Objective #1
Understand the concepts of the Baby Friendly Initiative (BFI)

Global Initiatives to Protect Breastfeeding:
- The International Code of Marketing of Breastmilk Substitutes 1981
- WHA Resolutions
- Baby Friendly Hospital Initiative 1991
- Global Strategy for Infant and Young Child Feeding WHA 18th. May 2002

Ten Steps to Successful Breastfeeding
Every facility providing maternity services and care for newborns should:
1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers to initiate breastfeeding within a half-hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation even if they should be separated from their infants.
6. Give newborn infants no food or drink other than breast milk, unless medically indicated.
7. Practice rooming-in, allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no artificial teats or pacifiers (also called dummies or soothers) to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

The Seven Point Plan
1. Have a written breastfeeding policy that is routinely communicated to all staff and volunteers.
2. Train all health care providers in the knowledge and skills necessary to implement the breastfeeding policy.
3. Inform pregnant women and their families about the benefits and management of breastfeeding.
4. Support mothers to establish and maintain exclusive breastfeeding to six months.
5. Encourage sustained breastfeeding beyond six months with appropriate introduction of complementary foods.
6. Provide a welcoming atmosphere for breastfeeding families.
7. Promote collaboration between health care providers, breastfeeding support groups and the local community.
The Baby Friendly Initiative

BFHI is...

- Evidence based
- Best practice
- Outcomes-oriented
- Protects, Promotes and Supports Breastfeeding
- **All babies benefit**

Guiding Principles

- Informed decision making
- Promoting and sharing evidence-based and best practice
- Support breastfeeding across the continuum of services through collaboration
- Working toward empowerment and public participation

Guiding Assumptions

- Improved breastfeeding outcomes for mothers and babies
- **Adequate** practice outcomes as determined by the assessment
- The process of changing attitudes and practice is important, not “passing” or “failing”

Improved breastfeeding outcomes for mothers and babies

- **Hospitals/birthing centers:** 75% of term well babies are exclusively breast-fed on discharge

- **Community Health Services:** 75% of term well babies are breastfed on first contact and ….

- No more than 5% drop off at 2 weeks = 70%

**Adequate** practice outcomes as determined by the assessment

Kathy Venter
The Baby Friendly Initiative

Selected Key Concepts

• Facilitate bonding – skin to skin contact, preserve the dyad, family centered

• Empowerment – teach necessary skills informed decision making

• Provide a network of support throughout

Help mothers initiate

Step 4:

Skin-to-skin:
At least 40 minutes at a time...transition

Maintain lactation

Impact on breast-feeding duration of early infant-mother contact

Early Contact: 15-20 min suckling and skin-to-skin contact within first hour after delivery
Control: No contact within first hour

Legend:
- Early Contact (n=21)
- Control (n=19)

Percent still breast-feeding at 3 months

Early Contact: 30%
Control: 8%

5. Show mothers how

6....Exclusive breastfeeding

Kathy Venter
7. Practice rooming in.....

Separation causes unhealthy stress to the baby:

- unstable temperature,
- accelerated heart rate,
- risk for stress-induced pathology e.g. diabetes, hypertension etc.

8. Breastfeeding on demand/cue based feeding.........

- Initiate within the first 30 minutes (skin to skin )
- Early and often
- Cue - based feeding – baby will regulate at about 2 weeks if feeding is effective and supply established

9. No artificial teats......
Artificial teats:

- Displace suckling at the breast
- Shape and consistency is different, do not elongate in the mouth as the breast does
- Milk flows differently (bradycardia, apnea)
- Oral muscles behave differently (immobilized, overactive, malpositioned)
- Contributes to abnormal dental (dental, malocclusion), facial and speech development

Community support, mother-to-mother support

- Discharge planning
  - Assess effectiveness of breastfeeding
  - Written information/ care plan
  - Liaison
- Community health support
- Mother-to-mother / peer support
  - La Leche League

10. Breastfeeding support …

The process of changing attitudes and practice is important, not “passing” or “failing”

Shift the paradigm!

Attitudes
Knowledge
Skills
The Baby Friendly Initiative

BFI has a ripple effect - it is a catalyst for growth and development.

Personal Values
- Professional Role
- Public Health; Primary Health Care
- Global Context

BFI Benefits – Hospitals/ CHS
- Excellence in family-centred maternity care
- Ethical maternity care
- Quality assurance – meet international stds
- Enhanced corporate image and prestige
- Increased client satisfaction
- Increased staff satisfaction and retention

Baby-Friendly Initiative

“Few interventions return such high dividends in health, self-reliance and child development and none at such low cost.”
Dr. Jairo Osorno
Units of Nutrition in Paediatrics & Clinical Epidemiology
Universidad del Valle School of Medicine
Cali, Colombia

“The Journey Is Everything

“Step by Step, Day by Day ... That’s the Baby Friendly Way”
Kathy Venter

OBC Contact
bfi@breastfeedingontario.org

OBC website:
www.breastfeedingontario.org

BCC Website:
www.breastfeedingcanada.ca

Email BCC:
bfc.can@sympatico.ca
Objective #2

List some physical and mental health benefits for infants through the Baby-Friendly Initiative.

“Health is a state of Complete physical, mental and Social well-being, And not merely the absence Of disease and infirmity.”

WHO Constitution

Mother/baby dyad are a single psychobiological organism: the “original paradigm”

Dr. Nils Bergman

“Breastfeeding is a brain based behaviour” N. Bergman

- 10-14 weeks gestation brain growth determined by DNA
- 14 weeks - an active process
- 23 weeks - fetus is aware/conscious
- 25 weeks - layering, dendrification, synapse formation
- 28 weeks - full complement of neural cells

(H. Lagercrantz 2004)

The operating system is located deep in the Limbic System of the brain.

