



BRINGING BABY  
FRIENDLY (BCC, 2016)  
GUIDELINES TO FAITH  
COMMUNITIES: AN  
INSPIRING JOURNEY

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# OUTLINE

- Background
- Purpose, Process and Procedure
- Results and Analysis
- Lessons Learned
- Parting Thought

# WHY BABY FRIENDLY?

- 1991 World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) ► Baby Friendly Hospital Initiative
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- Breastfeeding Committee of Canada ► Baby Friendly Initiative
- WHO recommends exclusive breastfeeding for infants in the first six months of life and then, with the addition of complementary foods, continue to breastfeed for two years or more (WHO, 2016)

# BACKGROUND AND TIMELINE



- Faith and Society committee, British Columbia(BC) Synod, Evangelical Lutheran Church in Canada (ELCIC).
  - social justice; advocacy; stewardship of creation
- BC Synod Convention 2016: presented a motion to adopt Baby Friendly guidelines. Passed!
- BC Synod Council December 2016: approved Baby Friendly Guidelines
- BC Synod Bishop March 2017: endorsed Baby Friendly Guidelines

# PURPOSE AND PROCESS OF EVALUATION

## **Purpose:**

1. Evaluate implementation of BF guidelines.
2. Compare outcome with BFI implantation in hospitals and community health centres

## **Process of Evaluation:**

Phone call to each parish (47), Synod office and The Surrey Urban Mission (SUMS) and five questions posed

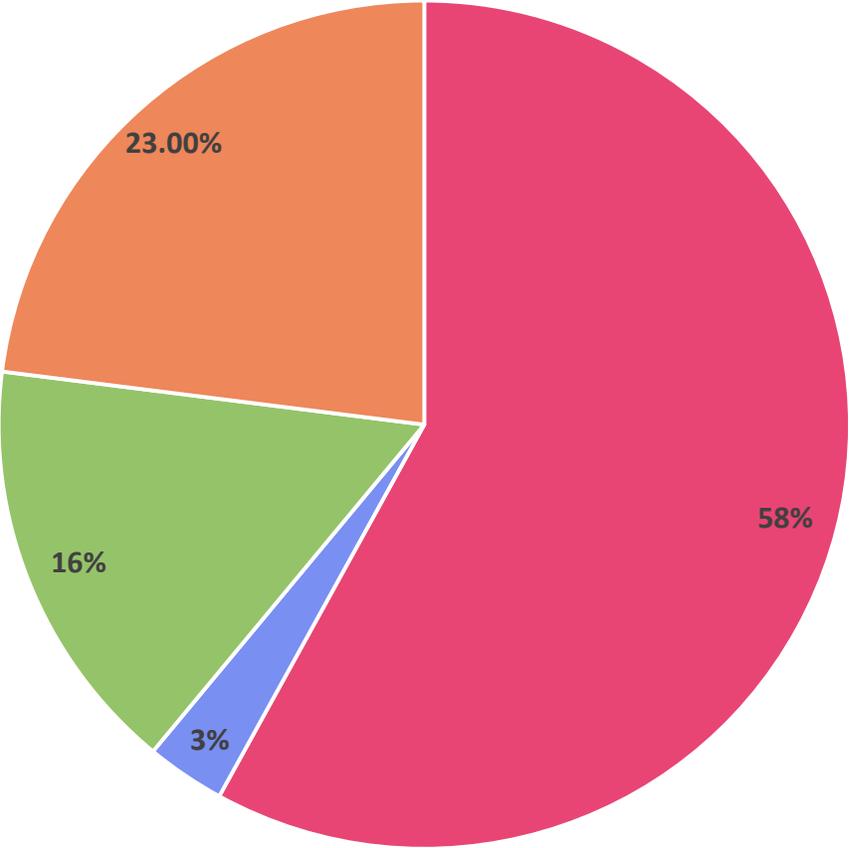
# EVALUATION QUESTIONS

1. How was the Baby Friendly Guideline package received at your parish? (i.e. did it go to council? What was the discussion? Was it accepted?)
2. What positive comments did people share in response to the BF Guidelines?
3. Were there any challenges in implementing the guidelines or were concerns expressed from anyone? If so, can you share them now?
4. Do you see a relationship between Lutheran values and supporting the BF guidelines? Explain.
5. Is there anything else you would like to share about the BF guidelines?

