# Investing in a Baby-Friendly Ontario

91.3%

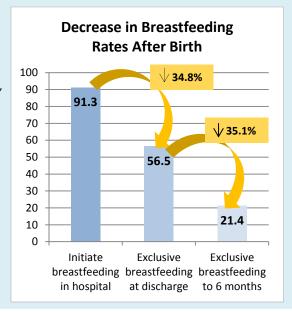
of women initiate breastfeeding in hospital, however only

**56.5%** leave the

hospital exclusively breastfeeding and only

**21.4%** of infants

are exclusively breastfeeding to 6 months of age



Decades of research continue to validate the importance of breastfeeding for optimizing the health of women and children. A joint statement from Health Canada, Canadian Paediatric Society, Dietitians of Canada and the Breastfeeding Committee for Canada (Sept 2012) states:

"Breastfeeding - exclusively for the first six months, and sustained for up to two years or longer with appropriate complementary feeding – is important for the nutrition, immunologic protection, growth and development of infants and toddlers."

Graphs are based on 128 513 births with complete feeding records from BORN Ontario for 2017-18 fiscal year.

## IMPORTANCE OF ADOPTING BABY-FRIENDLY BEST PRACTICES

#### For Mothers and Babies:

Value to Baby

- About 30% reduced risk of asthma before 6 years (Dogaru et al. AJE, 2013)
- ↓ risk of ear infections by 43% (Bowatte et al. Acta Paediatrica, 2015)
- ↓ allergies, diarrhea, SIDS and respiratory infections (RNAO Breastfeeding BPG, 2018)
- 10-25% reduced risk of obesity in children exposed to longer durations of breastfeeding (WHO, 2013)
- Later in life ↓ risk of Type 1 & 2 diabetes (Cardwell et al. Diabetes Care, 2012)
- Bacteria in maternal breast milk enhance the development of a healthy infant gut microbiome (Pannaraj PS et al. JAMA Pediatr 2017)

#### Value to Mother

- 9% lower risk of heart disease and 8% lower risk of stroke for Mothers who breastfeed
- ↓ risk of Type 2 diabetes
- ↓ high blood pressure (Chowdhury, Acta Paediatrica, 2015; Peters et al., JAHA, 2017)

Supports mothers in making an informed decision regarding their infant feeding method including breastfeeding and safe bottle feeding practices.



#### **Families Who Breastfeed Save**

\$1200 to \$7000 on infant formula in the first year alone

\*cost varies across locations within Ontario

# **Quadruple Aim For Hospitals:**



Safe care for infants through evidence-based best practices



Patient satisfaction with consistent knowledge and support from health professionals



Healthcare dollars spent on hospitalizations, trips to the doctor and the purchasing of breast milk substitutes



**Employee satisfaction** - decreased days of absenteeism as a result of fewer infant illnesses, decreased maternal stress, decreased employee turnover, increased job satisfaction, and increased productivity of breastfeeding employees

# For Our Healthcare System:

Exclusive breastfeeding to 6 months has the potential to decrease the risk of upper respiratory infection and otitis media – the **TOP 2** conditions responsible for 130 000 paediatric emergency room visits annually. Avoiding even half of these visits could save almost **\$9 million** a year (Intellihealth NACRS and OCCI, 2016).



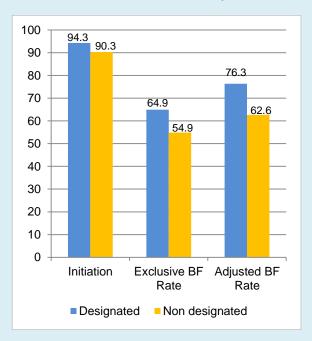
# WHAT IS THE BABY-FRIENDLY INITIATIVE (BFI) AND DOES IT MAKE A DIFFERENCE?

BFI is a global standard that was established in 1991 by the WHO and UNICEF to improve worldwide breastfeeding initiation and duration rates. This is captured in the 10 best practices below, which are research-based, updated regularly and proven to have an impact on the success of breastfeeding. BFI supports mothers in making informed decisions around infant feeding free from commercial influences and supports all families regardless of their feeding decision.

Research shows that: There is a cumulative impact on breastfeeding success with the number of steps implemented Mothers who give birth in a baby-friendly designated hospital are 6X more likely to achieve their infant feeding aoals

10 Steps BFI Best Practices	
1	<ul><li>a. Comply with the WHO Code</li><li>b. Written infant feeding policy</li><li>c. Ongoing monitoring and data collection</li></ul>
2	Health provider education
3	Prenatal education on infant feeding
4	Uninterrupted skin-to-skin after birth
5	Support initiation and maintenance of breastfeeding, addressing any challenges including separation
6	Exclusive breastfeeding for the first 6 months
7	24-hour rooming-in and comfort measures during painful procedures
8	Responsive, cue-based feeding
9	Counsel mothers on use and risk of bottles, nipples and pacifiers
10	Seamless transitions with coordinated and timely access to ongoing care and support

# Designated Hospitals vs. Non-Designated Hospitals Who Comes Out On Top?



Today only **14%** of babies in Ontario are born at a BFI designated facility

## **NEXT STEPS**

99(5), 2018)

(Declercq et al, AJPH

#### INVEST IN THE HEALTH OF YOUR COMMUNITY

## Your Leadership Role:



- Make BFI implementation a program or corporate quality improvement goal
- Engage and support multidisciplinary teams with patient representatives to implement and sustain BFI best practices
- Provide resources and support for required staff education
- Create a corporate philosophy of support for staff and visitors who are breastfeeding or pumping
- Monitor outcomes through BORN reports
- Recognize milestones as best practices are implemented to achieve a Baby-Friendly culture

Resources to support BFI are available from www.breastfeedingresroucesontario.ca











