



PEI Breastfeeding Coalition Membership

- Queen Elizabeth Hospital
- Prince County Hospital
- West Prince Community Health Services
- East Prince Public Health Nursing
- Queens Public Health Nursing
- Eastern Kings Public Health Nursing
- Southern Kings Public Health Nursing
- East Prince Pediatricians
- Department of Health & Social Services
- PEI Reproductive Care Program
- Queens Pediatricians
- UPEI School of Nursing
- Kids R' First Family Resource Centre
- Centre de Ressources Familiale
- Carousel Family Resource Centre
- LaLeche League
- PEI Midwives Association
- Consumer Representative
- Association of Nurses of PEI
- Doula Association of PEI

PEI Breastfeeding Coalition

Strategic Plan

“Working to make breastfeeding the cultural norm for infant feeding on PEI”

July 2000

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PEI Breastfeeding Coalition

1.0 Introduction

The PEI Breastfeeding Coalition (PEI~BFC) is a broad based provincial working group dedicated to the promotion of breastfeeding on Prince Edward Island. The Coalition is multi-disciplinary, represents all regional health authorities across the Province, and has representation from community partners and the Department of Health and Social Services. Constituted in early 1999, an initial task of the PEI~BFC was to establish a strategic planning framework, which would guide its decisions and activities over the next two to three years. This document describes the issue and identifies the group's mission, vision, values, goals, objectives, and a short term action plan.

2.0 Background

2.01 The Baby Friendly Initiative

In 1991, UNICEF and WHO launched the Baby Friendly Hospital Initiative (BFHI). BFHI is an international program, based on WHO/UNICEF "Ten Steps to Successful Breastfeeding". BFHI is a program to certify hospitals and maternity clinics as "Baby Friendly". The Breastfeeding Committee of Canada (BCC) is Canada's national authority in the implementation, assessment, and monitoring of the BFHI. In 1998, the BCC adopted the BFHI as a primary strategy to achieve its mission. Reflecting the Canadian situation where the continuum of care is seen as extending beyond the hospital, the name of the initiative was changed to "Baby Friendly Initiative"(BFI). Currently, the BCC is in the process of implementing the BFI Nationally. As part of this process, local and regional groups and networks are being established across the country.

The PEI Breastfeeding Promotion Group, a working group dedicated to the promotion of breastfeeding on PEI, had been in place since 1992. After the adoption of BFI by the BCC, the PEI Breastfeeding Promotion Group chose to act as a Provincial coordinating group to guide the adoption of the BFI on PEI. Reflecting this new mandate, the PEI Breastfeeding Promotion Group underwent a process of reorganization beginning in early 1999. This process involved a number of steps: 1) expansion of membership in early 1999; 2) initiation of a strategic planning process in the spring of 1999; and 3) change of committee name in June 1999 to the PEI Breastfeeding Coalition.

In a letter to the BCC dated August 31, 1999, Mildred Dover, the PEI Minister of Health and Social Services, formally designated the PEI~BFC with the responsibility of implementing the BFI in this province.

2.02 What is the Issue?

“Human milk is uniquely superior for infant feeding and is species specific; all substitute feeding options differ markedly from it”.¹ The Canadian Pediatric Society, Dieticians of Canada, and Health Canada recommend exclusive breastfeeding for at least the first four months of life and continuing breastfeeding and complementary foods for up to two years of age and beyond.² Breastfeeding is beneficial for mothers and babies. For example, human milk protects the infant against gastrointestinal and respiratory infections and is associated with enhanced cognitive development. For mothers, breastfeeding is associated with reduced post-partum bleeding, delayed resumption of pregnancies, improved post-partum bone remineralization and reduced risk of ovarian cancer.³ Furthermore, breast milk is a natural, economic, and readily available source of infant nutrition.

The National Population Health Survey (1994-95) found that 73% of women reported initiating breastfeeding, however, 40% of the women who had initiated had stopped within three months.⁴ There is concern that while rates of initiation have dramatically improved since the 1960's, many infants are not being breastfed long enough. Table 1 presents a comparison of initiation and duration rates across Canada for 1994-95. Despite the obvious advantages of breastfeeding, rates of breastfeeding initiation and duration remain lower in Atlantic Canada than any other region. Only 53% of women from the Atlantic Region initiated breastfeeding and 51% of these breastfed less than three months. The survey also found that women of lower income, education, and younger age, as well as single women tended to have lower initiation and duration rates.

