

WEAVING A WEB OF WOMEN'S WISDOM

**A One-Day, Indigenous-Specific Breastfeeding
Workshop**

FACILITATOR'S GUIDE



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INTRODUCTION

This one-day workshop is for Indigenous women who want to breastfeed their newborn or older babies. The workshop will provide a safe and welcoming environment that increases each participant's awareness of the benefits of breastfeeding, and of various Indigenous cultural and traditional birth and breastfeeding practices.

The Wabano Centre for Aboriginal Health has developed the workshop with input from Elder Jan Kahehti:io Longboat, staff, and pilot workshop participants.

This Facilitator's Guide is intended for use by an Indigenous facilitator with some knowledge of breastfeeding. Any health worker will find all the information required to host and facilitate the workshop in this Guide.

OBJECTIVES

The workshop has the following objectives:

- To support and encourage bonding/attachment between mother and baby
- To encourage awareness of First Nations, Inuit and Métis cultural identity/pride in history and traditions surrounding breastfeeding
- To promote First Nations, Inuit and Métis historical Indigenous practices about breastfeeding and parenting
- To provide mothers and babies with a safe and welcoming environment for successful breastfeeding
- To emphasize the importance of a support network in any successful breastfeeding journey
- To identify and address individual needs and challenges mothers are experiencing in breastfeeding

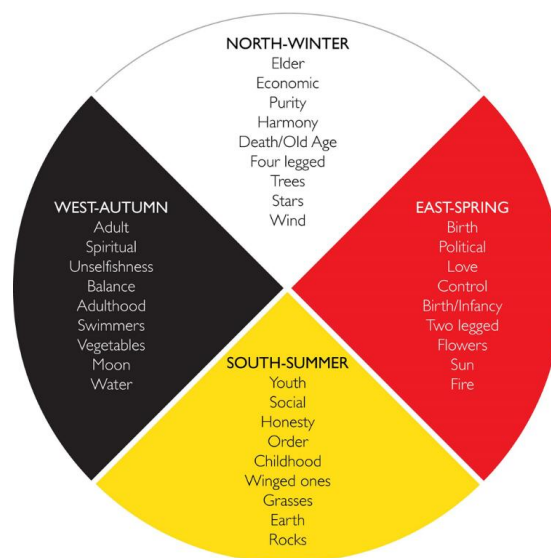
INDIGENOUS WORLDVIEW

This workshop provides a holistic, culturally-sensitive and culturally-appropriate opportunity for Indigenous pregnant women and mothers with breastfeeding babies to learn about Indigenous traditions and cultural practices surrounding birth, parenting, and particularly breast feeding.

There are many traditions and stories from across Turtle Island related to breastfeeding. Participants may identify as belonging to a particular First Nation (Cree, Haudenosaunee, Anishnaabe, etc.), Métis, or Inuit. Participants may also be attending this workshop with

little or no knowledge of their Indigenous affiliation. This workshop will allow all participants to gain awareness and some knowledge of various cultures and historical practices, though this may not correspond with individual participant traditions. Please see Handout B for some Metis-specific, Inuit-specific and First Nations-specific quotes.

A circle is a powerful image used by many Indigenous peoples. It represents a holistic approach that incorporates the circle of life. This workshop is based on this Indigenous framework, which is called the Medicine Wheel or Four Directions teachings in some nations. These teachings form the basis of an Indigenous understanding of the world, as indicated in this image (provided as Handout D):



These teachings are an integral part of this workshop. The workshop also incorporates the wellness model of health, and supports a holistic view of self that addresses the physical, mental, spiritual and emotional elements.

There are a number of activities throughout this workshop. One of its key aims is to allow women to listen to each other, learn from each other, and share their experiences and wisdom. It is important to allow time for this kind of unstructured learning. This Facilitator's Guide provides a starting point. As a facilitator, you may have other ideas for activities or discussions; or you may invite others to the workshop (an Indigenous doula, Indigenous midwife, or Indigenous lactation specialist, for example); please feel free to alter or adapt this guide as required.

TARGET GROUP

This workshop is designed for self-identified Indigenous (First Nations, Inuit, Métis) pregnant women who wish to breastfeed when their child is born, and for mothers with babies who wish to start or continue breastfeeding.

WORKSHOP VENUE

This workshop can be held in any location, including a hospital, community centre, health centre, Indigenous centre or any other location deemed appropriate by the facilitator. There must be room for all the mothers to sit comfortably in chairs, in a circle. The space must be private, with good lighting. Try to use space with as few accessibility barriers as possible. If you intend to hold small group discussions, the room should be big enough for small groups to gather comfortably.

WORKSHOP MATERIALS

This Facilitator's Guide is the key document for the workshop. There are a number of handouts at the end. Facilitators will need to ensure that the following items are available at the workshop:

- Wabano Parenting Bundle documents
- Copies of the Handouts, as outlined in this Guide
- One marble or one cherry
- One ping pong ball, apricot or golf ball
- One extra large egg
- One full colour breastfeeding poster, to be posted on a wall in the workshop space
- One flipchart on a flipchart stand (if possible, two additional flipchart stands and paper)
- Markers for flipchart
- Enough pens/pencils for all participants
- Masking tape for posting flipchart sheets
- One index card for each participant
- One Breastfeeding Resource Kit for every participant (available through Wabano)
- A laptop and projector or large TV monitor, with required connection cables
- Speakers for laptop
- Pillows (nursing or other pillows) for breastfeeding moms who may require them
- Indigenous food or snack (bannock or other)
- One package of packaged cookies or other pre-packaged bakery item
- Power cord with multiple outlets
- Breast pump and bottle



PREPARATIONS

There are several things that you, as a Facilitator, will need to prepare before this workshop.

