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BREASTFEEDING AND HEALTHY EATING IN PREGNANCY AND LACTATION

Report on a WHO workshop

Arkhangelsk, Russian Federation
5–8 October 1998

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EUROPEAN HEALTH21 TARGET 11

HEALTHIER LIVING

By the year 2015, people across society should have adopted healthier patterns of living

(Adopted by the WHO Regional Committee for Europe at its forty-eighth session, Copenhagen, September 1998)

ABSTRACT

Poor maternal diet, especially during pregnancy and lactation, poses a potential threat to maternal and child health. The woman's nutritional status during these periods has important implications for both her own health and her ability to give birth and breastfeed a healthy infant. Yet even in the 1990s, babies in many countries are still at risk of undernutrition before birth. The Workshop was designed for primary health care workers interested in how food intake and nutritional status affect the health of women and infants. It was attended by paediatricians, gynaecologists/obstetricians and hygienists working in the Russian state system of sanitary-epidemic control. A two-day course for primary health care providers on "breastfeeding management" was followed by pilot testing of the revised WHO/UNICEF training module on "healthy eating in pregnancy and lactation". The participants gained knowledge of international nutrient recommendations and dietary guidelines, of evaluating the nutritional quality of the diet, and of providing advice to women during pregnancy, birth and the postpartum period with a view to promoting WHO guidelines on healthy eating. They also learned about principles of breastfeeding management, which are a priority of the WHO/UNICEF Baby-Friendly Hospital Initiative. The Workshop stimulated the development of a plan of action for the Arkhangelsk region to implement dietary guidelines for women and their families.

Keywords

NUTRITIONAL REQUIREMENTS
 PREGNANCY
 LACTATION
 BREAST FEEDING
 MATERNAL AND CHILD HEALTH
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Background

When the Soviet Union collapsed in 1991 and the Russian Federation became an independent state, the processes of transition from post-communist to free market society started in the economy, the political system and social structure. These transition processes from a centrally planned economic system to a market economy create difficulties such as increasing unemployment, collapse of many state enterprises, increased prices and the fall of living standards for the majority of the population. The recent (August 1998) economic and financial crisis in Russia has contributed to the collapse of infrastructures and economic decline. Due to constantly increasing prices and stagnant, unpaid, or decreasing salaries, many food products have become unavailable or unaffordable for many people and both food security and food safety are major concerns. Many foods (especially imported) that do not meet nutrition and safety standards are widely consumed. This is due in part to deterioration of local agricultural structures, to non-functioning or corrupt state food control systems and to an increased proportion of the state food supply being made up of imported products.

Public Health in Russia is threatened by the economic collapse

The recent economic collapse in the Russian Federation is threatening public health. Many regions, including NW Russia and Chelyabinsk region, are affected by the fact that they have become too dependant on imported foods. Many regions must urgently struggle to ensure a greater degree of self-sufficiency in food. WHO is attempting to advise these regions and others in a similar plight and are seeking to enable Regions in Russia develop food and nutrition policies to protect public health.

Infant and child feeding

With support from WHO and UNICEF, only two hospitals in Russia have been designated as Baby-Friendly Hospital in Murmansk. This initiative provides a good platform from which to build sustainable health for women and children in Russia. Updating of public knowledge and new policies related to the feeding of young children (0-3 years) and access to international recommendations concerning healthy nutrition are urgently needed. The former Soviet recommendations are an obstacle to sustainable health and so new guidelines for the feeding of young children must be introduced at all levels: regional, city, medical and nursing education (post- and undergraduate), and through the public health systems to help people understand why Soviet recommendations are a major block to improving public health. This need is now even more critical given the current economic crisis and increased risk to public health.

Public Health Nutrition

Health professionals from parts of Russia have attended WHO public health nutrition workshops in Arkhangelsk, Chelyabinsk and Moscow. These participants of the workshops need to form task forces to develop Action Plans for each Region. Health care professionals require help to development future strategies needed to sustain health, especially health of women and their families. These Food and Nutrition Action Plans will form the basis of future activities in the north-west Region and can hopefully assist resource mobilisation.

Food Security

Local food production and distribution systems are breaking down and, for example, local milk, if still in production, was being distributed from milk tankers and sold as unpasteurised milk on street corners. The unpasteurised milk was taken by hose directly from the tanker into empty plastic 2 litre old Coca Cola bottles, that shoppers brought to collect their milk in. Supermarkets are empty because they mainly sold imported food which, due to the economic collapse, is no longer available. Local markets were also empty or short of locally produced food because, after the collapse of the former Soviet Union, the unprecedented variety of imported food that became available encouraged consumers to reduce the amount of locally produced food they bought, so forcing local producers out of business. In addition local distribution and marketing infra-structure collapsed and so local producers have nowhere to sell their produce. As a result over the past 8 years the majority of local growers and food producers have stopped producing. Therefore there is an urgent need to support public health by promoting the sustainable development of food production and distribution.

Limited access to nutritious foods has had a negative impact on the health status of the population. A low intake of vegetables and fruit has led to vitamin deficiencies non-communicable diseases linked to nutrition. This is reflected in the sharp decrease in life expectancy and increased mortality rates which have been observed in Russia over the past 10 years. Infant mortality in Russia also remains high, surpassing 2 to 3 times the mortality levels in Western Europe. The Government of the Russian Federation adopted the World Declaration and Plan of Action for Nutrition at the International Conference on Nutrition in Rome, 1992, thus committing itself to ensure sustained nutritional wellbeing for all citizens. The elimination of poor nutrition, especially among socially vulnerable groups, reduction of nutrition-related diseases and food safety issues are therefore priority concerns.

Poor maternal diet, especially during the periods of pregnancy and lactation, poses a potential threat to maternal and child health. The nutritional status of a woman during pregnancy has important implications for both her own health, her ability to give birth and to breastfeed a healthy infant. Poor nutrition can negatively affect pregnancy outcome, increase maternal and infant mortality, retard early childhood development and contribute to low birthweight. Adequate diet in early infancy is perhaps more critical than at any other time in life. It is widely recognized that breastfeeding is a unique, adequate and practical way of providing ideal nutrition for the healthy development of an infant. In addition, due to its anti-infective properties, breast-milk helps to protect infants against infectious diseases. Thus it is essential to promote successful breastfeeding and adequate maternal nutrition during pregnancy and lactation.

The Baby-Friendly Hospital Initiative (BFHI) was launched in the Russian Federation around 1993 in order to protect infant health and well-being by promoting good breastfeeding practices. Yet currently there are only 2 maternity hospitals (in Murmansk and Elektrostal) that have been designated Baby-Friendly. This can be attributed to lack of knowledge, difficulty in changing the attitudes of health professionals, scarce resources, lack of state funding and to existing sanitary regulations that often limit mother-infant contact during the first days postpartum.

Improving maternal and infant health and well-being through promotion of healthy nutrition and lifestyles will benefit both families, communities and the national economy. Thus, it is of utmost importance that the countries promote maternal and child health.

Aim and objectives

The Arkhangelsk Workshop on Breastfeeding and Healthy Eating in Pregnancy and Lactation was designed for primary health care and polyclinic workers interested in mother and infant nutrition issues, how nutrition affects health and the well-being of vulnerable population groups. The Workshop was attended by paediatricians, gynaecologists/obstetricians and hygienists working in the state system of sanitary-epidemic control. However, it could also have included other interested health care professionals (such as family general practitioners and nurses/midwives) as well as health facility administrators and policy-makers working in the field of maternal and child health nutrition.