In 1998, 59% of PEI women were breastfeeding at the time of discharge from hospital. This rate has increased gradually from 48% in 1990. Figure 1 presents the breastfeeding rates at discharge for the five health regions in PEI from 1992-1998⁵. Although there is a gradual increase in rates across regions, regional variations exist and rates remain unacceptably low, constituting a significant health issue for PEI women and children.

¹American Academy of Pediatrics Work Group on Breastfeeding. “Breastfeeding and the Use of Human Milk”, *Pediatrics*, 1997;100:1035-9.

²Canadian Pediatric Society, Dieticians of Canada and Health Canada. *Nutrition for Healthy Term Infants*. Minister of Public Works and Government Services, Ottawa, 1998.

³Health Canada Canadian Perinatal Surveillance System. *Breastfeeding Fact Sheet*. Health Canada Reproductive Care Unit. (www.hc-sc.ca/hpb/lcdc/brch/factshts/brstfd_e.html). January 4, 1999.

⁴*National Population Health Survey Supplement (1994-95)*. Health Canada. Ottawa.

⁵*PEI Reproductive Care Program 1998 Perinatal Database Report*. PEI Reproductive Care Program, 2000.

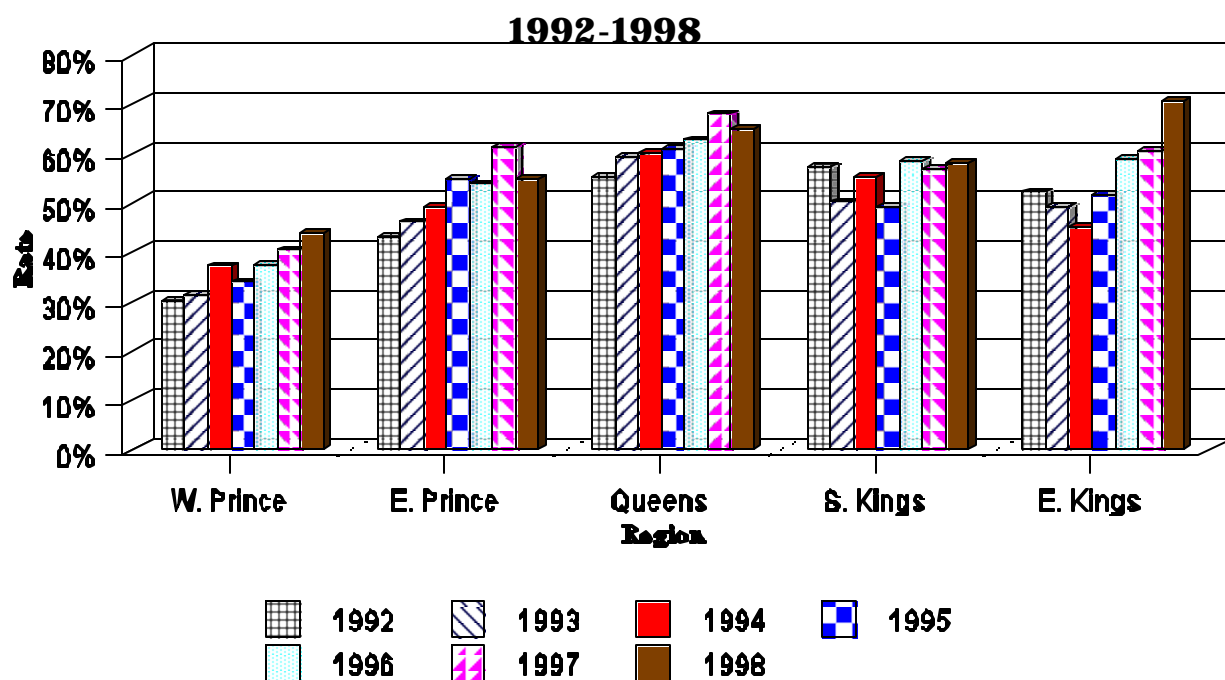
Table 1: Prevalence and Duration of Breastfeeding in Canada

1994-1995

	Population of women with children less than age 5 (000s)	% Breastfed	Duration child was breastfed		
			< 3 mths	3-6 mths	> 6 mths
Total	1,667	73	38	31	31
Region					
Atlantic	114	53	51	35	—
Quebec	407	54	43	34	—
Ontario	668	78	38	29	—
Prairies	268	86	30	35	33
BC	209	87	39	—	34

Source: National Population Health Survey Supplement 1994/95

Figure 1: Breastfeeding Rates at Discharge by PEI Health Region



Source: PEI Reproductive Care Program 1998 Perinatal Database Report

3.0 PEI Breastfeeding Coalition Strategic Direction

Vision:

Breastfeeding is the cultural norm for infant feeding on PEI.

