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## Subject: Counseling About Breastfeeding at Early Critical Time Points

Posted by [DataDENT](#) on Fri, 01 Mar 2019 19:01:21 GMT

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Breastfeeding counseling is effective in promoting exclusive breastfeeding and continued breastfeeding after 6 months. In February 2019, the WHO released "Guideline: Counselling of Women to Improve Breastfeeding Practices," which supports breastfeeding counseling at multiple time points. We request five indicators to measure counseling and support coverage at 3 points: during pregnancy, during postnatal care, and around 1 month of age.

### 1. Breastfeeding counseling during pregnancy

Definition: The percentage of women with a live birth in the last 3 or 5 years\* who spoke with a health care provider† about breastfeeding during her last pregnancy.

### 2. Breastfeeding counseling during postnatal care

Definition: The percentage of women with a live birth in the last 3 or 5 years\* who spoke with a health care provider† about breastfeeding during the first two days after child's birth.

(Note: Already included in DHS, but small modification to question wording is requested.)

### 3. Breastfeeding counseling during postnatal care with observation

Definition: The percentage of women with a live birth in the last 3 or 5 years\* who spoke with a health care provider† about breastfeeding AND was observed breastfeeding the child during the first two days after child's birth.

(Note: Already included in DHS, but small modification to question wording is requested.

Currently, postnatal counseling on breastfeeding and observation of breastfeeding are tabulated separately in DHS reports. We recommend an additional tabulation: breastfeeding + observation, which would be an additional column in the "Content of postnatal care for newborns" table.)

### 4. Breastfeeding counseling during first month

Definition: The percentage of women with a live birth in the last 3 or 5 years\* who spoke with a health care provider† about breastfeeding during the first month (but after the first two days) after birth.

### 5. Breastfeeding counseling during first month with observation

Definition: The percentage of women with a live birth in the last 3 or 5 years\* who spoke with a health care provider† about breastfeeding AND was observed breastfeeding the child during the first month (but after the first two days) after birth.

Notes of possible modifications to the above definitions:

\*We support the newborn community's recommendation to modify all Section 4. Pregnancy and Postnatal Care to include live births occurring in the previous 2 years. This would be advantageous to reduce data collection burden, align with MICS, and improve data quality. If this recommendation is adopted, the recall period for this proposed recommendation can be changed to 2 years.

†We expect "health care provider" to be contextualized by country based on types of health care providers that provide the described services. This would include community health workers in contexts where lay health workers are providing counseling services, in line with WHO

recommendations.

Attached to this post is a completed submission form with full justification for the recommendation.

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This recommendation originated in a consultation focused on measuring coverage of programs to support breastfeeding and complementary feeding, co-convened by Alive & Thrive, the International Food Policy Research Institute (IFPRI), and Data for Decisions to Expand Nutrition Transformation (DataDENT). It was further discussed and endorsed at the September 2018 Technical Consultation on Measuring Nutrition in Population-Based Household Surveys and Associated Facility Assessments--a 2-day working meeting convened by the Bill & Melinda Gates Foundation and United States Agency for International Development in collaboration with the World Health Organization (WHO) and United Nations Children's Fund (UNICEF), and coordinated by DataDENT. The consultation included more than 60 technical experts, survey program representatives from DHS, MICS, LSMS and SMART, country data stakeholders, and donors from the nutrition measurement community.

The recommendation is also supported by a nutrition metrics working group that was previously anchored by the Countdown to 2030 initiative; this working group has co-authored a paper forthcoming in BMJ Global Health on the global gaps in nutrition coverage measurement, especially highlighting the gaps in measurement of infant feeding counseling and support interventions.

This recommendation was authored by a team from IFPRI and reviewed by Laurence Grummer-Strawn (WHO), Chika Hayashi (UNICEF), Chessa Lutter (RTI), and Monica Kothari (PATH).

This recommendation is endorsed by the WHO-UNICEF Technical Expert Advisory Group on Nutrition Monitoring (TEAM). Out of the 10 sets of recommendations endorsed by TEAM, this recommendation was prioritized as Tier 1 of 3 (critical data need).

This recommendation is also endorsed by Countdown to 2030, Alive & Thrive, the nutrition team at the Bill & Melinda Gates Foundation, and the Department of International Health at the Johns Hopkins Bloomberg School of Public Health.

