



Center of Excellence for Breastfeeding
Initiative in Viet Nam

FREQUENTLY ASKED QUESTIONS





Deputy Minister of Health, Director of the Quang Ninh provincial Department of Health and Alive & Thrive awarded the Center of Excellence for Breastfeeding designation for Quang Ninh Obstetrics and Pediatrics Hospital.
Photo: Minh Quyet | Alive & Thrive

TABLE OF CONTENTS

01	About Centers of Excellence for Breastfeeding	4
02	Legal Framework & Methodology	8
03	Results, Documentation, & Replication	13



About Centers of Excellence for Breastfeeding

*Mother and baby are in practice skin-to-skin-contact in the postpartum room at Can Tho Obstetrics and Gynecology Hospital.
Photo: Tinh Ho | Alive & Thrive.*

1. What are Centers of Excellence for Breastfeeding?

Centers of Excellence for Breastfeeding are hospitals that:



Support mothers to maintain uninterrupted skin-to-skin contact with infants for at least 90 minutes to ensure the successful early initiation of breastfeeding.



Facilitate exclusive breastfeeding during hospital stays regardless of whether they give birth vaginally or via caesarian.



Do not promote breastmilk substitutes, feeding bottles and teats.

The Center of Excellence for Breastfeeding designation is a signifier of outstanding care for mothers as they decide where to give birth.

For more information about Centers of Excellence for Breastfeeding, visit the [Alive & Thrive website](#).



Photo: Tram Nguyen | Alive & Thrive

2. What are the benefits for hospitals who join the Center of Excellence for Breastfeeding Initiative?

By participating in the Center of Excellence for Breastfeeding Initiative, hospitals will receive:

- Quarterly feedback from mothers and families on service quality to facilitate performance improvement.
- Technical assistance to improve breastfeeding support practices.
- A recognizable signboard with a logo for public display. The accreditation is also published in the media and on breastfeeding community social media platforms.
- Opportunities to present policy issues to the Ministry of Health.



*Center of Excellence for Breastfeeding signboard is placed at the gate of Dong Giang District Hospital.
Photo: Tinh Ho | Alive & Thrive.*

3. How many hospitals have signed up for the Center of Excellence for Breastfeeding Initiative?

From January 2019 to September 2020, 29 hospitals signed up as early starters for the Center of Excellence Initiative in Viet Nam. [The Center of Excellence for Breastfeeding Map](#) shows a comprehensive list of hospitals participating in the Center of Excellence for Breastfeeding Initiative and where they are located. After joining the initiative, the hospitals must improve their breastfeeding counseling and support services to be designated as a Center of Excellence; more details on designation are found in Question 10.



*29 obstetrics and pediatrics hospitals at the National Implementation Workshop on Center of Excellence for Breastfeeding Initiative.
Photo: Thanh Nguyen | Alive & Thrive.*

4. How many Centers of Excellence for Breastfeeding have been designated so far?

The list of Centers of Excellence for Breastfeeding in Viet Nam is frequently updated on the website of the Maternal and Child Health Department, Ministry of Health and can be found [here](#).

The first ten Centers of Excellence for Breastfeeding in Viet Nam:

1. [Can Tho Obstetrics and Pediatrics Hospital, Can Tho City](#)
2. [Tran Van Thoi General District Hospital, Ca Mau Province](#)
3. [Quang Nam General Provincial Hospital, Quang Nam Province](#)
4. [Da Nang Hospital for Women and Children, Da Nang City](#)
5. [Dong Giang District Hospital, Quang Nam Province](#)
6. [Phuong Chau International Hospital, Can Tho City](#)
7. Cam Le District Medical Center, Da Nang City
8. Phu Vang District Hospital, Thua Thien Hue Province
9. Quang Nam Regional General Hospital
10. [Quang Ninh Hospital for Women and Children, Quang Ninh Province](#)



5. Is the implementation model only applicable to public or maternity hospitals?

The model is applicable to hospitals with maternal services at all levels (central, provincial and district), including public and private ones. One-fourth are

teaching hospitals that provide medical education and training to health professionals.



Photo: Hang Pham | Alive & Thrive

6. How is the Center of Excellence for Breastfeeding Initiative related to the Baby-Friendly Hospital Initiative?

In 2018, the WHO and UNICEF updated both [guidelines](#) and [guidance](#) on the Baby-Friendly Hospital Initiative (BFHI). They recommend that countries integrate BFHI into health care systems to support breastfeeding. However, no updated set of global tools to monitor, assess, or implement the BFHI goals exists, leaving it up to countries to develop approaches for implementation that fit their own health systems. The Center of Excellence for Breastfeeding model was developed in response to this need, aiming to revise the national BFHI implementation strategy and increase the global rate of births in BFHI facilities, which was only about 10% in [2017](#). This innovative model supports implementation of the [Ten Steps to Successful](#)

[Breastfeeding](#), providing a full package of tools for assessment, monitoring, and communication. In Viet Nam, the model builds upon the foundation established by the national hospital quality [standard](#) for maternal and newborn care. The Center of Excellence for Breastfeeding Initiative uses performance-based and output-based measures to achieve comprehensive breastfeeding counseling, prolonged skin-to-skin contact, early initiation of breastfeeding, rooming-in, and adherence to national legislation for the implementation of the International Code of Marketing of Breastmilk Substitutes.



