

Maternity Care Outcome Measurement

BFHI projects as example

-- Policy, Research, & Practice

國立台北護理健康大學
高美玲 教授
meeiling@ntunhs.edu.tw
28227101轉3260
IBCLC #210-61187

大綱

- 世界哺乳之趨勢 
- 母嬰親善醫院之緣由 
- 母嬰親善醫院的十大措施 
- 有關國內我所參與母嬰親善醫院認證的相關研究

母乳哺餵的世界趨勢

- 1981年5月第34屆世界衛生大會制定國際母乳代用品銷售守則
- 1989年世界衛生組織及聯合國兒童基金會發表“保護,促進和支持哺餵母乳的聯合聲明”提出嬰兒親善醫院10大措施
- 1990年7月全球高階層會議強調哺餵母乳是兒童的基本權力
- 1991年6月世界衛生組織及聯合國兒童基金會提出嬰兒親善醫院的方案

3

全球通過認證的愛嬰醫院逐年增加

- 世界第一所愛嬰醫院於1992年3月在菲律賓培拉醫院誕生。
- 1995 4,300 家
- 1996 8,000 家
- 1997 13,000 家
- 2006 約 20,000 家

UNICEF/WHO Baby Friendly Hospital Initiative, Assessor Training 2005

4

愛嬰醫院(BFHI)的目標

執行

成功執行母乳哺育的十大措施

終止

醫療機構提供免費及低價的母乳代用品

5

我國母嬰親善醫療院所認證

- ☐ 以世界衛生組織及聯合國兒童基金會愛嬰醫院的標準為基準
- ☐ 保有愛嬰醫院10大措施精神下，配合國內現況修訂認證基準
- ☐ 90年開始由婦產科醫學會承辦國內的認證工作
- ☐ 96年起由醫策會接手承辦
- ☐ 100年由婦產科醫學會接手承辦

6

母嬰親善醫療院所認證基準

- 以愛嬰醫院十大措施為基礎
- 醫策會母嬰親善醫療院所專案小組委員會議
- 認證委員行前共識會議討論

7

我國母嬰親善醫療院所認證

10大措施

- 措施一：訂定明確的支持哺餵母乳政策
- 措施二：提供照護母嬰相關工作人員教育訓練
- 措施三：提供孕婦哺餵母乳之相關衛教與指導
- 措施四：幫助產婦產後儘早開始哺餵母乳
- 措施五：提供母親哺餵母乳及維持奶水分泌等相關指導及協助

8

我國母嬰親善醫療院所認證

10大措施

措施六：除有醫療上的需求之外，不得提供哺餵母乳的嬰兒母乳以外的食物或飲料給嬰兒

措施七：實施親子同室

措施八：鼓勵依嬰兒的需求哺餵母乳

措施九：不得提供嬰兒人工奶嘴餵食或安撫奶嘴

措施十：鼓勵院所內成立母乳哺餵支持團體，並建立轉介系統



In the beginning....

Research studies and the outcomes (1998-2011)

A. Research studies related to hospital breastfeeding policy

- ☐ The Effectiveness of Baby-Friendly Hospital Initiative to Promote Breastfeeding (NSC, 1998-2001)
- ☐ Baby-Friendly Hospital Initiative Appraisal Plan in Taiwan (DOH, 2001-2011)
- ☐ Baby-Friendly Hospital Initiative Counselling Plan in Taiwan (DOH, 2006-2011)
- ☐ Breastfeeding educators training program (DOH, 2008-2011)
- ☐ The impact factors of implementation “Baby-Friendly Hospital” and its clinical applications (DOH, 2004)
- ☐ Breastfeeding Practice in Taiwan – Evaluation the non-Baby-Friendly Hospitals Intervention Strategies to Breastfeeding Practice (DOH, 2009-2010)