# RESULTS

- Evaluation by email – 8% response rate
- Evaluation by telephone – 63% response rate
- Outcome: 42% of the participants supported and implemented the BF guidelines

# Process of BF Guideline Package Dissemination



■ Pastor to Council ■ Too busy to participate ■ Did not recall receiving/Could not find pkg ■ Pastor did not take it to council

# ANALYSIS

Literature review → paucity of research of BF implementation in non-health community settings

→ utilized research on BFI and BFHI implementation in hospitals and health centres

Emerging Themes: Policy

Support

Values

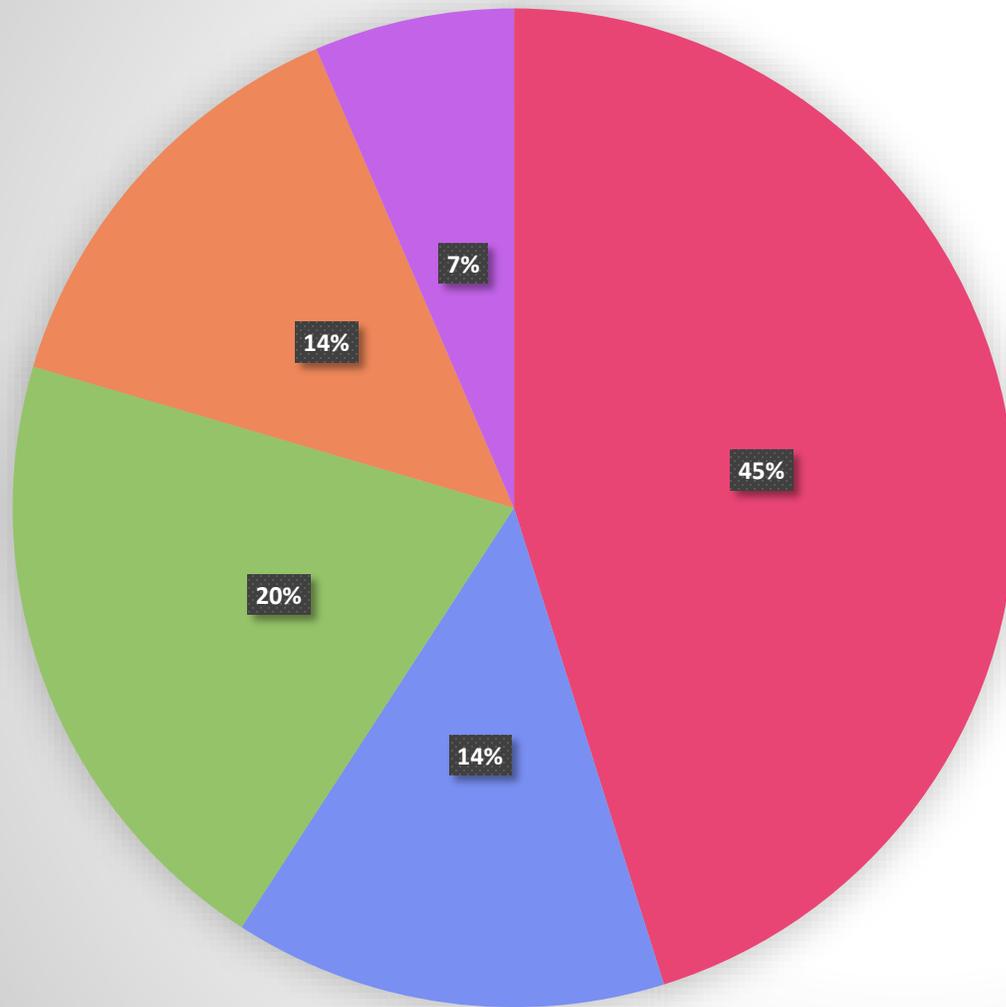
# POLICY

- Literature supports having a policy to assist in creating a supportive environment for breastfeeding and meeting the **BFHI** (Atchan, Davis & Foureur, 2017; Benoit & Semenic, 2014; Wieczorek, Schmied, Domer & Dur, 2015)
- Participants recognized the significance of having guidelines:  
“We hadn’t thought about breastfeeding before” and  
“The guidelines lifted the importance of breastfeeding into our consciousness. A gospel informed initiative!”

