

# MNCHP Network Bulletin



**best start  
meilleur départ**  
by/par health **nexus** santé

*The MNCHP Bulletin is a monthly electronic bulletin that highlights current trends, new resources and initiatives, upcoming events and more in the preconception, prenatal and child health field. Our primary focus is the province of Ontario, Canada but the bulletin also includes news and resources from around the world. Wherever possible, we include resources that are available for free. For more information about this bulletin, [click here](#).*

**December 6, 2013**

***The next bulletin will be released January 10, 2014.***

This week's bulletin provides a selection of information on breastfeeding. It is based on a preliminary scan and is not exhaustive.

**We invite you to share other relevant information about this topic.**

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## **I. NEWS & VIEWS**

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### **1. Does Breastfeeding Make Men Uncomfortable?**

This website (ABC News, 2013, November 21) includes a description and short video about the documentary “Breasmilk” that is set for release in the spring of

2014. There have already been strong reactions from parents about breastfeeding in public. In particular, many mothers voiced their concerns about a father who said breastfeeding in public makes him uncomfortable. The producers of the film hope that the film will start an important conversation about “how we can support all new mothers...” (ABC News, 2013, November 21). <http://abcnews.go.com/blogs/lifestyle/2013/11/does-breastfeeding-make-men-uncomfortable/>

## 2. B.C. Mom Blocked from Facebook over Breastfeeding Photo

A British Columbia mother says she was temporarily barred from using Facebook after posting a picture of herself breastfeeding her daughter on a community page about breastfeeding. The image was flagged and removed but later allowed back on the site. This is not the first time Facebook has had issues with pictures of breastfeeding. In 2008, Facebook pulled images of breastfeeding and it resulted in immediate protest. This led to a [policy change](#). Yet there continues to be issues with Facebook and breastfeeding pictures. A new group page on Facebook called “FB vs. Breastfeeding” is tracking pictures that are being deleted by Facebook. It is designed to publicize wrongful removals of breastfeeding images.

<http://www.cbc.ca/news/canada/british-columbia/b-c-mom-says-she-was-blocked-from-facebook-over-breastfeeding-photo-1.1318409>

FB vs. Breastfeeding: <https://www.facebook.com/the.ban.on.breastfeeding>

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## II. RECENT REPORTS AND RESEARCH

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\* indicates journal subscription required for full text access

### 3. Breastfeeding Trends in Canada (available in French)

Statistics Canada. (2013). *Breastfeeding trends in Canada*. Retrieved from <http://www.statcan.gc.ca/pub/82-624-x/2013001/article/11879-eng.htm>

[EXCERPT taken from <http://www.infactcanada.ca/>]

Almost 9 in 10 Canadian mothers initiated breastfeeding soon after their child's birth in 2011/2012. Health Canada and its partners encourage mothers to breastfeed their infants exclusively (no other liquids or solids) for the first six months. In 2011/2012, 26% of mothers breastfed exclusively for six months (or more), up from 17% in 2003.

British Columbia had the highest rate of breastfeeding exclusively for six months (or more), as well as the largest provincial increase since 2003. In 2011/2012, mothers who breastfed exclusively for six months (or more) tended to be in their thirties or older and had postsecondary qualifications. The most common reasons cited for stopping

breastfeeding before six months were "not enough breast milk" and "difficulty with breastfeeding technique."

EN: <http://www.statcan.gc.ca/pub/82-624-x/2013001/article/11879-eng.htm>

FR: <http://www.statcan.gc.ca/pub/82-624-x/2013001/article/11879-fra.htm>

#### 4. Breastfeeding among Inuit in Canada

Asuri, S. A., Ryan, A. C., & Arbour, L. (2011). *Early Inuit Child Health in Canada*.

Retrieved from <https://www.itk.ca/publication/early-inuit-child-health-canada-report-2-breastfeeding-among-inuit-canada>

[EXCERPT taken from <https://www.itk.ca/publication/early-inuit-child-health-canada-report-2-breastfeeding-among-inuit-canada>]

Reports have been emerging that suggest Inuit have rates of breastfeeding that are lower than other Aboriginal populations in Canada, and lower than the national average. This is in contrast to historical reports of early child feeding for Inuit in the Canadian Arctic where it is said that breastfeeding was the traditional way of feeding an infant and continued for a long time relative to the general Canadian population. A child would usually be weaned when the mother became pregnant with her next child. On average this was 3 years but it was not uncommon to have children as old as five years still being breastfed. The Inuit Children's Health report (based on the Aboriginal Peoples Survey of 2001) and the Indigenous Children's Health Report: Health Assessment in Action (based on the Aboriginal Children's Survey of 2006) both reported breastfeeding initiation for all Inuit children at 66% compared to 80% for the rest of Canada.

