



**The Breastfeeding Committee for Canada**  
The National Authority for the WHO/UNICEF  
Baby-Friendly Hospital Initiative in Canada

## **Annual Report March 2008**

The year 2008 has been an engaging and productive time for the Breastfeeding Committee for Canada (BCC). Transformation has been an underlying theme at the Board and Committee level as we have engaged in consultation and discussion with voting members, stakeholders, founding and past executive members, provincial and territorial representatives and the Public Health Agency of Canada. The overall purpose of this dialogue was to increase the capacity and effectiveness of the BCC as the national authority for the Baby-Friendly Initiative (BFI), while simultaneously building capacity for BFI Implementation and Assessment at the Provincial and Territorial (P/T) level. The consensus was that the BCC will continue the national work of the Canadian BFI authority.

Thanks to the **Public Health Agency of Canada (PHAC)**, we have been able to communicate regularly and effectively by teleconference. Rosemary Sloan, PHAC representative on the BCC and longtime liaison and breastfeeding advocate, retired at the end of March 2008, handing over her portfolio to Jen Anderson. Jen has 15 years of combined experience with both Health Canada and PHAC. As a policy analyst, she has worked in many areas, primarily Maternal and Child Health, Early Childhood Development, Canada Perinatal Nutrition Program and First Nations and Inuit Health specific Issues. Jen is looking forward to working with the BCC.

In May 2007, the BCC Co-chairs were invited to meet with Dr. Sylvie Stachenko, Kelly Stone (Director) and Rosemary Sloan at PHAC in Ottawa. Breastfeeding has a role in both health promotion and chronic disease prevention, particularly diabetes and obesity. A national breastfeeding strategy was not being considered at that time, and there was no possibility of core funding from the federal government. Breastfeeding aligns with many other health strategies and we need to challenge ourselves to see how we can connect and use these opportunities. Consideration will be given to including more breastfeeding data in surveillance tools over time. The BCC's links, internationally to WHO/UNICEF, and nationally to the CPS Nutrition Committee and other expert groups, CPNP and the F/P/T Group on Nutrition as well as links to the provinces and territories is seen as positive. The BCC has dual roles in BFI standards/ designation and BFI implementation. The BCC appreciates the support and interest of PHAC, demonstrated by regular communication and liaison.

Some BCC highlights in 2008:

### **Baby-Friendly Implementation**

The BCC Provincial and Territorial Baby-Friendly Committee, co-chaired by Kathy Inkpen and Claudette Landry, has provided invaluable feedback, perspectives and insights into the

transformation discussions. With the goal of capacity building and education, a survey was done to determine the needs and interests of members, in order that the bimonthly meetings can be effectively utilized. Guest presenters have been invited to share their expertise. In addition, committee members share strategies and resources, ensuring peer support for Baby-Friendly Initiative implementation at the provincial and territorial level. Of particular note is the increasing number of provincial governments endorsing, supporting and funding the BFI as an evidence-based strategy to establish and sustain best practice provincially.

## **Baby-Friendly Designation and Monitoring**

The number of Baby-Friendly designated facilities has grown from eleven to eighteen since the 2007 Annual General Meeting. There are now 9 hospitals/ birthing centres and 9 community health services.

### **Hospitals and Birthing Centres**

- Centre de santé et de services sociaux Jardins-Roussillon Hôpital Anna-Laberge, Chateauguay, Québec, September, 2007
- Toronto East General Hospital, Toronto, Ontario, September, 2007
- Centre de santé et de service sociaux de Charlevoix Hôpital de La Malbaie, La Malbaie, Québec, October, 2007
- G.R. Baker Memorial Hospital, Quesnel, BC, November, 2007
- Centre de santé et de services sociaux de La Mitis Maison des naissances Colette-Julien, Mont-Joli, Québec, December, 2007

### **Community Facilities:**

- Centre de santé et de services sociaux Pierre-Boucher, Longueuil, Quebec, April, 2007
- Somerset West Community Health Centre, Ottawa, Ontario, June 2007

Pre-assessments are underway in Quebec, Ontario and British Columbia, and one hospital is preparing for reassessment. Sincere thanks to Marina Green and the BCC BFI Assessment Committee for the countless hours of volunteer work contributed reviewing documents, providing information and guidance and supporting facilities on their BFI journeys. This committee is currently revising the BCC Practice Outcomes Indicators, with the goals of streamlining and combining the hospital and community health services indicators into a more user-friendly format. In addition, a document outlining BCC & P/T Committee Assessment Strategy/Responsibilities is in draft form, soon to be posted on the website. Guidelines for data capture and reporting breastfeeding statistics are to be developed in consultation with an epidemiologist and front line staff. A strategy has been devised to enhance the skills and confidence of assessor candidates and to engage as many as possible in BFI assessment teams.