B. Research studies related to breastfeeding policy in working place

- ☐ The experiences of women who combined breastfeeding and working (NSC, 2003)
- ☐ Utilization Donabedian Model to evaluate the Quality of Breastfeeding Room (DOH, 2003)
- ☐ An Breastfeeding Educational Training Program in Workplace (DOH, 2004-2006)

C. Research studies related to breastfeeding support in community (DOH, 2006 & 2011)

The Effectiveness of Baby-Friendly Hospital Initiative to Promote Breastfeeding

Meei-Ling Gau, RN, PhD
National Taipei University of Nursing
and Health Sciences
Taiwan, ROC

Project Funded by National Council of Science
NSC89-2320-B-227-004
NSC90-2320-B-227-001
NSC90-2314-B-227-002

Reasons of Practice of BFHI in Taiwan

- 1.** Low breastfeeding rate.
- 2.** The promotion of formula was strong.
- 3.** The appeal of international breastfeeding movement and increase of breastfeeding rate.

Comparison of breastfeeding rate between Taiwan and Other Countries

Country	EBF (year)	MBF (year)
China	64% (1994)	98% (1994)
Sweden	61% (1993)	98% (1996)
United States	21% (1997)	59% (1996)
Poland	17% (1995)	62% (1996)
Taiwan	5% (1996)	36% (1996)
Thailand	4% (1996)	99% (1993)

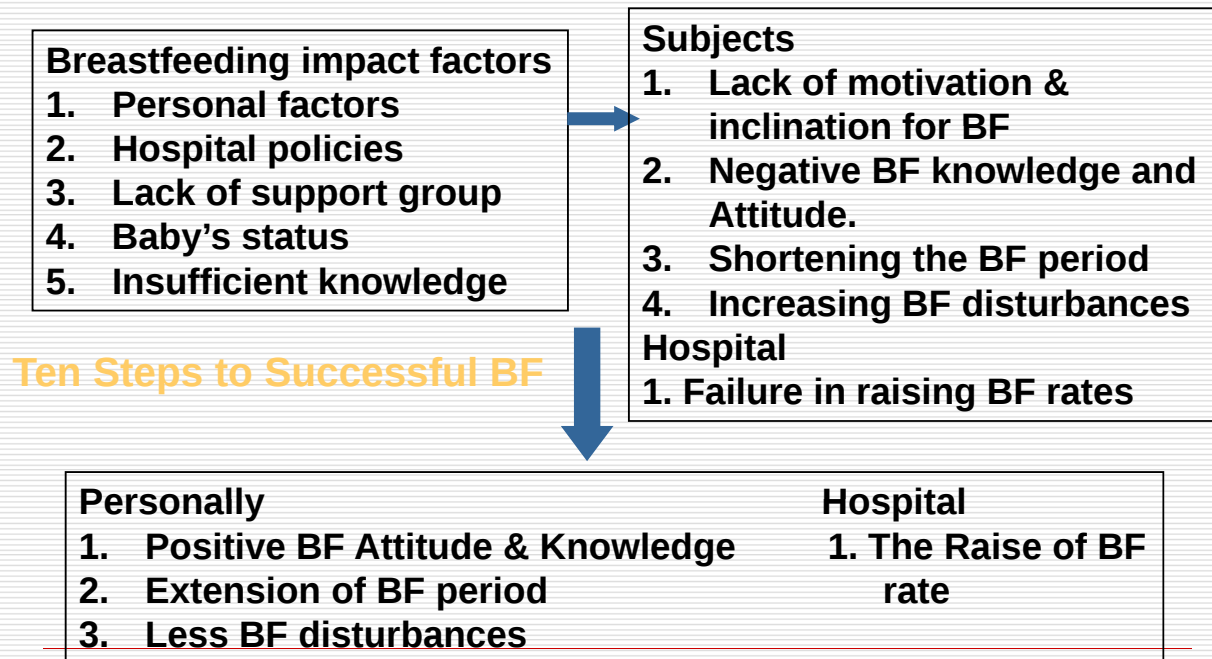
15

Study Purposes

1. to assess the impact of changing hospital policies on the rate and duration of breastfeeding,
2. to assess the difference of subjects breastfeeding knowledge, attitude and problems between experiment and control groups.