Identify and invite a breastfeeding mentor to the workshop. This individual will be an Indigenous mother who is successfully breastfeeding, and is willing to come to the workshop with her breastfeeding baby. She will participate in the afternoon session of the workshop, and provide practical advice to the other mothers and pregnant women attending. Coordinate any reimbursement or honorarium to be provided to the mentor. The mentor may be invited to stay for the entire day, but this is not mandatory.

Identify and invite a female Elder to the workshop. The Elder will be invited to give an opening and closing prayer. The Elder will also provide wisdom and encouragement regarding breastfeeding. She may share some creation stories, and/or traditional stories of birthing and parenting. Coordinate any reimbursement or honorarium to be provided to the mentor, or any cultural protocols required by the Elder. If the Elder plans to do a smudge or other ceremony that will create smoke, ensure that this will be permissible in the meeting room.

Prepare one traditional Indigenous snack (bannock, for example) and purchase store-bought cookies (related to an activity). Here is a link to a suggested recipe for blueberry bannock which is an acceptable snack for those mothers who may have diabetes.

<http://www.diabetes.ca/diabetes-and-you/recipes/blueberry-bannock>

Purchase, borrow or find the marble/cherry, ping pong/golf ball/apricot and extra-large egg.

Ensure there is at least one flipchart with markers available in the meeting room (ideally two or three).

Ensure you have enough resource kits for each participant.

It is highly recommended that you arrange for lunch to be provided to participants, as well as a morning snack and an afternoon snack. If possible, use Indigenous caterers and provide some traditional Indigenous foods. There may be low-income participants who will not be able to purchase food throughout the day, and breastfeeding moms are usually hungry moms! Water and tea should be available throughout the day.

It is recommended that you offer a giveaway gift for the participants. This could be a 'mom basket' containing some items that new mothers would appreciate, such as a nursing pillow, baby outfit, receiving blanket, etc.

It is highly recommended that you arrange for on-site child care for older siblings, so the breastfeeding mom can bring their other children and focus on the workshop.

There may be participants who attend the workshop who require additional follow up or support. Review and be familiar with the various health care providers and organizations who might be able to provide this additional support.

Purchase the Parenting Bundle from Wabano. Visit www.wabano.ca for more information.

CHECKLIST

One month before the workshop

- Choose date, location and facilitator.
- Identify potential participants (pregnant women and new mothers) to attend the workshop.
- Issue invitation. Consider asking potential participants to think about their own birth story and come prepared to share.
- Arrange for an Elder
- Arrange for mom mentor.
- Arrange for on-site child care (if offering).

Two weeks before the workshop

- Create simple poster with workshop information and send to various locations to invite Indigenous mothers to the workshop.
- Make arrangements for snacks and lunch in the workshop room.
- Ensure flipchart will be available in the room.

One week before the workshop

- Get Breastfeeding Resource Kits and Parenting Bundle from Wabano
- Purchase or obtain all elements required for the workshop: cherry (or marble); ping pong ball (or apricot or golf ball); extra-large egg; flipchart markers; pens/pencils; index cards.
- Send out reminder to confirmed workshop participants.
- Purchase door prize (if offering).
- Revise the workshop outline, based on the provided template, to reflect the composition and interests of the registered participants.

One day before the workshop

- Photocopy all handouts.
- Make and purchase cookies/bakery items/bannock, with coffee/tea/juice/water as required.
- Find and save the breastfeeding video on the laptop.

One hour before the workshop

- Put chairs in a circle.
- Put up breastfeeding poster.
- Put out breastfeeding resource kits, either on chairs or on a table near the door.
- Have workshop outlines on each chair.
- Set up the laptop and projector and cue the video (“Our Tradition, My Choice: One expectant mother’s journey about breastfeeding.”
<http://www.isuma.tv/collective9/our-tradition-my-choice-one-expectant-mothers-journey-about-breastfeeding>)
- Have handouts and sign in sheet ready on a table

FACILITATOR NOTES

An outline/agenda template is provided as Handout A. It should be modified and edited by the Facilitator to include names and specific tasks, and a final outline should be printed and provided to all workshop participants.

The following facilitator notes correspond to each activity in the workshop, presented chronologically.

9 am Opening ceremony/Prayer

As participants arrive, give them the Breastfeeding resource kit and ask them to sign in (ensure the sign in sheet has a column for their name, email address and Indigenous affiliation.) Invite everyone to sit around the circle. Welcome participants, introduce Elder. Elder to open the workshop with an appropriate activity; that could include a ceremony such as a smudge, a song and/or a prayer. Please note, if the Elder wants to do a smudge, inform participants in advance. Some new mothers, asthmatics and others may be sensitive to the smell and will be unable to participate.

9:15 am Welcome and Introductions

Introduce yourself. Provide administration/logistics for the day (washrooms, snacks and lunch to be provided, etc.) Remind the mothers that they are free to stand, change their babies, walk around, and get drinks and snacks, etc., at any time throughout the day, not just during designated breaks.

Remind participants that the workshop is a safe and inclusive environment; what they share is confidential. Each person's opinion is valued. We take turns speaking and respect each other.

Go around the circle, asking each person to introduce themselves and tell a story. Ask participants to tell a story about their name. Why did your parents give you that name? Does it have any cultural or family significance? And what's the name of your baby? Is there any significance to your baby's name?

Review Indigenous affiliation from sign in sheet. Hand out the information sheet, with some FN, Inuit and Métis quotes in Handout B. Point out that some of the stories and examples raised during the workshop may not have originated from an individual's particular nation, but still reflect an Indigenous worldview.

