

UNICEF Baby Friendly Hospital Initiative Hong Kong Association

World Breastfeeding Week 2014 Annual Survey

BREASTFEEDING: A Winning Goal - For Life!

WBW Annual Survey Summary

Survey Content

Baby Friendly Hospital Initiative Hong Kong Association (BFHIHKA) was incorporated in 1994 to promote, protect and support breastfeeding in Hong Kong. Every year, in celebration of WBW, BFHIHKA conducts a survey on:

1. The **Breastfeeding Rate** on discharge from maternity units in Hong Kong
2. Hospitals' practice of the "**Ten Steps to Successful Breastfeeding**"
3. Compliance of infant food manufacturers with the "**International Code of Marketing of "Breast-milk Substitutes"**" as observed in institutions with maternity units.

1. Breastfeeding rate on discharge from maternity units

	Births in 2013		Births in 2012	
	%	Range %	%	Range %
Public hospitals	79.4	70 - 87	79.6	69 - 88
Private hospitals	93.0	86 - 98	92.1	85 - 96
Total	84.2	70 - 98	85.8	69 - 96

2. Ten Steps to Successful Breastfeeding

Significant difference of over 10% between the 2014 and 2013 surveys –

Improvement: Caesarean deliveries with general anaesthesia (skin to skin when mother responsive) (4.2)

Facilitate the formation of mother-to-mother or healthcare worker-to-mother support groups (10.2)

Deterioration: Explicit written notice of BF Policy routinely communicated to all health care staff (1.1)

Breastfeeding policy displayed publicly (1.2)

Give no artificial teats or pacifiers to breastfeeding infants (9)

3. Compliance with the International Code of Marketing of Breast-milk Substitutes in institutions with maternity units

Significant difference of over 10% between the 2014 and 2013 surveys –

Improvement: All written material on IFM products provided to mothers clearly describes the advantages of BF and disadvantages of artificial feedings, including hazards of inappropriate use (8)
Texts or pictures idealize artificial feeding (9)

Deterioration: Mothers given materials with information about infant feeding published or distributed by IFM companies (1)

Report on WBW Survey 2014

Introduction

The World Health Organisation (WHO) and the United Nations Children’s Fund (UNICEF) launched the Baby Friendly Hospital Initiative (BFHI) in 1991 to encourage maternity units to promote, protect and support breastfeeding. Maternity units that implement the WHO / UNICEF Ten Steps to Successful Breastfeeding and comply with the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly resolutions could apply for accreditation as Baby Friendly Hospitals. In 1992, the Hong Kong Committee for UNICEF formed the Baby Friendly Hospital Initiative Committee that was subsequently incorporated as the Baby Friendly Hospital Initiative Hong Kong Association (BFHIHKA) in 1994. The aim is to promote breastfeeding and protect infant and maternal health in Hong Kong.

Each year, countries round the world celebrate the World Breastfeeding Week from 1 – 7 August. This year the theme of WBW is “**BREASTFEEDING: A Winning Goal – For Life!**” Once again BFHIHKA takes this opportunity to conduct a survey among public and private maternity units to monitor the breastfeeding trend in Hong Kong.

Methods

The 8 public and 10 private hospitals in Hong Kong with maternity units were invited to participate in our annual survey. The survey covered the following areas:

1. Breastfeeding rate

1.1 *The breastfeeding rate of mothers on discharge from maternity units*

Each hospital reported on the number of live births in the hospital in 2013 and the breastfeeding rate upon discharge for that year. The breastfeeding rate was defined as the number of babies that were breastfeeding on the day of discharge divided by the total number of babies delivered X 100%.

1.2 *Exclusive breastfeeding rate in hospital*

Each hospital is to report on their exclusive breastfeeding rate for live births in 2013. The exclusive breastfeeding rate was defined as the number of breastfed babies not given any food or drink before discharge other than breastmilk, divided by the total number of babies delivered X 100%.

