National Breastfeeding Policy

Dr Liz O'Sullivan TU Dublin IIOP webinar, December 11th, 2024



About me

- Lecturer in Nutrition and breastfeeding researcher within the School of Biological, Health and Sports Sciences, TU Dublin
- Voluntary member of Baby Feeding Law Group Ireland
- Co-ordinator of the World Breastfeeding Trends Initiative Core Group for Ireland
- Active funding:
 - North South Ireland Research Programme, HEA
 - Secondary Data Analysis Project, HRB
- Mother to two children who were breastfed (but no longer are)

Webinar overview

- 1. Irish breastfeeding recommendations & rates
- 2. Recent research on breastfeeding-related care received by parents
- 3. National breastfeeding policy
 - Breastfeeding action plan 2016-2023 (since extended)
 - Hospital-specific policies related to breastfeeding
- 4. The WHO Code of Marketing of Breast-Milk Substitutes
- 5. World Breastfeeding Trends Initiative-Ireland, 2023 Report
- 6. National services related to breastfeeding
 - The Human Milk Bank
 - National Medicines Information Centre
- 7. Other services
- 8. Open discussion / questions

Breastfeeding recommendations

- Exclusive breastfeeding to 6 months
- Introduce appropriate complementary foods
- Continued breastfeeding until child is 2 or older

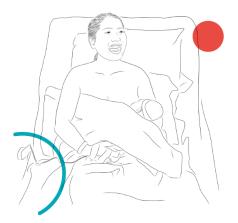


Every Breastfeed Makes a Difference



Breastfeeding rates in Ireland (2022)

Metric	Timing	Percentage
Ever breastfed	At birth	63.6
Any breastfeeding	72 hours	62.4
Exclusive breastfeeding	72 hours	39.5
Any breastfeeding	3 months	43
Exclusive breastfeeding	3 months	31.1





The Irish context



Source: WHO Regional Office for Europe, HSE Performance Reports

Perspectives of parents regarding breastfeeding-related care



- Survey conducted in 2022 in collaboration with Bainne Beatha
- 5,412 responses
 - 50% aged 31-35
 - 38% living in Dublin
 - >99% ever breastfed
 - >62% had disposable income beyond their needs





- Survey included a mixture of closed-ended and open-ended (qualitative) questions
- Two themes were created from the qualitative responses to the question:

"If you have any other comments about the breastfeeding support you received in the maternity unit or during your home birth, please add them here:"





Theme 1: Support was inaccessible, inadequate and/or inappropriate







Theme 2: Breastfeeding support in theory but not in practice...

2.1 Breastfeeding problems were not given breastfeeding solutions

2.2 Emphasis on formula in the maternity ward 2.3 Poor knowledge and conflicting advice from healthcare professionals

'You're so vulnerable in those moments, to be told you're failing, without any solutions offered apart from formula is just soul crushing...' (4602). '...During antenatal classes the midwives are very pro breastfeeding, but
once the baby is born they offer formula all the time...' (2199).

'Advice was so conflicting. Every midwife gave different techniques. So frustrating and confusing...' (5185).

National Breastfeeding Action Plan



Every Breastfeed Makes a Difference



- Primary framework for advancing breastfeeding support in Ireland.
- Set a target of annually increasing "any breastfeeding" rates by 2% while implementing additional policies at both hospital and community levels.
- National Breastfeeding Implementation Group who are partnering with the Department of Health and key divisions within the HSE to progress a range of actions under 5 key areas.

National Breastfeeding Action Plan

Progress report published Oct 2024

- Key highlights include:
 - increase in the number of dedicated infant feeding specialists available to support mothers (from 15 to 59 since 2017)
 - new National Infant Feeding Education programme underway for HSE staff
 - an 18.6% increase in the percentage of babies breastfed at the 3 months developmental check-up since 2015
 - (35.4% in 2015 *v*s. 42% in 2023)
 - almost 22,000 queries answered via the HSE online breastfeeding support service since 2016

National Breastfeeding Action Plan

- The future...
- The Department of Health is establishing a steering group including multiple stakeholders across healthcare, the voluntary sector, and academia (among others) to develop a new National Breastfeeding Policy.



