



LEARNING FROM STORIES:

Breastfeeding and Younger Women

*best start
meilleur départ*)

by/par health *nexus* santé

 Ontario

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Acknowledgments

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The Best Start Resource Centre thanks the reviewers who contributed from their area of expertise, including:

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Citation

Best Start Resource Centre (2016). *Learning from Stories: Breastfeeding and Younger Women*. Toronto, Ontario, Canada: author.

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Funding

This document has been prepared with funds provided by the Government of Ontario. The information herein reflects the views of the authors and is not officially endorsed by the Government of Ontario. The resources and programs cited throughout this resource are not necessarily endorsed by the Best Start Resource Centre.



Introduction

Through funding from the Ministry of Health and Long-Term Care, the Best Start Resource Centre has been supporting Ontario service providers in addressing populations with lower rates of breastfeeding. In developing this resource, the Best Start Resource Centre used a Healthy Communities Approach¹ to explore the actions being taken in Ontario to support breastfeeding and younger women.

The qualitative² results of the interviews were gathered into stories by the interviewers/writers.

We know that narrative is the primary form of human understanding³. In telling these stories, we hope to help health care and social service providers in Ontario to protect, promote, and support breastfeeding. We thank the women, health care and social service providers who shared their wisdom and insights through these stories.

Joan Hepp, a Registered Nurse and International Board Certified Lactation Consultant (IBCLC), completed the interviews for the case stories in this booklet. She reports the following:

Teenage mothers can and will breastfeed if given support and acceptance. Many of the young mothers in the following stories found their support and acceptance through peer role models. As one young mother put it, “Everyone needs a buddy system.” Sometimes support happened informally through observation in a prenatal class or La Leche League meeting. Sometimes it was found through social media. Sometimes the connection was made through a formal buddy program.

Mary-Lynn Houston-Leask, Project Lead for Community Breastfeeding Support Circles at M’Wikwedong Native Cultural Resource Centre, agrees, “The best way to learn about breastfeeding is to surround yourself with other women who are breastfeeding successfully.” She goes on to say, “It is our jobs as service providers to seek out those role models, give them confidence, and help them to see just how valuable they are in teaching others.”

As these stories inspire you, I hope that you will be on the lookout – not only for unique ways of mentoring but also for new ways to surround young mothers with support and acceptance.

Key Informant

- Mary-Lynn Houston-Leask, La Leche League Leader
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CASE STORY ONE:

Breastfeeding Buddies Provide Peer Support in the Region of Waterloo

“No one else can feed my baby – not my caseworker, or my boyfriend or my mother. It is just me doing it for my baby, and I feel very powerful!”

– Anonymous

The above quote comes from a 17-year-old mother who participates in the *Breastfeeding Buddies Program* in the Region of Waterloo. This peer support program runs through the Kitchener Downtown Community Health Centre.

Michelle Buckner has been involved with the *Breastfeeding Buddies Program* for 12 years. For the past five years, she has been the Program Coordinator. While the program is open to all mothers, teen mothers especially benefit from the one-to-one support. Michelle says, “I have learned a great deal from every mother I have worked with over the 12 years I have been providing breastfeeding support. But I do have to say that working with teen mothers has been especially rewarding.”



While Michelle gives much to the teens in the program, she admits to getting much more in return. She says, “I feel I have gained a great insight into my own personal beliefs and biases by experiencing the honesty that young mothers demand. With that in mind, I strongly feel that their voices need to be heard, and their unique needs addressed.”

The program’s success is based on developing a trusting relationship with each mother by listening to what they are saying. Michelle says, “We often take away their choices by assuming that we know what they need. We need to listen to them.” By connecting with teen mothers on their level, Michelle demonstrates that she is listening. She explains, “While we do encourage good nutrition at the group meetings, I bring pizza and other teen-approved foods because that is where they are.”