The workshop aimed to provide primary health professionals with practical and sound scientific knowledge in the areas of maternal nutrition and breastfeeding promotion. Participants were encouraged to develop and improve the standard of advice given to women during pregnancy and lactation, including recommendations on breastfeeding practices. The workshop provided a general understanding of the principles of international healthy eating guidelines for adult populations. The drawing up of an action plan to develop and implement a regional nutrition policy for women and their families was encouraged.

During the first two days a short course for primary health care professionals on *Breastfeeding management* was held. During the following three days the revised version of the training module on *Healthy eating in pregnancy and lactation* was pilot-tested. The programme was arranged so that during the first two days, the participants learned the principles of successful breastfeeding management, familiarized themselves with the WHO/UNICEF 10 Steps Towards Successful Breastfeeding and the Baby-Friendly Hospital Initiative and obtained practical skills to counsel mothers before and during lactation. The aim was to encourage the development and improvement of maternity ward procedures during pregnancy, birth and postpartum period with a view to promoting breastfeeding.

The Arkhangelsk Workshop provided an opportunity to pilot test for a second time, the WHO/UNICEF training module on *Healthy eating in pregnancy and lactation*. This training module provided the basis for lectures, group work and discussions during the last three days of the workshop. This training pack was first pilot-tested in Armenia in July 1997 during the WHO/UNICEF Workshop on Nutrition and Health Policy for Women and Children. The module materials then underwent an extensive revision based on feedback obtained from participants at the Workshop in Armenia and on critique provided by several reviewers (Wellstart International; Centers for Disease Control and Prevention, USA; UNICEF Nutrition Section, New York, USA). The following information gives a description of this newly revised training module on *Healthy eating in pregnancy and lactation* and presents a detailed evaluation by participants.

Aim of the training module

The aim of the WHO/UNICEF training module on *Healthy eating in pregnancy and lactation* is to help health professionals understand the relationship between nutritional status, food intake and health and well-being. They can then provide sound nutritional advice, based on current scientific evidence, to pregnant and lactating women or those about to become pregnant. The finalized version of the training module contains five main sessions:

- Session 1 Nutritional status and food intake of non-pregnant, pregnant and lactating women
- Session 2 Recommendations on nutrient intake for non-pregnant, pregnant and lactating women
- Session 3 Nutrition-related challenges in pregnancy
- Session 4 Vegetarianism, smoking and food safety
- Session 5 Nutritionally compromised mothers and the need for specialized referral

Each session comprises interactive opportunities and group work including:

- assessment of the pre-existing knowledge and motivation of health professionals dealing with women's health
- methods to assess the nutritional quality of a woman's diet
- designing simple leaflets on healthy eating and lifestyle for women
- group work on four specific case studies
- developing a local action plan for developing a nutrition and health policy.

Objectives of the training module

By the end of the training module the participants will be able to:

- describe the relationship between nutritional status and food intake;
- describe current dietary guidelines for a healthy population;
- list the nutrition requirements during pre-pregnancy, pregnancy and lactation;
- describe the factors affecting food choice of women;
- evaluate the nutritional quality of a woman's diet based on international guidelines;
- list nutrition-related challenges that may be encountered during pregnancy;
- describe specific vulnerable groups and identify what advice they need;
- write an action plan for developing a nutrition and health policy for women and their families.

Participants and lecturers

The Arkhangelsk Workshop on Breastfeeding and Healthy Eating in Pregnancy and Lactation was attended by 18 participants: 8 paediatricians, 5 gynaecologists/obstetricians and 5 hygienists from the sani-epid system of Arkhangelsk region. Only 1 participant (from the Moscow Research Institute of Nutrition) did not come from Arkhangelsk.

All the three lecturers of the *Breastfeeding management* course came from the Russian Federation (from Moscow, Murmansk and Arkhangelsk). The module on *Healthy eating in pregnancy and lactation* was presented by two lecturers, one from the WHO Regional Office for Europe and the other from USA (Cornell University). There were also three Russian-speaking facilitators for the group work sessions, from the Czech Republic (Masaryk University), Israel (Ministry of Health) and the Russian Federation (Research Centre for Preventive Medicine, Moscow). One interpreter from Belarus provided simultaneous interpretation in English and Russian.

Workshop overview

A copy of the course programme can be found in Annex 1.

The Workshop was scheduled over five days and consisted of information sessions and group discussion time. Each day commenced at around 9.00 and finished around 18.00. On one occasion the participants were given an assignment (analysis of the case studies) to work on at home during the evening.

As almost all the participants came from Arkhangelsk city, they did not stay at the sanatorium where the Workshop was held and therefore were not able to mingle with colleagues during the evenings. Often casual evening get-togethers provide an opportunity to discuss new knowledge obtained at the workshop and perhaps to work in depth on the group work assignments and reading materials. In the future it is recommended that such workshops be residential. Among other advantages, it would give the participants an opportunity to get away from their work environment, and thus have more time to relax, think and concentrate better during the workshop. In the evaluation, one of the participants mentioned that the necessity to carry out her professional duties during the workshop was an obstacle to her productive participation in the seminar. In addition, a residential course would ensure that participants attend regularly and have time for discussions that may not be possible during a working day.

The topics at the Workshop were chosen to ensure that health care workers gained an appreciation of the role that nutrition plays in the promotion of health and prevention of disease. Before the seminar, participants received a pre-course pack explaining the purpose and contents of the Workshop, and outlining the pre-course assignment that they were expected to fulfil before the Workshop started. This assignment included:

- interviewing of two to three colleagues who counsel women on health issues; a structured questionnaire was provided for this purpose (a copy of the questionnaire is included in the module materials)

- collecting the 24-hour food record of pregnant or lactating woman (interviewing the woman and writing down everything she ate or drank during the day preceding the day of interview); a special form for this record was also provided

The results of this pre-course assignment were then analyzed and discussed at the group work sessions during the Workshop.

On arrival and in the course of the Workshop, each participant was provided with a large amount of reading materials and documents in Russian (or English, if Russian versions were not available) (list included in Annex 4). Participants were also given coloured pens, crayons, flipcharts and coloured paper to present the results of group discussions and to design leaflets on healthy eating for pregnant and lactating women in their region.

Overall, the facilities were good with clean rooms and spacious surroundings. The necessary equipment (video, headphones for simultaneous translation, overhead projector with the screen) were available and worked well. However, there were not enough small rooms for group work, so the dining room and sanatorium halls had to be used. There were also problems with heating, excusable however, taking into account the overall difficult situation in Russia at that time. It should also be mentioned that the local organizers of the Workshop did their best to resolve the emerging problems as quickly and thoroughly as possible.

Training approach

This workshop was designed so that it provides a lot of opportunities for interaction and discussion. Participants were encouraged to think through and discuss with colleagues an array of specific problems and tasks they may encounter in their professional work. The materials for several participatory work groups included in the module were modified based on experience from the first pilot-testing in Armenia. All the group work materials were successful and accepted very enthusiastically by the participants.

