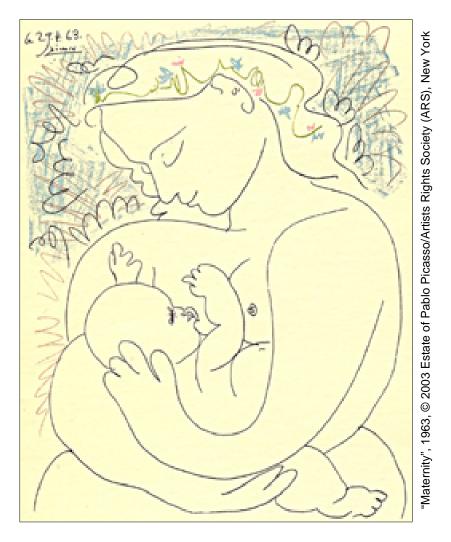
BABY-FRIENDLY HOSPITAL INITIATIVE

Revised, Updated and Expanded for Integrated Care



Global Strategy for Infant and Young Child Feeding

The aim of the Global Strategy is to improve – through optimal feeding – the nutritional status, growth and development, health, and thus the survival of infants and young children.

It supports exclusive breastfeeding for 6 months, with timely, adequate, safe and appropriate complementary feeding, while continuing breastfeeding for two years and beyond.

It also supports maternal nutrition, and social and community support.

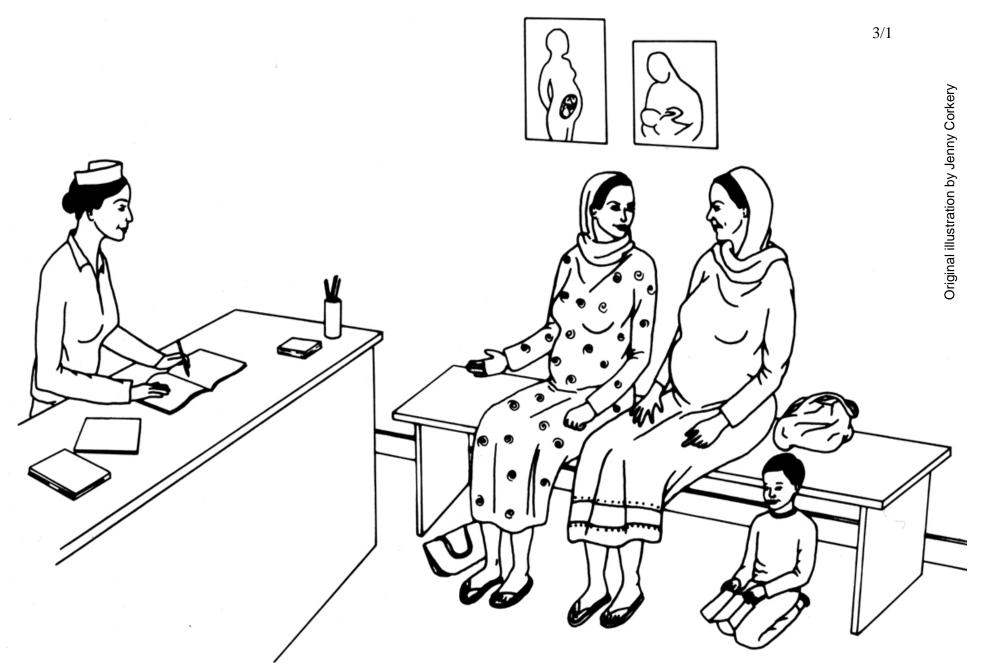
The aim of the Baby Friendly Hospital Initiative

To implement
the Ten Steps to Successful Breastfeeding
and
to end the distribution of free and low-cost
supplies of breastmilk substitutes
to health facilities.

Course Aims

The aim of this course is that every staff member will confidently support mothers with early and exclusive breastfeeding,

and that this facility moves towards achieving Baby-friendly designation.

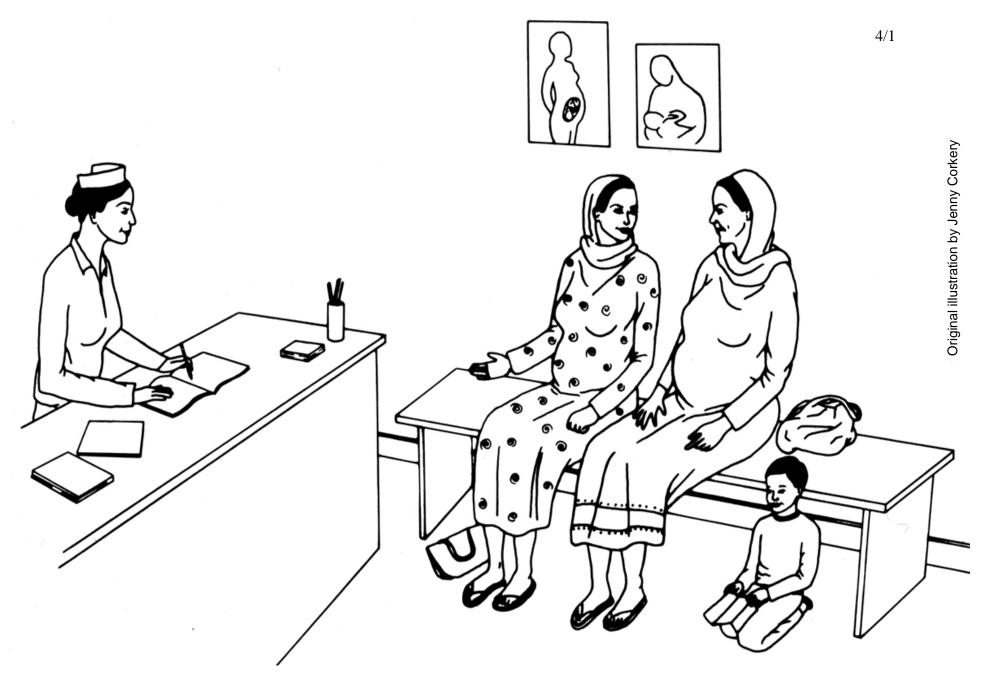


UNICEF/WHO Breastfeeding Promotion and Support in a Baby-Friendly Hospital – 20 hour Course