Michelle also gains trust by providing hands-on learning through the free, peer-led, prenatal workshops: *Me? Breastfeed?* Experienced breastfeeding mothers, already trained through the *Breastfeeding Buddies Program*, facilitate the two-hour *Me? Breastfeed?* workshops. These workshops are held at Ontario Early Years Centre (OEYC) locations throughout the Region of Waterloo and are also offered in supported housing for young mothers. Michelle finds that this is a good time to introduce the *Breastfeeding Buddies Program* to encourage young, pregnant women to be thinking about breastfeeding support even

before the baby is born. Many of the referrals for the *Breastfeeding Buddies Program* come from the *Me? Breastfeed?* workshops but postnatal referrals are always accepted.

One of the first topics addressed in the *Me? Breastfeed?* workshop for young mothers is money. Michelle asks, “Who would like to be able to buy a new iPhone?” Usually, the majority of the participants indicate that they would. Michelle then breaks down the financial costs of not breastfeeding. This exercise helps to emphasize that for young mothers who do not breastfeed, 40% of their income may go to feeding their babies leaving little money for purchasing that new iPhone, other extras, or routine costs.

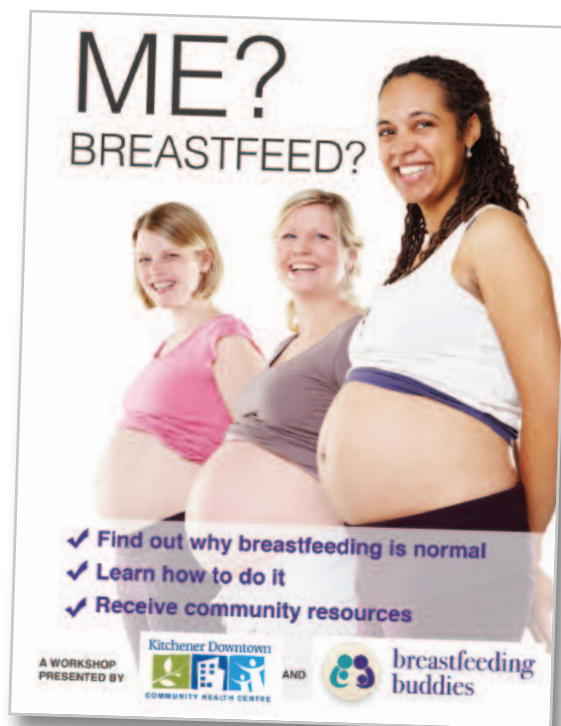
One mother said the following about the *Me? Breastfeed?* workshop and her experience with her Breastfeeding Buddy.

“When I had my first baby, I was confident that I would breastfeed; but I had no idea what that meant. Health care professionals can encourage you to breastfeed, but they aren’t there in the middle of the night. They aren’t there when your family members are less than supportive. After taking the *Me? Breastfeed?* workshop I was more confident than ever about giving my child the best start possible. I knew where to call when I had a problem. I would call someone who had lived (the) experience. Someone who had that challenge before and had overcome it. It is one thing to speak to someone who knows why you should breastfeed; but it is more empowering to know someone who can listen to you, celebrate your successes, and provide practical and attainable advice and support when it’s needed. My Breastfeeding Buddy was the reason that my child was breastfed past six months.”

The *Breastfeeding Buddies Program* in the Region of Waterloo currently has 147 trained volunteers and includes 14 mothers from priority populations, nine of whom are teens. Michelle matches a new referral to a suitably-trained volunteer who then initiates the contact and establishes a rapport. The peer/mother team decide together on a schedule for contact which happens more frequently in the early postpartum period. Extra help is also needed in the critical growth spurts at six weeks, three months, and at six months with the addition of solids. The peer/mother relationship continues for as long as needed with most continuing for six to nine months.

When matching volunteers to mothers, one criterion Michelle uses is age and the teen-to-teen matches are most successful. “Teens are most responsive to peer pressure so let’s use it! It works!” states Michelle.

The influence of peers is important. Peers can model breastfeeding for each other. Peer norms and support can lead to healthy choices such as breastfeeding. Young mothers are motivated and encouraged to breastfeed when they see other young mothers breastfeeding. Before becoming pregnant, many younger women have not thought about how to feed a baby. That is why prenatal education and exposure is important.