Especially useful was the group discussion on how the health care professionals in Russia view the importance of nutrition and how their knowledge, skills, and, most importantly, motivation, can be improved in order to efficiently communicate information on healthy eating to mothers and to the population in general. Participants were also fond of the group exercise where they were asked to evaluate the dietary record of pregnant or lactating woman. For almost all of them, the concepts of portion, serving size and food guide pyramid were quite new. Nevertheless, they acquired the basic skills of evaluating the dietary intake very quickly and eagerly. After the exercise, many of them were quite surprised how quickly and easily this evaluation, crucial to formulating advice for their clients, can be carried out.

The activity in which everyone participated particularly enthusiastically and expressed individual creativity, even artistic talents, was designing the leaflet on healthy eating (see Annex 8 for examples of the participants' work). The final results of this work

were extremely impressive and could well be used as a basis for developing national or regional information materials on healthy eating. The group work on case studies was also very productive. First, participants were given case studies to work on individually overnight, and then a consensus was drawn from the individual evaluations during group discussions. In a personal communication, the participants expressed two important issues concerning this activity. First, work on the case studies allowed them to reiterate and further develop skills on dietary evaluation acquired in earlier group work. Secondly, it was important that the case studies were based on real-life situations common in the CIS republics and thus are very relevant to their practical experience-building process.

The final group work included developing and finalizing an action plan directed at development and implementation of a regional nutrition policy for women and their families. As many of the participants held positions as primary health care providers and were therefore not directly involved in policy-making processes, they were not expected to be as interested in this exercise as in the other group discussions. Surprisingly, however, the work on action plan development was both very participatory, interesting and productive. Several strategies for a future regional programme emerged in group discussions and these were consolidated during the final reporting session.

It is worth mentioning, that such a successful interactive approach was made possible to a great extent because three Russian-speaking facilitators assisted during the group work in addition to the two lecturers (one of whom was also Russian-speaking). This allowed one facilitator per working group and may in part explain why the group activities at the Arkhangelsk Workshop were much more lively and productive compared to the previous pilot-testing in Armenia. In the future, it is strongly recommended that such a workshops have, in addition to lecturers, 2 or 3 qualified facilitators, able to oversee the group work activities.

Finally, it should be mentioned that such a “learning” approach as opposed to “teaching”, was a novel experience for most of the participants. They were used to a more authoritarian style of teaching where free discussions and question asking are discouraged. Everyone, however, seemed to enjoy this learning approach which was reflected also in many evaluation remarks on group work usefulness and productivity.

Evaluation

Both the training module *Breastfeeding management* on and the course on *Healthy eating in pregnancy and lactation* were evaluated. For the latter module, two sets of evaluation were carried out: at the end of each session in order to assess each component of the module, and at the end of the course where participants had the opportunity to comment on how useful the course had been for them. For the breastfeeding course, only the end-of-course evaluation was done. A complete summary of the results of the written evaluations are in Annexes 5, 6 and 7.

The mean scores for each of the five sessions carried out during *Healthy Eating in Pregnancy and Lactation* were very high: they ranged from 8,6 to 9,0 on the 9-point scale. The majority of participants’ comments were constructive and included good

suggestions for improving the module. Most of them emphasized the usefulness of group activities and suggested increasing the time allotted for group activity on assessment of dietary records. Some other comments suggested presenting and discussing the local or regional information on nutritional issues, as well as including relevant video materials into the session on alcoholism, smoking and food safety. Several suggestions emphasized the importance of developing and implementing a regional nutrition policy for women and their families. Most of the participants considered the time allotted for information sessions and group work as sufficient. Also, all of them considered the quality of teaching as either somewhat high or very high. It was extremely useful to test the training package and receive such constructive comments from such a motivated group.

The end-of-course evaluation aimed to determine what participants felt about what they had gained personally from the course rather than on how the training module could be improved. All the participants felt the course was very relevant to their present work (average score 8,8) and believed that what they had learned would improve their ability to work in the area of healthy eating (average score 9,0). In the comments, many participants stated their intent to implement the obtained knowledge and skills in their day-to-day work with the patients.

Most were happy with the scientific content of the course - they considered it “just right” - neither too easy nor too complicated to understand. According to the comments, even the rather complex scientific issues were presented in a very understandable manner. None of the participants found parts of the course too elementary and all found the content interesting (average score 9,0). The only topic found to be difficult was the development of action plan (which is understandable taking into account the absence of experience in this area in primary health care providers). The items they found most interesting included the data on serving sizes, evaluation of nutritional quality of diet and of the nutritional status, and the concept of the “food pyramid” for expressing dietary guidelines. They did not find any topics uninteresting.

When asked what they would like to have more of during the course they cited the following topics: social marketing of healthy eating habits, the peculiarities of food intake and nutritional status of the population in their own region, composition and nutritional value of different foods. No comments were given as to what topics they would like to have less on.

Most participants seemed satisfied with the level of teaching on the course and the course materials. They clearly appreciated receiving all the lecture information as handouts and also the large amount of materials and extra documents that were provided during the Workshop. All the participants appreciated the group work sessions (average score 8,8) and commented on them very positively.

As regards their own professional situations, participants felt the need to participate in subsequent seminars on this subject since the importance of nutrition in pregnancy and lactation is frequently discussed. In the light of what they had learned during the Workshop, they realized that there was a great need to disseminate knowledge to all health professionals in the region and to develop new regional recommendations.

They suggested also inviting to such seminars, the officials responsible in the region for health and nutrition policy so that they could fully appreciate the importance and urgency of the problems discussed.

Finally, the participants marked their overall impression of the course as excellent (average score 9,0), and felt that they had learned many new and interesting things. When asked what kind of follow-up activities they would like, some mentioned training on other topics such as nutrition of other groups of the population (children, elderly etc.), and clinical nutrition. They suggested also having such seminars on healthy eating at a local level in order to pass the knowledge and skills they learned to as many health care workers as possible.

In the evaluation of the course on *Breastfeeding management*, most of the participants considered the level of teaching as high and the time allotted for the course as sufficient. Overall, the course was rated as excellent (average 9,0). In many comments it was emphasized that such courses should be held regularly and involve as many interested health professionals, as possible. It was even suggested to make a video material about the pioneer Baby-friendly hospitals in Russia and show it during the course. This would make the course more persuasive to those still hesitant about the possibility and usefulness of promotion of exclusive breastfeeding. Finally, the need was expressed that the training module should outline and clarify principles of complementary feeding in infants over 6 months of age.

Recommendations

Several useful lessons were learned from this Workshop which can and should be applied when planning and organizing similar seminars in the future. Also, the training module itself will be further revised and implemented based on feedback received during the second pilot-testing at the Workshop in Arkhangelsk.

Target audience

This seminar's experience confirmed the earlier recommendation that an approximately equal number of paediatricians, gynaecologists/obstetricians and hygienists should be invited to participate. The preferable number of participants should be in the range of 17 to 20 people, which allows effective communication with the audience at information sessions and in group work. During this Workshop, participants themselves several times pointed out the importance of having professionals from different fields working together on priority problems in public health. Clearly, the key strength of this approach is that it brings together groups of professionals that would normally not have the opportunity to meet together and discuss issues such as the need to develop regional or national nutrition and health policies. Rather surprisingly, hygienists seemed to be the most active and enthusiastic group at this Workshop, being especially interested in the development of the action plan on nutrition and health policy implementation. However, the audience should not necessarily be limited to the aforementioned health professionals. Any clinicians, nurses, midwives, primary health care workers, policy-makers or health administrators interested and working in the area of maternal nutrition and breastfeeding could be invited to participate.

