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Background

Optimal care during the first 6 months of life is critical for child development. During this period, breastmilk provides all of the nutrients infants need to grow, and reduces the risk of infection and malnutrition. However, in instances when mothers are not able to provide their babies with their own breastmilk, the World Health Organization (WHO) recommends providing donor human milk. Human milk banks provide safe, high-quality donor milk to infants who need it most. Milk is donated by volunteer lactating mothers who have passed a thorough health screening. After donation, milk is processed, stored, and distributed following strict procedures to provide safe, high-quality donor milk and meet the needs of newborns at risk of malnutrition or infection.

In February 2017, the first human milk bank in Viet Nam opened in the Da Nang Hospital for Women and Children (DNHWC). The Ministry of Health and Alive & Thrive selected to establish these services at the DNHWC because of the hospital's existing emphasis on breastfeeding. DNHWC is a designated "Center of Excellence" for early essential newborn care (EENC) by the Ministry of Health and WHO. This means that the hospital promotes skin-to-skin contact for babies, and

ensures that mothers can begin early initiation of breastfeeding in line with national guidelines regardless of whether they delivered vaginally or via cesarean section. The hospital conducts breastfeeding promotion throughout the facility and strictly enforces Decree 100 to keep advertising of breastmilk substitutes out of the hospital.

In addition to an environment supportive of breastfeeding, the hospital receives a high number of babies born premature or low-birth weight that require special care in the neonatal unit (roughly 3,000–4,000 annually, including babies delivered in the hospital and those transferred after birth from nearby hospitals). Hospital officials estimate that roughly 30% of these babies (900–1,200) do not have access to their own mother's milk in the few days after birth and would benefit immensely from access to donor human milk. The catchment area for DNHWC receives standardized breastfeeding and infant and young child feeding counseling through the Little Sun Clinics.

Criteria

As Viet Nam's first human milk bank continues to provide life-saving treatment for at-risk babies, interest is growing

for additional human milk banks to open across the country. Alive & Thrive considers providing technical assistance for new human milk banks to hospitals that meet the following criteria:

1. The hospital must be designated as “Center of Excellence for EENC” by the Ministry of Health and WHO, including having an adequate number of beds to facilitate skin-to-skin contact. This helps ensure that optimal practices already exist and can be leveraged.
2. Early initiation of breastfeeding rates must be sustained above 75% for both vaginal and C-section deliveries.
3. Breastfeeding promotion must occur consistently throughout the hospital and catchment area based on the based on the Ten Steps to Successful Breastfeeding.
4. The hospital must care for at least 2,000 at-risk infants per year in its neonatal intensive care unit.
5. The hospital must illustrate an investment of appropriate resources to be used for the human milk bank, including facility, personnel, and budget.
6. The hospital must meet at least 80% of the standards in the Ministry of Health Decision 6858/QĐ-BYT on Viet Nam Hospital Quality Criteria.

Rationale

For a human milk bank to be successful, it must be part of a larger ecosystem and strategy where breastfeeding is fully supported and promoted within the hospital and after discharge. Criteria 1–3 above are focused on these efforts. Human milk banks also require significant financial commitments for both start-up and ongoing costs. To make the investment cost-effective, any hospital considering establishing a human milk bank should serve many at-risk infants who would benefit from donor human milk. Criteria 4 addresses this.



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For hospitals that meet these criteria, Alive & Thrive will consider providing technical assistance and facilitating knowledge exchange. However, most expenses must be covered by the hospital or local Department of Health, including the cost of human resources to operate the human milk bank and any facility upgrades required. Ongoing operations must also be incorporated into the local budget. Alive & Thrive can provide guidance on what level of investment is required. Criteria 5 ensures that these financial obligations are met.

Good hygiene practices are vital to the safety of donor human milk for at-risk infants. Hygiene standards must be in place for all steps of the process — from donor expression, to processing, microbiological testing, and beneficiary feeding. Before establishing a human milk bank, a hospital must maintain hygiene standards in all areas of the hospital including patient wards, microbiological labs, and the neonatal intensive care unit. The hospital must also receive a good overall rating under the Viet Nam National Hospital Quality Standards and Accreditation System. Criteria 6 addresses this. By following this framework, hospitals can be better prepared to establish human milk banks that provide needed nutrition for at-risk infants.



www.aliveandthrive.org

Alive & Thrive is an initiative to save lives, prevent illness, and ensure healthy growth and development through improved breastfeeding and complementary feeding practices. Alive & Thrive is funded by the Bill & Melinda Gates Foundation and the governments of Canada and Ireland. The initiative is managed by FHI 360. The Southeast Asia advocacy activities are funded by Irish Aid.

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