Infant Feeding Recommendation for HIV-positive Women

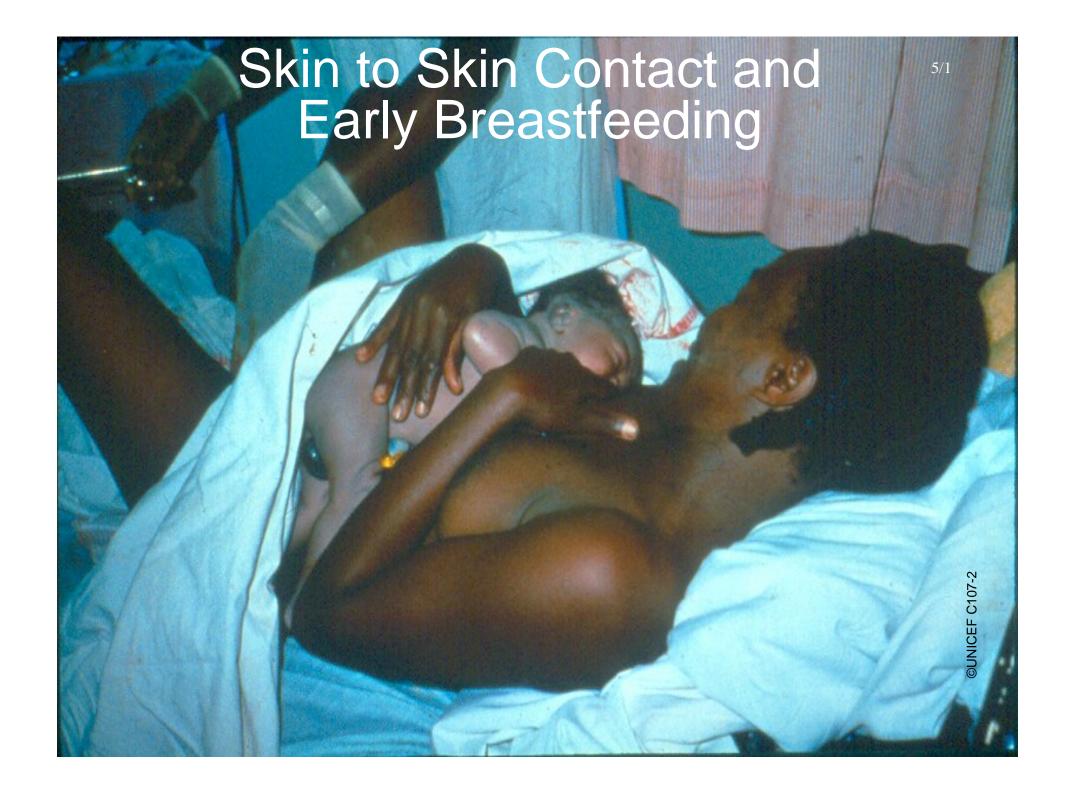
Exclusive breastfeeding is recommended for HIVinfected mothers for the first six months of life unless replacement feeding is acceptable, feasible, affordable, sustainable and safe for them and their infants before that time.

When replacement feeding is acceptable, feasible, affordable, sustainable and safe avoidance of all breastfeeding by HIV-infected mothers is recommended.



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

The overall aim of the International Code of Marketing of Breast-milk Substitutes is the safe and adequate nutrition of all infants.

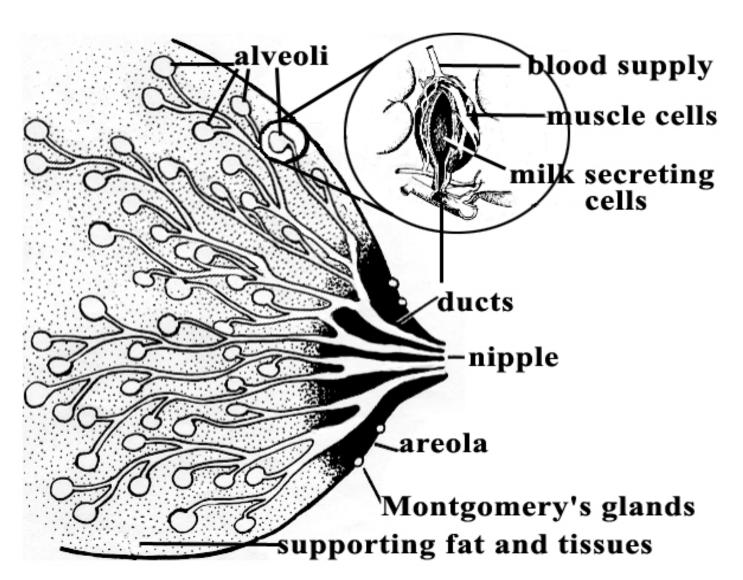






dapted from *Dreastreeding Courselling: a training course*, VHO/CHD/93.4, UNICEF/NUT/93.2

Parts of the Breast

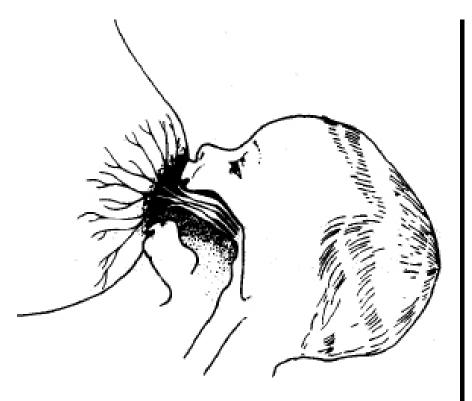


Breastfeeding Counselling: a training course, WHO/CHD/93.4, UNICEF/NUT/93.2

Helping the Oxytocin Reflex



What can you see?