16

Conceptual Framework



17

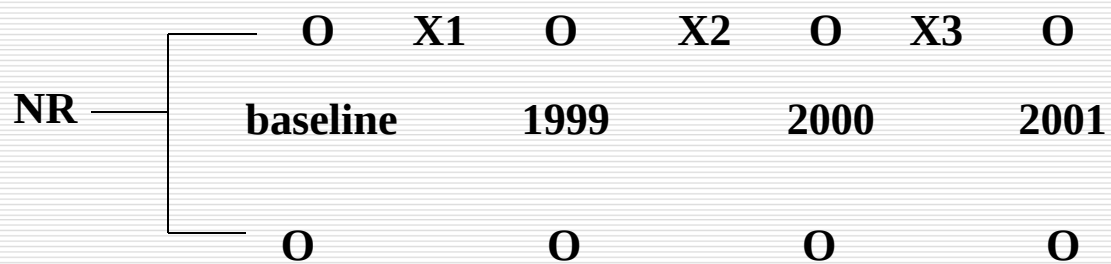
Research Hypothesis

1. Subjects in BFHI hospitals have more positive attitude and knowledge to breastfeeding.
2. Subjects in BFHI hospitals face less breastfeeding problems.
3. BFHI hospitals have higher breastfeeding rate and longer continued breastfeeding period.
4. The trends of breastfeeding rate of the BFHI hospitals is increasing during 1999-2001.

18

Research Design

□ Quasi-experimental design



Note: baseline data= breastfeeding rate during hospitalization in 1998

19

Study Samples

□ Hospital

Experimental Group – 7 hospitals

Control Group – 5 hospitals

□ Subjects – 3934 in total (E=2947; C=987)

1999 N = 909 (E=748; C=161)

2000 N = 1555 (E=1143; C=411)

2001 N = 1471 (E=1056; C=415)

20

Outcome Measures

Unit of analysis – 2 levels

□ Subject Level

Breastfeeding Knowledge
Breastfeeding Attitude
Breastfeeding Disturbance

□ Hospital Level

Breastfeeding rate (EBF, MBF, & TBF)
(hospitalization, PP 2wks, PP 1m, PP 2ms)

21

Table 1. reliability of research instruments (1999-2001)

Instrument	Year	# of items	1999	2000	2001
Breastfeeding Knowledge Scale		32	.81	.80	.78
Breastfeeding Attitude Scale		20	.80	.80	.80
Breastfeeding Disturbance Scale		30	.85	.83	.84

22

Table 2. Comparisons of Demographic Data between Experimental and Control groups (1999-2001) (I)

Variable	1999			2000			2001		
	Exp.	Control	t	Exp.	Control	t	Exp.	Control	t
Age	30.72 (4.23)	30.01 (4.10)	1.9	30.70 (4.13)	30.47 (4.33)	.96	30.85 (4.29)	30.94 (4.29)	-.35
Maternal Leave (days)	48.63 (10.22)	49.11 (10.32)	-.44	49.46 (15.46)	70.95 (8.44)	-.76	50.62 (16.50)	49.06 (10.13)	1.43
Gestational Weeks	38.88 (1.64)	38.83 (1.85)	.33	38.80 (1.52)	38.82 (2.21)	-.23	38.75 (1.66)	38.89 (1.44)	-1.49
Birth Weight (gm)	3213.0 (440.7)	3195.4 (412.9)	.46	3218.8 (896.3)	3243.4 (457.7)	-.53	3168 (435.5)	3205.1 (415.3)	-1.47

23

Table 1

The differences in demography between the experimental and control groups (ratio variables)