Michelle has witnessed improved breastfeeding duration among the peer-supported mothers. She has also seen the supported mother go on to become a volunteer herself. “That’s proof that our program is working,” she adds.

One volunteer states “My role as a Breastfeeding Buddy has provided me with the opportunity to support other families in giving their babies the best start. Empowering them in living the message that they can do this, has allowed me to give back. I benefited from the support of a Breastfeeding Buddy with my first child. It is very fulfilling to use my knowledge as a Breastfeeding Buddy and my own lived experience to support others.”

Volunteers in the *Breastfeeding Buddy Program* are provided training based on the World Health Organization (WHO) 20-hour course. Each volunteer receives a manual with course notes, a job description, and a resource section for use as needed in supporting mothers. Ongoing support is also provided by the program coordinator.

The Breastfeeding Buddy system in the Region of Waterloo does not stop after the prenatal workshop or the one-to-one match. The *Breastfeeding Buddy Program* continues to offer group support through weekly breastfeeding cafés. The free, weekly, drop-in sessions are housed throughout the area at OEYC locations. The idea for the cafés originated with the mothers themselves who requested help with sorting through “too much information.” These informal groups are also facilitated by peer volunteers and the topics for discussion at the cafés vary each week based on individual needs.

One of the positive outcomes that come from running these programs in the community is the partnerships that have formed. Parents make the connection to OEYCs prenatally, and it continues into the postnatal and parenting period. “This is a win-win situation for everyone,” comments Michelle.

What is next for teen breastfeeding programs in the Region of Waterloo? Michelle is already working on the production of a documentary film on breastfeeding. The film could eventually be seen all across Canada. When asked about privacy and confidentiality issues using teens in the filming, she responded “They are so excited to be doing this. They want their voices heard!”

Another exciting project is the production of a graphic resource which will be used for learning purposes. Michelle explains, “This idea came from the teens themselves who requested a picture book rather than written material. And it is another great example of how we need to listen to them.”

Michelle has seen many positive changes in the teens she has supported. She commented on one such teen mother. “She felt so empowered by her breastfeeding experience that she made other positive changes in her life and returned to school.” For Michelle and others in the *Breastfeeding Buddy Program*, these positive changes validate the work that the program is doing.

Key Informants

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Resources

Breastfeeding Buddies Program, Region of Waterloo

Me? Breastfeed?

CASE STORY TWO:

London La Leche League Provides Acceptance

All people have biases. Examining our personal biases, particularly where teen pregnancy is concerned, will assist us in our work with young mothers.

“We owe it to everyone we serve, regardless of their age, education, or status in life, to provide the best support possible. Everyone wants the best for their baby, and we have to make sure that happens,” states Jennifer Prince a La Leche League (LLL) Leader in London Ontario.

Jen has experienced bias first hand. Although she was 25 years old and married at the time of her first pregnancy, she had a youthful appearance and was mistaken for a 15-year-old mother-to-be. “A lady behind me in the store commented to those around her that someone my age should not be having a baby,” recalls Jen. “I turned and showed her my wedding ring and told her my true age, which did elicit an apology.”

Jen, who is now a mother of four children, was able to change this embarrassing experience into a learning opportunity. She remembers this incident when dealing with the young mothers she serves. It has helped her to treat everyone she meets with the respect and dignity they deserve. “Every mother deserves to be given a chance,” states Jen. “If we believe in them, they will believe in themselves.” Jen also reminds us that, “Sometimes judgement gets in the way of the village it takes to raise a child. This is especially true of mothers who are bringing up their babies as marginalized members of society.”

One of the things Jen recalls from her training as an LLL Leader was the Bias/Acceptance Exercise.¹ She remembers being asked to think about a situation that might elicit a gut reaction and try to turn it around. She used the example of a toddler using a soother. “Instead of thinking negatively of the toddler’s mother, I learned to think about what the circumstances might be behind it (e.g., maybe the child was ill) and to be more accepting.”