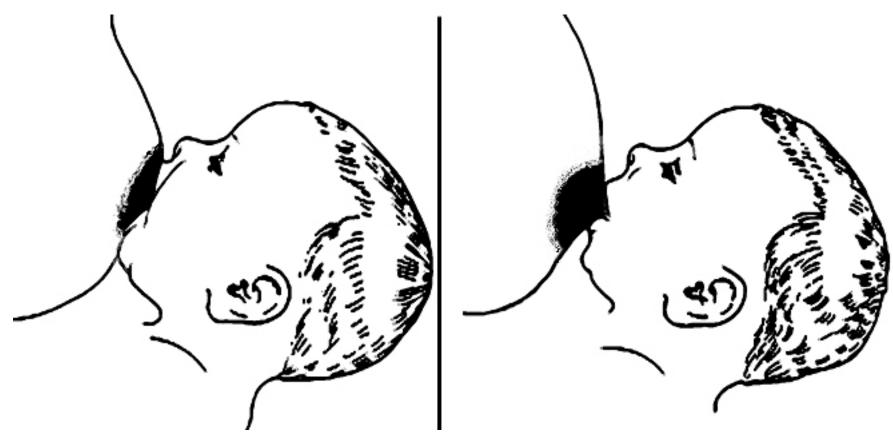




Poor attachment

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

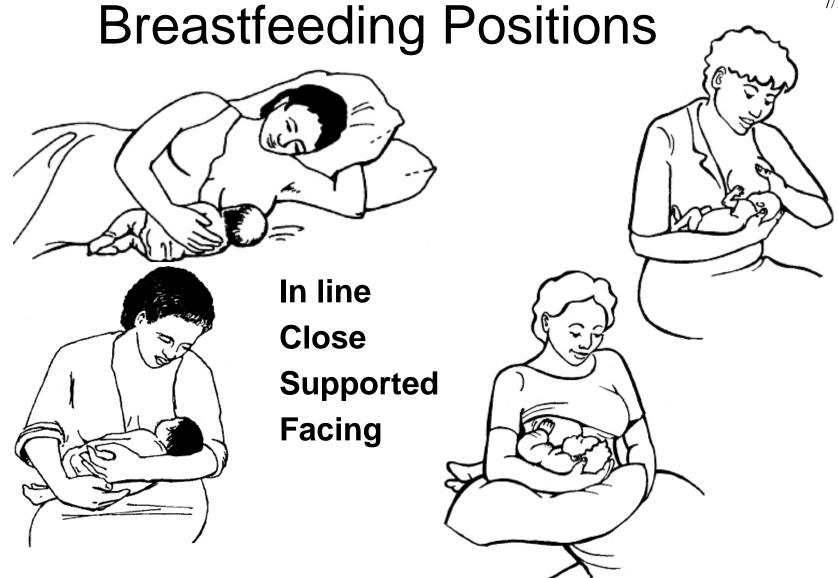
What can you see?



