

Getting Started



"In infancy no gift is more precious than breastfeeding". (WHO 2003).

Breastfeeding is the foundation for optimum nutrition from birth.

Somehow, sadly, the message has been eroded over the years, and breastfeeding is no longer the natural choice of all women.

The vision of the Baby Friendly Community Initiative Aotearoa /New Zealand is the restoration of breastfeeding as the cultural norm.

We are hugely encouraged by the positive impact of the Baby Friendly Hospital Initiative, and now we want to follow up with the Baby Friendly Community Initiative Aotearoa / New Zealand.

This is your invitation to join us in our bid to protect, promote and support breastfeeding within community organizations throughout New Zealand. As stated in the Ministry of Health's National Strategic Plan of Action for Breastfeeding, we need to ensure that "Women and their whanau/family have the information they need to make confident and informed decisions about breastfeeding, and live and work in an environment that enables and supports their decisions."

We want a consistent standard of breastfeeding knowledge and skills to be available for women and their families in the wider community, so that they will be encouraged to initiate and continue breastfeeding and to view it as the best food source for their infants.

Message from Julie Stufkens NZBA Executive Officer



We know the foundations for a healthy life are laid in infancy and childhood.

"Breastfeeding provides for optimal infant nutrition, social and emotional development"

There is plenty of evidence internationally that breastfeeding contributes positively to infant and maternal health status and the social wellbeing of the baby, mother, family and community.

The Baby Friendly Hospital Initiative, which we launched in 2000, is enjoying great success and operates in 95% of eligible maternity hospitals or centres in New Zealand. A total of 74 maternity facilities are now Baby Friendly accredited. The Ministry of Health requires all facilities in the maternity service to be BFHI accredited.

The Ministry of Health established health targets in 2002 for breastfeeding: To increase, by 2010, the proportion of infants exclusively and fully breastfed: 90%

*BFCI involves the implementation of The Seven Point Plan and compliance to the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly Resolutions. (The Code)**

The Seven Point Plan

for the Protection, Promotion and Support of Breastfeeding in the Community

1. Have a written breastfeeding policy that is routinely communicated to all staff and volunteers.
2. Train all health care providers in the knowledge and skills necessary to implement the breastfeeding policy.
3. Inform pregnant women and their families about the benefits and management of breastfeeding.
4. Support mothers to establish and maintain *exclusive breastfeeding* to six months.
5. Encourage sustained breastfeeding beyond six months, to two years or more, alongside the introduction of appropriate, adequate and safe complementary foods.
6. Provide a welcoming atmosphere for breastfeeding families.
7. Promote collaboration among health services, and between health services and the local community

Adapted with permission from: WHO/UNICEF UK Baby Friendly Initiative, 1999

**The International Code of Marketing of Breast-milk Substitutes.*

In 1981, Member States of the World Health Organization adopted the International Code of Marketing of Breast-milk Substitutes, with the aim to protect, promote and support appropriate infant and young child feeding practices. The code applies to the marketing of breast-milk substitutes, including infant formula, and other milk products, foods, and beverages, including bottle-fed complementary foods, when marketed or otherwise represented to be suitable for use as a partial or total replacement of breast milk.

What's been achieved so far?

- *WHO and UNICEF launched the Baby Friendly Hospital Initiative in 1991 to ensure all hospitals become centres of breastfeeding support -- and most countries are implementing it.*
- *In 2000 the New Zealand Breastfeeding Authority was contracted by the Ministry of Health to develop and manage the Baby Friendly Hospital Initiative to encourage consistent evidence-based, culturally appropriate practice at all health care facilities where initiation of breastfeeding occurs.*
- *Over 96% of maternity facilities in New Zealand are now Baby Friendly.*
- *Each facility is subjected to a three-yearly assessment to meet and maintain accreditation standards.*
- *Over 83% of mothers are exclusively breastfeeding when they are discharged from BFHI hospitals after their baby's birth.*
- *While breastfeeding rates are up when they leave hospital, they begin to fall rapidly on discharge. 2012/13 data shows that by 6 weeks after birth, an average of only 52% of mothers are still exclusively breastfeeding, and this has dropped to just 16% of NZ babies being exclusively breastfed by six months of age.*

The NZBA believes that a further standard for community practice is now required to ensure these rates do not decline further. We want to see further improvements in New Zealand breastfeeding rates and infant and child health.