Since breastfeeding has the potential of preventing infant mortality, reducing chronic diseases, improving immunity, and strengthening maternal-infant bond, exploration of the factors influencing the breastfeeding practices of Inuit mothers might help inform efforts to increase the rate. This report used questions from the 2006 Aboriginal Children's Survey (ACS) to analyze the breastfeeding practices and the factors that may be influencing breastfeeding among Inuit mothers.

<https://www.itk.ca/publication/early-inuit-child-health-canada-report-2-breastfeeding-among-inuit-canada>

#### \* 5. Breastfeeding Concerns at 3 and 7 Days Postpartum and Feeding Status at 2 Months

Wagner, E. A., Chantry, C. J., Dewey, K. G., & Nommsen-Rivers, L. A. (2013).

*Pediatrics*, 132(4), 865-875.

<http://pediatrics.aappublications.org/content/132/4/e865>

[ABSTRACT]

**OBJECTIVE:** We characterized breastfeeding concerns from open-text maternal responses and determined their association with stopping breastfeeding by 60 days (stopping breastfeeding) and feeding any formula between 30 and 60 days (formula use).

**METHODS:** We assessed breastfeeding support, intentions, and concerns in 532 expectant primiparas and conducted follow-up interviews at 0, 3, 7, 14, 30, and 60 days postpartum. We calculated adjusted relative risk (ARR) and adjusted population attributable risk (PAR) for feeding outcomes by concern category and day, adjusted for feeding intentions and education.

**RESULTS:** In 2946 interviews, 4179 breastfeeding concerns were reported, comprising 49 subcategories and 9 main categories. Ninety-two percent of participants reported  $\geq 1$  concern at day 3, with the most predominant being difficulty with infant feeding at breast (52%), breastfeeding pain (44%), and milk quantity (40%). Concerns at any postpartum interview were significantly associated with increased risk of stopping breastfeeding and formula use, with peak ARR at day 3 (e.g., stopping breastfeeding ARR [95% confidence interval] = 9.2 [3.0–infinity]). The concerns yielding the largest adjusted PAR for stopping breastfeeding were day 7 “infant feeding difficulty” (adjusted PAR = 32%) and day 14 “milk quantity” (adjusted PAR = 23%).

**CONCLUSIONS:** Breastfeeding concerns are highly prevalent and associated with stopping breastfeeding. Priority should be given to developing strategies for lowering the overall occurrence of breastfeeding concerns and resolving, in particular, infant feeding and milk quantity concerns occurring within the first 14 days postpartum.

Abstract: <http://pediatrics.aappublications.org/content/132/4/e865>

Science Daily article “Breastfeeding Fraught with Early Challenges for Many First-Time Mothers”: <http://www.sciencedaily.com/releases/2013/09/130923093035.htm>

## 6. Kangaroo Care in Preterm Infants Has Long-Term Effects

Stein, M. T. (2013). Kangaroo care in preterm infants has long-term effects. *Pediatrics and Adolescents*. Retrieved from <http://www.jwatch.org/na32832/2013/11/25/kangaroo-care-preterm-infants-has-long-term-effects>

[EXCERPT]

[Martin T. Stein, MD](#) reviewing *Feldman R et al. Biol Psychiatry* 2013 Oct 3.

Postpartum maternal–infant skin-to-skin contact was associated with better cognition, sleep, and executive function at age 10 years.

Maternal–infant skin-to-skin contact in the form of kangaroo care (KC) in premature infants enhances neuromaturation. KC is associated with better autonomic function, electroencephalogram complexity, pain response, and physiologic stability, as well as improved mother–infant interactions/bonding and maternal mood. Whether these benefits are sustained long-term is not known.

Investigators in Israel prospectively examined the effects of KC in 146 premature infants (mean birth weight, 1270 g; mean gestation, 30.5 weeks); 73 infants were undressed and placed between the mothers' breasts for 1 hour daily for 14 days while the mother sat in a rocking chair, and 73 case-matched control infants received standard care in an incubator. All children were evaluated seven times during the first decade of life using

standardized measurements for autonomic function (respiratory sinus arrhythmia), cognition, and parent mental health. Mother–child interactions at term, and at ages 3 months, 6 months, and 10 years were videotaped and assessed for maternal gaze, “motherese” high-pitched vocalizations, positive affect, and affective touch.

Compared with the control group, maternal attachment behavior and autonomic function were increased during the postpartum period in the KC group. From ages 6 months to 10 years, the KC group showed a sustained reduction in maternal anxiety and higher levels of cognitive development, organized sleep patterns, and executive functions. At age 10 years, KC children had lower cortisol levels in response to a standardized stress test (making a public speech and completing a complex math problem before an unfamiliar judge).

See more at: <http://www.jwatch.org/na32832/2013/11/25/kangaroo-care-preterm-infants-has-long-term-effects#sthash.11VqQYxw.dpuf>

### **Comment**

Kangaroo care for premature infants has come a long way from the initial observation in Bogotá, Colombia, where incubators were not available. The physiological and behavioral benefits derived from KC are thought to be a result of early and frequent skin-to-skin contact at a sensitive period of neurological maturation in premature infants. At a time when cost-effective interventions are valued, KC appears to be a good investment.

