Baby-Friendly Initiative Ontario

Feedback From Ontario Perinatal Health Care Providers



Data Sources

Special Event: June 15, 2026 (2-hour virtual event)

- Panel discussion
- Break out sessions
- Event evaluation and feedback

Post-event Survey for those unable to attend the Special Event

- Email to registrants who did not attend
- Email sent through Mailchimp to BFI Ontario membership
- Social media platforms: Facebook, Instagram, Linked In
- Survey open from mid-June until the end of September

Special Event: 47 registrants

34 attendees

Special Event Evaluations: 16 responses

Post-Event Survey: 17 responses







Special Event Evaluations

Overall, how satisfied were you with today's engagement event?

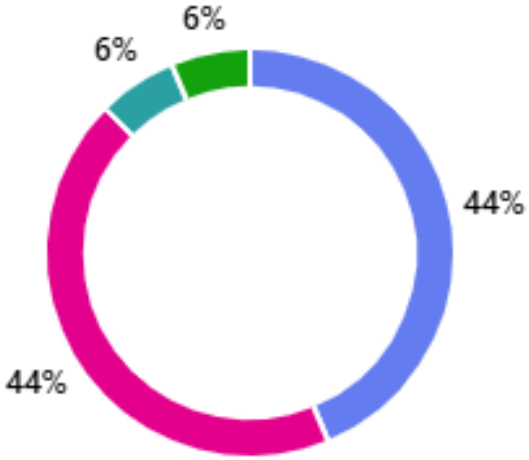
Very satisfied: 7

Somewhat satisfied:7

Neutral:1

Somewhat dissatisfied: 0

Very dissatisfied:1



Special Event Evaluations

How helpful was the panel discussion in stimulating your thinking about the future of BFI in Ontario?

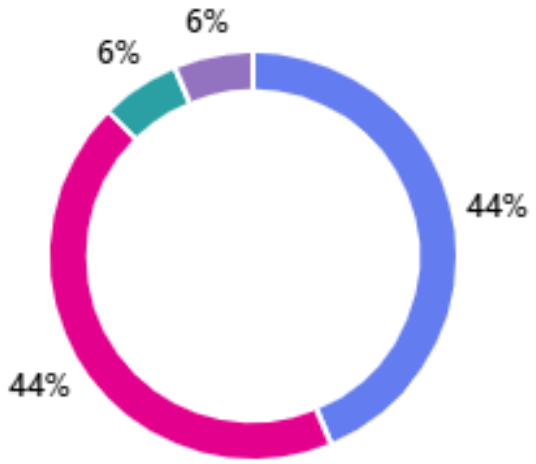
Very helpful: 7

Somewhat helpful: 7

Neither helpful nor unhelpful: 1

Somewhat unhelpful: 1

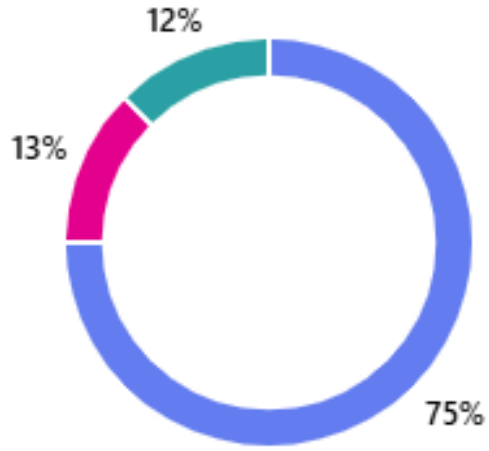
Very unhelpful: 0



Special Event Evaluations

How helpful were the breakout group discussions in allowing you to share your ideas and perspectives?

Very helpful: 12
Somewhat helpful: 2
Neither helpful nor unhelpful: 2
Somewhat unhelpful: 0
Very unhelpful: 0



Special Event Evaluations

How relevant were the discussion questions to the current and future needs of BFI implementation in Ontario?