Other national policies that reference breastfeeding

Appendix I

The protection, promotion and support for breastfeeding is outlined in other related government strategies and implementation plans since the publication of the HSE's breastfeeding action plan:

Health Service Executive: Health Services Healthy Ireland Implementation Plan (2023 – 2027)

Actions for promoting healthy childhood: Increase rates of breastfeeding through the provision of various infant feeding supports, addressing the marketing of commercial milk formula, and creating awareness of infant feeding in education sectors, communities, and Local Authorities (page 22).

 Heath Service Executive: <u>National Traveller Health Action Plan (2022–2027)</u> Working together to improve the health experiences and outcomes for Travellers.

Outlines the Traveller health inequalities that need to be addressed in the 5 years of the Plan and beyond, including maternity and postnatal care for women and babies. "Pavee Mothers," an initiative designed by Traveller women for Traveller women that provides information about breastfeeding (among other things) is noted in the action plan as an example of good practice (page 55).

 Health Service Executive/Royal College of Physicians of Ireland: <u>Model of Care for the</u> Management of Overweight and Obesity (2021).

This document describes the availability of breastfeeding groups, supports and weaning workshops within community services as a first tier of support for health promotion and community programmes (page 39). It also emphasises the importance of encouraging and supporting breastfeeding both antenatally and postnatally (pages 23 & 83).

The WHO Code of Marketing of Breast-Milk Substitutes (the "Code")

International Code of Marketing of Breast-milk Substitutes



World Health Organization Geneva 1981

- International health policy framework for breastfeeding promotion
- Recommends restrictions on marketing of breast-milk substitutes
 - And recommends substitutes are used safely if needed
- Companies are only subject to legal sanctions for failing to abide by the Code where it has been incorporated into the legislature of a nation state

The "Code"

Important points of the Code

Annex 1 summarizes key portions of the Code that are important in emergencies.

Some important points from the International Code of Marketing of Breastmilk Substitutes

- no advertising or promotion to the public
- no free samples to mothers or families
- no donation of free supplies to the health care system
- health care system obtains breastmilk substitutes through normal procurement channels, not through free or subsidised supplies
- labels in appropriate language, with specified information and warnings

Note that the Code does not allow donations of breastmilk substitutes, bottles or teats to the health care system for distribution.

IFE 1/13

However, if the health care system purchases these products, it may distribute them to mothers

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Irish law and the "Code"

- General
 - Defines "infant formula" and "follow-on formula"
 - Prescribes the protein source & set out compositional criteria
 - Describe levels of pesticides allowed in infant formula
- Labelling
 - Must state target audience, nutritional composition, instructions for preparation
 - Must contain a statement containing the superiority of breastfeeding
 - <u>May not</u> include pictures of infants, or text that idealises the product
- Marketing
 - Point-of-sale advertising, giving of samples or any other promotional device to induce sales of **infant formula** directly to the consumer at the retail level, such as special displays, discount coupons, premiums, special sales, loss-leaders, and tie-in sales, are prohibited.



"Code" and legislation violations



Figure 2: First infant milk discounted in a pharmacy, observed November 1st, 2022. Member of the public spoke to the Pharmacy Manager, who was not aware that this was a violation of the WHO Code and Irish Legislation.



Figure 5: Stage 1 and Stage 2 infant formula on display at point-of-sale in a petrol station. Photo taken 28th September 2023. A breach of the WHO Code and Irish legislation (for the Stage 1 formula).

The HSE's "Code" policy



Working within the Code

HSE Policy on the Marketing of Breast Milk Substitutes

A guide for staff

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The HSE's "Code" policy

- To ensure that parents have factual unbiased information when it comes to their child's nutrition by eliminating inappropriate advertising of breast milk substitute products.
- Issues include:

Offering gifts, lunches, educational opportunities or opportunities to speak at events, they are subtly encouraging you to feel positive towards their brand through feelings of gratitude and/or obligation.

Offering **pens**, **diary covers**, **obstetric wheels** etc. for use in front of the public and other staff, is designed to trigger brand recognition. These companies are intending to **exploit the trust that parents feel for health workers** – if you imply that you like a particular brand, parents will likely feel more positive towards it.

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The HSE's "Code" policy

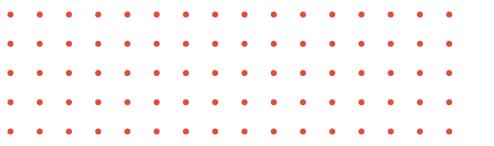
Working within the Code - A guide for staff

What are companies not permitted to do under the HSE policy and the Code?