Expected outcomes of becoming a Baby Friendly Community Health Service

We envisage that the Baby Friendly Community Initiative will have positive repercussions for your organisation.

- *We envisage your acceptance of the BFCI will strengthen your health liaison relationships community-wide.*
- *A healthier community*
- *There is strong evidence to show that breastfed infants have:*
 - *Resistance against illnesses such as diarrhoea, asthma, respiratory tract infections, and urinary tract infections;*
 - *Lower mortality in the first year of life;*
 - *Higher cognitive development and visual acuity than those infants fed on a breastmilk substitute;*
 - *Decreased risk of developing type 1 and type 2 diabetes, childhood obesity, necrotising enterocolitis in premature infants, and celiac disease; and*
 - *Lower levels of cardiovascular disease in later life*



- We know that by providing skilled care for mothers to build their confidence and show them what to do, and protection from harmful practices, the breastfeeding choice will be enhanced in your community.
- We want to see Maori and Pacific breastfeeding rates significantly improve. At present the breastfeeding rates for Maori are the lowest of any group in New Zealand.
- We want to see a significant increase in the exclusive breastfeeding rate from birth to six months.

Findings from BFCI Services

Pilot group coordinators

"Our BFCI services are continuing to make a greater difference to new mothers and have improved their service delivery over the past year. These services have managed to support more mothers to continue to breastfeed".



"A significant number of women may breastfeed with better preparation, technique and greater professional support."

(There is) "need for more emphasis on breastfeeding information and support before birth and in the early postnatal period. Earlier and improved education and support for breastfeeding are indicated as a priority."

Quotes taken from the BFCI Pilot report "There has been an increase in networking between different groups"

"The participants feel more confident and knowledgeable about breastfeeding"

"The training was excellent"

Family start workers

"It has increased our focus on the value of breastfeeding for the wellbeing of the baby"

"Has increased my confidence as to who to refer to in the community for breastfeeding support..... It has ensured everyone gets the same information..... When my clients have needed help I have felt more empowered to support them"

It was great training for Family Start.

"We have set up a breastfeeding room"

LMC

"I am 1000% behind this initiative because I can see what it can do in the community here.

It was a real thrill when I saw my client in the postnatal ward and was talking to her about breastfeeding, the mother said it was exactly what the night nurse had told her. It's great

that we are all saying the same messages"



Maori health providers

"This has been a huge step for us to become Baby Friendly" "All of the staff have gained great knowledge" "They know how to refer in-house or to external support"

"We now all relay the same messages. We now all truly live and walk the korero of breastfeeding" "Has helped me become more supportive male. I can demonstrate these principles at work as well as at home"



Plunket

"We now have a policy and posters displayed and breastfeeding chairs in all of our clinics"

"Our group approached the District council asking for changes"

La Leche League Leader

"Really good networking and better contact and we can now support one another. Previously I felt there was just lip service to breastfeeding whereas now I feel they are passionate about it"



Lactation Consultant

"The training was excellent it meshed everything together. It was an in depth explanation on how breastfeeding works."

Parents Centre Educator

"The training has helped my teaching. I have made changes to my classes".



GP Practice

"While we were always keen on breastfeeding and encouraged it, the BFCI programme has focused us. We now have signage, posters. It has helped us concentrate more on how we run the practice"

"We have worked together for 16 years and we have always been pro-breastfeeding. It has added to my participation. It has given us the opportunity to work together and be more

cohesive as a team so we could support women in our community.

