



SUPPORTING SMALL AND SICK NEWBORNS

Progress towards Centers of Excellence for Breastfeeding in Myanmar

As a result of the illegal coup d'état by the Myanmar military on February 1st, 2021, the country is now facing a [humanitarian crisis](#), exacerbated by the COVID-19 pandemic and characterized by significantly increased food and fuel [prices](#), drastically reduced access to basic [health services](#), a nationwide cash [shortage](#), and a substantial increase in armed conflict and internal [displacement](#). An estimated 200,000 civil servants have gone on strike as a part of the Civil Disobedience Movement, among whom 17,000 are healthcare [workers](#). Local reports indicate that an

estimated 300 out of 1,200 hospitals in the country are completely closed due to the healthcare worker strike and occupation of hospitals by the military. This brief shares progress made toward improving breastfeeding and early essential newborn care (EENC) services in Myanmar's leading hospitals prior to the coup and proposes a way forward for ensuring that caregivers can continue to access essential maternal, infant, and young child nutrition (MIYCN) information and services, both online and in person, during the current crisis and beyond.

BACKGROUND

Despite improvements to the health system in recent years, access to quality maternal, newborn, and child health services in Myanmar remains inadequate. Even before the current crisis, Myanmar had one of the lowest rates of institutional birth in Southeast Asia, with only one in three women giving birth in a health facility. The country's neonatal mortality rate is also one of the highest in the region at 25 per 1,000 live births, representing about half of all deaths among children under five.¹ The majority of newborn deaths are from preventable causes

such as prematurity, birth asphyxia, neonatal jaundice, and sepsis.² Myanmar's legitimate government, which was in place up to February 1st, 2021, recognized the need to accelerate reductions in neonatal mortality to achieve the targets set under Sustainable Development Goal 3 and committed to increasing the coverage and quality of EENC services and breastfeeding counselling and support. This Government also aimed to improve access to specialized services for vulnerable newborns including kangaroo mother care (KMC)

and provision of donor human milk, under the Maternal, Infant and Child Nutrition Implementation Plan: 2021-2025.

In 2014, Alive & Thrive (A&T) began providing an evidence-based package of technical assistance in Myanmar through strategic partnerships with the Ministry of Health and Sports (MOHS), UNICEF, and other development partners. By 2017, A&T was

laying the foundation for Centers of Excellence for Breastfeeding (COE) in Myanmar. This came after a series of policy wins in the three years prior, including the passing of national legislation on the Code, expansion of maternity protection entitlements in the public and private sector, and endorsement of multi-sectoral plans and strategies that prioritize MIYCN services.

A&T's approach in Myanmar focuses on the most at-risk infants (preterm, low birth weight, and sick newborns) and reflects the country's unique context, specifically:

- ✓ A low level of institutional births means that births in health facilities tend to be higher risk; uncomplicated births are more likely to take place at home

- ✓ The neonatal mortality rate is high; babies born in Myanmar are more than twice as likely to die in the first 28 days than in Viet Nam

- ✓ EENC practices, including skin-to-skin contact, early and exclusive breastfeeding, are not routinely monitored in hospitals in Myanmar through the national health management information system; routine monitoring requires development and testing of new systems



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COMPREHENSIVE GROUNDWORK FOR ESTABLISHING CENTERS OF EXCELLENCE FOR BREASTFEEDING

Despite the challenges faced before the coup, Myanmar demonstrated high-level political will to expand and improve services for the most vulnerable newborns. The country is home to one of the region's longest-running human milk banks (HMBs), at Central Women's Hospital Yangon, which was established in 1994. In 2018, the government showed its commitment to the scale-up of HMB

services through the procurement of six human milk pasteurizers. Leveraging this opportunity, and using its [hallmark multi-component and multi-stakeholder approach](#), A&T identified and supported local champions to improve the quality and coverage of HMB, EENC, and KMC services at Myanmar's largest maternity and children's hospitals, setting a strong foundation for COEs in Myanmar.