2. The implementation of the Ten Steps to Successful Breastfeeding

In 1989, the World Health Organization and UNICEF issued a joint statement titled “Promoting, Protecting and Supporting Breastfeeding: the Special Role of Maternity Services” with a set of guidelines for maternity units to follow in order to provide optimal breastfeeding support services to mothers. This set of guidelines is called the Ten Steps to Successful Breastfeeding. In the current survey, hospitals were asked to assess the degree to which they were implementing the Ten Steps.

3. The compliance of the International Code of Marketing of Breast-milk Substitutes

The International Code of Marketing of Breast-milk Substitutes (the Code) was adopted as a resolution at the WHO World Health Assembly in 1981 to regulate marketing practices of infant formula and related products that may be detrimental to the success of breastfeeding. Hospitals were asked in the current survey to report on their observation of the compliance of the Code in their hospital premises.

Results

All 8 public and 10 private hospitals participated in our survey.

Survey Population

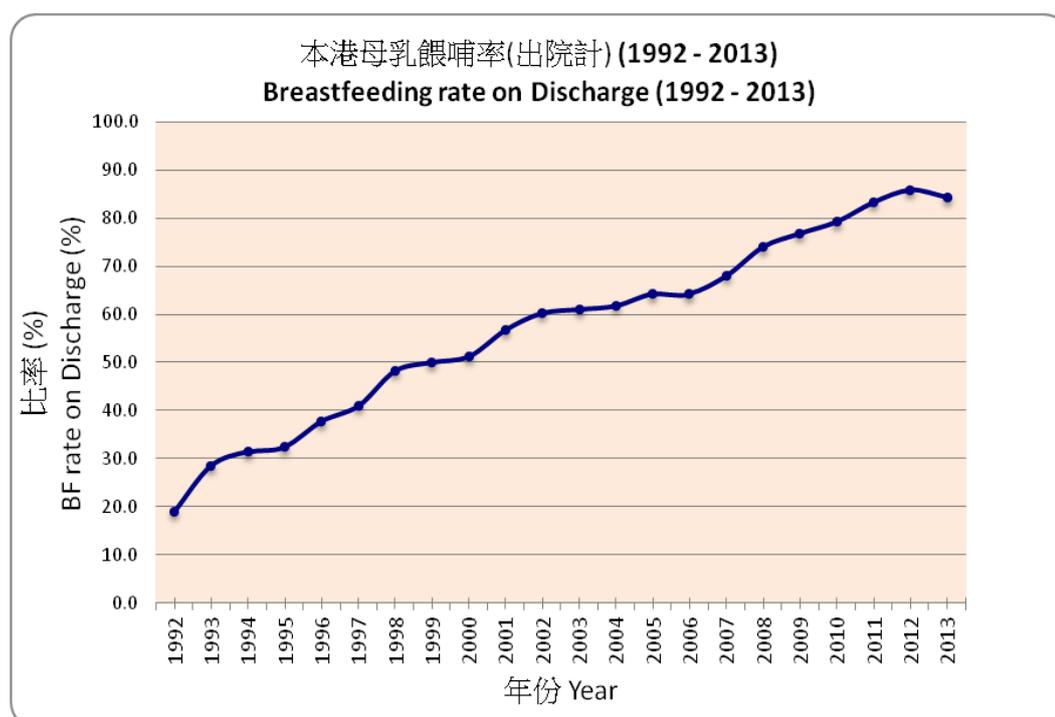
	No. of births in 2013	No. of births in 2012
Public hospitals (8)	37,049	44,802
Private hospitals (10)	19,995	46,670
Total	57,044	91,472

1. Breastfeeding Rate

1.1 Breastfeeding Rate on discharge from hospital

The breastfeeding rate on discharge from maternity units for births in 2013 from all public and private hospitals in Hong Kong was 84.2%. This was a decrease of 1.6% from the 85.8% for births in 2012. For public hospitals the minimum rate increased by 1% while the maximum rate decreased by 1%. For private hospitals, the minimum rate increased by 1% and the maximum rate increased by 2%.

	Births in 2013		Births in 2012	
	%	Range %	%	Range %
Public hospitals	79.4	70 - 87	79.6	69 - 88
Private hospitals	93.0	86 - 98	92.1	85 - 96
Total	84.2	70 - 98	85.8	69 - 96



1.2 Exclusive breastfeeding rate in hospital (mean = 24.3%)

Reports from public hospitals for varying periods of the year ranged from 10 to 65%. Information available from 6 out of 10 private hospitals ranged from 1 to 97%.