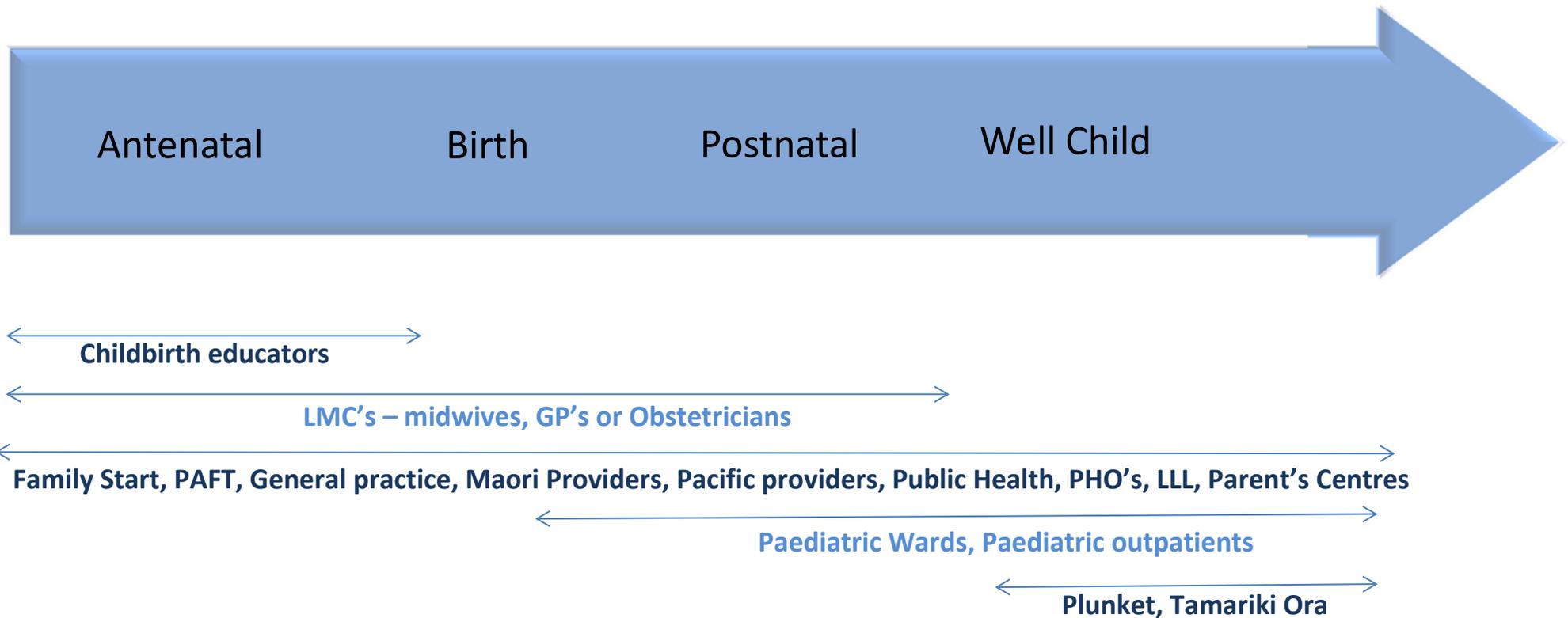


Community Health Centre

"Since we began BFCI and started to promote and understand breastfeeding more we work together as a team to help the people in our community". "Great way to join up and work together and be collaborative and consistent in a caring way"



Examples of Applicable BFCI Service providers



The BFCI Process



Towards a Baby Friendly Community Initiative Accreditation

The Process

The New Zealand Breastfeeding Authority's overall aim is to contribute to a society and culture where breastfeeding is normal and easily achieved by mothers who are well supported by the wider community; it is also to improve the health of the population by increasing the number of infants who are breastfed.

The requirements for becoming an accredited BFCI provider are outlined below.

1. Create your BFCI grouping

NZBA encourages services to collaborate to achieve Baby Friendly status. However your service or you as an individual may choose to work towards achieving the BFCI accreditation. It can be more cost effective and also more conducive to the achievement of Point Seven of the Seven Point Plan to work cooperatively.