Companies are not allowed to:

- 1. Promote their products in hospitals, shops or to the general public.
- 2. Give free samples to mothers or free or subsidised supplies to hospitals or maternity wards.
- 3. Give gifts to healthcare workers or mothers.
- 4. Promote their products to healthcare workers: any information on new scientific developments must contain only scientific, objective and factual information.
- 5. Promote foods for babies under 6 months or drinks for babies and young children up to 3 years of age.
- 6. Give misleading information.
- 7. Have direct contact with mothers.

If you identify non-compliance with this policy, report this to your manager.



ASSESMENT REPORT IRELAND 2023



world breastleeding frends initiative (wb1









WBTi key findings: Ireland

Summary Part I: IYCF Policies and Programmes

Targets:	Score (Out of 10)
1. National Policy, Governance and Funding	9.5
2. Baby Friendly Hospital Initiative / Ten Steps to	3
Successful Breastfeeding	
3. Implementation of the International Code of	6
Marketing of Breastmilk Substitutes	
4. Maternity Protection	8.5
5. Health and Nutrition Care Systems (in support of	7
breastfeeding & IYCF)	
6. Counselling Services for the Pregnant and	5
Breastfeeding Mothers	
7. Accurate and Unbiased Information Support	8
8. Infant Feeding and HIV	4
9. Infant and Young Child Feeding during Emergencies	0
10. Monitoring and Evaluation	5
Total Country Score	56

WBTi key findings: Ireland

Summary Part II: Infant and young child feeding (IYCF) practices

IYCF Practice	Colour-coding
Indicator 11: Initiation of Breastfeeding (within 1 hour)	Red
Indicator 12: Exclusive Breastfeeding under 6 months	Red
Indicator 13: Median Duration of Breastfeeding	Red
Indicator 14: Bottle-feeding (0-12 months)	Red
Indicator 15: Complementary Feeding (6-8 months)	Red

"Data not	
available"	

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Summary so far...

A lot done. More to do.

Article

'It's far from the norm': breastfeeding beyond 1 year in the Republic of Ireland

Gillian Paul^{1,*,}, Niamh Vickers^{2,}, Regina Kincaid³, and Denise McGuinness^{2,}

Published 2024

The Human Milk Bank

The only milk bank on the island of Ireland is in Enniskillen, NI.

Serves 27 neonatal units in hospitals across the island.

Home / Irish News / Health

Special delivery: The bikers darting across town to bring breast milk to the babies who need it most

Volunteers from Blood Bikes East take consignments of milk to Rotunda...and often return to mothers with snaps of their precious tiny babies





National Medicines Information Centre



National Medicines Information Centre

VOLUME 27 NUMBER 4 2021

St James's Hospital, Dublin 8

Tel 01 4730589 or 1850 727 727; twitter @NationalNmic; nmic@stjames.ie

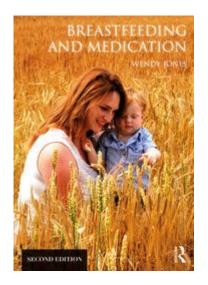
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USE OF MEDICINES IN BREASTFEEDING WOMEN

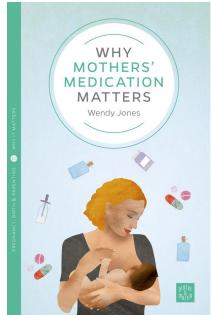
- Most commonly used medicines can be used by breastfeeding women
- It is important to balance the benefits of medication for the mother and the benefits of continued breastfeeding for the mother and infant, against the limited or potential risk of medicine exposure to the infant
- Caution is advised when prescribing for mothers of premature or low birth weight infants, particularly when multiple medicines are required
- Useful medicines information resources are available for healthcare professionals (HCPs) on the use of medicines in breastfeeding women; where possible HCPs should provide practical recommendations about infant monitoring to breastfeeding women taking medicines

Other services of interest

Wendy Jones BSc, MSc, PhD, MRPharmS, Community Pharmacist, UK







NOTE: These resources are written by a UK pharmacist and are displayed here for information purposes only. Always ensure that you comply with Irish pharmacy and medicines legislation.

Discussion & questions