

Module Three

Global and Individual Breastfeeding Support



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Module 3 Topics

- The Baby-Friendly Initiative (BFI)
- The World Health Organization (WHO) International Code of Marketing of Breast-milk Substitutes
- Human milk: Everything you want to know
- Feeding cues (signals)
- Sleep and Night Feeding



What is BFI?

- BFI is a global initiative
- BFI is based on the 10 Steps to Successful Breasteeding and the WHO Code
- BFI stands for Baby-Friendly Initiative, **not** Breastfeeding-Friendly Initiative
- BFI supports all families regardless of how they feed their baby
- BFI supports informed-decision making based on evidence
- BFI provides a minimum standard of care; this includes policies and education for staff, education and support for mothers

BFI in Canada

- To be awarded BFI designation, hospitals, public health units, and community health centres must go through a process
- BFI designation is awarded by the Breastfeeding Committee for Canada (BCC); the national authority for BFI who ensures that designated facilities meet BFI standards
- BFI Ontario provides information and support in Ontario



Breastfeeding Committee for Canada

Comité canadien pour l'allaitement

BFI in your community:

- Some organizations cannot be designated, but can implement best practices to support BFI principles (e.g., businesses, community centres)
- There are many organizations and groups supporting the implementation of BFI in their community
- These organizations may hold Breastfeeding Challenges for World Breastfeeding Week, support breastfeeding mothers at community events, etc.
- Mothers/peers can be an important part of these groups
- In our community ...

Step 1

HURON COUNTY HEALTH UNIT

We believe breastfeeding is important.

On our journey toward becoming a **Baby-Friendly** organization, we:

- Welcome all families.
- Help parents make informed decisions about infant nutrition.
- Recommend exclusive breastfeeding for six months.
- Recommend continuing breastfeeding for two years and beyond with the addition of iron-rich solid foods when baby is six months old.
- Train our staff in the importance of breastfeeding.
- Offer a comfortable place to breastfeed at the health unit.
- Work with our community to support healthy infant nutrition in Huron County.



The **Baby-Friendly Initiative** is a world-wide strategy that sets standards for infant feeding.

Have a written breastfeeding policy that is routinely communicated to all health care providers and volunteers.

> Example: Workplace policy for supporting breastfeeding employees

Step 2

Ensure all health care providers have the knowledge and skills necessary to implement the breastfeeding policy.





Step 3

Inform pregnant women and their families about the importance and process of breastfeeding.





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Step 4

Place babies in uninterrupted skin-to-skin contact with their mothers immediately following birth for at least an hour or until completion of the first feeding or as long as the mother wishes: encourage mothers to recognize when their babies are ready to feed, offering help as needed.





Step 5

Assist mothers to breastfeed and maintain lactation should they face challenges including separation from their infants.





Step 6

Support mothers to exclusively breastfeed for the first six months, unless supplements are *medically* indicated.



Step 7

Facilitate 24 hour rooming-in for all mother-infant dyads: mothers and infants remain together.



Step 8

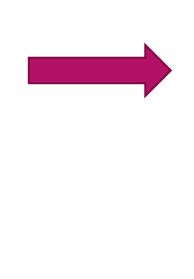
Encourage baby-led or cue-based breastfeeding. Encourage sustained breastfeeding beyond six months with appropriate introduction of complementary foods.





Step 9

Support mothers to feed and care for their breastfeeding babies without the use of artificial teats or pacifiers (dummies or soothers).





Step 10



Provide a seamless transition between the services provided by the hospital, community health services and peer support programs.

Apply principles of Primary Health Care and Population Health to support the continuum of care and implement strategies that affect the broad determinants that will improve breastfeeding outcomes.

Activity: Breastfeeding Statements



Activity: Breastfeeding Statements

Consider the following

- What does this statement mean to you?
- Does this statement reflect current beliefs around breastfeeding in our community?
- How would this statement challenge people's thinking about breastfeeding?

The World Health Organization (WHO) International Code of Marketing of Breast-milk Substitutes



- The WHO Code is an important part of BFI
- Organizations that have been awarded their BFI designation must demonstrate their compliance with the WHO Code
- The WHO Code does not discriminate against mothers who use formula, but protects mothers from unethical practices
- Hospitals and other organizations must purchase their formula and feeding equipment, not accept it for free
- Families often think that the formula the hospital uses is 'the best one'; it is just the one that they have purchased

Main points of the WHO Code

- No advertising of formula and other products to the public (i.e., in magazines, commercials)
- No donations of formula and supplies to maternity hospitals or free samples to mothers
- No promotion to health care providers (i.e., doctors, nurses, midwives) or giving free gifts/personal samples to health care providers
- No formula company workers allowed to teach mothers about breastfeeding or formula feeding