Grouping may be:

- Geographical – provider services in a given area work together.
- Service specific – same service providers work together irrespective of geographical boundaries.
- Individuals – those who work as individual practitioners are a service consisting of one person provided there are no staff, subcontractors or volunteers.

2. Project leadership

As a service makes the decision to work toward BFCI accreditation having a designated project leader is recommended. There are a variety of ways to manage this position.

- Employees add the role of project leader within their existing job description.
- The project leader is employed and funded from local funding and has a dedicated role to implement BFCI.
- Organisations from the same area combine to provide a resource from within their organisations.

An example of the description of this role is provided by NZBA as a guideline and is available on the NZBA website.

3. Registration of your commitment to the BFCI process

The NZBA recommend your group, or service, submit a Register of Intent. This form is available on our website (www.babyfriendly.org.nz). Email or

post this completed form to us. This notifies the NZBA of your interest and helps establish a relationship between NZBA and the applicant.

NZBA support

New Zealand Breastfeeding Authority will be available for support. NZBA are available by phone and emails to support and advise the project leaders.

NZBA provide education and training guidelines (see Point Two of the BFCI Standards).

The NZBA provide guidelines and support for compliance with the principles of the Treaty of Waitangi.

BFCI Project Leader/Co-ordinator Training Workshops

A one-day BFCI workshop will be offered at least twice a year. You must register at least four weeks in advance to attend. The registration form is available on the website.

Additional Support available:

A visit or visits for additional support can be arranged. There will be a fee for each visit.

Additional support for staff education can be negotiated with NZBA.

Train-the-Trainer 3 day workshops are regularly scheduled throughout the year.

Information is available on our website. (www.babyfriendly.co.nz)

Information for Individual Services:

There are some smaller services who have requested information about the BFCI. These include pharmacies, libraries and child care facilities.

For some of these services a full BFCI assessment, covering each of the Seven Points, the International Code, the Treaty of Waitangi and the Care of the Non-Breastfeeding Mother and her baby, will apply.

Others, such as La Leche League groups, would not be assessed on components which have no application to their service – in this case the 'Care of the Non-Breastfeeding Mother and her baby'.

Pharmacies and libraries, for example, would be assessed on their Policy, staff education, handouts available, compliance to the Treaty of Waitangi and the International Code.

4. Action plans

Each service needs to develop an Action Plan for implementation of BFCI. To do this the first step is to complete an evaluation of your service against the standards required for BFCI.

The service therefore needs to complete a BFCI Self-Appraisal Questionnaire. The template is available on-line on our website. The results of this questionnaire enable you to evaluate the current baseline in respect of the initiative and identify key areas for development.

Action plans based on the objectives of the Seven Point Plan and the Code are then developed with a timeline for achieving each standard.

Copies of your Self-Appraisal Questionnaire and subsequent Action Plan should be forwarded to the NZBA to give them a background for your planning.

5. Policy development

A BFCI Breastfeeding policy is developed by the organisation. A sample policy covering *The Seven Point Plan for the Protection, Promotion and Support of Breastfeeding in the Community* is provided by NZBA. It is suitable for health services which are provided in the community and which are outside of hospitals/ maternity facilities or birthing centres. This sample policy can be adapted to meet the needs of the entity.

A second sample policy covers *Artificial Feeding*. This sample policy can also be adapted to meet the needs of the entity.

6. Communication and collaboration

The Seven Point Plan and other relevant documents and signage must be displayed.

NZBA will provide samples of material for use.

Opportunities for collaboration with other providers, consumers, community services and cultural groups need to be taken.

Women under the care of the service need to be provided with information on all aspects of infant feeding.

Focus of Activities

Workforce development is a key task of the Baby Friendly Community Initiative project and attendance at BFCI education is a key motivator for staff to engage in the initiative. Some organisations have utilised the local media to raise the profile of breastfeeding and the BFCI. Others have successfully integrated breastfeeding and BFCI into other health promoting activities within their organisations.