Abstract: <http://www.biologicalpsychiatryjournal.com/article/S0006-3223%2813%2900764-6/abstract>

### **\* 7. Maternal Prepregnancy Obesity and Insulin Treatment during Pregnancy are Independently Associated with Delayed Lactogenesis in Women with Recent Gestational Diabetes Mellitus**

Matias, S. L., Dewey, K. G., Quesenberry, C. P., & Gunderson, E. P. (2013). Maternal prepregnancy obesity and insulin treatment during pregnancy are independently associated with delayed lactogenesis in women with recent gestational diabetes mellitus. *American Journal of Clinical Nutrition*. DOI: [10.3945/ajcn.113.073049](https://doi.org/10.3945/ajcn.113.073049)

[ABSTRACT]

**Background:** The timely onset of stage II lactogenesis (OL) is important for successful breastfeeding and newborn health. Several risk factors for delayed OL are common in women with a history of gestational diabetes mellitus (GDM), which may affect their chances for successful breastfeeding outcomes.

**Objective:** We investigated the prevalence and risk factors associated with delayed OL in a racially and ethnically diverse cohort of postpartum women with recent GDM.

**Design:** We analyzed data collected in the Study of Women, Infant Feeding and Type 2 Diabetes After GDM Pregnancy (SWIFT), which is a prospective cohort of women diagnosed with GDM who delivered at Kaiser Permanente Northern California hospitals from 2008 to 2011. At 6–9 wk postpartum, delayed OL was assessed by maternal report of breast fullness and defined as occurring after 72 h postpartum. We obtained data on

prenatal course and postdelivery infant feeding practices from electronic medical records and in-person surveys. We used multivariable logistic regression models to estimate associations of delayed OL with prenatal, delivery, and postnatal characteristics.

**Results:** The analysis included 883 SWIFT participants who initiated breastfeeding and did not have diabetes at 6–9 wk postpartum. Delayed OL was reported by 33% of women and was associated with prepregnancy obesity (OR: 1.56; 95% CI: 1.07, 2.29), older maternal age (OR: 1.05; 95% CI: 1.01, 1.08), insulin GDM treatment (OR: 3.11; 95% CI: 1.37, 7.05), and suboptimal in-hospital breastfeeding (OR: 1.65; 95% CI: 1.20, 2.26). A higher gestational age was associated with decreased odds of delayed OL but only in multiparous mothers (OR: 0.79; 95% CI: 0.67, 0.94).

**Conclusions:** One-third of women with recent GDM experienced delayed OL. Maternal obesity, insulin treatment, and suboptimal in-hospital breastfeeding were key risk factors for delayed OL. Early breastfeeding support for GDM women with these risk factors may be needed to ensure successful lactation.

Science Daily article “Obesity Among Risk Factors for Delayed Lactation in Women With Gestational Diabetes”:

<http://www.sciencedaily.com/releases/2013/11/131111131441.htm>

Abstract: <http://ajcn.nutrition.org/content/early/2013/11/06/ajcn.113.073049>

#### \* 8. Buying Breast Milk Online Is Likely to Cause Illness in Infants

Keim, S. A., Hogan, J. S., Mcnamara, K. A., Gudimetla, V., Dillon, C. E...Geraghty, S. R. (2013) Microbial contamination of human milk purchased via the Internet. *Pediatrics*. Retrieved from <http://pediatrics.aappublications.org/content/early/2013/10/16/peds.2013-1687.abstract>

[ABSTRACT]

**OBJECTIVE:** To quantify microbial contamination of human milk purchased via the Internet as an indicator of disease risk to recipient infants.

**METHODS:** Cross-sectional sample of human milk purchased via a popular US milk-sharing Web site (2012). Individuals advertising milk were contacted to arrange purchase, and milk was shipped to a rented mailbox in Ohio. The Internet milk samples ( $n = 101$ ) were compared with unpasteurized samples of milk donated to a milk bank ( $n = 20$ ).

**RESULTS:** Most (74%) Internet milk samples were colonized with Gram-negative bacteria or had  $>10^4$  colony-forming units/mL total aerobic count. They exhibited higher mean total aerobic, total Gram-negative, coliform, and *Staphylococcus* sp counts than milk bank samples. Growth of most species was positively associated with days in transit (total aerobic count [ $\log_{10}$  colony-forming units/mL]  $\beta = 0.71$  [95% confidence interval: 0.38–1.05]), and negatively associated with number of months since the milk was expressed ( $\beta = -0.36$  [95% confidence interval:  $-0.55$  to  $-0.16$ ]), per simple linear regression. No samples were HIV type 1 RNA-positive; 21% of Internet samples were cytomegalovirus DNA-positive.