2. The implementation of the Ten Steps to Successful Breastfeeding in 2013 (Appendix I)

Step 1 Written Breastfeeding Policy routinely communicated to all health care staff

83% of hospitals have a written breastfeeding policy and 61% of hospitals display the policy publicly, less than the 94% and the 78% respectively in the previous year.

Step 2 Train all healthcare staff

89% of hospitals thought their staff are acquainted with the policy, less than the 94% in the year before. There is a decrease in O&G nurses trained in the implementation of the policy from 86% in 2013 to 82% in 2014. 32% of Paediatric nurses received training, similar to the 31% in 2013. 16% of O&G doctors and 33% of Paediatric doctors are reported to have completed such training, compared to 22% & 28% respectively in 2013.

Step 3 Inform all pregnant women about the advantages and management of Breastfeeding

89% of pregnant women, compared to 86% in the year before received information about the advantages and management of breastfeeding. 28% of hospitals still give group instructions on artificial feeding, same as previous year.

Step 4 Help mothers initiate breastfeeding within half an hour of birth

Two hospitals, similar to previous year, practiced skin to skin contact for over one hour within 5 minutes after vaginal births and Caesarian deliveries without general anaesthesia. In hospitals that responded, 43% of mothers, compared to 50% in previous year, were able to enjoy skin to skin contact with their newborns and 28%, compared to 27% in the previous year, for over an hour. For mothers with caesarian deliveries under general anaesthesia, 32% instead of 19% in the previous year had skin to skin contact with their newborns when the mothers were responsive.

Step 5 Show mothers how to breastfeed and how to maintain lactation even if they should be separated from their infant

94% of hospitals, compared to 89% in the previous year, are offering mothers help to breastfeed within six hours of delivery and 100% of hospitals, same as previous year, are able to help mothers to maintain lactation if their babies are admitted to special care unit.

Step 6 Give newborn only breastmilk, unless medically indicated

67% of hospitals are not offering any food or drink other than breastmilk to breastfed infants unless medically indicated, more than the 59% the year before. All hospitals continue not to receive any free or low-cost supplies of breastmilk substitutes. 94% of hospitals do not promote infant foods or drinks other than breastmilk, compared to 100% in the previous year.

Step 7 Practise rooming-in

56% of hospitals separated mothers from their infants for over an hour before starting rooming-in, same as in 2013. 50% of hospitals allow mothers and babies to stay in the same room day and night compared with 56% the year before. 26% vs. 18% of babies were separated from mothers for medical reasons compared with 2013, the range varying from 6% to 57% in public hospitals and 3 to 100% in private hospitals. 78% of the units still maintain a nursery in the postnatal ward for healthy infants, compared to 83% in 2013.

Step 8 Encourage breastfeeding on demand

100% hospitals continue to encourage breastfeeding on demand.

Step 9 Give no artificial teats or pacifiers to breastfed infants

67% of hospitals do not have such practice, a decrease from 78% the year before.

Step 10 Foster the establishment of breastfeeding support groups

Same as last year, 83% of hospitals refer breastfeeding mothers to support groups, while 89% vs. 78% of units reported they facilitate the formation of mother-to-mother or healthcare worker-to-mother support groups and 22% of units, same as last year, provide breastfeeding counseling by trained mother support group counselors.

Hospitals were also asked to give suggestions as to how the implementation of the Ten Steps could be improved. By far, training of doctors and midwives / nurses together with supporting staff was considered most important. Changing hospital practices like rooming-in mothers and babies, initiation of breastfeeding at birth with skin to skin contact were thought essential and could also be facilitated by adequately preparing and supporting mothers to understand the rationale of such practices. A change of hospital culture to mother-baby friendly should start from top management. Promotion of natural birth with non-pharmaceutical pain relief could significantly encourage breastfeeding.

