Breastfeeding Counselling Gaps, Interventions and recommendations

Dr. JP Dadhich MD (Paediatrics), FNNF
Technical Director, BPNI
Co-Chair, IBFAN Global Council



Webinar on Counselling Women on Breastfeeding and Infant and Young Child Feeding: How, When and by Whom



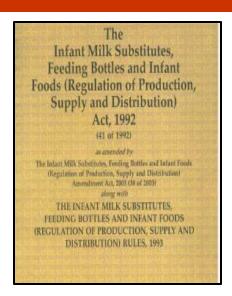
Outline

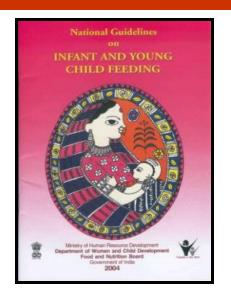
- Gaps in counselling services in the public health programmes and status of breastfeeding practices
- Breastfeeding counselling interventions and support in India
 - in health facility
 - at home
- BPNI' Interventions for breastfeeding counselling

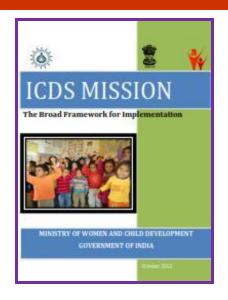


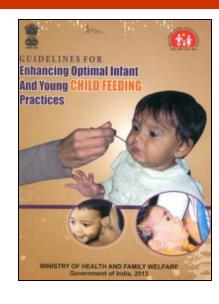


Policy/Guidelines/Programme Initiatives

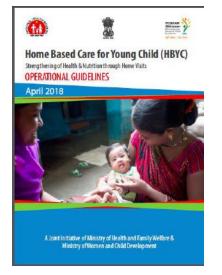


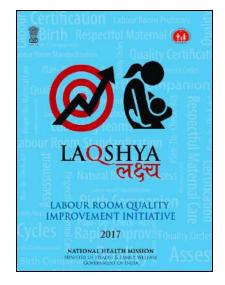


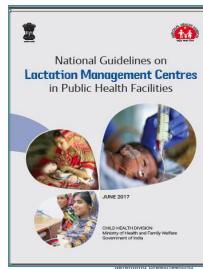






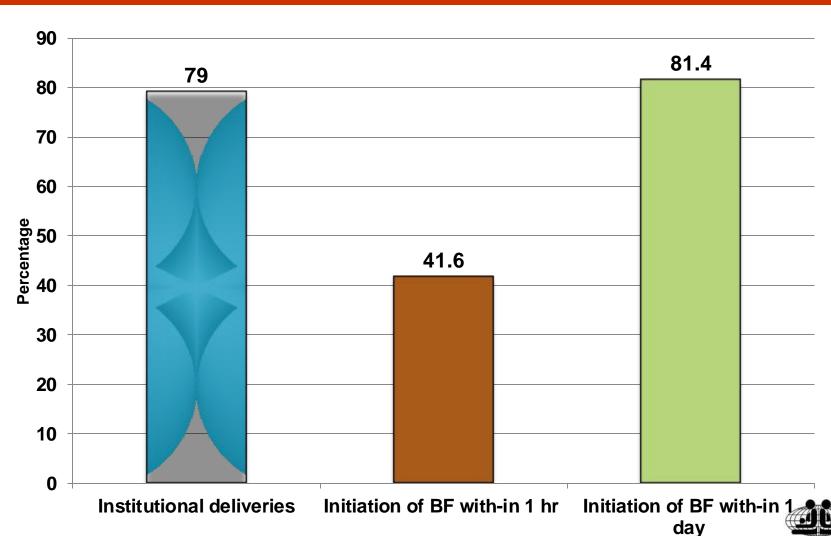






Initiation of breastfeeding

(NFHS - 4, 2015-16)