Variable	2000			2001			2002		
	Experiment group (n = 1314) $\bar{X}$ SD	Control group (n = 375) $\bar{X}$ SD	t	Experiment group (n = 1144) $\bar{X}$ SD	Control group (n = 568) $\bar{X}$ SD	t	Experiment group (n = 869) $\bar{X}$ SD	Control group (n = 311) $\bar{X}$ SD	t
Age	30.88 (4.19)	29.92 (4.45)	1.92	30.89 (4.17)	30.51 (4.19)	1.74	30.96 (4.04)	30.92 (4.48)	0.14
Maternity leave (days)	48.93 (9.36)	49.23 (9.42)	-0.44	49.53 (9.38)	50.06 (9.26)	-0.85	49.22 (10.12)	48.49 (9.87)	0.87
Gestational weeks	38.83 (1.56)	38.94 (1.75)	0.33	38.74 (1.64)	38.82 (1.96)	-1.32	38.81 (1.51)	38.77 (1.47)	0.45
Baby's weight (g)	3225.07 (848.86)	3213.30 (409.31)	0.46	3184.38 (437.38)	3214.13 (438.72)	-0.53	3177.15 (411.80)	3208.63 (441.70)	-1.13

24

Table 2
The differences in the demography and breastfeeding-related data between the experimental and control groups (Nominal/Ordinal levels)

Year	2000			2001			2002		
Variable	Experiment group	Control group	χ^2	Experiment group	Control group	χ^2	Experiment group	Control group	χ^2
Education									
Under junior college	422	126	1.11	303	168	2.63	299	97	1.07
Over junior college	767	200		722	331		477	180	
Occupation									
None	401	116	3.86	346	166	0.54	263	89	6.60
Constant day shift	695	184		592	302		439	173	
Constant night shift	12	8		14	6		13	1	
Rotation	54	15		45	20		44	10	
Parities									
Primiparous	648	197	3.79	569	274	0.15	446	164	0.36
Multi-parous	543	129		456	229		329	111	
Gestational age (weeks)									
Full term	1001	281	0.98	856	428	0.70	658	230	0.47
Premature	191	45		170	75		118	47	
Delivery method									
Vaginal	804	233	1.91	725	347	0.45	537	201	1.11
Cesarean	388	93		301	156		239	76	
Parental leave									
Yes	130	30	5.29	115	46	2.78	130	35	5.24
No	632	172		527	282		362	149	
Milk-expressing time									
Yes	197	43	1.60	139	60	1.35	163	47	4.51
No	571	157		505	270		333	139	
Time to decide feeding style									
Before pregnancy	645	176	3.94	571	277	0.07	443	144	1.89
During pregnancy	201	42		181	89		129	53	
After delivery	338	105		261	131		200	76	

25

Table 3

The differences in breastfeeding knowledge and attitude between the experimental and control groups

Year	2000			2001			2002		
Variables	Experimental (n = 1339) $\bar{X} \pm SD$	Control (n = 380) $\bar{X} \pm SD$	t	Experimental (n = 1144) $\bar{X} \pm SD$	Control (n = 568) $\bar{X} \pm SD$	t	Experimental (n = 869) $\bar{X} \pm SD$	Control (n = 313) $\bar{X} \pm SD$	t
Breastfeeding knowledge	22.15 $\pm$ 4.74	19.59 $\pm$ 5.08	9.14**	23.05 $\pm$ 4.39	21.03 $\pm$ 4.85	8.64**	24.09 $\pm$ 4.05	22.23 $\pm$ 4.38	6.79**
Breastfeeding attitude	72.57 $\pm$ 8.90	70.38 $\pm$ 8.06	4.06**	72.99 $\pm$ 8.77	71.22 $\pm$ 8.63	3.90**	73.94 $\pm$ 8.94	72.68 $\pm$ 8.45	2.09*

Note: ** $p < 0.001$; * $p < 0.05$.

