A.I.D. EVALUATION SUMMARY PART I

(BEFORE FILLING OUT THIS FORM, READ THE ATTACHED INSTRUCTIONS)

PD-AAX-168-3

IDENTIFICATION DATA

A. REPORTING A.I.D. UNIT: USAID/Belize (Mission or AID/W Office)

(ES#)

B. WAS EVALUATION SCHEDULED IN CURRENT FY ANNUAL EVALUATION PLAN? yes ☐ slipped ☒ ad hoc ☐

Eval. Plan Submission Date: FY ___ Q ___

C. EVALUATION TIMING Interim ☐ final ☒ ex post ☐ other ☐

D. ACTIVITY OR ACTIVITIES EVALUATED (List the following information for project(s) or program(s) evaluated; if not applicable, list title and date of the evaluation report)

Project #	Project/Program Title (or title & date of evaluation report)	First PROAG or equivalent (FY)	Most recent PACD (mo/yr)	Planned LOP Cost ('000)	Amount Obligated to Date ('000)
505-0029	Breast is Best League Evaluation Report		12/87	62	0

ACTIONS

E. ACTION DECISIONS APPROVED BY MISSION OR AID/W OFFICE DIRECTOR

Action(s) Required	Name of officer responsible for Action	Date Action to be Completed
1. Revise budget line items to allow for -production of additional promotional materials -hiring a full-time secretary -increased transportation expenses -purchase of additional equipment -replacing present program assistant with more qualified program assistant.	S.J.G. Brechin	31 July 87
2. Develop plan and timetable for District follow-up of counsellors.	E. Middleton	15 Sept. 87
3. Coordinate with Project HOPE and others for technical assistance to develop data collection tool for evaluation of training.	E. Middleton	30 Oct. 87
4. Extend PACD to 5/88 to coincide with start-up of new child survival project.	S.J.G. Brechin	31 July 87

(Attach extra sheet if necessary)

APPROVALS

F. DATE OF MISSION OR AID/W OFFICE REVIEW OF EVALUATION: mo 6 day 11 yr 87

G. APPROVALS OF EVALUATION SUMMARY AND ACTION DECISIONS:

	Project/Program Officer	Representative of Borrower/Grantee	Evaluation Officer	Mission or AID/W Office Director
Signature				
Typed Name	SJGBrechin E.Dennis Conroy	Eva Middleton	Art Villanueva	Nebosyha R. Brashich
Date	23 July 1987	24 July 87	7/23/87	7/24/87

H. EVALUATION ABSTRACT (do not exceed the space provided)

This project aims, through the activities of an indigenous PVO, the Breast is Best League (BIB), to improve the nutritional status of infants in Belize by increasing the number of women who fully breastfeed their infants for four months. BIB operates on a nationwide basis, through mass media promotional activities and a network of trained breastfeeding counsellors, under the guidance of an Executive Director (ED) based in Belize City. A one-week evaluation was conducted by an independent consultant familiar with Belize to determine BIB's effectiveness and to recommend actions for the project's final year to improve public education and to move towards institutionalization.

The major achievements, findings and recommendations are:

-- Successful promotion of breastfeeding in Belize with a rate of over 45% of women solely breastfeeding for the first four months after delivery.

Recommendation: More promotional materials in Spanish should be available.

-- Model program established for the Caribbean where there are no similar programs, with ED used as a resource person for conferences and seminars.
-- Successful collaboration with MOH and other PVOs including MOH national-level breastfeeding coordinator appointed as a liaison to BIB.

Recommendation: Permanent office space should be sought from MOH to increase liaison.

-- The ED is over-extended and unable to be in the Districts as much as is needed. BIB also lacks specific plans for following up BFCs.

Recommendation: Hire a full-time secretary and develop timetable for district follow-up.

-- BIB has been very successful but cannot expect to function at its present level of activity without continued USAID support for the near future.

Lessons Learned

-- Despite lack of a follow-up plan to support BFCs in the Districts, the counsellors do continue to work regularly and submit records of their activities to the ED.
-- BIB's Board of Directors successfully works together despite the various political factions represented, an unusual situation in Belize.

ABSTRACT

I. EVALUATION COSTS

1. Evaluation Team

Name	Affiliation	Contract Number OR TDY Person Days	Contract Cost OR TDY Cost (US$)	Source of Funds
Pamela Putney,	MSN Independent Consultant	505-0029-087-125	$1400	Health

2. Mission/Office Professional Staff Person-Days (estimate) 2½

3. Borrower/Grantee Professional Staff Person-Days (estimate) 4

COSTS

A.I.D. EVALUATION SUMMARY PART II

J. SUMMARY OF EVALUATION FINDINGS, CONCLUSIONS AND RECOMMENDATIONS (Try not to exceed the 3 pages provided)
Address the following items:

- Purpose of activity(ies) evaluated
- Purpose of evaluation and Methodology used
- Findings and conclusions (relate to questions)
- Principal recommendations
- Lessons learned

Mission or Office: USAID/Belize

Date this summary prepared: 10 July 1987

Title and Date of Full Evaluation Report: Evaluation Report - Breast is Best League Belize, 11 June 1987

This project aims, through the activities of an indigenous PVO, the Breast is Best League (BIB), to improve the nutritional status of infants in Belize by increasing the number of women who fully breastfeed their infants for four months. The project began in January, 1985, and ends in December, 1987.

BIB operates on a nationwide basis, through mass media promotional activities and a network of trained breastfeeding counsellors, under the guidance of an Executive Director (ED) and Program Assistant based in Belize City. Liaison is maintained with the MOH to promote breastfeeding in the hospitals, especially in Belize City, where many of Belize's deliveries take place. Because breastfeeding statistics for Belize District are the worst in the country, emphasis on breastfeeding promotion for Belize City has been a priority.

A one-week interim evaluation was conducted by an independent consultant familiar with Belize to:

-- assess BIB's effectiveness in increasing public awareness of breastfeeding.
-- evaluate BIB's efforts in fund-raising, program management, and consolidation of BIB's role as a PVO.
-- to recommend actions for the projects final year to improve public education and to move towards institutionalization.

Methodology: The consultant reviewed project documents (including 1987 Work Plan and training materials) and interviewed MOH personnel at national and district level, breastfeeding counsellors (BFCs) in 4 of Belize's 6 districts, staff from other PVOs coordinating with BIB, members of the Board of directors, clients, spouses, a private physician, and others.

The major achievements, findings and recommendations are:

-- Successful promotion of breastfeeding in Belize with a rate of over 45% of women solely breastfeeding for the first four months after delivery.

Recommendation: More promotional materials in Spanish should be available to increase access to Spanish-speakers.

-- Model program established for the Caribbean where there are no similar programs, with ED used as a resource person for conferences and seminars.
-- Successful collaboration with MOH and other PVOs including MOH national-level breastfeeding coordinator appointed as a liaison to BIB.

SUMMARY

Recommendation: Permanent office space should be sought from MOH to increase liaison and work at the Nursing School and Belize City Hospital should continue to remain a priority.

-- The ED is over-extended and unable to be in the Districts as much as is needed. BIB also lacks specific plans for following up BFCs.

Recommendation: Hire a full-time secretary and develop timetable for district follow-up.

-- BIB has been very successful but cannot expect to function at its present level of activity without continued USAID support for the near future.
-- Data collection is weak and this weakness needs to be addressed.

Other recommendations:

1. Defer training in Stann Creek District for several months to develop and implement data collection tool to evaluate impact of training.

2. BIB should work with MOH to:

   --designate "Breastfeeding Week" in fall, 1987.

   --work with MOH/MCH Director to develop a physicians' education plan.

   --increase activities at the Nursing School and Belize City Hospital since the lowest rate of breastfeeding continues to be in Belize City.

3. More thought should be given to a variety of promotional materials such as another breasfeeding promotional calendar, continuing production of BIB bags and T-shirts, and providing sturdy notebooks to BFCs to protect existing promotional materials.

4. Increase number of breast pumps as well as rental fees for pumps.

5. Purchase a bicycle to increase staff mobility for home visits to women discharged from the Maternity Ward and to those having difficulties with breastfeeding.

Lessons Learned

-- Despite lack of a follow-up plan to support BFCs in the Districts, the counsellors do continue to work regularly and submit records of their activities to the ED.
-- BIB's Board of Directors successfully works together despite the various political factions represented, an unusual situation in Belize.

ATTACHMENTS

K. ATTACHMENTS (List attachments submitted with this Evaluation Summary; always attach copy of full evaluation report, even if one was submitted earlier)

1. Scope of Work

2. Evaluation Report

MISSION COMMENTS ON FULL REPORT

L. COMMENTS BY MISSION, AID/W OFFICE AND BORROWER/GRANTEE

The evaluation emphasized that institutionalization for BIB is not in the immediate future. One "lesson learned" was particularly striking. Despite the fact the BIB has had no formal follow-up plan for district work, the breastfeeding counsellors were out in the Districts working, recording their work, and sending these forms into the BIB Executive Director in Belize City. This has meant that district work has not lost as much impetus as was being assumed and means more time for exploring a working strategy for district support that will not tax the few resources available in the national office.

The evaluation has documented the successful breastfeeding promotion done by BIB, documented the need to extend the project, and will be helpful in assessing project direction for the upcoming Umbrella project. Its documentation of the ED's being over-extended has given the Board the impetus to agree to hire a full-time secretary to take care of much of the office work, freeing the ED for liaison and counselling activities.

An independent consultant who had just worked in Belize for 15 months was used for the evaluation. In this case, it was extremely advantageous because she knew everyone in the MOH and knew Belize and so was able to get a lot of information, especially from those in MOH. Belizeans in the MOH told her that they would not have talked so freely to an "outsider".

Attachment 1

Project 505-0029 - Breast is Best League

Project Evaluation

May 18 - 22, 1987

Objective: The objective of the evaluation is to determine the effectiveness of this project in (a) developing the Breast is Best League into an organization capable of responding to the challenges in Belize of extending and consolidating the practice of breast feeding, and (b) attaining the objectives established for training and public education.

Scope of Work

The consultant will:

a) Assess the success of the project in increasing public awareness of breast feeding issues and benefits.
b) Assess the impact the project has had in increasing the number of sufficiently trained and functioning breast feeding counsellors nationwide.
c) Evaluate the League's efforts in fundraising, management of the program and consolidation of its role as a local PVO, and
d) Make recommendations on the course the project should take in its final year in order to improve the impact on public education, and the League's institutionalization.

For each of these Factors findings, conclusions and recommendations should be detailed.

Methodology and Time Frame:

This evaluation will be conducted in Belize over a five day period, May 18 - 22, 1987. The evaluator is expected to meet and interview personnel at the BIB League, USAID, the Ministry of Health, trained breastfeeding counsellors, and other individuals who have had contact with the project in its implementation. The consultant will review program plans, training curricula, and plans for development and institutionalization of the League.

Report:

A draft report is to be discussed at the end of the evaluation with the Directors of BIB League, and USAID. Five copies of the final report must be submitted within four weeks of the completion of the evaluation.

Qualifications:

The consultant must be an experienced professional with at least 6 years involvement in planning, implementing, and evaluating breastfeeding promotion projects. An MD, or MPH degree would be advantageous to the consultant's credibility in Belize.

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Attachment 2

XD-MPW-135A
ISN = 51685

Evaluation Report

BREAST IS BEST LEAGUE

BELIZE

Pamela J. Putney
June 1987

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ABBREVIATIONS

BIB	Breast is Best
BFC	Breast Feeding Counselor
MOH	Ministry of Health
PVO	Private Voluntary Organization
ORT	Oral Rehydration Therapy

I. EXECUTIVE SUMMARY

Breast is Best was founded in 1981 by a group of Belizean women concerned about breastfeeding. Since 1985 USAID has funded the League in its efforts to increase public awareness about the benefits of breastfeeding versus bottlefeeding and in the promotion of breastfeeding countrywide. With the support of USAID, as well as other organizations, BIB has been extremely successful in attaining all the goals of the project. While some problems do exist, they are minor and are being addressed by the League with assistance from USAID.

A. Project Strengths

- The League has been very successful in increasing public awareness about breastfeeding through its promotional efforts.
- The Executive Director and the Advisory Board have provided strong leadership in their efforts to carryout the goals of the project.
- The League has successfully developed relationships within the Ministry of Health at all levels.
- A well functioning training program has been implemented for Breast Feeding Counselors nationwide.
- The League has successfully collaborated with other local organizations to promote its goals.
- The League has been successful in providing reliable and readily available counseling services to women who wish to breastfeed in Belize.
- BIB is a model program. There are no other programs like it in the Caribbean.

B. Project Weaknesses

- The Executive Director is over extended.
- The League lacks specific plans for follow-up of their counselors in the Districts.
- The League lacks permenant office space.
- Data Collection.

C. Major Recommendations

- A plan for follow-up in the Districts should be developed and implemented.
- A full-time secretary should be hired to assist the Executive Director.

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- Serious consideration should be given to deferring the Stann Creek Training in order to do data collection and analysis.

- BIB's work with the MOH at the Nursing School and the Belize City Hospital should remain a priority.

- Permenant office space should be sought from the MOH.

*Further recommendations are detailed in the section on Recommendations in the evaluation.

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II. BACKGROUND

A. Breast is Best League

1. BIB League Overview

BIB League was organized in 1981 by a small group of women who were actively involved in community work in various capacities. All of the women had become convinced of the importance of breastfeeding in relationship to infant health through both their work and personal experiences. The purpose of the organization was to give help, encouragement and information, primarily through personal instruction and contact, to women who wanted to breastfeed their babies. Mrs. Jane Usher, then Deputy Minister of Health, provided support for the League through the Women's Bureau of the Ministry of Social Services. The first neighborhood counselors group was established in the St. Martin de Porres area of Belize, where several of the League members lived, in 1982. By 1983 a second group had been established in the King's Park area of Belize City and Jerri Sevuto,RN, became BIB League's first full-time director on a voluntary basis. In the same year the Canadian High Commission awarded a small grant to the League and the first group of officially trained counselors began working in the prenatal clinics. In 1984 an office with a lending library and telephone hotline was established in space provided by the Women's Bureau in Belize City.

2. USAID Involvement with Breast is Best League

As a part of an on-going program to strengthen Maternal and Child Health Services in Belize, in January of 1985 USAID/Belize awarded a grant of $50,000 to BIB League in order to strengthen the League's services and expand its outreach capabilities nationwide. The grant enabled BIB to employ a full-time Executive Director, Eva Middleton, who replaced Jerri Sevuto.

In July of 1986 BIB League began sharing office space and receiving technical assistance from the USAID Funded, Project Hope Child Survival Project and a full-time field worker, Concha Valasquez, was hired to assist Eva Middleton.

The League currently has an Advisory Board which meets quarterly. The members of the Board are:

Sandra Wade - President/Professional Beautician
Michelle Perdomo - Vice President/Educator/Wife of Cabinet Secretary
Lucia Engleton - Secretary/Educator
Abigail McKay - Treasurer/Project Hope Management Specialist
Eva Middleton - Executive Director/Educator
Pat Benguche - MOH Liason to BIB/Inspector of Midwives
Kathy Esquivel - Educator/Wife of Prime Minister
Gilda Dennison - MOH Nutritionist
Maria Novelo - Educator

Two new members about to be appointed:

Zee Edgell - Director of the Women's Bureau
Winifred Swift - Acting Principal Tutor School of Nursing

B. Belize

1. Social, Economic and Political Overview of Belize

Belize is a small country (8,866 square miles) located in Central America. It is bound by the Caribbean Sea to the east, Guatemala to the west and south and Mexico to the north. Geographically, the land is flat and swampy along the coastal areas with the terrain gradually rising to the west of the country up to 2,7000 feet above sea level. The climate is subtropical and is divided by a wet and a dry season. Hurricanes are a problem historically, the most recent having occured in 1978.

