

QUINTESSENCE FOUNDATION

IN
THIS
ISSUE

2018 Quintessence
Breastfeeding Challenge

The Baby-Friendly
Initiative

BFHI News from WHO

WE'RE BACK!

BY: FRANCES JONES

Congratulations to all who supported and celebrated breastfeeding through the Quintessence Breastfeeding Challenge 2017. Unfortunately, our new website did not work on the big day and then we had an email failure. We are so sorry for all the problems and stress this caused many of you! The Quintessence team are sporting new short hairdos based on all the hair we ripped out in frustration. We appreciate your patience and understanding. We have been working on our website since the end of October 2016 and think we finally have all the “bugs” worked out for 2018!

QUINTESSENCE BREASTFEEDING CHALLENGE 2018

Please encourage sites to register for this year's challenge on September 29th 2018! We have received requests for the challenge to include more than one date. Groups have reported difficulties with arranging facilities, having enough staff and competing with other events. This year, we will accept sites who hold an event anytime from sept 29th to October 6th. We are interested to hear from sites about the proposal for 2019, to change the rules to have the challenge officially include all quintessence "latch ons" held in the 1st week of October.

We would love to have more sites than 2017 – and in particular have a site in every NICU in Canada & NICUs in other parts of the world. Think what a strong message that would give about the importance of human milk particularly to high risk infants. The BC women's NICU (as well as a number of others) have been participating for a number of years. Due to the high-risk population, mothers breastfeed if babies are medically able, or express if the baby is not able to breastfeed -all are counted "in" and receive a participation certificate. It is not a work load issue for staff as one volunteer can "run" the NICU site. If you need any more help contact Frances Jones at fjones@cw.bc.ca



Mom and Baby from Quintessence Breastfeeding Challenge 2016 at BC Women's NICU

Funding for the Quintessence Breastfeeding Challenge 2018

Struggling to organize a Canadian site and needing some funds to use? Send a funding request to the Quintessence Foundation including specifically location, expected number of participants, what the funds would be used for, if there is any other matching funds or in kind funding and what activities are planned. Applications can be made via email to info@babyfriendly.ca



THE BABY-FRIENDLY INITIATIVE

Support for all Mothers

In Canada, the Baby-Friendly Initiative encompasses promotion, protection and support of breastfeeding both in the hospital and in the community for mothers and their babies. It provides hospitals and community facilities with the template for evidence-based care. However, the BFI includes more than 'just breastfeeding' including other practice issues such as support for infants when they receive painful procedures, safe skin-to-skin care and responsive infant feeding. All of these issues are important to all families, no matter how they choose to feed their babies.

In the past, health care providers often made decisions on how mothers would feed their babies. In the 50s and 60s, bottle feeding was seen as modern and healthier; babies were given bottles of water and formula shortly after birth,

often without any discussion or consent from the parents. Separation, feeding time limits and no understanding of breastfeeding was the death knell to any mother who tried to breastfeed. The 70s and 80s brought about some improvement, at least in theory. But formula was still considered the “norm” and many feeding decisions were still made by health care providers through actions or inaction. In the 90s, using initiatives such as UNICEF/WHO BFHI, some health care facilities attempted to increase support women’s choice to breastfeed. Now, 20 years after the launch of the BFI in Canada, though support is growing less than 5% of Canadian babies are born in ‘Baby-Friendly

hospitals – hospitals demonstrated to have better breastfeeding outcomes.

One of the most important principles behind the BFI is support for informed decision- making, especially about infant feeding. Families making informed feeding decisions based on good information (not marketing) and active support of their decision is the true essence of the BFI in Canada.

For mothers who cannot breastfeed or do not wish to, provision of good information and education one-to-one is recommended. The inclusion of WHO Code of Marketing of Breast Milk Substitutes in the BFI helps formula feeding families to receive education based on evidence rather than marketing information from health care agencies. This is a huge improvement over the “endorsement through association” and formula “gift packs” that were provided in the not so distant past.

Issues such as safe skin-to-skin care, pain reduction for minor procedures through skin-to-skin, keeping mothers and babies together, responsive feeding and provision of care based on evidence all helps formula feeding mothers as well as breastfeeding mothers.

We need to get the word out that the BFI is good for everyone – and then ensure our clinical practice reflects the true BFI philosophy of evidenced based care for all.



