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**'Enhancing Education in Lactation  
Management in the Undergraduate  
Medical Curriculum'  
3 & 4 May 2012**



# **REPORT ON 'Enhancing Education in Lactation Management in the Undergraduate Medical Curriculum'**

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## **EXECUTIVE SUMMARY**

Step 2 of the “Ten Steps to Successful Breastfeeding” states “Train all healthcare staff in skills necessary to implement this policy”. One of the main barriers to successful implementation of breastfeeding policy is lack of knowledge and skills among healthcare professionals.

A 2-day conference was held to create a platform to discuss, promote, development and enhancement lactation management in the undergraduate medical curriculum among medical schools in Malaysia.

We conducted a pre-conference survey to describe how lactation management is taught in Malaysian Undergraduate Medical Programmes. Out of 10 schools that responded, 6 schools reported that there is an existing lactation management curriculum in place. Time allocated to teaching lactation management varied greatly among the 10 schools with as little as 1 hour to 10 hours of classroom teaching. Clinical teaching on lactation management fared worse as some schools do not even have any clinical session. There was often a discrepancy between what was taught and what was observed in the clinical setting.

A total of 20 participants representing 8 medical schools (including 2 from Saudi Arabia) attended.

All participants unanimously agreed that lactation management is an important subject that needed an integrated approach throughout the curriculum with both classroom and clinical sessions. Lactation management should be considered as a compulsory subject in the Malaysian undergraduate medical curriculum and this should be monitored by MQA. A minimum requirement should be set but the conference recommended that this must include practical bedside or clinic based sessions with direct observation of breastfeeding. Students graduating from medical schools should be competent to recognise, diagnose and refer breastfeeding-associated complications. Teachers and clinicians should be trained so that there is no discrepancy between the theory taught in medical school and what is observed in actual hospital practice.

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## INTRODUCTION

Breast is best. The World Health Organization recommends exclusive breastfeeding for the first 6 months of life and continued breastfeeding with timely introduction of complementary food up till 2 years or beyond. Suboptimal breastfeeding, especially non-exclusive breastfeeding in the first 6 months of life is responsible for 1.4 million deaths worldwide and 10% of disease burden in children under 5 years (1).

The Baby Friendly Hospital Initiative (BFHI) launched in 1991 by WHO and UNICEF was aimed at increasing breastfeeding rates in the community for the improvement of children's health through optimal nutrition. Malaysia adopted the BFHI policy and successfully implemented in all of its public hospitals. The success of Malaysia in implementing the BFHI policy was highlighted as a case study in a recent WHO Review of nutrition policies (2).

Step 2 of the "10 steps to successful breastfeeding" states "Train all healthcare staff in skills necessary to implement this policy" (3).

There is no doubt that healthcare professionals play an important role in promoting, supporting and protecting breastfeeding (4). However, time again, studies have revealed that the knowledge of healthcare professionals especially doctors on matters relating to breastfeeding is often low. This includes doctors who directly care for children and breastfeeding women (5-9).

One of the main barriers to training healthcare professional is the lack of core curriculum on lactation management in medical schools and nursing schools (10). National and international policy makers had recognized that importance of training healthcare professionals should begin at the undergraduate stage. The US Surgeon General's Call to Action to support breastfeeding 2012 included improving breastfeeding content in the undergraduate and graduate education and training of healthcare professionals (10). WHO and UNICEF's Global Strategy for Infant and Young child Feeding also emphasised on undergraduate medical training (11).

Currently, there are no clear guidelines for teaching lactation management in Malaysian undergraduate medical schools. Most schools have their own methods of teaching and are driven only by interested individuals. The Malaysian Quality Agency for Higher Education (MQA) does not require all medical schools to have a minimum curriculum on lactation management.

Recognizing that training at the undergraduate level is vital for the successful implementation of breastfeeding policies and the inconsistent way it is being taught, Penang Medical College together with World Alliance for Breastfeeding Action (WABA), organized a conference entitled 'Enhancing Education in Lactation Management in the Undergraduate Medical Curriculum'.

The conference was held on the 3-4 May 2012 at the Northam All Suites Hotel, Penang with 20 participants from 8 medical schools (including 2 from Saudi Arabia).

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## **AIM AND OBJECTIVES**

The aim of this conference was to create a platform to discuss, promote, the development and enhancement of lactation management in the medical curriculum among medical schools in Malaysia.

The outcome objectives were:

- Have an overview of how lactation management is being taught in medical schools in Malaysia and elsewhere
- Be equipped with new evidence in lactation practice that would be important for doctors to know
- Be equipped with current evidence on effective methods of teaching lactation management to medical students
- Be aware of what resources are the available for developing lactation management curriculum
- Be able to develop new or enhance existing lactation management curricula in their own institutions

## PRE-CONFERENCE SURVEY

A survey questionnaire was sent out prior to the conference to 27 public and private medical schools in Malaysia to assess the extent of teaching in lactation management in the undergraduate medical curriculum in their respective institutions. 10 out of 27 medical schools responded to this survey, 5 public and 5 private medical schools. 6 schools stated that there is a dedicated lactation curriculum in their institution and 4 did not have a curriculum but some lactation management was taught. For all schools, the subject is mainly taught in Paediatrics followed by Community Medicine or Obstetrics and Gynaecology (Tables 1 & 2).