The **WHO/ UNICEF Meeting for BFHI Coordinators in Industrialized Countries** provides a forum for BFI updates from WHO & UNICEF, and for discussions on strengths, challenges and opportunities regarding the implementation and assessment of the BFI. The information and discussions will be invaluable as we revise the indicator document to ensure compliance with international standards. Marianne Brophy, Marina Green and Louise Dumas will attend this meeting in Geneva, June 2-5, 2008. They are currently seeking funding to cover costs. Canada has played a key role in the planning of this meeting.

## **Optimizing and supporting breastfeeding duration**

In support of Health Canada's goal of exclusive breastfeeding for the first six months, and extended nursing after the introduction of complementary foods, the Infant Nutrition Committee has worked enthusiastically and steadily on complementary feeding guidelines and clinical standards. Particular attention has been directed to the support for women to meet their breastfeeding goals. The draft of this document is scheduled to be ready for peer review by the end of May, or early June. There is considerable interest in this work from around the world, in the light of the WHO/UNICEF Global Strategy for Infant and Young Child Feeding. We would like to thank Chair Johanna Bergerman and her committee for their commitment, which has extended to arranging face-to-face meetings at their own expense.

## **Communication**

As we have not been able to meet face-to-face this year, other forms of communication are vital. Kathy Venter and the Communications Committee have produced three very popular issues of "*Breastfeeding Canada News*" this year. Thanks to PHAC, two newsletters have been translated into French. The BCC was contracted by PHAC to update two Health Canada resources important for communicating breastfeeding information to the public. Kathy spearheaded the revision of the *10 Valuable Tips for Successful Breastfeeding and the 10 Great Reasons to Breastfeed*. We would like to express our thanks to Kathy and the Communication Committee.

**The BCC website** is another important communication interface. This past year, the BCC website has had 265, 597 hits (approximately 22, 133 per month, or 734 per day, or 31 per hour). The **new BCC posters** are available for download from the website, or for loan from the BCC office. Thanks to Emmy Maten and Roberta Hewat for the creation of these posters. The **Annotated Bibliography** has been revised and is posted on the website. We are delighted that the authors, Perle Feldman and Francesca Frati have made this available to such a wide audience. The BCC would like to thank our webmaster, Jason DiMichele for extending our reach into cyberspace.

As the **BCC Coordinator**, Marilyn Sanders has done an excellent job of setting up teleconferences, producing detailed minutes, and serving as a conduit of information between various committees. Marilyn is an editor and proof reader with an eagle eye. Thank you Marilyn, for keeping internal communication clear and timely.

## **Collaboration**

The **CPS Nutrition Committee** is very supportive of breastfeeding and has several initiatives underway to communicate key messages to pediatricians across Canada. Thanks to Joanne Gilmore and Susan James for representing the BCC at these meetings.

The **World Alliance for Breastfeeding Action (WABA) 3rd International Global Forum** may be hosted by the Quebec Public Health Association in 2010. Emmy Maten attended a planning meeting, and Susan James and Marianne Brophy met with Susan Siew, WABA Co-director and others by teleconference. Louise Dumas attended planning meetings in her role

with the BFI in Quebec. WABA has also consulted with PHAC and key breastfeeding organizations.

The **BFI launch 10<sup>th</sup> Anniversary Best Practice Conference** will be held in Vancouver in February 2009. Barbara Selwood of the BC Perinatal Health Program (BCPHP) has convened a planning committee. BCPHP has invited the BCC, the BC Baby -Friendly Network and Quintessence Foundation to partner in planning this conference,

## **Financial matters**

From suggesting investment in a GIC to dealing with new tax regulations that require filing returns for the past six years, Emmy Maten has proven to be a Treasurer *Extraordinaire*. We would like to thank Emmy, and are most appreciative that she has agreed to another term as treasurer.

