

TOPIC: IN SUPPORT OF IMPLEMENTATION AND EDUCATION REGARDING THE “BABY-FRIENDLY HOSPITAL INITIATIVE”

SUBMITTED BY: Johns Hopkins University School of Nursing, Baltimore, MD

WHEREAS, currently only 172 hospitals and birthing centers in the U.S. hold the “Baby-Friendly Hospital Initiative” [BFHI] designation and in 2007, only 2.9% of U.S. births occurred in BFHI designated facilities. In recent years the rate has increased to 6.9%, but still falls short of the Healthy People 2020 Initiative goal of 8.1%; and

WHEREAS, “some early barriers to breastfeeding are [due] to unavoidable medical complications of the mother or infant, but other common challenges may be ameliorated by changes in hospital policies or via better training of medical, nursing, and other health care staff members in the medical management of breastfeeding”; and

WHEREAS, many infants are immediately taken to the warmer for assessment; babies should instead be placed skin-to-skin barring immediate medical concerns. Early skin-to-skin “helps maintain breastfeeding, reduce crying, increase blood glucose and maintain infant temperature”; and

WHEREAS, administration of the hepatitis B vaccine, Vitamin K and erythromycin eye ointment can be delivered while the newborn is skin-to-skin and/or breastfeeding. Both breastfeeding and skin-to-skin contact have been shown to diminish pain responses in newborns; and

WHEREAS, “mothers and infants who either initially demonstrated a correct technique or who received help to correct poor technique experienced lower rates of low milk production, sore nipples and engorgement, and had increased breastfeeding rates up to 4 months later”; and

WHEREAS, in 2012 the American Academy of Pediatrics reaffirmed its recommendation of “exclusive breastfeeding for the first six months of a baby’s life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age”; and

WHEREAS, breastfeeding has benefits for babies including decreased prevalence of SIDS hospitalizations, infections, gastrointestinal illness, obesity and type II diabetes. Maternal advantages include decreased healing time and lower prevalence of postpartum depression and certain cancers such as breast and ovarian; and

WHEREAS, the *Journal of Pediatrics* estimates that if 90% of U.S. families followed the American Academy of Pediatrics recommendations regarding breastfeeding, the U.S. would save \$13 billion annually in reduced healthcare costs; furthermore, families practicing optimal breastfeeding practices can save between \$1,200-\$1,500 on infant formula in the first year; and

WHEREAS, health benefits of breastfeeding are so significant that stronger support of breastfeeding has become a public health priority. The “BFHI”, which gained the support of UNICEF and WHO, will directly help improve maternal-child outcomes with its nationwide implementation; therefore be it

- RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to contact hospitals in the area that are known to not participate in the BFHI and to promote educational and financial support to further drive implementation of the BFHI; and be it further
- RESOLVED, that the NSNA encourage its constituents to inform their nursing schools of this resolution and of the benefits of BFHI through the presentation of educational materials or evidence-based articles to students and faculty within the curricula; and be it further
- RESOLVED, that the NSNA support the initiative and inform its constituents of its importance through publishing articles in *Imprint* and through developing breakout sessions at the MidYear Conference and Annual Convention, if feasible; and be it further
- RESOLVED, that the NSNA send copies of this resolution to the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the American College of Nurse-Midwives, the American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, the Society of Pediatric Nurses, the American Academy of Family Physicians, the National Organization for Associate Degree Nursing, the American Medical Association, the Centers for Disease Control and Prevention, the National Association of Neonatal Nurses, La Leche League International, the International Lactation Consultant Association, the Association of Women's Health, Obstetric and Neonatal Nurses, the National Black Nurses Association, and any others deemed appropriate by the NSNA Board of Directors.