9:30 am Review outline and flow of day

Hand out the Workshop Outline (based on the template in Handout A) to all participants and review. Review and discuss objectives:

- To support and encourage bonding/attachment between mother and baby
- To encourage awareness of First Nations, Inuit and Métis cultural identity/pride in history and traditions surrounding breastfeeding
- To restore historical Indigenous practices about breastfeeding and parenting
- To provide mothers and babies with a safe and welcoming environment for successful breastfeeding
- To emphasize the importance of a support network in any successful breastfeeding journey
- To identify and address individual needs and challenges mothers are experiencing in breastfeeding

Hand all participants an index card and a pencil/pen. Ask them to write down two questions they hope to have answered by the end of the workshop. One question can be open, about anything they want to know; the other question should relate to a breastfeeding challenge they are experiencing. They can just keep the index cards, or the facilitator can collect them (no names required).

9:45 am Breastfeeding Quiz

Hand out pencils/pens and quiz from Handout C. Tell participants that, by the end of the afternoon, they will be able to answer all of these questions. They should not worry if they don't know all the answers now. Only they will see their own answers. You will provide them with an answer key at the end of the day.

10 am Traditional/historical stories of Indigenous parenting, childbirth and creation

Either the Facilitator or the Elder can briefly discuss the importance of historical Indigenous practices. The Wabano Parenting Bundle has a number of different traditions that can be mentioned. Hand out the Medicine Wheel/Four Directions teaching sheet, from Handout D. The Elder can incorporate her teachings and share her own cultural practices around birth, breastfeeding, traditional roles of men and women, importance of language and parenting, and creation stories. Allow time for questions.

10:30 am BREAK

Optionally, consider having snacks available, but not having an official “break”. If the Elder is telling stories or participants are asking questions, just briefly announce that snacks are available, but do not call an official break time. During the break, copy each participant’s name from the sign in sheet onto separate sheets of paper; put into a bag, box or hat for the door prize at the end of the day.

10:45 am Telling our own stories

The Elder can continue telling stories, or the facilitator can lead a circle discussion on other Indigenous traditions around birthing and parenting. Did any of the moms around the circle learn from their grandmothers or aunts or mothers? Do they have any wisdom and stories to share with the group? If the participants are willing, ask the moms to tell their own birth stories.

11:15 am Benefits of Breastfeeding

Option 1: If there are 6 or more participants, do this as a small group of activity. Divide the moms into three groups. Within each group, have the members select a “scribe”. Then ask them to them discuss and list the benefits of breastfeeding. What are the benefits to mom? Benefits to baby? Benefits to the community? Have paper and pen for one person to write; or, if a flipchart is available, use the flipchart. Ask the moms, “Why are you breastfeeding, or why do you want to start breastfeeding?”

Have the full group reconvene after 10 minutes and report back. Facilitator will write all benefits on the flipchart. Hand out the Benefits of Breastfeeding sheet to add to their resource kit, found in Handout E.¹

¹ As a facilitator, there are a number of things you should be aware of. These may require a referral or follow up and should be flagged. You can speak individually to the moms and provide them with information on a lactation consultant, nurse, doctor, traditional healer or other health care provider. **Red Flags Requiring Referral or Follow Up:**

- There are signs of a poor latch.
- Baby is feeding less than eight times in 24 hours during the first 2-3 weeks.
- Baby is difficult to wake up, sleepy during feeds, and appears jaundiced (yellow tinge to the skin).
- Baby is having fewer than expected number of wet and/or soiled diapers for age, and not gaining weight.
- Baby is not content, and mother feels she does not have enough milk.
- Mother is experiencing nipple pain (i.e. cracked, bleeding, blistered nipples) or breast discomfort [hard and full (engorgement) and may have red, sore areas (plugged ducts)] and/or experiencing fever and flu-like symptoms (mastitis).
- Mother is using a breastfeeding device such as a nipple shield.
- Mother is demonstrating signs or symptoms of Postpartum Depression (sadness, despair or suicidal thoughts).
- Peer Mentor has concerns about the wellbeing of the baby or other children, or about Moms drug or alcohol use. (taken from Wabano’s *Moms Mentoring Moms Trainer Resource Manual*, 2014)

Option 2: Another option for this segment of the morning is to use the Medicine Wheel to talk about the benefits of breastfeeding.

Ask participants to review their Medicine Wheel or Four Directions teaching sheet. Looking at the list of benefits, think about which ones fit within the four directions. Generally, the teachings include four elements of self: east-red-physical, south-yellow-spiritual, west-black-emotional, north-white-mental/intellectual. There are other variations; but if, as a facilitator, you are comfortable leading a discussion using the Medicine Wheel, you can ask questions such as: how would breastfeeding benefit us spiritually? Mentally? Emotionally? Physically? Break them into four small groups and discuss each of the four directions, then come back to the larger group and share.

11:45 am Video

Watch “Our Tradition, My Choice: One expectant mother’s journey about breastfeeding.” Play the video from 00:00 to 13:17 <http://www.isuma.tv/collective9/our-tradition-my-choice-one-expectant-mothers-journey-about-breastfeeding>

Stop video at 13:17. (The remainder of the video is about nutrition, and will be covered later in the workshop).

Noon Questions and Discussion

Facilitator can ask a few direct questions: Can you relate to the pregnant woman in this video? Did you have a chance to ask for information when you were pregnant? What was the best piece of advice or wisdom you got about being a mom while you were pregnant?