**CONCLUSIONS:** Human milk purchased via the Internet exhibited high overall bacterial growth and frequent contamination with pathogenic bacteria, reflecting poor collection, storage, or shipping practices. Infants consuming this milk are at risk for negative outcomes, particularly if born preterm or are medically compromised. Increased use of lactation support services may begin to address the milk supply gap for women who want to feed their child human milk but cannot meet his or her needs.

Abstract: <http://pediatrics.aappublications.org/content/early/2013/10/16/peds.2013-1687.abstract>

Science Daily article "Buying Breast Milk Online Is Likely to Cause Illness in Infants"  
<http://www.sciencedaily.com/releases/2013/10/131021095018.htm>

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## III. CURRENT INITIATIVES

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### 9. Supporting Mothers Affected by the Typhoon in the Philippines

Arugaan is a breastfeeding support organization in the Philippines. It is active in providing support for mothers to feed their children in the typhoon affected areas. During previous typhoons the Arugaan mother-to-mother support groups shared their breastmilk with non-breastfeeding mothers and helped mothers to relactate (re-establishing breastfeeding) and provide precious human milk so their infants and young children could survive (Infact Canada, 2013).

Typhoon Yolanda/Haiyan has tormented Philippine people lives and livelihoods, wrecking their lives. Now Arugaan plans to rebuild their lives with Lifeskills Training focused on homefoods nurturing. They will travel around forming breastfeeding mother support groups (Infact Canada, 2013).

Please support Arugaan's essential work empowering Philippine mothers [with your donation](#).

[Read more](#) on breastfeeding in emergencies in [The Nutrition Cluster IYCF statement for the Philippines](#).

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## IV. UPCOMING EVENTS

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### 10. Vitamin D: Mothers, Babies, and You

December 17, 2013: Webinar

There are several controversies surrounding vitamin D during the life cycle. How much is enough? What does vitamin D do? What evidence supports the use of supplements and

under what conditions? As we support breastfeeding families, we are often asked these and other questions about vitamin D. This presentation offers a look at all sides of the issue, as well as personally valuable information about vitamin D needs throughout our lives.

<https://www.ilca.org/i4a/ams/conference/conference.cfm?conferenceID=885>

### **11. Classifying Infant Sucking Problems**

January 22, 2014: Webinar

By determining the degree of severity and nature of an infant sucking problem, the IBCLC will be better able to devise a care plan and interface with other members of the healthcare team that may need to be part of the treatment process. In this presentation, Dr. Hazelbaker proposes a classification system for infant sucking problems that helps the practitioner to make a differential lactation diagnosis. Participants will be able to better identify the differences between motor-based and sensory-based sucking problems, their causes and the treatment approaches that best address each type by the end of the presentation.

<https://www.ilca.org/i4a/ams/conference/conference.cfm?conferenceID=891>

### **12. Breastfeeding an Infant With Kidney Disease: A Case Report and Call for Research**

February 6, 2014: Webinar

This is a case report detailing the challenges and strategies used when breastfeeding an infant with kidney disease. It is also a call for research to widen the narrow knowledge base for breastfeeding post-transplant. After the webinar, the learner will be able to:

- Describe the unique challenges presented in breastfeeding an infant with kidney disease.
- Develop strategies to support breastfeeding in a dyad faced with kidney disease.
- Recognize the lack of research available and utilize the available resources to aid mothers to the best of their ability.

<https://www.ilca.org/i4a/ams/conference/conference.cfm?conferenceID=894>

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## **V. RESOURCES**

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### **13. Ontario Human Rights Commission (OHRC): Pregnancy and Breastfeeding**

This website (OHRC, 2014) provides detailed information about rights as a pregnant woman, rights as a breastfeeding mother, where the rights apply, rights at work, rights in services, tips for working together to meet accommodation needs, special needs, and other related employment laws. There is also a link to the [policy on discrimination because of pregnancy and breastfeeding](#).

<http://www.ohrc.on.ca/en/pregnancy-and-breastfeeding-brochure>

#### 14. Breastfeeding and Infant Nutrition: Public Health Agency of Canada

The Public Health Agency of Canada (2013) supports and promotes breastfeeding as the normal and unequalled way to provide optimal nutritional, immunological, and emotional nurturing of infants. This website provides information and links to two resources: “10 Valuable Tips for Successful Breastfeeding” and “10 Great Reasons to Breastfeed your Baby”.

EN: [http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance\\_0-2/nutrition/](http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance_0-2/nutrition/)

FR: [http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance\\_0-2/nutrition/index-fra.php](http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance_0-2/nutrition/index-fra.php)

#### 15. The Nutritional Habits of Métis Infants and Young Children in Canada: A Preliminary Examination

This resource (National Collaborating Centre for Aboriginal Health [NCCA], 2011) discusses infant and young children nutrition guidelines and benefits of breastfeeding and the current nutrition picture for Métis children. It also provides suggestions for next steps.

