## INITIATIVES SUPPORTING BREASTFEEDING

### Jana Chrásková<sup>1, 2</sup>, Mária Boledovičová<sup>3</sup>

<sup>1</sup>Palacký University, Faculty of Health Studies, Olomouc, Czech Republic

<sup>2</sup>J. E. Purkyně University, Faculty of Health Studies, Department of Nursing and Midwifery, Ústí nad Labem, Czech Republic

<sup>3</sup>University of South Bohemia in České Budějovice, Faculty of Health and Social Sciences, Department of Nursing, Midwifery and Emergency Care, České Budějovice, Czech Republic

**Submitted:** 2016-01-13 **Accepted:** 2016-05-02 **Published online:** 2016-06-30

#### **Abstract**

The paper focuses on mapping the principal field supporting the process of breastfeeding and lactation. It brings extensive scientifically well-founded benefits of breastfeeding for healthy growth and development of a child, including activities which are concerned with the support of breastfeeding within the international scale. It presents basic documents which declare the right to breastfeeding and lays stress on the activity of the international network - IBFAN (International Baby Food Action Network), which intervenes in the sphere using optimal nutrition methods. One part also deals with the historical survey of the initiative – Baby-Friendly Hospital (BFHI) within the international scale, with the implementation of the initiative BFHI into the socio-cultural environment of the Czech Republic, where an irreplaceable institution is the National Lactation Centre in The Faculty Thomayer Hospital in Prague-Krč (FTN). It focuses on the description of a situation when there is a recommended procedure of breastfeeding of a full-term newborn including the WHO recommendation, but despite of this, in the Czech Republic, full-term newborns are supplementary fed without any indicators. Stated at the end are the articles concerning the promotion of breastfeeding which are publicized in the programme Health 2020 - The National Strategy of Protection and Support of Health and Illness Prevention, whereas the area of interest is health and well-being of citizens of the European region of the World Health Organization and which was already supported by the government of the Czech Republic in 2014.

**Key words:** Baby-Friendly Hospital Initiative; International Baby Food Action Network; breastfeeding; support of breast feeding; Health 2020

#### INTRODUCTION

Breastfeeding and nutrition with breast milk is a natural and irreplaceable diet for newborns and infants. It keeps being a subject of interest – in the sphere of the formation of different strategies for the promotion of breastfeeding, international organizations such as World Health Organization, UNICEF (WHO/ UNICEF 2009). Breastfeeding is the most practical nutrition because it is always and everywhere available at once. Breast milk is fresh, healthy and has the required temperature. Breastfeeding represents for the mother and her child practically the first social contact through its basic senses — touch, smell, taste, hearing and vestibular apparatus. In this way, a natural bond occurs that can positively

influence their mutual relations in future. According to WHO, breast milk is the most suitable nutrition for all children; including the prematurely born and ill. Since 2002, WHO advises only breastfeeding for a period of 6 months and continuing breastfeeding with corresponding complementary nutrition for a period of 2 years or longer depending on the child's needs (WHO 2002). This recommendation has been adopted by many countries including the Czech Republic, and WHO reconfirmed it in 2013 (WHO 2013).

The composition of breast milk respects the ripening of single functions, especially the digestive system and central nervous system of a newborn. Changes in breast milk are concerned with the quantity of basic nutrients and protective substances (Fendrychová et al. 2012). Colostrum includes, in high concentration. immunoglobulin (IgA), components of cell immunity (lymphomonocytes), higher amounts of proteins and fat-soluble vitamins (A, E, K), zinc, and less lactose and fat. For 40 hours, until 14 days after labour, colostrum turns into ripe breast milk (Boledovičová et al. 2010).

Preparation for breastfeeding should start in pregnancy. A presumption for successful lactation is that all pregnant women can gain enough information on the benefits of breastfeeding.

Another phenomenon for the development of breastfeeding without any problems is early skin-to-skin contact between the mother and the newborn after labour, and putting the newborn to the mother's breast (the newborn is ready for half an hour until an hour after labour). Nowadays, the full-time rooming in mode is common in maternal hospitals. This regime positively influences lactation and early interaction, and the creation of a mutual emotional bond between mother and newborn (Sobotková and Štembera 2003). In the early days after labour, it is necessary to continuously respond to signals of a new-born's needs and according to their irregular bio-rhythm. The mother's consistent and synchronized behaviour evokes in the newborn the first feelings of safety, confidence and satisfaction.

