

## *Summary*

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### **SUMMARY**

This study is an intervention study aiming at promoting the quality of services delivered to the mothers at birth and babies by monitoring the global criteria for the Ten Steps of Baby Friendly Hospital.

The study involved a design of a software tool for monitoring Baby Friendly Hospitals based on the international criteria for monitoring.

This tool was tested in Damanhour Teaching Hospital .the obstetric and NICU practices were periodically assessed by sampling twenty mother-infant pairs at three weeks intervals over a period of four months with a total of 120 mother-infant Pairs over the entire period of study from August to November 2008.

In between the monitoring sessions, the gaps in practices identified were corrected by continues in service training of the staff. This helped to improve the ongoing implementation of the Ten Steps.

We compared our result with a total 80 mother- infant pairs in the same service wards in four neighboring hospitals, two weeks later after the last monitoring activity in DTH.

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Results of this study revealed that routine procedures during the first four of Skin-to-Skin was significantly improved as the mean number of babies suctioned directly on the mother increased from 4+/-5 to 17+/-3 and cutting of umbilical cord directly on the mother increased from 2+/-2 to 15+/-1.

It was found that the mean number of babies with STS without clothes increased from 4+/-2 to 16+/-2 at the end of monitoring. Also, STS up to the first breastfeed increased from 40% to 73.3%.

It was found that rooming-in increased from 31.7% to 35%. While the mothers whose babies were in the NICU and were allowed to stay with them during the day increased from 15% to 33.3%.

Babies who fed human milk by breast only increased from 43.1% to 71.7% while the bottle use decreased significantly from 25.9% to 1.7% for human milk and from 65.9% to 20% for IMF.

A significant improvement was achieved as reflected by the increase in exclusive breastfeeding from 40% at the beginning of monitoring to 78.3% at the end of this

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intervention, indicating that the monitoring activity played an important role in making the hospitals meet the global criteria of BFHI.

Compared to the control sites, babies fed on human milk by breast only were significantly higher in intervention site 57.6% versus 23.8%. Moreover, babies in NICU with their mothers available for feeding them during the day was 24.2% in intervention site while it was zero percent in control sites.

The practice of STS up to the first breastfeed in the intervention site was 56.7% while it was only 10% in control sites. Milk expression more than 6 times in intervention site was 49.2% while it was only 22.5% in control sites. Moreover, time of first breastfed in the first hour of delivery was 51.7% while in control sites was 15%.

With regards mother friendly practices, it was found that there was a significant improvement in vaginal deliveries without medication 42.5% in intervention site compared to 27.5% in control sites.