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Acknowledgements

This document has been prepared with funds provided by the Government of Ontario and the support of the Best Start Resource Centre at Health Nexus.

The information herein reflects the views of the authors and is not officially endorsed by the Government of Ontario or the Best Start Resource Centre.

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Special thanks to Thunder Baby District Health Unit for the use of their training manual for adaption.



Welcome to the Breastfeeding Mentor Program!

Mission Statement

"Healthy mom and baby through a supported, successful breastfeeding experience"

Goals of Breastfeeding Mentor Program

- To increase the breastfeeding supports/resources in Haliburton County
- To reduce the isolation of vulnerable breastfeeding women in Haliburton County
- To increase breastfeeding initiation, exclusivity and duration for new mothers
- To support and encourage mothers during their breastfeeding experience
- To increase mother's satisfaction with breastfeeding experience
- To provide mentors with training and community resources in order to successfully support a new mother in her breastfeeding experience
- To ensure mentor has sufficient confidence and communication skills to effectively establish a relationship with a new breastfeeding mother

Breastfeeding Mentor Program Description

What is a breastfeeding mentor?

A mother who:

- successfully breastfed at least one of her children for six months
- Has been screened, and completed training and orientation for the breastfeeding mentor program
- Has the communication and listening skills to provide appropriate support to a new breastfeeding mother

Why become a breastfeeding mentor?

- You value and recognize the support a mentor can provide for a new breastfeeding mother
- You desire to make a difference in the life of another mother and her family
- You understand the challenges of breastfeeding and aspire to provide the amount of support a new mother may need
- You know the benefits of breastfeeding for both mother and baby, as well as for society and the environment



Program Description

- The purpose of the breastfeeding mentor program is to provide new mothers who have decided to breastfeed, the emotional and practical support they need to continue to breastfeed as long as they choose
- New mothers will be matched with trained mentors ideally prenatally to initiate the relationship and to ensure a good fit
- Mentors will be available via phone either through texting or calls at mother's discretion and mentors may check in with the new mother to ensure mother is adjusting well
- Face to face visits are also encouraged, based on the mother's needs and can occur at the mother's home or in the community at mother's discretion
- In some circumstances, mentor is allowed to provide transportation for new mother provided that prerequisites for safety and insurance are met

Why provide new mothers with a Mentor?

- Studies show that although over 90% of new mothers initiate some breastfeeding, just over 30% exclusively breastfeed for six months or longer
- There are barriers and challenges that hinder breastfeeding success which can include lack of guidance from skilled and knowledgeable support services, pressure from family and friends, and negative societal and community attitudes
- Research shows that peer to peer support has been a valid avenue of ensuring new mothers have the support they need when required to lengthen the duration of, and positively enhance, the breastfeeding experience

Breastfeeding Mentor Volunteer Position Description

Qualifications

- Ideally, have successfully breastfed a child no more than 10 years ago
- Your successful breastfeeding experience lasted at least 6 months
- Have a cell phone with a suitable call and text plan
- Have access to reliable transportation
- Have time necessary to provide support on an on-going basis



Commitment

- Willing to attend training and other meetings necessary to acquire essential knowledge and skills
- Willing to share feedback on your mentor experiences with coordinator and other mentors
- Willing to support new mother for the duration of her breastfeeding experience, up to a period of one year in the manner that best suits her and her family
- Willing to utilize tracking sheets to record interactions with new mother and submit bi-weekly

Accountability

- Mentors will maintain contact with coordinator to ensure successful outcomes of program, to hand in copies of monthly tracking sheets and to attend meetings
- Mentors will alert the coordinator to any concerns regarding new mother or the relationship
- Mentors will conduct themselves in an appropriate manner for the breastfeeding mentor role and 'leave biases at the door'
- Breastfeeding Initiative program is funded through BestStart and SIRCH is required to collect data and provide reports on successful outcomes and challenges
- Over 40 other projects are being funded and developed in the province

Comment [HD1]: Better to say Best Start Resource Centre so it does not get confused with a local Best Start program

Role of Breastfeeding Initiative Program Coordinator

- To promote the breastfeeding mentor program to community partners, other relevant organizations and to the general community
- To recruit, screen and provide orientation and training to appropriate candidates
- To match new mothers with suitable mentors
- To provide the opportunity for mentors to give feedback, have discussions and support each other
- To provide support to mentors and address any concerns that may arise
- To report to community and funding partners on successes and challenges



How mothers become clients:

- Health care providers may refer mothers prenatally
- Mother may self refer if interested in program
- Mothers fill out a participant form to ensure suitability to the program and to ensure a suitable match with a mentor

Breastfeeding Rights

World Health Organization (WHO)

To enable mothers to establish and sustain exclusive breastfeeding for 6 months, WHO and UNICEF recommend:

- i. Initiation of breastfeeding within the first hour of life
- ii. Exclusive breastfeeding – that is the infant only receives breast milk without any additional food or drink, not even water
- iii. Breastfeeding on demand – that is as often as the child wants, day and night
- iv. No use of bottles, teats or pacifiers

http://www.who.int/nutrition/topics/exclusive_breastfeeding/en/

Although breastfeeding is a natural act, it is also a learned behavior which requires teachers and role models to promote its benefits and 'ease of use'. The WHO and UNICEF launched the Baby-friendly Initiative (BFI) to "strengthen maternity practices to support breastfeeding".