The basic programs are:

- Tactile
- Auditory
- Olfactory
- Optic
- Taste

Development is a process of pruning and nurturing synapses to create neural pathways

Use it or lose it!
Neurons migrate, axons extend, branch and develop synapses, connect to sensory organs.

More sensations = more synapses

Parallel development of structure and function

Piaget’s Cognitive Theory

“As infants experience sensory and motor activities they construct schemas (concepts or models) for dealing with information and experiences.”

The First Hour

Critical period concept:

“…when a child’s brain is exquisitely primed to receive sensory input in order to develop more advanced neural systems” R. Schore

Risk of neonatal mortality according to time of initiation of breastfeeding

Oxytocin

The Love Hormone – tend and befriend

Produced in the pituitary and circulates in the plasma and the brain

(Keverne and Kendrick 1994)
Plasma concentrations increase in the second stage of labor, peak with delivery of placenta, and stay elevated for about an hour.

(Rahm et al 2002, Nissen et al 1995)

Role of Oxytocin
- Uterine contractions in labor, milk ejection reflex, and orgasm
- Released with physical contact
- Increases nutrient absorption
- Increases desire for further contact – BONDING
- Increases trust = increases oxytocin release
- When fathers co-habit, oxytocin increases paternal involvement

(Rak et al 2004) (Febo et al 2005)

Prolactin
The Parenting Hormone

- Promotes milk production – Circadian rhythm
- Causes relaxation
- Reorganizes the brain to favor caregiving & submissive behaviors (in primates) allowing parents to put their children first
- Matures baby’s gut

Beta Endorphins
Feel-good hormones
Beta Endorphins secreted with:

- Stress, duress and pain
- Sex
- Pregnancy
- Birth
- Breastfeeding-peak 20 minutes after latch (Franceschini et al 1989)
- Physical activities

**Beta endorphins** - secreted during social contact - face of loved one can cause a surge.

- **Induces feelings** of
  - Pleasure
  - Euphoria
  - Altered state of consciousness
  - Reduced perception of pain

- **Helps reward** parents and infants for interacting. (Kimball)

Prolonged separation in well attached parents and children can be physically uncomfortable as their levels of endorphin drops

Breastfeeding is established through “a set of mutual, complex sensory stimulations in mother and child.” (Kjellmer & Winberg 1994)

“The infant actively seeks to adhere to as much skin surface on the mother’s body as possible”

(Harlow 1958, from Schore 2001)

**Skin is the vital interface**

The baby’s optimal transition to life outside the uterus will require the:

- establishment of effective respiration and circulation;
- maintenance of an adequate body temperature;
- facilitation of contact between the baby, mother, and family.

It is a critical transition time for the baby.

*Family-Centred Maternity and Newborn Care: National Guidelines*
Skin-to-skin

- Stabilizes infant
  - temperature
  - heart rate
  - Breathing (Bergman 2000)

- Reduces stress hormones in baby by 74% (Mohr & Glover 1998; Mooney 1997)


- Less crying, better gains and earlier discharge (Walshberg 1992; Andersen 1999)

Skin to skin - baby can:

- Thermoregulate using brown fat (Blackburn 2003) – minimum fluid loss (Jose 1994)

- Utilize high protein amniotic fluid in their stomachs – regulate glycaemic state (Blackburn 2003)

- Cholecystokinin release after birth - hybernation state to conserve energy (Uvnas-Moberg et al 1997)

- Colostrum (casomorphins) makes baby sleepy – conserves energy (Wittles 1990; Odent 2001)

- Locate the breast – areolar = visual & olfactory cue

Skin to skin initiates organized, predictable, sequential, pre-feeding behaviour that leads to effective, coordinated suckling.

The hind brain (hypothalamus/hypophysis) runs three independent, mutually-exclusive programs to ensure survival:

- defence (stress hormones; adrenergic /sympathetic nerves; protest-despair response)

- nutrition (growth hormones; vagal/parasympathetic nerves)

- reproduction

Skin to skin/ early initiation

- Maternal behaviors enhanced, more confident

- Less PPH

- Mothers breastfeed longer and more frequently
  - Greater milk volume
  - More exclusive breastfeeding
  - Longer duration of breastfeeding

PEDiATRICS Vol. 102 No. 5 Supplement November 1998, pp. 1244-1246

RESEARCH PERSPECTIVES:
Mother and Infant: Early Emotional Ties Marshall Klaus

Kathy Venter
The Baby Friendly Initiative

Separation causes unhealthy stress to the baby:
- unstable temperature,
- accelerated heart rate,
- risk for stress-induced pathology e.g. diabetes, hypertension etc.

Ways to Reduce Stress for the Newborn
- dry baby (except hands) on mom’s chest - gown on back to front to facilitate this.
- cover both mom & baby with warm blankets
- Allow skin to skin for at least 60 minutes before weighing, Vit K and eye prophylaxis
- Limit holding and cuddling to parents for the first few hours - olfactory orientation

- weigh baby in prone position < Moro reflex < adrenaline response (Cox 2004)
- Encourage consistent skin to skin for the first 48 hours to facilitate transition and frequent feeds < weight loss (Wittles 1990; Odent 2001)

“The perinatal sensorium is never in chaos…
… the infant’s world is structured, competent and organized, developing in an ever ordered, yet ever more complex and more flexible field of perception.”

Kathy Venter
Objective #3

Recognize ‘Baby Friendly’ policies and education resources.