#### Benefits of breastfeeding

Breast milk is an irreplaceable component of nutrition thanks to its composition and properties at the beginning of life. There are known benefits of breastfeeding supported by research on its effect on a baby's growth.

Babies that are breastfed in accordance with the WHO recommendation show a slower growth rate in the first year of life, but these children have a bigger percentage of body fat. Therefore it was necessary to carry out the new growth WHO standards for breastfed babies. Prevention of infectious disease is considered to be the most important health advantage of breastfeeding, as well as the favourable influence of breastfeeding on a baby's blood pressure. Breastfeeding decreases the risk of the occurence of type 2 diabetes mellitus. It is further proved to give a 52% lower risk of the occurence of coeliac disease and about a 31% lower risk of the occurrence of idiopathic intestinal inflammations. Nutrition with breast milk seems to be a part of the health care of the newborn, whereas a paediatrician has a unique position in the sphere of education and support of breast feeding (Mitrová and Bronský 2014).

# Right to breastfeeding

The right to breastfeeding is included in the international declarations and legislation of particular countries. As an example, article 24 of the Convention on the Right of the Child states the right to breastfeeding as the best possible nutrition, and the right to necessary information and pre-natal and post-natal support, help and care. It was enforced in the Czech Republic in 1991. Another is the Global Strategy for Infant and Young Child Feeding from 2002, which supports exclusive breastfeeding up to the age of six months, breastfeeding with supplementary food beyond the age of sixth months, and informs on the adequacy of supplementary food and nutrition as a whole considering future eating disorders (WHO 2002).

The World Health Organization, since publishing the Codex Standard for Follow-Up Formula in 1981, informs on the destructive effect of advertising; mothers are easy influenced if the advertisement declares the product to be the best one for their child. Therefore there is an endeavour to eliminate the promotion of follow-up formulas as much as possible. Another document was issued in 2008; it is the action plan Protection, Promotion and Support of Breastfeeding in

Europe that was created by the participants of the EU Project on Promotion of Breastfeeding in Europe 2008).

# World Alliance for Breastfeeding Action

WABA (World Alliance for Breast Feeding Action) is a world organization dealing with the protection, promotion and support of breastfeeding based on the Declaration on Protection, Promotion and Support of Breastfeeding and Global Strategy for Infant and Young Child Feeding, adopted by WHO and UNICEF. The WABA partner is the International Baby Food Action Network (IBFAN), which is an international network composed of 278 public non- profit groups operating in 168 countries all over the world. Their aim is to contribute to mortality decrease and to the better health of infants. the youngest children, and their mothers and families through the protection and support of breastfeeding and optimal nutrition methods. GIFA (Geneva Infant Feeding Association) is a member of IBFAN housed in Geneva and fulfils the function of "liaison" with the UN organizations, non-government organizations and the Commission for the Right of the Child. The other WABA partners are the International Lactation Consultant Association, Wellstart International and the Academy of Breastfeeding Medicine (SZU 2014).

Last May an IBFAN press release was publicized that named 27 international companies with 813 cases of failure of the Codex in 81 countries. Furthermore, the report warns that the amount of breast-fed infants will still decrease if the companies are still allowed to compete with breastfeeding support and sap a mother's confidence for its advantage. This report represents only some registered cases, however, it provides an overview of the main marketing trends and strategies within the last three years (SZU 2014).

Despite endeavours by the world coalition, breastfeeding still faces gigantic commercial pressure from the industry producing child nutrition. To this day only 37 countries adopted the law containing all the provisions of the international Codex Standard for Follow-Up Formula, however, the implementation of these standards is often

very doubtful. The companies producing child nutrition fundamentally influence parents' choice of nutrition for their child through misleading marketing campaigns. Worldwide, only one of two infants is only breastfed until the age of 6 months of age, despite the official recommendation of the World Health Organization (SZU 2015).