Table 1: Department involved in teaching (Schools with dedicated lactation management curriculum)

Department	Number of Schools (N=6)
Paediatrics	5
O&G	1
Community Medicine	2

Table 2: Department involved in teaching (Schools without dedicated lactation management curriculum)

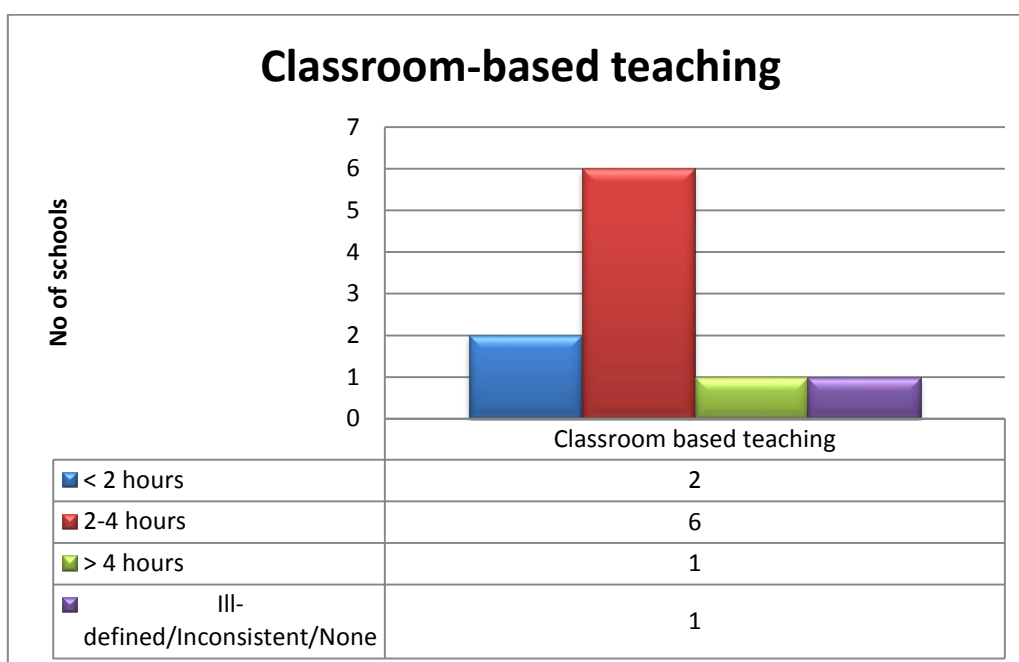
Department	Number of Schools (N=4)
Paediatrics	3
O&G	1
Community Medicine/Women's Health	2
Physiology	3
Anatomy	2

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The hours spent on teaching lactation management varied vastly amongst medical schools: didactic sessions ranged from 1-7 hours and clinical sessions ranged from 0-16 hours in schools with lactation management curriculum and in schools without lactation management programmes didactic sessions ranged from 3-10 hours and clinical sessions ranged from 0-7 hours.

The methods of teaching including number of hours for all schools are presented below:

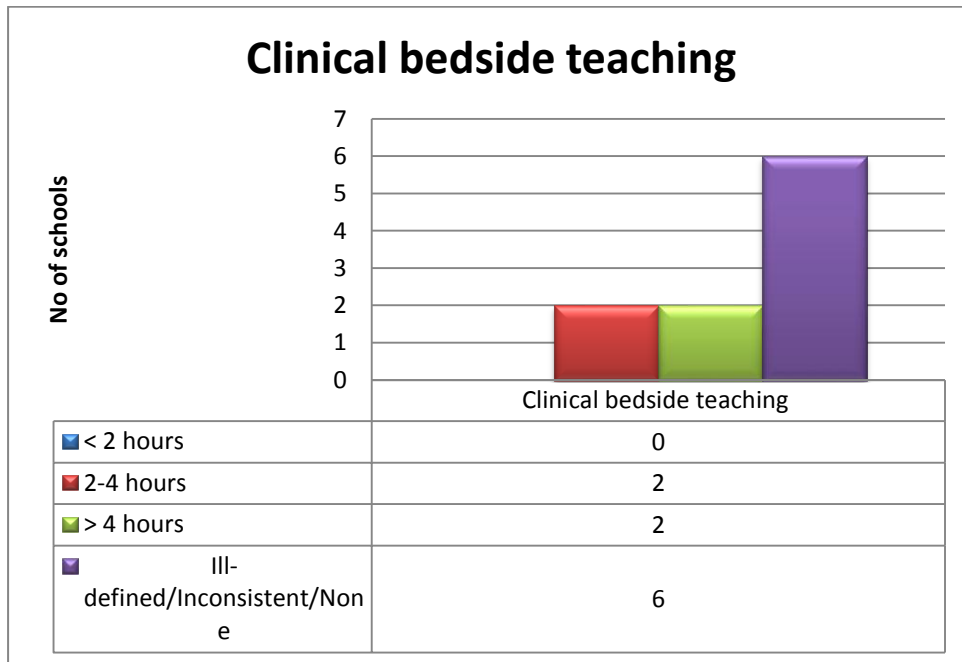
1. Classroom-based teaching



All schools (n=10) had classroom teaching. 9 out of 10 schools used lectures. One school only had task based learning (i.e .student’s presentation). Two schools reported the use of video sessions. The majority of schools used 2-4 hours for teaching lactation management in the classroom. One school did not specify number of hours for classroom teaching and reported a total of 4 hours for “lectures and ward rounds.”