Venue

The sanatorium in Arkhangelsk was a suitable venue for the Workshop. In spite of the last-minute change in the Workshop location, local organizers seemed to be well prepared to host the lecturers and participants. However, as mentioned before, there were not enough rooms for group work sessions and this should be taken into account when planning the location for future workshops. Also, it is highly preferred that such workshops be residential whenever possible, so as to allow participants to have a complete break from their workplace and be completely involved in the workshop. This would allow time to think and plan with colleagues with whom they might not normally have the opportunity to discuss common issues.

Translation

Contrary to the first pilot-testing of the module in Armenia, this Workshop was assisted by an interpreter highly qualified in simultaneous translation. The translation equipment provided by the WHO Regional Office for Europe worked well and contributed to the overall success of the Workshop. Care should be taken in the future to ensure that interpreters are able to provide simultaneous translation and that they are sufficiently competent to deal with scientific subjects. Although the current interpreter is excellent, it would be good to have a pool of names we could draw on in case of unavailability.

Preparation of module materials

In the course of the workshop, it became evident that some participants lacked basic knowledge regarding general principles of nutrition and key nutrients. It was therefore recommended that the paper “Key Issues in Nutrition” by Dr Tim Gill (from the course notes of the International Summer School for Public Health Nutrition, Warsaw, 1996) be included as a required reading in the pre-course information pack for participants. This manuscript gives a brief yet comprehensive overview of the key nutrients, their functions, and international healthy eating guidelines.

Future health professionals

Taking into account the present situation in the health sector of the Russian Federation and other CIS countries, there is clearly a need to find a way to disseminate updated dietary information more widely among health care professionals. There is still a complete lack of understanding of modern scientific nutritional knowledge and most health professionals still follow the out-dated information from former Soviet times. The Workshop on *Healthy eating during pregnancy* is currently unique in the sense that this type of training is not provided by any other institution in the CIS. The long term aim should be to encourage national institutions to continue this tradition and to develop a network of trained lecturers and facilitators able to disseminate the knowledge among health professionals in the CIS countries. This would also facilitate the process of development and implementation of national and regional nutrition policies.

Annex 1

Programme

Day	Time	Activity	Presenter
Day 1		Breastfeeding management	
	9.00	Introduction Presentation of the participants	
	10.00	Session 1: Why breastfeed? Building confidence Preparation for breastfeeding Communication and counseling	T. Dinekina, N. Kondakova and N. Vartapetova
	15.00	Session 2 How Breastfeeding works How to check the position How often and for how long To achieve good attachment How to meet baby's needs	T. Dinekina, N. Kondakova and N. Vartapetova
	18.00	End-of-day evaluation	
Day 2	9.00	Session 3 Common challenges	T. Dinekina, N. Kondakova
		Session 4 Special situations, such as multiple births, caesarean section, cleft lip or palate, Down's syndrome, diarrhoea and others	T. Dinekina, N. Kondakova and N. Vartapetova
		Session 5 Expression of breast milk	T. Dinekina, N. Kondakova
	15.00	Session 6 Other important matters, such as breast care, sexuality, menstruation, other family members, mother-to-mother support and others	T. Dinekina, N. Kondakova and N. Vartapetova
		Session 7 Ten steps to successful breastfeeding Information resources/literature Closing remarks	T. Dinekina, N. Kondakova and N. Vartapetova
	18.00	End-of-day evaluation	
Day 3		Healthy eating during pregnancy and lactation	
	9.00	Session 1 Nutritional status, food intake and dietary guidelines	A. Robertson and O. Biloukha
		Group work 1 Assess knowledge and motivation of health care professionals	
	15.00	Session 2 Recommendations on nutrient intake for women	A. Robertson and O. Biloukha
		Group work 2 Assess 24-hour recall diet of pregnant woman	
	18.00	End-of-day evaluation	
Day 4	9.00	Session 3 Nutrition-related challenges in pregnancy	A. Robertson and O. Biloukha
		Group work 3 Design a simple leaflet on healthy eating for mothers	
	15.00	Session 4 Vegetarianism, smoking and food safety	A. Robertson and O. Biloukha
		Group work 4 Develop an action plan for regional nutrition and health policy for women	
	18.00	End-of-day evaluation	
Day 5	9.00	Session 5 Nutritionally compromised mothers	A. Robertson and O. Biloukha
		Group work 5 Case studies	
	12.00	Group work 6 Finalize action plan to develop a nutrition policy	
	13.00	End-of-course evaluation	

Coffee breaks each day at 11.00 and 16.15, 1-hour lunch break at 14.00.

Annex 2

Lecturers, facilitators and interpreters

Lecturers

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Annex 3

Participants

1. Liubov Alekseeva, Expert in nutrition hygiene, Head, Department of Nutrition Hygiene, State Center of Sanitary-Epidemic Control, Arkhangelsk
2. Galina Bukova, Paediatrician, Head, Paediatric Department of City Polyclinic No. 1, Arkhangelsk
3. Elena Derbina, Paediatrician, Clinical Ordinator, Department of Psychiatry, Arkhangelsk Medical Academy, Arkhangelsk
4. Tatiana Gordienko, Expert in nutrition hygiene, Head, Anti-Epidemic Department, State Center of Sanitary-Epidemic Control, Arkhangelsk
5. Irina Kirpich, Expert in nutrition hygiene, Assistant Professor, Department of Normal Physiology, Arkhangelsk Medical Academy, Arkhangelsk
6. Liudmila Kudria, Expert in nutrition hygiene, Associate Professor, Department of Hygiene, Medical Ecology and Epidemiology, Arkhangelsk Medical Academy, Arkhangelsk
7. Tatiana Leontieva, Obstetrician, Head, Women's Consultation of Maternity Hospital named after K.Samoilova, Arkhangelsk
8. Tamara Liubova, Paediatrician, Children Polyclinic of City Hospital No. 7, Arkhangelsk
9. Marina Nefedjeva, Obstetrician, City Polyclinic No. 1, Arkhangelsk
10. Tatiana Nenasheva, Paediatrician, Head, Paediatric Department of Children Polyclinic No. 1, Arkhangelsk
11. Irina Ovcharenko, Paediatrician, Head, Paediatric Department of Children Polyclinic No. 4, Arkhangelsk
12. Marina Popovich, Paediatrician, Graduate Student, National Research Institute of Nutrition, Moscow
13. Tatiana Reutova, Obstetrician, Women's Consultation of City Hospital No. 7, Arkhangelsk
14. Nina Sharova, Obstetrician, Women's Consultation of City Hospital No. 4, Arkhangelsk
15. Liubov Sokolova, Expert in nutrition hygiene, Head, State Center of Sanitary-Epidemic Control, Arkhangelsk
16. Tamara Soloviova, Paediatrician, Children Polyclinic No. 6, Arkhangelsk
17. Eleonora Tetenkova, Obstetrician, Head, Women's Consultation of Polyclinic No. 3, Arkhangelsk
18. Natalia Tsymbalenko, Paediatrician, Chief Specialist of Child Health Care, Department of Health Care and Social Security, Arkhangelsk City Administration, Arkhangelsk