#### **Baby-Friendly Hospital Initiative**

The Baby-Friendly Hospital Initiative (BFHI) is an initiative struggling for the worldwide support of breastfeeding. It draws up standards and recommendations for hospitals striving for the title and observing the necessary standards. The BFHI activity started in the 1990's. WHO, together with UNICEF, proclaimed the Declaration Innocenti to the global promotion of breastfeeding, with its support and protection as an indisputable right of the infant and the mother. WHO/ UNICEF recommends breast milk as the ideal nutrition for all infants, including the prematurely born and ill infants. The BFHI struggles for exclusive breastfeeding for the period of at least six months, and breastfeeding with supplementary food for the period of at least two years of a child's age in the maximum number of children resp. mothers. Mothers are the target group that should be affected by the medical staff of these hospitals, resp. even the whole facility should guide mothers in the right way. It is necessary to support mothers in breastfeeding, to have a breastfeeding strategy in the written form, regularly educate the qualified medical staff to master the latest knowledge and techniques available for education in the sphere of breastfeeding. The medical facilities dispose of the key document - "Ten Steps to Successful Breastfeeding" - drawn up by WHO with UNICEF as a minimum standard that should be observed by the particular health facilities to contribute to a higher number of breastfed infants (WHO/UNICEF 2009).

Worldwide, the BFHI already includes more than 21,000 maternal hospitals in 156 countries, and tries to provide children with the best start in their lives through the promotion of breastfeeding as a standard of health care. It helps to reduce morbidity and mortality in all countries. The objectives of this initiative are among others: to enable mothers to be informed and decide on the way

of nutrition for their child; to support advance breastfeeding; to promote breastfeeding as the only way of nutrition in the first six months of life; to struggle for the cancellation of the free distribution and sale of cheap infant nutrition in maternal hospitals; according to possibilities and needs to pay attention to other problems of caring for mother's and child's health. This is still something that can be improved; breastfeeding is not as natural as it could be yet. Since the 1990's, BFHI studies have globally proved the sense of the initiative, and the amount of breastfed children has increased (WHO/UNICEF 2009, WHO 2013).

# Situation in the Czech Republic

In the second half of the 20th century, the Czech Republic faced a bad period concerning the approach to breastfeeding. Under the totality, because of the industrialization of childbirth and the separation of children from their mothers (in maternal hospitals, nurseries. kindergartens) breastfeeding was not supported and a big part of the population was not breastfed. Then it is very important to support breastfeeding as part of normal parental care and a normal way of nutrition. However, the support should be very sensitive and professional, in accordance with all the knowledge of the physiological needs of children and parents, with respect to experienced collective trauma from a generational defective ability to breastfeed (Šráčková 2005).

The WFO/UNICEF programme supporting breastfeeding Baby-Friendly Hospital was initiated in the Czech Republic in 1991. Since that time, 64 hospitals have already disposed of this title. Furthermore, a non-governmental organization, ANIMA, was established as a Prague group of the international network IBFAN (International Baby Food Action Network), and that was in 1990. In 1993 the National Committee for Support of Breastfeeding at the Czech Committee for UNICEF was established, which associates representatives from professional societies and organizations, coordinates the education of medical staff, evaluates hospitals or publishes educational materials. In the same year, the Documentation Centre for Support of Breastfeeding at the Centre of Preventive

Medicine of 3rd Medical Faculty of Charles University in Prague was established; it collects and provides the latest knowledge in breastfeeding. The first facility in the Czech Republic was the Faculty Thomaver hospital in Prague-Krč (FTN), which serves as the National Lactation Centre (since 2001), educational and training centre for the preparation of hospitals to win the BFH title. Furthermore, the Lactation League has been in the Czech Republic since 1998, which exercises many activities that help mothers with breastfeeding and cooperates with FTN, for example their mutual project was the National Line of Breastfeeding inc 2001 (Schneidrová 2005). The activities of the mentioned initiatives logically led to the creation of the recommended procedure -Breastfeeding of full-term newborn by the Czech Neonatal Society. One part of the recommended procedure is a list of knowledge and skills that mothers should master before leaving maternal hospital (Mydlilová 2013).