Legal Framework & Methodology

Exclusive breastfeeding during a hospital stay in Phu Vang District Hospital.

Photo: Trinh Nguyen | Alive & Thrive.

7. What is the legal framework for Centers of Excellence for Breastfeeding?

The Center of Excellence for Breastfeeding Initiative is designed and implemented based on each country's unique legal framework.

In Viet Nam, the following regulations support the Center of Excellence for Breastfeeding Initiative:

- [Ministry of Health's Decision No. 3451 \(2019\)](#) approves the mechanism and criteria to designate a Center of Excellence for Breastfeeding.
- [Ministry of Health's Circular No. 38 \(2016\)](#) promotes breastfeeding in health facilities and designates baby-friendly hospitals.
- [Ministry of Health's Decision No. 6858 \(2016\)](#) issues the National Hospital Standards and Accreditation and institutionalizes the WHO's Ten Steps to Successful Breastfeeding in Criteria 1.3.
- Ministry of Health's Decision No. 4637 (2014) and 6734 (2016) approves the guidelines for maternal and newborn care practices, during and after birth, for both vaginal and cesarean child births.
- [Government Decree No. 100 \(2014\)](#) regulates the trade and use of breastmilk substitutes, feeding bottles, and pacifiers for young children.



Photo: Hang Pham | Alive & Thrive

8. What tools are used to implement, assess, and monitor Centers of Excellence for Breastfeeding?

- An assessment tool composed of eight checklists adapted from [WHO](#) and the Viet Nam [Ministry of Health](#) is used to evaluate health service provider performance on early essential newborn care as well as breastfeeding counseling and support services. External assessments and internal monitoring mechanisms are incorporated into the routine work of the Ministry of Health, provincial Departments of Health, and the hospitals' Quality Management Unit.
- A real-time phone survey is administered to mothers after discharge to receive their feedback on the care and breastfeeding services they received.
- A routine hospital monitoring system keeps track of the hospital's performance over time.
- Relevant agencies, including the Ministry of Health, provincial Departments of Health, provincial Centers of Disease Control, and hospitals designated as Centers of Excellence, coordinate to strategically use data for performance improvement and maintenance.
- A network of Centers of Excellence, linked with provincial Departments of Health, enables high-performing facilities to provide technical assistance to other hospitals, including capacity-building, coaching, assessment, and policy support.
- [Branding guidelines](#) and a communication package including a Center of Excellence logo create brand recognition and awareness.
- A strategy for demand generation, whereby Centers of Excellence designation announcements are published on the Ministry of Health website and diffused through social media, fosters motivation and cultivates pride among healthcare providers as well as influences families' decisions about where to give birth, ultimately increasing utilization of these facilities.



*A pregnant woman is counseled about the importance of breastfeeding.
Photo: Giacomo Pirozzi | Alive & Thrive.*

9. Who designates hospitals as Centers of Excellence for Breastfeeding?

Central hospitals are accredited by the Ministry of Health, and provincial and district hospitals are accredited by provincial Departments of Health. Private hospitals will be recognized by the Ministry of Health or the provincial Departments of Health depending on their respective management level.

Multiple groups are involved in comprehensively evaluating a hospital's candidacy, including independent assessors and women who recently gave birth at the facility.



Center of Excellence for Breastfeeding assessment in Phong Dien District Hospital by Thua Thien Hue provincial Department of Health.

Photo: Trinh Nguyen | Alive & Thrive



Ministry of Health staff conducts the post-discharge mother survey on breastfeeding and EENC practices in central hospitals.

