

Breastfeeding a lifesaving practice in floods

By Dr Aisha Zafar

The worst floods in the history of Pakistan have affected millions of people with a staggering 7.5 million children comprising the most vulnerable group of the flood victims.

Although established as the best lifesaving practice, breastfeeding's crucial role is often compromised and at times hampered by indiscriminate supply of dry baby formula milks as part of humanitarian aid. The supply of infant formula milks in emergencies as lifesaving relief nutrition can actually contribute to do the contrary as their intake involves unhygienic bottle-feeding practices, increasing the risk of waterborne diseases among infants.

The child mortality rate increases by 70 times due to diarrhoea, respiratory illnesses and malnutrition during emergencies. However, breastfeeding is a simple, safe, traditional and protective practice that is the best way to safeguard an infant against fatal diseases. The WHO recommends exclusive breastfeeding until a baby is six months of age, and continued breastfeeding up to two years and beyond.

During the 2005 earthquake in Pakistan, incidents were reported where a well-known multinational baby

formula milk company provided the supply of formula milk as donation to quake victims. This was reported by the National Alliance for Protection and Promotion of Breastfeeding (NAPBF) to the Health Ministry. Such incidents and practices are not unexpected during the current flood crisis, requiring a vigilant monitoring by relief workers and agencies.

The increased morbidity and mortality rate among the bottle-fed babies during emergencies is attributed mainly to lack of safe drinking water and unavailability of heating facilities for bottles and teats, resulting in fatal diseases. Lack of privacy in temporary camps, fatigue and grief can make even previously breastfeeding mothers to opt for bottle feeding.

The protection and promotion of breastfeeding practice in emergency situations becomes critical when it is one single safeguard against many fatal diseases among infants. The special guidelines prescribed by the Health Ministry for promoting and protecting the infant and young child feeding among the IDPs become important and need to be put into practice. These guidelines bar donations of the Breast Milk Substitutes (BMS) and powdered milks as part of general rations, and encourage availability and use of appropriate complementary foods and supplements.





Revisiting Baby Friendly Hospital Initiative (BFHI)

By Rubina Bhatti

The Baby-Friendly Hospital Initiative (BFHI) is a global UNICEF/WHO-sponsored effort to promote breastfeeding by ensuring that all women are provided with sound information regarding their infant feeding choices and that those who choose to breastfeed their infants are given physiologically sound and evidence-based advice, and skilled assistance.

Ten Steps were accepted as the central theme of the Innocenti Declaration in 1990 and endorsed at the World Summit on Children, which urged the world governments to fully implement Ten Steps in all maternities by 1995. The WHO and the UNICEF recommend the initiation of breastfeeding within an hour after birth, exclusive breastfeeding for six months and continued breastfeeding with nutritious complementary feeding up to two years or beyond.

The BFHI's campaign aims at

encouraging all hospitals providing maternity services to accept Ten Steps of initiation and maintenance of breastfeeding as basic maternity and newborn infant care policy at their respective health facility. Hospitals that develop and implement this policy are accredited as **baby-friendly hospital**

Today more than 152 countries have baby-friendly hospitals and about 28 per cent of all maternities worldwide have fully implemented Ten Steps.

Impact of BFHI over last two decades (1991-2010)

Since the launch of BFHI in 1991, implementation of Ten Steps has significantly contributed to the increase of early initiation and exclusive breastfeeding at the local, national and global levels. According to UNICEF, the recent decline in child deaths from 13 million globally in 1990 to 8.8 million in 2008 is partly due to the adoption of basic health interventions such as early and exclusive breastfeeding.

In Pakistan, around 300 hospitals have been declared baby friendly. The Infant Mortality Rate (IMR) has improved from 102/1000 live births in 1990 to 73/1000 in 2007. Likewise the mortality rate has improved from 132/1000 to 90/100.¹

Need to Revisit BFHI

Despite the improvement manifested in the child health indicators, the progress is far from satisfactory. The goal of achieving all maternities practicing Ten Steps is still far and forlorn. Reduced BFHI programming, inadequate training and weakened compliance with Ten Steps in accredited maternities are contributing to stagnant or declining exclusive breastfeeding rates in many settings and this approach needs to be revisited.