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2. Clinical bedside teaching

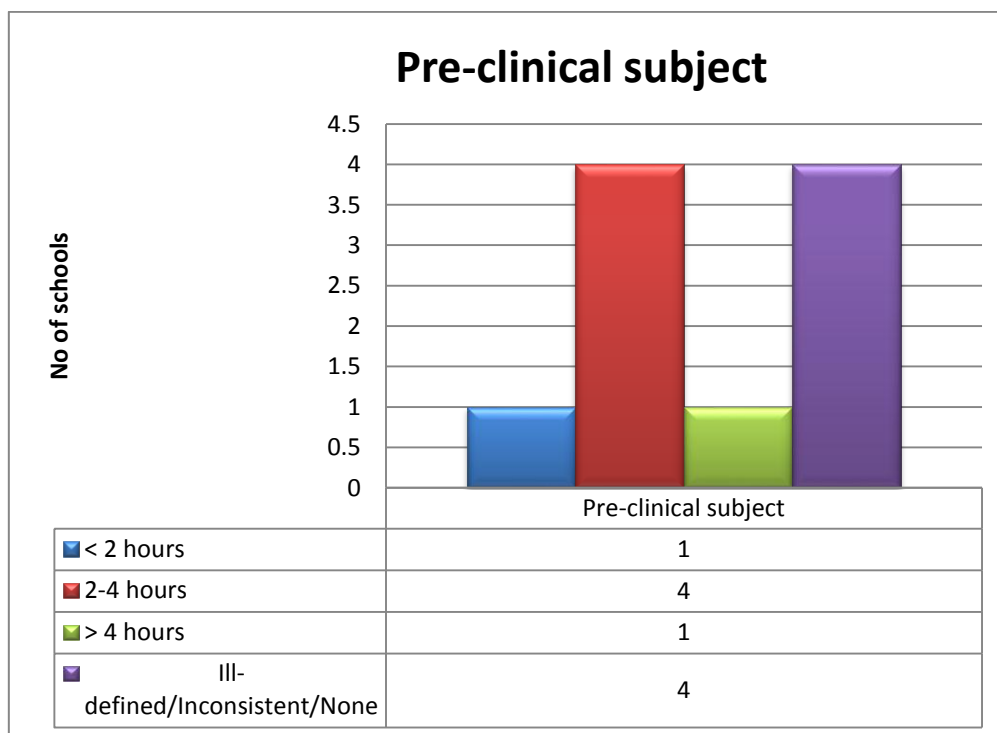


4 out of 10 schools had well-defined number of hours dedicated to teaching lactation management. Six schools had ill-defined/inconsistent/none number of hours to teach the subject. 4 of the 6 schools from that group had no bedside teaching on lactation management in their curriculum. The two other schools had reported bedside teaching but it was judged as inconsistent because there were no number of hours stated.



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3. Pre-clinical subject



6 out of 10 schools reported incorporation of pre-clinical subjects in teaching lactation. This may be under-reported as the departments that responded were the clinical departments and may not have sought input from the pre-clinical departments.

Note: Some schools appeared to have not surveyed preclinical teaching and would have missed any curriculum items, for example anatomy of the breast, physiology of milk production.

Although the sample size was very small, this survey had demonstrated these points:

1. All schools teach something about lactation/breastfeeding but there was a lack of clinical teaching.
2. There was considerable variation in the time spent on the subject, from as little as 1 hour to as many as 16 hours.
3. The leading clinical departments teaching lactation is are Paediatrics and Community Medicine.

## CONFERENCE CONTENT

There were three main activities in the conference.

### **1. Presentation of Lactation Programmes for Undergraduate Medical Studies in Malaysia.**

In line with the objective of the conference to give the participants an overview of how lactation management is taught in Malaysia, we invited schools with lactation programmes to present their curriculum.

Penang Medical College presented an overview of its lactation management programme, including feedback from students. The National Defence University Malaysia (Universiti Pertahanan Nasional Malaysia) also presented its lactation management curriculum.

### **2. Plenary session**

The main speakers for the conference were Dr Audrey Naylor (President & CEO of Wellstart International, US) and Dr Felicity Savage (Chairperson WABA Steering Committee and Infant Feeding Consortium, UK) and local speakers. The sessions covered topics on medical education, breastfeeding updates and local issues on breastfeeding including the code of ethics.

(See appendix 2 for conference programme and biography of speakers.)

### **3. Workshop**

On the second day, the participants were divided into 3 workshops –

Workshop 1: “Developing a Lactation Curriculum for a Malaysian medical school”

Workshop 2: “Teaching and learning experience for lactation curriculum”

Workshop 3: “Nurses and nursing college curriculum”. The outcomes of the nurses’ workshop are not presented here.