# SUPPORT

- Lutter (2017) asserts that all of society has a responsibility to increase support for breastfeeding and to accommodate breastfeeding mothers and their children.
- In contrast, Atchan, Davis & Foureur (2017) acknowledge ambivalence towards supporting breastfeeding

## Support For Breastfeeding Guidelines



■ Implemented BF guidelines

■ Did not support or implement BF guidelines

■ Perceived BF guidelines already followed

■ Considered BF guidelines irrelevant (no young families)

■ Did not review due to focus on struggle to survive

# VALUES

- Core principles and moral code that guide individuals and organizations.

- Lutheran values congruent with supporting the BF guidelines:

welcoming

being inclusive

respect

sanctity of life

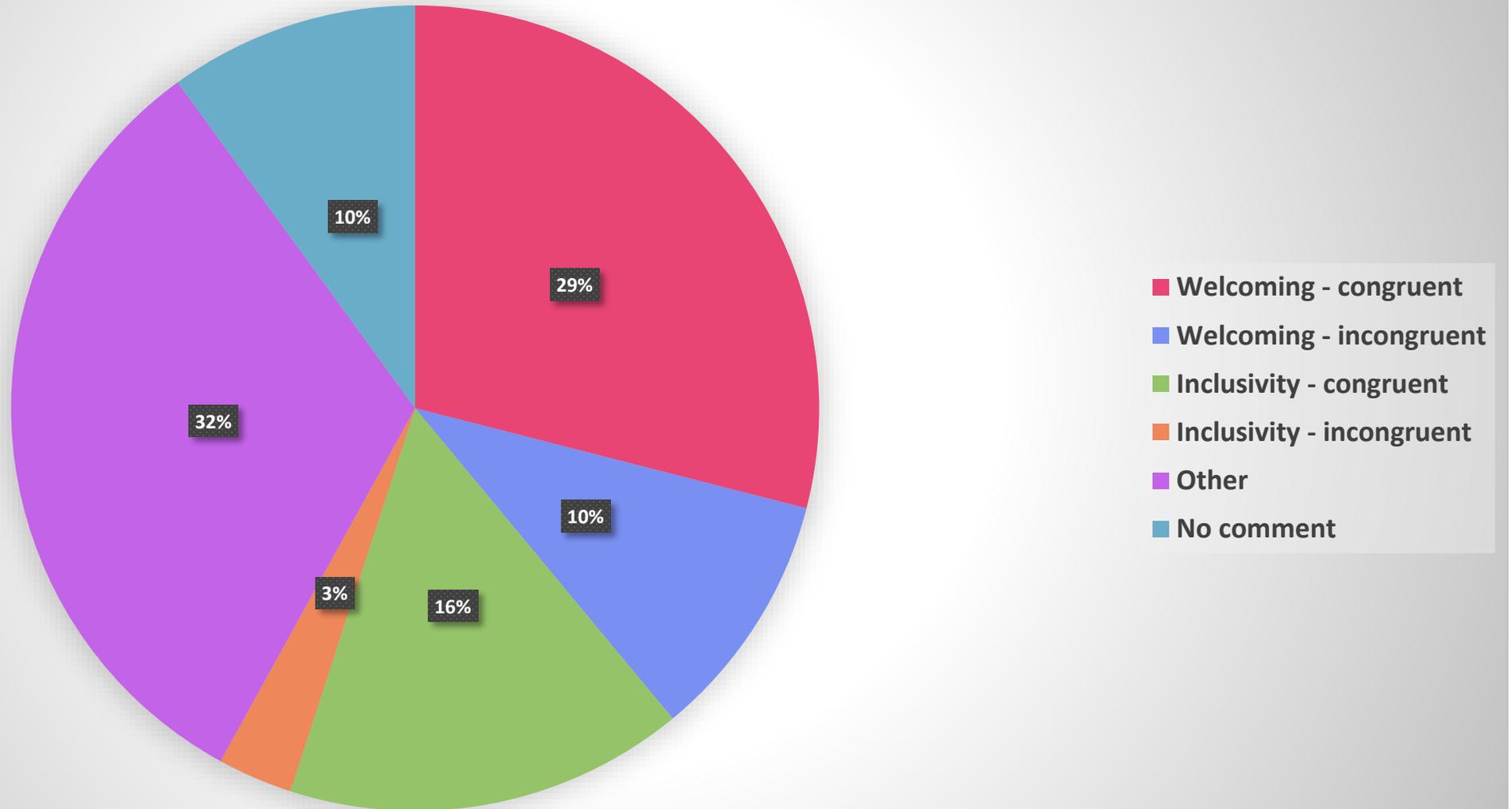
acceptance

attending to the needs of others

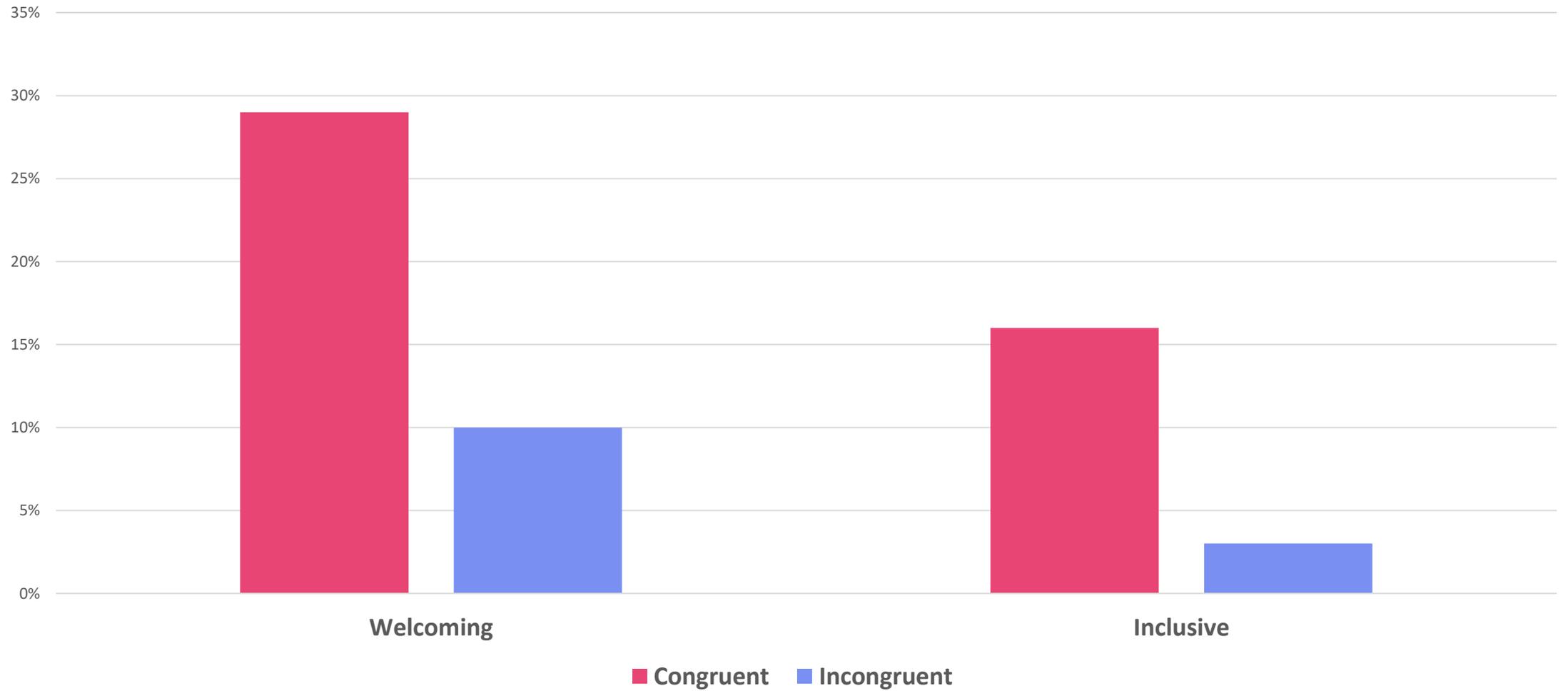
looking out for others

human dignity

## Lutheran Values and the BF Guidelines



## Lutheran Values Supporting Baby Friendly Guidelines



# LESSONS LEARNED

- Follow up phone call raised awareness of BF guidelines; valuable reminder
- Ambivalence to support BF messages exists due to interpretation and personal stories. Education may be beneficial to address concerns as they arise.
- Two participants did not support the message to avoid advertising breastmilk substitutes in their food pantries. Education about the International Code of Marketing of Breastmilk Substitutes (WHO, 1981) could have been included.

## PARTING THOUGHT

As one individual pointed out, “While it is important to be welcoming, it is especially important to welcome in a particular way, such as with the BF guidelines, to enable people to reveal the seen and unseen barriers that might exist.”

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