WBTi UK Working Group
http://www.lcgb.org/wbti/

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Indicator 6: Mother Support and Community Outreach - Community-based support for the pregnant and breastfeeding mother

**Key question:** Are there mother support and community outreach systems in place to protect, promote and support optimal infant and young child feeding (See Annex 6)

**Backgrounds:**
Community-based support for women is essential for succeeding in optimal breastfeeding practices. Step 10 of BFHI as well as the Global Strategy for IYCF, which includes mother support and peer support, recognizes this need. Mother Support, as defined by the Global Initiative for Mother Support (GIMS) is “any support provided to mothers for the purpose of improving breastfeeding practices for both mother and infant & young child”.

Women need the support of evidence-based public health policies, health providers, employers, friends, family, the community, and particularly of other women and mothers in regards to preparation for breastfeeding which can come during the pregnancy and postpartum and after delivery. Reaching community level to give appropriate support, community volunteers or health workers under the health systems can offer and ensure sustained support to mothers. Their knowledge and skills have to be at the highest quality and they must have required training for giving support. It is necessary to have appropriate counseling in the community for motivation and increasing confidence in breastfeeding and home based complementary feeding. The support to mothers can be provided at the door steps by the women’s groups sometimes they are the mother support group (MSG) who are composed of some successful mothers and others of the same community. Mother support group is a core component of empowerment of the women. With correct knowledge at community and outreach level, mothers can help themselves by giving exclusive breastfeeding up to six months and continue for two years or beyond and start home base appropriate complementary food by themselves when services and counselling are available by mother support groups and or health worker serving under the health services. Community centers run by women and children ministry can help in caring babies when mothers are at work.

Other important area is to consider the people living in remote areas where services are difficult to provide and receive.

Support by peers in community and mothers support groups have shown raising Exclusive breastfeeding rates and appropriate Complementary feeding rates even in large scale intervention. The quality of interaction and counseling are critical issues.

Community counselling and services on IYCF are to be focused to new mothers, and various vulnerable
There is also need to provide adequate information to improve maternal nutrition without which IYCF action by mothers may be suboptimal as the mother is incapable to produce good quality milk and prepare and feed CF appropriately.

Mother support is often seen as woman to woman (or more commonly known as mother-to-mother) but generally covers providing accurate and timely information to help a woman to build confidence; providing sound recommendations based on up-to-date research; providing compassionate care before, during and after childbirth; practicing empathy and active listening, providing hands-on assistance and practical guidance. It also includes support and counseling by health professionals and health care workers. Various community outreach services can also support women in optimal IYCF.

The activities in these contexts include woman-to-woman support, individual or group counseling, home visits or other locally relevant support measures and activities that ensure woman have access to adequate, supportive and respectful information, assistance and counseling services on infant and young child feeding. Mother support enhanced by community outreach or community-based support has been found to be useful in all settings to ensure exclusive breastfeeding for the first six months and continued breastfeeding with appropriate and local complementary foods for 2 years or more. There needs to be a review and evaluation of existing community support systems, especially for the provision of counseling in infant and young child feeding. Women who deliver in a hospital need continued support in the home and in the community, with support for all members of the family, including the father and grandmother of the baby.

Possible Sources of Information:

- Discussions can be held with representatives of the Ministry of Health, Nutrition, Ministry of Social Welfare, Ministry of Women’s Affairs or any government organization involved in social welfare, the National Breastfeeding (or Infant and Young Child Feeding) Coordinator, Mother support groups, Breastfeeding groups or representatives from NGOs, such as IBFAN, World Alliance for Breastfeeding Action (WABA) and La Leche League International (LLLI) involved in infant and young child feeding.
- Any government circulars/orders/Child health or nutrition programme document may also be explored.
### Guidelines for scoring

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Scoring</th>
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<tbody>
<tr>
<td>√ Check that apply</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>To some degree</td>
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<tr>
<td>6.1) All pregnant women have access to community-based ante-natal and post-natal support systems with counseling services on infant and young child feeding.</td>
<td>2</td>
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<td>6.2) All women recieve support for infant and young child feeding at birth for breastfeeding initiation.</td>
<td>2</td>
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<td>6.3) All women have access to counseling support for Infant and young child feeding counseling and support services have national coverage.</td>
<td>2</td>
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<tr>
<td>6.4) Community-based counseling through Mother Support Groups (MSG) and support services for the pregnant and breastfeeding woman are integrated into an overall infant and young child health and development policy IYCF/Health/Nutrition Policy.</td>
<td>2</td>
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<tr>
<td>6.5) Community-based volunteers and health workers are trained in counseling skills for infant and young child feeding.</td>
<td>2</td>
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<tr>
<td><strong>Total Score:</strong></td>
<td>--------/10</td>
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**Information Sources Used (please list):**

1. 
2. 
3. 
4. 

**Conclusions** *(Summarize which aspects of a health and nutrition care system are adequate and which need improvement and why. Identify areas needing further analysis):*

**Gaps** *(List gaps identified in the implementation of this indicator):*

1. 
2. 
3. 

Recommendations (List action recommended to bridge the gaps):

1. 
2. 
3. 
4. 
Community outreach and support for infant and young child feeding

**Contact points that can be used for community outreach and support**

- Maternity services
- Health centres
- Growth monitoring and promotion programmes
- Immunization clinics or campaigns
- Mother-support groups
- Women’s groups
- Home visits
- Workplaces
- Community meetings
- Schools
- Agricultural extension programmes
- Credit or microenterprise programmes
- Family planning programmes
- Health fairs.

**Channels that can be used for community outreach and support**

- Health service personnel
- Home-birth attendants
- Traditional healers
- Staff or volunteers from nongovernmental organizations (NGOs)
- Lay or peer counsellors
- Teachers
- Agricultural extension agents
- Family planning staff.

**Some activities for infant and young child feeding community outreach and support**

- Individual counselling
- Group counselling
- Community education
- Demonstration of cooking Complementary foods
- Promotion of production of food that can fill gaps in local diets
- Mother-to-mother support
- Trials of new infant or young child feeding practices
- Baby shows or contests focusing on optimal infant and young child feeding
- Organization of workplace nurseries for breastfeeding infants, breastfeeding rooms or areas
- Social mobilization activities – planned actions that reach, influence and involve all relevant segments of society, such as World Breastfeeding Week activities, World Walk for Breastfeeding.
- Community support strategies should focus on protection, promotion and support of both breastfeeding and complementary feeding.

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1. Adapted from the WHO tool for assessing national practices, policies and programmes on infant and young child feeding