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Baby Friendly Initiative Newsletter



New and Noteworthy

WHETHER YOU ARE NEW TO BFI OR A SEASONED PRO, READ ON FOR UPDATES AND RESOURCES RELATED TO PERINATAL AND NEWBORN HEALTH AND SHARE WIDELY!

Formula Purchase Agreements in place across Horizon

HORIZON TAKES HUGE LEAP TOWARD FULL COMPLIANCE WITH THE WHO CODE OF MARKETING OF BREAST MILK SUBSTITUTES

The WHO Code of Marketing of Breastmilk Substitutes (often called simply "The Code") was adopted by the World Health Assembly and UNICEF in 1981, as an important safeguard for families. The Code is not directed at families and does not advocate against parents deciding to use formula. However, it does recognize the vulnerable nature of babies and young children and calls for control of aggressive marketing by the formula milk industry.

According to a 2023 Lancet series on predatory marketing and the formula industry, marketing strategies that capitalize on parents' worries and concerns have been commonplace for decades. "Donating" free infant formula to hospitals has long been a standard practice in this industry. But formula companies are businesses, not charities, and this practice is a form of marketing. According to the Code, information that families receive on infant feeding must be accurate and independent of industry influence to make informed decision making possible. Horizon's move to purchasing infant formula in all of our facilities, similar to the purchasing process for other goods, is a huge step toward complying with the Code and sets the stage for future BFI designation across the Network. Congratulations to all who worked on this agreement! Thank you!

For more information on the Code, check out the Lancet series on the formula milk industry marketing <u>here</u>.

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WHO Code Check-Up for Healthcare workers. Are you following them all?

- 1) No free samples/coupons to patients
- No formula company sponsorship for education/conferences/etc
 - 3) No formula company gifts to healthcare workers
 - 4) No branded items/displays
- 5) No contact with patients by formula company reps

Give Facts, not Marketing!







Public Health Hosts World Cafe

POST-PANDEMIC INFANT FEEDING SUPPORT LACKING ACROSS THE PROVINCE

BY: FREDERICTON AND UPPER RIVER VALLEY PUBLIC HEALTH

The pandemic had a significant impact on infant feeding support. Many of the services that were offered ceased to operate or were hugely impacted. After the height of the pandemic, when public health services in Fredericton and the Upper River Valley returned to more normal operations, it was recognized that a return to previously offered infant feeding support services would be helpful, but would not meet everyone's needs.

A team was assembled to complete a literature review and an environmental scan of infant feeding programs offered in other parts of Canada. The next step was to organize a World Café that took place on July 14, 2023. The World Café method is designed to create a safe, welcoming environment in which to intentionally connect multiple ideas and perspectives on a topic by engaging participants in several rounds of small-group conversation. The Zoom platform and Microsoft Whiteboard were used to connect the approximately 40 participants who represented Horizon Community portfolio members from Public Health as well as community partners representing Family Resource Centres, parents, First Nations, and physicians.



The results from the World Café included the following:

- Need for enhanced public health services for infant feeding
- More prenatal breastfeeding education
- Community support for infant feeding
- Accurate information in relation to infant feeding

With these results, we are in the process of doing an internal review of our current infant feeding programs and exploring potential resources to enhance services.



Visit:

https://www2.gnb.c a/content/gnb/en/d epartments/ocmoh/ healthy_people/con tent/bfi.html to find infant feeding supports in your area!



Come and join us

- Ø Protect
- Promote

If your organization is involved in Breastfeeding Support

CONTACT US!

breastfeedingcanada.ca

Networking and Collaboration



Let's Talk!

Influencing policy and practice in health care

A huge thank you to everyone who participated!







NEW CPS Position Statement on BF in NICU

MOST WOMEN IN CANADA INTEND TO BREASTFEED.
DELIVERING A PRETERM OR ILL INFANT PRESENTS UNIQUE
CHALLENGES, BUT THEY CAN BE OVERCOME

In their new position statement *Breastfeeding and human milk in the NICU: From birth to discharge*, the Canadian Pediatric Society (CPS) provide an extensive review of evidence supporting the importance of breastfeeding and human milk for sick and preterm infants.

They provide readers with clear rationale for prioritizing human milk in the NICU, and give practical direction on how to support parents to establish and maintain milk production when their infants are unable to feed directly at the breast. They recommend strong policies and protocols to guide decision-making around infant feeding for clinicians, encouraging a family-centered, supportive environment to enable shared decision-making from birth to discharge.



Important Take-aways from the review:

- All infants who are able to breastfeed should be fed at the breast within 1 h postbirth or as soon as they are clinically stable, regardless of GA or weight.
- Preterm infants have much earlier ability to attempt to breastfeed than previously thought- some as early as 28 weeks, and most by 32 weeks, with adequate support.
- When infants are admitted to the NICU and their parent intends to breastfeed, the first feeding should be at the breast.
- $\bullet\,$ Skin-to-skin contact improves breast milk volumes, breastfeeding exclusivity and duration.
- Maternal milk expression needs to start as soon as possible after birth, preferably in the first hour, if the baby is not able to breastfeed directly.
- Daily volumes of breast milk are the strongest predictor of breastfeeding exclusivity and duration, and parents who are not producing at least 500ml/24 hours in the first two weeks after birth require additional support.