Extremely relevant: 9
Somewhat relevant: 7
Slightly relevant: 0
Not relevant: 0



Special Event Evaluations

Which of the following do you believe should be the highest priorities for BFI Ontario over the next 3–5 years? (Select up to three)

Government engagement:15

BFI implementation:11

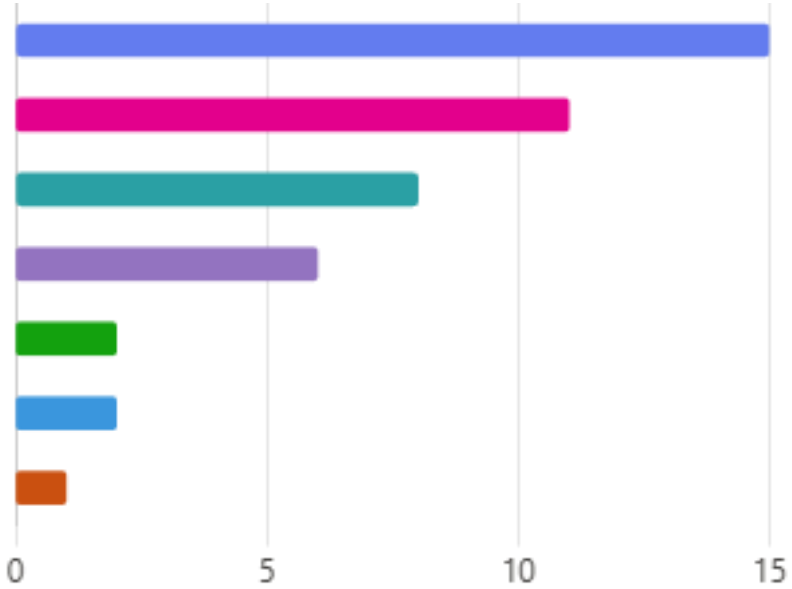
Family and community engagement: 8

Accessible and evidence-based BFI + infant feeding resources: 6

WHO Code awareness, education + advocacy: 2

Building membership and engagement with BFION: 2

Other:1



Special Event Evaluations

What is the most important idea, recommendation, or insight you are taking away from today's discussion?

Need for public health and hospitals to work together for BFI.

We need to build knowledge and skills of health care providers who help families with breastfeeding …more consistent info.

Need to have government engagement and support for BFI.

Research that supports the BFI Ten Steps, implementation and designation needs to be more accessible and known.



We should work towards one step at a time… a focused campaign…then move to another step

Special Event Evaluations

What suggestions do you have for BFI Ontario as we develop our next action plan?

Include items specific to hospitals, community health, government involvement, education of health care providers and families. Items must be doable. Give progress updates to BFI Ontario members.

Have research to show the importance of implementing BFI for improved breastfeeding rates.

Rally/survey different parent groups - help them create a strong voice - publicly highlighting the gaps in support in Ontario for new families.

Work with government and healthcare leaders to make BFI accreditation an expected standard for all maternity, neonatal, and infant care hospitals.

Make sure we have the best evidence for every step and make it very accessible. Promote best practice even without formal accreditation … Consider a province-wide campaign - promoting each step in as many ways as possible.

Questions and Responses



- Break-out Group Responses



- Survey Responses

Question 1

Do you think the BFI has influenced policy, standards, or accountability with hospitals and community health services in Ontario? Why or why not?

Why

- When BFI was imbedded in the public health standards it had a huge impact
- When mandated, there was management and staff buy-in
- Helped with training
- Raised alot of awareness about evidence-based info
- It prompted changes within the system
- Public Health collaborating with hospitals

Why Not

- BFI may not be a part of organizational philosophy
- Policies align with BFI but maybe not practices
- Financial support not available to train staff; no staff availability
- Changes were made and then a halt/hold when the funding stopped…
- BFI implementation remains inconsistent across Ontario due to differences in funding, leadership support, organizational capacity, and competing priorities

Themes From Q 1

The BFI has influenced policies, education and practices in hospitals and community health services. It provides an evidenced based framework and facilities must be accountable

The BFI lost influence when it was no longer an accountability requirement for public health units and not a priority with the Ontario government

Reduced staff education and training, weaker referral relationships, and decreased organizational commitment have happened because of decreased government investment

The lack of funding, inadequate staffing and heavy workloads, and competing priorities have affected the BFI being implemented and negatively impacted the care of families

There have been many negative changes since organizations have allowed their BFI designation to lapse.