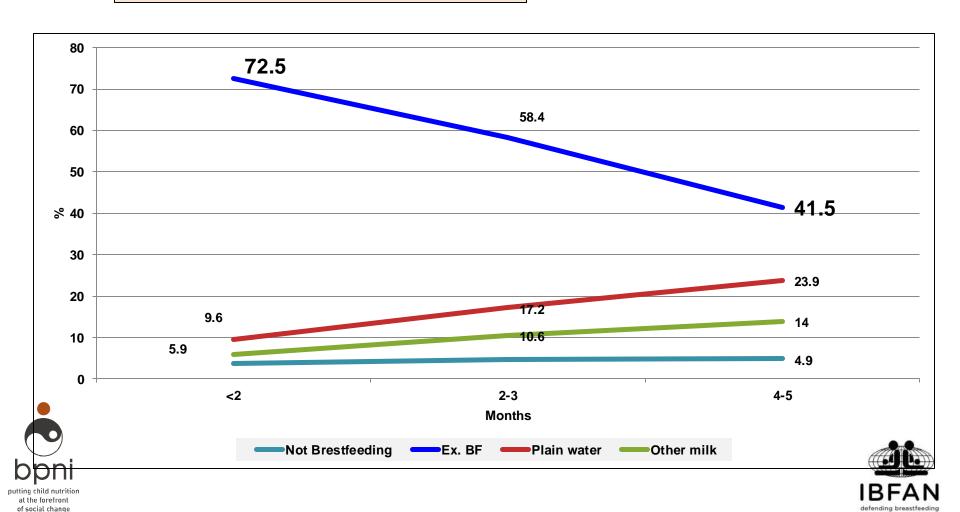




Breastfeeding practices in India – critical issues

(NFHS - 4, 2015-16)

Exclusive Breastfeeding falls rapidly!



Challenges at health facilities

Baby-friendly Hospital Initiative (BFHI) in South Asia: Implementing Ten Steps to Successful Breastfeeding India, Nepal and Bangladesh

Challenges and Opportunities

A REPORT

The World Bank







- Lack of dedicated space or human resources for breastfeeding/lactation counselling
- Heavy Workload
- Health staff lacks the required competence in lactation management

A pediatrician said, "...time is the most important factor and if there is a dedicated counsellor, it makes it a bit easy for the doctor, as after seeing 100 patients in the OPD and after taking rounds of 50 beds, it is impossible to do counselling"



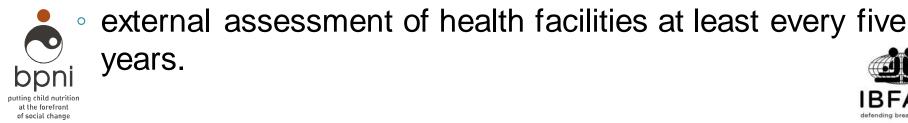
of social change

http://documents.worldbank.org/curated/pt/916891573111241173/pdf/South-Asia-Baby-Friendly-Hospital-Initiative-in-South-Asia-Implementing-Ten-Steps-to-Successful-Breastfeeding-India-Nepal-and-Bangladesh-Challenges-and-Opportunities.pdf



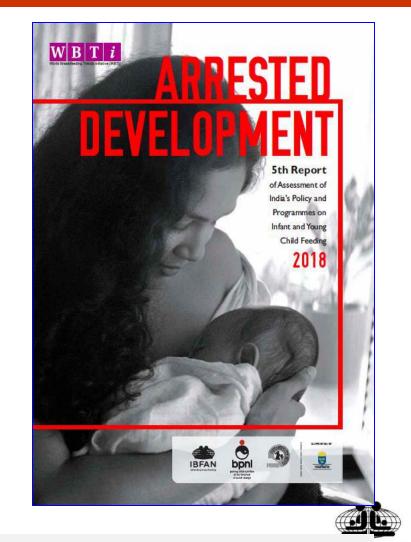
Key Recommendations of the World Bank Study

- The MOHFW, GoI may set up a national coordination and technical unit
- The national unit should develop a five-year plan with yearly components, linked to budgets for activities including
 - enhancement of staff competency
 - appointment of new staff as lactation counsellors
 - counselling and support services
 - periodic monitoring



Gaps in policies and programmes on IYCF

- Inadequate skill based inservice training on breastfeeding/IYCF for health care providers, including doctors
- Inadequate access to community-based antenatal and post -natal support systems with counselling IYCF to pregnant and lactating women
- Inadequate skill training to community health workers to support breastfeeding initiation and continuation.