Table 4

The differences in the weighted breastfeeding rates between the experimental and control groups during hospitalization and at 2 weeks, 1 and 2 months postpartum

	1999 ^a Experimental (<i>n</i> = 1082) $\bar{X} \pm SD$	Control (<i>n</i> = 541) $\bar{X} \pm SD$	2000 Experimental (<i>n</i> = 1339) $\bar{X} \pm SD$	Control (<i>n</i> = 380) $\bar{X} \pm SD$	2001 Experimental (<i>n</i> = 1144) $\bar{X} \pm SD$	Control (<i>n</i> = 568) $\bar{X} \pm SD$	2002 Experimental (<i>n</i> = 869) $\bar{X} \pm SD$	Control (<i>n</i> = 313) $\bar{X} \pm SD$	<i>F</i> Between ^b (Within)
<i>(A) Hospitalization</i>									
EBFR	0.30 ± 0.24	0.24 ± 0.006	0.34 ± 0.24	0.22 ± 0.007	0.46 ± 0.21	0.23 ± 0.05	0.50 ± 0.16	0.23 ± 0.25	236.25* (716.51*)
MBFR	0.60 ± 0.25	0.82 ± 0.07	0.58 ± 0.26	0.81 ± 0.07	0.47 ± 0.24	0.90 ± 0.03	0.44 ± 0.19	0.84 ± 0.24	165.22* (403.15*)
TBFR	0.92 ± 0.03	0.82 ± 0.08	0.94 ± 0.03	0.82 ± 0.07	0.95 ± 0.03	0.94 ± 0.04	0.95 ± 0.04	0.95 ± 0.02	289.72* (681.89*)
<i>(B) Two weeks postpartum</i>									
EBFR	0.19 ± 0.07	0.06 ± 0.02	0.18 ± 0.04	0.08 ± 0.02	0.22 ± 0.04	0.06 ± 0.001	0.26 ± 0.04	0.05 ± 0.03	1936.68* (80.56*)
MBFR	0.27 ± 0.07	0.33 ± 0.07	0.26 ± 0.04	0.34 ± 0.03	0.25 ± 0.04	0.35 ± 0.07	0.24 ± 0.03	0.39 ± 0.06	1030.39*** (12.57*)
TBFR	0.46 ± 0.04	0.39 ± 0.05	0.45 ± 0.01	0.42 ± 0.01	0.47 ± 0.01	0.41 ± 0.07	0.51 ± 0.03	0.44 ± 0.03	920.73* (296.60*)
<i>(C) One month postpartum</i>									
EBFR	0.16 ± 0.04	0.06 ± 0.02	0.15 ± 0.03	0.08 ± 0.02	0.18 ± 0.03	0.06 ± 0.001	0.23 ± 0.05	0.03 ± 0.02	1744.93* (43.10*)
MBFR	0.21 ± 0.06	0.25 ± 0.07	0.20 ± 0.03	0.23 ± 0.03	0.19 ± 0.03	0.24 ± 0.05	0.21 ± 0.03	0.30 ± 0.03	732.29* (70.24*)
TBFR	0.36 ± 0.05	0.30 ± 0.05	0.35 ± 0.01	0.30 ± 0.01	0.38 ± 0.02	0.30 ± 0.05	0.44 ± 0.05	0.34 ± 0.02	1174.80* (206.45*)
<i>(D) Two-month postpartum</i>									
EBFR	0.09 ± 0.03	0.03 ± 0.02	0.06 ± 0.02	0.05 ± 0.02	0.08 ± 0.03	0.03 ± 0.004	0.12 ± 0.04	0	1046.32* (5.88*)
MBFR	0.11 ± 0.03	0.11 ± 0.04	0.05 ± 0.02	0.02 ± 0.007	0.08 ± 0.02	0.06 ± 0.02	0.09 ± 0.02	0.13 ± 0.02	0.04 (48.38*)
TBFR	0.19 ± 0.03	0.14 ± 0.02	0.11 ± 0.03	0.07 ± 0.02	0.16 ± 0.05	0.08 ± 0.02	0.21 ± 0.05	0.13 ± 0.02	423.23* (60.15*)

27

Table 5

Relationships among Breastfeeding attitude, breastfeeding knowledge, breastfeeding initiation, and breastfeeding duration

Variables	BF knowledge	BF attitude	BF initiation	BF duration
BF knowledge	—	0.28*	0.23*	0.17*
BF attitude		—	0.23*	0.16*
BF initiation			—	0.28*
BF duration				—

Note: BF = breastfeeding; **p* < 0.001.