According to the LLL Leaders’ article, *Keeping the LLL Message Clear*,² biases are the ideas that define our expectations – things we think of as right. They can interfere with communication by closing our minds to new information. They also cause us to send conversation-stopping messages because we feel threatened. “We have to step away from our own beliefs and accept the mothers where they are,” encourages Jen.

Jen recalls a young mother that had been giving her baby bottles who came to her for breastfeeding help. The young mother told Jen, “I asked the nurse in the hospital why my baby had been given bottles because I knew I wanted to breastfeed. The nurse said that it’s never going to work out, so you might as well give bottles.” Jen adds, “Sometimes it’s hard for these mothers to ask for help when everyone doubts you.”



The LLL Bias/Acceptance Exercise¹ offers these steps to identify biases that may affect communication:

- Look at a belief you hold strongly.
- Identify the reasons for it.
- Understand and recognize your right to your beliefs.
- Identify reasons for different beliefs and approaches.
- Understand and recognize that people who have different beliefs have the same rights.
- Be willing to integrate other people's information into your approach to helping.

The LLL Bias/Acceptance Exercise¹ and the philosophy of LLL remind us to examine our deeply-held beliefs and recognize why we hold them. We are reminded that other people have different values and goals and that their values and goals also have roots in their experiences and deserve our respect.

The *Keeping the LLL Message Clear*,² article asks if we are more comfortable talking to those who agree with us and share our goals and values than to those who are still attached to the sort of common cultural values that we don't share?

Currently, the LLL in London does not provide a young mothers support group, but Jen is hopeful that the idea will be revisited one day. "There are different issues for someone in high school or college than there are for someone living with a double income," states Jen. The need has been identified to provide a group for the young mother and for now, "All mothers are welcome to any meeting."



Sarah attended her first LLL meeting with another young mother, Fleur. Sarah recalls being pregnant with her daughter at the time she first met Fleur. They met at another group for young mothers. Fleur was breastfeeding her 1-year-old son. Sarah recalls being shocked at first, and says “I didn’t know anyone who had breastfed and didn’t even know if I could do it.” But Fleur convinced her, and Sarah says, “Now she is my best friend!” That was three years ago, and both mothers continue to breastfeed their children and provide support to each other.

Sarah also had a supportive partner. “He went online when we first got home from the hospital and found the La Leche League Canada (LLLC) website. He contacted the Leader; she came right to the house and helped me with positioning. It was so much easier when I learned how to feed her lying down.” recalls Sarah.

Sarah also remembers facing many challenges while establishing breastfeeding. However, perceived low milk supply, engorgement, thrush, reflux, and even mastitis did not stop her. She recalls that her friend, Fleur, and the LLL Leaders kept her going. She now wants other young mothers to know that they can do it too. Sarah says, “There is always a solution to any problem, so don’t give up!”

This dedicated young mother also weathered criticism from family, professionals, and even total strangers. “I had pressure from my family to ‘give a soother,’ ‘you are nursing too much,’ ‘cover up when breastfeeding in front of other people.’ Everyone had advice!” she states. Sarah remembers the stares when breastfeeding on the bus. She discovered that baby wearing was the solution. “No one even knew that I was breastfeeding.”

Sarah feels very positive about the acceptance she has received from La Leche League. So much so that she and her friend, Fleur, are pursuing Leader training. Sarah wants other mothers to know that you need to have at least one person who can guide you through. You need a buddy system.

In London, the La Leche League is making a difference for young mothers through acceptance and a buddy system.

Key Informants

- Jennifer Prince
La Leche League Leader
- Sarah, mother



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CASE STORY THREE:

Sudbury Better Beginnings Better Futures

It takes a village to raise a child.

– African proverb

The *Better Beginnings Better Futures* (BBBF) project had its origin in the Ontario Ministry of Community and Social Services in response to a health study revealing that one in six children have emotional or behavioural issues. These children were more likely to come from families who receive social assistance or live in subsidized housing. For over 25 years BBBF has been making a difference across Ontario in the lives of children and their families.