12:15 pm LUNCH

If the mom mentor is joining the group for lunch, introduce her and explain that she will participate for the afternoon. If there are any traditional Indigenous foods for the meal, explain how food is sacred in Indigenous cultures, and describe the meal and the significance of the foods (if known).

1 pm Introductions, Q and A with mom mentor

Introduce the mom mentor. Go around the circle and ask if anyone has questions. Invite participants to review the index cards they filled out at the beginning of the workshop. If the facilitator collected the index cards, and/or if the participants are not comfortable asking very many questions, refer to the questions on the index cards. (If questions are related to nutrition, how much milk the baby needs, or proper latch and positions, tell the participants these subjects will also be covered this afternoon.)

If the mom mentor is comfortable, she can help the other moms with getting a good latch (see information sheet in the Breastfeeding Resource Kit), hand expressing milk (make cups available), trying different positions, or any other topic participants are interested in and the mentor mom is comfortable discussing.

1:30 pm Proper latch and positioning

Ask participants to take out the sheet on four breastfeeding positions in the Breastfeeding Resource kit.

Ask participants to remember what they saw in the video before lunch. Invite them to try a different position and see if they can get a good latch. See if they are more comfortable with one position or another. If the mom mentor is comfortable, she can also assist and/or demonstrate.

1:45 pm Baby bellies activity

How big is a baby's stomach? Pass around the marble/cherry. Remind the participants that this is the size of a newborn baby's stomach after 2 days. Pass around the apricot/golf ball/ping pong ball. This is the size of a baby's stomach after 5 days. Pass around the extra large egg. This is the size of a baby's stomach after 7 to 10 days.

Ask the following questions:

- How much milk do you think your baby needs in the first few days/week/month? (1 to 1.4 teaspoons, ¼ of a cup, ½ to 2/3 of a cup)
- How quickly do you think the milk will move through the baby's stomach?
- How often do you think you need to feed your baby? (on demand)

Refer to the Breastfeeding Chart in the Resource Kit provided to all participants.

2:15 pm Eating Patterns game

Hand out the Eating Patterns Game worksheets (Handout F), pens or pencils. This activity will reinforce the previous activity about the size of the baby's stomach. The exercise and discussion will link and contrast adult eating patterns and a baby's eating patterns, emphasizing the need for smaller, more frequent feedings, and reminding participants that the time between feedings will increase as the baby grows.

Ask participants, "Think about what you ate and drank yesterday, starting from the moment you woke up to the moment you went to bed at night. What did you eat and drink? Make sure you list everything. Maybe it was just water from a water fountain; maybe, if you have older children, you just finished some of the snack they didn't eat; maybe you sampled

some food while cooking. List everything; and think about how long you spent eating and drinking throughout the day.”

Give participants ten minutes to fill out the table. Discussion (write on flipchart):

What was the average time between eating or drinking? Eating every one to three hours—emphasize frequent feedings for newborns. Remind participants of the previous activity and the size of the baby’s stomach.

What kind of utensils did you use? –emphasize that using anything other than the breast (soothers, bottle nipples) could lead to frustration and confusion (like adults trying to eat with chopsticks or your non-dominant hand).

How long was your average meal? Generally between 20 and 30 minutes. Emphasize that breastfeeding sessions often take at least 20 to 30 minutes too.

What if your meal takes longer than 30 minutes? When does this happen? Maybe you were eating out, or at a friend’s or having people over. You take time to socialize, relax, and talk. Emphasize that it’s the same with your baby. They enjoy being close to you, they feel comforted and relaxed in your arms, and they love the sound of your voice. Don’t rush breastfeeding; enjoy it.

How do you feel if you are really hungry or thirsty and can’t get any food or water? Tired, grumpy, irritable, weak. Emphasize this is exactly how babies feel, too; but they have only one way to tell you they’re hungry or thirsty, and they can’t get food and drink on their own.

Babies double their weight in the first five or six months. Think about how much you weigh. Now double it. **What would you have to do to get to that weight?** Eat more often, eat more calorie-rich food, eat at night, etc. Emphasize that this is what babies do. When babies go through natural growth spurts (often at 2-3 weeks, 6 weeks, 3 months and 6 months), they will likely want to breastfeed even more than usual. This is typical, and healthy.

2:45 pm BREAK

Ensure both homemade bannock and store-bought baked goods are on a table for a snack.

3 pm Cookie analogy

Ask participants whether they wanted to choose the homemade bannock or the store-bought baked goods. For those who chose the homemade bannock, ask why? Was it because:

- Knew that it has good ingredients in it
- Being diabetic, knew it could be eaten
- Tastes better
- Looks better
- Know who made it
- Other reasons?

Then point out that the same reasons can make breast milk a healthier choice than formula.

3:05 pm Healthy Eating

Ask participants to take out the FN/I/M Food Guide booklet in the Breastfeeding resource kit. (Tell them that this is available in Inuktitut, Ojibway and Cree if they want to search online for copies in those languages.)

Have a circle discussion about how to incorporate healthy eating into their daily routine, as breastfeeding moms.

Some questions to ask or consider:

- How do you ensure you are getting enough fruit and vegetables in your diet?
- Do you have any recipes or suggestions for maintaining a healthy diet? What works for you?
- How can we avoid pop but still get the high intake of water that is needed?
- Do you eat any traditional foods? (Wild meat, berries, fish, etc.) Is this important for your diet?
- Is there something you'd like to cut out of your diet to help you eat healthier, like pop, chips, or fast food? Has anyone else been able to cut out or cut down on these unhealthy foods? What works for you?
- Do you find that you eat more now that you're breastfeeding? That you're hungrier more often? What are some good snacks that you like to eat?

Use the food guide or other nutrition guidelines to help provide some suggestions and ideas for healthy eating.

