

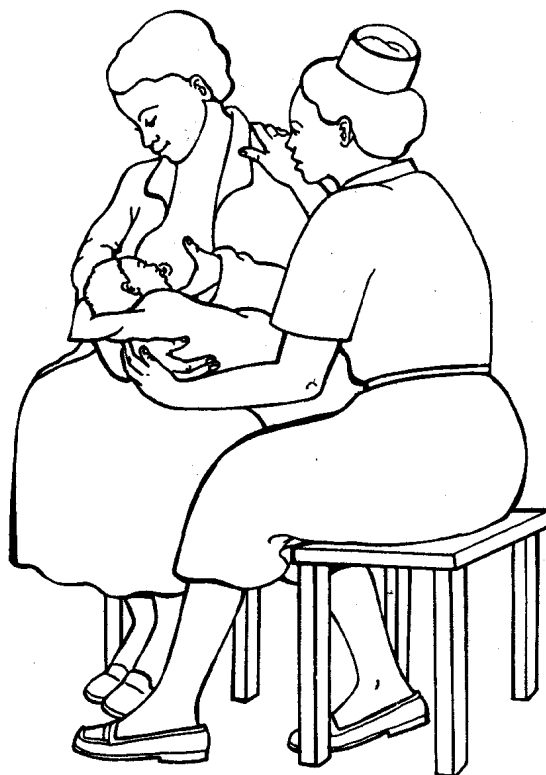
# **Breastfeeding counselling: A training course**

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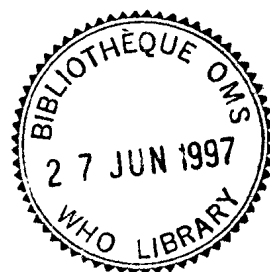
## **Trainer's Guide**



**World Health  
Organization**



United Nations Children's Fund



# ***Breastfeeding counselling: A training course***

## ***Trainer's Guide***

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Total time for sessions 1-30 (+ 2 videos)			33½ + 1 hr

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Session 32	Women and work	(Groups, 60 minutes)	402
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Total time for Sessions 1-33 (+ 2 videos)			36½ + 1 hr

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## INTRODUCTION

### **Why this course is needed**

Breastfeeding is fundamental to the health and development of children, and important for the health of their mothers.

The Programme for the Control of Diarrhoeal Diseases has long recognized the need for the promotion of exclusive breastfeeding in the first 4-6 months of life, and sustained breastfeeding together with adequate complementary foods up to 2 years of age or beyond, to reduce diarrhoeal morbidity and mortality.

Workers concerned with nutrition, and with maternal and child health, also recognize the importance of improved infant feeding practices. In 1991, UNICEF and WHO jointly launched the Baby Friendly Hospital Initiative, which aims to improve maternity services so that they protect, promote, and support breastfeeding, by putting into practice the "10 steps to successful breastfeeding". Many maternity facilities throughout the world are now striving to achieve "Baby Friendly" status.

The International Code of Marketing of Breastmilk Substitutes has been in place for more than a decade, and much effort to protect breastfeeding from commercial influences has followed. One requirement for being "Baby Friendly" is that a facility shall not accept or distribute free samples of infant formula.

However, even mothers who initiate breastfeeding satisfactorily, often start complementary feeds or stop breastfeeding within a few weeks of delivery. All health workers who care for women and children after the perinatal period have a key role to play in sustaining breastfeeding. Many health workers cannot fulfil this role effectively because they have not been trained to do so. Little time is assigned to breastfeeding counselling and support skills in the preservice curricula of either doctors, nurses or midwives.

Hence there is an urgent need to train all health workers who care for mothers and young children, in all countries, in the skills needed to both support and protect breastfeeding. The purpose of "Breastfeeding counselling: A training course" is to help to fill this gap. The materials are designed to make it possible for trainers with limited experience of teaching the subject to conduct up-to-date and effective courses.

The concept of 'counselling' is new, and the word can be difficult to translate. Some languages use the same word as 'advising'. However, counselling means more than simple advising. Often, when you advise people, you tell them what you think they should do. When you counsel a mother, you help her to decide what is best for her, and you help her to develop confidence. You listen to her, and to try to understand how she feels. This course aims to give health workers listening and confidence building skills, so that they can help mothers more effectively.

## THE COURSE AND THE MATERIALS

### Structure of the course

The course takes a total of 40 hours, which can be conducted consecutively in a working week, or which can be spread out in other ways. The course is divided into 33 Sessions of between 30 and 120 minutes each, using a variety of teaching methods, including lectures, demonstrations, clinical practice, and work in smaller groups with discussion, reading, role-play, and exercises. The shorter sessions are arranged around four 2-hour clinical practice sessions. Participants progressively develop their support and counselling skills in the classroom, and then practise them with mothers and babies in wards or clinics.

### Different kinds of session

#### *Lectures and demonstrations*

Seven sessions are lecture presentations, with slides or overhead transparencies, and four are demonstrations. Each of these should be conducted by one of the trainers, for the whole class together. The Course Director will assign the lectures and demonstrations to different trainers.

#### *Group work*

The main part of each clinical practice session, the sessions for practising history taking and counselling skills, and parts of three other sessions are conducted in small groups of 4-5 participants with one trainer. Each trainer is assigned to a group of 4-5 participants. The trainer has special responsibility for the participants in her group, and should follow their progress, and help them with difficulties.

Fourteen sessions are conducted in groups of 8-10 participants, each with two trainers. To make up the large groups, two of the smaller groups are combined. These sessions consist of a mixture of discussion, reading, demonstration, role-play, and exercises.

#### *Clinical practice*

There are four 2-hour clinical practice sessions. The whole class meets together for the first 20 minutes to prepare, and if possible for the last 20 minutes to discuss the session. For the clinical practice itself, participants work in their groups of 4-5 each with one trainer.

#### *Class discussion*

The session on the local breastfeeding situation is led by one trainer with the whole class together.

## Forming groups

As soon as possible after the introductory session, the Course Director with the help of one or two of the trainers decides how the groups will be composed.

If language and gender may be a problem, each group should have at least one person who can speak the local language, and at least one woman. It may be appropriate to balance professional groupings. Sometimes it is a good idea to make a participant who knows the others in the class responsible for arranging the groups according to these considerations. The names of the trainer and participants in each group are written on a flipchart or board, and posted up where participants can check which group they belong to.

## Order of sessions

The sessions are in a suggested sequence, but the order almost always needs to be adapted, for example, if mothers and babies are not available for clinical practice at the suggested times.

Most sessions can be moved, but it is necessary for some aspects of the sequence to be maintained. The main requirement is that you conduct the sessions which prepare participants for a particular clinical practice before that practice, (as indicated by the similar titles of class and clinical practice sessions). It is also important that Sessions 1-7 are completed before Clinical Practice 1, and that Session 10 'Positioning a baby at the breast' is held between Clinical Practice 1 and Clinical Practice 2.

Parts of some sessions are optional. The Course Director will decide whether or not to include these parts. Sessions 31, 32, and 33 are Additional Sessions. They are not part of the skills development sequence, so they can be arranged more flexibly, or fitted in at other times such as during the evening. These are key topics however, and it is strongly recommended that they are included in the course at some point.

## The Trainer's Guide

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_30726](https://www.yunbaogao.cn/report/index/report?reportId=5_30726)