Currently only 37 per cent infants are exclusively breastfed in Pakistan till the age of six months - unfortunately the lowest rate in the SAARC regional countries. Reviving the pledge of Baby-Friendly

Editorial: Breastfeeding

Breastfeeding Week is celebrated every year with great enthusiasm, and assurances are made to strictly monitor and implement the relevant laws on promotion and protection of breastfeeding. Yet enthusiasm for these arduous and laborious tasks fades away to the next year. This only underlines the need for strict vigilance, advocacy, and research work to make sure that the practice of breastfeeding is protected from the influence of commercial interests.

The current flood disaster calls for even more vigilance to protect and promote this practice as activities of baby formula milk companies go unchecked in the chaos and urgency of relief response. With Pakistan becoming increasingly disaster prone, the possibility of emergency situations becoming a fertile ground for promotional activities of baby formula milk companies is ever present now.

Therefore the need for urgent health advocacy initiatives to promote breastfeeding and nutrition in emergency situations cannot be overemphasized.

Dr Arif Azad
Executive Coordinator

Hospital Initiative is a simple yet highly effective proven mean to safeguard the health of millions of infants and children, and to improve health demographic indicators.

Global Breastfeeding Week (GBWk) 2010's theme: Just 10 Steps!

The Baby-Friendly Way

GBWk 2010 commemorates the 20th anniversary of the Innocenti Declaration under the theme of 19th GBWK "Just 10 Steps! The Baby-Friendly Way", and aims at revisiting and reinforcing the BFHI in health settings and beyond. This is an excellent intervention and major developmental theme when accepted, adopted and implemented in health facilities.

Key Guidelines for Baby-Friendly Hospital Accreditation

The following are the key points to adopt and implement in a health facility to be termed as 'baby friendly':

1. All hospitals providing maternity services develop a breastfeeding policy based on key guidelines in English, Urdu and regional languages.
2. The policy should clearly state that free or subsidised supplies of infant formula milks are neither accepted

Social Security Hospital (SSH), an active member of the Health Professionals Alliance, announces the adoption of the lactation management policy and the establishment of a lactation management room.

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nor distributed by this facility, and have it displayed at antenatal clinics, labour rooms, post operative wards, postnatal clinics, paediatric OPD and immunisation centres.

3. This policy should be well communicated to the hospital administration as well as to all health workers on regular basis, alongside imparting trainings to the staff.
4. Information should be disseminated to mothers to dispel misconceptions and problems regarding breast-

touch with lady health workers of relevant area, and as the mothers are discharged from the hospital, they should be connected to the mother support groups if any.

8. Employees of the facility should also be facilitated at workplace to sustain breastfeeding as they resume work after giving birth.
9. In case artificial feeding is unavoidable, mothers should be directed individually rather than in groups.
10. The health facilities as well

Blatant violation of breastfeeding rules at Lactation Room of a local hospital



feeding, and to support in lactation sustenance.

5. Babies should be put to the breast within an hour of birth and it should be recorded in the medical history of the mother. All sorts of dummies and nipple shield should be strongly discouraged, and mothers and babies should be kept together 24 hours to encourage demand feeding.
6. All health facilities should set up a lactation room and appoint trained lactation management counsellors.
7. The lactation management counsellor(s) should be in

as the communities need to follow the simple yet very effective Ten Steps of successful breastfeeding

Although both public and private health facilities should take initiative on their own to adopt and implement the guidelines, government too has an important duty to discharge. The Ministry of Health has to ensure effective implementation of breastfeeding policies within public and private health facilities, and strictly regulate the marketing of the BMS industry.

¹ State of the world's Children 2009