Annex 4**Workshop materials and documents**

Session	Document title	Language
Breastfeeding	Breastfeeding: how to support success	English Russian
	Protecting, promoting and supporting breastfeeding. The special role of maternity services. A joint WHO/UNICEF statement:	English Russian
	Helping mothers to breastfeed. Felicity Savage King	English Russian
	Infant feeding in emergencies. WHO Europe document	English Russian
	How to breastfeed your baby	Russian
	Articles on infant feeding - see following list	
	10 steps to successful breastfeeding - A4 sheets	English Russian
Child feeding	Draft WHO Guidelines on complementary feeding	English
Diet during pregnancy and lactation	Dietary reference values: a guide Nutrition and pregnancy Nutrition during lactation	English Russian
	Healthy eating in pregnancy and lactation. A training module	English Russian
	Healthy eating in pregnancy and lactation – booklet for mothers	English Russian
	Diet, nutrition and the prevention of chronic diseases. WHO Tech Report series 797 1990	English Russian
General	Key issues in nutrition: course notes for Warsaw	English Russian
	Food Pyramid posters	English Russian
	Body Mass Index Ready Reckoner	English
	Hygiene in food-service and mass catering establishments	English Russian
	Course evaluation form	English Russian

List of articles on infant feeding

Title	Author/reference	Languages
A warm chain for breastfeeding <i>“Теплая цепь” поддержки в пользу вскармливания ребенка грудью</i>	The Lancet 344, No. 8932, pp1239-1241 <i>Ланцет, том 344, №8932, стр. 1239-1241</i>	Russian English <i>Русский Английский</i>
The lactation management education program for the Philippines: Its contribution to national breastfeeding promotion <i>Программа обучения медицинскому наблюдению при грудном вскармливании для Филиппин: ее вклад в Национальную программу содействия грудному вскармливанию</i>	WELLSTART International, The San Diego Lactation Program <i>Программа по грудному вскармливанию, WELLSTART International, Сан-Диего, Калифорния</i>	Russian English <i>Русский Английский</i>
Innocenti Declaration: on the protection promotion and support of breastfeeding <i>Декларация Инносенти: о защите, содействии и поддержке грудного вскармливания</i>	August 1990, Florence Italy	Russian English <i>Русский Английский</i>
Protect breastfeeding: making the Code work. World Breastfeeding Week 1-7 August	WABA	Russian English <i>Русский Английский</i>
Model hospital breastfeeding policies for full-term normal newborn infants	Wellstart International policy 2.eng:6/14/94	Russian English
English/Russian glossary of breastfeeding terms <i>Англо-русский глоссарий терминов по грудному вскармливанию</i>	Wellstart International, Joyce Warner, M.A. Expanded Promotion of Breastfeeding Program	Russian English <i>Русский Английский</i>
National breastfeeding policy: Cameroon <i>Государственная программа охраны грудного вскармливания: Камерун</i>	Ministry of Public Health, Cameroon	Russian English <i>Русский Английский</i>
CDC Criteria for Anemia in Children and Childbearing-Aged Women <i>Критерии ЦКЗ в отношении анемии у детей и женщин детородного возраста</i>	Centers for disease control. Morbidity and mortality weekly report, June9, Vol.38, № 22	Russian English <i>Русский Английский</i>
Ten steps to successful breastfeeding: a summary of the rationale and scientific evidence.	Randa Saadeh and James Akre. Birth 23:3 Sept 96	Russian English

Annex 5

Participants' evaluations of Workshop materials

General details

Total number of evaluation forms submitted: 15

Total number of participants according to participants' list: 18

Gender (optional)

Female 15

(According to participants' list)

Female 18

Year of birth (optional)

6 of 15 participants provided information: 1952, 1955, 1955, 1963, 1963, 1972

My university degree is in:

Gynaecology and obstetrics 5

Pediatrics 7

Hygiene and epidemiology 3

(according to participants list: 8 work as paediatricians, 5 as obstetricians-gynaecologists and 5 as hygienists)

I work within:

health care 15

planning/policy development 0

other area 0

I am in a supervisory position

Yes 8

No 7

If yes, how many staff do you supervise?

8 of those who answered "yes" responded: 140, 40, 29, 23, 19, 18, 8, 3.

Session 1: Nutritional status, food intake and dietary guidelines

(a) What was your general opinion of Session 1?

points: 9 participants: 15

No grade 0

Average 9.0

(b) Was a suitable amount of time allotted to the session?

Too short 0

Too long 0

Adequate 15

No response 0

(c) Was the context of the session relevant to developing national dietary guidelines and policy on diet during pregnancy and lactation?

Not relevant at all 0

Not very relevant 0

Somewhat relevant 8

Extremely relevant 7

No response 0

(d) What was the quality of the teaching?

Very low 0

Somewhat low 0

Somewhat high 5

Very high 10

No response 0

(e) Suggestions for improving the session

- Group work is useful
- Have practical work on evaluation of the diets of the main groups in the population
- Give recommendations on development of the concept and the programme on healthy eating

Session 2: Recommendations on nutrient intake for women

(a) What was your general opinion of Session 2?

points: 9 participants: 15

No grade 0

Average 9.0

(b) Was a suitable amount of time allotted to the session?

Too short 4

Too long 0

Adequate 11

No response 0

(c) Was the context of the session relevant to developing national dietary guidelines and policy on diet during pregnancy and lactation?

Not relevant at all 0

Not very relevant 0

Somewhat relevant 7

Extremely relevant 8

No response 0

(d) What was the quality of the teaching?

Very low	0
Somewhat low	0
Somewhat high	8
Very high	7
No response	0

(e) Suggestions for improving the session

- More time is needed for group work - 3 people
- The session is very useful
- Each participant has to analyse the diet record individually
- Would be useful to have an example of well-balanced dietary record

Session 3: Nutrition-related challenges in pregnancy

(a) What was your general opinion of Session 3?

points: 9	participants: 15
No grade	0
Average	9.0

(b) Was a suitable amount of time allotted to the session?

Too short	1
Too long	0
Adequate	14
No response	0

(c) Was the context of the session relevant to developing national dietary guidelines and policy on diet during pregnancy and lactation?

Not relevant at all	0
Not very relevant	0
Somewhat relevant	5
Extremely relevant	10
No response	0

(d) What was the quality of the teaching?

Very low	0
Somewhat low	0
Somewhat high	8
Very high	7
No response	0

(e) Suggestions for improving the session

- Need to evaluate several diets of pregnant and lactating women taking into account also health status and possible pathological conditions - 2 people
- Need to discuss the main directions in the nutrition policy for pregnant and lactating women
- Group work was very interesting and productive

- It was very good and productive that working groups included specialists from different areas (obstetricians, paediatricians and hygienists)

Session 4: Vegetarians, food safety and smoking

(a) What was your general opinion of Session 4?

points: 9	participants: 9
8	2
7	0
6	1
No grade	3
Average	8.6

(b) Was a suitable amount of time allotted to the session?

Too short	1
Too long	0
Adequate	11
No response	3

(c) Was the context of the session relevant to developing national dietary guidelines and policy on diet during pregnancy and lactation?