Through BBBF, funding was provided to at-risk communities who submitted proposals for grants that would address the following goals:

- To reduce social, emotional, or behavioural problems in children.
- To promote social, emotional, behavioural, physical, and educational development in children.
- To strengthen the abilities of parents and families to effectively respond to the needs of their children.
- To develop high-quality programs for children from birth to 4 years of age or from 4 to 8 years of age and their families to effectively respond to the local needs of the community.
- To encourage local parents and the broader community to participate as equal partners with service providers to plan, design, and carry out programs for children and families.
- To establish partnerships with existing service providers and educational organizations and to coordinate program activities collaboratively.



The Sudbury communities of Flour Mill and Donovan received a BBBF grant. Today they are providing child-centered activities and program development for the residents of these communities. One such program is *Baby's Breath*, which has been providing weekly support to young pregnant and parenting families since 2004.

BBBF Program Manager, Johanne Thompson, says of *Baby's Breath*, “We share experiences and offer nutritional support in an accepting social environment. We offer prenatal and parenting education in a non-judgemental manner.” The program also offers many forms of personal support such as labour, birthing, and breastfeeding help. Program staff also assist with housing, child care, and court issues as needed. “And we have fun!” adds Johanne. “We offer activities such as listening to the baby’s heartbeat, prenatal and parenting photo shoots, and scapbooking. We enjoy holiday celebrations, day trips, arts and crafts for babies and toddlers, and playgroups.”

One mother comments, “At *Baby’s Breath*, they started to give me more confidence as a parent. They believe in you and know you can be a good parent.” Another mother commented, “When I came here I created friends like a second family.”

As the title *Better Beginnings Better Futures* reflects, if children start life with a better beginning they are more likely to have a better future. What better start in life than to breastfeed?

Through *Baby’s Breath*, breastfeeding support for a young mother is offered in a variety of ways. “We have videos and discussions in our prenatal curriculum. We discuss important issues such as the stigma attached to teen mothers and what to expect during the hospital stay,” comments Johanne. Home visits are offered at the critical times of 48 hours, 72 hours, and again in one week. Mothers are encouraged to return to the group for ongoing breastfeeding support as soon as they are ready. “We have the services of Stephanie Langille, an International Board Certified Lactation Consultant (IBCLC). Stephanie volunteers her time to the group for breastfeeding support” adds Johanne.

Johanne and others in the program have noticed many positive outcomes from the *Baby’s Breath* program. Improved breastfeeding initiation is among them. “It’s rare today that a mother in our program doesn’t try to breastfeed,” states Melissa Long, BBBF Program Assistant. “Young mothers seem to be more comfortable with it now,” she adds. Discussions in the group provide information about the importance of breastfeeding. They also try to dispel some of the myths around body image and other reasons why teen mothers would hesitate to breastfeed. The program also helps prepare pregnant women for reality by inviting experienced mothers to visit and talk about what to expect. “They are very encouraging to each other,” states Melissa.

Melissa has also observed an increase in duration of breastfeeding among the mothers in the *Baby’s Breath* program. “We have had a few young mothers breastfeed well into the second year. And they are not shy!” she reports. “They even take part in the local sit-in where mothers get together in a public location and breastfeed their babies.”



Another positive spin-off from the BBBF program is a youth engagement group, *Mom2moM*. This peer support group is for mothers 19 years of age and up to 22 years of age (less one day). Melissa notes that the group began at the request of the mothers themselves. “They found a place of acceptance at *Baby’s Breath* and didn’t want to leave,” she states. “Through the monthly *Mom2moM* meetings, they develop and implement projects and activities to reach other pregnant and parenting young women.”

One example of the peer support offered through *Mom2moM* is a YouTube video entitled *We Are Teen Moms*. In this poignant, six-minute video, eight young mothers discuss the stigma and stereotypes associated with teen pregnancy. In their own words, these brave young mothers share a collective



story of resilience, strength, and determination to be good parents. The project is a collaborative effort with the Sudbury District Health Unit, Laurentian University, and *Better Beginnings Better Futures*. The young mothers themselves provided the photos for the video. They tell their stories through their photos, graphics, and voice recordings.