Demographically, Belize is the least densely populated country in Central America with approximately fourteen people per square mile. In 1984 the estimated population was 162,000. Belize City is the largest urban center, with 27% of the population residing there. 24% of the population resides in the remaining 7 urban centers and 25% lives in communities of less than 200 inhabitants.

Belize has a multi-ethnic population. Forty to fity percent of the population is of African descent, residing primarily in Belize City and the district of Belize. The next largest ethnic group is Hispanic (many being refugees from El Salvador and Guatemala). Other groups include Mayan indian, Mennonite (German), East Indian, Chinese and Arab.

English is the official language, although Creole is used for day-to-day affairs. Spanish is spoken by over 42% of the population and the Mayans speak either Maya Mopan or Kektchi dialects of the Mayan language.

The first European settlements in Belize were established by the English in the seventeenth century, and the country was a Crown Colony from 1862 until independence in 1981. Belize retains strong ties with the British Commonwealth and the English speaking countries of the Caribbean, rather than identifying with the other countries of Central America. The Constitution is modeled on the British Parliamentary system and the government is currently headed by Prime Minister Manuel Esquivel of the United Democratic Party. There are twelve other ministers in the cabinet, including a Minister of Health. The Prime Minister and his cabinet establish and direct government policies in Belize. National elections are held every five years, with twenty-eight representatives chosen for the main house of the legislature. There is an appointed Senate with eight members which reviews legislation. The most recent election was in 1984, when the United Democratic Party defeated the People's United Party, which had held government power for twenty years. The People's United Party is now the official opposition party.

The Belizean economy is based on the export of agricultural commodities, principally sugar, citrus, bananas, seafood and wood. Rice, beans, corn, poultry, beef and dairy products are produced in Belize for domestic consumption. Most international trade takes place with the United States and the United Kingdom. Annual per capita income is 1,000 U.S. dollars, unemployment is estimated at 14 percent. The country relies heavily on international assistance for development.

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Belize maintains a small defense force, with ground, naval and air components. At the request of the Belize government the British Army has a strong presence in the country (1800 men). Since the nineteenth century Guatemala has claimed Belize. Although it has never taken military action to enforce that claim, the British military presence continues to prevent any such attempt.

Education is mandatory for chidren between six and fourteen and Belize has a literacy rate (defined as the ability to read and write) of about ninety-three percent. The majority of schools are run by the government with a large amount of assistance from various religious organizations. The Belize College of Arts, Science and Technology (BELCAST), provided training for X-ray technology, laboratory and other technical fields from 1982 to 1986, when the school was disbanded. The new University College of Belize, which is affiliated with Ferris State College of Michigan, has replaced BELCAST, but the future of advanced medical technology training remains in question. Nurses training, in some form, has been offered in Belize since 1887. In 1963, a national school of nursing was formally opened and continues to be the primary source of nursing staff for the entire country.

Physicians and other professionals must receive their training outside the country. Most physicians in Belize have been trained in other Central American countries, Mexico, India or the University of the West Indies.

2. The Health Care Structure of Belize

In 1981, at the time of its independence from Britain, Belize's health care system consisted of six small district hospitals, one small psychiatric hospital, one major hospital in Belize City (600 hospital beds in total), and twenty-eight district health centers (staffed by nurses). Forty-five physicians, two hundred thirty nurses (one hundred-seven with additional training in midwifery), one pharmacist, one radiologist and seven X-ray technicians were employed by the government. Services sponsored by the government provide nearly all the medical care in the country, essentially free of charge. All physicians must be employed by the government in order to practice, although they may accept private patients after working hours. There are currently no private hospitals in the country, although a few private clinics (sponsored by religious groups) are in operation in the districts.

The twenty-eight rural health centers provide routine pre-natal care, well-child care, immunizations, follow-up and treatment of malaria, TB and other communicable diseases and basic first-aid. The centers are staffed by Rural Health Nurses who have a year's training in practical nursing plus one year's training in midwifery and community health. Overall responsibility for the management of the Rural Health Centers lies with each district's Public Health Nurse. Each center serves a population of two to four thousand people.

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In an attempt to provide health services to the population living in the most remote regions of the country (primarily the Toledo district in the far south), not accessible to the Rural Health Centers, a number of Rural Health Posts have been established. These are staffed by community health workers on a voluntary basis and provide basic first-aid, some drugs (including treatment for malaria), oral rehydration therapy and health education information. Occasionally, prenatal care is provided. The Rural Health Nurse located at the closest Rural Health Center to the Rural Health Post is responsible for overseeing the activities of the community health worker.

The district hospitals have approximately thirty beds each and are staffed by one or two physicians, four to six nurses (usually with midwifery training) and other auxiliary personnel. Belmopan, Punta Gorda and Orange Walk hospitals have laboratory facilities. All the district hospitals have small pharmacies. Generally, hospital admissions in the districts are limited to routine problems that do not require surgery or intensive care (including normal obstetrical cases). Except for Belmopan hospital, which is visited regularly by surgeons from either the British military or various religious organizations, all cases requiring surgery are referred to Belize Hospital. Because they do not have the equipment or staff to provide acute care, the district hospitals are grossly underutilized. The district hospitals also provide extensive out-patient services including prenatal and mobile health clinics.

Belize City Hospital is the tertiary care center for the country. The facility is in an extreme state of disrepair, is over-crowded and is ill-equipped to manage patients with any major complication. Approximately seventy-five percent of all admissions to Belize City Hospital are of an obstetrical, gynecological or pediatric nature.

3. Maternal and Child Health Statistics

The birth rate (36.8 per thousand) and the dependency ratio (55% of the population is under 15 years or over 60 years of age) in Belize are relatively high. The infant mortality rate has declined steadily from 60 per thousand live births in 1971 to 27 per 1000 live births in 1981. However, the maternal mortality rate remained fairly constant during that period averaging about .50 per thousand live births. Reliable statistics on the causes of perinatal mortality are not available. The most frequent causes of maternal mortality are toxemia and hemmorage. Approximately one out of every twenty-nine children born will die before age five. Acute respiratory infections account for 12% of infant and 18% of child mortality. Diarrheal diseases account for 9% of infant and child deaths. Measles, neonatal tetanus, whooping cough and polio are no longer significant causes of death in infants and children due to expanded immunization coverage between 1979 and 1982, supported largely by UNICEF and PAHO.

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The incidence of malnutrition in infants under one year is roughly eight percent and in children between the ages of one and four it is approximately nineteen percent. Malnutrition is most commonly found in children living in the Toledo District. The percentage of mothers who breastfeed without supplements for the first four months of life varies significantly from district to district, with the lowest percentage being in Belize district (29%). Nationally, the average is approximately 40%. At least twelve percent of all deliveries in the country are attended by traditional birth attendents. The Mayan population does not use trained attendants in childbirth and it is usually the father who delivers the baby. Over sixty percent of deliveries take place in the hospital or rural health centers.

4. National Health Policies for Maternal Child Health

The government of Belize has as its official policy that health is a basic human right, and it attempts to provide all Belizeans with access to total health care. This responsibility falls primarily on the Ministry of Health. The government agrees to the principles of the World Health Organization's goal of "Health For All By the Year 2000." The National Health Policy states that health services should be "democratic, comprehensive, educational, participatory and accessible."

In 1982, a National Five Year Health Plan was developed and identified the following as the overall strategy for the provision of health care in Belize:

1. Adoption of the Primary Health Care Approach
2. Promotion of the Health Team Concept
3. Emphasis on Appropriate Manpower Training
4. Utilization of Effective Management Systems
5. Building of Appropriate Infrastructure Development
6. Alternative Sources of Financing

The priority groups identified for special attention were: mothers and children, the elderly, low-income groups, the population living in underserved areas and the disabled.

On-going Maternal Child Health activities in Belize began in in 1974 and in 1976, an agreement between the Government, UNICEF and PAHO was signed to fund, implement and support the expansion of services for mothers and children.

The 1982 National Five Year Plan identified the following as its objectives for the Maternal Child Health Program in Belize:

1. The Reduction of Maternal and Child Mortality and Morbidity.

2. The Improvement in the Coverage and Efficiency of Maternal Child Health Services.
3. The Provision of Regular Comprehensive Care for Children Under Five Years of Age, with an Emphasis on Supervision of their Physical, Mental and Nutritional Development.
4. The Promotion of Family Life Education for the Adolescent and Adult Population.

The specific programs that the Ministry of Health mandated to be carried out included:

1. The Promotion of Oral Rehydration Therapy to Combat Mortality and Morbidity from Diarrheal Disease.
2. The Provision of Family Life Education.
3. The Provision of Prenatal Care.
4. Normal Obstetrical Cases to be Delivered by Trained Nurse-Midwives, with the Back-up of Physicians in the Event of Complications.
5. The Promotion of Breastfeeding.
6. The Provision of Postnatal Care.
7. The Provision of Well-Child Care with an Emphasis on Growth Monitoring.
8. Immunization Services for Women and Children Against Tetnus, Polio, Measles, Whooping Cough, TB and Dyptheria.

The main burden of carrying out the provision of Maternal Child Health Services has fallen to the nursing community in Belize, particularly the Public and Rural Health Nurses, who staff the health centers, out-patient and mobile health clinics.

III. PROJECT OBJECTIVES AND ACHIEVEMENTS

The overall goal of the BIB League is to improve the nutritional status of babies and infants in Belize by increasing the number of women who fully breastfeed for four months. The project specifically addresses four major areas in order to achieve that goal. These are:

A. Management/Fundraising

B. Training

C. Educational Programs

D. Promotion

A. Management/Fundraising

Objectives

1. To provide direction and to execute the goal of the BIB League.
2. To provide longterm finances for continuation of the program.

1. To Provide Direction and to Execute the Goal of the BIB League

Outputs

a. Advisory Board

b. Collaboration with Project Hope's Child Survival Project

c. Leadership Qualities/Skills of Executive Director

a. Advisory Board

The BIB League has a strong and active Advisory Baord which includes representatives from key professional groups(nursing, education) and prominent community members(the Prime Minister's wife). There have been some changes in the Board membership over the years, however, the majority of the members have been involved with the League since its inception. The Board faces many of the usual problems confronting similar organizations. These include organization, difficulty in coordinating the time commitments of individual members and follow through on Board decisions. However, after meeting with the Board and reviewing its activities over the past several years and its plans for the future, I feel that the Board has done an excellent job in providing leadership, direction and in promoting the goals of the BIB organization in Belize through its many activities. All members are active Breast Feeding Counselors which means a considerable time commitment and the willingness to be available at all hours. Kathy Esquivel, the Prime Minister's wife is a vocal supporter and often mentions BIB during her public appearances throughout the country. Michelle Perdomo, who is an educator, plans to spend her summer vacation writing a publication for BIB on "Belizean Womens' Experiences with Breastfeeding." All of the educators on the Board have included classes on breastfeeding in their curriculum. Pat Benguche, the Inspector of Midwives, emphasizes breastfeeding in her TBA Training Program and regularly counsels mothers and promotes breastfeeding to the nurses on

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the Maternity Ward at Belize City Hospital and in the Districts. Given the small population base in Belize, the limited resources available and the professional time commitments of its members, I feel that it is unrealistic to expect more imput from the Board than it is already giving. The Board should be commended for the fine work that it has done for BIB League.

Plans are being made by the Executive Director, Eva Middleton, to hold a Board development workshop in the fall of 1987 in collaboration with the Project Hope Child Survival Staff and the Belize Family Life Association. The Board recognizes the need to enhance its own cohesiveness, motivation and personal commitment and plans to continue to work together to address these issues.

b. Collaboration with the Project Hope Child Survival Project

Since July of 1986 the BIB League has shared an office with the USAID funded, Project Hope Child Survival Project. The office is more centrally located, physically attractive and spacious than the previous one. This enhances the League's visibility and effectiveness. Claudia Ford and Abigail McKay, both Project Hope Management Specialists, have provided extensive technical assistance to BIB over the past year, specifically in the development of a new program plan, financial management, a training curriculum for counselors and actual training implementation in the Districts. Dan Bevier, the Project Hope Information Specialist, has been assisting with the development of a data collection tool. Mary Kroeger, the Director, states that day to day informal management training and problem solving has been provided through the sharing of office space. Eva Middleton was an active participant in the Project Hope Management Seminar which ran from September 1986-May 1987. She believes that the course enabled her to aquire valuable organizational skills which she has been able to incorporate effectively into her management of the League and its programs.

c. Leadership Qualities/Skills of the Executive Director

In evaluating the achievements of the BIB League in Belize over the past several years, the importance of the quality of leadership that has been provided by the Executive Director, Eva Middleton, should not be underated. An educator with 10 years experience, Eva had a long history of community activism previous to her involvement with Breast is Best. In her dedication and commitment to the League, she has taken on responsibilities well beyond her job requirements. In addition to maintaining full-time office/counseling hours, she often conducts trainings in the Districts on Saturdays. Many evenings during the week she gives talks and attends community meetings, enhancing the effectiveness and visibility of the League. She has actively reached out to all of Belize's various ethnic groups and has been careful to cultivate all segments of the political spectrum in the country, resulting in broad and strong public support for BIB's activities nationwide. This is an impressive accomplishment in Belize, where community activism often runs afoul of partisan politics.

2. To Provide Longterm Finances for Continuation of the Program

From its inception in 1981, BIB League has been active in fundraising in order to support the promotion of its goals. The Advisory Board as recently formed a separate fundraising committee. In addition to the grant from USAID, BIB has received financial contributions from UNICEF, CFNI, PAHO and the Women's Bureau of Social Services. The League periodically initiates membership drives and the Executive Director actively solicits donations from private MDs, local businesses and prominent citizens. BIB handbags and T-Shirts are sold by the League, but due to the expense involved in producing them, this has proven to be more of a promotional device than a profit making venture. Breast pumps are rented to the public, which brings in a small fee for the organization. The Advisory Board has held garage/cake sales and given barbecues/dinners and plans to continue similar activities in the future. A fair is planned for the fall of 1987 to promote breastfeeding and raise funds for the League.

The goals of institutionalization and financial independence are recognized by the Executive Director and the Board. The League has worked hard to achieve those goals and the budget does not reflect excesses in its allocation of funds for the organization's activities (ie: Eva takes buses when travelling to the Districts, etc.). Given the existing level of available resources in Belize, however, it is unrealistic to propose that BIB League would be able to sustain its current level of expansion and visibility countrywide without financial support from USAID.

B. Training

Objective

To educate resouce persons who will disseminate breastfeeding information to the public.