3. The compliance with the International Code of Marketing of Breast-milk Substitutes (Appendix II)

Generally violations of the Code were infrequently observed within hospitals as reported by the hospitals themselves. 78% hospitals observed all written material on infant formula milk products provided to mothers clearly describes the advantages of breastfeeding and disadvantages of artificial feedings, compared to 65% in the previous year. 6% of hospitals, instead of 18% in 2013, noted texts or pictures idealize artificial feeding. On the other hand, 11% of hospitals noticed mothers were given materials with information about infant feeding published or distributed by IFM companies, compared to 0% in 2013.

Discussion

Despite the nearly 40% reduction in total no. of births in 2013 (57,044) compared to 2012 (91,472), after the HKSAR Government prohibited Mainland mothers' bookings in both public and private hospitals, the initiation rate of breastfeeding had not increased, but rather decreased from 85.8% to 84.2%. This observation rings a bell on whether the high initiation rate of breastfeeding has reached a plateau. The observed % in subsequent years would give an answer.

The mean *exclusive* breastfeeding rate of 24.3% is still far from satisfactory with much room for improvement. Note that *exclusive* breastfeeding is recommended by WHO. Ability to exclusively breastfeed before discharge could reduce the chance of early cessation of breastfeeding on going home. The wide range of 10 to 65% in public hospitals and 1 to 97% in private hospitals leaves much room for experience sharing and learning among maternity units. Similarly, hospitals can learn from each other when the range of infants separated from mothers for "medical reasons" varied from 6 to 57% in public hospitals and 3 to 100% in private hospitals.

In 2013, there were both improvements and deteriorations noticed regarding the hospital implementation of the 10 steps to successful breastfeeding (Appendix I). In order to further improve as well as to consolidate the existing improvements so as to prevent deteriorations, training of doctors and midwives / nurses together with supporting staff is considered most important. Training could be based on the self-learning breastfeeding kit for health professionals launched by the Department of Health in 2011, together with the additional chapter specifically on mother friendly childbirth to be launched by BFHIHKA in collaboration with the Department of Health in 2014.

Regarding the compliance to the International Code of Marketing of Breast-milk substitutes, all 18 hospitals with maternity units in Hong Kong have continued to stop receiving free supplies of breast-milk substitutes to mothers. However, there seems to be an increase in mothers, while staying in hospitals, given materials with information about infant feeding published or distributed by formula companies. In 2012, the drafting of the Hong Kong Code of marketing of breast-milk substitutes was completed and has already undergone public consultation. We look forward to the implementation of the Hong Kong Code in 2014, which could further protect breastfeeding from inappropriate marketing of breast-milk substitutes.

It is encouraging to report that 3 public Obstetric Units have started their Baby Friendly Hospital accreditation process:

Process of Designation	Hospital	Date
Registration of Intent	QEH	June 2013
	KWH	November 2013
	QMH	December 2013
Certificate of Commitment	QEH	January 2014
Award of Level 1 Participation		
Award of Level 2 Participation		
Award of Baby Friendly Hospital		

Conclusion

The theme for this year's World Breastfeeding Week is "*BREASTFEEDING: A Winning Goal – For Life!*" The initiation rate of breastfeeding has slightly decreased to 84.2% in 2013. There is still much room for improvement on the mean *exclusive* breastfeeding rate of 24.3%. In order to further improve as well as to consolidate the existing improvements so as to prevent deteriorations, training of doctors and midwives / nurses together with supporting staff as well as public education would be most important. We are looking forward to the implementation of the new Hong Kong Code of marketing of breast-milk substitutes in 2014. Three public Obstetric Units have started their Baby Friendly Hospital accreditation process. More hospitals, public and private, will hopefully join in the not too distant future. The Government of the HKSAR has set up a high level Committee on Promotion of Breastfeeding, comprising representatives from various sectors of the community, to optimize breastfeeding practices. With concerted effort both from the government and the community, mothers in Hong Kong would not need to forego their breastfeeding goals prematurely.