MILESTONE ACHIEVEMENTS

2017 –
Early 2018

Preparatory activities:

- Stakeholder and situation analyses
- Scoping visits
- Development of strategic partnerships with MOHS, UNICEF, and hospital leaders

September
2018

Da Nang Hospital for Women & Children (DNHWC) and A&T invited to present at a symposium on human milk banking organized by the Myanmar Medical Association
Vietnam team conducts an introductory visit to Central Women's Hospital Yangon

November
2018

National HMB advocacy meeting engages high-level support for HMB services from MOHS

December
2018

Knowledge exchange: Leaders of Myanmar's largest maternity hospitals visit HMB at DNHWC

January –
March 2019

Facility readiness assessments conducted at Apex maternity hospitals in Yangon, Mandalay, and Taunggyi

March –
May 2019

Capacity building for breastfeeding counselling and services for nurses and nurse aids at Central Women's Hospital
Donor human milk collection practices improved and standardized in line with international best practices

June 2019

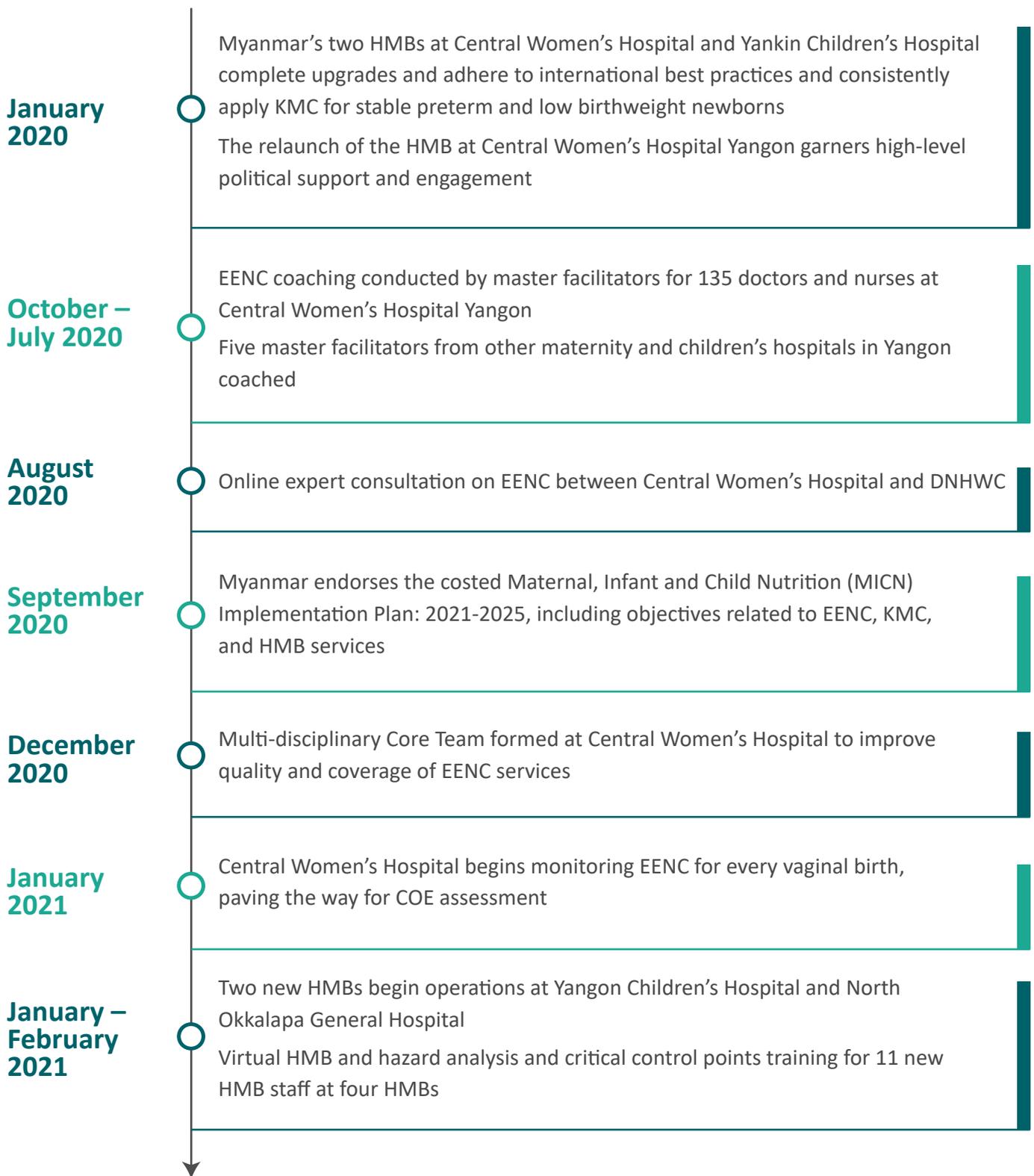
National guidelines and Standard Operating Procedures on human milk banking in Myanmar finalized, including COE criteria and pre-requisites for health facilities wishing to establish an HMB – a significant achievement given the lack of WHO global guidance