Not relevant at all	0
Not very relevant	0
Somewhat relevant	7
Extremely relevant	5
No response	3

(d) What was the quality of the teaching?

Very low	0
Somewhat low	0
Somewhat high	5
Very high	7
No response	3

(e) Suggestions for improving the session

- Would be useful to include in the session video film on harmful effects of smoking and alcoholism -2 people
- It would be interesting to know whether the problems discussed in the session exist in the region and what is done to resolve them
- Discuss concretely the action plan to resolve the problems of alcoholism, smoking and drug abuse in pregnant and lactating women

Session 5: The nutritionally vulnerable mother and the need for specialized referral

(a) What was your general opinion of Session 5?

points:	9	participants:	13
	8		1
No grade			1
Average			8.9

(b) Was a suitable amount of time allotted to the session?

Too short	1
Too long	0
Adequate	13
No response	1

(c) Was the context of the session relevant to developing national dietary guidelines

and policy on diet during pregnancy and lactation?

Not relevant at all	0
Not very relevant	0
Somewhat relevant	4
Extremely relevant	10
No response	1

(d) What was the quality of the teaching?

Very low	0
Somewhat low	0
Somewhat high	5
Very high	9
No response	1

(e) Suggestions for improving the session

- Discuss in more detail the principles of screening and consulting the women from risk groups

Annex 6

End-of-course evaluation

1. How relevant for your present work situation do you think that the course has been?

points:	9	participants:	13
	8		1
	7		1
No grade			0
Average			8,8

Comments:

- Seminar directed at development of the regional policy on healthy nutrition
- I got new knowledge that will allow me to give the healthy eating advice to patients
- Problems discussed at the seminar are very relevant to my practical work
- I plan to use seminar materials in my future practical work
- Before the seminar I did not pay enough attention to the problems of healthy eating
- I got the new attitude to such affordable products as bread, potatoes and cereals (before we thought that these products are fattening)

2. Do you think that this course will improve your ability to work within the area of nutrition in pregnancy and lactation?

points:	9	participants:	15
No grade			0
Average			9,0

Comments:

- I will use the knowledge obtained in my work with the patients
- There is no need to study additional literature after this seminar
- Obtained a lot of new information
- Our work requires daily consulting of the patients on nutritional issues
- There existed a certain "hunger" for information about healthy eating, and this seminar was very useful for this matter

3. What do you think about the scientific level of this course?

All participants - 5 (on a 9-point scale where 1 is too low/primitive and 9 is too high/complicated)

Comments:

- All the topics are meaningful and easy to understand - 4 people

- Information was presented in a very understandable manner
- Give examples of parts that have been too difficult: development of action plan on healthy nutrition
- Give examples of parts that have been too elementary: no examples

4. How interesting as a whole do you think that the content of this course has been?

points:	9	participants:	14
No grade			1
Average			9,0

Give examples of parts that have been especially interesting:

- Food pyramids - 4 people
- Easy methods of diet evaluation - 2 people
- The concept of portion or serving; serving sizes
- Evaluation of the nutritional status and daily intake
- Healthy eating during pregnancy
- Usefulness of simple starchy foods

Give examples of parts that have been less interesting: None

5. Is there some part that you would like to see more of in the course?

- Social marketing of healthy eating habits - how to persuade the population to change their eating habits
- Regional peculiarities of the diets of pregnant and lactating women
- Would like to know more about the nutritional value of the certain foods
- The latest developments in the international nutritional science

6. Which part/parts would you like to have less of in the course?

No suggestions

7. Do you have any other considerations on the content of the course?

- Discuss in more detail the caloric content of the diet
- The seminar was comprehensive

8. What is your general opinion regarding the lecturers at the course?

- Very high level of instruction - 4 people
- Very knowledgeable, enthusiastic people - 2 people
- Communicated well with the audience
- High scientific level and yet understandable presentation
- We are satisfied with all the instructors
- Have sufficient knowledge
- The level is high, but foreign instructors often consider nutrition from the point of view of their own traditions; Russian traditions are different and one has to take it into account

9. What do you think about the course materials?

points: 9 participants: 14
 No grade 1
 Average 9,0

Comments:

- Very interesting - a lot of new information
- It is good that we got the supplementary materials about nutrition
- They changed our opinion about bread and potatoes - the foods consumed most often
- Would be useful to adapt the materials to Russian conditions
- Enabled us to compare the data from our country with the data from other countries, to compare the lifestyles and eating habits
- Interesting to learn about the activities of non-governmental organizations in other countries

10. Have the group work discussions been meaningful?

points: 9 participants: 12
 8 2
 No grade 1
 Average 8,8

Comments:

- Group work allowed each participant to express it's own individuality
- Group discussions were very lively and interesting
- The groups were composed in such a way, that each participant contributed it's own ideas into the collective solution
- Very good that we were taught to give recommendations taking into account the individual characteristics of the person

11. What is your overall opinion of the course?

points: 9 participants: 14
 No grade 15
 Average 9,0

Comments:

- A lot of practical information for implementing the knowledge into the daily practice
- For me - the first seminar about nutrition; I obtained a lot of useful information

12. Have you had the possibility to discuss your own professional situation?

points: 9 participants: 8
 8 4
 7 2
 6 1
 No grade 0
 Average 8,3

Comments:

- Practical doctors pay little attention to the problems of nutrition
- We never discussed the problems of nutrition before this seminar

13. What has been the main obstacle for you to come to this course?

- No obstacles except the necessity to fulfil also my duties at work

14. Further comments:

- Would be useful to discuss at the seminar one or several regional programmes on healthy eating
- Would be good if the action plan we developed be implemented in our region as soon as possible

15. What kind of follow-up would you like?

The same kind of course again next year

Yes 13
 No 0
 No response 2

Local workshops organized by nationals from your own country

Yes 10
 No 0
 No response 5

Something else. Please suggest what:

- Seminar on nutrition for other groups of the population, for children
- Seminar on clinical nutrition in different diseases
- Local seminars - to provide the information to as many health professionals as possible
- Invite to the seminar city and regional officials, responsible for implementation of the recommendations and action plan

Annex 7

Participants' evaluation of the course "Breastfeeding Management"

(a) What was your general opinion of the course?

points: 9 participants: 15
No grade 0
Average 9,0

(b) Was a suitable amount of time allotted to the course?

Too short 2
Too long 0
Adequate 13
No response 0

(c) What was the quality of the teaching?

Very low 0
Somewhat low 0
Somewhat high 8
Very high 7
No response 0

(d) Suggestions for improving the session

- Widen the network of the course teachers, conduct the course regularly for paediatricians and obstetricians - 3 people
- Necessary to have visual aids to use them at the workplace
- Include the information on the nutrition of children 6 month - 2 years of age
- More practical work in small groups is needed - 3 people
- Would be useful to make the video material about the baby-friendly clinics in Murmansk and Electrostal
- Include information on supplementary and complementary feeding of the children 6 months of age and older
- Such a courses should be held regularly and should include the latest updates on the breastfeeding knowledge and practices

Annex 8

Healthy eating leaflets



Маме ПРАВИЛЬНО ПИТАТЬСЯ —
ЧАЩЕ БУДЕТ УЛЫБАТЬСЯ!