Outputs

a. Training curriculum

b. Recruitment of Trainers

c. Training Implementation

d. Ongoing Follow-up and Support Post Training

a. Training Curriculum

A new training curriculum for BIB League's BFC Training Program countrywide was developed in collaboration with Claudia Ford, Project Hope Management Specialist. The curriculum is designed to be taught in 5 weekly sessions, for a total of 20 hours. A pre and post test evaluation tool was designed to evaluate the success of the training. The book "The Womanly Art of Breastfeeding" is used as a guide (both in English and Spanish). Handouts, slides, models, charts and other training materials are used throughout the sessions. The new curriculum incorporates Child Survival Strategies such as ORT, the importance of immunizations and Child Spacing. The curriculum appears well designed to meet the training needs of the BFCs (copy in appendices).

b. Recruitment of Trainers

BFCs are recruited by the Public and Rural Health Nurses(and other health workers) in each District. The counselors must be women who have successfully breastfed at least one infant and be interested in promoting breastfeeding in Belize by doing volunteer work in the clinics and their communities as needed. They must agree to follow the BIB League Philosophy(copy in appendices). The couselors must complete the entire 5 sessions of the course in order to be certified as a BFC. The recruitment process appears to be adequate and it is unusual for the counselors to drop out once they have begun the training.

c. Training Implementation

The training is done by Eva Middleton with assistance from the Rural/Public Health Nurses, along with other health workers in each District. Assistance has also been provided by the full-time BIB field worker, Project Hope Staff members and Board members.

Virtually all the nurses and counselors that I interviewed(see list of contacts in appendices) stated that they found the training to be thorough, interesting, useful and extremely practical. Nurse Melendez from the San Narcisso Health Center in the Corozol District stated that the training was unusually clear and geared to the level of the counselors. Others stated that the training not only increased their knowledge but it also motivated them and gave them the confidence to counsel mothers who were having problems with breastfeeding. All persons interviewed stated that they enjoyed the training and that the training materials and handouts were excellent.

Counselors have been trained in every District with the exception of Stann Creek. Training in the Stann Creek area is scheduled to begin this summer. (see list of trained counselors in each District in appendices)

d. Ongoing Follow-up and Support

All the Rural and Public Health Nurses in the Cayo, Orangewalk and Corozol Districts stated that the counselors trained were functioning in their communities. Many of the counselors are attending the clinic sessions(at the health centers, hospitals and mobile) to assist mothers who are having problems with nursing and to promote breastfeeding. The nurses stated that they were supervising the counselors but that they would like more frequent visits from the League. Counselors are meeting regularly at the San Narcisso Health Center in Corozol to provide support for eachother and to problem solve. The meeting I attended was lively and the counselors talked enthusiastically about their work. The RHN(Nurse Melendez) and a TBA/Couselor appeared to be providing strong leadership within the group.

A feedback mechanism has been designed to keep the BIB Executive Director informed on how well the counselors are functioning. During the training the counselors are instructed to fillout an outreach form after each contact with a client(copies in appendices). The purpose of the forms is explained and instruction on how to fill them out is provided. The forms are collected periodically by the Rural and Public Health Nurses who send them to Eva Middleton. Eva sends a personal thank you note, along with comments, to all counselors who send in the filled out forms.

Currently, follow-up and support for the counselors is erratic. It is difficult for the Executive Director to provide ongoing follow-up

on a personal basis due to the lack of transportation (she must take local buses) and the overall demands of BIB League on the time.

A one day continuing education workshop for all trained counselors is planned for the fall of 1987 and will take place in Belize City.

C. Educational Programs

Objective

To create and distribute resource materials and provide educational settings for informing the general public, with emphasis on pregnant and lactating mothers.

Outputs

a. Inservice Education for the General Public

b. Inservice Education for Pregnant/Nursing Mothers

c. Inservice Education for Nurses in Hospitals, Clinics and at the School of Nursing

d. Collaboration with Other Local Organizations

e. Breastfeeding Information Packets/Resources Materials/Newsletter

f. Counseling Hours/Lending Library/Lending of Breast Pumps and Nipple Shields

a. Inservice Education for the General Public

BIB League has given numerous workshops/lectures at schools throughout the country in its efforts to educate the public about breastfeeding. To mention only a few, breastfeeding promotion workshops were given at:

-4 nighschools in Belize City

-2 district highschools

-3 upper division primary schools in the Toledo district, Belize rural and Belize City

-Preschools in Belize City, Dangriga, Corozol and Orangewalk

b. Inservice Education for Pregnant and Nursing Mothers

Trained Bib Counselors, the full-time field worker and the Executive Director have been a constant presence in the prenatal/child health clinics in Belize City and the Maternity Ward at Belize City Hospital. Mothers are educated about breastfeeding on a one to one basis and in group discussions. Slides are often shown and BIB information packets are distributed.

c. Inservice Education for Nurses in the Hospitals, Clinics and School of Nursing

Many of the nurses throughout the country have taken BIB League's BFC Training Program(largely the RH&PH nurses). The in-hospital maternity nurses have generally resisted the efforts of the BIB League, however. With the recent appointment of Matron Julia Castillo as

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the Director of Inservice Education for Belize, there is new and greater support for the League's educational programs with the nurses. A series of inservice education workshops for the maternity nurses nationwide are being planned in collaboration with Matron Castillo.

BIB has had an ongoing(but unofficial)relationship with the School of Nursing since 1983. A breastfeeding curriculum for the practical, professional nursing and midwifery students was developed(copy in appendices) and the Executive Director has given regular lectures on breastfeeding on an informal basis. Twenty-two of the nursing students attended a BFC Training and were certified as counselors. The relationship with the School of Nursing is important and will probably be strengthened further because the Acting Director of the School of Nursing, Winifred Swift, is about to be appointed to the BIB Advisory Board.

d. Collaboration with Local Organizations

BIB League has successfully collaborated with local organizations to educate the public about breastfeeding. The League is an active member of the Belize Nutrition Communication Network. The two groups are about to distribute a jointly written pamphlet on weaning food with recipies using local Belizean foods. They also have had joint displays at the Agricultural Show, Womens' Fairs and other public gatherings. Other groups with which the League is actively involved are:

- The National Health Education Committee
- Child Survival Task Force
- Council for Volunteer Social Services
- Belize Development Corporation
- Maternal Child Health Committee (BIB was formaly a member and now has a Liason relationship through Pat Benguche the Inspector of Midwives)

BIB successfully collaborated with Health Talents International and Enfant Refugie's du Monde to provide 1 day inservice education workshops on breastfeeding to Community Health Workers in the Stann Creek and Cayo Districts in March and April of 1987.

e. Breastfeeding Information Packets/Educational Resource Materials/ Newsletter

The League consistently distributes breastfeeding information packets to the public, mainly through the clinics and hospitals (copy enclosed). In addition, all the 30 Rural Health Centers regularly receive the packets.

A newsletter is published several times a year and is distributed by mail to the membership.

New information packets and a series of 10 special information sheets for distribution to the Maternity Wards have been designed in collaboration with UNICEF, HECOPAP, Project Hope, the MOH and CVSS. The Director of UNICEF/Belize, Thierry Delrue, who is a media expert, is collaborating with the League on the completion of a series of information slides about specific areas/problems in breastfeeding. The slides will be used for inservice educational purposes.

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f. Counseling Hours/Lending Library/The Lending of Breastpumps and Nipple Shields

BIB provides regularly scheduled counseling on a drop-in or appointment basis at their office and runs a hotline Monday-Friday 9am - 4pm for women/families who need help with or information on breastfeeding. In addition the counselors are available by phone 24 hours a day if needed for urgent problems. The phone line and office are usually busy with people seeking advice. In addition, the League has an extensive lending library and provides breastpumps and nipple shields for lactating mothers for a small fee.

The success/high visibility of the League's efforts were evidenced to me when I witnessed two fathers dropping by the BIB office to seek counseling so they could better support their wives, who were breastfeeding! In a macho culture like Belize it was a surprising scene.

D. Promotion

Outputs

a. Calendars/Posters

b. Radio/TV Spots/Newspaper Articles

c. Awards to Mothers Who Breastfeed Successfully/Outstanding Persons in the Promotion of Breastfeeding

d. Promotional T-Shirts/Bags

a. Calendars/Posters

In 1986 BIB League produced and distributed over 2,000 calendars countrywide. The poster sized calendars depicted Belizean mothers from different areas of the country happily nursing their babies. They were displayed in shops, clinics, homes and other places throughout Belize and brought increased attention to the League. No calendars were produced for 1987 due to logistical problems. There are plans to collaborate with UNICEF on a promotional calendar for 1988.

Recently 200 posters promoting breastfeeding were donated to BIB by UNICEF. The posters are printed in Spanish and will be of particular use in the Districts. Plans are being made to have the same poster printed in English/Creole.

b. Radio/TV Spots/Newspaper Articles

The League sponsors daily radio spots promoting lactation and League members often give radio talks on the subject of breastfeeding.

In the past 6 months, a series of 3 TV spots promoting breastfeeding were produced for BIB by the Director of UNICEF/Belize. The spots have been shown throughout the country(each District has at least one TV station) and have generated a lot of public attention towards breastfeeding. The Board members stated that they have frequently been stopped in the streets by people who wish to make positive comments about the spots. Phone calls to the League increase dramatically after the TV ads are aired.

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In the Districts, television stations run the spots without charge as a public service. In Belize City however, one of the stations, Channel 7, charges its regular advertising fee. The spots should continue to be aired as often as possible and appear to be well worth the expense. Public/Government pressure should be placed on the station to air the spots as a public service.

BIB League has had 11 newspaper articles on breastfeeding printed in the local press.

c. Awards to: Mothers Who Breastfeed Successfully/Outstanding Persons in the Promotion of Breastfeeding

The League distributes certificates of achievement to the clinics throughout Belize for presentation by the nurses to mothers who fully breastfeed their infants for 4 months. Periodically, special certificates of achievement are also awarded to persons/counselors for their outstanding promotion of breastfeeding in their communities.

d. Promotional T-Shirts/Bags

Over 300 promotional T-Shirts and bags have been produced and sold by BIB in an effort to promote awareness about breastfeeding and to raise funds. These items have been a popular promotional tool. The counselors often wear the T-Shirts when they are working and wherever the Executive Director and I travelled, people asked for them.

IV. ANALYSIS

A. Project Impact on Public Awareness About Breastfeeding

BIB League has been highly successful in increasing public awareness about breastfeeding issues and benefits. Through the high visibility and example of the Advisory Board members and the exceptional leadership provided by the Executive Director, the Belizean public has become increasingly aware of the benefits of breastfeeding verses bottlefeeding.

No baseline data collection on breastfeeding in Belize was carried out prior to the USAID funding of the BIB League project, making hard data on attitude and practice changes in breastfeeding unavailable. However, virtually every person interviewed (contacts in appendices) during the evaluation process felt strongly that the League has had a significant impact on the promotion of breastfeeding in Belize. BIB has worked effectively with the media and other organizations to generate publicity for breastfeeding and to promote the goals of the League.

B. Training

The training of Breastfeeding Counselors has been well organized and implemented throughout the project. Although problems with follow-up and support of the counselors post training do exist to some extent, the counselors appear to be functioning effectively in their role of supporting and promoting breastfeeding. The Public and Rural Health Nurses expressed an interest nad willingness to offer leadership and support to the counselors within the limits of their own resources, provided that they, in turn, receive some help form BIB in doing this.

C. Management

The League has been effectively managed under the direction of the Executive Director, Eva Middleton, with support from the Advisory Board. The Executive Director has consistently sought technical assistance from USAID and other organizations with problem solving issues when necessary. There is a genuine awareness of the issues facing the League and plans exist in an effort to address these problems.

The Executive Director is over extended however and recommendations to attempt to solve this problem are outlined later in the evaluation.

D. Institutionalization

BIB League has made significant progress in working with the MOH, inspite of often delicate political situations. Both Dr. Nanette Reneau, the Director of Maternal and Child Health and Pat Benguche, the Inspector of Midwives, felt strongly that during the past few years the attitude of MOH personnel towards BIB had greatly improved. The appointment of Pat Benguche as the official liason between the MOH and BIB should further improve the situation. Support from the new Director of Inservice Education for Belize and the Acting Principal Tutor at the School of Nursing's appointment to the Advisory Board should also have

a positive impact on the League's acceptance within the system. All MOH personnel interviewed expressed a desire for BIB to continue to work in close collaboration with the Ministry and Nursing staff.

While the League has been active in fundraising, it is unrealistic to expect the organization to function at its present level of activity without support from USAID.

E. Data Collection

The lack of data collection is a problem in evaluating the project's achievements. Given the fact that the data collection/analysis resources in Belize are extremely limited, this problem may be difficult to address.

V. RECOMMENDATIONS

1. A timetable/schedule for periodic follow-up in the districts should be developed and implemented. This would help maintain the level of morale among the counselors and nurses.

2. Consideration should be given to hiring a part-time counselor with leadership skills to supervise the counselors in each District.

3. Serious consideration should be given to deferring the Stann Creek District Training until next fall/winter, in order to develop and implement a data collection tool before training takes place. This would enable the project to better evaluate the specific impact of the training.

4. A full-time secretary should be hired at the BIB office to assist the Executive Director in carrying out the goals of the project.

5. BIB's work with the MOH at the Nursing School and at Belize City Hospital should remain a priority. Belize District continues to to have the lowest rate of breastfeeding countrywide and 40% of all births in Belize take place at Belize City Hospital.

6. The League should work closely with the Director of Maternal and Child Health to develop a plan to educate physicians in Belize about breastfeeding.

7. Permenant office space should be sought from the MOH. This would be a further step towards institutionalization of the League.

8. Support should be sought from the Government to designate a "Breastfeeding Week" in Belize this fall. This would help the League with its fundraising activities and increase the organization's visibility.

9. More breast pumps should be purchased and the deposit for renting them should be increased.

10. More copies of breastfeeding books printed in Spanish need to be purchased.

11. Sturdy notebooks should be purchased for the counselors to organize and protect the educational materials which they use in their work.

12. A breastfeeding promotional calendar for 1988 should be produced and distributed by the League.

13. BIB League promotional bags and T-Shirts should continue to be manufactured and sold for promotional purposes.

14. A bicycle should be purchased for BIB office staff use.

APPENDICES

About the Evaluation

The evaluation was conducted for the USAID/Belize Mission between June 4-11th, 1987. The evaluator was Pamela J. Putney,RN,MS,CNM, a nurse midwife educator who had previously worked in Belize for 16 months with Project Hope's Matching Grant in Maternal and Child Health. She was assisted by Eva Middleton, the Executive Director of BIB League, Sue Brechin,RN,MPH, Health/Population/Nutrition PVO Project Manager, USAID/Belize and Sam Dowding, Health Project Manager, USAID/Belize. Interviews were conducted throughout the seven day period with key MOH personnel, Breast Feeding Counselors, clients, Rural and Public Health Nurses in the Cayo, Belize, Corozol and Orangewalk Districts, representatives from PVOs involved with BIB League in Belize, the BIB League Board of Directors and a private MD, among others (please see list of contacts in appendices).

The purpose of the evaluation was to determine the effectiveness of the project in:

1. Developing the BIB League into an organization capable of responding to the challenges in Belize of extending and consolidating the practice of breastfeeding.

2. Attaining the objectives established for training and public education.

Specifically, the evaluation was designed to:

a) Assess the success of the project in increasing public awareness of breast feeding issues and benefits.

b) Assess the impact the project has had in increasing the number of sufficiently trained and functioning breast feeding counselors nationwide.

c) Evaluate the League's efforts in fundraising, management of the program and consolidation of its role as a local PVO.

d) Make recommendations on the course the project should take in its final year in order to improve the impact on public education, and the League's institutionalization.