3:45 pm Getting Support

Have a circle discussion about who can help the moms and support them in breastfeeding. Ideas may include moms, aunts, grandmothers, partners, friends, other community members through Wabano, Friendship Centre, and others. Using the flipchart, write down some ways that these individuals can support the moms. What kinds of help would be useful? For example:

- Make and bring over a meal
- Buy and bring over groceries
- Babysit older children
- Give the mom a ride to a playgroup or community centre
- Give a pedicure
- Watch the baby so mom can go out for a few hours
- Do the dishes
- Do the laundry
- Other ideas?

Ask the group if they would like to share each other's email addresses, as they could also continue to support each other.

4 pm Responses to Breastfeeding Quiz

Ask participants to take out the Breastfeeding Quiz they completed at the beginning of the day. Hold a roundtable on responses and discussions about the responses to the quiz. Refer to the Quiz Answer Sheet, Handout C. At the end of the discussion, give everyone a copy of the Quiz Answer Sheet.

4:30 pm **Questions and closing comments**

Ask participants to review the index cards they filled out at the beginning of the session. If you took them, hand one back to each participant (they do not need to have their own card). Are there any questions that haven't been answered yet? Invite the group to discuss and answer them.

Review the contents of the Wabano breastfeeding resource kit once more.

Ask everyone to fill out an evaluation form (see Handout G) and hand them in to you. Ask the mom mentor to choose a name to determine who wins the door prize.

Thank everyone for participating.

5 pm Closing prayer

Closing prayer with Elder.

HANDOUTS

HANDOUT A

Workshop Outline

Workshop Objectives:

- To support and encourage bonding/attachment between mother and baby
- To encourage awareness of First Nations, Inuit and Métis cultural identity/pride in history and traditions surrounding breastfeeding
- To restore historical Indigenous practices about breastfeeding and parenting
- To provide mothers and babies with a safe and welcoming environment for successful breastfeeding
- To emphasize the importance of a support network in any successful breastfeeding journey
- To identify and address individual needs and challenges mothers are experiencing in breastfeeding

Time	Agenda Item	Led by
9 am	Opening ceremony/prayer	Elder
9:15	Welcome and Introductions	Facilitator
9:30	Review outline and flow of day	Facilitator
9:45	Breastfeeding Quiz and written questions	Facilitator
10:00	Traditional stories of parenting, childbirth and creation	Elder
	BREAK	
10:45	Telling our own stories	Elder and Workshop participants
11:15	Benefits of Breastfeeding	Workshop participants
11:45	Video	
Noon	Questions and Discussion	Workshop participants
12:15	LUNCH	
1 pm	Introductions, Q and A with mom mentor	Mom mentor
1:30	Proper Latch	Facilitator and Mom mentor
1:45	Baby bellies	Facilitator
2:15	Eating patterns game	Facilitator
2:45	BREAK	
3 pm	Cookie analogy	Facilitator
3:05	Healthy eating activity	Workshop participants
3:45	Getting support	Workshop participants
4 pm	Responses to Breastfeeding Quiz	Facilitator
4:30	Closing comments, evaluation, door prize	Facilitator
5	Closing prayer	

HANDOUT B

Some Quotes About Breastfeeding

MÉTIS

“You’re not alone, if you’re feeling like you’re really struggling, remember our Elders, our grandmothers, fathers, grandfathers, great grandparents, they really struggled too. And so we’re still here and we’re still Métis.” *Dr. Janet Smylie, Family Physician.* (From video “She Had a Baby.” https://www.youtube.com/watch?feature=player_embedded&v=_ZBMD1tDbug)

INUIT

“Our Elders talk about how to breastfeed a baby and how much safer it is for the baby. We tell them when they first start breastfeeding that the milk isn’t white and that it is good for the baby’s food. It’s like medicine.” *Raigili Amaaq, CPNP Coordinator in Igloodik, Nunavut* (From CPNP brochure, 2012)

“You have to [use a] holistic approach. As females we have to [understand that we have breasts for a purpose which is] to breastfeed the child, and it seems like a lot of young mothers don’t want to breastfeed their children, and to us that is very important, because we tend to find that the children that are breastfed are a lot healthier, and so I encourage the use of breastfeeding, and it really helps your bodily functions. So it’s healthy for the mother and the child.” *Martha Greig, former president of Pauktuutit Inuit Women’s Association* (from Maternity Care Chapter 1 television show http://69.27.97.110/wellnessTV/documents/2010-10-26_MaternityTVShowDVDTranscript_Final.pdf)

FIRST NATIONS

“Milk is the first immunization. We put breast milk in the baby’s eyes when they are born. We also have a prophecy that children will become stubborn in the future if they are given cow’s milk because they will carry the spirit of the cow instead of the spirit of the human.” *Janet Fox, Onion Lake First Nation*

“The waters of the earth and the waters of our bodies are one. Breast-milk is formed from the blood of the woman. Our milk, our blood and the waters of the earth are one water, all flowing in rhythm to the moon.” *Katsi Cook, Mohawk Nation of Akwesasne* (<http://www.indiantime.net/story/2012/01/27/cultural-corner/grand-mother-moon/012620121205446605853.html>)

