



Provincial Council for Maternal and Child Health Breastfeeding Services and Supports Work Group Terms of Reference

Background/Context

Building a brighter future for children begins by ensuring a good start to life, with access to appropriate levels of care for mothers and newborns in Ontario. We require an integrated and coordinated provincial system of maternal and neonatal services capable of delivering timely, equitable, accessible, high quality, evidence-based, family-centred care in an efficient and effective manner.

Background

The World Health Organization ⁽¹⁾ and Health Canada ⁽²⁾ recommend that infants should be exclusively breastfed for the first six months of life as breast milk is the best option for optimal growth, development and health. Thereafter, to meet their evolving nutritional requirements, infants should receive nutritionally adequate and safe complementary foods while breastfeeding continues for up to two years of age or beyond.

Breastfeeding benefits have been well documented and demonstrate significant health and social health outcomes for both the infant and the mother, including disease prevention and developmental benefits such as mother-infant bonding. Within Canada current data indicates a relatively high initiation rate, however, duration rates are well below international and national guidelines. In 2003, Statistics Canada reported that, in Ontario, 87% of women initiated breastfeeding while in hospital yet only 15% maintained exclusive breastfeeding at 6 months ⁽³⁾.

The likelihood of exclusive breastfeeding tends to rise with the mother's age, education and household income. Exclusive breastfeeding is more common among married than single women, immigrant than non-immigrant women and urban than rural women.

Workgroup Purpose

To provide cost-effective recommendations and options to support the delivery of breastfeeding support and services with a focus on improved breastfeeding initiation and duration rates.

Objectives

The Breastfeeding Services and Supports Work Group will:

- Conduct a current state analysis of the landscape of Ontario investments in breastfeeding services and supports, including gap identification, utilizing the MOHLTC's province-wide hospital survey on breastfeeding support and services
- Identify leading best practices related to increasing and sustaining breastfeeding initiation and duration rates

- Identify priority areas for enhanced breastfeeding services including, but not limited to, specific demographic and geographic areas
- Identify strategies for promoting the Baby Friendly Hospital initiative
- Recommend strategies for promoting the WHO Code of Marketing of Breast Milk Substitutes
- Identify areas where greater system integration is necessary
- Identify low-cost, evidence-informed and cost-effective recommendations and options to improve rates of breastfeeding initiation and duration

Membership

The Work Group membership will be trans-disciplinary and the following areas of expertise will be represented on this Work Group:

- Community Health Centre
- Dietician
- Family Physician
- Lactation Consultant
- Midwife
- Obstetrician
- Paediatrician
- Primary Care Nurse Practitioner
- Public Health
- Registered Nurse
- Registered Nurses' Association of Ontario

Reporting Relationship

The Breastfeeding Services and Supports Work Group will report to the Maternal-Newborn Advisory Committee of the Provincial Council for Maternal and Child Health.

Frequency of Meetings

To be determined

Timeframe

November 2009 to April 2010

Decision-Making Process

Members share accountability for decisions. There should be open and direct communication based on honesty, respect and transparency, to ensure that all perspectives are heard. Decisions should be evidence or most-promising practice based. Decisions will be made by consensus whenever possible.

Conflict of Interest

Members of the Breastfeeding Services and Supports Work Group shall disclose to the chair of their group, without delay, any actual or potential situation that may be reasonably interpreted as either a conflict of interest or a potential conflict of interest.

Communication and Confidentiality

The Breastfeeding Services and Supports Work Group material should be treated as confidential. It will be clearly stated when the Working Group material is no longer confidential.

References

- (1) World Health Organization & UNICEF. *Global Strategy for Infant and Young Child Feeding*. Geneva: World Health Organization. (2003)
- (2) Health Canada. *Exclusive breastfeeding duration – 2004 Health Canada Recommendation*. (2004). Retrieved from http://www.hc-sc.gc.ca/fn-an/nutrition/child-enfant/infant-nourisson/excl_bf_dur-dur_am_excl-eng.php
- (3) Public Health Agency of Canada. *Canadian Perinatal Health Report*. 2008