper presented to government from key stakeholder groups . [www.cpha.ca/uploads/provinces/nlbreastfeedingpaper.pdf](http://www.cpha.ca/uploads/provinces/nlbreastfeedingpaper.pdf)
- Memorial University implemented a breastfeeding workplace/academic setting policy *Supporting and Accommodating Breastfeeding* (MUN, 2008) <http://www.mun.ca/policy/site/policy.php?id=92>
- The NL Public Health Association (NLPHA) adapted the *OPHA Position Paper on Informed Decision Making and Infant Feeding* to reflect the NL health system environment- *NLPHA Position Statement Informed Decision Making and Infant and Young Child Feeding* (NLPHA, 2011).
- The Association of Registered Nurses of Newfoundland and Labrador (ARNNL) released a *Position Statement- Registered Nurses' Role in Promoting Breastfeeding* (ARNNL, 2011) <http://www.arnnl.ca/publications.php?d=3>
- Three of the four regional health authorities have regional breastfeeding policies that reflect BFI standards.
- A provincial breastfeeding policy is drafted and being reviewed for implementation.

## BFI Education

In April 2010, Eastern Health hosted the *Breastfeeding: Making a Difference*® Breastfeeding Course for facilitators from all four regional health authorities. All regions are completing this training with local maternity and community health front-line staff, and have offered education sessions for physicians. The BFI 20 hour course has been implemented in all regions of the province.

The Coalition is developing a breastfeeding tool kit for family physicians. Physicians from rural and urban areas were widely consulted and, with the added expertise of two family physicians, a pediatrician and a community health nurse/lactation consultant, the tool kit is in progress and expected to be completed by December 2011.

The BFI Assessment Working Group is implementing a Provincial Breastfeeding Assessment tool in all maternity facilities. A tool to ensure the accurate documentation of medical/non-medical use of breastmilk substitutes will be piloted.

## Public Education and Awareness

The DHCS in collaboration with the NLPPP produced a revised Breastfeeding Handbook in 2010 and six breastfeeding related fact sheets to provide quality, current, evidence-based resources for parents. These resources are available on the DHCS website [www.health.gov.nl.ca](http://www.health.gov.nl.ca) and [www.babyfriendlynl.ca](http://www.babyfriendlynl.ca). A generic provincial Baby-Friendly crib card has also been produced that includes key messages about breastfeeding and the importance of skin-to-skin care.

A social marketing campaign was launched in October 2009. The province-wide campaign, entitled *You'll see plenty of strange things...Breastfeeding isn't one of them* is a fun, humorous campaign consisting of posters and a website [www.babyfriendlynl.ca](http://www.babyfriendlynl.ca). The two posters are designed to promote public acceptance of breastfeeding and are widely disseminated in all public buildings, physician offices and health facilities.

The website [www.babyfriendlynl.ca](http://www.babyfriendlynl.ca) is directed at pregnant women, breastfeeding mothers and their families. The website receives over 500 hits/month. The campaign will also include three video promotional clips that feature prominent local celebrities and breastfeeding families and health care providers. These clips may be used in prenatal education programs, physician offices and waiting areas, and secondary school programs.

### **Surveillance**

The NLPPP reports on breastfeeding initiation rates using data from the Provincial Neonatal Screening Program. To date, the NLPPP can provide provincial and regional rates for the past twenty-four years (1986 to 2010). This data is very valuable for trend analysis but has limitations in regard to use for research purposes. The Coalition is striving to improve the capture of provincial breastfeeding initiation and duration data in hospital and public health records, using *the BCC Standardized Breastfeeding Definitions*.

### **Research**

The Breastfeeding Coalition is working to establish a strong breastfeeding research agenda. The Research Working Group has received funding from various health foundations and organizations to support research initiatives in the province. A portion of the Breastfeeding Coalition budget is also directed towards supporting research. In 2010, focus groups were conducted in three different geographical areas with non-breastfeeding mothers and are currently being expanded to target grandmothers in these communities. Recruitment is underway for a provincial infant feeding survey to examine breastfeeding initiation and duration rates and predictive factors. Research pertaining to hospital compliance with the *10 Steps to Successful Breastfeeding* following BFI education initiatives is ongoing.