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

Good attachment

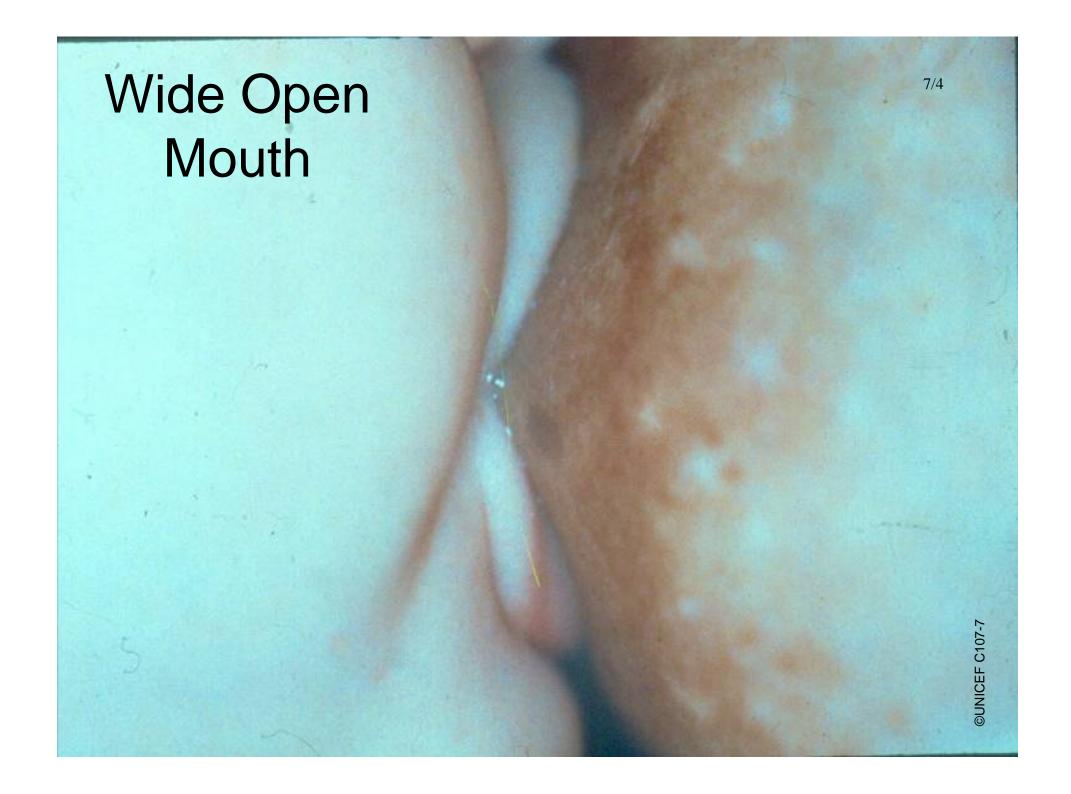
Poor attachment

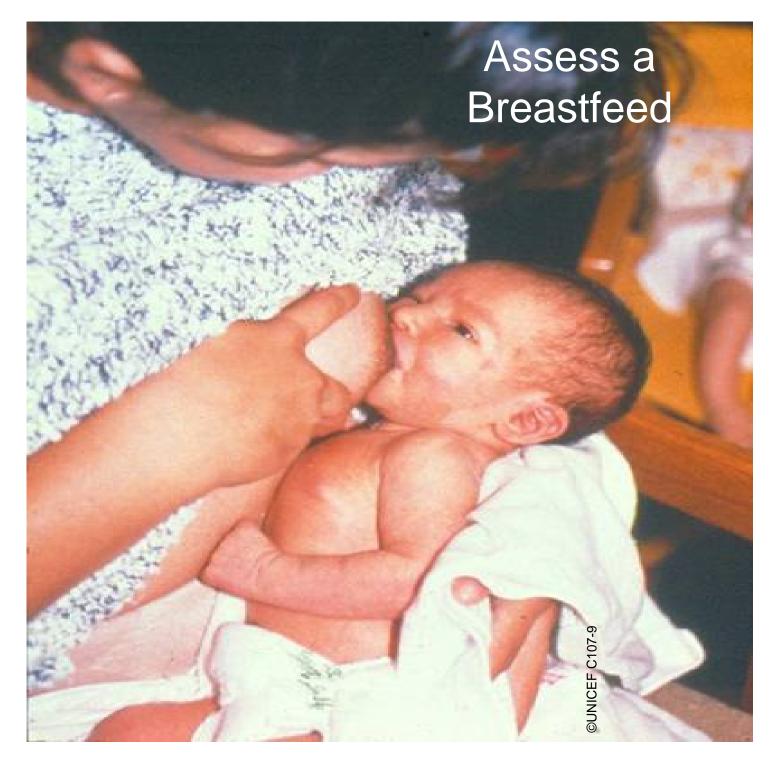


BREASTFEED OBSERVATION AID

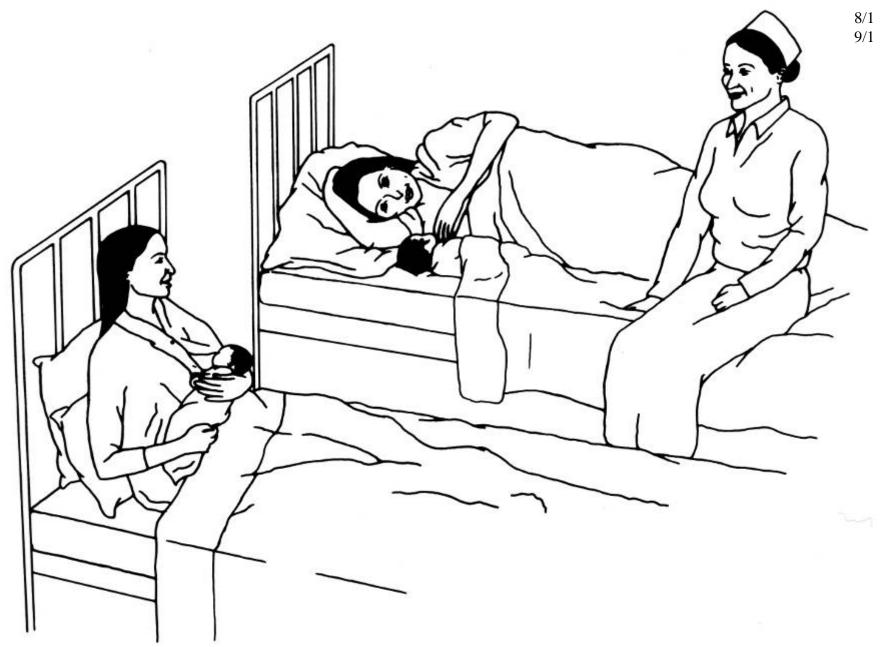
Mother's name	Date
Baby's name	Baby's age
Signs that breastfeeding is going well:	Signs of possible difficulty:
GENERAL	
Mother:	Mother:
Mother looks healthy	☐ Mother looks ill or depressed
☐ Mother relaxed and comfortable	☐ Mother looks tense and uncomfortable
Signs of bonding between mother and baby	☐ No mother/baby eye contact
Baby:	Baby:
Baby looks healthy	Baby looks sleepy or ill
Baby calm and relaxed	☐ Baby is restless or crying
Baby reaches or roots for breast if hungry	Baby does not reach or root
BREASTS	
☐ Breasts look healthy	☐ Breasts look red, swollen, or sore
☐ No pain or discomfort	☐ Breast or nipple painful
☐ Breast well supported with fingers away from nipple	☐ Breasts held with fingers on areola
☐ Nipples protractile	☐ Nipples flat, not protractile
□BABY'S POSITION	
Baby's head and body in line	Baby's neck and head twisted to feed
Baby held close to mother's body	Baby not held close
Baby's whole body supported	Baby supported by head and neck only
Baby approaches breast, nose to nipple	☐ Baby approaches breast, lower lip/chin to nipple
BABY'S ATTACHMENT	
☐ More areola seen above baby's top lip	☐ More areola seen below bottom lip
Baby's mouth open wide	Baby's mouth not open wide
Lower lip turned outwards	Lips pointing forward or turned in
Baby's chin touches breast	Baby's chin not touching breast
SUCKLING	
☐ Slow, deep sucks with pauses	Rapid shallow sucks
Cheeks round when suckling	Cheeks pulled in when suckling
Baby releases breast when finished	☐ Mother takes baby off the breast
Mother notices signs of oxytocin reflex	☐ No signs of oxytocin reflex noticed
Notes:	











