KEY COMPONENTS OF EXPANDED BFHI PACKAGE

Baby-friendly communities

To sustain breastfeeding after delivery, ongoing support of mothers is necessary, including outreach by maternity staff in the first days postpartum, community-based primary health care workers with training in breastfeeding counselling, referral to peer counsellors and mother support groups. Criteria for appropriate regular contacts with mothers need to be developed locally.

BFHI and Prevention of Mother-to-Child Transmission (PMTCT) of HIV/AIDS

ARV treatment and counselling on infant feeding options should be available according to international guidelines and national policy. The BFHI should be implemented regardless of HIV prevalence and modified as necessary for the minority of mothers who are not going to breastfeed.

Mother Friendly Care

Delivery practices should include a mother having a companion, being able to drink/eat during labour, using non-drug pain relief, adopting a position of her choice during labour and delivery and minimising invasive procedures.

Maternity facilities

Ten Steps to Successful Breastfeeding

Clearer Global Criteria for each step particularly Step 4

Baby-friendly physician's office

Requires a written policy to promote and support exclusive and continued breastfeeding including the management of breastfeeding and its challenges.

Baby-friendly neonatal units

Care of premature or ill infants and their mothers should include: the optimal management of breastmilk expression; breastmilk feeding (without the use of bottles and teats); transition to breastfeeding; kangaroo mother care; and criteria for discharge and effective post-discharge support for mother and baby.

Baby-friendly complementary feeding

Breastfeeding should be exclusive for six months and continue up to two years or beyond with adequate and safe complementary feeding according to the *Ten Guiding Principles of Complementary Feeding*.

What does WABA hope to achieve?

- Increased awareness of the importance of the BFHI and its expansion.
- Promotion of effective and innovative ways of implementing BFHI.
- More interest/commitment to actions at national level.

How can you work with these issues?

- 1. Endorse WABA.
- 2. Visit our website for further ideas.
- 3. Join us on FaceBook.



The World Alliance for Breastfeeding Action (WABA) is a global network of individuals & organisations concerned with the protection, promotion & support of breastfeeding worldwide. WABA action is based on the Innocenti Declaration, the Ten Links for Nurturing the Future and the Global Strategy for Infant & Young Child Feeding, WABA is in consultative status with UNICEF & an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (FECOSOC).

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Links to information and guidance on various aspects of the revised, updated and expanded WHO/UNICEF BABY-FRIENDLY HOSPITAL INITIATIVE

- The revised BFHI materials are available on-line, at: http://www.who.int/nutrition/topics/bfhi/en/index.html
- 2. The new materials offer new approaches and clear guidance on:
 - How to establish/reestablish a country program

Go to: http://whqlibdoc.who.int/publications/2009/9789241594967 eng.pdf

Five Steps in Implementing BFHI at the Country Level, starting on page 4. Table on page 13

Suggested approaches and ethical considerations in the national-level BFHI organizations

Go to: http://whqlibdoc.who.int/publications/2009/9789241594967 eng.pdf Five Steps in Implementing BFHI at the Country Level, starting on page 4.

■ The updated criteria for the Ten Steps

Go to: http://whqlibdoc.who.int/publications/2009/9789241594967_eng.pdf The Global Criteria for the BFHI, starting on page 31

Approaches to expanding into maternity care and beyond the hospital Go to: http://whqlibdoc.who.int/publications/2009/9789241594967 eng.pdf Baby-friendly Expansion and Integration Possibilities, starting on page 53 These include:

Mother-baby friendly facilities, page 57, as well as

Go to http://whqlibdoc.who.int/publications/2009/9789241594998 eng.pdf

Global Criteria - Mother-friendly care, page 21

Baby-friendly communities: recreating Step Ten, page 53

BFHI and Prevention of Mother-to-Child Transmission of HIV/AIDS, page 57, as well as

Go to http://whqlibdoc.who.int/publications/2009/9789241594998 eng.pdf HIV and infant feeding recommendations 23

Baby-friendly neonatal intensive care and paediatric units, page 59

Baby-friendly physician's office, page 60

Baby-friendly complementary feeding, page 61

Decision-makers training

http://www.who.int/nutrition/publications/infantfeeding/9789241595018 s2/en/index.html

BFHI Section 2: Strengthening and sustaining the Baby-friendly Hospital

- Updated 20 hour (replacing 18 hour) health-worker training course http://www.who.int/nutrition/publications/infantfeeding/9789241594981 s3/en/index.html
- New self-appraisal questions and structure

Go to: http://whqlibdoc.who.int/publications/2009/9789241594998_eng.pdf

New self-calculating, self-graphic producing, assessment tool, only available to those designated as the credentialing body in each country: Contact WHO or UNICEF for access for the credentialing body

Support mothers everywhere to get the best start for themselves and their babies – EXPANDED BFHI



In the last 20 years, many lessons have been learned. In response, UNICEF/ WHO and partners developed a revised, updated and expanded BFHI package, released in 2009.

The UNICEF/WHO updated materials clarify the criteria for each of the Ten Steps and suggestions for implementation at the national and facility level and for attention to conflict to interest in programs. In addition, possible expansion of the initiative to intervene before and after the maternity period, and at a variety of societal levels - from family to community to nation – are described and offered for interpretation and implementation in a variety of settings. These include:

- Pre and post maternity care:
 - Pre-delivery mother-baby friendly care,
 - Post-maternity clinic and physician office care and other facilities,
- Special circumstances, such as care in the context of HIV and emergencies,
- Beyond healthcare:
 - o Community-level
 - Workplace
- Suggestions for more.