<http://www.nccah-ccnsa.ca/Publications/Lists/Publications/Attachments/14/Nutritional%20Habits%20of%20Métis%20Infants%20and%20Children%20%28English%29.pdf>

#### 16. Pathways to Improving Well-being for Indigenous Peoples

This report (NCCA, 2013) provides a broad overview of socio-economic determinants of Indigenous health, including income, education, unemployment or working conditions, housing, community and social support, health care access, early childhood influences and education, healthy living, substance use (including alcohol, tobacco, and drugs), nutrition, and social exclusion. It also presents information on current interventions and their effectiveness. There is a section devoted to breastfeeding (see p. 25).

[http://www.nccah-ccnsa.ca/Publications/Lists/Publications/Attachments/102/pathways\\_EN\\_web.pdf](http://www.nccah-ccnsa.ca/Publications/Lists/Publications/Attachments/102/pathways_EN_web.pdf)

#### 17. Centers of Disease Control (CDC) and Prevention Guide to Strategies to Support Breastfeeding Mothers and Babies

This resource is an update of the 2005 *The CDC Guide to Breastfeeding Interventions*. It provides state and local community members information to choose the breastfeeding intervention strategy that best meets their needs. Support for breastfeeding is needed in many different arenas (e.g., hospitals and birth centers, worksites, and communities) (CDC, 2013). This Guide builds upon the research evidence demonstrating effective intervention strategies and offers relevant information for each including program examples and resources (CDC, 2013). It includes chapters on:

- [Maternity Care Practices](#)
- [Professional Education](#)
- [Access to Professional Support](#)
- [Peer Support Programs](#)
- [Support for Breastfeeding in the Workplace](#)
- [Support for Breastfeeding in Early Care and Education](#)

- [Access to Breastfeeding Education and Information](#)
- [Social Marketing](#)
- [Addressing the Marketing of Infant Formula](#)
- [References](#)

<http://www.cdc.gov/breastfeeding/resources/guide.htm>

## 18. Academy of Breastfeeding Medicine (ABM): Statements and Clinical Protocols

The ABM is a worldwide organization of physicians dedicated to the promotion, protection, and support of breastfeeding and human lactation. They have several position statements and clinical protocols available in multiple languages:

- [ABM Position Statement on Breastfeeding](#)
- [ABM Physician Education Statement](#)
- [ABM Position Statement on Mothers in Workplace Employment or Educational Settings](#)
- [Hypoglycemia](#)
- [Going Home/Discharge](#)
- [Supplementation](#)
- [Mastitis](#)
- [Peripartum BF Management](#)
- [Cosleeping and Breastfeeding](#)
- [Model Hospital Policy](#)
- [Human Milk Storage](#)
- [Galactagogues](#)
- [Breastfeeding the Late Pre-Term Infant](#)
- [The Breastfeeding-Friendly Physicians' Office Part 1: Optimizing Care for Infants and Children](#)
- [Analgesia and Anesthesia for the Breastfeeding Mother](#)
- [Breastfeeding the Hypotonic Infant](#)
- [Guidelines for Breastfeeding Infants with Cleft Lip, Cleft Palate, or Cleft Lip and Palate](#)
- [Use of Antidepressants in Nursing Mothers](#)
- [Breastfeeding Promotion in the Prenatal Setting](#)
- [Engorgement](#)
- [Breastfeeding and the Drug-Dependant Woman](#)
- [Jaundice](#)
- [Non-Pharmacologic Management of Procedure-Related Pain in the Breastfeeding Infant](#)
- [Allergic Proctocolitis in the Exclusively Breastfed Infant](#)
- [Preprocedural Fasting for the Breastfed Infant](#)

<http://www.bfmed.org/Resources/Protocols.aspx>

## 19. Breastfeeding Committee for Canada

This website offers several publications of interest to service providers such as:

- [The International Code Documents](#)
- [Kanesatake Health Centre - First Baby Friendly Aboriginal Health Centre in Canada](#)

- [Nutrition for Healthy Term Infants: Recommendations from Birth to Six Months](#)
- [10 Great Reasons to Breastfeed your Baby](#)
- [10 Valuable Tips for Successful Breastfeeding](#)

<http://breastfeedingcanada.ca/>

## 20. Baby-Friendly Initiative Tools

The Baby-Friendly Initiative Ontario website has several resources that are useful to service providers and organizations including links to [position statements on breastfeeding](#) and tools:

- [BFI Integrated 10 Steps Practice Outcome Indicators for Hospitals and Community Health Services](#)
- [BFI Hospital Self-Appraisal Tool](#)
- [Who Benefits from Baby-Friendly?](#)
- [Business Case for BFI](#)
- [Business Case for BFI Summary](#)
- [BFI Assessment Process and Costs: a description of the Baby-Friendly Journey](#)
- [BFI Assessment Flowchart: an Overview of the BFI Process](#)
- [Calculation of Exclusive Breastfeeding Statistics: Hospitals & Birthing Centres](#)
- [BFI Assessment Process and Costs](#)
- [BCC Breastfeeding Definitions & Data Collection](#)
- [BFI Designation Interim Report](#)

## 21. INFACT Canada Fact Sheets

Infant Canada offers several fact sheets. Many are also available in French.