Original illustration by Jenny Corkery



2 weeks old Healthy at birth Discharged Day 2

"Sleeping all the time"

"Refusing" the breast

3 stools in week

12% under birth weight

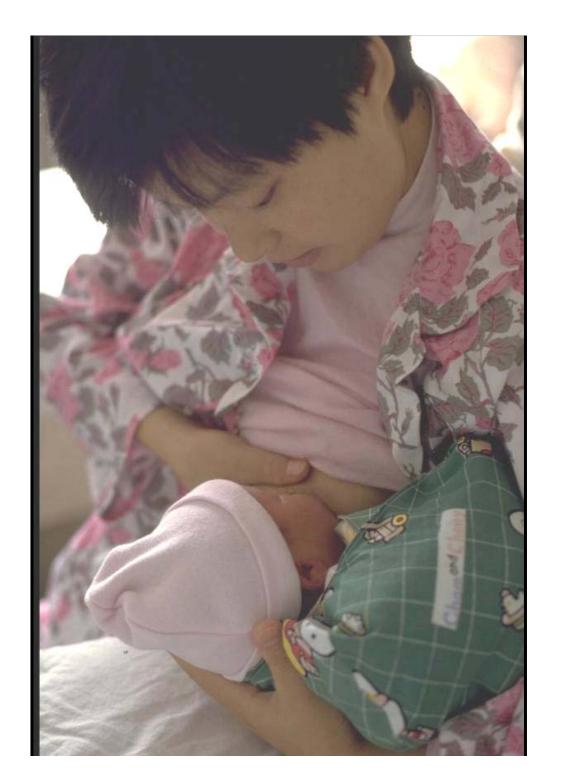
Bottle with honey and water twice yesterday



