Breastfeeding has many benefits for maternal and child health, yet over 75% of Canadian infants do not achieve the international recommendation of 6 months exclusive breastfeeding. Social stigma and lack of public support contribute significantly to early breastfeeding cessation. Most breastfeeding education targets pregnant women and new mothers, with few resources directed to society at large. Educating school children could help normalize and generate societal support for breastfeeding.

INTRODUCTION

A scan of the Manitoba school curriculum and other jurisdictions was conducted to understand if and how breastfeeding is currently being discussed in classrooms. A series of focus groups and online surveys were conducted to explore needs, perceptions and anticipated barriers related to school-based breastfeeding education. Educators were recruited at Manitoba Teachers Society Professional Development Day and via email distribution lists. HCPs were recruited through email by the Winnipeg Regional Health Authority and the Winnipeg Breastfeeding Network.

METHODS

4 Educators and 8 HCPs participated in separate focus groups, and 95 surveys were completed. A scan of the Manitoba school curriculum was conducted to explore needs, perceptions and anticipated barriers related to school-based breastfeeding education. Stakeholder Engagement to Inform Strategies for Improving Breastfeeding Education in Manitoba Schools: Preliminary Results

PRELIMINARY RESULTS

Participant Characteristics

Focus Group and Survey Results

Nearly all educators (97%) and HCPs (94%) supported the idea of teaching students about breastfeeding. There was roughly equal support for having teachers or HCPs provide this education. Primary motivations were:

- normalizing breastfeeding
- preparing students as future parents
- providing accurate information about benefits, challenges and choices associated with breastfeeding

Perceived barriers and concerns included:

- lack of teaching time and resources
- inadequate training/discomfort of educators
- cultural and religious sensitivities
- non-breastfed students may feel stigmatized
- competing priorities in the curriculum
- shaming mothers who do not breastfeed

KEY FINDINGS

CONCLUSION

LIMITATIONS & FUTURE DIRECTIONS

Nearly all participants were women and most had personal breastfeeding experience. This selection bias could influence generalizability.

Next steps:

- Consult with Manitoba Education and Training about curriculum development.
- Assemble a team of health care professionals to help deliver breastfeeding education in schools.
- Educate teachers about breastfeeding and the science of breastmilk.
- Provide teachers with educational materials related to breastfeeding.

Ultimately our goal is to encourage societal support for breastfeeding, improve breastfeeding rates and enhance maternal-child health in Manitoba.

This research is supported by:

Stakeholder Engagement to Inform Strategies for Improving Breastfeeding Education in Manitoba Schools: Preliminary Results

Michelle La and Meghan B. Azad

Department of Pediatrics and Child Health, Department of Human Nutritional Sciences, University of Manitoba; Developmental Origins of Chronic Diseases in Children Network (DEVOTION), Children's Hospital Research Institute of Manitoba

INTRODUCTION

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