The following quote appears at the end of the video.

“Being a young mom means that we met a little early, but it also means I get to love you longer. Some people said that my life ended when I had a baby, but my life had just begun. You didn’t take me away from my future; you gave me a new one.”

–Anonymous

Key Informants

- Melissa Long
Program Assistant, Better Beginnings Better Futures
- Johanne Thompson
Program Manager, Better Beginnings Better Futures

Resources

[Baby’s Breath – Teen Parent Program](#)

[Better Beginnings Better Futures](#)

[We Are Teen Moms video](#)

CASE STORY FOUR:

Ottawa Buns in the Oven and Little Milk Miracles

Something is cooking in Ottawa. *Buns in the Oven*, a Canada Prenatal Nutrition Program (CPNP), welcomes pregnant youth and their partners to learn about pregnancy, babies, and life skills. And they do it in a fun and interactive way. In this weekly two-hour class, participants cook and eat together. They even get to take food and grocery vouchers home. “We are a place where young parents can come together and find support and acceptance. They share a meal and a conversation,” states Cathryn Fortier CAPC/CPNP Project Manager.

The Bethany Hope Centre and St. Mary’s Home, two parent-support centres for young parents, have been providing services to young parents in the Ottawa area for over 80 years. *Buns in the Oven*, where everyone gets involved with cooking, has been nourishing young parents for 20 years. Kim Ledoux is the Program Coordinator at both sites. She comments that the pregnant teens come to the program when they first find out they are pregnant. “We offer a variety of supports including nutrition education, food, and social support,” reports Kim. The cooking classes provide information on basic nutrition, balanced meals, portion sizes, and safe food handling. Meal preparation is done using budget-friendly recipes.

In addition to offering nutritional support, the sessions also provide counselling on prenatal health and lifestyle issues. Information on breastfeeding and infant and child development is also promoted. Self-referrals to the program are encouraged. Referrals are also accepted from family, friends, and health care providers. Registration must, however, occur prenatally.

Pregnant youth and young parents have the option of attending *Buns in the Oven* at Bethany Hope Centre or St. Mary’s Home Young Parent Outreach Centre. In total, there are eight *Buns in the Oven* locations in Ottawa, two of which support pregnant and parenting youth.

Once the ‘buns’ are out of the oven, the program continues. Parents and their babies can continue to participate in the *Buns in the Oven* program up until the baby is 6 months old. The nutritional benefits of the group extend into the postnatal period as well, particularly with breastfeeding support. Kim reports that the group has a strong influence on breastfeeding. She sees great value in the role modeling provided by the breastfeeding mothers returning to the group.



Kim explains, “Some of the pregnant teens have never seen anyone breastfeed. Seeing peers breastfeed and sharing their experiences has had a positive influence on their decision to breastfeed.” Kim comments that she has seen a rise in the initiation of breastfeeding. She is hopeful that it will continue to positively impact duration. “Breastfeeding is becoming more visible here. This is due largely in part to an increase in messaging and to the role modeling that is being done.”

Cathryn adds, “The opportunity for prenatal and postnatal women to attend together, along with the length of time that many come to the program, results in the development of incredible social support among participants and the opportunity for peer education to occur.”

Breastfeeding is also supported by the inclusion of a lactation consultant. The lactation consultant attends the group on a monthly basis to provide breastfeeding teaching. “It’s important for the teens to make that connection early so that trust is developed. They are more likely to seek help when they are breastfeeding if that connection has been made,” comments Kim. One-to-one help is available if needed for breastfeeding. More often the mothers are referred to one of the daily breastfeeding support drop-in clinics located throughout the city. Individual help is also available through the Ottawa Public Health, Healthy Babies Healthy Children Program.