#### File Attachments

1) [4. Early BF counseling\\_25 Feb.docx](#), downloaded 968 times

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [Maaïke Arts](#) on Mon, 11 Mar 2019 17:09:25 GMT  
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UNICEF endorses the addition of these questions.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [dnyeha](#) on Tue, 12 Mar 2019 16:54:08 GMT

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As a nutritionist at Helen Keller International in Tanzania I endorse this recommendation. In Tanzania, like many other countries, DHS is very valuable to provide nationally representative information for nutrition indicators. This information helps us not only to plan relevant interventions but also measure our progress.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [SUN Movement MEAL Team](#) on Thu, 14 Mar 2019 01:42:21 GMT

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The SUN Movement supports the inclusion of these indicators to measure breastfeeding counseling and support coverage at 3 critical time points. As coverage data for this intervention does not yet exist in most national information systems, it is important to contribute to policy and programme decision making in SUN countries where there is a commitment to promote, protect and support breastfeeding, specifically exclusive breastfeeding in the first six months of a child's life.

We recommend focusing on indicator #3 and #5 to provide a better understanding on the "quality" of the service provided.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [Mauro Brero](#) on Thu, 14 Mar 2019 09:10:21 GMT

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UNICEF Tanzania Nutrition team concurs with all indicators. However, we are concerned that there might be recall bias for mothers especially for indicator 4 and 5.

This information will be used for evidence-based planning to strengthen existing maternal and child health nutrition interventions.

UNICEF Tanzania Nutrition team.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [jruelbergeron](#) on Thu, 14 Mar 2019 19:41:10 GMT

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The Global Financing Facility (GFF) Secretariat endorses the recommendations made in this document (DataDENT).

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [kdearden](#) on Fri, 15 Mar 2019 10:11:50 GMT

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IMA World Health also supports these indicators. However, like UNICEF/Tanzania, we worry about recall bias and agree with the recommendation of limiting the response time to include live births occurring in the previous 2 years

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [Paula Kawiche](#) on Fri, 15 Mar 2019 11:04:43 GMT

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I indorse these questions

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [Marie Ruel](#) on Fri, 15 Mar 2019 12:06:37 GMT

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These questions are important to assess program coverage at different points in time during pregnancy and postnatally.  
I fully endorse adding these questions.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [aperry](#) on Fri, 15 Mar 2019 12:58:00 GMT

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This proposal would also enable better understanding of coverage of an important intervention and hence the DFID Nutrition Policy team endorses this.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [Olutayo](#) on Fri, 15 Mar 2019 13:09:48 GMT

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It is very important to know how and where mothers are being reached with breastfeeding messages. Improved exclusive breastfeeding is a WHA nutrition target. To adequately design interventions, we need to know whether challenges to optimal breastfeeding lie in mothers not being reached with the necessary messages or barriers to implementing received messages. Including the proposed indicators will support the necessary knowledge and increase the utility and impact of DHS

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [salayon](#) on Fri, 15 Mar 2019 18:38:52 GMT  
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I fully endorse these recommendations.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [PATH](#) on Fri, 15 Mar 2019 19:14:18 GMT  
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Thanks to DataDENT for compiling these indicators.

If DHS opts to include these indicators please consider the article on barriers to EBF by Kavle et al. 2017. This article address physical breast problems and perceptions of insufficient breastmilk. Suggest that observation include guidance on correct positioning and latch and consider focusing also on provision of specialized counselling in critical care situations, such as high-risk infants (pre-term, LBW, sick) given the traumatic environment mother is in and distinct challenges with lactation as a result.

Ref: Kavle, J. A. et al. (2017) 'Addressing barriers to exclusive breast-feeding in low- and middle-income countries: a systematic review and programmatic implications', Public Health Nutrition. Cambridge University Press, 20(17), pp. 31203134. doi: 10.1017/S1368980017002531.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [1000 Days](#) on Fri, 15 Mar 2019 19:31:06 GMT  
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1,000 Days is the leading non-profit organization working in the U.S. and around the world to improve nutrition and ensure women and children have the healthiest first 1,000 days. We support these recommendations as the data will reinforce our advocacy for better breastfeeding supports for mothers. Understanding whether or not women are receiving counseling during postnatal care will better inform those efforts.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points  
Posted by [Erin Milner](#) on Fri, 15 Mar 2019 21:46:25 GMT  
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USAID supports this recommendation.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points

Posted by [gwg](#) on Sat, 16 Mar 2019 02:46:55 GMT

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I fully support all the 5 indicators recommended by DataDENT. Data on coverage of breastfeeding support interventions would strengthen the existing advocacy on breastfeeding promotion.

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Subject: Re: Counseling About Breastfeeding at Early Critical Time Points

Posted by [Judy Canahuati](#) on Sat, 16 Mar 2019 03:14:54 GMT

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La Leche League International endorses the questions on counseling at critical time points

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