LIST OF CONTACTS

June 4, 1987

Meeting with USAID/Belize. Met with:

Ed Gales - Acting General Development Officer
Sue Brechin - Health/Population/Nutrition PVO Project Manager

Meeting with BIB League Staff. Met with:

Eva Middleton - Executive Director
Concha Gonzoles - Full-time field worker

Meeting with Dr. Hoy, Obstetrician, MOH and private practice.

Meeting with Dr. Nanette Reneau, Director of Maternal and Child Health, MOH.

Met briefly with Sam Dowding, Health Project Manager, USAID/Belize

June 5, 1987

Meeting with Project Hope Child Survival Staff. Met with:

Mary Kroeger - Director
Claudia Ford - Management Specialist (terminated 5/31/87)

Meeting with Pat Benguche, Inspector of Midwives, MOH, longterm BIB League Board Member and newly appointed official MOH Liason to the BIB League.

Meeting with Thierry Delrue, Director of UNICEF, Belize.

Meeting with BIB League Board of Directors.

June 8, 1987

Meeting at San Narcisso Health Center in the Corozol District.
Met with:

Marta Melendez - Rural Health Nurse
Nicolasa Chan - Traditional Birth Attendent and BIB Counselor
Maila Castaneda - BIB Counselor
Victoria Gonzalez - BIB Counselor
Filiberta Dominanz - BIB Counselor

Meeting at Corozol Town Health Center. Met with:

Nurse Aragon - Rural Health Nurse
Nurse Roland - Public Health Nurse
Dr. Oscar Rodas - District Medical Officer

Meeting at CARE Office in Corozol. Met with:

Nancy Minnette - Nurse, Health Educator, CARE's Child Survival Project
Angela Gillette - BIB Counselor and CARE Community Health Organizer

Met briefly with Nurse Osorio, Public Health Nurse, Orange Walk District

Meeting with Mrs. Jane Usher, former Deputy Minister of Health for Belize. Strong supporter of BIB League from its inception in 1981.

June 9, 1987

Met briefly with Dan Bevier, Project Hope Information Specialist

Met briefly with two fathers who stopped into the BIB Office for counseling regarding the problems that their wives were having with breastfeeding.

Meeting at the San Ignacio Health Center in the Cayo District.
Met with:

Nurse Hale - Clinic Nurse
Elita Bardalez - Health Worker/BIB Counselor

Met briefly with Jill Kauffman, Public Health Nurse, Belmopan Hospital.

Rough Statistics Compiled by the MOH on the Number of Infants Fully Breastfed in Belize Until Four Months of Age

1984

Belize	29%
Corozol	41%
Orangewalk	45%
Cayo	79%
Stann Creek	48%
Toledo	81%
Average total	48%

1985

Belize	23%
Corozol	55%
Orangewalk	30%
Cayo	60%
Stann Creek	44%
Toledo	66%

* No figure were kept in 1986 due to the Immunization Campaign

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ORANGE WALK DISTRICT COUNSELORS

Jennifer Hoare	Santa Martha
Eugenia Marin	San Luis Village
Soila Banner	San Felipe
Carmen Zetina	San Felipe
Maria G. Quintana	August Pine Ridge
Felicita Cantun	Yo Creek
Veronica Quetzal	Guinea Grass Village
Anita Ack	Yo Creek
Teresa Catzim	Progresso
Angelita B. Sanchez	Nuevo San Juan
Eulalia Moguel	San Lazaro
Susana Osorio	Nuevo San Juan
Petrona Vargas	Orange.Walk Town
Clarita Perez	Guinea Grass Village
Aguida Cantun	Santa Martha
Angela Eustaquia Novelo Gillett	Yo Creek
Angelia Esther Garcia	Yo Creek
Carlos Peralta	San Felipe
Dora Alcia Flores	San Felipe
Eliza Zetina	Orange Walk Town
Dona Costanza	Orange Walk Town
Emiliana Osorio	Orange Walk Town

TOLEDO DISTRICT COUNSELORS, PUNTA GORDA TOWN, APRIL 26, 1986

Phyllis Alvarez
Carmela Bonell
Violet Budna
Elia Castro
Perlene Chan
Mary Lewis
Joyce Lopez
Ruth Martinez
Adel Nery
Josephine Palacio
Virginia Roches
Teressa Smith
Rose Tingling

COROZAL DISTRICT COUNSELORS, APRIL 11, 1987

Sandra Reyes	Sartaneja
Irma Aragon	R.H.N. Corozal H.C.
Angelita Mora	Sartaneja
Lorna Perez	Sartaneja
Cynthia Cruz	Sartaneja
Nicholasa Chan	San Narciso
Feliberta Dominguez	San Narciso
Martha Melendez	R.H.N. San Narciso
Faustina Teck	San Victor
Mireja Teck	San Victor
Narcelina Coye	San Victor
Paula Morima	Libertad
Severriana Correa	Xiabe
Daphne Garcia	Libertad
Lisbeth Roland	R.H.N. Corozal H.C.
Maila Castanada	Louisville
Victoria Gonzalez	Louisville
Nancy Minette	CARE Corozal

CAYO DISTRICT COUNSELORS

Elita Bardalez	
Angelita Eck	San Ignacio
Maria Sierra	Santa Elena
Rita Teck	Bullet Tree Falls
Elicia Peck	Crito Rey
Martha Madrid	Cristo Rey
Josephine Rerinos	Santa Elena
Beatrice Waight	Santa Familia
Inez Cubb	Santa Familia
Yolanda Berjes	San Ignacio
Elodia Leal	Bullet Tree Falls
Rosita Aurora Iglesia	San Ignacio
Armandita Simmons	San Ignacio Helth Center
Carol Segurra	Buena Vista
Maria Chan	Buena Vista
Brumilda Chan	Cristo Rey
Justina Teck	Cristo Rey
Maria Luisa Chan	Cristo Rey

BELIZE DISTRICT COUNSELORS GRADUATED MARCH 15, 1986

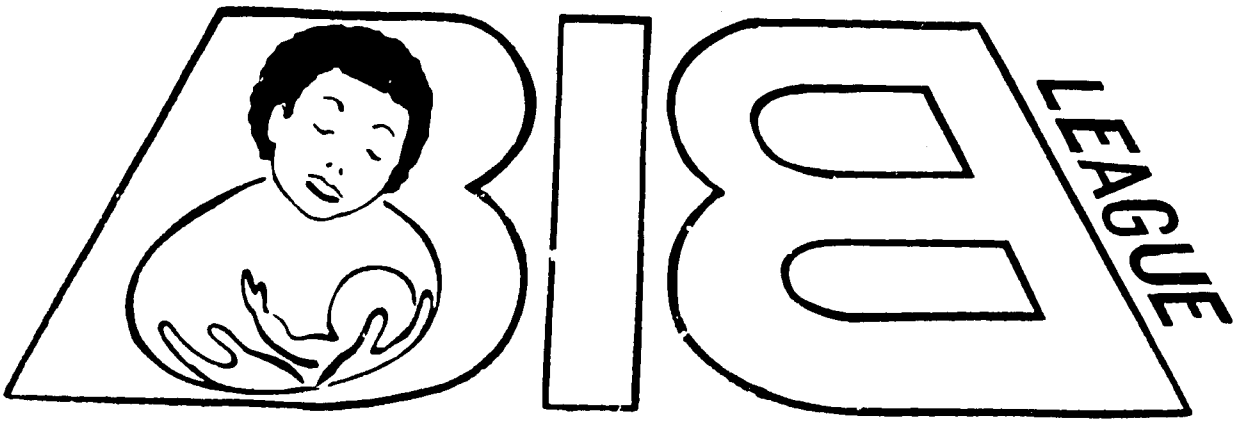
Nursing Students:

1. Laila Acosta
2. Martha Escheverria
3. Carolyn Gladden
4. Isidora Paquil
5. Therese Roches
6. Martha Teck
7. Melina Vanegas

Volunteers:

8. Gloria Baptist	Flowers Bank
9. AnnMarie Flowers	Doublehead Cabbage
10. Geraldine Joseph	Bermudian Landing
11. Alva Miller	Ladyville
12. Sarita Moody	Scotland Half-moon
13. Rosine Myvette	Doublehead Cabbage
14. Valda Oshon	Hattieville
15. Janet Perez	Ladyville
16. Cherrimae Rhaburn	Flowers Bank
17. Gertrude Velasquez	Burrel Boom
18. Concha Velasquez	Ladyville
19. Dorla Buckley	Hattieville
20. Emma Cadle	Biscayne
21. Magdalena Cassanova	Belize City
22. Grace Usher	Belize City

Breast is Best



BELIZE C. A.

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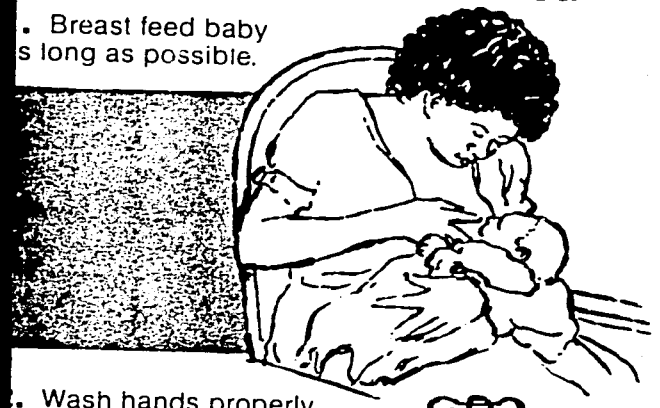
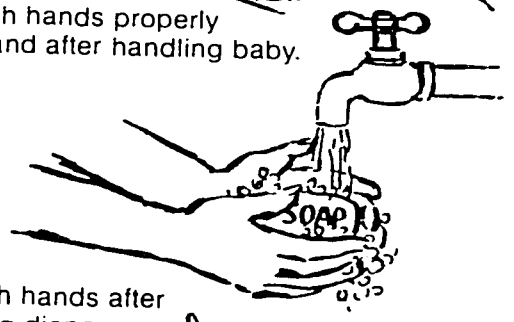
Hints to Prevent Diarrohea

. Breast feed baby
s long as possible.

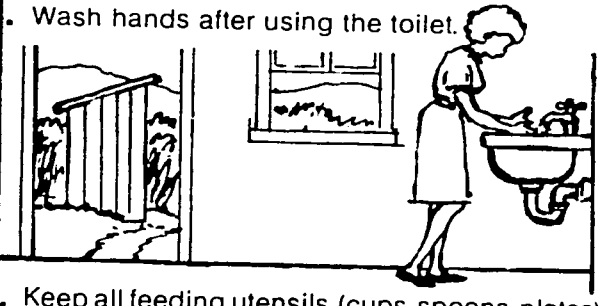


. Wash hands properly
efore and after handling baby.

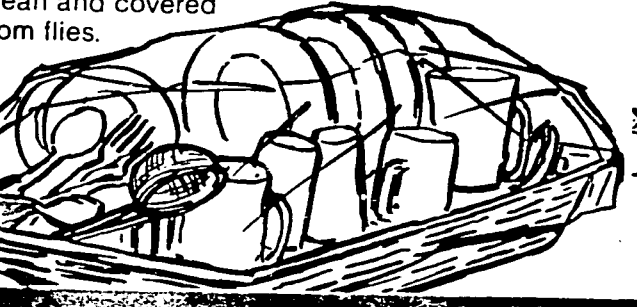


. Wash hands after
hanging diapers.

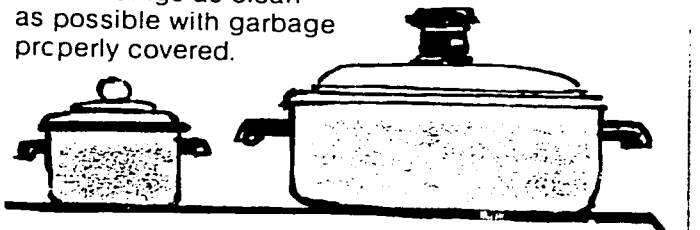
. Wash hands after using the toilet.



. Keep all feeding utensils (cups, spoons, plates)
ean and covered
om flies.



6. Keep home and surroundings as clean as possible with garbage prcperly covered.



7. Make sure drinking water is boiled or treated.

8. Keep drinking water covered.

9. Keep baby's hands as clean as possible they always put hands in their mouths.

10. Don't use pacifiers (soothers). They always fall on the ground then take the germs into baby's mouth.

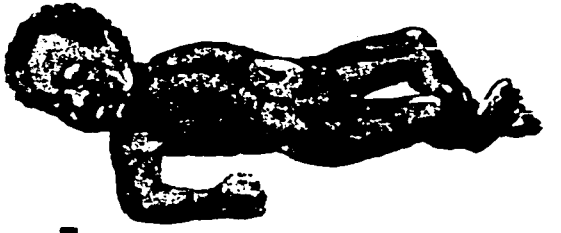
11. Visit your doctor or nurse at the Child Health Clinic, the Oral Rehydration Unit or the Rural Health Centre or the Village Health Worker in your area.

They are always happy to give advice on how to keep your baby healthy.

Ministry of Health, Belize, 1983

Cubola Productions

Diarrhoea and Vomiting (Gastro-enteritis)



what to do

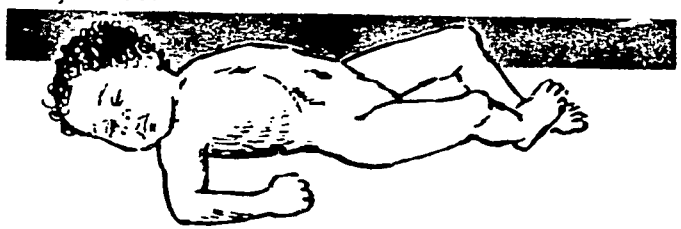
What to do about Gastro-Enteritis or Diarrhoea and Vomiting

If your baby is vomiting and has loose stools (or diarrhoea) he has gastroenteritis.

Babies who are not breastfeed usually get this sickness.

If your child has three or more watery loose stools in one day this is called diarrhoea.

Diarrhoea should be treated properly and early otherwise the baby will become dried up or dehydrated.

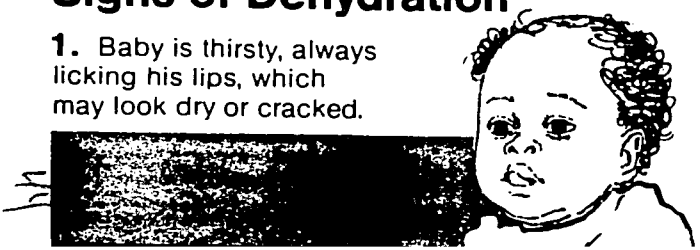


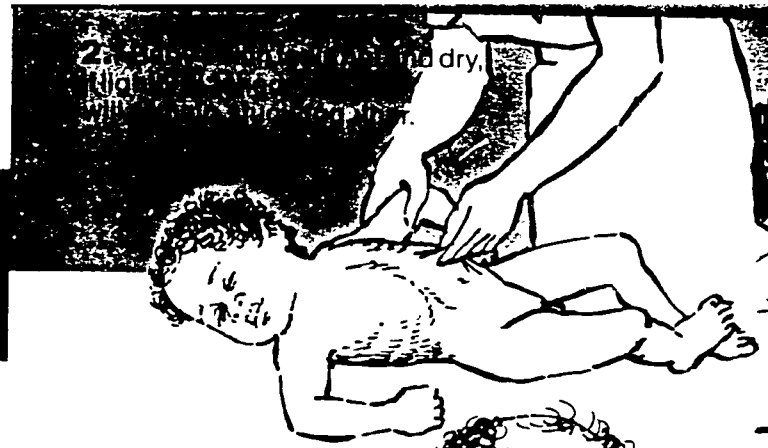
If a baby is dehydrated, death can result.