\*There were not enough participants to have the other workshops as planned in the programme.

## **OUTCOMES OF WORKSHOP 1 & 2**

### **A. Workshop 1 “Developing A Lactation Curriculum for a Malaysian Medical School”**

Task:

1. Develop a set of learning outcomes or required competencies that could be used in a Malaysian Medical School
2. To develop detailed preclinical learning outcome
3. To define the role of Medical Disciplines in teaching students lactation management and how staff would be trained to teach

Members of this workshop were represented by the following medical schools:

1. National University of Defence Malaysia
2. Aimst University
3. Al imam University, Medical College, Saudi Arabia
4. UCSI University

Members of this workshop agreed that teaching of lactation management should start from the pre-clinical years. The medical disciplines that should be involved are Anatomy, Physiology and Pharmacology. Topics that should be covered here under the Reproductive, Gastrointestinal and Endocrine Systems are anatomy and histology of the mammary gland, physiology of milk production and breastfeeding reflexes, usage of medications and substance abuse in pregnancy and lactation, nutrition – breastmilk and its composition, mechanism of breastfeeding.

During the clinical years, there should be reinforcements on the importance and mechanism of breastfeeding. This is best achieved by Community Medicine and Family Medicine. Students should also be introduced to the Baby Friendly Hospital Initiative, International Code of Ethics of Marketing Breastmilk Substitutes as well and breastfeeding counselling skills during their rotations at these disciplines. The O&G department should cover birthing practices that encourage and promote breastfeeding such as restricted use of episiotomy and early skin to skin contact. The Paediatrics Department should cover the importance of continued breastfeeding and identifying breastfeeding problems in infants and mothers.

Among the specific learning outcomes that were suggested:

1. Recognize correct and incorrect positioning and attachment at the breast during feeding and the consequences of this.

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2. Recognize features of an adequate breastfeed
3. Be able to explain to a parent the advantages of breastfeeding and the importance of sustaining breastfeeding for six months
4. Be able to explain breastfeeding options to a working mother
5. Be able to explain the disadvantages of formula feeding
6. Be able to explain the importance of skin to skin contact and demonstrate how this is done.
7. Be able to identify common problems of breast feeding in baby and mother and able to provide appropriate assistance or timely referral.
8. To demonstrate ethical behaviour in lactation management such as
  - a. Promoting and supporting breastfeeding in health services (eg through Baby Friendly Hospital Initiative) and
  - b. Be aware of the doctors' responsibilities in relating to milk manufacturers (eg through the Malaysian Code of Ethics for the Marketing of infant foods and related products.

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## **B. Workshop 2: “Teaching and learning experience for lactation curriculum”**

Task:

Recognising that you will be implementing a breastfeeding curriculum and using up to date teaching and learning methodology, suggest some teaching methods that could be used to teach undergraduate medical students.

Members of this workshop were represented by the following medical schools:

1. Universiti Putra Malaysia
2. Universiti Malaysia Sabah
3. Allianze University College of Medical Sciences
4. King Abdul Aziz Medical City, Saudi Arabia

Members of this workshop presented several teaching methods for teaching lactation management to undergraduate students.

1. Video Session: For demonstrating positioning and attachment.
2. Practical Sessions at the bedside or community clinic with real observation and interaction of mother-infant dyads for recognition of correct or incorrect positioning and attachment and the problems that might arise from this.
3. Practical Session at skills lab using dolls and breast model: Direct hands-on experience on positioning and attachment and correct techniques for milk expression.
4. Use of role plays or case scenarios as problem solving sessions to address breastfeeding problems such as engorgement and other causes of breast tenderness, nipple pain and inadequate milk supply.
5. Interactive lectures for basic science subjects e.g. anatomy and physiology of breastfeeding
6. Student directed learning and e-learning tools such as the WELLSTART self-study module.
7. Role plays for communication skills to communicate breastfeeding information and assist mothers with problems.

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## **LIMITATIONS OF THE CONFERENCE AND WORKSHOP**

The main limitation was the small number of participating schools compared to the number of medical schools in the country and this was in spite of having some of the best renowned international speakers on this subject. Out of the 20 participants, 6 local medical schools were represented and 2 foreign medical schools (from Saudi Arabia). A larger number of participants from local universities would provide a better reflection of the status of teaching lactation to undergraduate medical students in Malaysia.

Concerted efforts were made to ensure that all schools were well informed about the conference and yet participation was low. Our concern was that the low rate of participation might reflect a lack of awareness of the importance of this subject.

## **FEEDBACK FROM PARTICIPANTS**

Two separate feedback forms were distributed to all participants – one was a general feedback on the conference and another about their follow-up commitment to their institution after the conference.

The majority of the participants rated the Conference 4 or 5 out of 5 in terms of helping to plan a lactation management programme as part of undergraduate medical curriculum. On the usefulness of the plenary sessions on planning a lactation management programme, almost all sessions had the majority rated 4 or 5 out of 5. Some comments from the participants that stood out were “I liked the Positive commitment shown about making a change in our curriculum” and “Most enjoyed the promotion / advocacy that was present”

Almost all participants made a written commitment to return to their institution to make changes to their curriculum to include or enhance the teaching of lactation management. These will be followed up.

