The Baby Friendly Hospital Initiative in Latin America and the Caribbean: Current status, challenges, and opportunities

Webinar, 6 March 2016
BFHI background

• Launched by WHO and UNICEF in 1991
• Purpose: protect, promote and support breastfeeding in maternity facilities
• Defines 10 steps to successful breastfeeding
• Rigorous process of certification
• Materials last updated in 2009

Image: Pablo Picasso. Maternity
Purpose of report

- Revitalize BFHI
- Evaluate the current status of implementation
- Identify challenges and opportunities
- Provide a basis to set country-specific and regional targets
Methods

• Survey sent to 34 Ministries of Health and one territory to collect information on:
  – Number of births
  – Number of births in health services
  – Number of health facilities that attend births
  – List of facilities certified as “baby friendly”
  – Dates of certifications, re-certifications and if a recertification process was in place
  – Challenges and opportunities
Analysis

• Descriptive analysis of
  – Number and proportion of facilities certified or re-certified
  – Number and proportion of infants born in certified facilities
  – Number and proportion of infants born in facilities certified since 2008
  – Trends
  – Challenges and opportunities
Results

26 countries (76.5%) responded in 2013/2014

• Antigua and Barbuda
• Barbados
• Dominica
• Dominican Republic
• Grenada
• Haiti
• Jamaica
• Puerto Rico
• Saint Kitts and Nevis
• St Vincent and the Grenadines
• Trinidad and Tobago
Facilities ever certified compared to those certified since 2008 in the Caribbean

Births (%) in facilities certified since 2008 = 3.5%
Peak five-year period for "baby friendly" certifications and recertifications, by time period
Tendencies in the implementation of the BFHI in the Caribbean
Births (%) in "baby friendly" certified facilities in the US

<table>
<thead>
<tr>
<th>Year</th>
<th>Births (%)</th>
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<tbody>
<tr>
<td>2007</td>
<td>1.79</td>
</tr>
<tr>
<td>2008</td>
<td>1.93</td>
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<tr>
<td>2009</td>
<td>2.87</td>
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<tr>
<td>2010</td>
<td>3.78</td>
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<tr>
<td>2011</td>
<td>4.53</td>
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<td>2012</td>
<td>6.22</td>
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<tr>
<td>2013</td>
<td>7.15</td>
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<tr>
<td>2014</td>
<td>7.79</td>
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</tbody>
</table>
Challenges in implementing the BFHI

- Resistance to change/lack of ownership: 14 countries
- HR: Rotation of staff: 14 countries
- HR: Insufficient staff: 7 countries
- HR: Training: 5 countries
- Formula/artificial feeding: Code violations: 7 countries
- Financial: 9 countries
- Step 4 (early initiation): 7 countries
- Family/cultural beliefs: 6 countries
- Hospital infrastructure: 3 countries
- Step 10 (community links): 3 countries
- Health system organization: 3 countries
- Recertification process: 2 countries
- Education: 2 countries
- Training: 2 countries
Sustainability

• One of the greatest problems

• Virtual program

• One way to address this problem is to incorporate the 10 steps into an overall program of hospital accreditation

• Example of Vietnam
Conclusions

• Strengthening and revitalizing the BFHI offers an important opportunity to strengthen BF - 89% of births in LAC take place in health facilities

• Although the potential is very large, few women and children at birth benefit

• Several countries have made significant advances and can be used as examples
Conclusions

• Increasing the number of “baby friendly” facilities requires political commitment as well as human and financial resources

• This report and the 25th anniversary celebration of the BFHI can be used to set new aspirational through realistic goals and to put in place a permanent system to monitor progress
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