- [14 Risks of Formula Feeding](#)
- [Breastfeeding and Food Security](#)
- [Breastfeeding - What you need to know](#)
- [Breastfeeding means the world to me!](#)
- [Breastfeeding Protection and International Code](#)
- [Breastfeeding - Friendly Birthing Practices](#)
- [Commodification of the Breast](#)
- [Complementary Feeding - Starting Solids](#)
- [Decoding Advertising by Nancy Phillips](#)
- [Enough is Enough](#)
- [Environment, Working Together for a Toxic-Free Future](#)
- [Essential Information - What Every Mother Must Know](#)
- [Exclusive Breastfeeding - Improving Infant and Young Child Feeding](#)
- [Exclusive Breastfeeding - Vital to Baby's Health](#)
- [Free Trade or Fair Trade](#)
- [Genetically Modified Organisms](#)
- [Healthy Babies](#)
- [Healthy Mothers](#)
- [Human Milk Banking](#)
- [Infant Feeding in Emergencies](#)
- [Information Checklist](#)
- [Information on the Global Strategy](#)

- [Kangaroo Care](#)
- [Nursing and the Parent Child Relationship by Keren Epstein Gilboa](#)
- [Nutrition for Nursing Mothers](#)
- [Some benefits of Breastfeeding](#)
- [Risks of Formula Feeding](#)
- [The Milk of Human Kindness](#)
- [The Nestle Boycott](#)
- [Tools for Action](#)
- [Towards Healthy Environments for Children](#)
- [Using Language to Facilitate Breastfeeding by Keren Epstein Gilboa](#)
- [Using Language to Facilitate Breastfeeding by Keren Epstein Gilboa — New Version!](#)
- [We are Breastfeeding](#)
- [What You Need to Know About the International Code](#)

<http://infactcanada.ca/FactSheets.htm>

## 22. International Lactation Consultant Association (ILCA)

This website provides many [translated documents](#) and [publications](#) as well as information about [World Breastfeeding Week](#) and [International Board Certified Lactation Consultant \(IBCLC\) Day](#). ILCA also offers a tool to “[find a lactation consultation in your area](#)”.

<http://www.ilca.org/i4a/pages/index.cfm?pageid=3305>

Find a lactation consultant in your area:

<http://www.ilca.org/i4a/pages/index.cfm?pageid=3432>

## 23. Breastfeeding and Drugs

The Motherisk website provides information about breastfeeding and drugs such as the types of drugs that are contraindicated or should be used with caution by lactating women. It also includes many research articles about drugs and breastfeeding.

<http://www.motherisk.org/women/breastfeeding.jsp>

## 24. Caring for Kids: Breastfeeding

This website provides information for parents about breastfeeding.

<http://www.caringforkids.cps.ca/handouts/breastfeeding>

## 25. A Practical Workbook to Protect, Promote and Support Breastfeeding in Community Based Projects

This workbook (PHAC, 2010) is intended to assist the Canada Prenatal Nutrition Program (CPNP) or similar community based prenatal projects to identify strategies and specific actions to protect, promote and support breastfeeding in a population health context.

<http://www.phac-aspc.gc.ca/hp-ps/dca-dea/publications/workbook-manuel/>

## 26. Video: Talk to me about breastfeeding

The video portrays local BC families sharing their breastfeeding stories, challenges, successes, and advice for families.

[http://www.youtube.com/watch?v=FSbr6OPk\\_E](http://www.youtube.com/watch?v=FSbr6OPk_E)

## 27. La Leche League Canada (LLLC) iPhone App

LLLC's mission is to encourage, promote and provide mother-to-mother breastfeeding support and educational opportunities as an important contribution to the health of children, families and society. Features of the App include: frequently asked questions database; find a support Group feature (complete w/ Group meeting details and directions); and various links to LLLC.ca website for more information.

<https://itunes.apple.com/us/app/lllc/id543430689?ls=1&mt=8>

## 28. Breastfeeding Buddy App

The [Breastfeeding Buddy](#) web based app has tips, tools and videos to help mothers with breastfeeding and more, from pregnancy to the baby's first six months and beyond. It provides information and links to health resources and helps keep track of breastfeeding, baby's sleep schedules and diaper changes, and scheduling if the mother expresses breast milk or provides alternate feedings.

<http://healthyfamiliesbc.ca/home/articles/breastfeeding-buddy#sthash.Cc5CuuCm.dpuf>

## 29. Supporting Breastfeeding among Immigrant and Refugee Mothers

This website (Canadian Paediatric Society, 2013) provides information for health professionals working with immigrant and refugee families. The breastfeeding page includes information about optimal nutrition, breastfeeding rates in immigrant and refugee women, common reasons for not breastfeeding, early supplementation, when a woman should not breastfeed, maternal HIV infection, encouraging breastfeeding, selected resources, references, and other works consulted.