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## RECOMMENDATIONS

Lactation management is an important subject but not taught well in the undergraduate programme.

Our recommendations are:

1. Lactation management is to be considered a compulsory subject in the Malaysian undergraduate medical curriculum. The minimum curriculum should include competencies in:
  - i. Recognizing correct attachment for breastfeeding
  - ii. Recognizing adequate breastfeeding
  - iii. Discussing and promoting exclusive breastfeeding for the first 6 months of life.
  - iv. Recognizing breastfeeding problems and timely referral to prevent complications.
2. The Malaysian Quality Agency for Higher Education should develop minimum criteria and monitor the quality of the teaching and learning. The output from this conference might serve as a useful starting point.
3. The teaching of lactation management should not only be didactic but include interactive sessions on communication skills and clinical exposure.
4. There is an urgent need for staff training and change in hospital practices.

What is taught in medical school needs to be supported by what is observed in practice. Therefore teachers and clinicians need to be trained in best practices in education and lactation practice.

It was recognised that all medical schools, whether or not they have their own dedicated teaching hospital, use public hospitals for clinical teaching and often the teaching staff do not practice in these hospitals and vice versa in many situations the hospital staff do not teach. Staff training should include hospital clinicians and nurses.

There needs to be a close relationship between the teacher and the clinician for the sake of our future doctors.
5. Nursing curriculum delivery needs to be strengthened to support this. A group of nurse educators at the conference met separately. They acknowledged that breastfeeding was covered well the nursing curriculum but that delivery of the curriculum was inconsistent and sometimes weak and needed to be improved to support initiatives in medical schools.

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## CONCLUSIONS

This conference had achieved its aim and objectives.

We have highlighted the inconsistencies of teaching lactation management among Malaysian medical schools from the pre-conference survey. The two medical schools with a structured curriculum on lactation management shared their curriculum and this assisted the participants during the workshop sessions.

From the plenary sessions, the importance of teaching the subject while in medical school (pre-service training) was emphasized and best practices in lactation were presented. The plenary had served its purpose as participants were aware of what practices should be taught and experienced in the undergraduate setting.

From the active participation and discussion from the participants, speakers and facilitators, there was an agreement to recommend a standard minimum curriculum for undergraduate medical students for lactation management in Malaysia.

The participants were also enthusiastic about making a change in their institutions regarding the subject. We offered assistance to medical schools that intend to start or enhance their existing curriculum. We will be contacting the interested schools after the conference.

We hope our recommendations here will be used by the Ministry of Health and Malaysian Quality Agency for Higher Education to make lactation management a compulsory subject in the undergraduate medical curriculum in Malaysia.



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## APPENDICES

1. List of participants
2. Conference programme
3. Brief curriculum vitae of speakers
4. Feedback Forms
5. Workshop details.

### 1. LIST OF CONFERENCE PARTICIPANTS

1	Malaysia	Soe Soe Aye	Prof. (Dr.)	Pediatrician	Alliance University College of Medical Sciences
2	Malaysia	Adlina Binti Suleiman	Dr.	Professor of Public Health	National University of Defence Malaysia
3	Malaysia	Selim Ahmed	Dr.	Pediatrician	University Malaysia Sabah
4	Malaysia	Faridah Binti Idris	Dr.	Patologi	Universiti Putra Malaysia
5	Saudi	Fouzia Abdul Aziz Alhreashy	Prof. (Dr.)	Consultant Family Medicine	Al imam University, Medical College
6	Malaysia	Riptinder Singh	Prof. (Dr.)	Obstetrics & Gynaecology	Aimst University
7	Malaysia	Usha Rani Singh	Dr.	Pediatrics	Aimst University
8	Malaysia	Philomna D'Souza	Dr.	Pediatrics	Aimst University
9	Malaysia	Norhayati Binti A. Muttalib	Ms.	Maternity	Penang Nursing College
10	Malaysia	Kim Ng Foo	Ms.	Midwifery	Penang Nursing College
11	Malaysia	Than Da	Dr.	Pediatrics	UCSI University

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12	Malaysia	Win Kyi	Prof.	Community Medicine	UCSI University
13	Malaysia	Irene Cheah Siew Lin	Ms.	Sister	Lam Wah Ee Hospital
14	Malaysia	Chan Siew Eng	Ms.	Staff Nurse	Lam Wah Ee Hospital
15	Malaysia	Ooi Mei Ching	Ms.		Gleneagles Penang
16	Malaysia	Koay Hooi Yong	Ms.		Gleneagles Penang
17	Saudi	Nivin Essameldin Youssef	Dr.	Family Medicine	King Abdul Aziz Medical City
18	Saudi	Dr. Nora Hamad Alkharji	Dr.	Paediatric Consultant	King Abdul Aziz Medical City
19	Saudi	Dr. Wafa Ahmed Fallatah	Dr.	Family Medicine	King Abdul Aziz Medical City
20	Malaysia	Tay Pai Lim	Ms.	Lactation Nurse	Penang Adventist Hospital
<b>TRAINERS/FACILITATORS</b>					
21	Malaysia	Jacqueline Ho	Prof. (Dr.)		Penang Medical College
22	Malaysia	Tan May Loong	Dr. (Ms.)		Penang Medical College
23	Malaysia	Foong Siew Cheng	Dr. (Ms.)		Penang Medical College
24	Malaysia	Foong Wai Cheng	Dr. (Ms.)		Penang Medical College
25	Malaysia	Yap Tsiao Yi	Dr. (Ms.)		Penang Medical College
26	Malaysia	Jamie Khoo	Dr. (Ms.)		Penang Medical College
27	Malaysia	Rokiah Don	Ms.		Bahagian Pembangunan Kesihatan Negara
28	Malaysia	Wong Woan Yiing	Dr. IBCLC (Ms.)	Paediatrician & Lactation Consultant	Ipoh Specialist Hospital