Breastfeeding counselling interventions and support in India

- in health facility
- at home





Counselling – Aligarh Experience - Methodology

- 300 Women were recruited from ANC and randomised to Intervention (150) and control (150) groups
- 2 nutritionists were appointed
 & trained as CS using BPNI's
 '4 in 1' 7 days training
 programme
- Mothers in the intervention groups received 2 ante-natal and 8 post-natal counselling visits
- 2 research assistants collected data periodically



Gupta A, Dadhich JP, Ali SM, Thakur N. Skilled counseling in enhancing early and exclusive breastfeeding rates: an experimental study in an urban population in India. Indian pediatrics. 2019 Feb 1;56(2):114-8.



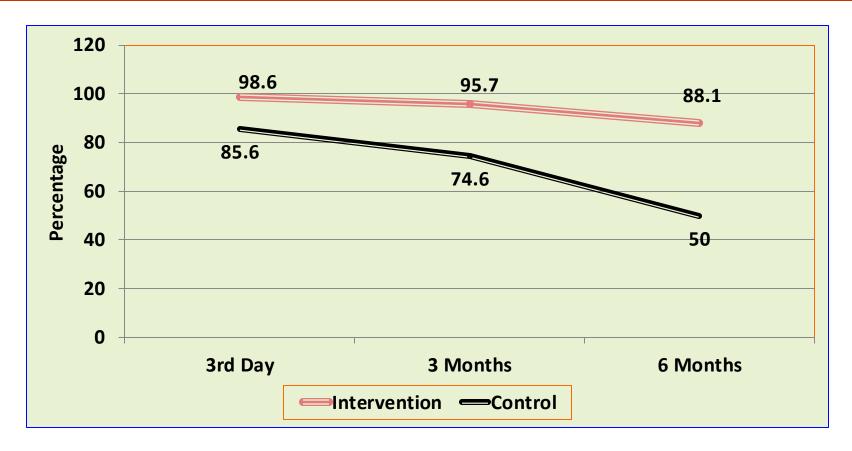
Counselling – Aligarh Experience - Intervention

| Ante-natal | Post-natal |
|---|--|
| Counselling in hospital about: Initiating breastfeeding with in one hour of birth and avoiding pre-lacteal feeds Benefits of exclusive breastfeeding up to the age of six months Dangers of artificial feeding and bottle feeding Demonstrations for Correct positioning and attachment Expression of breastmilk and cup feeding technique Women were encouraged to clarify their myths and doubts | Counselling at home about: Benefits of exclusive breastfeeding up to the age of six months Skilled support to address any specific breastfeeding problems such as engorgement, sore nipple, mastitis etc. Women were encouraged to clarify their myths and doubts |

of social change

defending breastfeeding

Skilled counselling helps in sustaining exclusive breastfeeding!



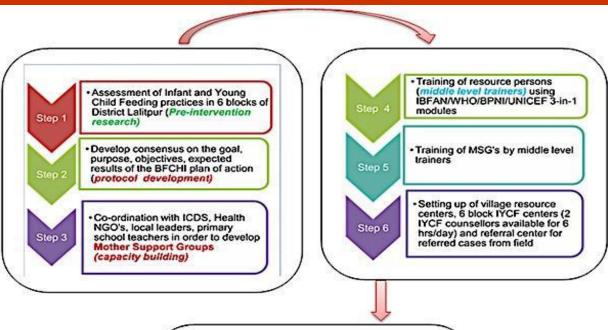


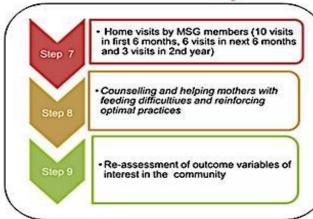
OR of Ex BF at 6 mo. 7.44 (3.98 to 13.92)