The Research Working Group with Memorial University Faculty of Medicine and School of Pharmacy, and the Newfoundland and Labrador Centre for Applied Health Research (NLCAHR,) hosted a second Breastfeeding Research Symposium in November 2010. This event featured provincial, national and international speakers and attracted 120 participants.

The Coalition, with Memorial University, and the Canadian Institutes of Health Research (CIHR) hosted a very successful Café Scientifique in St. John's titled *"You're not going at that!" Creating an environment that supports breastfeeding as the social norm in Newfoundland and Labrador*. The session was well attended by the public, especially expectant and new mothers and fathers, and health care representatives. In September 2011, the Coalition received CIHR funding to convene a second Café Scientifique on the west coast in Corner Brook.

### **Baby-Friendly Designated Facilities – none as yet**

## **North West Territories**

**NWT Breastfeeding Committee** offers an Online Breastfeeding Course to health care professionals.

NWT Health and Social Services host the 'NWT Supports Breastfeeding' website.

One representative attends the BCC P/T committee meetings.

## Nova Scotia

### *Implementation of the Nova Scotia Provincial Breastfeeding Policy: Evaluation Report – released in October 2011*

Nova Scotia has a long history of supporting breastfeeding and the BFI. The first Provincial Breastfeeding and BFI Committee was formed in 1999 under the leadership of the Department of Health.

**The Provincial Breastfeeding Policy** was approved in 2005. The policy applies to the Department of Health and Wellness, District Health Authorities, the IWK Health Centre and all health system funded providers. The policy objectives are to provide leadership for the protection, promotion and support of breastfeeding; improve the health status of mothers and babies by increasing breastfeeding initiation and duration in Nova Scotia; and support the implementation of the BFI.

**The Provincial Breastfeeding Steering Committee** provides leadership for the implementation of the Provincial Breastfeeding Policy. The Steering Committee is co-chaired by the Department of Health and Wellness and the Reproductive Care Program of Nova Scotia with membership from each District Health Authority and the IWK Health Centre (at the manager level), as well as federal partners (Public Health Agency of Canada and First Nations and Inuit Health, Health Canada) and maternal-child health program coordinators from two First Nations communities. The Steering Committee provides leadership and coordination to four working groups (BFI Implementation, Capacity Building, Education & Standards and Monitoring & Evaluation)

**The Breastfeeding Social Marketing Campaign**, one of the directives of the Provincial Breastfeeding Policy, was launched in 2009. After extensive consultation with mothers, potential mothers and their friends and families, a campaign theme emerged, '*Breastfeeding. Learning makes it natural.*' The campaign included two television commercials, radio advertisements, a series of posters, bookmarks and a campaign website – [www.first6weeks.ca](http://www.first6weeks.ca). The campaign addressed the reality that breastfeeding can be challenging in the early days and weeks but with help and support breastfeeding will work.

*Standards Food and Nutrition for Regulated Child Care* outline the requirements that child care facilities must meet to be in compliance with the *Day Care Act* and *Regulations*. These standards include 13 requirements including: food and beverages served, food safety, clean drinking water, adapting the menu for infants, modeling positive attitudes towards food and nutrition, etc. Breastfeeding is also included in the Standards and requires centers to welcome mothers to breastfeed anywhere in the facility, a comfortable space to breastfeed, direction on storage of breastmilk and when requested to develop an infant feeding plan with the family.

**Breastfeeding Surveillance** is a Provincial Breastfeeding Policy directive. Breastfeeding initiation data (including exclusive breastfeeding) is captured in the *Nova Scotia Atlee Perinatal Database* (administered by the Reproductive Care Program). This data (using the BCC definitions) is of high quality and available at the district level. Breastfeeding duration data remains a challenge. *The Healthy Beginnings Database* (public health) captures breastfeeding on entry to community with the capacity to capture breastfeeding duration over time. Breastfeeding duration data is available through the *Canadian Community Health Survey* (CCHS) however with a small provincial sample size this information is not available at the district level.

**Provincial Breastfeeding Policy Evaluation Report** - With the release of the Provincial Breastfeeding Policy, there was a commitment to monitor the implementation of the policy. The purpose of the evaluation is to assess policy implementation across the province, identify successes, challenges and opportunities as well as additional supports required to reach full implementation. The evaluation was conducted by Applied Research Collaborations for Health, Dalhousie University. The final report is anticipated in October, 2011.