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29	United Kingdom	Felicity Savage	Dr. (Ms.)	Community Pediatrician	Infant Feeding Consortium
30	United States of America	Audrey Naylor	Dr. (Ms.)	President and CEO	Wellstart International
<b>SECRETARIAT</b>					
31	Malaysia	Chuah Pei Ching	Ms.	Health Officer	WABA
32	Malaysia	Derchana Devi	Ms.	Admin	WABA
33	Malaysia	Sam Sh'ng Sh'ng	Mr.	Webmaster	WABA
34	Malaysia	Naweed Harooni	Mr.	Programme Coordinator	WABA
35	Malaysia	Sarah Amin	Ms.	Executive Director	WABA

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**2. CONFERENCE PROGRAMME**

<b>DAY 1 (3 MAY 2012)</b>		
	<b>SPEAKER</b>	<b>TIME</b>
<b>Registration</b>		7.45 – 8.30am
<b>Introduction &amp; Opening</b>	Prof Jacqueline Ho <i>Guests of Honour:</i> <i>Prof Ellis McGovern,</i> <i>President, Royal College of</i> <i>Surgeons Ireland</i> <i>Mr Brendan Lyons,</i> <i>President, Penang Medical</i> <i>College</i>	8.30-9.00am
<b>Experience of medical schools</b>	Dr Jamie Khoo Dr Tan May Loong Dr Adlina Suleiman	9.00-10.00am
<b>Promoting OIYCF through strengthening pre-service curricula for the Health Provider Students</b>	Dr Audrey Naylor	10.00-10.40am
<b>MORNING BREAK</b>		10.40 – 11.10pm
<b>Newer evidence for the advantages of breastfeeding</b>	Dr Wong Woan Yiing	11.10-11.40am
<b>Newer evidence on delivery practice</b>	Dr Felicity Savage	11.40am-12.20pm
<b>Mechanics of suckling and milk sufficiency</b>	Dr Felicity Savage	12.20 – 1.00 pm
<b>LUNCH</b>		1.00 – 2.00pm
<b>Breastfeeding infants with medical problems</b>	Prof Jacqueline Ho	2.00 – 2.30 pm
<b>Handling breast condition and feeding problems</b>	Dr Felicity Savage	2.30 – 3.00 pm
<b>Breastfeeding in Malaysia</b>	Pn Rokiah Don	3.00 – 3.30 pm
<b>TEA BREAK</b>		3.30 - 4.00pm
<b>The Malaysian Code of Ethics</b>	Pn Rokiah Don	4.00 – 4.30 pm
<b>Update on Teaching and Learning in Medical education</b>	Dr Foong Siew Cheng	4.30 - 5.00 pm

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<b>Day 2 (4 MAY 2012)</b>		
	<b>SPEAKER</b>	<b>TIME</b>
<b>Workshop Briefing</b>	Dr Jamie Khoo	9.00-9.15am
<b>Workshop/ Aims</b>		
<b><u>WORKSHOP 1</u></b> Developing A Lactation Curriculum for a Malaysian medical school		9.15-10.30am
<b><u>WORKSHOP 2</u></b> Teaching and learning experience for lactation curriculum		Morning tea break 10.30-11.00am
<b><u>WORKSHOP 3</u></b> For nurses and nursing college		11.00am-12.30pm
<b>LUNCH</b>		12.30 -2.00pm
<b>Presentation of workshop materials</b>	Representative from each group	2.00-3.45pm
<b>TEA BREAK</b>		3.45-4.15pm
<b>Summing up and future direction</b>	Panel Discussion	4.15-4.45pm
<b>Evaluation and Commitment</b>		4.45-5.00pm

### 3. SPEAKER'S CURRICULUM VITAE



#### 1. Audrey Naylor

Audrey Naylor, President and CEO of Wellstart International, is a board certified pediatrician with additional training in infant development, maternal and child health and epidemiology. In addition to receiving a degree in Medicine from the University of California Los Angeles School of Medicine, she also holds a DrPH in Epidemiology (with a major focus on perinatal care) from UCLA School of Public Health. She has a lifetime professional interest in maternal, infant, and family health promotion, preferring to prevent rather than treat disease. In 1985, she co-founded Wellstart International, a nonprofit organisation established to educate health care providers (medical and nursing students as well as perinatal specialty residents), in the "why and hows" of optimal infant and young child feeding. She has been instrumental in both international efforts to promote breastfeeding as the normal and optimal way to feed infants and young children and is a founding member of the World Alliance of Breastfeeding Action. She is currently a Clinical Professor of Pediatrics (Voluntary, part-time) at The University of Vermont College of Medicine.



