



TEN STEP TUESDAY

Step 1: Policy

It's Ten Step Tuesday!

This week is the first in a series on each of the Ten Steps to Successful Breastfeeding that form the foundation of the Baby-Friendly Hospital Initiative. Step 1 is a big one that includes three critical management procedures. These are:

STEP 1A – Comply fully with the International Code of Marketing of Breast-milk Substitutes and relevant World Health Assembly resolutions

- Families are most vulnerable to the marketing of breast-milk substitutes during the entire prenatal, perinatal, and postnatal period when they are making decisions about infant feeding. The WHA (World Health Assembly) has called upon health workers and health-care systems to comply with the International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions (the International Code), in order to protect families from commercial pressures and influences.
- Additionally, health professionals themselves need protection from commercial influences that could affect their professional activities and judgement. Compliance with the International Code is important for facilities providing maternity and newborn services, since the promotion of breast-milk substitutes is one of the largest undermining factors for breastfeeding.
- Companies marketing breast-milk substitutes, feeding bottles and artificial nipples [including pacifiers] are repeatedly found to violate the International Code. It is expected that the sales of breast-milk substitutes will continue to increase globally, which is detrimental for children's survival and well-being. This situation means that ongoing concerted efforts will be required to protect, promote and support breastfeeding, including in facilities providing maternity and newborn services.



- All facilities must acquire any breast-milk substitutes, feeding bottles or artificial nipples [including pacifiers] they require through normal procurement channels and not receive free or subsidized supplies. Furthermore, staff of facilities providing maternity and newborn services should not engage in any form of promotion or permit the display of any type of advertising of breast-milk substitutes, feeding bottles, and/or infant feeding supplies.

For more information contact

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STEP 1B Have a written infant feeding policy that is routinely communicated to staff and parents



- Policy drives practice. The clinical practices articulated in the Ten Steps need to be incorporated into facility policies, to guarantee that appropriate care is equitably provided to all mothers and babies and is not dependent on the routines and/or preferences of each direct care provider. Written policies are the vehicle for ensuring patients receive consistent, evidence-based care, and are an essential tool for direct care staff accountability. Policies help to sustain practices over time and communicate a standard set of expectations for all health workers.
- Step 1B also calls for facilities to post the Ten Steps to Successful Breastfeeding so they are visible to pregnant patients, families and visitors. This information is to be displayed in the language(s) most commonly understood by most patients.

STEP 1C Establish ongoing monitoring and data-management systems

SUSTAINING PRACTICES

Objective external evaluation conducted every 5 years is essential to validate the maintenance of all Ten Steps practices

Monitoring of practices through regular collection of data facilitates early identification of problems which results in improved sustainability of each of the Ten Steps



Supportive leadership committed to providing evidence based care enables the necessary changes to improve care.

Review monitoring data to decide on processes or actions to improve care practices based on findings from audits and surveys.

- Facilities providing maternity and newborn services need to integrate recording and monitoring of the clinical practices related to breastfeeding into their quality-improvement/monitoring systems. Each facility must form a multi-disciplinary committee to guide the work towards implementation of the Guidelines and Evaluation Criteria. The purpose is to continually track the values of these indicators, to determine whether established targets are met, and, if not, plan and implement corrective actions.

References: Above text from the 6th Edition of the BFUSA Guidelines & Evaluation Criteria. Baby-Friendly-GEC-Final.pdf (babyfriendlyusa.org)

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