Impact of the Baby Friendly Hospital Initiative on Breastfeeding and Child Health Outcomes

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Report Virtual Launch

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Baby Friendly Hospital Initiative WHO/UNICEF

Table 1. The WHO/UNICEF Ten Steps to Successful Breastfeeding

- 1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
- 2. Train all health care staff in the skills necessary to implement this policy.
- 3. Inform all pregnant women about the benefits and management of breastfeeding.
- 4. Help mothers 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 to breastfeeding infants.
- Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

¹ In practice, Step 4 now focuses more on ensuring skin-to-skin contact between mother and infant immediately after birth.

Baby Friendly Hospital Initiative Global Analytical Overview

Pérez-Escamilla et al (Amer J Public Health, 1994)

- Examine impact of BFHI on BF outcomes
- N=18 experimental or quasi-experimental studies
- Evidence of impact
 - -Free formula at hospital discharge
 - -Rooming-in
 - -BF counseling in maternity ward

Baby Friendly Hospital Initiative Global Analytical Overview

Pérez-Escamilla et al (Amer J Public Health, 1994)

- Well designed studies are needed to understand:
 - The combined synergistic impact of all BFHI steps combined
 - The independent impact of pre-, peri- and postnatal steps

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Impact of the Baby-friendly Hospital Initiative on breastfeeding and child health outcomes: a systematic review

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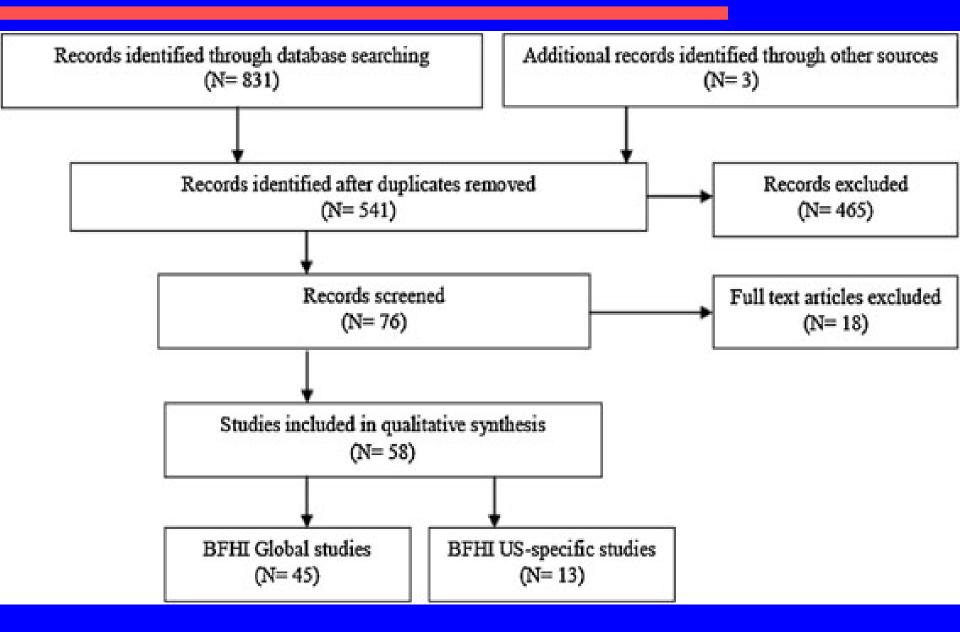
Questions

- ¿What is the impact of BFHI on BF and child health outcomes?
- ¿What role does step 10 (community support) plays on BFHI impacts?

Methods

- Experimental, quasi-experimental and observational studies
 - Full or partial implementation
 - Healthy mothers with healthy newborns
 - BF and/or infant health indicators
- Electronic bases: MEDLINE, EMBASE, Global Health, CINAHL, PUBMED and Web of Science
 - Inception thru December 2012

Articles identified



Study Designs

Design	# of Articles
Experimental	9 articles (3 studies)
Quasi-experimental	
With comparison group	4 articles
Without comparison group	14 articles
Observational	
Prospective	11 articles
Cross-sectional\retrospective	20 articles
Total	58 articles



- Adherence to the Ten Steps increases duration of EBF and any BF
- There is a dose-response relationship between the number of steps moms are exposed to and their BF success
- Community support (Step 10) is key to sustain BFHI BF impacts in the longer term
- Avoiding in-hospital formula supplementation (Step 6) is key for BF success
 - Likely to reflect that rest of steps are well implemented
- BFHI leads to in GI and atopic eczema as well as intellectual development





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Brazil

(Bechara-

Coutinho,

2005)

Mexico

(Morrow.

1999)

India

(Bhandari,

2003)

Brazil

(Albernaz,

1998)

■ Control ■ Intervention

Belarus

(Kramer,

2001)

Bangladesh Bangladesh

(Haque,

2002)

(Haider,

2000)

Ghana.

(Aidam.

2005)



"Breastfeeding is the most effective preventive measure to improve child health and survival" *World Health Organization, 2010*



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