Mission:

The PEI Breastfeeding Coalition will provide leadership in the promotion, protection, and support of breastfeeding for women, children, and families on PEI through collaboration across community, business, and government sectors.

Values:

PEI Breastfeeding Coalition will:

- Be *realistic*
- Strive for *continuous improvement*
- Work by *consensus*
- Listen so that *all voices are heard*
- Recognize that *people are responsible to speak up* in order to be heard
- Ensure that *all voices are treated equally*
- Ensure that *group decisions are respected*
- Emphasize *collaboration* and seek to develop *partnerships*
- Value partner *opinions*
- Emphasize *open mindedness* and *respect* for the knowledge and varied perspectives of members and partners
- Be *supportive* of each other
- Take an *evidence based* approach to planning and decision making
- Value *community opinion*
- Work with *integrity*

Goal:

Foster strong and supportive families and communities by enhancing breastfeeding as the ideal choice of infant feeding on PEI

Objective 1: To protect breastfeeding on PEI

Outcomes

- c Mothers breastfeed wherever they wish
- c Mothers breastfeed for as long as they wish
- c Policies, supportive of breastfeeding practise, are designed and implemented
- c Mothers have access to resources and assistance to support initiation and continuation of breastfeeding

Objective 2: To increase the initiation and duration of breastfeeding on PEI

Outcomes

- c More women choose to initiate breastfeeding
- c Breastfeeding duration rates increase
- c Health professionals have the skills to support initiation and continuation of breastfeeding

4.0 Action Plan

Strategy to Promote, Support & Protect Breastfeeding	Action	Timeline
Improve Quality & Consistency of Care by Health Professionals	1. Recruit Queens Region physician to Coalition	/ December 1999
	2. Update "Breastfeeding Fast Facts"	/ May 2000
	3. Plan and implement a provincial breastfeeding workshop	September 2000
	4. Develop avenues for peer/professional education	On going
	5. Submit articles to existing newsletters	Future
Develop Marketing Strategies	1. Access social marketing person	/ March 2000
	2. Develop logo and letterhead	/ May 2000
	3. Develop social marketing plan	January 2001
Garner Organizational Support	1. Continue to access DHSS & PEI RCP resources and support	On going
	2. Encourage provincial & regional management endorse Coalition Strategic Plan	December 2000
	3. Encourage community partners endorse Coalition Strategic Plan	December 2000
Disseminate Information (Broad Sector)	1. Reassess idea of web site, explore idea of web page linked to LLL Topic of the Month	Future
	2. Utilize Health Information Resource Centre	Future
Influence Policy Change	1. Lobby for breastfeeding to be on the agenda of the HCD Strategy	March 2001
	2. Influence focus of CPNP programs to keep BF as a priority	March 2001
	3. Promote the development and adoption of a PEI policy on BF	January 2002
	4. Address concerns about BF practices from referral hospitals	Future
	5. Develop hospital vendor policy on marketing to mothers	Future
Educate & Support Mothers	1. Include breastfeeding in prenatal curriculum eg., Prenatal classes	December 2000
	2. Encourage doctors to provide ongoing education to prenatal women on the benefits of breastfeeding	On going
	3. Review, research and explore access to adequate supports in hospital and in the community (goal: 24 hours/day, 7 days /week)	March 2001
	4. Review, research and explore lactation consultant positions	March 2001
	5. Review, research and explore establishment of breastfeeding clinic(s)	March 2001
	6. Foster establishment of breastfeeding support groups for moms	Future
	7. Get breastfeeding into school curriculums	Future
Promote Sustainability of the Coalition	1. Ongoing , according to priorities established	Ongoing
Conduct Needs Assessment/ Research	1. Capitalize on LoPHID Initiative to conduct needs assessment	/ March 2000
	2. Explore a research proposal related to epidurals and breastfeeding	Future
Conduct Evaluation	1. Develop an evaluation framework	December 2000