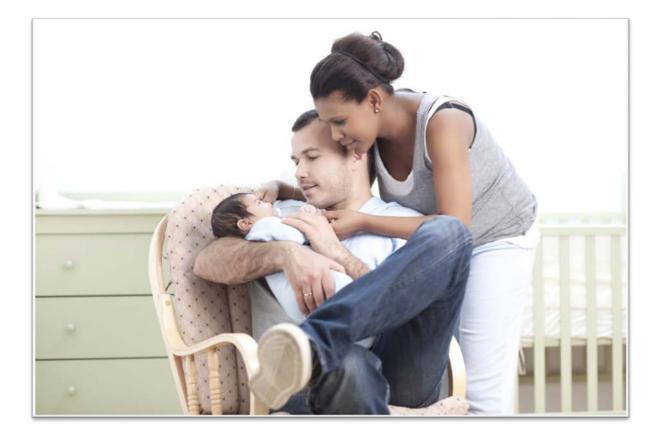
Table display in hospital 2007

Main points of the WHO Code

- No words or pictures making bottle feeding look like the norm or pictures of infants on labels of formula containers
- Information to health care providers should be scientific and factual
- All information on formula feeding, including that on labels, should explain the benefits of breastfeeding and the costs and risks associated with formula feeding
- Unsuitable products, such as sweetened condensed milk, should not be promoted for babies
- Companies and makers of formula should comply with the Code's rules even if countries have not adopted laws or other measures to enforce it.



Activity: WHO Code Violations



Activity: WHO Code Violations

Subtle messaging used by formula companies

- Which photo/mother is more appealing?
- Why do you think that is?



Activity: WHO Code Violations

Consider the following:

- What message is this ad giving parents about infant feeding?
- How might this ad make a mother question her decision to breastfeed?
- How does this ad make you feel?

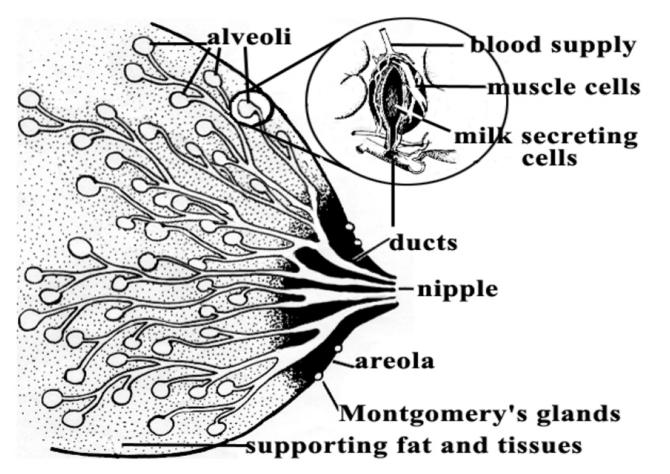
Mother's milk, time-tested for millions of years, is the best nutrient for babies because it is nature's perfect food.

- Robert S. Mendelsohn

Making breastmilk

- The breasts begin making colostrum during pregnancy
- After the baby and the placenta are born, the hormones change
- This causes the volume of milk to increase and changes what is in the milk
- To keep increasing the milk supply and to keep on making milk, the baby needs to feed often and effectively
- Removing milk from the breast sends signals to the brain to make more milk
- This is called supply and demand and ensures there is enough milk for the baby as long as baby and mother continue to breastfeed

Breast Anatomy



Adapted from *Breastfeeding Counselling: a training course*, WHO/CHD/93.4, UNICEF/NUT/93.2

2009

UNICEF/WHO Breastfeeding Promotion and Support in a Baby-Friendly Hospital – 20 hour Course



Night feedings are important to having enough milk and meeting a baby's food needs. Hormones in a mother's body during the last part of pregnancy trigger the breasts to make colostrum.



How breastmilk is made

Colostrum is produced during the first few days after birth. This process is hormone-driven.





Milk supply will be appropriate if the milk is often removed from the breast. The more often a baby feeds and empties the breasts; the more milk is made.

Mature milk is brought in by an increase in hormones and effective feeding.



Breastmilk is amazing!

- Breastmilk is made to the special needs of the baby and child.
- Breastmilk changes from hour to hour, day to day!
- Breastmilk changes with the temperature and seasons!
- Breastmilk changes for baby and child from side to side!
- Breastmilk changes to fight viruses and helps treat pain!
- Breastmilk changes flavours based on what the mothers eats!