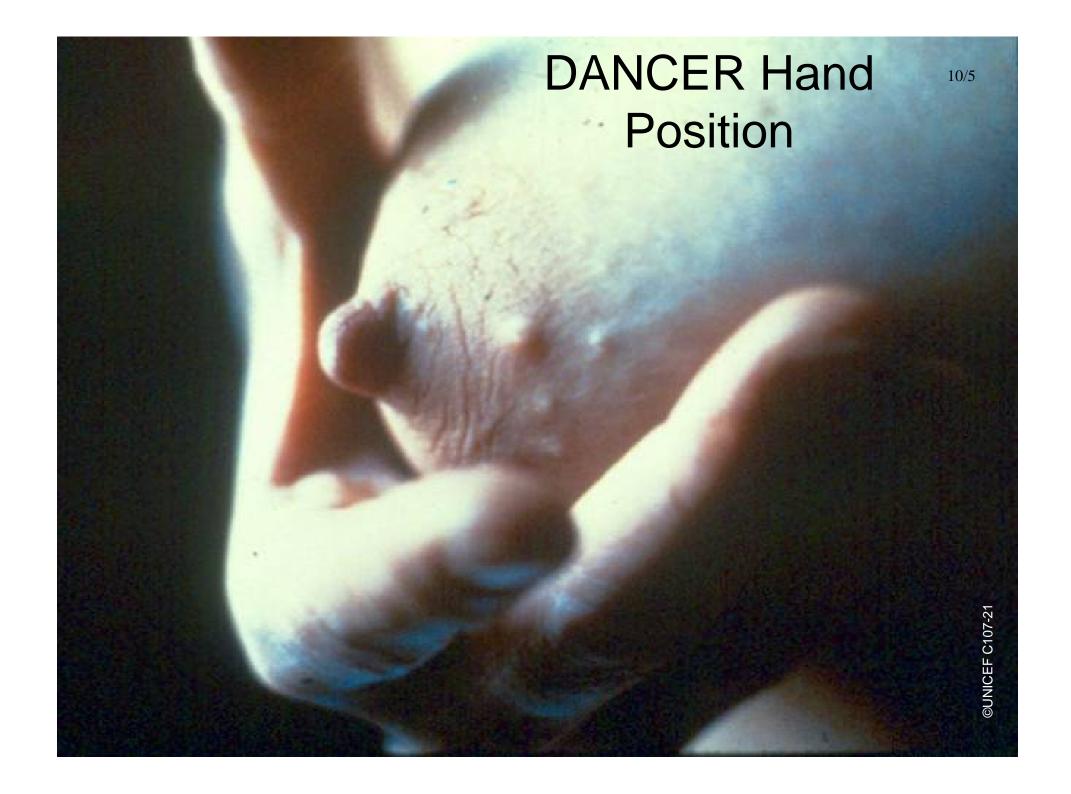


UNICEF/HQ93-0287/ Roger Lemoyne, China

Positioning a preterm infant











Hand Expression

©UNICEF 910164F





Supplementer

ır Ruskhana Haider, Dhaka, Banglades

Size and Shape

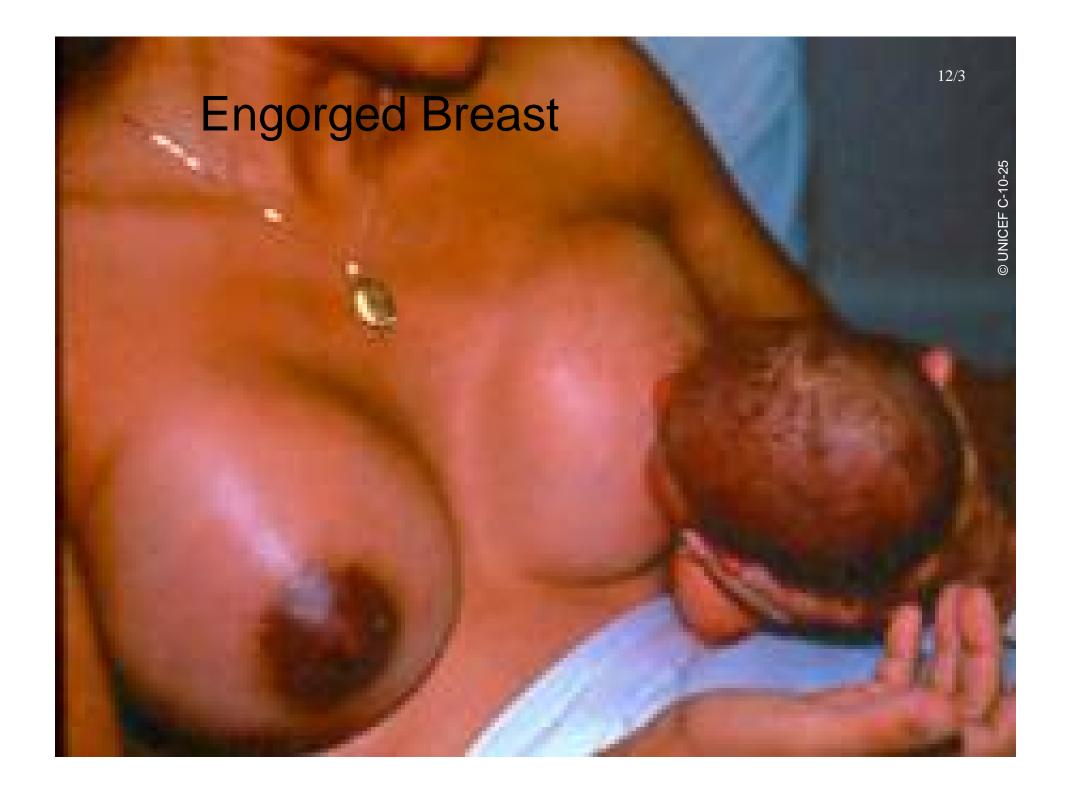
There are many different shapes and sizes of breast and nipple.

Babies can breastfeed from almost all of them.