Peer Counselling in community/home: Lalitpur,

UP



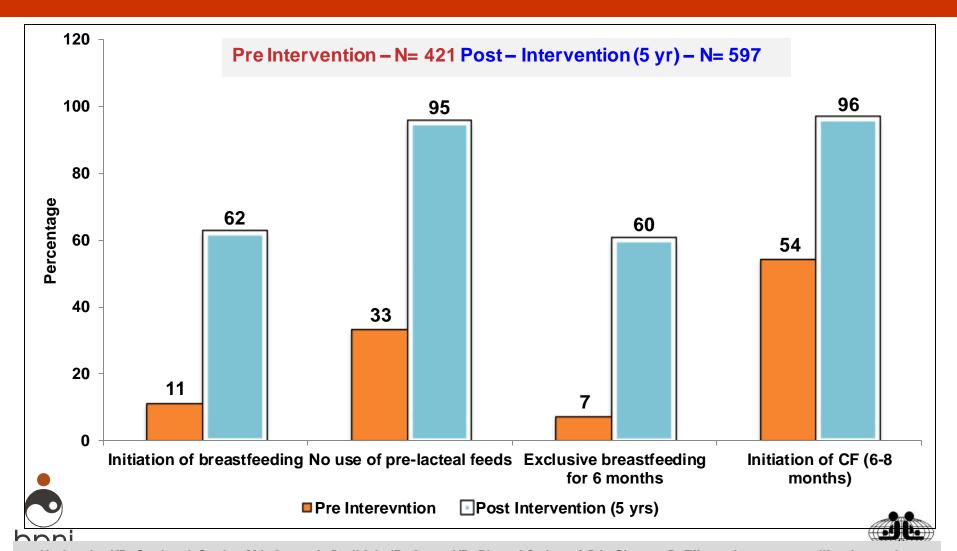




defending breastfeeding

Kushwaha KP, Sankar J, Sankar MJ, Gupta A, Dadhich JP, et al. (2014) Effect of Peer Counselling by Mother Support Groups on Infant and Young Child Feeding Practices: The Lalitpur Experience. PLOS ONE 9(11): e109181. https://doi.org/10.1371/journal.pone.0109181

Peer Counselling helps in sustained increase in IYCF practices – Lalitpur experience



HOSTED BY

Contents lists available at ScienceDirect

International Journal of Pediatrics and Adolescent Medicine

journal homepage: http://www.elsevier.com/locate/ijpam



Original research article

A quality initiative to improve exclusive breast milk feeding in preterm neonates



Nitasha Bagga ^{a. *}, Ramya Nadipineni ^a, Ashik Mohamed ^b, Preetham Poddutoor ^a, Dinesh Kumar Chirla ^a

^a Neonatalogy, Rainbow Children's Hospital, Hyderabad, India
^b Ophthalmic Biophysics, L V Prasad Eye Institute, Hyderabad, India

Intervention

- Structured antenatal counselling to mothers
- Formation of breastfeeding support group
- Postnatal information through a leaflet and video
- Counselling of other family members including the husband

| | Study group (n=30) | Control group (n=30) | Р |
|---|-----------------------|-------------------------|---------|
| Neonates receiving EBM on D1 | 80% | 24% | < .0001 |
| Amount of EBM in ml (Day 7), median (IQR) | 115 ml (60- 170) | 60 ml (40- 120) | .01 |

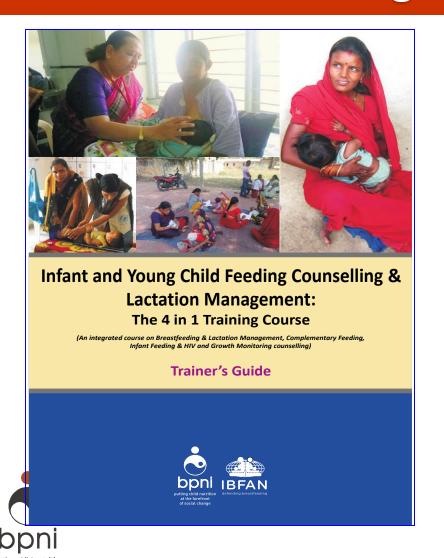
BPNI's interventions

- For all mothers: IYCF Counselling Specialist training (7 days)
- For breastfeeding mothers: Stanpan Suraksha APP(on 7th August)
- For Pregnant Women: Digital Portal (Coming soon)