Question 2

Do you think stronger partnerships between hospitals, community health services, and families could strengthen BFI implementation in Ontario? Why or why not?

Why

- Absolutely - the secret weapon that needs to be embraced is the parent voice because they are being short changed and unaware of it
- BFI is most effective when families experience consistent messaging and support across the continuum of care.
- Strong partnerships can reduce service gaps and improve continuity of infant feeding support.
- Working together helps create a culture shift

Why Not

- Challenging without financial support
- Post -pandemic - strong relationships between CHS and hospitals have decreased
- Continuity of care gap - we need to address this together - hospitals, CHS's and families
- We often work in silos and think the problem belongs to someone else - sign of stress and over work
- Lack of capacity – workload problems, gaps between policy and practice

Themes From Q 2

Families need consistent messaging based on current evidence - resources should be shared between hospital and community

Parents need to be listened to and involved in decisions about their care

Connected support matters – from pregnancy through birth and postpartum

Organizational silos and weakened relationships between hospitals and CHS's are a problem and we need improved coordination of care

We need system level change involving government funding and prioritization of the BFI



Question 3

How can we ensure that evidence-based infant feeding education and support reach families before, during, and after birth?

Before

- Prenatal classes - dedicated 2hr session
- In primary care, at every prenatal appt discuss some element of infant feeding, including antenatal hand-expression
- More government mandates to do this work
- Education about BF – high school; nutrition through a lifespan
- Include BFI in nursing and medical school curriculum
- Targeted social media

During

- Education of health care providers
- Have more staff available to provide support
- Policy and procedures - such as skin to skin in the OR
- Hand expression kits in hospitals
- Knowing all of the supports available to be able to make referrals
- Translation support

After

- Enough skilled staff to provide early and continued support
- Peer support
- Provincial infant feeding resources
- Focus on informed decision making; provide evidence showing potential impact of decisions
- Coordinated province wide approach that reaches families at multiple touchpoints

Themes From Q 3

Education should begin at prenatal classes, medical appointments, and public health programs

Health care providers who work with perinatal families need mandatory and more comprehensive training

We need improved nurse-patient ratios, protected time, and practical skill building

Information for families has to be easy to access, evidence based, free of commercial bias, available in different languages and adapted for different learning needs.

Timely referrals, breastfeeding clinics, home visits, telephone or text support and peer support are important – families need to know how to easily access a LC or health care provider who can help with breastfeeding

We need government action, standardized provincial resources, action on formula marketing, the normalization of breastfeeding and an investment in lactation support for families



Question 4

How can we get the provincial government to support the implementation of BFI and BFI designation in Ontario hospitals and community health services?

- Put breastfeeding and the BFI back into accountability agreements
- Make it a mandate again! Then senior management listens
- Need an actual plan to better prioritize BFI - need evidence to show its value
- Show value for money – the return on investment
- Need to have families telling the government what is needed
- Use a data driven approach
- It is hard because there is not ongoing surveillance of BF rates long term
- Partner with academic institutions and public health
- Leverage Ontario-based researchers
- Need more money to implement networking and BFI prioritization

Themes From Q4

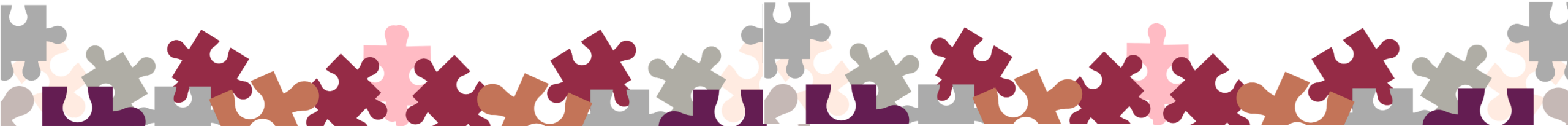
BFI implementation and designation need to be restored into the provincial standards – it should be linked with government funding or incentives

Engage with government leaders and show them the evidence – they need to understand why BFI needs to be a priority – the return on investment, health system savings and improved health outcomes

Gaps in ongoing breastfeeding surveillance information are barriers - we need to demonstrate the impact of continued breastfeeding

BFI needs to be viewed within broader health system priorities and positioned as a contributor to health equity, maternal-child health, population health, quality improvement and health system sustainability

We need to build a collective voice across Ontario – provincial groups and organizations and bring in the family perspective –this might get the attention of the government.