BFHI NEWS

From WHO

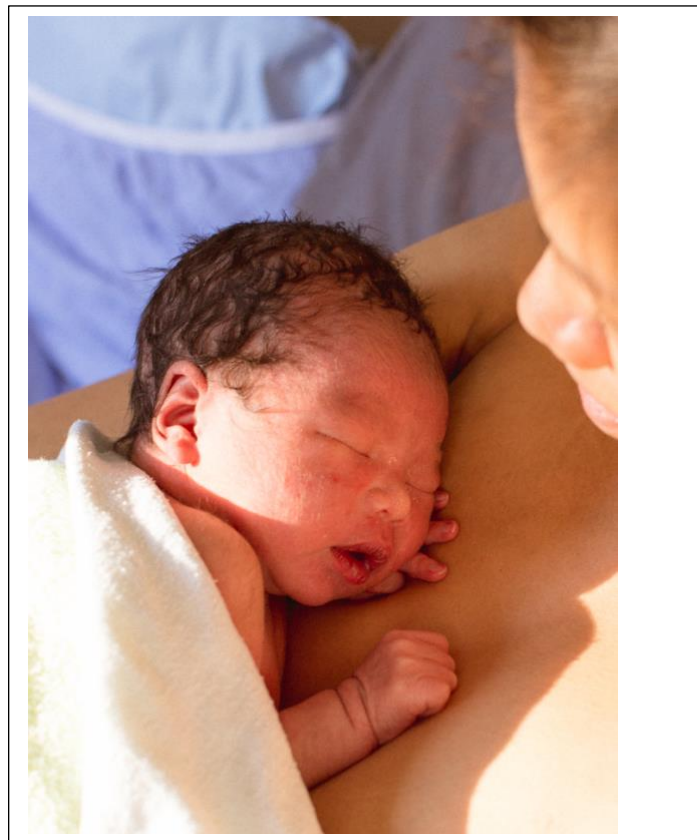
In the fall of 2017, WHO released the long-awaited review of the evidence supporting the ten steps of the BFHI (BFI in Canada). This new document, *Protecting, Promoting and Supporting Breastfeeding in Facilities Providing Maternity and Newborn Services Guideline*, examines each of the *Ten Steps to Successful Breastfeeding* grading the available evidence. It includes a qualitative review to determine the preferences and values of mothers in order to bring together evidence and considerations to inform practice.

“The scope of the guideline is limited to specific practices that could be implemented in facilities providing maternity and newborn services to protect, promote and support breastfeeding”.

<http://who.int/nutrition/publications/guidelines/breastfeeding-facilities-maternity-newborn/en/>

This new document remains largely consistent with Canada’s Baby-Friendly Practice outcome indicators. However, the new document suggests that cups and spoons are preferable to feeding bottles when additional feeding is required for preterm infants, it does not prioritize methods for term infants.

WHO also invited comments on a draft of the newest revision of the Baby-Friendly Hospital Initiative:



Protection, Promotion, and Support of Breastfeeding in Facilities Providing Maternity and Newborn Services: the revised Baby-Friendly Hospital Initiative 2018. In this draft, the 10 steps are realigned but are not changed substantively. Facilities working towards designation can continue to use the current standards. Stakeholders from around the world submitted feedback and the final version is available at: www.who.int and search BFHI 2018.

The updated “Ten Steps” can be found at:

www.who.int/nutrition/bfhi/ten-steps/en/



Labrador City in Newfoundland & Labrador participated in the 2017 Quintessence Breastfeeding Challenge.

QUINTESSENCE BREASTFEEDING CHALLENGE 2017

The Quintessence Breastfeeding Challenge 2017 was held on Saturday, September 30th at 11am. There were results reported from over 100 sites (150 registered) from four countries with children “latched on” at 11am local time. The challenge provides an opportunity to increase awareness of the support needed for mothers to succeed in their breastfeeding goals. In Canada, public breastfeeding is still an issue with mothers being “shamed” about this most natural act.

The theme for world breastfeeding week 2017, celebrated in Canada during the 1st week of October was *Sustaining Breastfeeding Together*. The theme celebrates working together for the common good, which produces sustainable results, greater than the sum of our individual efforts. We know that breastfeeding aids the survival of infants and helps them thrive, has long-term health benefits for women, yields economic benefits and enhances the wellbeing of all. The challenge for all of us is to translate globally agreed policies to positive action in our communities. Breastfeeding is not just a woman’s issue or the sole responsibility of a woman - the protection, promotion and support of breastfeeding is a collective societal responsibility shared by us all. Many hands make light work and each of us has a part to play. The breastfeeding challenge is a community event that builds community support through increasing awareness of the importance of breastfeeding.