Appendix I: Ten Steps to Successful Breastfeeding (BF)

(Self-Appraisal by Hospitals)

Survey year	2014	2013
	Hospital %	
1. Written BF Policy routinely communicated to all health care staff		
1.1) With explicit written notice	83	94
1.2) BF policy displayed publicly	61	78
2. Train all health care staff		
2.1) Acquainted with BF policy	89	94
2.2) 20-hr training given to staff within six month of their arrival		
2.2a) % of O&G nursing staff (H 2014:17; H 2013:14)	82	86
2.2b) % of Paediatric nursing staff (H 2014:15;H 2013:10)	32	31
2.3) 8-hr training given to staff within six month of their arrival		
2.3a) % of O&G doctors (H 2014:14; H 2013:8)	16	22
2.3b) % of Paediatric doctors	33	28
3. Inform all pregnant women about the advantage & management of BF		
3.1) % of pregnant clients informed	89	86
3.2) Give group instruction on artificial feeding	28	28
4. Help mothers initiate BF within half an hour of birth		
4.1) Vaginal or Caesarian deliveries without general anaesthesia (skin to skin)		
- All mothers had skin to skin contact within 5 minutes and >1 hour	11	12
- % of mothers with skin to skin (H 2014:16; H 2013:14)	43	50
- % of mothers for over 1 hour (H 2014:15; H 2013:9)	28	27
4.2) Caesarean deliveries with general anaesthesia (skin to skin when mother responsive)		
- % of mothers (H 2014:17; H 2013:16)	32	19
5. Show mothers how to breastfeed and how to maintain lactation even if they should be separated from their infant		
5.1) Offer breastfeeding assistance within six hours of delivery	94	89
5.2) Help mothers of babies in special care maintain lactation	100	100
6. Give newborn only breast-milk, unless medically indicated		
6.1) Given newborn infants no food or drink other than breast-milk	67	59
6.2) No free or low-cost supplies of breast-milk substitutes accepted	100	100
6.3) No promotion of infant foods or drinks other than breast-milk	94	100

7. Practice rooming-in – allow mothers and infants to remain together 24 hours		
7.1) Mothers and babies separated more than 1hr before starting rooming-in	56	56
7.2) Mothers and babies stayed in the same room day and night	50	56
7.3) % of mothers and babies separated for medical reasons	26	18
7.4) There is a nursery in postnatal ward for healthy infants	78	83
8. Encourage breastfeeding on demand	100	100
9. Give no artificial teats or pacifiers to BF infants	67	78
10. Foster the establishment of BF support groups		
10.1) Refer BF mothers to BF support groups	83	83
10.2) Facilitate the formation of mother-to-mother or healthcare worker-to-mother support groups	89	78
10.3) Provide BF counseling in its maternity services by trained mother support group counsellors	22	22

Remarks: All 18 hospitals responded unless “H” stated.

“H” refers to number of hospitals that responded out of 18 hospitals

Appendix II: International Code of Marketing of Breast-milk Substitutes

(Violations of the Code as observed by hospital healthcare workers within their health care facilities)

The Code aims to promote and protect breastfeeding by ensuring appropriate marketing and distribution of breast-milk substitutes. The Code applies to products, when marketed or otherwise represented as a partial or total replacement for breast-milk. These include formulae, other milk products, cereals, vegetable mixes, juices and baby teas, and follow-up milks. The Code also applies to feeding bottles and teats.

	Code Violations	2014	2013
		% of hospitals with such observations	
1	Mothers given materials with information about infant feeding published or distributed by IFM companies	11%	0%
2	Advertise infant formula, bottles, and teats through posters, calendars etc.	6%	12%
3	Free samples or gifts given directly or indirectly to mothers	0%	0%
4	IFM company staff directly or indirectly approach mothers	11%	12%
5	Discounts for infant formula offered to mothers	11%	12%
6	Gifts such as pens, calendars given to healthcare workers	6%	6%
7	Information about infant formula products which is promotional rather than scientific or factual given to healthcare workers	0%	0%
8	All written material on IFM products provided to mothers clearly describes the advantages of BF and disadvantages of artificial feedings, including hazards of inappropriate use	78%	65%
9	Texts or pictures idealize artificial feeding	6%	18%

Remarks: All 18 hospitals responded in 2014