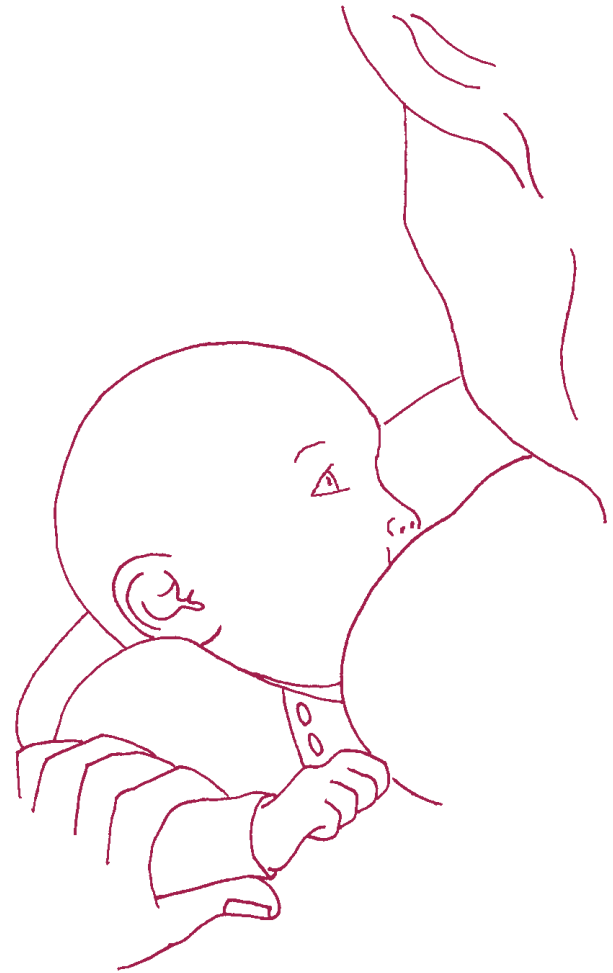


Supporting Breastfeeding in Child Care

A pregnant mother generally makes the decision to breastfeed before her baby is born. Her decision is strongly influenced by the level of support she receives from the baby’s grandmothers and/or her partner. For expectant mothers, this decision can be made all the more difficult by fear of the unknown, fear of failure and feeling overwhelmed by other responsibilities and demands. If a new mother returns to work, her stress may increase; it may seem easier for her to give up breastfeeding than to continue.

Quality child care includes supporting the success and continuation of breastfeeding. Balancing the various needs and demands of mother, baby and the other children in care is a juggling act that calls for flexibility. A flexible child care provider is a valuable partner in supporting the mother’s decision to continue to breastfeed.

The World Health Organization and the Canadian Paediatric Society recommend breastfeeding into the second year of life. Breastfeeding with complementary foods into the second year is up to three times less expensive than other practices.



Is Your Setting Breastfeeding-Friendly?

- ✓ Are there posters and photographs on the walls of babies being breastfed?
- ✓ Do you provide comfortable spaces for breastfeeding mothers to feed or express milk?
- ✓ Are brochures, pamphlets and other resources about breastfeeding displayed for easy access?
- ✓ Do staff members willingly tell visitors about your breastfeeding policies?
- ✓ Are breastfeeding policy and practice materials included in your information package?
- ✓ Are current and prospective parents encouraged to drop in and view the environment?
- ✓ Are fathers included in discussions about breastfeeding?
- ✓ Do staff members know where to refer parents for additional breastfeeding resources?

What Science Says about Breastfeeding

- Breast milk is uniquely composed to meet the nutritional requirements of the baby. Human milk is species-specific and changes according to the baby's needs.
- The abundant supply of fatty acids in breast milk leads to optimal nerve and brain development in the baby.
- Breast milk cannot be chemically reproduced. Initial colostrum is unique to each mother and her baby.
- Nutrients in breast milk change to meet baby's needs both with the age of the baby and throughout the day. In the morning, breast milk has a higher volume/lower fat content that gradually reverses throughout the day. In the evening, a lower volume/higher fat content allows the baby to stay full longer.
- Babies who are breastfed have increased protection against acute and chronic illnesses such as meningitis and respiratory, ear and gastrointestinal infections.
- Babies who are fed exclusively breast milk have a lower risk of Sudden Infant Death Syndrome (SIDS).
- A breastfed newborn recognizes his mother's skin smells just a few days after birth. A newborn's eyes can focus on objects about nine inches away — the distance from a nursing baby's face to the mother's face.
- Breastfeeding promotes mother-baby attachment, which increases baby's cognitive, social and emotional development.
- Women who breastfeed have a reduced risk of ovarian and breast cancers.

Creating Breastfeeding-Friendly Child Care

1. Individual breastfeeding support plans

Work with family members to develop the baby's individual breastfeeding support plan. Identify who is to do what and when. Update individual plans regularly.

- ✓ Support plans should include details about how breast milk is to be stored and served (e.g., bottle heated carefully to a precise temperature, baby cradled in your arms).
- ✓ Ensure that mother clarifies what she wants you to do if baby is hungry and she is late, or her supply of expressed breast milk is gone.
- ✓ Encourage nursing mothers to come and breastfeed and/or express milk comfortably and at their convenience.

2. Feeding policies

Develop your policies around breastfeeding in consultation with families, board members, staff and others in your community. Support each family's choice in a non-judgmental manner.

- ✓ Allow flexibility in programs and schedules so baby's needs are met.
- ✓ Provide opportunities for communication and education of parents and staff.
- ✓ Offer staff professional development opportunities on breastfeeding and nutrition in infancy and childhood.
- ✓ Promote your setting as breastfeeding friendly.

3. Communication and education

Be sensitive to the needs of *all* the children in your care. Present a positive, warm, non-judgmental attitude and behaviour towards all feeding decisions and practices.

- ✓ Foster ongoing dialogue between parents and staff about how to put breastfeeding policies into practice.
- ✓ Encourage peer support for breastfeeding mothers/families.
- ✓ Provide breastfeeding information through newsletters and bulletin boards
- ✓ Establish a network of volunteers to mentor breastfeeding mothers.
- ✓ Consult with external community groups to train staff and support breastfeeding families.

Community Supports

Breastfeeding Committee of Canada
Breastfeeding support group
Community health centre
Lactation consultant

La Lèche League
Midwife/physician
Public health department
Sudden Infant Death Syndrome of Canada

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