The foundation of the BFI is:

"The Ten Steps to Successful Breastfeeding"

Every facility providing maternity services and care for newborn infants should:

1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within a half-hour of birth.
5. Show mothers how to breastfeed, and how to maintain lactation even if they should be separated from their infants.
6. Give newborn infants no food or drink other than breast milk, unless medically indicated.
7. Practice rooming-in -- allow mothers and infants to remain together -- 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no artificial teats or pacifiers (also called dummies or soothers) to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic."

http://whqlibdoc.who.int/publications/2004/9241591544_eng.pdf?ua=1

The effectiveness of the above Ten Steps have been researched and the following results have been published:

- The three steps pertaining to guidance and support are the most distinctly established and they are:
 - i. Step 3 - Education
 - ii. Step 5 – Showing mothers how to breastfeed
 - iii. Step 10 – Continuing support after discharge from hospital



- “They are the steps which can be the most difficult to implement adequately, and they are often the slowest to be introduced. They require skill, which needs training, and they take health worker time so they require revision of job descriptions. However, together they are among the most cost-effective of all health interventions, and efforts to include adequate support for breastfeeding mothers should be strengthened regardless of limitations of resources.”

http://whqlibdoc.who.int/publications/2004/9241591544_eng.pdf?ua=1

Canada and Ontario

Protected by the Canadian Chart of Rights and Freedoms, a breastfeeding mother has the right to breastfeed anywhere, at any time. If a mother feels her breastfeeding rights are not being respected, she can report what has happened to the Ontario Human Rights Commission.

When a breastfeeding mother is returning to work, she has the right under the Ontario Human Rights Commission to be supported while in the workplace so that she can continue to breastfeed or express/pump/store her breastmilk for her baby, if she chooses.

Breastfeeding Benefits for Baby, Mom and Community

Benefits For Baby...

Nutrition

- babies need only breastmilk for the first 6 months of life
- at about 6 months babies need to start eating nutritious iron-rich foods and continue to breastfeed for up to 2 years and beyond.



Protection

- Breast milk contains antibodies that help reduce the risk of illness such as ear infections, diarrhea, allergies, colds and the flu
- Breastmilk constantly changes to meet the needs of growing babies and children
- The first milk after birth (colostrum) provides important early protection by coating the stomach and digestive tract to prevent the growth of harmful bacteria; even more important if your baby is premature!
- Breastfeeding promotes proper tooth and jaw development as your baby grows
- Decreases baby's risk of obesity, diabetes and other major health problems later on
- Brain Power – There is strong evidence that children who were breastfed scored higher on IQ tests and on ratings from teachers on academic performance
- Breastfeeding decreases the risk of Sudden Infant Death Syndrome (SIDS)

Benefits For Mom...

- Breastfeeding is convenient and always available
 - Breastmilk is always ready! Baby doesn't have to wait!
 - Safe, fresh and precisely the right temperature and it's free!
 - There is no need for equipment, sterilizing or preparing. Breastfeeding is very convenient any time of day or night
 - Outings for shopping and visits are easier because there is no equipment to carry or anything to refrigerate
 - Breastfeeding helps to nurture the bond between mother and baby by providing closeness and comfort
- Saves money – breastfeeding saves hundreds, even thousands of dollars

Approximate Cost (2007 Pricing)

<u>Formula</u>	<u>Breast</u>	<u>Maximum Social Assistance for Single Parent</u>
\$598-3,062 six month supply	\$0	\$8,219.50
\$70 bottles, brush	\$0	% of Income Spent on Formula – 7-37%

Comment [HD2]: months



- Saves time- no bottles or other equipment to sterilize and no preparation is required
- Controls postpartum bleeding
- Protects against osteoporosis, and may help prevent heart disease and high blood pressure
- Lowers the risk of developing breast, uterine and ovarian cancers
- Helps mom return to a healthy body weight postpartum
- Breastfeeding slows down the return of a mother's period

Benefits For community...

- There is no unnecessary packaging, pollution or waste
- Breastfeeding reduces health care costs for the family and society
- Fewer illness-related medical visits for babies, so parents and grandparents miss less work and/or school hours.

Training Sessions

Please see your organization for requirements for your breastfeeding mentor role.

Communication Tracking Sheets

Used to capture the details of an interaction between the volunteer mentor and the breastfeeding mother:

- This is a simple and helpful tool that is used to record the details of an interaction
- It is necessary to include date, time, type of interaction (text, call, face-to-face meeting with location indicated), reason for interaction, outcome or plan as a result of interaction (even if just providing general support)
- Submitted bi-weekly to coordinator and reviewed



Communication Tracking Sheet

Mentor: _____ Client: _____
Date: _____ Time: _____

Method of Communication : Text ☐ Call ☐ Visit ☐

Reason for communication: (circle all that apply)

Latching	Engorgement	Pain	Positioning
Fussy Baby	Sleep	Supplementing with bottle	
Pumping	Breast infections	Weaning	Nutrition
Menstruation	Depression	Smoking	Relationships

Other: _____

Outcome of communication:

General information or reassurance ☐
Face to face visit scheduled for _____
Referral given or suggested _____
Other _____



Communication Tracking Sheet

Mentor: _____ Client: _____
Date: _____ Time: _____

Method of Communication : Text ☐ Call ☐ Visit ☐

Reason for communication: (circle all that apply)

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