7. Training and Education Initiatives

Point Two of the Seven Point Plan requires all providers are trained in the knowledge and skills necessary to implement the breastfeeding policy.

The programmes are mandatory and include:

- Guiding principles of The Seven Point Plan and The International Code
- Content of the Seven Point Plan
- Basic information on breastfeeding support and management
- Skill development related to breastfeeding support and management

It is important in assessing the training needs of the workers in your service, that you identify the correct level of education required. This should be carried out as part of the action planning process.

8. Assessment and Audits

The Baby Friendly accreditation process to assess compliance with The Seven Point Plan includes an audit of each of the participating sites and includes interviews with the providers and clients, and these will be undertaken within the agreed timeframe.

The assessment process is worked through by a group of services and external assessments carried out for the group of services at one time. Designation is conferred on an individual service basis. For example:

- Where a practitioner (for example a self-employed midwife or childbirth educator) works as part of a group, the group is the service and will be assessed and designated as one service
- Where a practitioner (for example a self-employed midwife or childbirth educator) works alone, or is an individual practitioner within a cluster of individual practitioners, she/he is the service and will be assessed individually.
- Many practices within a PHO may be assessed at one time but designation is made on a practice (service) by practice (service) basis when achieved. Only when all relevant practices within the PHO have achieved Baby Friendly status will the PHO be designated Baby Friendly.

Pre assessment

This involves a thorough check by NZBA to ensure the service is prepared for the audit, which decides accreditation. At this time the following documentation is provided by the service.

- Infant feeding records for the service
- Policy and consultation records
- Education and training outlines and staff attendance records
- Data sheets for the service
- Materials provided by the clients

This information is contained in the Pre-assessment checklist.

Audit

NZBA will arrange an assessment team and schedule an assessment date. The assessment team meets with the service and BFCI leader and the following actions are carried out:

- Interviews with staff
- Interviews with mothers
- Observation of the services
- Review of any subsequent materials