St. Mary's Home has witnessed the positive impact of peer support on breastfeeding, so much so, that they have embarked on a new initiative to foster this support even further. With the assistance of a grant from the Best Start Resource Centre, the Breastfeeding Community Project was initiated. The purpose of this youth-informed breastfeeding program was to further develop the peer-support model and to foster agency-wide support. The goals were to create a supportive breastfeeding environment and to increase intention and duration of breastfeeding.



The Breastfeeding Community Project held focus groups involving 17 young pregnant and parenting women. Young women were essential in informing and designing the structure and content of this new program. A contest was held at St. Mary's Home to find a suitable name and logo for the peer support program. The winning name was *Little Milk Miracles*. Two friends collaborated on this submission stating that their babies are little miracles and the fact that they are continuing to breastfeed despite the odds is also a miracle!

The specific elements of the Breastfeeding Community Project were:

- The revision of prenatal class content with input from young mothers.
- Staff training to ensure that all staff have basic breastfeeding knowledge. This will foster a culture of breastfeeding support.
- Peer support to offer a weekly, in-person support group, *Little Milk Miracles*. These sessions are facilitated by peer-mom leaders with support from staff.



“Staff and youth are both very excited about the new initiatives,” states Cathryn. “Although it is a work in progress, everyone is pleased with the success of the project to date.” The program at St. Mary's Home continues and some elements are expanding to Bethany Hope Centre as well.

Young mothers in the *Buns in the Oven* program come to Bethany Hope Centre and St Mary's Home looking for information, food, and social support. “They walk away with much more,” states Cathryn. “They gain increased confidence and self-esteem, new friends, and valuable knowledge related to nutrition, health, and parenting.”

It is evident that through *Buns in the Oven*, young parents are growing as much as their ‘buns’ are.

Key Informants

- Cathryn Fortier
Manager, CAPC/CPNP
- Kim Ledoux
Program Coordinator, Buns in the Oven

Resources

[Ottawa Breastfeeds](#)

[Ottawa Young Parents](#)

CASE STORY FIVE:

CPNP Promotes Good Nutrition through Breastfeeding

“I am eating really well – maybe I’ve also become more conscious of it. We talk about it (nutrition) a lot in the group.”

– Anonymous

Many communities are benefitting from Canada Prenatal Nutrition Program (CPNP) funding. According to the Public Health Agency of Canada, a recent evaluation of CPNP indicates that the program is having a positive impact on the health and well-being of participants and their infants. In addition, exposure to the CPNP program has been linked to increased initiation and duration of breastfeeding.

Celebrating and Building on Success: The Canada Prenatal Nutrition Program¹ (2010) reports:

- CPNP participants who received breastfeeding education and support were more likely to initiate breastfeeding.
- Women who had more frequent exposure to CPNP (i.e., they attended more often over a longer period) were over four times more likely to breast-feed longer than those with less contact.
- Women who attended CPNP projects for a longer period were 21 times more likely to breastfeed longer than those who attended for a shorter length of time.

One example of a CPNP project is *Smart Start for Babies*, a program at the Middlesex-London Health Unit. Led by public health nurses and Registered Dietitians, *Smart Start for Babies* is a free, weekly prenatal education program for pregnant women and their partner or support person. Sessions are held for those in high-risk situations and pregnant teens. Both food vouchers and bus tickets (for travelling to and from the group) are given in each class. Participants are offered a meal, nutrition, and lifestyle information as well as baby care and breastfeeding education. Mothers also receive a gift card to purchase prenatal vitamins.

Participants are involved in food preparation for the class where healthy eating is modeled. Jody Shepherd, a Registered Nurse, is Teen Group Facilitator and *Smart Start for Babies* Program Coordinator. Jody reports, “There is lots of talking and socializing going on in the kitchen. They are having fun and celebrating their success.”





Another successful initiative to encourage healthy eating is the distribution of coupons called *Harvest Bucks*. CPNP participants are given *Harvest Bucks* to spend on fresh produce at local farmers markets. “It’s a win-win situation,” states Jody. “The mothers get healthy food and the local community is being supported.”