Dehydration means that the body has lost much water and salt through diarrhoea and if this water and salt is not replaced, the baby can wither and shrivel up like a plant that needs to be watered.

Signs of Dehydration

1. Baby is thirsty, always licking his lips, which may look dry or cracked.

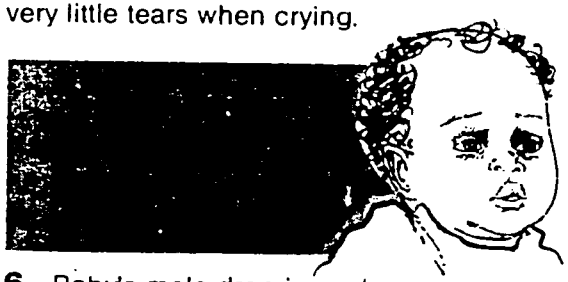




3. Baby is restless and irritable.

4. Baby passes small amount of urine that looks darker than usual.

5. Baby's eyes look weak and sunken and dry, very little tears when crying.



6. Baby's mole drop is sunken.

Do not wait until your baby starts showing these signs. Have your baby treated quickly as soon as you see signs of diarrhoea.

You should therefore know how to treat your baby when he/she gets diarrhoea in order to avoid dehydration.

Treatment for Diarrhoea

Use oral rehydration salts (ORS) to treat your baby when he/she gets diarrhoea.

ORS packets are available free of cost at all hospitals, clinics, health centres,community and from village health workers.

When you collect your ORS packet to treat your baby, please follow these instructions:

Instructions

1. Mix one (1) packet of ORS in one (1) litre (1 1/3 rum quart bottle) of water.
2. Give the baby only the amount that is instructed on the packet.
3. Use a cup and spoon, feed slowly, be patient.
4. If baby vomits, keep giving slowly with a spoon; some will stay down.
5. This drink will not stop diarrhoea, but it prevents the baby from becoming dried up or dehydrated.
6. Do not starve baby - offer him the breast or if he wants his food give it to him (avoid greasy or very rich foods).

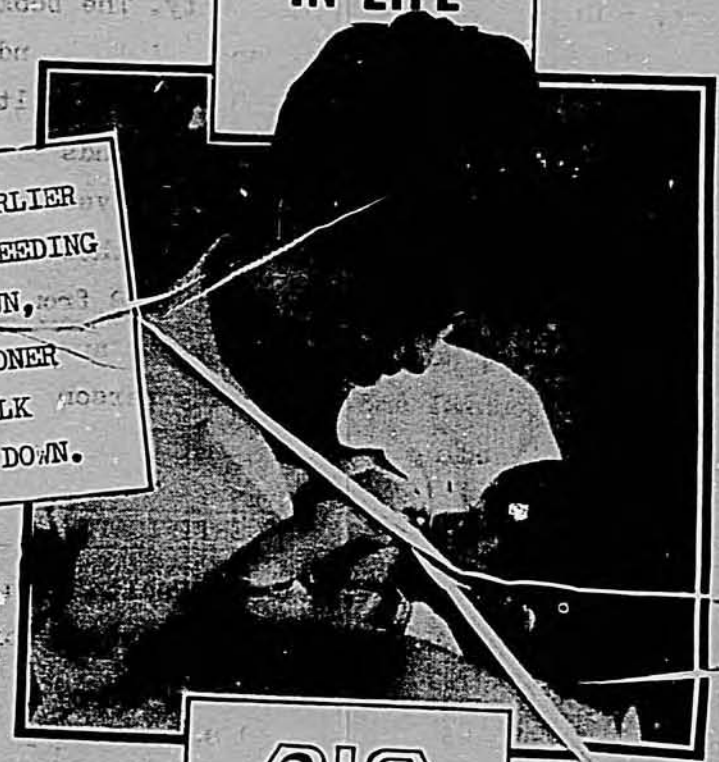
If baby does not show early improvement take him immediately to the Health Worker, Nurse or Doctor at the Hospital, Clinic or Health Centre.

If you have not got a packet or Oral Rehydration Salts, make up the homemade solution of:

Clean water (one (1) quart)
Pinch of salt (one (1) teaspoon)
Handful of sugar (one (1) tablespoon)

Breastfeeding

THE BEST START IN LIFE



THE EARLIER BREASTFEEDING IS BEGUN, THE SOONER THE MILK COMES DOWN.

BIB

BREAST IS BEST LEAGUE

6 Church Street
Belize City, Belize

Telephone 7398
Box 1203

THE BREAST IS BEST LEAGUE IS:

The coordinating organization for the promotion of breastfeeding for the country of Belize. We teach, encourage, support, motivate, and share information with women in Belize about breast feeding.

LENDING LIBRARY AND COUNSELING:

The BIB League has a lending library at the office, 6 Church Street, Belize City. The books are about breastfeeding, pregnancy, infant and child care, parenting, nutrition, family health women's health and nursing. BIB also lends breast shields to women with flat or inverted nipples and breast pumps to working mothers. BIB offers telephone counseling at 7398 from 8:30 - 4:00 pm. , Monday to Friday, to answer questions or counsel and assist any person needing breastfeeding help.

BREASTFEEDING AWARDS AND CERTIFICATES:

The BIB League, through the Child Health Clinic awards each mother who has fully breastfed for 4 months a BIB Certificate. The League also awards women who have breastfed successfully for at least 4 months under special circumstance.

MOTHER TO MOTHER

The BIB League provides mother to mother support for all breastfeeding mothers. We can also help mothers with problems such as engorgement, C-sections, premature babies, multiple births, sore nipples, etc. BIB mothers and counselors are not medical professionals, but women like yourself who have chosen to feed their children naturally, therefore are able to understand and help with day to day questions that a breastfeeding mother may have.

MOTHER'S GROUP:

Regular meetings are held for any pregnant or breastfeeding mother at the office.
If you are interested in learning about, preparing for, or continuing to feed and nourish your child well, feel free to call or stop in at the BIB office. Both mothers and fathers are invited to drop in at 6 Church Street, Belize City or to call 7398 for information or assistance.

After Four Months

- Start giving soft foods such as potatoes, yams and rice mashed with a fork and feed with a clean spoon.
- Your baby also needs many different foods such as bananas, beans, meat and other vegetables available in the market.
- Your baby's stomach is small and he needs a large amount of food to grow, so you must give many small feedings each day. Feed him four or five times each day.
- The amount your baby eats will change from meal to meal. The best way to know if your baby is getting enough is to visit your health centre regularly and have him weighed.
- The food you give your baby should be washed, cooked in a clean pot and fed with a clean dish and spoon.
- Remember to wash your hands when fixing foods or feeding your baby.

Continue breastfeeding your baby until he is at least one year old.

Common Questions about Breastfeeding

What if I don t have enough milk?

- Sucking produces milk. Nurse your baby as often as he wishes.
- Drink plenty of liquids —at least 8 glassfulls every day.
- If you worry about not having enough milk, you may not have enough. Relax! and enjoy your baby.

What if my baby refuses the breast?

- A hungry baby will eat unless he is sick.
- Do not offer your baby anything else except the breast. A bottle may be easier to suck but causes gas, colic and bloating Other foods cause baby to lose his apetite for breast milk.
- If baby still has trouble, visit your child Health Clinic.

Will breast milk give my baby diarrhoea or loose stools?

- No!!! The stool of a breastfed baby is soft and yellowish. It comes more often than the stools of bottle fed baby because breast milk is better digested.
- A breastfed baby will not have colic, or constipation, or allergies.
- Any baby may have loose stools. If your baby has loose stools, continue breastfeeding and give oral rehydration solution by spoon.

Will breastfeeding make my breasts sag?

- When you are pregnant your breasts are bigger. Pregnancy stretches them like the skin of your tummy stretches.
- When your breasts fill with milk, they get even bigger, whether or not you breastfeed.
- Any woman who has been pregnant will have some stretching of her breasts and this may cause slight sagging after the pregnancy.
- A good supporting brassiere during pregnancy and nursing will cause less stretching.
- The shape of your breasts is mostly inherited and you can't change that even if you wanted to.

If you need help with any breastfeeding problems contact your Health Centre.

In Belize City visit:

1) The Breastfeeding Clinic
   Matron Roberts Health Centre
   Wednesdays: 8 a.m. - 11 a.m.
   1 p.m. - 3 p.m.

2) The Breast Is Best League
   P.O. Box 1203
   Belize City
   Telephone: 45528 or 44797

Cubola Productions

Breastfeeding

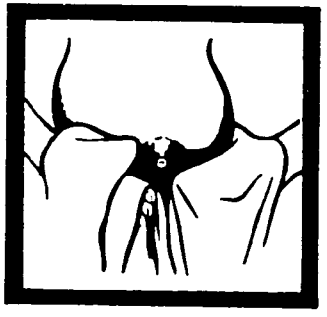
is best for you, your baby and your family

Getting Ready

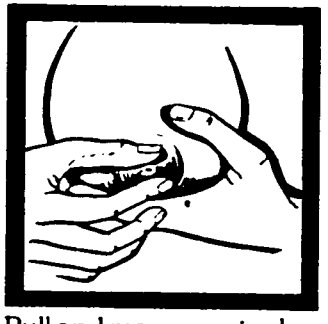
- Eat well during pregnancy.
- Drink milk for strong bones and teeth.
- Eat green vegetables and red meat for strong blood.
- Eat enough of everything. You need extra food now.
- Do not smoke nor drink alcoholic beverages. They can be harmful to your baby.
- Do not take any medicines without seeing a doctor.
  Medicines that are safe to you may be harmful to your baby.

Daily Nipple Care

Wash breast



Oil nipple



Pull and massage nipple

Squeeze out early milk

Nipple care is important !

The First Days

- Offer the breast to the baby as soon as possible after delivery and offer it on demand every two hours.

- Support the breast to the baby's mouth with one hand, pressing it back from the nipple with your thumb and forefinger.
- Change the baby over to the other breast after ten minutes.
- Your baby gets colostrum from your breast. This is the first milk, which is a yellowish and watery fluid very rich in natural vaccines which will protect your baby.
- As the colostrum disappears, it may look thin and watery; this is natural.
- The more you breastfeed the first three (3) days, the sooner your milk will come down. Avoid bottlerfeeds completely.

Up to Four Months

- During his first months of life, your baby only needs breast milk.
- Breast milk provides all the food that your baby needs.
- Breast milk is better than cow's milk or any infant formula.
- Totally breastfeeding your baby during the first four months will save you about $500.
- Breast milk keeps your baby healthy.
- Mothers milk protects your baby against:
  - constipation
  - diarrhoea (loose stools)
  - allergies
  - overweight
  - vomiting
  - bronchitis
  - other diseases
- Until he is four months old, your baby does not require any other liquids; **not even water.**
- Breastfeeding helps to build the important bond of love between mother and baby.
- As a nursing mother you should eat foods that are good for you and in sufficient amounts.
- Being a working mother is no excuse to stop breastfeeding. Your milk can be squeezed out, placed in a clean container and stored in a cold place to be given to your baby while you are at work.

- When your baby is between 4-6 months old, he will begin to need more than breast milk.

WHERE TO GET BREASTFEEDING HELP

Breast is Best League

6 Church Street

P.O. Box 1203

Belize City, BELIZE.

Hotline 7398

What Does BIB League Do?

1. Trains breastfeeding counselors.
2. Operates a Hotline telephone to answer questions and give help.
3. Lends books on breastfeeding and child care.
4. Lends breast shields to moms with flat or inverted nipple.
5. Produces and gives information sheets to pregnant and breastfeeding mothers.
6. Makes house calls to help mothers.
7. Works in the Health Centers.
8. Trains counselors to assist in the maternity wards.
9. Gives certificates to all women who fully breastfed 4 months.
10. Gives awards to women who breastfeed under special circumstances.
11. Teaches in schools.
12. Conducts neighborhood support meetings.
13. Produces TV and radio programs.
14. Does workshops country-wide.
15. Lends breastpumps to working mothers.

QUESTIONS ABOUT BREASTFEEDING

1. Does breastfeeding cause the breasts to sag?

NO! Breast may sag if not well supported during pregnancy and breastfeeding. A good bra and exercise will help support the breasts and prevent sagging.

2. Do babies need glucose-water until the milk comes in?

NO! Babies need only colustrum and nothing else. The colustrum is perfectly made for the newborn, providing all the nutrients, protection from diseases, and protection against allergies. Breastfeed the baby as soon after delivery as possible (on the delivery table is best) and when he cries. **BABIES NEED ONLY COLUSTRUM AND BREAST MILK.**

3. Does breast milk cause diarrhoea or can a breastfed baby be constipated?

NO TO BOTH! Fully breastfed babies stools are loose, frequent, golden yellow to greenish color. This is normal. The baby may have a bowel movement after every feed. It is also NORMAL for a fully breastfed baby not to stool for 5-7 days. Either is normal.

4. When should solids be introduced?

Usually solids are first fed to babies at 4 - 6 months of age. Breast milk provides all the nutrients the baby needs for 4 - 6 months.

BREAST IS BEST LEAGUE * BIBL**

BELIZE'S

INVESTMENT

IN A

BETTER

LIFE

6 Church Street **P.O. Box 1203**
Belize City **Hotline 7398**

BIB LEAGUE

BREAST IS BEST

CARE ENOUGH !! GIVE THE BEST !!

BREASTFEED YOUR BABY !!

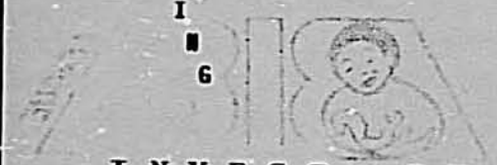
Breastfeed often to make plenty of milk. Bottles are not necessary. Start foods at 4 - 6 months and continue to breastfeed.

Remember the GOLDEN RULE of Breastfeeding ....

THE MORE THE BABY BREASTFEEDS, THE MORE MILK THERE IS !!

BREASTFEEDING

THE FOUNDATION FOR A HEALTHY LIFE



REASONS TO BREASTFEED:

BREASTFEEDING IS BEST FOR BABY

** Perfect for growth
** Fewer infection
** Less dental decay
** Better jaw and mouth development
** Attachment to mother

BREASTFEEDING IS BEST FOR MOTHER

** Satisfaction
** Enjoyment
** Fulfillment
** Getting Mom's figure back
** Convenience
** Child spacing
** Saves **MONEY**, time and energy

BREAST MILK IS BEST MILK — EVERYWHERE !!

WORKING MOTHERS CAN BREASTFEED

Special care and counselling can be given to working mothers before they return to BIBL* Counselors.

BIBL can teach moms how to hand-express their milk and properly store it. BIBL also lends breast-pumps to working moms.

Your baby can receive only breast milk while you are working. This:

-- saves money.