Question 5

How can we attract and empower the next generation of BFI leaders and advocates?

- Without mandating BFI, you don't have communities working on it, making it harder to cultivate champions and generating interest
- Staff feel disempowered - if BFI was mandated it would support us
- Time commitment and compensation are a challenge… much of the work is done on a volunteer basis… this needs to change
- Make research that supports breastfeeding and BFI accessible
- Bringing BFI front and center with community events can help…role modelling by experienced role models…finding social media personalities to bring a voice to it
- Ensure infant feeding topics are embedded in nursing programs, medical school programs, and not only a few hours of training
- Emerging leaders should be encouraged to see BFI not only as an infant feeding initiative but as part of broader efforts to advance health promotion, equity, reconciliation, and trauma-informed care….including youth, parents, and people with lived experience will also strengthen future leadership

Themes From Q5

Limited time, lack of compensation, and lack of organizational support are huge barriers

BFI advocates and leaders are harder to sustain when breastfeeding is not prioritized by the organization and it is not a government priority

Events that bring people together, professional networks, community connections and mentorship help attract new leaders and BFI advocates

Small steps, clear direction and practical resources help people feel more confident

Accessible research, embedding the BFI in the curriculum of health care providers, and continuing education sessions would help advocacy efforts

It is important to reach younger generations through different avenues such as social mediaand influencers



Question 6

If you could make one wish for the future of BFI in Ontario, what would it be?

- That BFI is inherent and systemic and not an after-thought or a checkbox that needs to be marked off on the to-do list
- Some families feel like exclusive breastfeeding is an anomaly - this needs to be changed
- Not all places have strong peer support - maybe early on centres could help
- Be mandated by the government
- Be involved with Accreditation Canada
- The current culture is not thriving - social media's presentation of motherhood is driven with untruths…this needs to change
- Finding a way to have the public trust BFI's messaging….normalize breastfeeding without offending people
- Patients asking for BFI designated hospitals (because people drive change)
- Community of practice

Themes From Q6

BFI should be fully integrated into our health system and supported by the government and sustained funding

BFI needs to be a part of the organizational culture and not optional or a checklist that can crossed off and forgotten

BFI needs to be embedded in all hospitals, birthing centres and community health services and we should all work together on the Ten Steps

Coordinated services, consistent infant feeding education based on current evidence and ongoing support throughout pregnancy, birth and postpartum that can be easily accessed by all families

Accessible education and resources, better public understanding of breastfeeding and why it matters, and more evidence informing policies and practices



Perspectives of perinatal families in Ontario:

BFI Ontario interviews and surveys with perinatal families

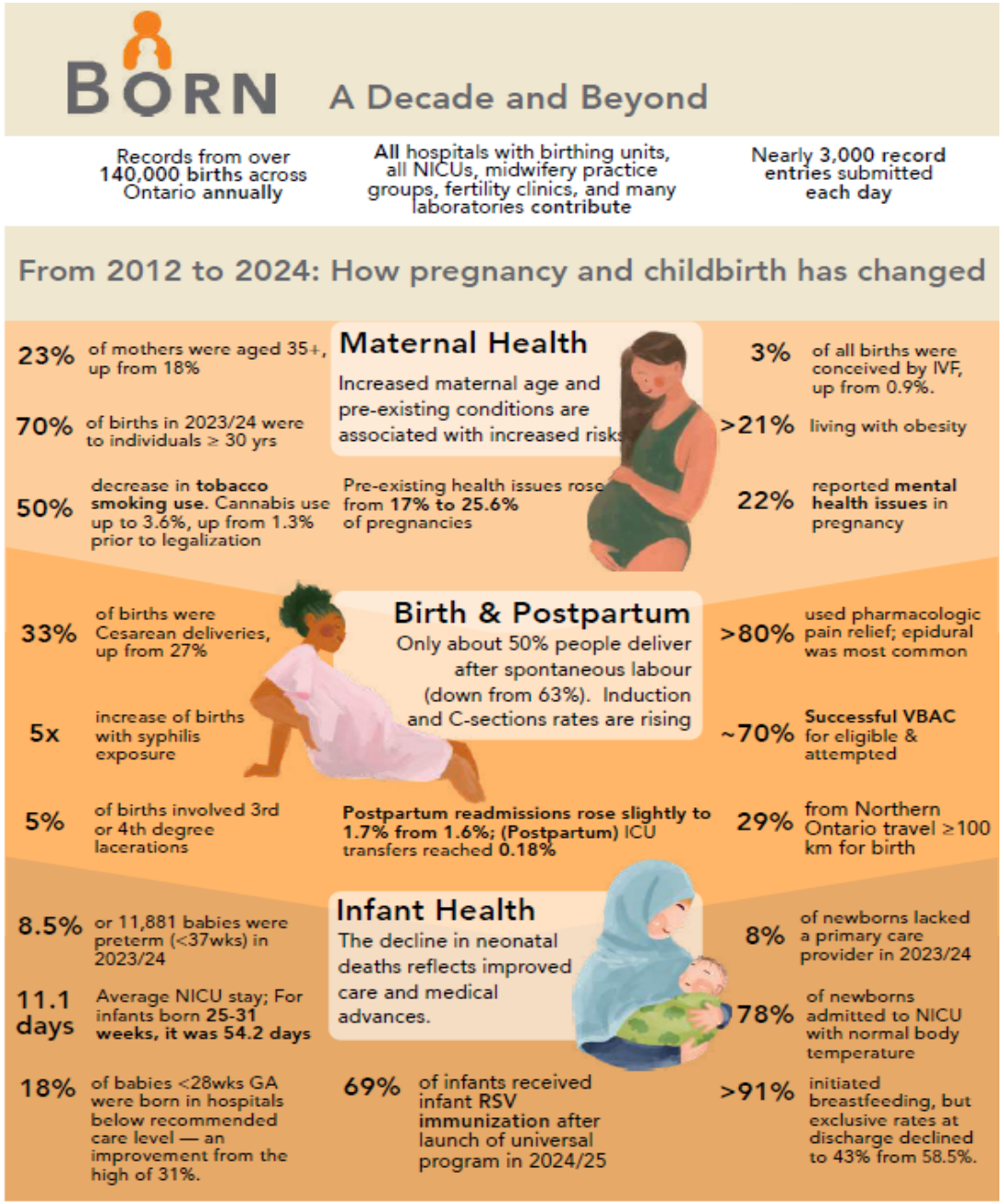
- Consumer Feedback: Perinatal Practices Around the Year 2000
- Consumer Feedback from Survey: Maternity Practices and Care in Ontario During 2023-2026

https://www.bfiontario.ca/ontario-family-forum/family-surveys/





[A Decade and Beyond: Perinatal Health in Ontario Report 2012–2024 | BORN Ontario]



The BORN report provides system level data from 2012 - 2024 and the BFION data provides information from lived experiences.

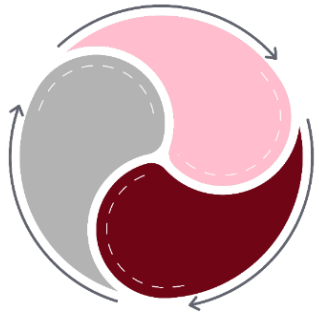
We can get a more complete perinatal picture by reviewing the combined information

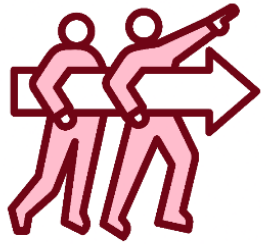
Any alignments?

Any differences?



From Listening to Action









- Family perspectives
- Health care provider feedback
- System level data (BORN)

Review and discussion

Determining BFION's priorities for 2027 and beyond

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