Results of the 2017 North American Quintessence Breastfeeding Challenge

Number of sites: 124

Number of babies: 2,462

Sites with the most participant children:

1. Quebec City/ Ville de Québec, Quebec, Canada
2. Chilliwack, BC Canada
3. St -Jean-sur-Richelieu, Quebec, Canada
4. Les Rivières, Quebec City, Quebec, Canada
5. St Catharines Ontario, Canada
6. Vaudreuil-Dorion, Quebec, Canada-
Nourri-Source La Presqu'île Salon de la
Famille et Defi Allaitment
7. Montreal, Quebec, Canada -Journée de
l'allaitment et de la parentalité de Villeray
8. Laval, Quebec, Canada, Journée de
l'allaitment de Nourri-Source Laval
9. Granby, Quebec, Canada Defi allaitment
Nourri-source
10. Maschouche, Quebec, Canada- Salon de
Lamaternité



Cupcakes for the 2017 Challenge,
St Paul's Hospital, Vancouver, BC

The North American 2017 Ratings

Category A: More than 50,000 births/year

Gold: Quebec, Canada

Silver: Ontario, Canada

Bronze: Alberta, Canada

Category B: 10,000 to 50,000 births/year

Gold: British Columbia, Canada

Silver: Manitoba, Canada

Bronze: Saskatchewan, Canada

Category C: Less than 10,000 births/year

Gold: New Brunswick Canada

Silver: Nova Scotia, Canada

Bronze: Newfoundland & Labrador, Canada



Cranbrook BC celebrated World Breastfeeding Week 2016 by participating in the Quintessence Breastfeeding Challenge.

North American Quintessence Breastfeeding Challenge 2016

As our website was taken down before the numbers were all in, we want to recognize our 2016 participants as well.

The North American 2016 ratings:

Sites with the most participant children:

1. Chilliwack, BC Canada
2. Niagara, Ontario, Canada
3. Laval, Quebec Canada
4. Gatineau, Quebec, Canada
5. Kelowna BC, Canada
6. Rosemère Quebec
7. Halifax, Nova Scotia, Canada
8. Vancouver, BC Canada – BC Women's Hospital
9. Guelph, Ontario, Canada
10. Kamloops BC, Canada & Maschouche-Terrebonne Quebec, Canada – Nourri Source Lamater

Category A Regions:

More than 50,000 births/year.

Gold Quebec, Canada
Silver Ontario, Canada
Bronze: Alberta, Canada

Category B Regions:

10,000 to 49,999 births/year

Gold: British Columbia, Canada
Silver: Saskatchewan Canada
Bronze: Manitoba Canada

Category C Regions:

Less than 10,000 births/year

Gold: Nunavut, Canada
Silver: New Brunswick Canada
Bronze: Nova Scotia, Canada

The International data for 2016 & 2017 will be in the next newsletter.

The Shame Game

No matter what mothers do they feel judged. Google “breastfeeding shaming” and “bottle feeding shaming”. How sad that many comments about wo No matter what mothers do they feel judged. Google “breastfeeding shaming” and “bottle feeding shaming”. How sad that many comments about women’s stories are simply rude. For mothers today, part of the problem is the anonymity of the internet. People can say anything without consequence and, apparently, without thought of the effect on others.

Anyone who has ever parented young children has experienced unsolicited advice from total strangers Many of us learned to say, “you could be right” and then ignored the (often) uninformed input. In today’s world with social media it has become easier to harangue people with unsolicited input.

In 2016, at a Toronto Golf and Country club a mother of a 2-1/2 month-old baby was shamed for breastfeeding “discreetly” in a corner of a hallway. The manager approached and informed the mother that several people had complained and "people don't want to see *that* while eating." He then shielded her with a tablecloth and escorted her to the basement. The mother wrote about her experience and once it hit the social media there were many women reporting similar public “shaming” across Canada, United States, the United Kingdom, Germany and Denmark. Usually, the “offended” refer to breastfeeding as excretion or toileting or a sexual act and therefore should be done in private. Just the opposite is true. Breastfeeding is a secretory act of providing food to a young child. Perhaps if more women breastfed *non-discreetly* people will get over their hang up and see breastfeeding as the joy it is.

Mothers who bottle feed feel judged when asked to explain their decision or given unsolicited advice. It can be hard for a bottle-feeding mother, especially if your goal was to breastfeed. Parents have the right to make parenting decisions and no explanation is needed. Sometimes



mothers assume others are judging. That seems to speak to the need for good counselling and support to ensure firstly that the mother is making an informed choice and second that she is feeling supported in her choice.

