

Dr Labbok, then in UNICEF and subsequently as head of the North Carolina Global Breastfeeding Institute (CGBI), worked to develop models of E-BFHI in her community as part of the larger WABA effort:

In 2005 and 2006, stimulated by discussions at a WABA-hosted international meeting held in Arusha, Tanzania in 2002, UNICEF/WHO decided to update the BFHI guidance, and to offer guidance for expanding BFHI beyond the maternity setting. Initial concepts for a Baby-Friendly Community were offered in the 2010 UNICEF/WHO BFHI revised and expanded BFHI materials, Section 1.1 (See: http://www.who.int/nutrition/topics/bfhi/en/)

The creation of these Criteria for Baby-friendly Communities suggested that Step 10 was not sufficient for postmaternity support. It might be improved by including more than just referral to the community, but rather might include a more actively involved community as a whole in support of optimal IYCF. For the community intervention, this should not be limited to expanding breastfeeding support into the community healthcare services alone, but rather should extend beyond the healthcare system.

There are several activities around the world today that call themselves Community BFHI. We were challenged to create a pilot designation approach to serve as a model for the creation of an inclusionary process that would be replicable. The designation would recognise the many actions needed to support women to breastfeed that include, but extend beyond, the healthcare sector within a geo-political area. This was encouraged by representatives from WHO, UNICEF, Baby-Friendly USA and WABA. To this end, we at the Carolina Global Breastfeeding Institute (CGBI) first explored the possible rationales that might provoke a wider positive response to a breastfeeding-support initiative. In discussion we concluded that a positive response was received when it was presented that breastfeeding is associated with overall a better chance for lifelong health and development, as well as better school performance and other achievements. Since the current young workforce is seeking optimal locations to raise their families, they are attracted to open, supportive communities. Given this, a breastfeeding-friendly community is a healthier, more welcoming community for young families of all races and ethnicities. Leadership, therefore, recognises that a breastfeeding family-friendly community contributes to improved public relations through the city's intention to support mothers.

Our process to develop this pilot approach initially involved a group of interested stakeholders, the CGBI, Chapel Hill Rotary, La Leche League and a faith-based organisation. Subsequently, we invited a larger group of potential stakeholders: the Mayors' offices, Chamber of Commerce/Enterprise groups, faith-based groups, the County Health Department, and coordinated with the State Breastfeeding Coalition. After publicly launching the effort, the group continued to identify new stakeholders such as clubs/social groups, education, childcare, funders and others.