Colostrum

- First milk
- Colour is usually creamy or yellow, but can be green, grey, or rust-coloured
- Is higher in protein, minerals, salt, vitamin A, white blood cells, and certain antibodies than mature milk
- It has a laxative effect; this helps newborns pass meconium
- Comes in small drops that perfectly fit in a newborn baby's small tummy
- Each drop is packed with nutrition and protective ingredients

Mature milk

- Contains more than 200 known beneficial ingredients, with more being discovered all the time
- Contains living cells including stem cells; breastmilk is ALIVE
- Comes in two to five days after baby is born
- Contains water, fat, carbohydrates, protein, vitamins and minerals, enzymes, and white cells
- Changes from the beginning of the feeding to the end, from feeding to feeding, and from day to day

What does species-specific mean?

Each species makes milk specifically for its baby. This milk ensures the best growth and survival

Baby High content of carbohydrates (sugar) to meet needs of a fast growing and developing brain

 Protein is relatively low to meet slower physical-growth needs

My brain grows really fast so I can learn!



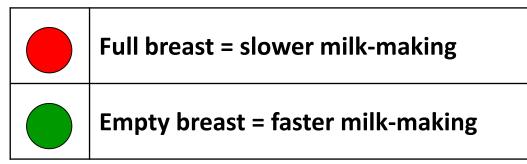
Calf

- Low content of carbohydrates (sugar) due to slow brain growth
- High protein is to meet fast physical growth (getting bigger = staying alive)



My body grows really fast so I can move right away!

How does breastfeeding work?



- As the breast fills up and becomes full, milk-making slows down
- When the breast is emptier, milk-making speeds up
- When a baby nurses frequently, they are "putting in their order for the next feed"
- The amount of milk made is affected by how often and how well the baby feeds and increases along with your baby's weight and hunger needs

Breasts, nipples, and storage capacity

- Breasts are as unique as each mother
- There are many different sizes and shapes of breasts and nipples
- Most women have one breast slightly larger than the other
- The ability to breastfeed is rarely affected by breast and/or nipple shape and/or size



Breastfeeding Counselling: a training course, WHO/CHD/93.4, UNICEF/NUT/93.2

Storage capacity is the amount of milk that the breast can hold between feedings

- Storage capacity can be very different from mother to mother and also between the same mother's breasts
- Storage capacity is not decided by breast size
- A larger milk storage capacity may mean a mother's breasts can wait longer between feedings without affecting milk supply and baby's growth
- A smaller storage capacity may mean a mother needs to nurse her baby more often to satisfy her baby's hunger and maintain her milk supply since her breasts will become full (slowing milk-making) more quickly

Activity: Breastfeeding Survivor



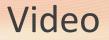
Feeding Cues (Signals)



Feeding Cues (Signals)

What babies know about breastfeeding

- **How to find the breast:** Held skin-to-skin in the first hour or two after birth (and beyond), babies push their way toward their mother's breast
- How to latch: Once at the breast, most babies know how to bob, lick, and latch (if given enough time)
- How to make the milk flow: Babies nurse with quick, short sucks in the beginning and knead the breast to encourage let-down
- How to build a good milk supply: Babies nurse frequently (day and night) and cluster-feed
- How to adjust the milk to meet their needs: Babies change their feeding patterns during growth spurts and when sick or hurt
- How to stop when they are full: Babies nurse for food and comfort while meeting all their nutritional needs



Hunger cues (signals) of newborn baby

Video: Breastfeeding in the First Hours after Birth (Global Health Media)

Feeding Cues (Signals)

What does a hungry baby look like?

Early cues "I'm hungry"

- Stirring, moving arms
- Mouth opening, yawning, licking
- Hand-to-mouth movements
- Rooting, sucking hands
- Turning head side-to-side



Mid cues "I'm really hungry"

- Stretching
- Moving around more
- Increased hand-to-mouth movements
- Sucking, cooing, and sighing sounds



Feeding Cues (Signals)

Late cues ... "calm me - then feed me"

- Crying
- Upset body movements
- Turning red
- Some babies choose sleep over feeding if their hunger cues are missed often



Not every baby will latch when they show late feeding cues. Many will need to

be calmed first.

Suggestions for calming baby:

- Cuddle
- Rock
- Skin-to-skin
- Singing
- Talk in a calm voice



When in doubt offer the breast!

Sleep and Night Feeding



Sleep and Night Feeding

Safe sleep

 Health Canada recommends babies sleep in a crib, cradle, or bassinette; on their back with no pillows or bumper pads; and in the same room as the parents

Sleep and Night Feeding

Night feedings

- Are important to maintaining milk supply
- Delay the return of her period for some women
- Reduce the risks of SIDS
- Are normal for human babies