Photo: Alive & Thrive

10. What are the criteria to designate a Center of Excellence for Breastfeeding?

In Viet Nam, the Ministry of Health and relevant provincial Departments of Health, with support from Alive & Thrive and the Da Nang Learning & Research Center for Newborn Care and Human Milk, conduct an external hospital assessment to ensure that potential Centers of Excellence meet the following criteria:

- **Criterion 1.** Achieve [Grade 4¹ or higher of Criterion E1.3 on breastfeeding](#), as stipulated in the National Hospital Standards and Accreditation, cited in Decision No. 6858/QĐ-BYT, dated November 18, 2016. The grade is based on the results of hospital self-assessments and annual reviews by both the Ministry of Health and Departments of Health.
- **Criterion 2.** Pass the [eight checklists for breastfeeding support and early essential newborn care](#) in the annual assessment. These checklists are in accordance with WHO procedures and are included in [Decision No.3451/QĐ-BYT](#) on the Centers of Excellence for Breastfeeding criteria and designation mechanism, issued by Viet Nam's Ministry of Health on August 6, 2019.
- **Criterion 3.** Receive positive feedback from quarterly post-discharge surveys among mothers regarding their experience with breastfeeding and newborn care conducted by an independent, objective call center. The survey protocol and questionnaire can be found [here](#).

¹ Five rating levels include: 1 – Very bad, 2 – Bad, 3 – Fair, 4 – Good, 5 – Very good

11. Which policies and practices are required to optimize and maintain the rate of early initiation of breastfeeding in hospitals?

Centers of Excellence for Breastfeeding focus on improving their protocols and practices around childbirth to facilitate early initiation of breastfeeding. The following practices **are required**:

- **Consistent implementation of early essential newborn care in caesarian and vaginal childbirth:** 90 minutes of uninterrupted skin-to-skin contact (instead of 60 minutes) limits exposure to cold, infection risk, and harmful practices such as suction.² Data has shown that rates of exclusive breastfeeding increase with duration of skin-to-skin contact.³ Average timing of the first breastfeed is around 55 minutes with some babies being longer.⁴ The uninterrupted skin-to-skin contact means that routine care such as vitamin K shots, eye prophylaxis, immunizations, examinations and weighing should be postponed until after the first breastfeeding.

- **Breastfeeding counseling and support:** Mothers who choose to give birth at Centers of Excellence for Breastfeeding will receive counseling on the benefits of breastfeeding and the risks of breastmilk substitutes, feeding bottles and teats as well as the practical support they need to successfully initiate and maintain exclusive breastfeeding.
- **No promotion of breastmilk substitute products:** Centers of Excellence for Breastfeeding must strictly comply with Decree No. 100/ 2014/ ND-CP, which regulates the trade and use of nutritional products for infant and young children, feeding bottles, and pacifiers.



Early initiation of breastfeeding after birth.
Photo: Tinh Ho | Alive & Thrive.

² Moore, E. R., N. Bergman, G. C. Anderson and N. Medley (2016). Early skin-to-skin contact for mothers and their healthy newborn infants. *Cochrane Database of Systematic Reviews* 2016 (11).

³ Li Z, Mannava P, Murray JCS Western Pacific Region Early Essential Newborn Care Working Group, et al. Association between early essential newborn care and breastfeeding outcomes in eight countries in Asia and the Pacific: a cross-sectional observational -study, *BMJ Global Health* 2020;5:e002581

⁴ A-M Widström, Newborn behaviour to locate the breast when skin-to-skin: a possible method for enabling early self-regulation, 10.1111/j.1651-2227.2010.01983.x

12. Which policies and practices are recommended to optimize and maintain the rate of early initiation of breastfeeding in hospitals?

The following practices around childbirth **are recommended** for Centers of Excellence to facilitate early initiation of breastfeeding:

- **Companion of choice at birth:** Offering a labor room companion is a cost-effective method that provides numerous benefits, including shortening the duration of labor, reducing the need for medical interventions such as caesarean sections and pain medication, and improving women's overall satisfaction with their care.⁵ With reduced stress and pain, the body more easily releases oxytocin, enabling the early initiation of breastfeeding. The support person, who can be a family member, friend, or hospital staff, needs to remain continuously with the woman through labor and birth. Currently, five hospitals among the 28 hospitals participating in the Center of Excellence for Breastfeeding Initiative allow a companion of choice.
- **Reduced routine episiotomy:** The routine or liberal use of episiotomies is not recommended for women undergoing spontaneous vaginal birth;⁶ reducing the practice avoids unnecessary pain for birthing mothers and allows for a more positive birthing experience.
- **Reduced unnecessary caesarian childbirth:** Unnecessary caesarian sections risk the lives and well-being of women and their babies. Reducing unnecessary caesarean sections will also contribute to a positive birthing experience and reduce pain for many women.⁷



*Friendly childbirth room allows a companion of choice at birth in Quang Ninh Obstetrics and Pediatrics Hospital.
Photo: Van Quyet | Alive & Thrive*

⁵ [WHO recommendation of companionship during labor and childbirth, 2018](#)

⁶ [WHO recommendation on episiotomy policy, 17 February 2018](#)

⁷ [New WHO guidance on non-clinical interventions specifically designed to reduce unnecessary caesarean sections](#)



*Kangaroo Mother Care for pre-term and low-birth-weight infants at Da Nang Hospital for Women and Children.
Photo: Giacomo Pirozzi | Alive & Thrive.*

13. What are the early results of the Centers of Excellence for Breastfeeding Initiative?

In the phone survey with mothers within 12 weeks after birth, data shows considerable improvement in the practice of early essential newborn care and breastfeeding counseling and support services at health facilities.