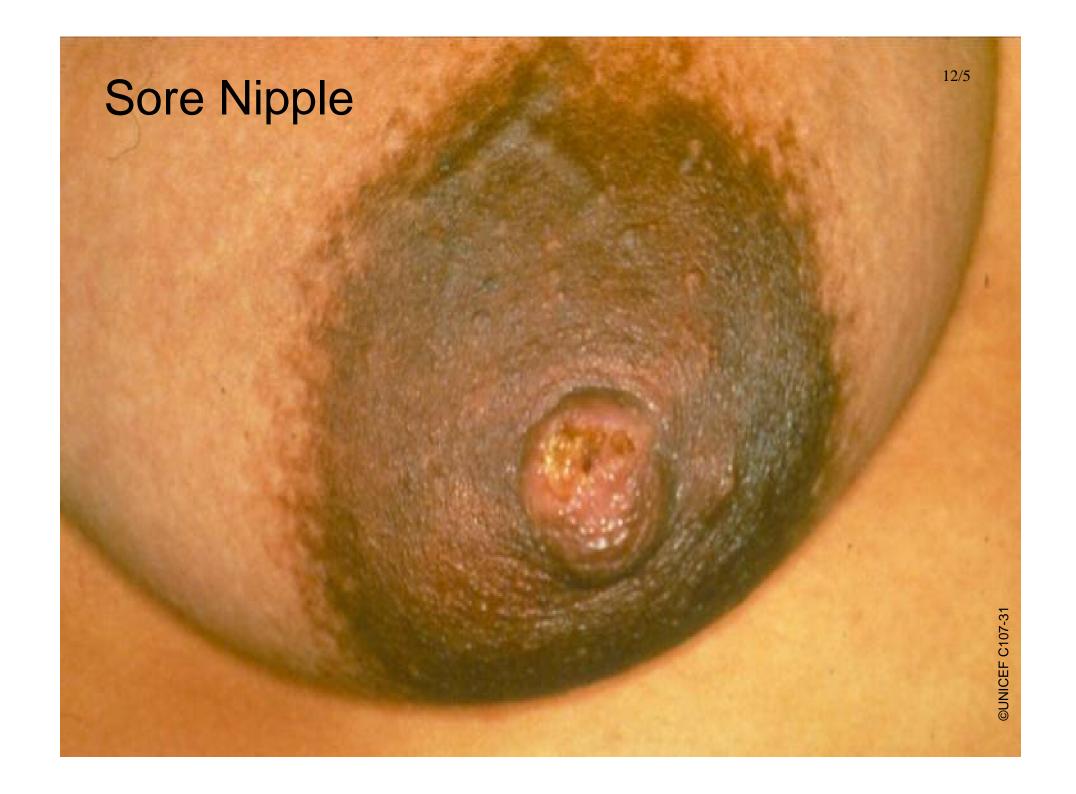


Breastfeeding Counselling: a training course, WHO/CHD/93.4, UNICEF/NUT/93.2







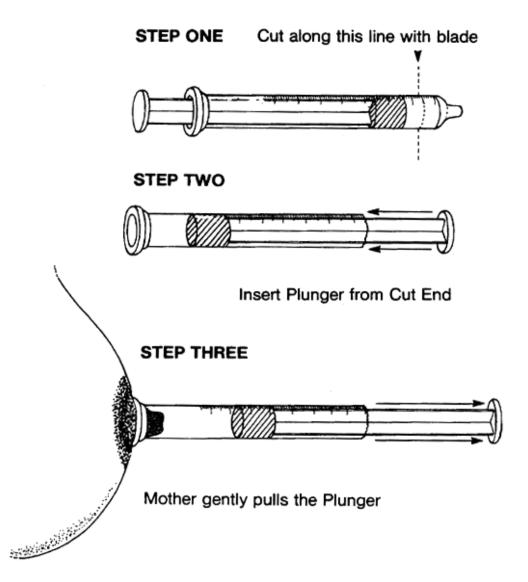




Sore Nipple

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

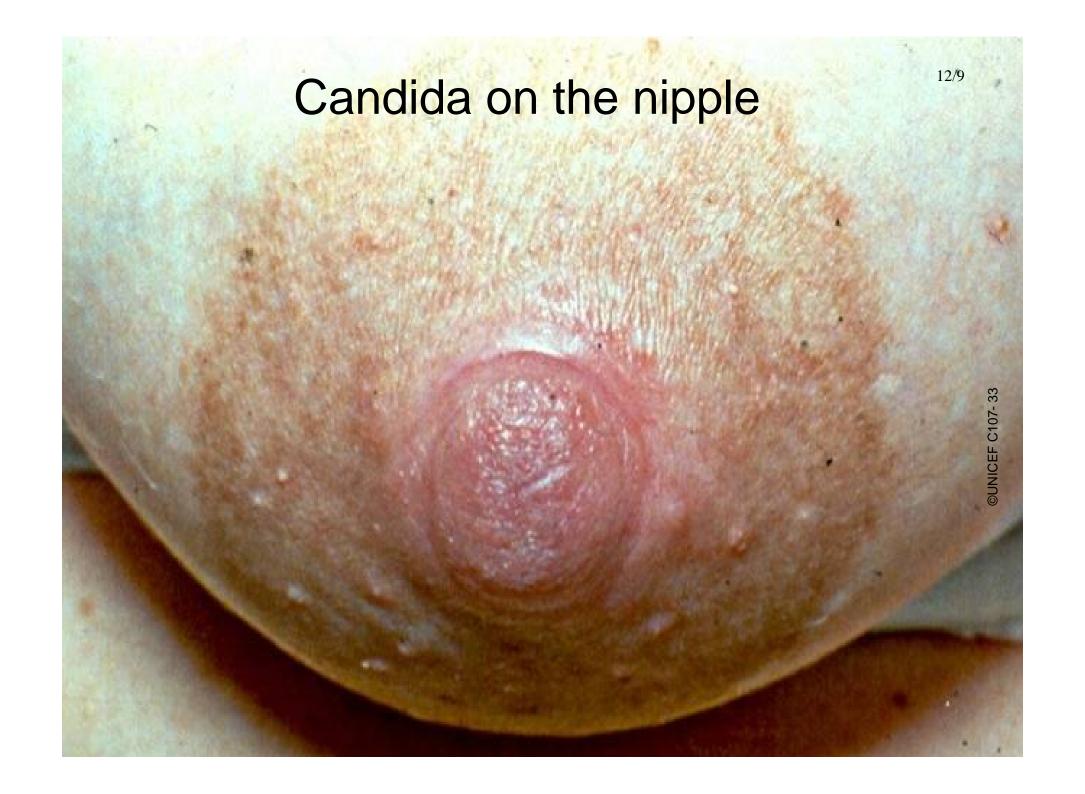
Syringe method for inverted nipples

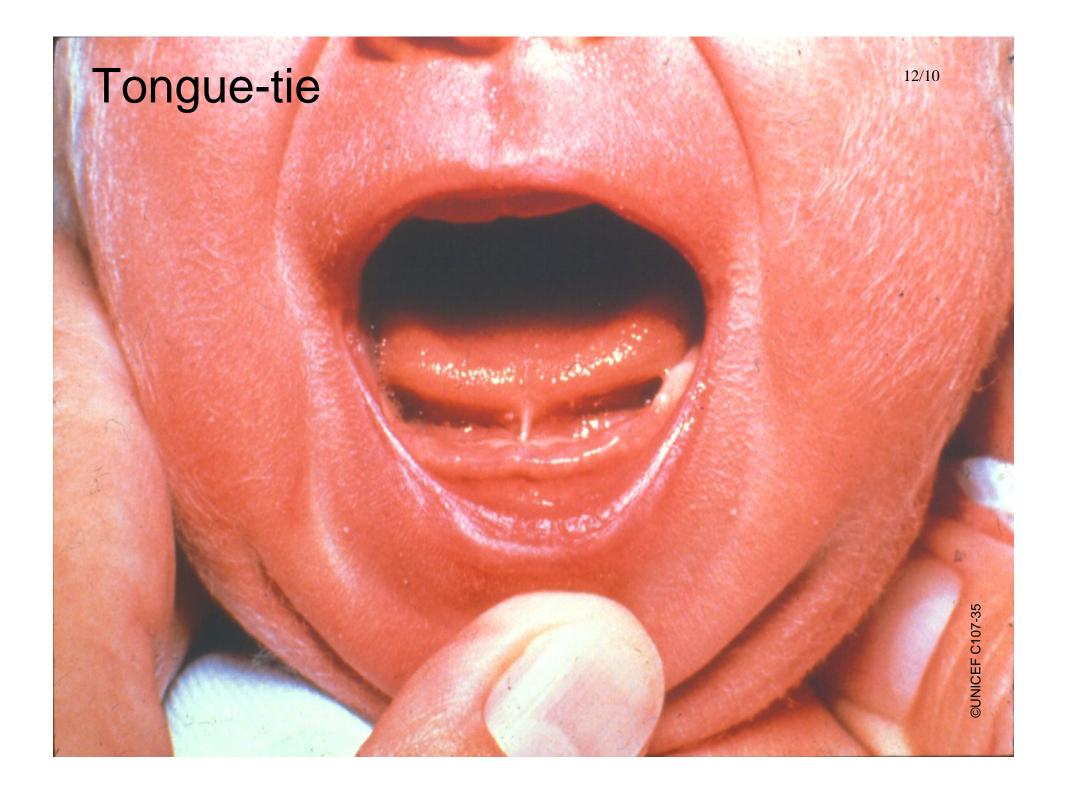


©UNICEF C107-34

Candida on the nipple







Lactational Amenorrhea Method (LAM)

Ask the mother or advise her to ask herself these three questions:

1. Have your menses returned?

NO

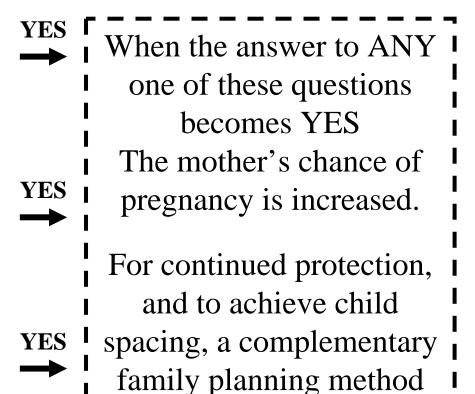
2. Are you giving supplements or are there long periods without breastfeeding either day or night?