**Growing Up Healthy – A Childhood Obesity Prevention Strategy.** Work is currently underway to develop a childhood obesity prevention strategy that will describe government action to reduce childhood obesity. The recommendations will focus on supportive environments and identify policy levers government can take to reduce childhood obesity. It is anticipated that this will include recommendations to further support breastfeeding initiatives in the province.

To support District Health Authorities and the IWK Health Centre in providing quality, evidence-based professional development related to breastfeeding, the *Breastfeeding: Making a Difference*© (20 hour course) was implemented in September 2009 with the level one preparation of 30 trainers from across Nova Scotia. Over the past two years, 46 courses have been offered with 754 trained (acute care, public health and community partners). One of the trainers works with and supports First Nations communities and has offered 7 courses throughout the Atlantic Provinces.

**The BFI Interactive Tutorial**, created by South Shore Health, South West Health and Annapolis Valley Health will be launched in October 2011. The purpose of the tutorial is to help all employees in health care settings in Nova Scotia build their knowledge about breastfeeding and provide information to better support breastfeeding women within our health facilities and our communities.

**Community Capacity Building** is a directive of the Provincial Breastfeeding Policy and recognized as critical in improving breastfeeding rates.

- The *Family Friendly Pledge* (10 Steps in easy to read, family friendly language) is posted in hospitals, Public Health Services offices and primary health care locations throughout the province.
- The 'how to guide', *Mother to Mother - Creating a Breastfeeding Support Line in your Community*, was based on a successful project in South West Health.
- To promote breastfeeding support in the business community, *Making Breastfeeding Your Business: An Action Support Kit* was created by South Shore Health with Pictou County Health producing a You Tube video.
- All parents in the province receive the *Loving Care* parent health education booklets and *Breastfeeding Basics*. Breastfeeding is presented as the norm with formula information in a separate resource.

**Baby-Friendly Designated Facilities – none as yet.**

## Nunavut

One representative attends the BCC P/T committee meetings.

## Ontario

*Ontario is a Canada's most populous province with over 13 million residents and second largest in total land area.*

***Baby-Friendly Designated Facilities: 12***  
*3 hospitals, 7 public health facilities, 2 community health centers*

**The Ontario Breastfeeding Committee (OBC)** is the provincial authority for implementing the BFI. Established in 2000 from a multidisciplinary group of stakeholders, the OBC offers opportunities for

knowledge exchange for public health facilities and hospitals which can access mentoring as they work towards the BFI designation.

*Recommendations for a Provincial Breastfeeding Strategy for Ontario* created in 2010, provides a framework for the BFI in Ontario. This document has been distributed widely and recommendations for adoption of some parts are being proposed. This document, the *Ontario Progress Report and the Ministry of Health Promotion and Sport Public Health BF Supports and Surveys* report can be found at [www.breastfeedingontario.org](http://www.breastfeedingontario.org).

In 2011 a representative from the Ministry of Health Promotion and Sport was appointed as an Ontario Breastfeeding Committee member and representative on the BCC P/T committee. As part of the joint work of the Ministry of Health Promotion and Sport and the Ministry of Health and Long Term Care in developing *Accountability Agreements for 2011-2013*, several performance measurement indicators have been identified for Ontario's 36 Public Health Units to reflect their work as outlined in the *Ontario Public Health Standards (OPHS)*. BFI designation status will be one indicator to measure public health unit performance for both the *Reproductive and Child Health Standards* of the OPHS.

The OBC has the capacity to complete the initial phase of BFI assessment process. There is one lead assessor, four assessors and two assessor candidates in Ontario who provide every level of support for BFI implementation.

A BFI resource team of 23 individuals were identified and received training to provide mentorship to facilities working towards BFI designation.

The third BFI EXPO was held within the last year and was well attended by both hospital and community members. The BFI Expo affords the opportunity for information sharing and networking around the implementation of the BFI.

Newborn data collection has been revised in Ontario. The Better Outcomes Registry and Network (BORN) has incorporated BCC definitions in hospital based data collection.

A survey by the OBC in 2008 showed that 66.3% of respondents stated that their organizations collect initiation and/or duration breastfeeding rates. Some stated that they are collecting data but not according to BFI requirements. A few have completed Infant Feeding Studies and will repeat it approximately every 3-5 years. Some organizations track initiation and not duration due to the difficulty and cost in collecting the information.