After one year of implementation, the following improvements were seen among the 28 participating hospitals:

- The rate of prolonged and uninterrupted skin-to-skin contact increased from 32% to 74%.
- The rate of early initiation of breastfeeding increased from 75% to 87%.
- The rate of exclusive breastfeeding during hospital stay increased from 60% to 75%.
- The proportion of mothers receiving breastfeeding counseling and support increased from 87% to 95%.
- The proportion of mothers reporting that they were counseled by health staff to use breastmilk substitutes, in violation of Government Decree No. 100, decreased from 12% to 3%.
- Reported violations of the national breastmilk substitutes marketing code in hospitals decreased from 7% to 3%, Update results from the mother survey can be found [here](#).

The Centers of Excellence for Breastfeeding Initiative has potential for nationwide scale up in Viet Nam and replication in other countries:

- In August 2019, the Ministry of Health in Viet Nam issued Decision No. 3451, which approves the criteria and mechanisms to designate Centers of Excellence for Breastfeeding, providing a legal basis to replicate the initiative across the country.
- Alive & Thrive was asked by the Ministry of Health in Viet Nam to provide technical assistance to scale up the mothers' feedback survey on early essential newborn care, breastfeeding counseling, and breastfeeding support nationwide.
- The Center of Excellence for Breastfeeding Initiative is being shared with other countries in Southeast Asia and other regions to promote adoption and replication.



14. How will the Center of Excellence for Breastfeeding Initiative be evaluated and documented?

Implementation and progress of the Center of Excellence for Breastfeeding Initiative is well documented through:

- The Centers of Excellence for Breastfeeding [Brief](#) and [Map](#).
- [Introductory video](#) about the Center of Excellence for Breastfeeding Initiative.
- [Documentary videos](#) on the first six Centers of Excellence for Breastfeeding in Viet Nam.
- A [brochure](#) introducing Da Nang Learning & Research Center on Human Milk and Newborn Care.
- [Job aids and materials](#) related to prolonged and uninterrupted skin-to-skin contact, birth companion of choice, early initiation of breastfeeding, and breastfeeding counseling and support.
- An external project evaluation by international experts in 2020. The assessment includes hospitals that have been designated as Centers of Excellence for Breastfeeding and those that have not, and engages representatives from the Ministry of Health, provincial Departments of Health, Centers of Disease Control, and the Da Nang Learning & Research Center on Human Milk and Newborn Care. The assessment measures actual results against targets and increases our understanding of enablers and barriers, added value, sustainability, and the possibility for replication of the Center of Excellence for Breastfeeding Initiative in Viet Nam and beyond.



Photo: Tinh Ho | Alive & Thrive

15. What are the plans for replication of the model beyond Viet Nam?

The Centers of Excellence for Breastfeeding approaches and methodologies are in the process of being replicated in several countries in Southeast Asia, including Myanmar, Cambodia, and Laos and in West Africa. Maternity hospitals signing up for the initiative are upgrading their practices of early essential newborn care, breastfeeding counseling

and support. Key to the model's replication is the engagement of relevant government authorities, active participation of the hospitals, and partnership with other development agencies such as WHO and UNICEF.

For more information, kindly contact with:

Ms. Vu Hoang Duong

Technical Specialist, Southeast Asia, Alive & Thrive

Email: VDuong@fhi360.org



Photo: Tinh Ho | Alive & Thrive

Alive & Thrive (A&T) is a global nutrition initiative to save lives, prevent illness, and ensure healthy growth of mothers and children. From 2009–2014, A&T demonstrated that rapid improvements in infant and young child feeding (IYCF) are possible in settings as diverse as Ethiopia, Bangladesh, and Viet Nam. In 2014, A&T began working in Burkina Faso, India, Nigeria, and throughout the Southeast Asia region, expanding its scope to include maternal and adolescent nutrition, and using agriculture and social protection programs as delivery mechanisms for maternal, infant, and young child nutrition (MIYCN).

Currently, A&T is leveraging its robust network and knowledge base to strengthen systems and build capacity in these and other countries across Africa and Asia, and disseminate innovations, tools, and lessons worldwide. The A&T initiative, managed by FHI Solutions, is currently funded by the Bill & Melinda Gates Foundation, Irish Aid, the Tanoto Foundation, UNICEF, and the World Bank. Center of Excellence for Breastfeeding Initiative in Viet Nam, Cambodia, Laos and Myanmar is supported by Irish Aid.