28

Discussion

- ☐ The change of hospital policies has a positive impact on BF knowledge and attitude.
- ☐ The change of hospital policies has a positive impact on BF rate.
- ☐ The change of hospital policies has a positive impact on BF durations.

29

Limitations

- ☐ The standards of BFHI policies have been modified due to cultural issues.
- ☐ Subjects follow up issues
- ☐ Mortality issue – hospital loss
- ☐ Maturation issue

30

ISSUES

- ☐ Process measure or outcome measure
- ☐ Outcome indicators?
(rate? Knowledge? Performance?)
- ☐ Who is going to evaluate?
- ☐ When? (point? Period? All the time?)

台灣地區嬰兒親善醫院實施現況與未來展望

陳昭惠 高美玲 盧玉瀛 潘履嵐

陳昭惠：陽明大學醫學士，現任台中榮民總醫院新生兒部主任
高美玲：美國馬里蘭大學護理哲學博士，現任國立台北護理學院副教授
盧玉瀛：陽明大學護理研究所碩士，現任國立台北護理學院講師
潘履嵐：國立台北護理學院肄業，現任研究助理

ANALYSIS OF THE OUTCOMES AT BABY-FRIENDLY HOSPITALS: APPRAISAL IN TAIWAN

David Redhelm Weng,¹ Chun-Sen Hsu,² Meei-Ling Gau,³
Chao-Huei Chen,⁴ and Chung-Yi Li⁵

¹Bureau of Health Promotion, Department of Health, Executive Yuan, Taipei; ²Department of Obstetrics, Taipei Municipal Wan Fang Hospital, Taipei; ³National Taipei College of Nursing, Taipei; ⁴Division of Neonatology, Taichung Veteran's General Hospital, Taichung; ⁵Department of Public Health, Fu-Jen Catholic University, Taipei, Taiwan.

「嬰兒親善醫院」政策之介紹 Introduction to the Baby-Friendly Hospital

高美玲 M. L. Gau • 陳昭惠 C. H. Chen
盧玉嵐 Y. Y. Lu • 潘履嵐 L. L. Pan

高美玲女士：美國馬里蘭大學護理哲學博士，現任國立台北護理學院副教授兼國際學術交流組組長。

陳昭惠女士：國立陽明大學醫學士，現任台中榮民總醫院新生兒部主任。

盧玉嵐女士：國立陽明大學護理研究所碩士，現任國立台北護理學院講師。

潘履嵐女士：國立台北護理學院護理系肄業，現任研究助理。



Available online at www.sciencedirect.com

SCIENCE @ DIRECT®

International Journal of Nursing Studies 41 (2004) 425–435

INTERNATIONAL JOURNAL OF
NURSING
STUDIES

www.elsevier.com/locate/ijnurstu

Evaluation of a lactation intervention program to encourage breastfeeding: a longitudinal study

Meei-Ling Gau*

Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing, 365 Ming-Te Road, Peitou, Taipei 112, Taiwan

Received 1 July 2003; received in revised form 14 October 2003; accepted 5 November 2003

35

Journal of Nursing Research Vol. 11, No. 2, 2003

Common Problems of Clinical Performance Examination in Breastfeeding Instruction for Nursing Baccalaureate Students

Fang-Hui Chiu • Meei-Ling Gau* • Sue-Chen Kuo** • Ue-Lin Chung***

36

Supplementation with Cup-feeding as A Substitute for Bottle-feeding to Promote Breastfeeding

