## **Appendix 7 – Baby Friendly Health Initiative**

## 44. Baby Friendly Health Initiative

The cost of restoring funding to the Baby Friendly Health Initiative in 2019 and ensuring that the programme is applied in all our maternity hospitals and units.

The Baby Friendly Hospitals Initiative is a globally recognised quality improvement programme to support, protect and promote breastfeeding. The initiative is paused in Ireland since 2016. Proposals have been submitted to the HSE estimates process for 2019 to enable the reconfiguration and implementation of the Baby Friendly Initiative in Irish maternity services and includes a separate proposal for lactation consultants in maternity hospitals/units is also critical for the successful implementation of the revised baby friendly Initiative in Ireland.

There is substantial evidence demonstrating positive relationship between the baby friendly initiative and breastfeeding prevalence. A systematic review of 58 studies on maternity and newborn care published in 2016 demonstrated clearly that adherence to the Ten Steps impacts rates of breastfeeding (early initiation immediately after birth, exclusive breastfeeding and total duration of any breastfeeding). This review found a dose–response relationship between the number of BFHI steps women are exposed to and the likelihood of improved breastfeeding outcomes. Avoiding supplementation of newborns with products other than breast milk (step 6) was demonstrated to be a crucial factor in determining breastfeeding outcomes, possibly because, in order to implement this step, other steps also need to be in place. Community support (step 10) proved crucial to maintaining the improved breastfeeding rates achieved in facilities providing maternity and newborn services (Perez et al 2016).

International research has shown that breastfeeding rates tend to increase in accredited baby friendly hospitals, but adherence to the ten steps is inconsistent among countries. (Beake et al 2012, Sinha et al 2015). Evidence from the limited data available in Ireland suggests that women who gave birth in an Irish hospital accredited as baby friendly were 11% more likely to breastfeed than those birthing in hospitals without accreditation (ESRI 2012)

Studies examining the barriers and facilitators that are related to the implementation of the BFHI and found that the degree to which baby friendly is supported at the government level, the visibility of the formula industry, training of health care professionals, and various organisational factors, were critical to the success of the baby friendly initiative (Semenic et al 2012, Nickel et al 2013)

An external evaluation of the Baby Friendly Initiative in Ireland in 2016 recommended;

- A revised model and reformed processes
- A new and enabling approach
- A facilitative and supportive approach to achieving progress
- A staged approach to the assessment

## (Gallagher et al 2016)

Despite gradual increases over the last ten years, Ireland's breastfeeding rates continue to be the lowest in international comparisons (Victora et al. 2016; EuroPeriStat, 2013) with implications for maternal and child health and wellbeing. The most recently published report from the National Perinatal Reporting System (NPRS) shows a rate of 57.9% any breastfeeding on discharge from maternity services and 48.0% exclusive breastfeeding on discharge (HSE 2017).

Breastfeeding rates in Ireland are currently among the lowest in the world, compared to initiation rates of 90% in Australia (2010), 81% in the UK (NHS 2011) and 79% in the USA (CDC 2014). Ninety per cent of women who stop breastfeeding in the first six weeks report that they discontinue breastfeeding before they want to (Bolling 2007).

## **Costings**

Costings calculated to support implementation of the next 3 years are:

- support implementation of the baby friendly initiative = €120,000
- 20 additional CMS/CNS Infant feeding/lactation consultant WTE's = €3.113m