-- protects baby against illness.

-- allows mom to remain in a very special way to baby.

-- allows mom to enjoy the bonding and love of the breastfeeding relationship.

For more information, call 7398 or drop by the BIBL Office, 6 Church Street.

We want to help you !!

INVEST IN THE CHILD -- INVEST IN THE NATION

BREAST IS BEST

LEAGUE

Breastfeeding

Questions & Answers

ten should I nurse my Baby?

lly breastfeed babies feed every 2-3 hours
e first weeks, with a little longer stretch
mes during a 24 hour period (hopefully at
. Demand feeding is most important. When
's breasts are full of milk and uncomfort-
feed him.
er: The more the baby sucks at the breast,
re milk you will have.

ll I know if my baby is getting enough?

y is offered both breasts every 2-3 hours,
l be getting enough. If you baby has 6-8
apers and is gaining 4-7 ozs. a week.
er: It takes some babies 1-3 weeks to re-
p their birth weight.

**ng will it take for my milk supply to
established?**

re you breastfeed in the first 24 hours the
your mature milk will come in. DO NOT GIVE
bottle of water or formula in the hospital
ore your milk comes in. Your colostrum
milk) is all baby needs. Breastfeed for
utes on each side, feed on demand, drink
f liquid, eat a well balanced diet, and
me rest. Yor milk supply will be establish-
7-10 days with frequent breastfeeding and
TLES and well regulated in 3-4 weeks.

**an I do to relieve engorgement (when my
irst comes in and my breasts become hard
re)?**

ement is the swelling of the breasts when
lk first comes in. Breastfeed more fre-
y, after breastfeeding splash warm water on
reasts, or put a hot damp cloth on breast
minutes 3-4 times a day before feeds, or
warm shower and following that use the
f your hand to gently stroke the breast
rd toward the nipple. If your baby re-
the nipple, hand express enough milk so
pple is soft and baby can take hold. Let
egin breastfeeding on fuller breast first.
let a baby miss a feeding. DO NOT GIVE
by formula or water --- lone breast.

5. What can I do to relieve nipple soreness?

(a) Put baby to breast more often and breastfeed only 10 minutes per breast.

(b) Put baby to the least sore breast first.

(c) Be sure baby has dark area around nipple (areola) in mouth, as well as the nipple.

(d) Expose nipple to sunlight and air.

(e) Apply small anount of vaseline or pure lanolin.

(f) Wear loose fitting tops or dresses.

(g) Do not use soap for washing breasts as it will dry and crack nipple more.

(h) Nurse in different positions. Sore nipples will get better soon. Do not stop giving new baby the very best. If you need more help call the BIB Hotline, **7398.**

6. What can I do about leaking?

Leaking at the other breast while breatfeeding occurs for about six weeks. If you begin leaking while out apply pressure against breast to stop dripping. Fold your arms across chest and apply pressure wich the heels of your hand against your breast or rest chin on your hands and press against your breasts with your forearms.

7. How many and what types of stools are normal in the breastfed baby?

The breastfed stool is usually loose and unformed. It may be yellow to yellowish green to brownish in color. A lone breastfed baby may stool after every feed or only once a week, either is normal.

8. Does my baby need water?

Fully breastfed babies do not need any water. Breast mild contains all the water they need. Breastfeed on demand, drink lots of liquids and even on hottest day baby only needs breastmilk.

9. What about Supplemental Bottles of formula

Baby only needs breast milk. Bottles of fo
decrease mother's milk supply and replace
fect food with less nutritious, non-protec
substitute.

**10. When should I add other foods to my baby's
(When should solid foods be introduced?)**

Start other foods between 4-6 months and co
breastfeeding. Thick porridge, fruit juice
mashed fruit can be added at 4 months. Then
ally add foods high in iron (like peas, bea
fish, liver, cheese, rice, yam, potatoe, ca
spinach and pumpkin).

11. When should I wean my baby?

It is recommended that you wean gradually a
low the child to decide when. Breast milk i
most important food in your baby's diet up
months. There is no set time for weaning. B
may choose to wean at 9, 12, 18 or 24 month
joy your little one and the opportunity to
and nourish him.

12. Can I Breastfeed and work outside the house

Yes, many mothers successfully do both. If
work close to home or can take your baby to
you can breastfeed at breaks and meal times
you are away at feed times, you can manuall
press milk (or use a pump) and leave the br
milk for the baby. For further details cont
B.I.B.

13. Who can I call for help if I have any probl

The Breast Is Best League, 6 Church Street,
Box 1203, Belize City, # 7398 wants to help
successfully breastfeed. We have breastfeed
counselors trained to help you. They will v
you in your homes, send you materials, or t
to you by telephone.

RIGHT AFTER BABY IS BORN, begin breastfeeding—the sooner the better. The early milk will give baby extra protection against sickness. And baby's nursing will get you back into shape quicker.

TRY TO HAVE at least six to eight weeks at home to rest and give baby a good start before you go back to your job. Some mothers have to go back sooner, but they ask for the shortest hours possible.

WHILE YOU'RE AT HOME, you can be with your baby, loving and nursing him, to your heart's content. Many little babies want to nurse every couple of hours. This frequent nursing brings in the milk. It's so easy, and you enjoy baby so much and feel so close to him, you'll hardly notice how many times you are feeding him.

NIGHT FEEDINGS ARE EASIER when you're breastfeeding. When baby wakes at night, just take him in bed with you to nurse The nighttime nursing helps keep up your milk supply, and baby and you both enjoy the nursing and cuddling and drifting off to sleep together.

AS SOON AS POSSIBLE after baby is born, learn how to express milk from your breasts. A nurse in the hospital or clinic, or another nursing mother, may be able to show you how this is done. There's also a section about expressing and storing mother's milk in the manual, THE WOMANLY ART OF BREASTFEEDING.

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AFTER YOU ARE BACK ON THE JOB, you can express milk on your coffee break and lunch hour to take care of the fullness in your breasts. The next day you can leave this milk in a bottle to be given to baby.

THE MILK YOU EXPRESS will have to be kept cold, of course. If there's a cafeteria in the office or factory where you work, you can ask the manager for a little space on a refrigerator shelf. Or you can bring a large thermos jug filled with ice from home to keep your container of milk in while you are at work and while carrying it home to put in your refrigerator. Whatever plan you work out, it will mean that baby can still have your good milk even when you aren't there. And you'll be more comfortable too.

BEFORE YOU LEAVE FOR WORK and when you get home, you and baby can relax and enjoy a nursing time together. It's a nice way to say "good-bye for now" and "I'm home again, baby." During weekends and on days off, baby can really feast at your breast. And of course you keep right on with those night-time nursings.

NO AMOUNT OF MONEY CAN BUY the many good things that come with breastfeeding. No formula can compare with mother's milk. A baby on breast milk has fewer stomach upsets and diarrhea. But the main thing is baby's happiness. You just won't believe what this extra-special mothering will mean to him.

BREASTFEEDING COUNSELOR CONSULTATION

MONTHLY REPORT— April + May 1987

DATE	CLIENT NAME	ADDRESS	PROBLEMS	SERVICES GIVEN	TIME SPENT
16/4/87	M. Marin	San Luis	Sore lump in breast	Advised to rest. also to have her breast soaked in warm water three times a day and continue feeding the baby	15 mins
23/4/87	E. Domenguez	San Felipe	Mother states that baby does not get enough milk from breast	advised mother to take lots of liquid in order to have more milk and also to feed baby with solid foods as he is seven mths old.	30 mins
30/4/87	Escalante	San Jose	Never breastfeeds	Advised to breast feed her baby who is 1 mth. old.	15 mins
7/5/87	D Sabido	San Pablo	Had never breastfed any of her children	Advised to get ready for it now by rubbing her nipples with vaseline massaging each breast with two hands and pulling the nipples out a few times each day and also to squeeze out colostrum every day	

A. Gillette
NAME OF COUNSELOR

#1

BREASTFEEDING COUNSELOR CONSULTATION

MONTHLY REPORT— March 1987

DATE	CLIENT NAME	ADDRESS	PROBLEMS	SERVICES GIVEN	TIME SPENT
22/3/87	M. Castillo	Yo Creek	Baby doesn't take breast	Both mothers were encouraged to put baby to breast fed more often so milk will begin to come.	25 mins.
22/3/87	G. Castillo	Yo Creek	baby doesn't take the breast because they think they have no milk.		25 mins.
9/4/87	Elizabeth Freisen	Shipyard.	sore nipple	advised to expose nipples to the air if helpful to her apply ice a few mins. before nursing; plenty of rest and a good diet	30 mins.
2/4/87	G. Villamil	San Roman	Daily nipple care	Wash breast, oil nipple, pull + massage nipple, squeeze out early milk.	30 mins
2/4/87	M. Moh	San Roman	baby fully breast fed. Mother states she wants to give her solid food but doesn't know what she should feed her with.	Mother encouraged to give solid food properly mashed like boiled egg with breast milk, well mashed bananas mashed c. cooked carrots	

NAME OF COUNSELOR Angela M. Gillett

LEAGUE

BREASTFEEDING COUNSELOR CONSULTATION

MONTHLY REPORT— April 1987

DATE	CLIENT NAME	ADDRESS	PROBLEMS	SERVICES GIVEN	TIME SPENT
2/4/87	Adela Vargas	San Roman	Mother asked how long she should breastfed her baby	advised to breastfed for at least six mths and after that for as long as she wants	15 mins
2/4/87	F. Escarcega	San Roman	"		15 mins
2/4/87	E. Toledano	San Roman	Baby doesn't breastfed because she didn't give her the breast when she was born	advised to put baby back on the breast and in a few days she will have lots of milk	20 mins
2/4/87	M. Orellana	San Roman	Mother asked what is colostrum and why should she give it to the baby	Explained that colostrum is the first milk which is yellowish + watery fluid very rich in natural vaccines which will protect the baby.	20 mins.
2/4/87	R. Coba	Douglas	Baby is 9 mths old and doesn't get enough breast milk.	Encouraged to feed baby with soft food and continue breastfeeding	20 mins

R. F. Gillett

NAME OF COUNSELOR

BIB LEAGUE

BREASTFEEDING COUNSELOR CONSULTATION

MONTHLY REPORT— March 1987

DATE	CLIENT NAME	ADDRESS	PROBLEMS	SERVICES GIVEN	TIME SPENT
14 March	Francisca White	Nuevo San Juan	Breast Infection	apply heat, get plenty of rest, and keep the breast empty by frequent nursing.	2 hrs
21 March	Nilma Muy	Nuevo San Juan	talking to her about Breast feeding is important. She doesn't believe but now yes!	Because the colostrum is especially important, helps the baby to pass the meconium. I explain her all about BIB.	2 1/2 hrs.
28 March	Eliana Acosta	Nuevo San Juan	She is pregnant and the nipples cracked nipples when her baby is sucking.	I explain her that time with cracked + bleeding nipples you can nurse your baby. Loving feelings toward your baby will go a long way toward making you feel better.	2 hrs

Suzana Osorio
NAME OF COUNSELOR

53

BREASTFEEDING COUNSELOR CONSULTATIONS

MONTHLY REPORT— July

DATE	CLIENT NAME	ADDRESS	PROBLEMS	SERVICES GIVEN	TIME SPENT
15/7/86	Eleanor Ramirez	Lingiga	Baby is jaundice and mother is not feeding sufficiently. Went the mother express milk she bought it had in pus. not knowing that it was colostrum	advised mother to feed often. drink a lot of H_2O and rest.	30 mins
28/7/86	Harriet anderson	mursal St/ G.D.F. arriving	Pregnant and planning to have a T.B.L. she is worried about breast-feeding baby.	We discussed that this was possible with the help of the Women's dept of breast-feeding. The book was loan to the client. The use of a breast pump and method of feeding milk poisoned	15 mins.
31/7/86	Ms Gloria Wright	50 Regent St	Sore scratch nipples & a jaundice baby	Council about sores scratch nipples. use of a dilute of vaseline on breast wash i pain H_2O. and boiled solution sun light to wash the breast. Feed baby often allowing the whole nipple to be in the babys mouth	20 mins.

Cecilia Ali-Idin
NAME OF/COUNSELOR

BREASTFEEDING COUNSELOR CONSULTATION

MONTHLY REPORT 30/3/87

CLIENT NAME	ADDRESS	PROBLEMS	SERVICES GIVEN	TIME SPENT
Ann Sentino	Backgst	engorgement	with the aid of the Mom and out of breast feeding I showed the Client what to do	1 Hour each day for 3 days

Adel Mem

NAME OF COUNSELOR

Phone no 0 2122

San Ignacio Health Centre

Sept 19, 1986

Dear Bit Counselor,

In regards to your letter I received, I hope to answer it to the best of my ability. Also, I would like to introduce myself I am Mrs Elita Bardalez, caretaker, at the San Ignacio Health Centre and certainly a bit counselor also.

We have been planning on having a meeting but because of the weather, it has been postponed. As soon as the weather improves, We'll have one.

Some members have been counseling mothers about breast feeding. According to them they have had good results. As for myself here where I work, we talked to several mothers and discuss that problem. I have seen good results already.

As for the books, mothers have been needing them and they have been helped a lot.

The sport shirts and bags on breast is best. We have sold only a few are left. I have the money which I would like to know what to do with it. Also I would like to know who well pay the passage for person or persons going to Belize for the books.

I'm sorry to say it, but please address my letters Mrs Bardalez and not nurse Bardalez. OK thanks a lot.

As soon as we have a meeting, we'll discuss and appoint some one to whom the mgel should go to.

Sincerely

E Bardalez

#2

60

Rose Wood Street,
Paeroa Gordon Town,
21st April, 1987.

Mrs. Middlebrook,

Sorry, We had two Meeting since your visit but, we couldn't elect officers because it was only a few of us. Any way we'll try again this month.

As a Councelor I'm still trying to put a little spirit in the Organisation;

At times I go the hospital, and I talk to the Mothers about breast feeding, out side the Clinic day May, On one Occasion a mother question me about whats best for her baby and I did some explanation.

A mother also told me that her baby had Constipation and in reply I told her to stop ~~feeding~~ the baby formula and give her only the breast and I told her reason for doing so.

When I saw her another time she told me that it really helped.

Regards
Colleen

Orange Walk Dist
June 2nd. 1987.

Dear Eva,

I hope you're doing fine. I am writing to inform you that I've been counselling a few women when I go out along with the mobile clinic in the villages with the nurses from Orange Walk. At present I have not been to any of the houses because I am working with Nancy Minnett at Care office in Corozal. I am still on training yet as a District Trainer and Community Health Organizer for the villages in Orange Walk Dist. When ever I begin to go out in the villages I think I will be able to do more counselling house to house. Would you please send me some more forms for my monthly report. I would appreciate if you would give me a breastfeeding book as I didn't get any when I attended the sessions in Orang Walk.

Thanks

Yours Sincerely.
Angela N. Gillett

12

San Luis Village
Orange Walk Dist;
1st June, 1987.

Dear Mrs. Eva;

Hello!

How are you, long time we don't see you, hope that when you receive my letter you are in good health along with your family, friends. Please pass me this greetings also to Mrs Claudia & Mrs. Concha Velasquez who kindly ~~com~~ came here to spent some of times with us telling, sharing their experiences about breast-feeding. I also want to send greetings to the womens who are working their with you.

