

Title	Describe the benefits of breastfeeding, available support services, and Baby Friendly Initiatives		
Level	3	Credits	3

Purpose	People credited with this unit standard are able to describe: the benefits of breastfeeding, the risks of not breastfeeding, and key advice given by health care professionals regarding breastfeeding; the support services available to breastfeeding mothers and their family/whānau; and describe Baby Friendly Initiatives that support successful breastfeeding.
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Classification	Health, Disability, and Aged Support > Whānau Ora and Community Support
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Available grade	Achieved
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Guidance Information

- 1 This unit standard is primarily intended for hospital or community-based health care workers who support mothers with newborn babies under supervision of a registered health professional.
- 2 Codes relevant to this unit standard:
 - Ministry of Health. (2007). *Implementing and Monitoring the International Code of Marketing of Breast-milk Substitutes in New Zealand: The Code in New Zealand*. Wellington: Ministry of Health. Retrieved May 20, 2020 from <https://www.health.govt.nz/publication/implementing-and-monitoring-international-code-marketing-breast-milk-substitutes-nz-code-nz>;
 - Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations 1996.
- 3 New Zealand Standards relevant to this unit standard:
 - NZS 8134.0:2008: *Health and disability services (general) Standard*;
 - NZS 8134.1:2008: *Health and disability services (core) Standards*;
 - NZS 8134.3:2008: *Health and disability services (infection prevention and control) Standards*;
 - NZS 8158:2012 *Home and Community Support Sector Standard*, available from <https://www.standards.co.nz>.
- 4 References:
 - New Zealand Breastfeeding Alliance (NZBA): *Baby Friendly Aotearoa*. (n.d.). *Protecting, supporting & promoting breastfeeding in New Zealand*. Retrieved May 20, 2020 from <https://www.babyfriendly.org.nz/>.
 - World Health Organization (WHO). (n.d.). *Baby-Friendly Hospital Initiative*. Geneva: WHO. Retrieved May 20, 2020 from

<https://www.who.int/nutrition/topics/bfhi/en/>.

- World Health Organization (WHO). (1981). *International Code of Marketing of Breast-milk Substitutes*. Geneva: WHO. Retrieved May 20, 2020 from <https://www.who.int/nutrition/publications/infantfeeding/9241541601/en/>.
- World Health Organization (WHO). (n.d.). *Ten steps to successful breastfeeding*. Geneva: WHO. Retrieved May 20, 2020 from <https://www.who.int/activities/promoting-baby-friendly-hospitals/ten-steps-to-successful-breastfeeding>.

5 Definitions:

- *Baby Friendly Initiatives* refer to the WHO and UNICEF Baby Friendly Hospital Initiative (BFHI) and Baby Friendly Community Initiative (BFCI).
- *BFHI* refers to the Baby Friendly Hospital Initiative, the World Health Organization's primary intervention strategy for strengthening the capacity of national health systems to protect and support breastfeeding. It promotes, protects, and supports breastfeeding by governmental embedment of 'The International Code of Marketing of Breast-Milk Substitutes' (usually referred to simply as 'The Code'). This restricts the actions of infant formula manufacturing companies, alongside the education of all health workers in New Zealand hospitals who are in contact with pregnant or postnatal women through 'The Ten Steps to Successful Breastfeeding' programme, which protects, promotes and supports the initiation of breastfeeding.
- *BFCI* refers to the Baby Friendly Community Initiative adapted from the BFHI for specific application in the community. The BFCI is aimed at primary health care workers in the community who continue backing up practices initiated by registered staff in protecting, promoting and supporting mothers with breastfeeding. It is also a WHO education programme ('The Seven Point Plan') which continues to protect, promote and support breastfeeding following discharge from hospital or following homebirth. For women who choose not to, or who are unable to breastfeed, Baby Friendly Initiatives and BFCI primary healthcare workers ensure that they are supported in their decision and provided with support and care.
BFHI and the BFCI both support health care assistants to maintain those practises initiated by health professionals to promote, protect and support mothers with breastfeeding. They are available at:
<https://www.babyfriendly.org.nz/>.
- *Community-based* may include health care assistants, Kaiāwhina and Kaimanaaki workforces, Māori or Pasifika health care workers providing breastfeeding support, working with teenage mothers, on the Marae, in prisons, or in specific healthcare settings such as Mental Health Respite Units, Mother and Baby Units, or Drug and Alcohol Units.
- *Hospital-based* covers health care assistants, Kaiāwhina and Kaimanaaki workforces, and Māori or Pasifika health support workers.
- *Promote breastfeeding* refers to promoting the benefits of breastfeeding as the normal way to feed infants to the broader health sector and community.
- *Protect breastfeeding* refers to a process that enables all women to make informed decisions about infant feeding, free from the influence of formula or related industry marketing practices; and whereby their right to breastfeed anytime, anywhere, is protected.