#### 2. Felicity Savage

Dr Felicity Savage lived and worked as a pediatrician in developing countries for a total of 18 years, in Zambia (1966-72), Indonesia (1972-78) and Kenya (1979-84). During that time she worked in community paediatrics with a particular interest in nutrition; and has written books, developed courses and other training materials, and taught health workers about breastfeeding.

From 1993 – 2001 Dr. Savage worked as a Medical Officer with WHO in Geneva, in the Department of Child and Adolescent Health and Development where she was responsible for the promotion of breastfeeding, policy development and training, including the area of HIV and infant feeding. She continues to promote breastfeeding with particular concern for education and training of health professionals. She is Honorary Senior Lecturer in the Centre for International Child Health, Institute of Child Health, London, where she is founding Director of the annual Breastfeeding: Practice and Policy Course. She is a fellow of the Royal College of Physicians (FRCP), Fellow of the Faculty of Public Health Medicine (FHPHM), Fellow of the Royal College of Paediatrics and Child Health (FRCPCH), Fellow of the Academy of Breastfeeding Medicine, and Fellow of the Indian Academy of Pediatrics. She was a pioneer in the development of the breastfeeding movement in the 1980s, leading up to the formulation of the Innocenti Declaration in 1991 and the inception of WABA, and she continues to undertake consultancies in all regions, for NGO's as well as for UNICEF and WHO, mostly relating to health worker training in breastfeeding and related subjects. She is currently Chairperson of the WABA Steering Committee.

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### 3. Jacqueline Ho

Prof Jacqueline Ho MB,ChB, FRCP, FRCPCH, M.Med.Sc(ClinEpid), is the Professor of Paediatrics and Head of Department of Paediatrics at Penang Medical College. She is the Consultant Neonatologist at Penang Maternity Hospital. She has published more than 54 peer-reviewed publications. She is currently the Coordinator of Malaysian Cochrane node, Cochrane review author and trainer, and Technical consultant to WHO.



### 4. Rokiah Don

Rokiah is the Director, Nutrition Division from Ministry of Health. She is a strong breastfeeding advocate and is responsible for promotion and training of breastfeeding in Malaysia.



### 5. Wong Woan Yiing

Woan Yiing is a Consultant Paediatrician at Hospital Raja Permaisuri Bainun, Ipoh and KPJ Ipoh Specialist Hospital and is an internationally board certified Lactation Consultant (IBCLC) since 2006. She has participated in the WABA Breastfeeding Advocate and Practice course 2011.

She has worked with Hospitals wishing to attain WHO Baby Friendly Hospital Status and has performed two lecture tours to Luzhou China on aspects of breastfeeding.

Her other paediatric interest is in Developmental and Behavioural Paediatrics. She also has experience in facilitating for parenting courses, particularly for Chinese speaking parents and has published in the area of child abuse.





### 6. Foong Siew Cheng

Dr. Foong Siew Cheng obtained her medical degree from Universiti Sains Malaysia in 1994. She completed her postgraduate training in Paediatrics and obtained the MRCP (UK) in 1998. She is registered with the National Specialist Register as a Consultant Paediatrician. She is currently a Senior Lecturer in Penang Medical College and a visiting paediatrician in Penang Hospital. She is also a certified NRP and PALS instructor. She has 1 published review Cochrane article. Her special interest is in Medical Education.



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	<p><b>7. Tan May Loong</b></p> <p>Dr Tan May Loong was trained at Faculty of Medicine, University of Malaya and graduated in 2001. In 2006, she received her Membership of Royal College of Paediatrics and Child Health (MRCPCH), United Kingdom. She has served in the Ministry of Health from 2001 until 2009 when she joined Penang Medical College as a lecturer. She is also currently serving at Hospital Pulau Pinang as a Paediatrician. Her special interests are in the area of developmental problems of childhood and learning disorders. She is also a Cochrane Systematic Review author and has just published a protocol on Polyunsaturated Fatty Acids (PUFAs) in children with specific learning disorders.</p>
	<p><b>8. Jamie Khoo</b></p> <p>Dr Jamie Khoo is a trainee lecturer in Department of Public Health Medicine, Penang Medical College (PMC) and a 2003 PMC graduate. She is a Certified Lactation Consultant IBCLC 2009 and is an advisor in the Mother to Mother Peer Support (MMPS) group in Penang. She had undergone 24 hours mother-to-mother peer support training by Sue Saunders, IBCLC from UK in 2007 and has working experience with WABA. She is currently pursuing her Masters by Research with Institute of Postgraduate Studies, University Sains Malaysia – Sarjana Sains (Kesihatan Keluarga) – Research topic: Parental knowledge and attitude on breastfeeding practices in Penang Hospital.</p>

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## 4. FEEDBACK FORMS

### Enhancing education in lactation management in the undergraduate medical curriculum

#### Follow-up Form

Participant Name: .....