Thanks once again for your classes about Breast-Feeding.

San. Luis Village
Orange Walk Dist;
1st June, 1987.

Dear Mrs. Eva;

Hello!

How are you, long time we don't see you, hope that when you receive my letter you are in good health along with your family, friends. Please pass me this greetings also to Mrs Claudia & Mrs. Concha Velasquez who kindly ~~com~~ came here to spent some of times with us telling, sharing their experiences about breast-feeding. I also want to send greetings to the womens who are working their with you.

Thanks once again for your classes about Breast-Feeding.

Breast Is Best League
6 Church Street
P.O. Box 1203
Belize City, BELIZE
Central America
Telephone: 02-7398

BREAST IS BEST LEAGUE ONE DAY CONTINUING EDUCATION WORKSHOP
DECEMBER 19th, 1986

VENUE: Project HOPE, 6 Church Street, Belize City

OBJECTIVE:
(1) To raise the level of knowledge of Breastfeeding Counsellors already in the field to develop skills in counselling in breastfeeding and in general.
(2) To assess present Breastfeeding Counsellors' activities as stated by BIB League and encourage changes to improve and increase Breastfeeding promotion.

8:15 - 8:30	Registration	C. Velasquez
8:30 -9:00	Welcome & Workshop Overview	E. Middleton
9:00 - 9:30	Working at Clinics and Hospitals	C. Velasquez
9:30 - 10:10	Common Breastfeeding problems and solutions	E. Middleton
10:10 - 10:30	My Experiences as a BIB Counsellor	M. Perdomo
10:30 - 11:15	Assessment of present Breastfeeding activities	A. McKay
11:15 - 12:00	Importance of Breastfeeding for the high risk babies (Neonates)	C. Martinez
12:00 - 12:30	L U N C H	
12:30 - 1:00	Role of the BIB Office and Staff	E. Middleton
1:00 - 2:00	Improving Breastfeeding Promotion in 1987	A. McKay C. Velasquez
2:00 - 2:10	Raffle	BIB Counsellor
2:10 - 2:40	Women's Health	D. Haylock
2:40 - 3:00	Weaning foods Survey and Competition	G. Dennison
3:00 - 3:30	Workshop evaluation	E. Middleton
3:30 - 4:00	Workshop Certificates	S. Wade

REIMBURSEMENTS WILL BE GIVEN AT THE END OF THE DAY

Curriculum Guide + Syllabus for Post-graduate Midwifery program

INTEGRATION

MODULE X

Unit 3: Breastfeeding

Time: Theory:
Clinical:

Overall Objectives

At the end of the unit the student midwife will be able to understand the process of lactation, care for the lactating mother and infant, even in special situations, and teach the mother how to successfully breastfeed the baby.

Specific Objectives

1. Discuss the anatomy and physiology of the breast.
2. Discuss the physiology of lactation.
3. Discuss the pre-natal preparation and care of nipples.
4. Discuss nipple problems and their care.
5. Discuss breastfeeding information that will be taught to mothers pre-natally.
6. Discuss breastfeeding in special circumstances.
7. Discuss breastfeeding techniques and problems during the first twenty-four (24) hours.
8. Discuss breastfeeding in the post-natal period.
9. Discuss breast problems occuring during the post-natal period.
10. Discuss information that will be taught to mothers post-natally.

Clinical Objectives

1. Teach three (3) groups of mothers preparation and care of the nipples pre-natally.
2. Develop skills in recognizing nipple problems and make referrals.
3. Teach a minimum of at least five (5) mothers to successfully establish breastfeeding.
4. Attend at least one (1) Breast is the Best League meeting.

Content

1. Anatomy and Physiology of the Breast (see Module III, Unit 1)
2. Physiology of Lactation (see Module II, Unit I)
3. Preparation and Care of Nipples
   3.1 Washing nipples
   3.2 Exercise nipple
   3.3 Hand expression of colostrum
   3.4 Proper clothing
4. Nipple Problems
   4.1 Flat/inverted nipples
   4.2 Engorgement
5. Breastfeeding Information Pre-Natally
   5.1 Advantages of breastfeeding
   5.2 Establishing milk supply
   5.3 Maintaining milk supply
   5.4 Importance of colostrum
   5.5 Care of cracked and sore nipples
   5.6 Bonding- mother/child relationship
   5.7 Breast changes during pregnancy
   5.8 Manual expression of milk
   5.9 Mothers' nutrition (see Module X, Unit 2)
   5.10 Duration and frequency of breastfeeding
   5.11 Weaning
   5.12 Family spacing (see Module II, Unit 2)
   5.13 Breastfeeding and the working mother
   5.14 Breast is Best League
   5.15 Most common worries about breastfeeding
      5.15.1 Effects on breast (loss of figure)
      5.15.2 Menstrual period affects breastfeeding
      5.15.3 Cannot breastfeed when teething begins
      5.15.4 Each breast has different milk- salty and sweet
      5.15.5 Mother cannot eat particular foods and breastfeed
      5.15.6 Sun spoils breast milk
      5.15.7 Baby is allergic to breast milk
      5.15.8 Baby is constipated
   5.16 Use of breast shields for inverted nipples
6. Breastfeeding in Special Circumstances
   6.1 Cesarean childbirth
   6.2 Pre-mature baby
   6.3 Newborn with problems
      6. 3.1 Sleepy, placid baby
      6. 3.2 Colic
      6. 3.3 Jaundice
   6.4 Infants with Malformation of Nose, Mouth, or Digestive Tract
      6. 4.1 Choanal artresia
      6. 4.2 Cleft lip and cleft palate
      6. 4.3 Conditions causing vomiting
         6.4.3.1 Pyloric stenosis
         6.4.3.2 Intussusception
      6. 4.4 Imperforate anus

6.5 Problems with Babies with Altered Body Chemistry
- 6.5.1 Hypoglycemia
- 6.5.2 Diabetic
- 6.5.3 Phenylketonuria (PKU)
- 6.5.4 Malabsorption problems
  - 6.5.4.1 Cystic fibrosis
  - 6.5.4.2 Celiac disease

6.6 Infants with Developmental conditions
- 6.6.1 Hydrocephalic
- 6.6.2 Spina bifida
- 6.6.3 Cerebral palsy
- 6.6.4 Down's Syndrome

6.7 Twins

6.8 Adopted babies

7. Breastfeeding During First Twenty-four (24) Hours (see Module IV, Unit 2)

7.1 Put baby to breast on delivery table or within 30 minutes
- 7.1.1 Proper position of baby
- 7.1.2 Encouragement
- 7.1.3 Allow mother to hold and touch baby

7.2 Breastfeeding every 2-3 hours
- 7.2.1 Immunity of colostrum
- 7.2.2 Nutritive value of colostrum
- 7.2.3 Baby learns early
- 7.2.4 No bottles

7.3 Methods of breastfeeding
- 7.3.1 Comfort and privacy of mother
- 7.3.2 Breast held correctly
- 7.3.3 Gentle handling

7.4 Baby refuses breast
- 7.4.1 Air passages blocked
- 7.4.2 Mother relaxed
- 7.4.3 Extra fluids for mother
- 7.4.4 Patience

8. Breastfeeding During the Post-Natal Period

8.1 Proper positioning of infant

8.2 Emotional support

8.3 Reasons for not breastfeeding

8.4 Encouragement

8.5 Family support

9. Problems Occuring During Post-Natal Period

9.1 Engorgement
- 9.1.1 Etiology
- 9.1.2 Treatment
  - 9.1.2.1 Hand-express milk before nursing
  - 9.1.2.2 Breastfeed every 2 hours
  - 9.1.2.3 Empty breasts

9.2 Sore and cracked nipples
- 9.2.1 Etiology
- 9.2.2 Clinical manifestations
- 9.2.3 Management
  - 9.2.3.1 Expose breasts to air
  - 9.2.3.2 Mild ointment
    - 9.2.3.2.1 Pure lanolin
    - 9.2.3.2.2 Vaseline
  - 9.2.3.3 Application of ice
  - 9.2.3.4 Expose breasts to sunlight
  - 9.2.3.5 Short but frequent nursing
  - 9.2.3.6 Comfortable, soft clothing
  - 9.2.3.7 Relax
- 9.2.4 Sore nipples from thrush
  - 9.2.4.1 Treatment
    - 9.2.4.1.1 Refer to doctor
    - 9.2.4.1.2 Bathe nipples with vinegar solution
    - 9.2.4.1.3 Light coating vaseline
    - 9.2.4.1.4 Exposure to sun
- 9.2.5 Continue breastfeeding

9.3 Breast infection
- 9.3.1 Etiology
- 9.3.2 Predisposing factors
- 9.3.3 Clinical manifestations
- 9.3.4 Management of mother with breast infection
  - 9.3.4.1 Assessment: Biological
    - 9.3.4.1.1 History
    - 9.3.4.1.2 Present breastfeeding situation
    - 9.3.4.1.3 Physical exam of breasts
    - 9.3.4.1.4 Vital signs
  - 9.3.4.2 Plan of Care
    - 9.3.4.2.1 Medical referral
    - 9.3.4.2.2 Rest
    - 9.3.4.2.3 Application of heat
    - 9.3.4.2.4 Empty breast
  - 9.3.4.3 Culture and sensitivity
    - 9.3.4.3.1 Blood culture
    - 9.3.4.3.2 Drug therapy
    - 9.3.4.3.3 Antibiotics
    - 9.3.4.3.4 Analgestic

9.4 Breast Abscess
- 9.4.1 Transfer from maternity ward
- 9.4.2 Surgical intervention
- 9.4.3 Supportive nursing care
- 9.4.4 4 hourly TPR
- 9.4.5 Return to breastfeeding as soon as possible
- 9.4.6 Emotional support

9.5 Mother is ill
- 9.5.1 Infections
  - 9.5.1.1 Pneumonia
- 9.5.2 Contagious diseases
  - 9.5.2.1 Chicken pox
  - 9.5.2.2 Mumps
  - 9.5.2.3 Hepatitis
  - 9.5.2.4 Tuberculosis
  - 9.5.2.5 Malaria
- 9.5.3 Food poisoning
- 9.5.4 Heart disease
- 9.5.5 Arthritis

9.6 Drugs and the nursing mother

10. Breastfeeding Information for Mothers Post-Natally
- 10.1 Establishing milk supply
- 10.2 Re-lactation
- 10.3 Maintaining milk supply
- 10.4 Care of sore nipples
- 10.5 Breastfeeding and working mother
- 10.6 Weaning
- 10.7 Length of breastfeeding
- 10.8 Medications and breastfeeding
  - 10.8.1 Contraceptives
  - 10.8.2 Immunizations
  - 10.8.3 General medications
- 10.9 Nursing strike - baby's refusing breast milk
- 10.10 Lactation and women's sexuality

Teaching/Learning Experiences

1. Lecture/discussion
2. Guest speaker: demonstration and care
3. Slide show (Breastfeeding your baby-CFNI) or UNICEF
4. Handouts
5. Student Oral Reports on Handouts

Evaluation

1. Teaching mothers in pre-natal and post-natal clinics about breastfeeding.
2. Helping and teaching mothers to put baby to breast on maternity ward.
3. Students' ability to recognize problems and teach or make referrals.
4. Test
5. Student report on one of the handouts - oral report

Resources

Brewster, D. You Can Breastfeed Your Baby - Even in Special Situations. Rodale Press, 1979.

LaLeche League International. The Womanly Art of Breastfeeding, 3rd Edition. La Leche League International, 1981.

World Health Organization. Infant and Young Child Feeding Current Issues. World Health Organization, 1981.

Assignment Children, UNICEF. Breastfeeding and Health. United Nations Children's Fund, 1981.

World Health Organization. Breastfeeding. World Health Organization, 1979.

La Leche League International. How the Maternity Nurse Can Help the Breastfeeding Mother. La Leche League International, Inc. #118, 1980.

HANDOUTS: La Leche League International Information Sheets

Number	Title
107 9	Manual Expression
12 9	Sore Breasts
10 1	Breastfeeding and Juandice
13 1	Breastfeeding Your Premature Baby
20 1	Together and Nursing from Birth
51 1	Breastfeeding the Down's Syndrome Baby
55 1	Nursing An Adopted Baby
61 1	Iron Sufficiency in Breastfed Infants
80 1	Breastfeeding After a Cesarean Birth
81 9	Establishing Your Milk Supply
82 1	Breastfeeding a Baby with a Cleft in the Soft Palate
85 9	Increasing Your Milk
87 9	Breastfeeding: Does It Really Space Babies?
103 9	Nipple Care
121 9	How Mothers Learn to Love Their Newborn Babies
123 1	How a Baby Learns to Love
125 1	Thoughts about Weaning
148 1	Successful Lactation and Women's Sexuality
75 1	Nursing Siblings Who Are Not Twins
97 1	Stuck Nipples

77-1 Needs + Problems Babies... Toddlers Teens

Ministry of Health, Belize:

Advantages to Breastfeeding
Can Working Mother's in Belize Breastfeed? Yes
Sore Nipples
Breast is Best League
A New Baby in the Family, Breastfeeding, the Best Beginning

ATTACHMENT G

CURRICULUM FOR BREASTFEEDING COUNSELORS

BREAST IS BEST LEAGUE

SESSION I

- Introduction of trainer and trainees; Introduction game
- Discussion of Requirements and Rules for Breastfeeding Counselors
- Discussion of BIB concepts and practices regarding breastfeeding
- Definition of terms
- Discussion about "normal"; poem
- Distribute The Womanly Art of Breastfeeding, discuss readings and handouts
- Arrange time, place, date and refreshments/lunches for next meetings; discuss transportation arrangements
- Questions

SESSION II

- Anatomy and physiology of the breasts and lactation
- Facts about colostrum and breastmilk
- Nutrition during pregnancy and lactation; local foods and customs; anemia
- Prenatal care of the nipples; daily routine; manual expression; flat and inverted nipples
- Advantages of breastfeeding for mother and baby; group sharing
- Bonding; how babies learn to love; how mothers learn to love their babies; fathers and breastfeeding; discipline; grandparents

SESSION III

- Postnatal care of nipples and breasts; engorgement; sore nipples; breast infections and abscess
- Use and care of breast pumps; Demonstration; BIB policy on lending pumps
- Establishing the milk supply; increasing the milk supply
- Breastfeeding during the first 24 hours after delivery; advantages to mother and baby of breastfeeding within the first 30 minutes; how to help and encourage the mother at the first feedings; why to avoid formula, glucose water and water
- Importance of immunizations

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SESSION IV

- Common worries and old wives' tales about breastfeeding
- Questions and answers about the hospital
- Breastfeeding under special circumstances; including multiple births, thrush, jaundice, diarrhea, premature babies; when baby or mother are ill, adoption
- Drugs and breastfeeding
- Working mothers; experiences and ideas for working mothers
- Breastfeeding and child spacing; how breastfeeding affects the fertility and menstruation of individual women; birth control and breastfeeding
- Weaning; BIB policy on weaning; weaning foods and the introduction of foods; breastfeeding toddlers

SESSION V

- Oral Rehydration therapy and diarrhea in infants
- Discussion of the role of the breastfeeding counselor in the community
- Discussion of the importance of counselors working closely with nurses and health centers in their districts
- Exam and Review

- Graduation

BREASTFEEDING COUNSELORS' TRAINING-PRETEST

1. Colostrum is the medical term referring to the secretion from the navel of the newborn. T F

2. Approximately 95% of all women are able to breastfeed. T F

3. The more baby breastfeeds, the more milk the breasts will produce. T F

4. To be sure that the nipples are clean the mother should wash with soap and water and alcohol. T F

5. Engorement or the breasts happens when the baby does not breastfeed often. T F

6. Breast milk dries up when a woman becomes pregnant and the baby should be immediately taken off the breast. T F

7. Women who breastfeed are more likely to have breast cancer. T F

8. Breastfeeding causes the womb to return to normal size and position in about 30 days. T F

9. Cows milk during diarrhea attacks should be stopped and breastfeeding should be done more. T F

10. Studies have shown that the love between mothers and babies has no real effect on babies' growth and development. T F

11. Bottle feeding is good for the survival of the human race because you can measure and see how much the baby is getting. T F

12. Separating mother from baby in the maternity ward should be encouraged so the mother can rest and the baby won't be exposed. T F

13. The first milk produced by the breast after birth should not be given to the baby since it is not the real milk and can cause diarrhea. T F

14. The working mother should be encouraged to breastfeed her baby. T F

15. Along with breast milk other feeding should be started in the 4 to 6 month to make sure the baby is getting a proper diet. T F

16. It is necessary to give the baby water from birth in a hot country. T F

17. If the mother doesn't have enough milk she should give the baby a bottle. T F

18. When the baby is 1 year old she should be eating from the family pot. T F

19. A woman must drink milk to make enough milk for her baby. T F

20. A malnourished woman should be encouraged to bottle feed her baby. T F

2/87

Oct. 1984 rewritten approved Nov. 14, 1984

THE BY-LAWS FOR THE BREAST IS BEST LEAGUE
BELIZE

RTICLE 1 - NAME

The name of the organization is Breast is Best League, hereinafter referred o as B.I.B. The name shall be retained as long as the purpose, function and rinciples remain in force.