On websites like *Fearless Formula Feeder* and *Fed is Best* many of the stories are stressful to read. Story after story about “failed breastfeeding” features situations where the mother received no effective support or poor information from health care professionals. For example, one mother described her baby as losing 15% in the first few days of life (a situation for immediate intervention and feeding); another mother with a baby who cried all the time. Both were told by the health care provider to just ‘keep trying’. This

is truly alarming. What is needed is careful feeding assessment by a skilled person including assessment of the mother, the baby and the feeding, a feeding plan developed with the mother and close follow-up. Statements on weight loss that include “weight loss of 10% is normal” or “5% weight loss is safe” are incorrect. Weight loss is but one factor in the overall picture and every baby needs careful assessment. A late preterm might lose 5 % and need intervention if the mother has little milk and the baby is showing clinical signs of dehydration versus a full-term infant who loses 10%, is clinically normal, attaches and feeds well and the mother’s milk has “come in”. It’s not the number, it is the entire clinical situation that needs assessment.

The other day a mother desperate to breastfeed her one-week old baby, described how she sought help from a health care professional who told her, “just bottle feed and get your baby’s weight up.” The mother understandably was very distressed as she felt she had failed and couldn’t breastfeed her baby. A feeding plan was worked out which involved feeding her baby (the number one rule) and working on getting breastfeeding established.

The ‘Fed is Best’ slogan implies that supporting exclusive breastfeeding is risky leading to the tragic stories. No well-educated feeding specialist would argue with feeding babies. In addition, families need good information to make good decisions and then need support in their decisions. If breastfeeding is not going well the number one rule is ‘Feed the Baby’. Ideally, support the mother and baby to maintain as much breastfeeding as possible if that is the mother’s goal. Much as some want to dispute the facts, there are thousands of studies done over the last 100 years showing that human milk for human babies makes a huge difference to health,

communities and the world at large. To argue against this concept is just silly. But not all mothers can or wish to breastfeed and they need support, particularly women who want to breastfeed but even after their best efforts it is not to be.

Reference:

1. A. Shimo. Special to the Globe & Mail. April 8, 2016.
2. Fearless Formula Feeder <http://www.fearlessformulafeeder.com/category/fff-friday/>
3. Fed is Best <https://fedisbest.org>

The following was sent to Quintessence Foundation for our newsletter. We haven't had an opportunity to publish it until now. It fits in well with "The Shame Game".

"You can't do THAT here. Only in the toilet. Air Canada Policy."

My daughter did a double take and turned to her partner seated beside her, "Did I just hear that correctly"? She turned to the woman seated behind her, the recipient of the flight attendants pointed command, who had been breastfeeding her toddler on a flight from Toronto to Vancouver.

Apparently, they had heard it correctly and the now no-longer-breastfeeding woman and her toddler was crying quietly. My daughter asked if she was OK and she said she was tired after having already traveled for 10 hours. When asked if she was Canadian, she said she was not. My daughter told her, that as a Canadian, she was embarrassed and ashamed for this unacceptable, stupid behaviour from the Canadian airline. **THIS** is why we still need to have world breastfeeding week.

At the Nelson library on Saturday on October 1, 2016, twenty-one breastfeeding women and families attended the breastfeeding challenge. On Saturday September 30, 2017, thirteen mothers and babies and babies gathered for the Nelson Breastfeeding Challenge. This friendly competition to have the most women breastfeeding in one location at one time took place across Canada and in various places around the globe in celebration of world breastfeeding week.

<http://www.babyfriendly.ca/Challenge/results-home.aspx>



It was a wonderful celebration acknowledging that it is no small thing to breastfeed a child. In whatever way a mother breastfeeds — fully or partially, at the breast or

by giving expressed breastmilk by bottle after pumping — any amount is hugely valuable and important, and families need to be supported and celebrated for doing this.

Breastfeeding nurtures a baby emotionally, physically and neurologically, giving a child the greatest opportunity to meet their potential for health. The World Health Organization recommends exclusive breastfeeding for the first six months of life, followed by gradual introduction of appropriate foods while continuing to breastfeed until two years of age. But whether or not a mother is able to meet this goal, any amount of breastfeeding needs to be encouraged and actively supported in every way possible.

It takes courage and commitment to breastfeed in a culture that is too often unsupportive and uneducated about the unparalleled value and benefit of breastfeeding. With the high rates of obesity and chronic illness in the world, as well as so many people on the move because they are living in conflict zones, breastfeeding is the most basic way to mitigate illness and improve the health of infants and children for the rest of their lives.

After checking with Air Canada and discovering they do not have a breastfeeding policy, my daughter has asked them to develop one that will welcome and support breastfeeding families. She and I jokingly (kind of) suggested that in the event that another passenger complains about someone breastfeeding in public, he or she could be asked to sit in the bathroom for the remainder of their flight. But what she has actually asked is that should this occur, the person complaining needs to be made aware of how Air Canada supports breastfeeding and then upgrade the breastfeeding family to first class to honor and support what they are doing to promote the health of babies, mothers, families and communities.

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