Ya-Yi Huang, RN, MSN; Meei-Ling Gau¹, RN, PhD; Chiu-Mieh Huang², RN, PhD;
Jian-Tao Lee³, RN, PhD

WOMEN'S HEALTH

Journal of Clinical Nursing

Community-based epidemiological study on breastfeeding and associated factors with respect to postpartum periods in Taiwan

Su-Chen Kuo PhD RN

Associate Professor, Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing, Taipei, Taiwan

Chi-Ho Hsu PhD RN

Assistant Professor, Department of Nursing, National Taipei College of Nursing, Taipei, Taiwan

Chung-Yi Li PhD

Statistician/Professor, Department of Public Health, College of Medicine, Fu-Jen Catholic University, Taipei, Taiwan

Kuan-Chia Lin PhD

Statistician/Assistant Professor, Department of Nursing, National Taipei College of Nursing, Taipei, Taiwan

Chao-Huei Chen MD

Paediatrician, Division of Neonatology, Department of Pediatrics, Taichung Veterans General Hospital, Taichung, Taiwan

Meei-Ling Gau PhD RN

Professor, Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing, Taipei, Taiwan

Yi-Hung Chou MD

Neonatologist, Division of Neonatology, Chang-Gun Children's Hospital, Taipei, Taiwan

Effects of *Gua-Sha* Therapy on Breast Engorgement: A Randomized Controlled Trial

Jin-Yu Chiu • Meei-Ling Gau* • Shu-Yu Kuo** • Yung-Hsien Chang***
Su-Chen Kuo**** • Hui-Chuan Tu*****

MIDWIFERY

Journal of Clinical Nursing

Evaluating effects of a prenatal web-based breastfeeding education programme in Taiwan

Mei Zen Huang MS, CNM, RN

Registered Nurse, Delivery Ward, Shin Kong Wu Ho-Su Memorial Hospital, Taipei, Taiwan

Su-Chen Kuo PhD, CNM, RN

Associate Professor, Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing, Taipei, Taiwan

Melissa D. Avery PhD, CNM, FACNM

Associate Professor, Nurse-Midwifery Program, School of Nursing, University of Minnesota, MN, USA

Wei Chen PhD

Associate Professor, Department of Information Management, National Taipei College of Nursing, Taipei, Taiwan

Kuan-Chia Lin PhD, MPH

Statistician and Assistant Professor, Department of Nursing, National Taipei College of Nursing, Taipei, Taiwan

Meei-Ling Gau PhD, CNM, RN

Professor, Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing, Taipei, Taiwan

Factors Related to Milk Supply Perception in Women Who Underwent Cesarean Section

Su-Ying Lin¹ • Jian-Tao Lee² • Cherng-Chia Yang³ • Meei-Ling Gau^{4*}

¹RN, IBCLC, MSN, Clinical Nursing Teacher, Department of Nursing, Chang Gung Institute of Technology •
²RN, PhD, Assistant Professor, Graduate Institute of Nursing, Chang Gung University • ³MD, IBCLC, Director of
Medical Department, St. Paul's Hospital • ⁴RN, IBCLC, PhD, Professor, Graduate Institute of Nurse-Midwifery,
National Taipei University of Nursing and Health Sciences.

Factors Related to Maternal Perception of Milk Supply While in the Hospital

Ya-Yi Huang • Jian-Tao Lee* • Chiu-Mieh Huang** • Meei-Ling Gau***

職能治療人員的母乳哺餵態度及知識

葉蘭蓀¹ 高美玲² 周映慧¹ 曾美惠³ 李守謙⁴ 紀昕妤⁵

生產醫療措施與計畫剖腹生產產婦泌乳起始時間之相關研究

林素瑛¹ 李絳桃² 高美玲³

運用刮痧協助產後脹奶婦女之照護經驗

邱靜瑜 張靜宜* 高美玲**

陰道生產之產婦首次泌乳時間及其相關因素

林素瑛 高美玲* 李佳琳** 李絳桃***

哺餵母乳、親子同室和感染控制

高美玲

Breastfeeding, Rooming-in and Infection Control

Meei-Ling Gau

國立台北護理學院護理助產研究所教授

RN, PhD, Professor, Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing

新生兒無效吸吮型態與負向吸吮行為之相關因素

黃雅儀 李絳桃* 高美玲** 黃久美***

網路母乳哺餵教學對嬰兒吸吮行為之 成效探討

黃美荳¹ 郭素珍² 高美玲³

Evaluating Effects of a Prenatal Web-based Breastfeeding Education Program on Infant Sucking Behavior