RTICLE 2 - PURPOSE

The purpose of B.I.B. is to teach, encourage, support, motivate, and give nformation to women in Belize about breastfeeding.

B.I.B. Shall be the co-ordinating body for the promotion of breastfeeding n Belize. As such B.I.B. shall work closely with the Ministry of Health.

B.I.B. shall establish a lending library which will contain information o support good breastfeeding practices. B.I.B. shall also offer its experienc nformation, and service to all interested professionals and lay persons.

RTICLE 3 - FUNCTION

The function of B.I.B. shall be:

1. To be responsible for answering inquiries and petitions for breast- eeding help.

2. To prepare individual volunteers to become qualified B.I.B. Breast- eeding Counselors and work in the clinics, hospital, and schools.

3. To establish and conduct neighborhood meetings on a regular basis to erve interested women.

4. To provide B.I.B. Breastfeeding Counselors, members of the medical eam, and other interested persons with continuing information and education.

5. To be responsible for the distribution of written material and audio- isual material which shall be considered of value to B.I.B.

RTICLE 4 - DECLARATION OF PRINCIPLES

We believe breast milk is the superior infant food and that mothering hrough breastfeeding is the most natural and effective way of understanding nd satisfying the needs of the baby. We further believe that breastfeeding s not an end in itself but an integral part of the whole human relationship.

We emphasize the normal and natural way of feeding babies, reviving the rt of breastfeeding; we recognize, however, that misinformation and the social ressure of our times can cause difficulties for the inexperienced mother.

We recognize that most questions and problems of nursing mother may en- ounter are not medical. On a mother-to-mother basis we help each mother find rkable solutions to problems and gain confidence in her own ability. B.I.B. es not intend to invade the jurisdiction of the physician.

We realize that the mother-child relationship extends beyond the breast- eding relationship. We therefore encourage mothers to continue to seek a ear understanding of the total development of the child.

TICLE 5 - GOVERNING BODY

B.I.B. Shall be directed by a Board of Directors of not fewer than seven mbers and not more than fifteen members. The Board of Directors shall

formulate and administer the total policy of B.I.B. The Board of Directors shall elect one of their members to act as President. This person shall be responsible for conducting the business of the Board meetings. The officers of B.I.B. shall consist of President, Vice President, Secretary, Treasurer, and 1 - 3 Advisors. These officers shall be elected by the Board of Directors at the annual meeting in January for elections. The Executive Administrator shall serve as an ex-official member.

When a member leaves the Board in mid-year, a special appointment shall be made to bring the number up to the required number for that year.

If an emergency situation should reduce the number of the Board to a number below the required number the Board is empowered to act to restore the reuqired number of the year.

Nurse Pat Benguche, Eva Middleton, and Michelle Perdomo shall be life members of the Board of Directors.

ARTICLE 6 - AFFILIATION OF GROUPS

1. Only groups officially affiliated by B.I.B. are entitled to use the name of B.I.B., Breast is Best League.

2. All groups shall use the material that B.I.B. chooses as official material.

ARTICLE 7 - ADHERENCE OF PRINCIPLES

Every B.I.B. representative is expected to uphold the By-laws when acting in any official capacity as a representative of the organization. Any B.I.B. representative who shall be found to violate these By-Laws, or who shall act in any way to discredit B.I.B. or any officially affiliated group, shall be notified in writing of said violation by the Board of Directors or their designee. Should this violation be continued or be repeated the result will be the removal of the right of the violator to represent B.I.B. in any capacity.

Any such violator has the right to have an appeal of this decision brought to the attention of the President of B.I.B.

Anyone who shall attempt to represent B.I.B. without official authorization to do so shall be subject to legal action by B.I.B.

Any League representative who, acting in an official capacity, offers or refers mothers to medical advice concerning breastfeeding other than that approved by the Board of Directors, violates the By-Laws and the responsibility for such violation rests entirely with the individual.

BREASTFEEDING COUNSELORS

WHO ARE WE AND WHAT DO WE DO? **BIB LEAGUE PHILOSOPHY**

As BREASTFEEDING COUNSELORS we are women who have successfully breast fed our babies and are interested in promoting breast-feeding in Belize by doing volunteer work in the clinics and other areas as needed. Thus we are:

1. lay persons trained to be BREASTFEEDING COUNSELORS. We are NOT medical persons and we DO NOT give medical advice.

2. trained women to help other women by giving accurate information, share our experiences, support and encourage women to breastfeed their babies.

3. guests in the clinic, maternity ward and class rooms and as such we can greatly help pregnant and lactating mothers and students in schools. We can help ease the load of the public health and maternity nurse, but more than anything else we are there to help the women.

4. we never jeopordize our being in the clinics, etc. by critising the nurses or health program. (Any problems should be taken directly to nurse in charge call BIB office 7398 and she will help work through the problems.)

5. mothers/women who care about others and communicate our care by the way we talk and share with other women. We never humiliate the women, make fun of or laugh or in any way hurt their feelings. We listen and care for we can make a very big difference and that's why we are working within the community.

HOW DO WE TALK AND DEAL WITH WOMEN:

Our approach with the women we work with will make all the difference in our success. Generally we will talk to individual mothers but sometimes there will be opportunities to teach in small groups. We practice the following rules:

1. We are always gentle in our approach --- we never speak so loudly when talking to an individual that others can easily hear us.

2. We never make fun of or put down a woman, no matter what she is or is not doing.

3. We believe that women are trying to do the very best for their babies.

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4. We always give correct information ---- breastfeeding sells itself.

5. The choice to breastfeed is each individual mothers --- we can only give them information and care --- always be kind so if a mother changes her mind she can return for help and support.

6. What you hear at the clinic is confidential --- between you and the mother you are talking to --- don't gossip, don't tell others --- remember to treat her like you'd like her to treat you. Build relationships with the women. Get to know them and care about all aspects of their life --- not just breastfeeding.

7. Don't say something unless you are certain about it. If you have questions call BIB League or ask a nurse. If you can't answer a moms questions ask for her address, and she'll mail the lady the information she needs. Call BIB League.

8. Watch the language you use. Use words that lift, encourage, and help --- never use words that hurt or harm.

PROGRAMME TO DATE

1985 - 1986

1. Sponsored 3 public displays at Central Park Belize City.

2. Participate in displays with various groups, BNCN in Belmopan at the annual Agric. show, Women's Bureau during Women's Week, preschool association during preschool month.

3. Trained 22 student nurses as Breastfeeding Counselors.

4. Trained 59 women as B.F. Counselors - 15 in Toledo, 14 in Cayo, 15 in Belize City and 15 in Belize Rural.

5. Thought midwifry professional and practical nurses at the Belize School of Nursing.

6. Produce 3 breastfeeding promotion spots for T.V. advertisement.

7. Published and mailed newletters.

8. Participate in a seminar of health workshops through the Ministry of Health and other agencies.

9. Taught breastfeeding classes at 4 high schools in Belize City 2 in the districts and also in 3 upper division primary schools Toledo, Belize rural and Belize City.

10. Prepare and aired fifteen radio talks.

11. Produced and aired a song on importance of breastfeeing in Belize.

12. Support all members of the following health groups:
    Maternal Child Health Committee
    Belize Nutrition Communication Network
    National Health Education Committee
    Child Survival Task Force

13. A member of CVSS, Women and Development and Belize Development Corp.

14. Initiated a membership drive to provide an going financial support.

15. Conduct monthly Counselors meeting in Toledo, San Ignacio, Ladyville, Belize City.

16. Visited 27 health centers country wide.

17. Gave awards to 5 outstanding persons in the promotion of B.F.

18. Produce B.F. certificates to be given by the MCH nurses through the Ministry of Health to every woman who has successfully breast fed a baby.

19. Trained Community Health Workers in Orange Walk in Breastfeeding promotion.

20. Participated in the La Leche Conference in Washington 1985.

21. Made over 1,000 house calls on breastfeeding woman country wide.

22. Counseled over 985 women on the hotline.

23. Participated in preschool workshops and gave parents lectures on breastfeeding - 3 in Belize City, 1 in Dangriga, 1 in Corozal and 1 in Orange Walk.

24. Talked at two reap schools to 57 parents and 83 students Maskal and St. Martins.

25. Counsel in breastfeeding at the weekly booking clinics and prenatal clinics as average of 120 women are seen weekly.

26. Organized a parent library with books bought through funds given by AID and a British High Commission Bk. grant.

27. Counsel and lend 263 breast pumps to working women country wide.

28. Produced and sold 300 T-Shirts, 74 Bags, 200 Baby T-Sshirts, promoting breastfeeding.

29. Presented a 10 minute talk on BIB League Distribution Center at the World Wide La Leche Conference 1985.

30. Daily breastfeeding message, to provoke citizens thought on B.F. over radio.

31. Conduct parenting classes in the St. Martins area for 11 young parents.

32. Organized a breastfeeding day during Women's week for all high schools and adults in Belize City on March 5, 1986.

33. Gave award to the Belize City nursery for their full support in the promotion of total B.F. in the high risk nursery.

34. Seek and got funds to have a full time BIB field worker.

35. Produced and disseminated 2,000 BIB calendars country wide and abroad.

36. Became a member of La Leche League, International B.F. affiliated.

37. Organized leadership training for breastfeeding group leaders.

38. Assisted in the preparation of Nutrition policy recommendations to the Ministry of Health, Belize.

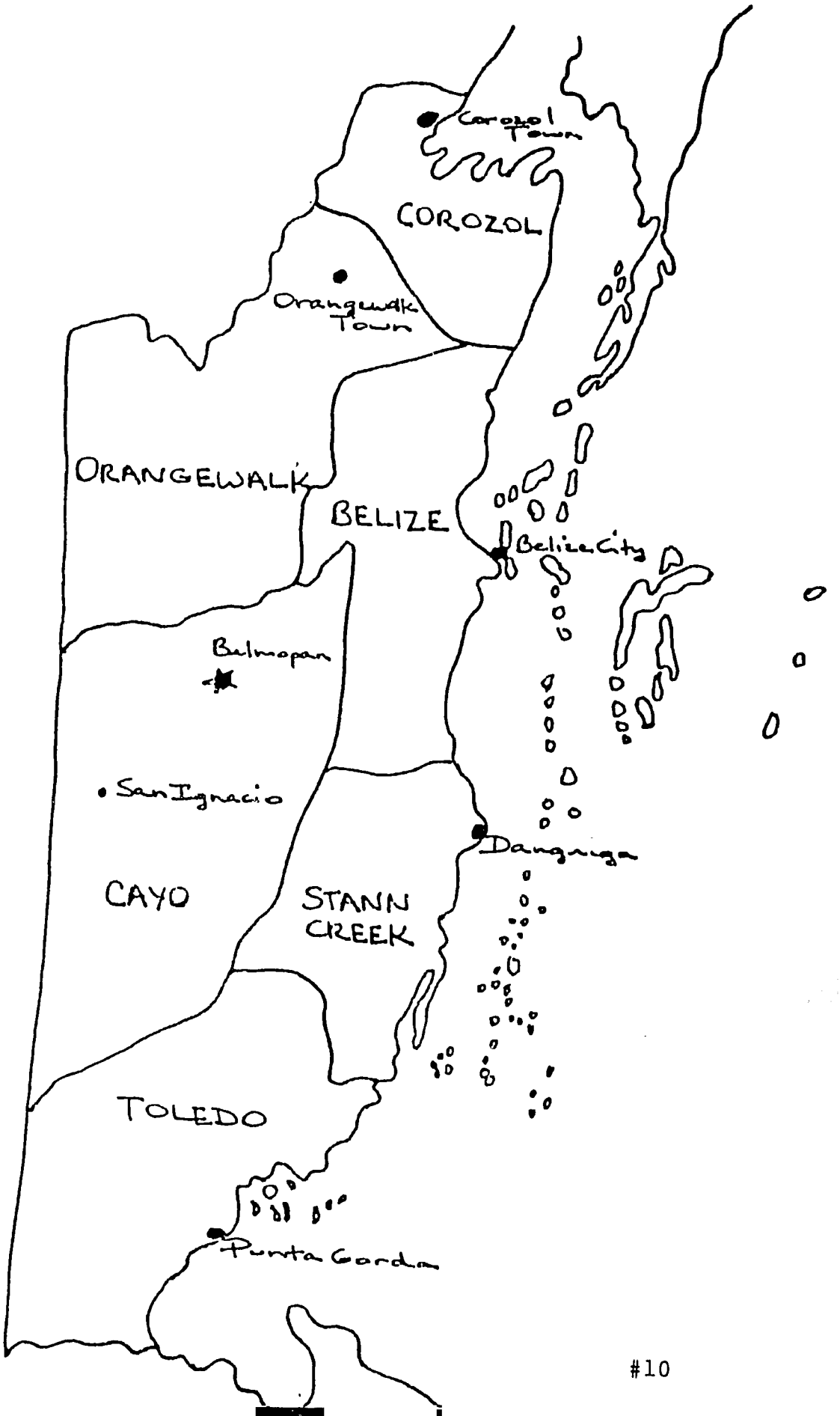
39. Published an article in the life magazine.

40. Published 11 articles in the newspaper.

41. Met with the Minister and P.S. of Health to discuss BIB role in the promotion of infant health in Belize.

42. Began two small breastfeeding lending libraries 1 in Toledo and 1 in San Ingacio.

43. Monthly Breastfeeding Counsellors and Executive Board meetings are held.

44. Quarterly Advisory Board meetings are held in Belize City.

DISTRICTS OF BELIZE