HANDOUT C

Breastfeeding Quiz

1. Modern infant formula is as healthy as breast milk.	T	F
2. Babies that breastfeed get sick less often than babies that are formula feed.	T	F
3. Most people think that breastfeeding in public is unacceptable.	T	F
4. Breastfeeding for a year or more makes your baby too dependent.	T	F
5. Mothers who breastfeed must eat special foods.	T	F
6. If you breastfeed, you are not able to go out and have fun with friends.	T	F
7. If a mother needs to take medicine, she can still breastfeed.	T	F
8. If a mother needs to go back to work after 6 weeks, it's not worth it to breastfeed.	T	F
9. Mothers who have their nipples pierced can still breastfeed.	T	F
10. A mother can't breastfeed if she doesn't drink enough milk.	T	F
11. A mother can't breastfeed anymore once she is pregnant.	T	F
12. If a mother's breasts are too small, they don't have enough milk.	T	F
13. If a mother's breasts get infected (mastitis) or the baby has an infection in her/his mouth (thrush), they have to stop breastfeeding.	T	F
14. If a mother smokes/drinks alcohol/eats junk food, this gets into the breast milk so breastfeeding is not possible.	T	F
15. Babies need a lot of fluid so he/she should be given extra water or juice.	T	F

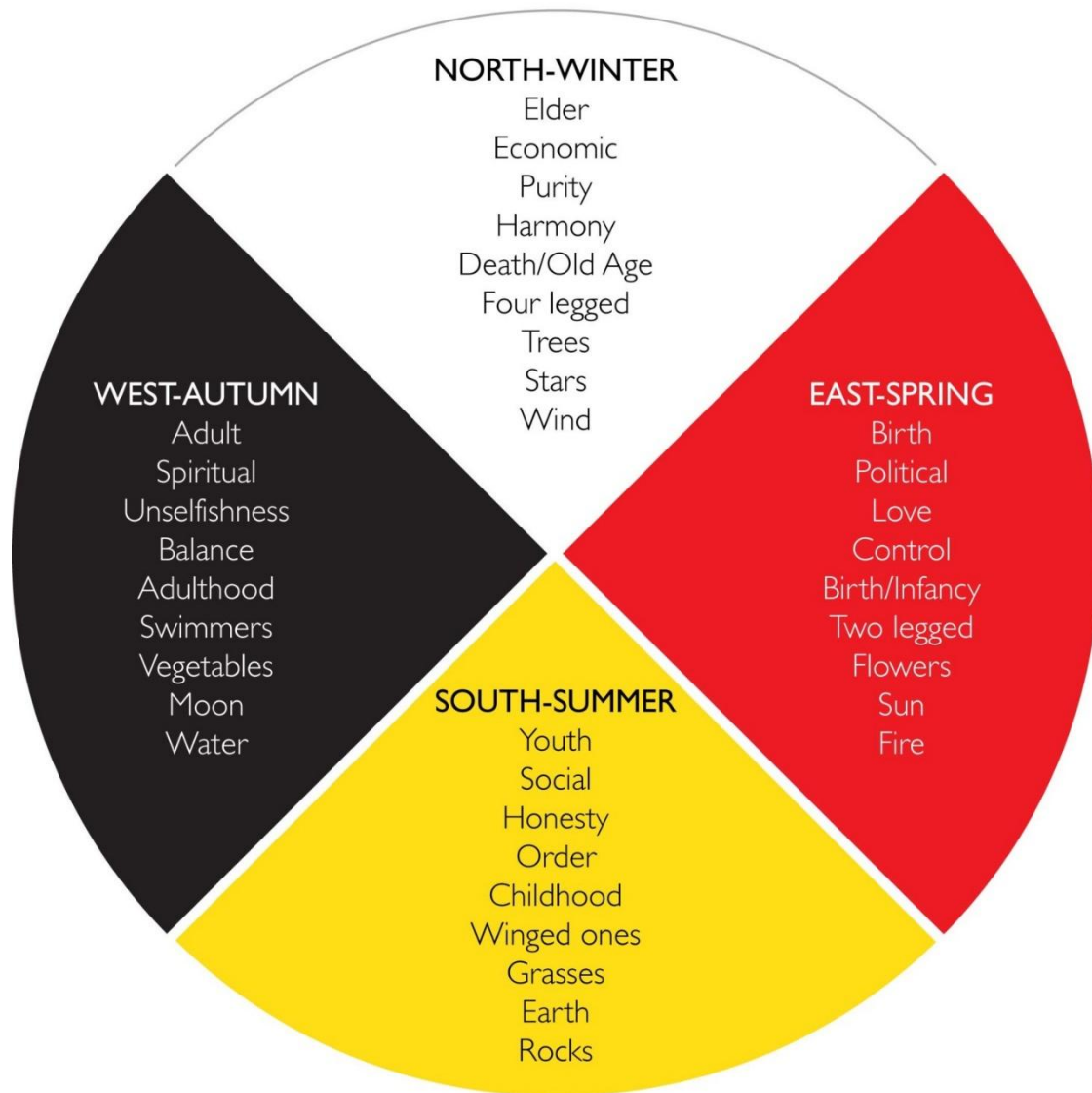
Breastfeeding Quiz Responses

<p>1. Modern infant formula is as healthy as breast milk. False: Infant formula does not contain the antibodies, living cells, enzymes or hormones present in breast milk. Breast milk is designed for each individual baby and changes over time. Infant formula is made from cow's milk or soy bean and is the same feed to feed.</p>		F
<p>2. Babies that breastfeed get sick less often than babies that are formula feed. True: Studies show that infants who are formula fed have higher rates of many illnesses such as gastrointestinal diseases, respiratory diseases, and middle ear infections.</p>	T	
<p>3. Most people think that breastfeeding in public is unacceptable. False: Most people think it is fine for mothers to breastfeed their babies discreetly in public/in front of others. The Ontario Human Rights Code states that you have the right to breastfeed your child in public areas such as restaurants, stores, and parks.</p>		F
<p>4. Breastfeeding for a year or more makes your baby too dependent. False: Studies show that babies who have their needs met readily feel secure and loved and become more independent as adults.</p>		F
<p>5. Mothers who breastfeed must eat special foods. False: Mothers who breastfeed do not have to eat special foods. Eating according to Canada's Food Guide will meet the nutritional requirements to keep the mother healthy and strong.</p>		F
<p>6. If you breastfeed, you are not able to go out and have fun with friends. False: Mothers who breastfeed can take their baby with them and breastfeed in public places if they wish. They can also leave the baby with a caregiver who can feed a bottle if the baby becomes hungry.</p>		F
<p>7. If a mother needs to take medicine, she can still breastfeed. True: Most medications are compatible with breastfeeding. If the mother needs to take a medication that is not safe to take while breastfeeding she may decide to pump and discard the milk until she is finished the medication. She should always check with her health care provider before taking any medication.</p>	T	
<p>8. If a mother needs to go back to work after 6 weeks, it's not worth it to breastfeed. False: Even if the mother breastfeeds for only a day her baby will receive the best nutrition possible and important antibodies. Many mothers return to the workforce and continue to breastfeed.</p>		F
<p>9. Mothers who have their nipples pierced can still breastfeed. True: Many women who have had their nipples pierced have successfully breastfed. Nipple rings should be removed.</p>	T	