Оптимальный —
Суточный

рацион

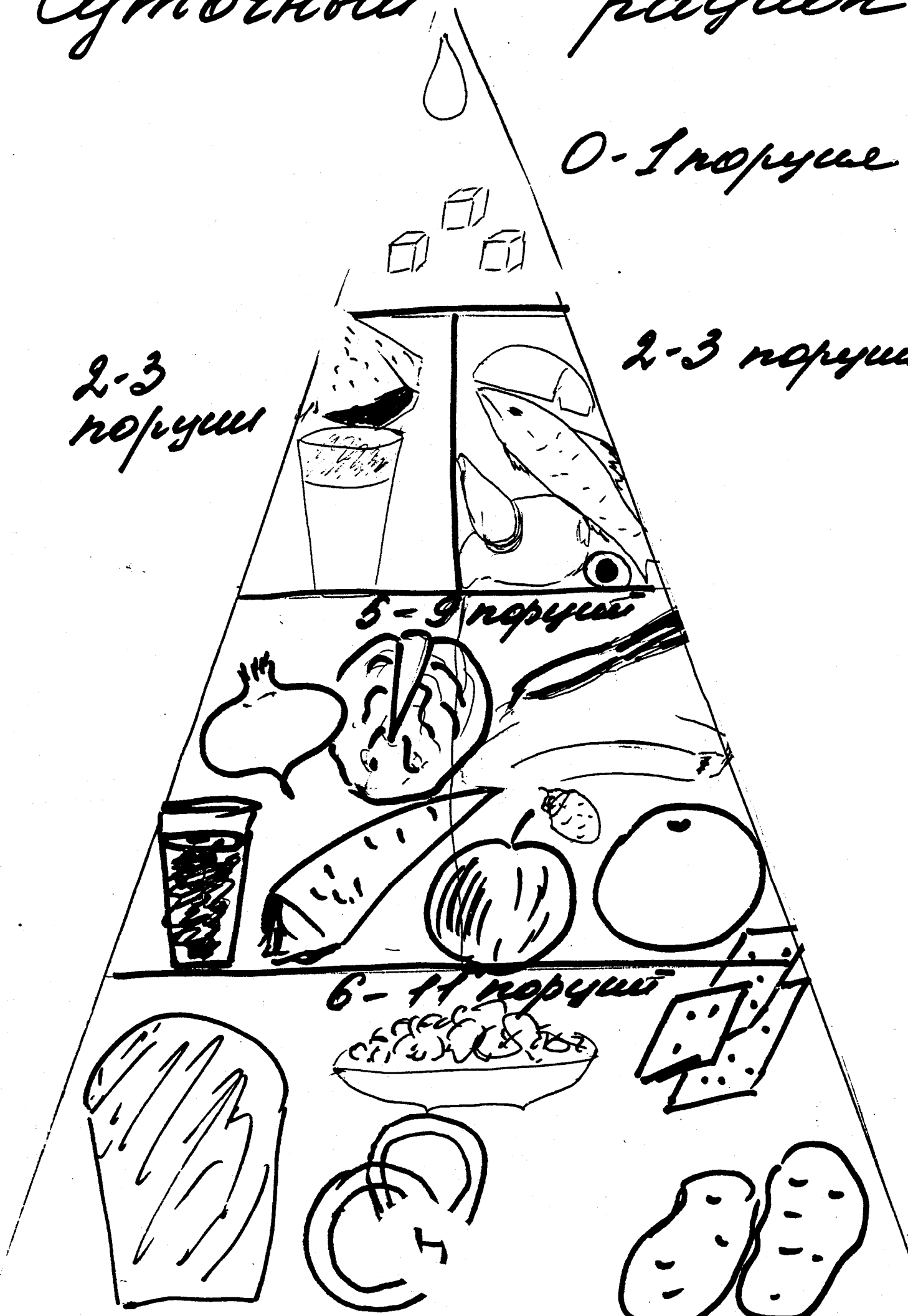
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2-3
порции

2-3 порции

5-9 порций

6-11 порций



ЭТО ТЫ

МОЖЕШЬ:

- Все продукты ешь

НЕ ЗАБЫВАЙ, НО
МЕРУ ЗНАЙ, НА ВЕСЫ
ВСТАВАЙ!

- КАША - ОТДЫХ ДЛЯ
ЖЕЛУДКА.

- Молоко попивай, и
хлебом заедай.

- Воду, соки пей!

- Не отвергай дары
Моря нашего, используй
ИХ

- Ешь то, что выросл
на огороде и в
лесу.

- Консервантов
избегай, в пищу
их не добавляй.

- Не "насоли" своему
ребенку!

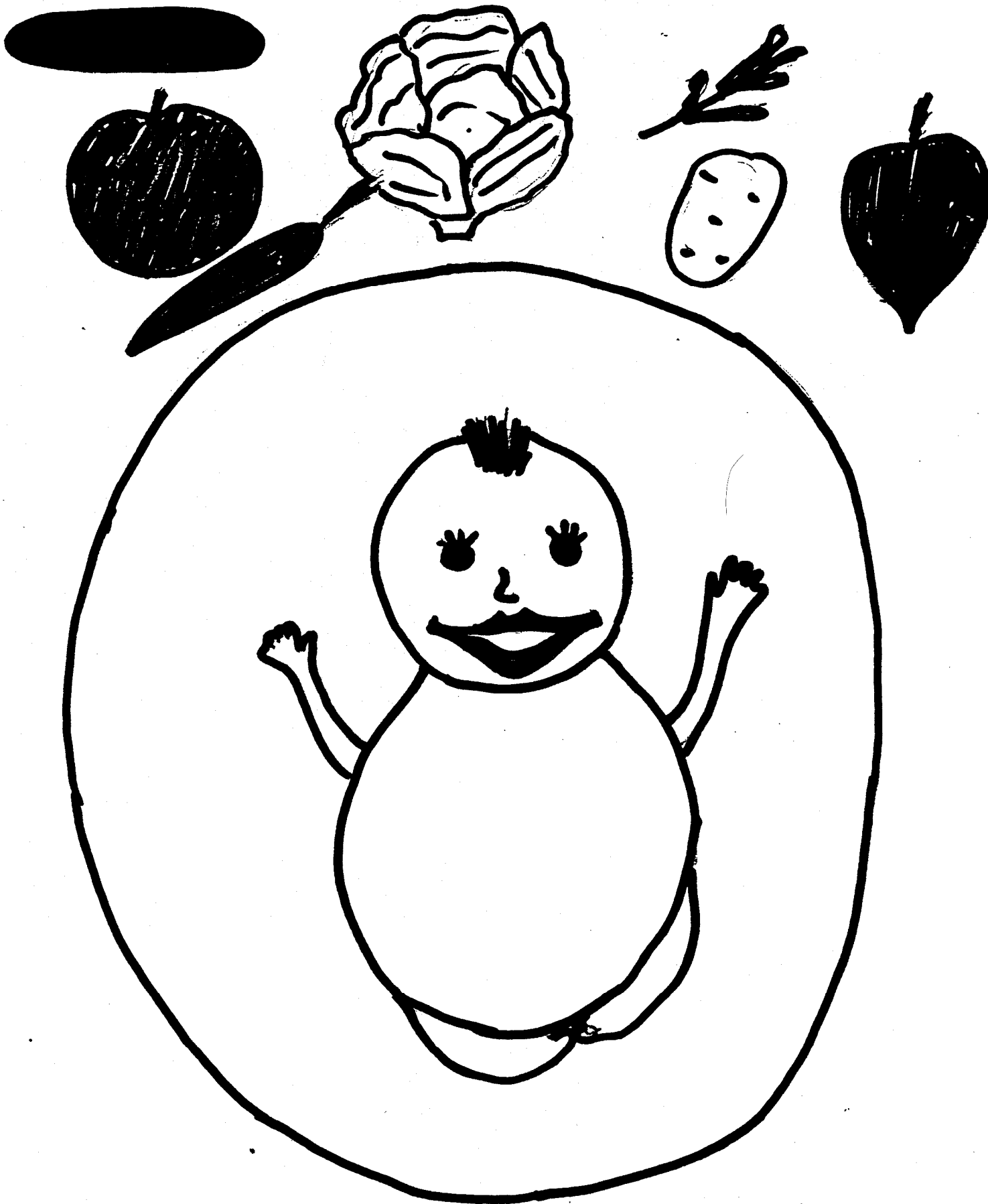
Пункты наши
выполняй
и здоровье
поправляй!