Jody reports that the prenatal sessions offer valuable information on why and how to breastfeed. A Registered Dietitian talks about the importance of breastfeeding. Traditionally, a lactation consultant contributes the hands-on information like skin-to-skin, positioning (using dolls), and hand expression (using a breast replica that actually expresses milk).

More recently, teen mothers who were breastfeeding were invited to attend and share their experiences with the group. Jody says, “It was great! The peers ran the class and in this informal setting were able to demonstrate responding to a baby’s feeding cues, and latching on. Seeing other teen mothers breastfeeding gave pregnant teens confidence that they also could successfully breastfeed.” These peer-led classes were so successful that they will be incorporated into the *Smart Start for Babies – Teens* group on a regular basis.

Smart Start for Babies – Teens also offers a *Teen Prenatal Health Fair*. Service providers working with adolescents and young adults are invited to set up a table at the fair to hand out information about their services. Teen mothers who are breastfeeding set up a table and share breastfeeding information with pregnant women. “It’s a fun way to get the information out there, and the teen mothers are happy to help,” states Jody.

Sarah and Chantelle are two of the young mothers who provide peer support to the CPNP programming.

Sarah decided to breastfeed because her mother did. “My mother breastfed my sister and me. I knew it was better and cheaper than formula,” she boasts. Sarah’s determination to give her baby the best helped her to breastfeed through some challenging times including mastitis when her son was 5 months old. She likes the closeness breastfeeding provides with her now 10-month-old son and hopes to continue, “For as long as he wants it.” The outspoken young mother has endured comments from others about breastfeeding. “I’ve had dirty comments, good comments, and have been told to cover up. I told them to cover up! Would you put a blanket over your head when you are eating?” she retorts.

Chantelle delivered her baby four weeks early. She remembers expressing her milk and hand-feeding her son with a syringe. She persisted through engorgement and flat nipples until he was finally able to latch with the help of a nipple shield. “I didn’t want to use the shield and kept trying to get him on without one,” she recalls. Finally, at six weeks, her son latched on without the shield, and he continues to breastfeed at 14 months. Chantelle hopes to continue the special closeness she feels with her son through breastfeeding until he is 18 months old or for as long as she can.

Chantelle admits that her biggest challenge in breastfeeding was getting her boyfriend on board. She says, “He didn’t know anything about it – this was all new to him.” She recalls that he was very negative about her decision to breastfeed.

“It was really hard doing something you think is right when the one person who should be there for you tells you it is wrong. Chantelle persevered, and she recalls that her boyfriend finally became more accepting of breastfeeding when their son was 7 or 8 months old. Now he tells her that if they ever have another child, he hopes that she will breastfeed again. “He has completely changed because he sees the benefits that breastfeeding has had for our son.”

Because of this, Chantelle would like to see a class developed to provide breastfeeding support for expectant fathers. She comments, “Fathers need to know what they can do to support the mother and breastfeeding. They don’t have to feel left out.” Jody Shepherd agrees and has already started thinking about how to educate fathers about breastfeeding in the CPNP program.

Both Sarah and Chantelle agree that at the end of the day, you need to know that what you are doing is best for your baby. It should not matter what anyone else says – your main focus is to feed your baby and to give them what is best. These young role models are passionate about supporting others to breastfeed. They would like other mothers and pregnant women to have the ‘magical’ experience of breastfeeding.

“I would like to think that the breastfeeding education and support Sarah and Chantelle received through CPNPs *Smart Start for Babies – Teens* program had a part in forming their strong ideas about how to feed their babies.”

– Joan Hepp

Key Informants

- Julie Castleman
Senior Policy Analyst, Public Health Agency of Canada
- Mary-Lynn Houston-Leask
La Leche League Leader
M’Wikwedong Native Cultural Resource Centre
- Jody Shepherd
Program Coordinator, Smart Start for Babies: Middlesex-London Health Unit
- Chantelle, mother
- Sarah, mother

Resources

Public Health Agency of Canada: Canada Prenatal Nutrition Program (CPNP)

Smart Start for Babies

Smart Start for Babies – Teens

References

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