Lactation presents a mutual process between the mother and the child. The process of the production of breast milk may be negatively influenced by mental effects such as tension, fear, etc. Therefore it is necessary to create suitable conditions for the breastfeeding mother to breastfeed her child. The determinants of successful breastfeeding from the psycho-social sphere were objectives of one study which identified the main psycho-social variables. Within perinatal care the study has established supporting or risk factors for the successful beginning of breastfeeding. According to the statistical evaluation of the data from a questionnaire survey with 199 respondents, and the content analysis of semi-structured dialogues with 18 women in childbed, it was proved that the quality of breastfeeding is influenced especially by the atmosphere in the maternal hospital perceived by women in childbed and the approach of medical staff in the period after labour (ability to empathise, providing mental support and quality of communication), as well as actively offering help with breastfeeding. Support of breastfeeding provided to women in childbed within the perinatal care should not only observe the ten rules of successful breastfeeding which belong to the conditions necessary to win the status of Baby Friendly

Hospital, but also psychological needs of women in childbed in the period after labour (Takács et al. 2011).

Despite the mentioned recommendation concerning exclusive breastfeeding, a lot of medical staff in the Czech Republic do not observe the recommended procedures, which results in non-indicated supplementary feeding of full-term newborns. A fullterm newborn does not need special supplementary feeding to supply energy and liquids within the first days of life. Therefore they are endangered by possible risks such as the interference in physiological adaptation mechanisms or reduced intake of colostrum, which results in negative effects on immunological, enzymatic, trophic and other necessary functions providing physiological development (Mydlilová 2015).

# Health 2020 – support of breastfeeding as one of the priorities

In September 2012, a new regional programme, Health 2020, coming out of the basic values and based on published evidence was approved on the meeting of the Regional Committee SZO for Europe by 53 countries of the European region. The programme, Health 2020, focuses on the improvement of health for everybody and the negotiation of inequality in health through better management in the field of health. The document focuses on the current main medical problems. It specifies four preference fields of political measures and it represents innovation in seeking an answer on all levels and in government resorts, society, focus on benefits of the measures and development of immunity within the community, emancipation and creation of supporting surrounding. It deals with the consolidation of medical services and the medical system. The programme, Health 2020, was adopted in two versions. The shorter version includes the frame of European policy which supports government and social events focused on health and mental wellbeing and is designed for politicians and decision authorities (Zdraví 2020, 2013). The longer version, the frame of policy and strategy Health 2020 is more detailed. The implementation of the programme, Health 2020, within the particular countries of the European region is a primary objective of top priority now (Zdraví 2020, 2014).

Articles concerning breastfeeding:

- Lifelong investment in health healthy children learn better, healthy adults are more productive.
- Life of a child is linked to the mother, the basic condition of healthy development and growth of a child ... is safe pregnancy, childbirth and breastfeeding.
- An important part of care of the newborn and infants is breastfeeding. It leads to better nutrition and physical development, reduces susceptibility to common child illnesses, strengthens immunity and the ability of children to fight illnesses, reduces the risk of some infectious diseases in later age, strengthens relations between the child and the mother and improves psycho-social development.
- A healthy life start is the starting point for a healthy life. A good life start has these characteristics: the mother could choose her reproductive behaviour, is healthy during pregnancy, gives birth to a baby with an adequate weight, the child experiences childhood in a warm and susceptible relation, has access to high-quality paediatric care and early education, lives in a motivated environment enabling them safe playing outside. The facts indicate that high-quality paediatric services with an impact on parents can compensate for unfavourable social conditions in early childhood (Zdraví 2020, 2014).

The implementation of Health 2020 – the National strategy of protection and support of health and illness prevention was supported by the government in 2014 in the decree No. 23 from 8th January, as well as by the Houses of Parliament of the Czech Republic in the decree No. 175 from 20th March 2014.

#### **CONCLUSION**

Breastfeeding is the most natural and healthy way of feeding newborns. It is an ideal way for the physical and mental development of a child, for a healthy relationship between the mother and the child, as well as to faster convalescence of the mother. A trend of the new millennium is to return to nature, mostly in the developed countries breastfeeding (which was and often is still subdued by industry) promoted with

stress on all aspects of human personality and society. Breastfeeding has benefits for the child as well as the mother, which has been proved by research. Women often unnecessarily stop breastfeeding only because of the poor approach of the surroundings and medical staff. The education of professional medical staff dealing with breastfeeding and the formation of supporting groups seems to be the most effective method to support breastfeeding.