## **Prince Edward Island**

*At the 'Our Health Our Future' National Dialogue on Healthy Weights, P/T Stakeholder Dialogue, held in Charlottetown, PEI, May 30, 2011 the need for a provincial breastfeeding policy was identified.*

**The PEI Breastfeeding Coalition** (PEI-BFC), established in early 1999 is a broad based provincial working group dedicated to the promotion of breastfeeding on Prince Edward Island. The Coalition is multi-disciplinary, represents all regional health authorities across the Province, and has representation from community partners and the Department of Health and Social Services.

- There are two hospitals in PEI where births take place- each of these facilities has a Breastfeeding Policy. Ongoing efforts are being made to promote skin-to-skin, at a minimum, for the first hour of life for all babies. Hospital chart forms are being updated with attention to 'language' regarding infant feeding and skin-to-skin.
- Breastfeeding education is being promoted for all health care providers who interact with mothers and families; this includes hospital nurses, public health nurses, physicians, and instructors at the UPEI School of Nursing. As a start this is in the form of on-line training, which is available 24/7.
- Although PEI does not have an official social marketing campaign related to breastfeeding promotion the provincial Breastfeeding Coalition is working to promote a positive image of breastfeeding in the community. Some activities include: hosting breastfeeding celebration events for families in connection with World Breastfeeding Week; providing books for provincial libraries, posters for baby feeding rooms in shopping malls, and signs 'You are welcome to breastfeed here' for provincial ice rinks; and working with rinks to have them provide a warm, private space for breastfeeding mothers to feed their babies.
- The University Of Prince Edward Island School Of Nursing has drafted a *Policy Supporting and Accommodating Breastfeeding* to be approved in the fall of 2011.

**Baby-Friendly Designated Facilities – none as yet.**

## Quebec

Information on the Baby-Friendly Initiative in Quebec is available at the website

<http://www.msss.gouv.qc.ca/sujets/santepub/initiative-amis-des-bebes.php>

**Baby-Friendly Designated Facilities = 20**

## Saskatchewan

*Each regional health authority in the province has been mandated to establish a BFI Committee and work towards implementing Baby-Friendly Initiatives in their area.*

### ***Baby-Friendly Designated Facilities – 1***

**The Breastfeeding Committee for Saskatchewan** (Inc.) (BCS) provides a provincial framework that works to establish breastfeeding as the cultural norm for infant feeding within Saskatchewan. The BCS was formed in 1994, a network of health professionals that represent many different organizational groups and consumers.

In 2001 the Breastfeeding Committee for Saskatchewan identified the WHO/UNICEF BFI as a primary strategy for the protection, promotion and support of breastfeeding. As such, it has focused its primary goal and annual/5-year strategic plans on implementing the BFI in provincial health facilities (hospitals and public health). This work contributed to the establishment of the Breastfeeding Initiatives (BFI) Committee.

**The Breastfeeding Implementation Committee (BFIC)** is a ministerial appointed committee established in 2004 to assist health regions working towards the implementation of the BFI in Regional Health Authorities in Saskatchewan. BFIC has compiled resources to support BFI in the province.

The BFIC compiles yearly appraisal data for both hospital and community services; provides recommendations to the Ministry of Health and Regional Health Authorities regarding breastfeeding.

## **Yukon**

Two representatives attend the BCC P/T committee meetings.

# Provincial/Territorial BFI Committee Contacts 2012

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#### **Key Baby-Friendly Hospital Initiative (BFHI) Documents**

The Baby-Friendly Hospital Initiative: Revised, Updated and Expanded for Integrated Care, Section 1: Background and Implementation; Section 2: Strengthening and sustaining BFHI: A course for decision-makers; Section 3: Breastfeeding Promotion and Support in a Baby-Friendly Hospital; a 20-hour course; Section 4: Hospital Self-Appraisal and Monitoring; Section 5: External Assessment and Reassessment, New York, New York, UNICEF, 2006 ([http://www.unicef.org/nutrition/index\\_24850.html?q=printme](http://www.unicef.org/nutrition/index_24850.html?q=printme)).

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This report was written for the Public Health Agency of Canada by Kathy Venter (chair), the Board of Directors of the BCC, and members of the BCC Provincial/Territorial Committee.