<http://www.kidsnewtocanada.ca/health-promotion/breastfeeding>

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# VI. FEATURED BEST START RESOURCES

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Click here to see all Best Start resources on breastfeeding in [English](#) and [French](#).

## 30. The Baby-Friendly Initiative: Evidence-Informed Key Messages and Resources (Best Start Resource Centre, 2013)

This resource was developed in partnership with BFI Ontario. It provides key supports for agencies that are implementing or maintaining the standards of the *Baby-Friendly initiative (BFI)*. It highlights the key points regarding each of the *10 Steps to Successful Breastfeeding* and the *WHO Code of Marketing of Breastmilk Substitutes* and explains

them with evidence-informed language. The additional online, linked resources can be used when implementing each of the 10 Steps or requirements of the Code, making this resource practical and user-friendly. It is equally applicable in hospital and community settings.

EN:

[http://www.beststart.org/resources/breastfeeding/Baby\\_Friendly\\_Resource\\_linked\\_final.pdf](http://www.beststart.org/resources/breastfeeding/Baby_Friendly_Resource_linked_final.pdf)

FR:

[http://www.meilleurdepart.org/resources/allaitement/Baby\\_Friendly\\_Resource\\_FR\\_like\\_d\\_rev.pdf](http://www.meilleurdepart.org/resources/allaitement/Baby_Friendly_Resource_FR_like_d_rev.pdf)

### **31. Breastfeeding for the Health and Future of Our Nation**

*(Best Start Resource Centre, 2013)*

This booklet was created to support Aboriginal women with the art of breastfeeding. The Medicine Wheel is used to symbolize the balance needed to support breastfeeding women.

[http://www.beststart.org/resources/breastfeeding/BFHFN\\_sept26.pdf](http://www.beststart.org/resources/breastfeeding/BFHFN_sept26.pdf)

### **32. Brochure: Mixing Alcohol and Breastfeeding**

*(Best Start Resource Centre with the support of the LCBO, 2012)*

The brochure is a resource for mothers and their partners to help them make an informed choice when it comes to drinking alcohol while breastfeeding.

EN:

[http://www.beststart.org/resources/alc\\_reduction/breastfeed\\_and\\_alcohol\\_bro\\_A21E.pdf](http://www.beststart.org/resources/alc_reduction/breastfeed_and_alcohol_bro_A21E.pdf)

FR:

[http://www.meilleurdepart.org/resources/alcool/pdf/breastfeed\\_and\\_alcohol\\_bro\\_FR.pdf](http://www.meilleurdepart.org/resources/alcool/pdf/breastfeed_and_alcohol_bro_FR.pdf)

### **33. Mixing Alcohol and Breastfeeding - Printer-ready handouts**

*(Best Start Resource Centre with the support of the LCBO, 2013)*

The handout is a resource for mothers and their partners to help them make an informed choice when it comes to drinking alcohol while breastfeeding.

Download printer-ready handouts as PDF files in [English](#), [French](#), [Arabic](#), [Cree](#), [Ojibway](#), [Hindi](#), [Punjabi](#), [Tamil](#), [Urdu](#), [Simplified Chinese](#), [Spanish](#) and [Tagalog](#)

### **34. Breastfeeding Matters: An Important Guide to Breastfeeding for Women and their Families**

*(Best Start Resource Centre, revised 2013)*

This booklet will help women and their families explore breastfeeding from prenatal decisions, learning breastfeeding basics to gaining confidence. Topics include: making an informed decision, getting started, learning to breastfeed, common concerns, frequently asked questions and where to get help. The booklet was tested by many pregnant and breastfeeding families and contains some of their quotes.

The fact sheets complement the Breastfeeding Matters booklet in special situations. They can be downloaded when needed. The following fact sheets are available:

- [Blocked Ducts](#)

- [Breast Infection \(Mastitis\)](#)
- [Expressing and Storing Breastmilk](#)
- [Thrush](#)

EN:

[http://www.beststart.org/resources/breastfeeding/pdf/BreastfeedingMatters\\_2013\\_low\\_rez\\_reference.pdf](http://www.beststart.org/resources/breastfeeding/pdf/BreastfeedingMatters_2013_low_rez_reference.pdf)

FR :

[http://www.meilleurdepart.org/resources/allaitement/breastfeeding\\_matters\\_FR\\_Nov2013\\_fnl.pdf](http://www.meilleurdepart.org/resources/allaitement/breastfeeding_matters_FR_Nov2013_fnl.pdf)

- [Conduits lactifères obstrués ou bouchés](#)
- [Exprimer et conserver le lait maternel](#)
- [Infection mammaire \(mastite\)](#)
- [Le muguet \(infection\) buccale](#)

### **35. Breastfeeding and Alcohol Use: Parent Knowledge and Behaviours in Ontario, 2011**

*(Best Start Resource Centre with support from the LCBO, 2012)*

The report shares the results of a 2011 survey about parent knowledge and behaviours in Ontario regarding breastfeeding and alcohol use.