July –
August 2019

HMB staff from two existing HMBs trained on new national guidelines and Standard Operating Procedures and hazard analysis and critical control points

September
2019

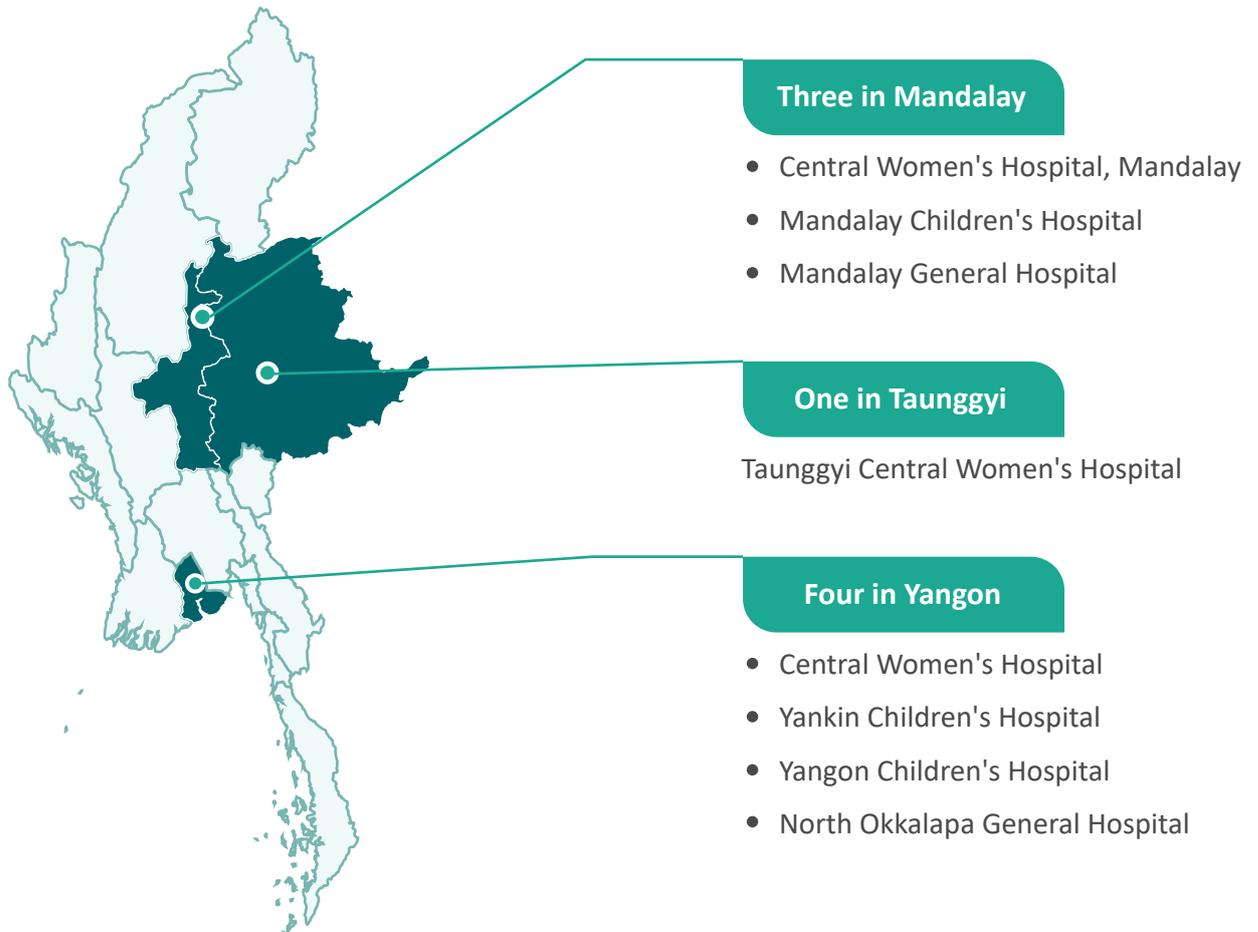
Central Women's Hospital Yangon adopts quality improvement approach to EENC, conducts coaching for master facilitators



WHAT MAKES A HOSPITAL ELIGIBLE FOR THE COE DESIGNATION IN MYANMAR?