## **BCC Governance Transformation**

At the 2006 AGM, the BCC voting members tasked the BCC Board with the mandate to restructure the BCC to be more accountable to and inclusive of the provinces and territories by acknowledging the responsibility of the provinces and territories to implement the BFI, and thus to increase the BCC capacity and effectiveness.

**Process:** The BCC Transition Task Force (TTF) was struck with the objectives of identifying the strengths and concerns with the current structure of the BCC and to review alternate models. Consultations were conducted with multiple stakeholders. Findings and recommendations were presented to the BCC Board in September 2007, and discussed with the BCC P/T Committee in November 2007.

### **Key issues identified:**

**1.** The BCC, as National Authority on BFI, supports implementation at P/T level.

**2. Capacity and sustainability**

Voting members who are strategically placed to make policy decisions in provincial/ territorial governments/ committees/ hospital services are key. Each province needs to be represented in a way that is most beneficial to the province.

**3. National standards/ Assessment of the BFI**

Access to BFI experts for consultation and guidance is essential in adopting best practice. Capacity building at the P/T BFI Committee/ Coalition level will be addressed by providing resources, education and information regarding BFI standards/ best practice and BFI assessment tools.

**4. Professional Bodies/ Organizations**

The involvement of professional bodies from the days of the Health Canada Expert Working Group on Breastfeeding has raised the profile of breastfeeding and the BFI in Canada and within the member associations/organizations. As voting members of the BCC, professional representatives have been limited in their capacity to engage in day-to-day BCC work. When discussing the proposed model, these representatives indicated their willingness to liaise and consult with the BCC in the future. New stakeholders identified are keen to get involved. The BCC plans to develop sustained partnerships with national professional associations for key stakeholders, including visibility during their national conferences through displays and speakers.

5. **Communication** is vital. Teleconferencing and translation of the newsletters into French has been made possible through PHAC support. Stakeholders requested to be kept informed of the transformation progress.

**Recommendations:** The consensus was that the BCC will continue the national work of the Canadian BFI authority and build capacity at the P/T BFI Committee/ Coalition level, by providing education and information regarding BFI standards/ best practice and BFI assessment tools.

- **For leverage and legitimacy with policy and decision makers at the P/T level**, of particular value are:
  - the BCC link to WHO/ UNICEF and other BFI initiatives in industrialized countries
  - the BCC link to PHAC and the federal government
  - the BCC link to professional bodies and organizations that are able to influence best practice standards and policy
  - the national standards for assessment and designation of Baby-Friendly facilities
- **To facilitate the practical aspects of BFI implementation at the P/T level**, and to maintain a consistent national standard, of particular value are:
  - access to BFI experts
  - the opportunities to network and share achievements and strategies
  - the development of useful tools such as the breastfeeding definitions, to move their surveillance work forward.

**Models:** The model recommended enables us to move forward, addressing some of the capacity issues at the P/T level, and conserving our highly valued volunteers.

**By-laws:** The by-laws were revised to reflect the recommended changes to the BCC governance by the co-chairs, with the help of Kathy Inkpen, co-chair of the BCC P/T Subcommittee, , and circulated to the Board members. The revised by-laws will be submitted at the 2008 Annual general Meeting for approval.

**Appreciation:** The BCC would like to thank PHAC for the support we receive for regular teleconferencing calls, and for the face-to-face meetings in the past that have helped us to reach the point where most of the provinces and territories are actively engaged in implementing the BFI. We would like to thank the representatives of professional organizations for their support, diligent work, and for creating a platform for breastfeeding within their organizations. We look forward to consultation and collaboration in the future. There is increasing international research that endorses the BFI as an excellent continuous quality improvement approach to best practice that has significant impact on health outcomes for mothers and babies. Protecting, promoting and supporting breastfeeding is, indeed, a sound public health promotion and prevention strategy.

Respectfully submitted,

Marianne Brophy & Susan James, Co-Chairs

*The Breastfeeding Committee for Canada was established in 1991 as a Health Canada initiative, following the World Summit for Children. BCC has a broad membership, involving some 20 professional and consumer organizations. BCC has been active in promoting breastfeeding since its inception, and specifically identified Baby-Friendly<sup>TM</sup> Initiative as a priority in 1996.*

WEBSITE [www.breastfeedingcanada.ca](http://www.breastfeedingcanada.ca)