<p>10. A mother can't breastfeed if she doesn't drink enough milk. False: Breast milk quality and supply does not depend on the amount of milk that a mother drinks. As long as she is getting enough fluids and a balanced diet, breast milk is produced.</p>		F
<p>11. A mother can still breastfeed if she is pregnant. True: A nursing mother will continue to make milk while she is pregnant. It is perfectly safe and has no negative impact on the fetus.</p>	T	

<p>12. If a mother's breasts are too small, they don't have enough milk. False: Bigger breasts only contain more fat. The part of the breast that makes the milk is the same in all breasts.</p>		F
<p>13. If a mother's breasts get infected (mastitis) or the baby has an infection in her/his mouth (thrush), she can still breastfeed. True: The breast is likely to heal faster if the mother continues breastfeeding while her breast (s) is infected. If the mother takes antibiotics for mastitis, she can still breastfeed. The amount of the drug that will enter the breast milk is very small and breast milk is still more beneficial than formula. If you and/or the baby have thrush (a yeast infection), it is still safe, though possibly more painful, to breastfeed. It is important to take the remedies or medication prescribed by your health care professional to get rid of the thrush.</p>	T	
<p>14. If a mother smokes/drinks alcohol/eats junk food, this gets into the breast milk so formula is better. False: Breast milk is still better than formula. Smoking: it is important to limit or quit smoking while breastfeeding but if a mother smokes, it is still better to breastfeed than to provide formula. If a mother smokes, do not smoke immediately before or during breastfeeding and do not smoke near the baby. Mothers who smoke have lower milk production, lower levels of important milk hormones and iodine. Babies tend to wean earlier from mothers who smoke. Drinking alcohol: it is important to limit alcohol intake while breastfeeding. If a mother has an occasional drink (no more than one per day), wait at least two hours after finishing a drink before nursing the baby. Or consider pumping or storing breast milk before having an occasional drink. It should be noted, however, that studies have shown that babies drink less breast milk if it contains traces of alcohol. Junk food: A breastfeeding mother's body is designed to provide for and protect her baby and produce the best milk to meet the baby's needs, despite the mother's diet. It is important to try to limit fast food and junk food because studies have shown that too much fat in a mother's diet can influence the amount of fat in a baby. A nursing mother's body needs a lot of energy to make breast milk. That energy comes from the calories in the food a mother eats. Calories from healthy foods are better than empty calories from junk food or fast food.</p>		F
<p>15. Babies need a lot of fluid so he/she should be given extra water or juice. False: Breast milk is more than 80% water so babies under 6 months old do not need additional fluids. Introducing cow's milk or juice can lead to allergies or stomach issues. For older babies and toddlers, a few sips of water from a cup can be given, while still extensively breastfeeding.²</p>		F

² Some questions and answers to this breastfeeding quiz were adapted from A Breastfeeding Information and Activity Kit for Secondary School Teachers, Ontario Public Health Association, 2009 (p. 30-32).
http://www.opha.on.ca/getmedia/5725dc8f-bc93-47da-8d61-6c23561e4e41/BF_Info-ActivityKit-May2009.aspx

Medicine Wheel or Four Directions Teachings³



³ Integrated from the Four Directions Teachings in Wabano's Parenting Bundle.