- ✓ Consistent application of EENC practices for all vaginal births, including prolonged skin-to-skin contact (90 minutes or more)
- ✓ Consistent application of KMC for stable preterm, low birthweight, or sick newborns
- ✓ Provision of donor human milk for babies that cannot access their mother's own breastmilk
- ✓ Breastfeeding counseling and support for all mother-baby dyads
- ✓ Establishment of a multi-disciplinary Core Team to monitor EENC quality and coverage
- ✓ No promotion of breastmilk substitutes, feeding bottles, and teats

Hospitals committed to become COEs for at-risk newborns



Policy Framework for COE in Myanmar

- [National Guidelines for the Establishment and Operation of Human Milk Banks in Myanmar \(2019\)](#)
- [Standard Operating Procedures for Human Milk Banking in Myanmar \(2019\)](#)
- [Maternal Infant and Child Nutrition \(MICN\) Implementation Plan \(2021-2025\)](#)
- Basic Emergency Obstetrics and Newborn Care Guidelines Myanmar
- Comprehensive Emergency Obstetrics and Newborn Care Guidelines Myanmar
- Baby Friendly Hospital Initiative Guidelines (2015)
- [Becoming Breastfeeding Friendly Initiative \(2018\) Assessment Recommendations](#)

QUALITY IMPROVEMENT APPROACH

Prior to the current emergency, health facilities were using a quality improvement approach to ensure that hospital leaders and staff were empowered and supported to collect and use data to make improvements to breastfeeding and newborn care services. Quality and coverage were routinely measured using:

- 1 Monitoring checklists for HMBs that guide HMB operations and ensure provision of safe donor human milk
- 2 Labor room logbook reviewed by Core Team each month to measure EENC coverage
- 3 ENC checklist 3a for breathing baby and 3b for non-breathing baby: used by Core Team for observations of 15 vaginal births each quarter to ensure EENC service quality

Combined, these efforts ensured that each year...

1,200

babies benefited from donor human milk at Myanmar largest HMB at Central Women's Hospital

100%

of babies born vaginally were immediately placed in skin-to-skin contact with their mothers and 60% received counseling on feeding cues, according to spot checks by the EENC Core Team (January 2021)

4,300

mothers donated life-saving breastmilk

1M+ ml

of pasteurized donor human milk was provided to at-risk newborns

WAY FORWARD

A&T is working closely with non-governmental partners in Myanmar to identify pathways to ensure that mothers and families can access MIYCN information and services. Together with Healthy and Happy Families (HHF) – a local group of nutritionists and breastfeeding experts – A&T supported the formation of an online breastfeeding support group called Mommy's Milk, where parents can access evidence-based information about infant feeding and peer support. A&T is also working to develop new social media content to support and empower mothers to breastfeed during difficult circumstances, in collaboration with local partners HHF and

Operation Bridge. As a member of the Myanmar Nutrition in Emergencies group, A&T is providing technical assistance to ensure that MIYCN services are appropriately prioritized in humanitarian assistance programs and exploring new approaches to essential service provision, through community-based and ethnic health organizations. Once it is safe to do so, A&T will support the resumption of routine breastfeeding and EENC services at maternity hospitals and designate the first COE for at-risk newborns at Central Women's Hospital Yangon, followed by other maternity hospitals that are eligible for COE designation.

ⁱ Ministry of Health and Sports (MOHS) and ICF. 2017. Myanmar Demographic and Health Survey 2015-16. Nay Pyi Taw, Myanmar, and Rockville, Maryland USA: Ministry of Health and Sports and ICF.

ⁱⁱ Ministry of Health and Sports (MOHS) and ICF. 2017. Myanmar Demographic and Health Survey 2015-16. Nay Pyi Taw, Myanmar, and Rockville, Maryland USA: Ministry of Health and Sports and ICF.