Institution: .....

Position: .....

Contact email: .....

1) What follow-up can you undertake in implementing all or part of what you've learnt at this conference towards including or improving lactation management in your medical curriculum

a) What could you personally do?

\_\_\_\_\_

b) What would you recommend to your head of department/dean?

\_\_\_\_\_

2) What areas would be particularly challenging? Identify specific barriers to the above recommendations.

\_\_\_\_\_

3) What specific assistance would you require for this follow-up to happen? Be specific.

\_\_\_\_\_

4) Are you going to be the person who will follow-up on the above commitment? Y / N  
If not, who is the relevant contact person for such follow-up?

Name: \_\_\_\_\_

Contact detail: \_\_\_\_\_

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## Evaluation Form

Thank you for taking the time to complete this form. Your feedback will help us improve.

1. What was your level of satisfaction with the following aspects of the conference?  
[1 = highly dissatisfied and 5 = highly satisfied]

Content	1	2	3	4	5
Presentations	1	2	3	4	5
Interactive sessions	1	2	3	4	5
Opportunity to ask questions	1	2	3	4	5
Handout materials	1	2	3	4	5
Location & organisation	1	2	3	4	5

Comments: \_\_\_\_\_

2. How would you rate the conference overall in terms of helping you plan lactation management as part of your undergraduate medical curriculum?

[1 = not at all useful and 5 = very useful]

1    2    3    4    5

3. Please give suggestions on how any of the individual sessions, the overall programme and anything else that would improve this programme

### How useful were the following plenary sessions for planning a lactation management programme?

[1 = not useful at all, 5 = very useful]

- 1) Results of questionnaire compilation on the experience of medical schools

1    2    3    4    5

- 2) Promoting OIYCF through strengthening pre-service curricula for the Health Provider Students

1    2    3    4    5

- 3) New evidence for the advantages of breastfeeding: immunology, IQ, behaviour and maternal protection

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	1	2	3	4	5
4) Newer evidence on delivery practices, skin to skin contact and early suckling	1	2	3	4	5
5) Mechanics of suckling and milk sufficiency	1	2	3	4	5
6) Breastfeeding infants with medical problems	1	2	3	4	5
7) Handling breast conditions and feeding problems	1	2	3	4	5
8) Breastfeeding in Malaysia	1	2	3	4	5
9) Malaysian code of ethics	1	2	3	4	5
10) Update on Teaching and Learning in Medical education	1	2	3	4	5
11) Presentation of Workshop results (Day 2)	1	2	3	4	5
12) Summing up and future direction (Day 2)	1	2	3	4	5

Which Workshop did you join in Day 2? (Please tick)

- Developing A Lactation Curriculum for a Malaysian medical school
- Teaching and learning experience for lactation.
- For nurses and nursing college

What was your level of satisfaction with the following aspects of the Workshop you joined on Day 2?

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[1 = highly dissatisfied and 5 = highly satisfied]

Topic/content of discussion	1	2	3	4	5
Resource material	1	2	3	4	5
Facilitation and participation levels	1	2	3	4	5

Comments: \_\_\_\_\_

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### **FINAL EVALUATION**

5) What did you like most about the conference?

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6) What did you like least about the conference?

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**Thank you.**

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## 5. WORKSHOP DETAILS

	TITLE	WORKSHOP TASK	WORKSHOP OUTCOMES
<b>WORKSHOP 1</b>	Developing A Lactation Curriculum for a Malaysian medical school	<ol style="list-style-type: none"> <li>1. Develop a set of learning outcomes or required competencies that could be used in a Malaysian Medical School</li> <li>2. To develop detailed preclinical learning outcome</li> <li>3. To define the role of Medical Disciplines in teaching students lactation management and how staff would be trained to teach</li> </ol>	<ol style="list-style-type: none"> <li>1. A set of minimum overall medical course learning outcomes or required competencies for the newly practicing doctor</li> <li>2. Provide pre-clinical learning outcome and suggest in a system-based preclinical curriculum how and where this should be taught</li> <li>3. Provide learning outcomes for clinical experience with specific details on the role of medical disciplines such as Obstetrics, Paediatrics, Family or Community Medicine or other in lactation management.</li> </ol>
<b>WORKSHOP 2</b>	Teaching and learning experience for lactation curriculum	Recognising that you will be implementing a breastfeeding curriculum and using up to date teaching and learning methodology, suggest some teaching methods that could be used to teach undergraduate medical students.	<ol style="list-style-type: none"> <li>1. A set of teaching sessions in lactation management including teaching methods, settings, group size, teaching hours, type of teacher/facilitator/tutor.</li> <li>2. Give details of practical sessions, direct patient exposure, problem solving sessions and other class room based activities such as classes in ethics and communication skills</li> </ol>
<b>WORKSHOP 3</b>	For nurses and nursing college	<ol style="list-style-type: none"> <li>1. Develop a set of outcome objectives or required competencies for nurses.</li> <li>2. Develop basic science objectives</li> <li>3. Develop appropriate student experience</li> <li>4. Additional practical skills that nurses would need to know over and above a general doctor</li> </ol>	