Handout E

Breastfeeding Benefits⁴

Breastfeeding is the optimal food for baby	
Breast milk is made especially for human babies.	
Breast milk contains all the essential nutrients in the correct proportions for the infant and growing child.	
Breastfeeding encourages a special closeness between mother and baby.	
Breast milk contains a substance that protects baby from disease, infection and allergy; it's like their first immunization.	
Breast milk contains special growth factors that enhance the baby's growth and development, especially of the immune system and the brain.	
Breast milk is easy to digest and babies usually have fewer problems with stomach upsets, such as gas, constipation, and colic.	
Breast milk provides significant protection against diarrhea and gastroenteritis, Celiac and Crohn's disease.	
Breastfeeding is comforting to a baby; it satisfies sucking needs and fulfills the need for closeness and security.	
Breastfeeding allows baby to control how much he/she drinks.	
Breast milk is always the perfect temperature for your baby's needs.	
Breastfed babies have fewer hospitalizations, less respiratory and ear infections.	
Breastfeeding promotes good jaw, teeth, and speech development.	
Breast milk provides long-term health benefits to the child, such as lower risk of childhood diabetes and cancer.	
Breastfed babies have a lower incidence of Sudden Infant Death Syndrome (SIDS) or crib death.	
Breast milk helps protect pre-term and low birth weight babies against infection.	
Breastfeeding is great for mothers	Breastfeeding is great for family and community
Breastfeeding releases oxytocin, a hormone that causes the uterus (womb) to contract, decreasing the risk of bleeding.	Breastfeeding is completely free (formula costs at least \$130/month).
Breastfeeding makes the nighttime feedings and travel much easier for the mother and family.	Breastfeeding is convenient and safe.
Breastfeeding may help the mother lose weight naturally.	Breastfeeding is less cost for our health care system.
Breastfeeding is relaxing for a mother; the hormones of breastfeeding help the mother to feel more relaxed and peaceful.	Reduces time lost from work and doctor visits due to sick baby.
Breastfeeding provides close mother and infant contact with encourages early mother-infant attachment.	Reduces the consumption of resources such as energy, paper, tin, glass and water.
Frequent and exclusive breastfeeding delays the return of the menstrual cycle and may help to protect against another pregnancy.	Reduces the need for dairy cattle and the associated environmental costs.
Breastfeeding enhances the mother's perception of her baby's needs.	Reduces garbage/recycling from formula containers and feeding supplies.
Breastfeeding women have a lower risk of breast and ovarian cancer.	Breastfeeding requires no water and not depleting our water resource

⁴ Some of the benefits listed above were taken from: *Yarmouth Friendly Feeding Line-Volunteer Reference Handbook* by Shelley Wilson, South West Baby Friendly Initiative Committee, 2002, revised 2007 (p. 20)

Eating Patterns Game Worksheet⁵

TIME (for example, 6 am)	FOOD or DRINK (for example toast, cookie, water from fountain, sandwich, potatoes, etc.)	How long it took to eat or drink (for example, 20 minutes)

What was the average time between eating or drinking? _____

Put a * beside your meals (breakfast, lunch, dinner). How long did each of your meals take? What is the average length of meals? _____

⁵ Adapted from *A Breastfeeding Information and Activity Kit for Secondary School Teachers*, Ontario Public Health Association, 2009 (p. 30-32). http://www.opha.on.ca/getmedia/5725dc8f-bc93-47da-8d61-6c23561e4e41/BF_Info-ActivityKit-May2009.aspx

HANDOUT G

Breastfeeding Workshop Evaluation Form

Please take a moment and complete the following workshop evaluation form.

Very (5) Partly (3) Not (1)

1) Will this workshop be helpful to you in your breastfeeding journey?

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2) Do you think that the workshop objectives were met?

--	--	--	--	--

3) Were your learning objectives for this workshop met?

--	--	--	--	--

4) How ready do you feel to deal with the areas covered in this workshop?

--	--	--	--	--

5) Please indicate with a checkmark your evaluation of these elements of the workshop.

	Excellent		Adequate		Poor
Facilities					
Handouts					
Facilitator					
Duration					
Training methods					
Content					
Overall workshop					

6) Please indicate with a checkmark your evaluation of the trainer in the following areas.

TRAINERS	Excellent		Adequate		Poor
Knowledge of topic					
Presentation					
Use of exercises/tasks					
Interaction with group					
Response to group needs					

7) Which section(s) of the workshop did you find most helpful?

8) Which section(s) of the workshop did you find least helpful?






















9) Describe one concept discussed in the workshop that you intend to apply in the future.

10) Please recommend specific changes for future workshops. (Use a separate sheet if you need more space)

11) Do you have other comments?

Breastfeeding Poster

One copy of the Breastfeeding Poster to hang on the wall during the workshop.

GUIDELINES FOR NURSING MOTHERS									
Your Baby's Age	1 WEEK							2 WEEKS	3 WEEKS
	1 DAY	2 DAYS	3 DAYS	4 DAYS	5 DAYS	6 DAYS	7 DAYS		
How Often Should You Breastfeed? Per day, on average over 24 hours	       								
At least 8 feeds per day (every 1 to 3 hours). Your baby is sucking strongly, slowly, steadily and swallowing often.									
Your Baby's Tummy Size	 Size of a cherry		 Size of a walnut		 Size of an apricot		 Size of an egg		
Wet Diapers: How Many, How Wet Per day, on average over 24 hours	 At least 1 WET	 At least 2 WET	 At least 3 WET	 At least 4 WET	 At least 6 HEAVY WET WITH PALE YELLOW OR CLEAR URINE				
Soiled Diapers: Number and Colour of Stools Per day, on average over 24 hours	 At least 1 to 2 BLACK OR DARK GREEN		 At least 3 BROWN, GREEN, OR YELLOW		 At least 3 large, soft and seedy YELLOW				
Your Baby's Weight	Babies lose an average of 7% of their birth weight in the first 3 days after birth.				From Day 4 onward your baby should gain 20 to 35g per day (½ to 1½ oz) and regain his or her birth weight by 10 to 14 days.				
Other Signs	Your baby should have a strong cry, move actively and wake easily. Your breasts feel softer and less full after breastfeeding.								
<div><p>by/par health NEXUS santé</p></div> <p>Breast milk is all the food a baby needs for the first six months — At six months of age begin introducing solid foods while continuing to breastfeed until age two or older. (WHO, UNICEF, Canadian Pediatric Society)</p> <p>If you need help ask your doctor, nurse, or midwife. To find the health department nearest you, call INFO line: 1-800-268-1154. For peer breastfeeding support call La Leche League Canada Referral Service 1-800-665-4324.</p>									
03/2009									