Mei-Zen Huang¹ Su-Chen Kuo² Meei-Ling Gau³

¹ 新光吳火獅紀念醫院護理部護理師暨國立台北護理學院護理研究所博士班研究生

RN, MS, Shin Kong Wu Ho-Su Memorial Hospital; Doctoral Student, Graduate Institute of Nursing, National Taipei College of Nursing

² 國立台北護理學院護理助產研究所副教授兼所長

RN, PhD, Associate Professor and Director of the Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing

³ 國立台北護理學院護理助產研究所教授

RN, PhD, Professor of the Graduate Institute of Nurse-Midwifery, National Taipei College of Nursing

營造職場友善的哺乳環境—— 從醫院做起

高美玲 郭素珍* 吳祥鳳**

營造友善的職場哺乳環境

國立台北護理學院 高美玲教授兼所長

【讀者來函】黃筑榆、鄭夙芬(2006)·降低嬰兒猝死症發生的危險——執行安全睡眠措施·刊登於護理雜誌53卷4期11-16頁。

【Letter to the Editor】Reducing the Risk of Sudden Infant Death Syndrome Through Safe Sleep Practices

陳昭惠 高美玲*

Our achievement

- ❑ Improving the breastfeeding rate (comparable to US, Japan)
- ❑ Creating friendly breastfeeding environment (hospitals, community, public, and workplace)

53

產婦於產後各期母乳哺育率與其它研究之比較

	住院期間(%)			產後一個月(%)			產後二個月(%)			產後四個月(%)			產後六個月(%)		
	EBF	MBF	formula	EBF	MBF	formula	EBF	MBF	formula	EBF	MBF	formula	EBF	MBF	formula
高(2010)	41.3	52.1	5.5	45.7	42.5	11.7	38.3	25.2	36.4	30.4	14.1	55.5	26.9	12.2	60.9
BFHI	47.3	51.3	3.2	46.8	41.0	12.2	37.8	36.8	25.4	無資料			無資料		
(2009)															
DOH		無資料			58.5	26.9	14.6	48.4	22.2	29.4	36.2	17.4	46.4	26.3	54.0
(2010)															
郭(2004)	29.4	28.1	42.5	33.2	21.0	45.9	無資料			16.9	10.6	72.5	13.1	6.7	81.2
美國 2007							產後三個月 33.0								
East/Southern Africa (2008)													42.0		
Middle East/North Africa (2008)													29.0		
West/Central Africa (2008)													22.0		
South Asia (2008)													45.0		
East Asia/Pacific (2008)													32.0		
Central Europe/Russian Republics, and Baltic States (2008)													27.0		
Developing World (2008)													37.0		
Korea, North (2008)													65.1		
China (2008)										76.7					

1. 資料取自國民健康局「母乳哺育網站」http://www.bhp.doh.gov.tw/breastfeeding/02qna_01.htm

2. 各國純母乳哺育率 6 個月出處

http://www.breastfeedingbasics.org/cgi-bin/deliver.cgi/content/International/imp_statistics.html

<http://ourtimes.wordpress.com/2008/09/09/world-breastfeeding-league-table/>

Our future goals

- ☐ A really friendly breastfeeding environment
- ☐ Internationalization policy
- ☐ Outpatient centers (Pharmacy, Ped, “doing the month centers”)
- ☐ Long term effects studies – maternal health and infant health