#### CONFLICT OF INTEREST

The authors have no conflict of interest to disclose.

#### REFERENCES

- Boledovičová M et al. (2010). Pediatrické ošetrovateľstvo [Paediatric nursing]. Martin: Osveta, 215 p. (Slovak).
- 2. EU Project on Promotion of Breastfeeding in Europe (2008). Protection, promotion and support of breastfeeding in Europe: a blueprint for action (revised). European Commission, Directorate Public Health and Risk Assessment, Luxembourg.
- 3. Fendrychová J, Borek I et al. (2012). Intenzivní péče o novorozence [Intensive care of new-born]. Brno: NCO NZO, 447 p. (Czech).
- 4. Mitrová K, Bronský J (2014). Vědecké důkazy o prospěšnosti výživy mateřským mlékem [Research evidence on benefits of breastfeeding]. Česko-slovenská pediatrie. 69/1: 39–46 (Czech).
- 5. Mydlilová A (2013). Kojení donošených novorozenců [Breastfeeding of new-born]. Česká gynekologie: Doporučené postupy v neonatologii. 76/1: 95–97 (Czech).
- 6. Mydlilová A (2015). Rizika neindikovaného dokrmování donošeného novorozence [Risks of non-indicated supplementary feeding of full-term new born. In: Sborník abstrakt. XXXI. neonatologické dny. Ústí nad Labem: BOS.Org s. r. o., p. 19–20 (Czech).
- Schneidrová D (2005). Podpora kojení a stav výživy kojenců v České republice na konci 90. let [Support of breastfeeding and nutrition of new-born in the Czech Republic at the end of 1990's]. Praha: Karolinum, 132 p. (Czech).
- 8. Sobotková D, Štembera Z (2003). Psychologické aspekty v perinatální medicíně v letech 1980–2000: III. poporodní období [Psychological aspects in perinatal medicine in 1980–2000]. Česká gynekologie. 68/6: 385–389 (Czech).
- 9. Šráčková D (2005). Kojení stále nenahraditelné II [Breastfeeding still irreplaceable]. Praktická gynekologie. 9/4: 6–19 (Czech).
- SZU (2014). Tisková zpráva IBFAN, květen 2014: Nadnárodní firmy pokračují v porušování Mezinárodního kodexu [International companies keep breaking the International Codex]. Stručné novinky. 2/2: 1–3 (Czech).
- 11. SZU (2015). Prohlášení IBFAN při příležitosti 25. výročí Úmluvy o právech dítěte [IBFAN declaration on the occasion of 25th anniversary of the Convention on the Right of the Child]. Stručné novinky. 2/1: 1–2 (Czech).
- 12. Takács L, Kodyšová E, Kejřová K, Bartošová M (2011). Zahájení kojení z hlediska psychosociálních faktorů perinatální péče [Starting breastfeeding from the psycho-social aspects of perinatal care]. E-psychologie. 5/1: 16–32 (Czech).
- 13. WHO (2002). Global strategy on infant and young child feeding. Geneva: WHO, 36 p.
- 14. WHO/UNICEF (2009). Baby-Friendly Hospital Initiative. Revised, updated and expanded for integrated care. Geneva: WHO, 428 p.
- 15. WHO (2013). Essential Nutrition Actions: Improving maternal, newborn, infant and young child nutrition. Geneva: WHO, 116 p.

- 16. Zdraví 2020 (2013). Rámcový souhrn opatření připravených s cílem pomoci vládám a všem společenským aktivitám, aby přispívaly ke zdraví a životní pohodě obyvatel evropského regionu [Policy Framework focused on help to government and all social activities to improve health and wellbeing of the citizens of the European region]. Praha: Ministerstvo zdravotnictví ČR (Czech).
- 17. Zdraví 2020 (2014). Osnova evropské zdravotní politiky pro 21. století [Framework of European health policy for 21st century]. Praha: Ministerstvo zdravotnictví ČR (Czech).

#### **Contact:**

Jana Chrásková, J. E. Purkyně University, Faculty of Health Studies, Department of Nursing and Midwifery, Velká Hradební 13, 400 01 Ústí nad Labem, Czech Republic Email: jana.chraskova@ujep.cz