NO |

3. Is your baby more than six months old?

NO ↓

There is only a 1-2% chance of pregnancy at this time.



Institute for Reproductive Health, Georgetown, Washington, DC

needs to be used, and

breastfeeding continue.

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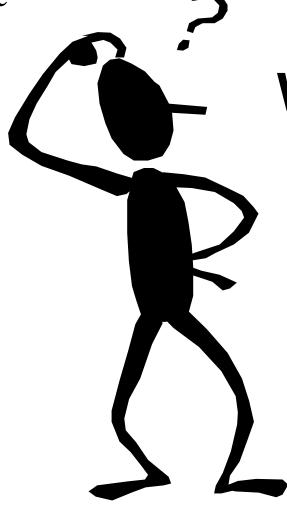
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Developing a Plan:

Step One

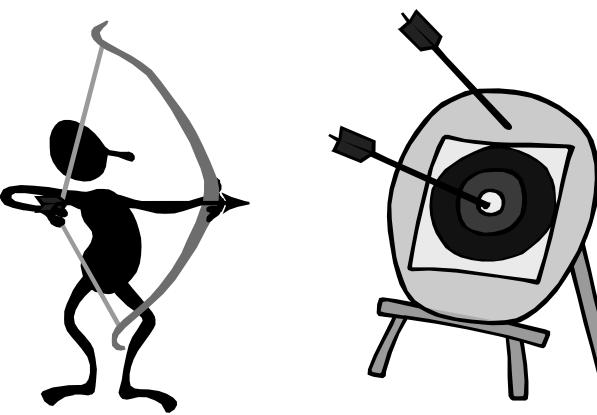


Where are we now?

Developing a Plan:

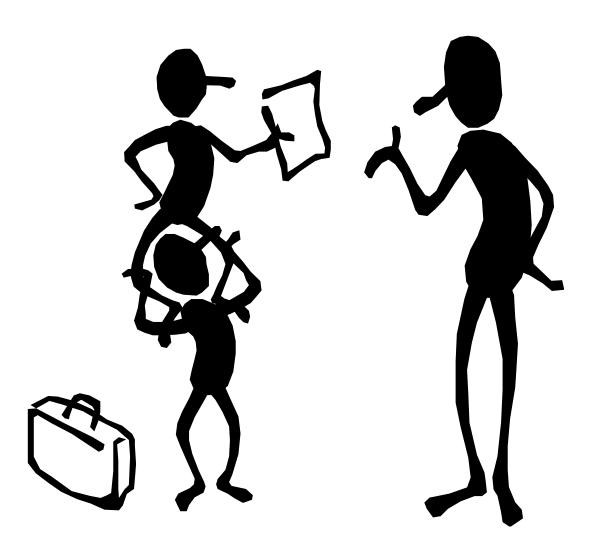
Step Two

Where do we want to be?



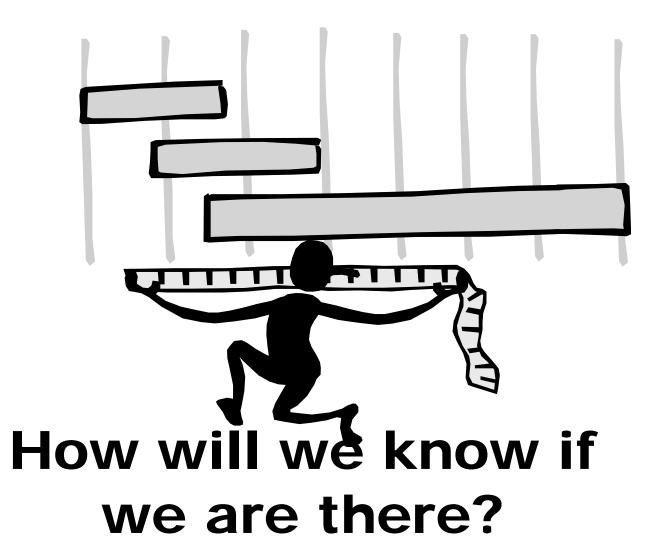
Developing a Plan: Step Three

How will we get there?

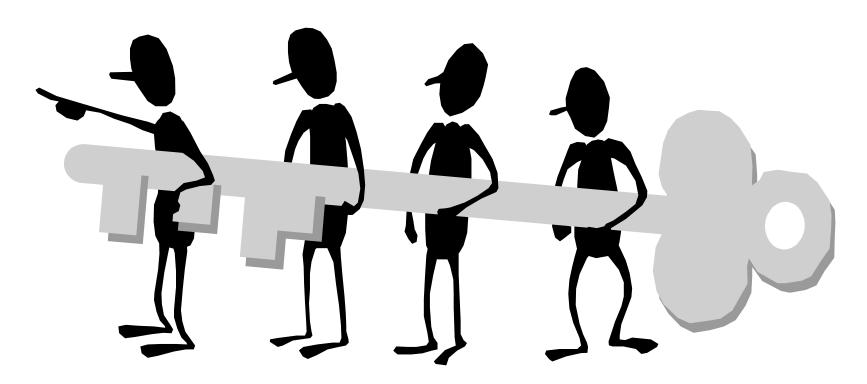


Developing a Plan:

Step Four



Developing a Plan: Step Five



How will we sustain it?