РАСТИ

ЗДОРОВЫМ

МАЛЫШ!



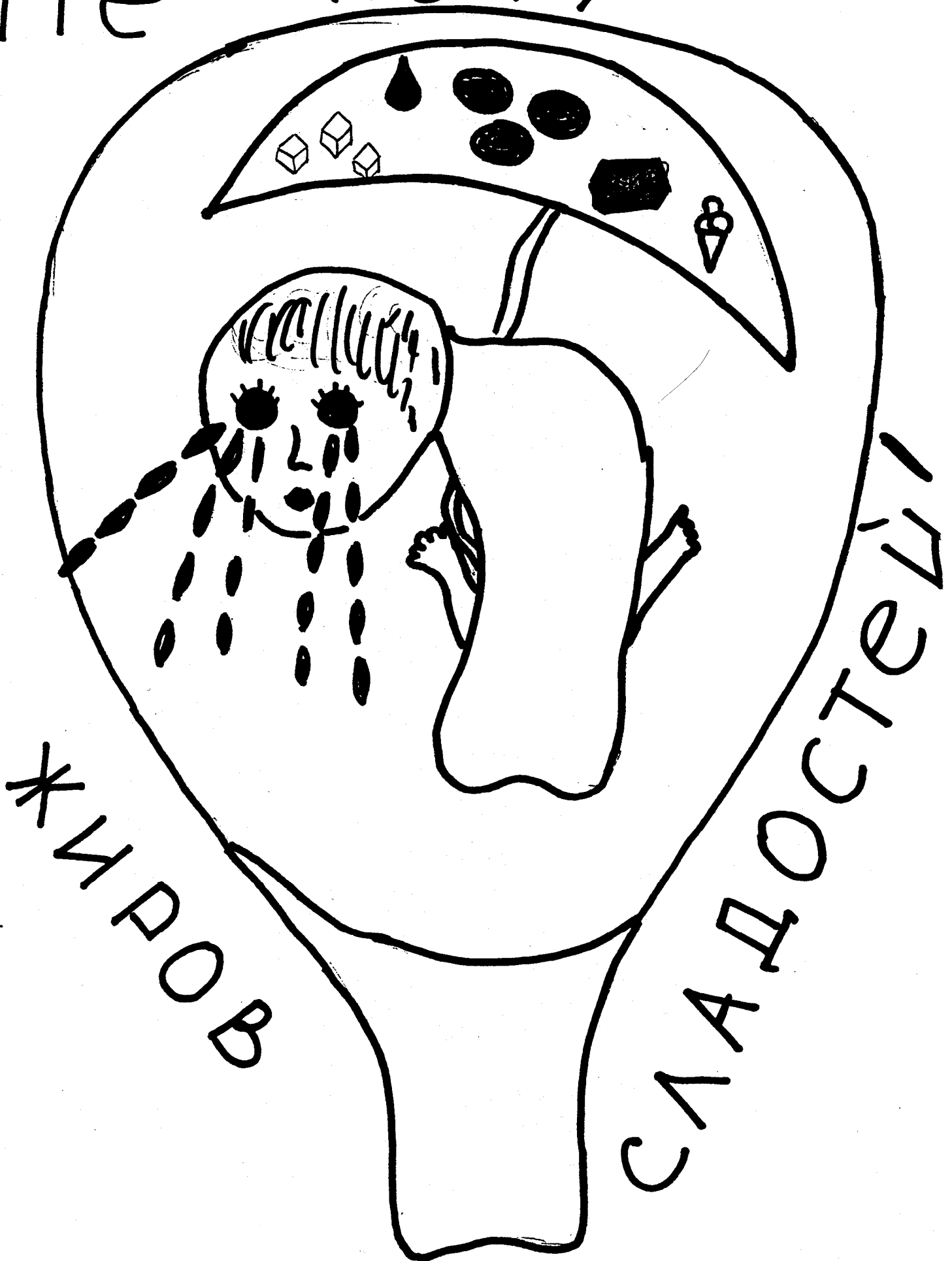


Это я

ЛЮБЛЮ!

Н е

х о ч у



ж и в о в

с л а д о с т е й

и

Оцени себя сама !!!

За каждый ответ - ДА!
получи - 1 балл

Вопросы:

1. Съела ли ты 5 порц. овощей и фруктов?
2. Съела ли ты 5 порц. хлеба, каши и картофеля?
3. А 2-3 порц. молока? молоч. прод.?
4. 2 порц. мяса и рыбы?
5. Не более 2 порц. жира и сладостей?
6. Питаться ли ты разнообразно?
7. Съела ли ты 2 порц. свежих овощей?
8. Хотя бы 1 порц. свежих фруктов?
9. Здоровы ли, полезны ли - перекусы?
10. Избегаешь ли ты жирной пищи?

Отлично - 10 баллов.

Хорошо - 8-9 баллов.

Удовлетворительно - 4-7 баллов.

Рискованно - 3 и менее.



Лучшее
начало
жизни -
грудное
вскармлива-
ние. Кормле-
ние грудью - это
искусство, кото-
рому надо учиться!

Грудное кормление -
это умно,
это правильно,
это доступно,
менее хлопотно,
это красиво!

За это
вас будут
любить
дети и муж.

0

МЯС - 1 ч.л.
САХАР - 3 ч.л.
ТОРТ - 1/2 кус.
МЕД - 1 ч.л.

2-3

2-3

МОЛОКО - 1 ч.л. МЯСО - 70 г.
СЫР - 45 г. РЫБА - 70 г.
ТВОРОГ - 1 ч. ГОРОХ - 1 ч.

3-5

2-4

ОВОЩИ - 100 г. ЯБЛОКО - 1 шт.
ЛИСТВЕННЫЕ - 1 ч. ЯГОДЫ - 1/2 ч.
СОК - 160 мл. СОК - 160 мл.

6-11 ПОРЦИЙ

ХЛЕБ - 30-40 г.

КАША - 2 ст. ложки

МАКАРОНЫ - 3 ст. л., КАРТОФЕЛЬ - 2 шт.