9. Feedback

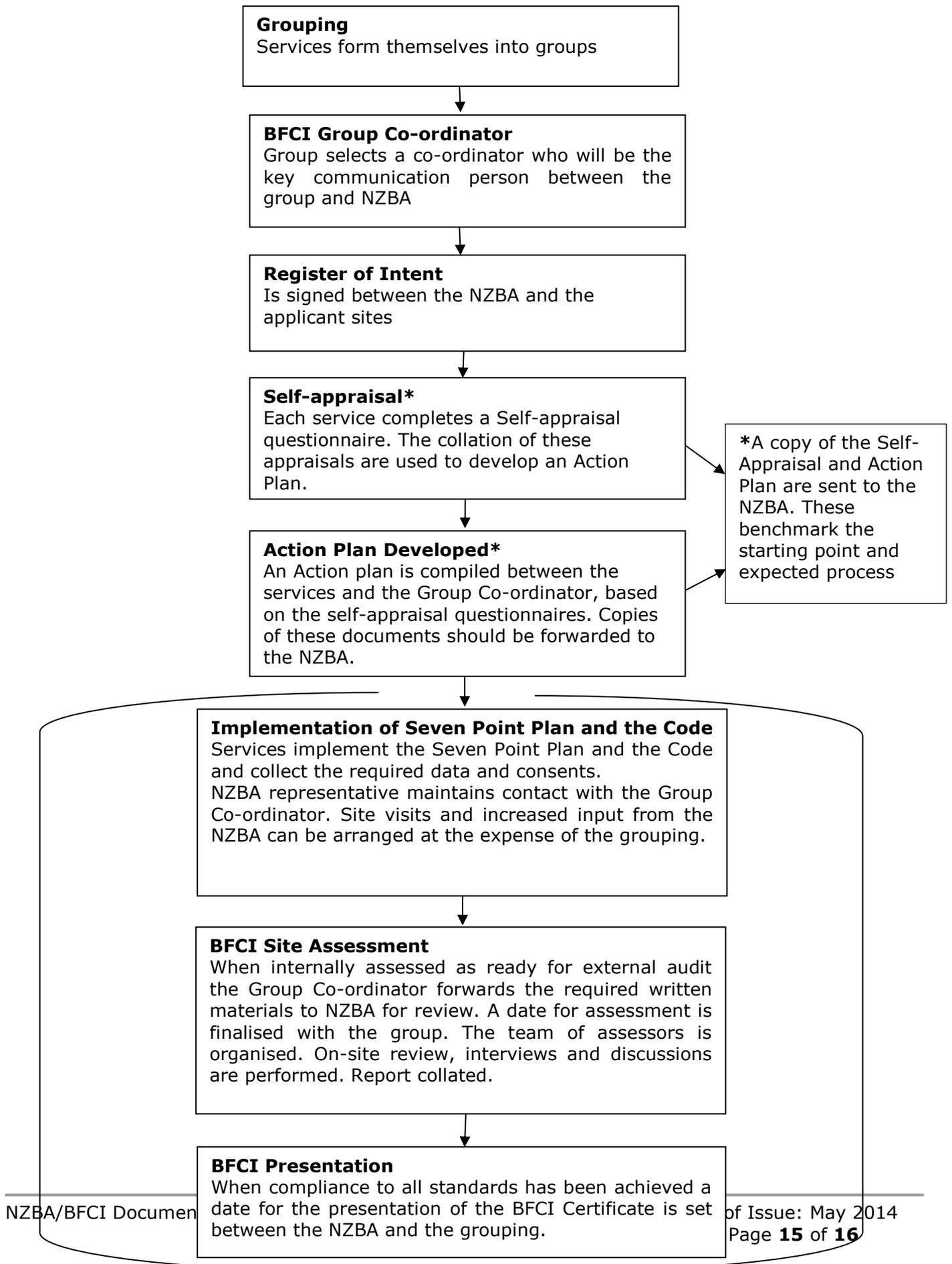
The assessment team will provide feedback to management and/or the BFCI leader after the audit. The service will provide NZBA with an assessment of the process.

All data and reports are compiled and sent to the NZBA Moderation Panel for accreditation decisions.

If the service does not meet all of the criteria the service has a period of 6 months following receipt of the report, to fulfil the requirements.

The accreditation is valid for a period of three years.

An overview of the BFCI Process including Assessment



BFCI Costs

BFCI Coordinator Training –

NZBA provide manual and training for no charge (2 days with NZBA BFCI Coordinator –catering provided during the day).

The service must cover any travel, accommodation, etc. costs for the BFCI Coordinator trainee

NZBA support

New Zealand Breastfeeding Authority will be available for support.

NZBA are available by phone and emails to support and advise the project leaders. NZBA provide education and training guidelines

Additional Support available:

A visit or visits for additional support can be arranged. There will be a fee for each visit.

Additional support for staff education can be negotiated with NZBA.

Train-the-Trainer 3 day workshops are available – contact NZBA Learning and Development Facilitator, Dawn Hunter (dawn@nzba.co.nz).

External Assessment by NZBA for Accreditation

Individual practitioners (no site visit) = \$250 + GST

Small health service/group (1 - 2 days) = \$5250 + GST
e.g One service: Turuki and West Fono

Medium health service/group (2-3 d) = \$8500 + GST
e.g Wanganui group with 6 services (3 days)
Wairarapa group with 9 services (3 days)
Hawkes Bay (3 services) 3 days
Counties Manukau (3 days) Family Start and Plunket
Taranaki group (3 services) (3 days)

Large health service or group (3- 4 d) = \$9750 + GST

e.g. Nelson Group with 9 services (4 days) wide geographic spread
Wairarapa DHB (7 services) 4 days

Please contact NZBA Executive Officer, Julie Stufkens if you wish to have an estimate for your service or group.

Ph 03 357 2072 ext 202 or julie@nzba.co.nz

For more information on BFCI visit our website and view the BFCI section. www.babfriendly.org.nz