- *Support breastfeeding* refers to the process whereby women receive evidence-based information and advice from a health practitioner, who guides the health care worker in her/his supportive work.
- *UNICEF* refers to United Nations Children’s Fund (formerly United Nations International Children’s Emergency Fund).

Outcomes and performance criteria

Outcome 1

Describe the benefits of breastfeeding, the risks of not breastfeeding, and key advice given by health care professionals regarding breastfeeding.

Range may include but is not limited to – lifelong benefits to health for both mother and baby, lifelong development benefits for newborns, artificial feeding as being sub-optimal (e.g. reduced brain/gut development), risks of formula usage, sustainability, social and environmental benefits.

Performance criteria

1.1 The benefits of breastfeeding are described in context of it being the norm for infant feeding.

Range at least one benefit for each – mothers, babies, family and whānau, and the community.

1.2 The risks of not breastfeeding are described.

Range at least one risk for each – mothers, babies, the community, and the environment.

1.3 Key breastfeeding advice given by healthcare professionals is described.

Range colostrum volumes, feeding frequency, supply and demand, the impact of using formula on establishing and sustaining breastfeeding.

Outcome 2

Describe the support services available to breastfeeding mothers and their family/whānau.

Range Lead Maternity Carers, La Leche League, General Practitioner, Lactation Consultant, Plunket Society, Well Child/Tamariki Ora, peer support groups, Primary Health Organisations, and other community-based services; minimum of two required.

Performance criteria

2.1 Support services are described in terms of their role in assisting breastfeeding mothers and their family/whānau.

Outcome 3

Describe Baby Friendly Initiatives that support successful breastfeeding.

Performance criteria

3.1 Baby Friendly Initiatives in New Zealand hospitals and communities are described in accordance with the WHO/UNICEF Baby Friendly Initiative.

Range history, application, working within boundaries.

3.2 Baby Friendly Initiatives are described in relation to women who are either unable to breastfeed or choose not to, in accordance with the WHO International Code of Marketing of Breast-Milk Substitutes and subsequent resolutions.

3.3 The role of health care workers in protecting, promoting and supporting breastfeeding is described in accordance with the WHO International Code of Marketing of Breast-Milk Substitutes.

3.4 The goals of the BFHI and BFCI to protect, promote, and support breastfeeding are described in terms of the Ten Steps to Successful Breastfeeding, and the WHO International Code of Marketing of Breast-Milk Substitutes.

Planned review date	31 December 2025
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Status information and last date for assessment for superseded versions

Process	Version	Date	Last Date for Assessment
Registration	1	19 November 2010	31 December 2012
Revision	2	8 December 2011	31 December 2022
Rollover and Revision	3	24 October 2019	31 December 2022
Review	4	24 September 2020	N/A

Consent and Moderation Requirements (CMR) reference	0024
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This CMR can be accessed at <https://www.nzqa.govt.nz/framework/search/index.do>

Comments on this unit standard

Please contact Careerforce info@careerforce.org.nz if you wish to suggest changes to the content of this unit standard.