IYCF Counselling & Lactation management The '4 in 1' Training Course



of social change



Training on 10 steps to successful breastfeeding

Training on 10 Steps to Successful Breastfeeding

A Lactation Management Course



Trainer's Guide



Training on 10 steps to Successful Breastfeeding: A Lactation Management Course

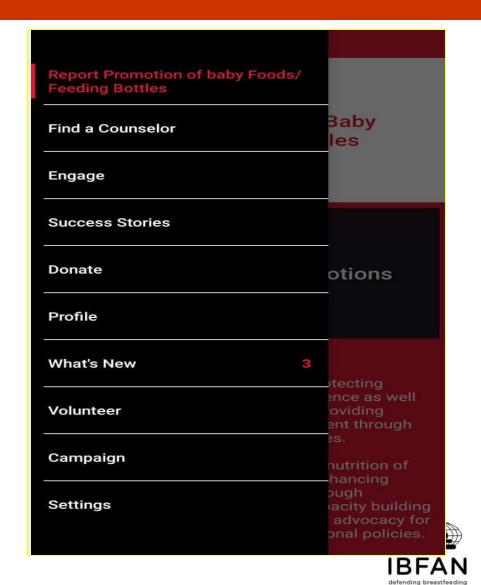
CONTENTS

| Session 1 | Why Breastfeeding? |
|------------|---|
| Session 2 | Production and Intake of Breastmilk |
| Session 3 | Assessing a Breastfeed |
| Session 4 | Observing a Breastfeed |
| Session 5 | Listening and Learning |
| Session 6 | Ten Steps to Successful Breastfeeding |
| Session 7 | Clinical Practice 1 Listening and learning Assessing a breastfeed |
| Session 8 | Positioning a Baby at the Breast |
| Session 9 | Building Confidence, Giving Support and Checking Understanding |
| Session 10 | Clinical Practice 2 Building confidence and giving support Positioning a baby at the breast |
| Session 11 | Breast Conditions |
| Session 12 | Refusal to Breastfeed and Crying |
| Session 13 | Overview of Infant Feeding and HIV |
| Session 14 | Safe Artificial Feeding |
| Session 15 | Expressing Breastmilk |
| Session 16 | "Not Enough Milk" |
| Session 17 | Increasing Breastmilk and Relactation |
| Session 18 | Breastfeeding History – taking |
| Session 19 | Breastfeeding Low birth weight (LBW) and Sick Babies |
| Session 20 | Clinical Practice 3 Positioning and taking a breastfeeding history |
| Session 21 | Sustaining Breastfeeding |
| Session 22 | Nutrition of Lactating Mothers and their Health and Fertility |
| Session 23 | Regulating Marketing of Breastmilk Substitutes |
| Session 24 | Infant Feeding in Special Situations |



For breastfeeding mothers: Stanpan Suraksha APP

Stanpan Suraksha putting child nutrition at the forefront of social change supported by HCL HCL FOUNDATION



For Pregnant Women: A Digital Portal

A Digital Antenatal Portal

Preparing Pregnant Women to Demand Breastfeeding Counselling and Support Services

A BPNI's Initiative

- To provide breastfeeding counseling services to pregnant women to be fully informed for successful in breastfeeding their babies
- To facilitate an enabling environment for women to ensure early breastfeeding within an hour of birth, skin-to-skin contact, and reduce the consumption of infant formula at the time of birth.





Conclusions

- Government of India policies and guidelines have recognised breastfeeding counselling by dedicated trained counsellor
- There is a need to have effective implementation of policies & guidelines
- Effective, feasible models for health facilities and community are available
- Civil society organisations can contribute to this important work



Thanks!

jpdadhich@bpni.org