You can find the complete Position Statement here.

By the Numbers...

THE CANADIAN PEDIATRIC SOCIETY RECOMMENDS EXCLUSIVE BREASTFEEDING FOR THE FIRST 6 MONTHS OF LIFE FOR ALL BABIES, BREASTFEEDING RATES IN NICU BY FACILITY FOR 2022/23:

ANY BREAST MILK RECEIVED IN HOSPITAL (NICU ADMITS): TMH:81.9% SJRH:73.5% DECH:80.2%

EXCLUSIVE BREASTFEEDING* AT HOSPITAL DISCHARGE (NICU): TMH:48.8% SJRH:50.8%

DECH:31.2%

*THIS RATE INCLUDES THOSE BABIES WHO ARE SUPPLEMENTED WITH INFANT FORMULA FOR A MEDICAL INDICATION









Better Together- How Family Resource Centres make a Difference

NB FAMILY RESOURCE CENTRES PROVIDE CRUCIAL PARENT-TO-PARENT CONNECTION, WHERE THE VALUE OF PEER PARENTING SUPPORT IS CELEBRATED AND EMBRACED.

BY STEPHANIE NESS, EXECUTIVE DIRECTOR, SUSSEX FRC

Family Resource Centres (FRCs) have been active in New Brunswick for many years, but you may not realize how many programs and services they offer. Through federal programs from the Public Health Agency of Canada, known as the Community Action Program for Children (CAPC) and the Canadian Prenatal Nutrition Program (CPNP), funding has been available to operate Family Resource Centres across NB for the past 29 years.



Pictured: Tera Kozak, CPNP Coordinator, Sussex FRC, her sister Aaron, and their children

Families can learn about a number of programs using the FRC website. by phone or in person, including:

- in-person prenatal classes with skilled facilitators based on an evidence-based curriculum
- breastfeeding/infant feeding support
- Mental Health support and referral services
- emergency preparedness & child safety
- parenting programs such as 'Nobody's Perfect'
- infant CPR, car seat safety and installation
- child bonding and attachment programs like
 "Mother Goose", Infant Massage and Talk with Messpeech, language and hearing services
 All free of charge to parents and caregivers with

They also partner with numerous local organizations in their respective communities. This network of support for families is so necessary for a community's overall health.

FRCs are distinct in their capacity to provide inclusive, family–based programs and services in English or French. Programs provide guidance to many vulnerable or at-risk groups, including newcomers, those dealing with mental health challenges, and those experiencing domestic violence, food insecurity, transportation concerns and financial challenges. Many families form lifelong connections. By promoting FRC programs and services with clients, we can ensure families are accessing these vital community services!

BY PROVIDING A NON-JUDGEMENTAL, INCLUSIVE, CARING, AND SAFE ENVIRONMENT, FAMILIES CAN LEARN TOGETHER, OVERCOME CHALLENGES AND THRIVE.

FOR MORE INFORMATION
ON THE NB FAMILY
RESOURCE CENTRES, PLEASE
VISIT THEIR WEBSITE
WWW.FRC-CRF.COM



FRCs in NB include:

- 8 Bilingual Centres (Bathurst, Grand Falls, Moncton, Saint John, Fredericton, Campbellton, Miramichi and Kent County);
- 4 English Centres (Sussex, Chipman, St. Stephen and Woodstock)
- 1 French Centre Péninsule Acadienne

Along with <u>over 85 Satellite</u>
<u>locations</u> in isolated and rural
areas, to ensure access by as many
families as possible. You are
welcome to visit a Family Resource
Centre in your area!





Data Collection Update

Collecting data is an integral part of the BFI program. Important changes aimed at improving quality have been rolled out across the Province.

Step 1c of the Canadian BFI Implementation Guideline requires facilities to "Establish ongoing BFI monitoring and data-management systems". Part of this step requires that direct care staff are aware of why monitoring practices is important and how practices are monitored in their facility. Managers are also required to provide annual data for the facility on required items in the BFI standards.



This data is collected using the Provincial BFI Data Collection Form (formerly the Provincial Infant Feeding Data Collection Form). Changes to the Canadian BFI Implementation Guideline in 2021 meant that the previous form no longer captured all the data required for BFI designation. The new form was launched on July 1st, 2023 in all facilities. Notable changes include:

- Switch to gender inclusive language (i.e. 'person who gave birth' rather than 'mother')
- A new question to determine if the breastfed baby was offered the breast within one hour after birth
- The addition of a 'N/A' category for some questions, to ensure that those parents and babies who are not stable enough to have skin-to-skin contact or feed right away after birth are removed from the total numbers
- Clarification around criteria for medical supplementation of a breastfed baby with infant formula
- Clarification of terms to ensure staff are able to fill out the form without confusion (i.e. the term 'breastfeeding' is defined as 'direct breastfeeding at the breast, fed expressed breast milk from the parent, or fed donor human milk'.

To date, five virtual staff education session have been offered to help those on the front lines complete the form accurately. We expect data from the new questions in the new year.



A huge thank you goes out to Perinatal NB for their support in collecting this important data I want to hear from you!! Comments, questions, suggestions? Email: Christina.Gallant2@gnb.ca



Happy Holidays