[http://www.beststart.org/resources/breastfeeding/pdf/Breastfeeding\\_alcohol\\_survey\\_fnl.pdf](http://www.beststart.org/resources/breastfeeding/pdf/Breastfeeding_alcohol_survey_fnl.pdf)

### **36. Breastfeeding Your Baby - Magnet (guidelines for nursing mothers)**

*(Best Start Resource Centre, 2002, revised 2009)*

This 13 cm by 18 cm fridge magnet is a teaching aid for all working with pregnant and new mothers. It is a good reminder for mothers on how to assess their infant's breastfeeding effectiveness during the first three weeks. Colourful graphics and photographs with minimal text provide an at-a-glance look that new parents find particularly helpful.

Available in print and PDF in [English](#) and [French](#)

Available in PDF only in [Arabic](#), [Filipino](#), [Hindi](#), [Punjabi](#), [Spanish](#), [Simplified Chinese](#), [Tamil](#) and [Urdu](#)

### **37. Breastfeeding Guidelines for Consultants - Desk Reference**

*(Best Start Resource Centre, 2004, revised 2009)*

This laminated desk reference has been revised to reflect current trends in the assessment of breastfeeding in the first 3 weeks. One side contains information on infant feeding, output and weight, while the other side offers more in depth information about the assessment of effective breastfeeding for those working with breastfeeding mothers as well as WHO approved guidelines on supplementation.

EN: <http://www.beststart.org/resources/breastfeeding/pdf/breastfdeskref09.pdf>

FR: [http://www.meilleurdepart.org/resources/allaitement/pdf/brstfding\\_B03\\_F.pdf](http://www.meilleurdepart.org/resources/allaitement/pdf/brstfding_B03_F.pdf)

### **38. Breastfeeding Your Baby - Poster**

*(Best Start Resource Centre, 2003, revised 2009)*

This 61cm by 44cm colour poster has just been revised to reflect the latest trends in the assessment of effective breastfeeding in the first three weeks using graphics, photographs and text. Feeding frequency, infant tummy size, output, weight, growth spurts and general assessment of the infant are covered and can be seen at a glance, making this a vital teaching tool when working with new or pregnant mothers. Information on exclusive breastfeeding is also provided.

EN: <http://www.beststart.org/resources/breastfeeding/pdf/Brstfdpstr.pdf>

FR: [http://www.meilleurdepart.org/resources/allaitement/pdf/brstfding\\_FRE.pdf](http://www.meilleurdepart.org/resources/allaitement/pdf/brstfding_FRE.pdf)

### **39. Drinking Alcohol while Breastfeeding - Physician's Desk Reference**

*(Best Start Resource Centre, 2002, revised 2005)*

This tool for health care providers is to assess and inform pregnant patients about the risk of alcohol use in pregnancy. It includes a table that illustrates the time clearance of alcohol from breast milk of women, according to mother's weight, amount of alcohol consumed and hours since consumption.

<http://www.beststart.org/resources/breastfeeding/pdf/Brstfdpstr.pdf>

### **About This Bulletin**

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## **Other Health Nexus Communications:**

### **Electronic Bulletins**

**OHPE:** Your weekly update on the latest health promotion news, events, jobs and resources, featuring original articles—and much more. Produced in collaboration with Public Health Ontario.

**Le Bulletin de santé maternelle et infantile:** A bulletin featuring information about maternal, newborn and child health promotion, in French.

**Le Bloc-Notes:** A monthly French language bulletin focused on health promotion issues, events, jobs and resources for French-language minority communities across Canada.

### **Online Networks (listservs)**

**The Maternal Newborn and Child Health Promotion (MNCHP) Network:** An electronic network for service providers working to promote preconception, prenatal and child health.

**Réseau de Santé Maternelle et Infantile (RSMI):** An electronic network to share information about preconception, prenatal and child health, in French.

**The Best Start Aboriginal Sharing Circle (BSASC) Network:** An electronic network designed for service providers working with Aboriginal Peoples in areas of preconception, prenatal and child health.

[The Healthy Babies Healthy Children \(HBHC\) Network](#): An electronic network for HBHC program staff.

[Click4HP](#): An international, moderated, dialogue on health promotion, open to anyone who wants to ask questions, share ideas, announce new resources and events. Join the conversation!

### Blogs

[Health Promotion Today / Promotion de la santé aujourd'hui](#): Find out what's making news in health promotion. Our bilingual blog keeps you informed.

[HC Link Blog](#): This blog provides you with useful information on health promotion topics, news, and resources, as well as information on HC Link's events, activities, and resources.

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