Remember: CHIN

Breastfeeding is recognised as ideal for infants (World Health Organization, undated), but formula feeding has become the norm in many parts of the UK. The initiation rate for England is 73.7% but 56.9% is reported for the North East (Department of Health, 2010), and some health visitors report having few or no breastfeeding mothers on their caseloads.

Health visitors have a key role in promoting and supporting breastfeeding, but there is no specific requirement for this within specialist community public health nursing (SCPHN) education (NMC, 2004). There is variation in theoretical content between programmes, and some students may qualify with little or no experience of working with breastfeeding mothers.

North East drive
Victoria Head was appointed obesity delivery manager – infant feeding and North East regional infant feeding co-ordinator in October 2008. She successfully bid for funding to support the three health visitor training institutions in the region to be accredited by UNICEF as part of the Baby Friendly Initiative. This will hopefully ensure that newly trained health visitors have the theoretical knowledge as well as practical skills to promote and support breastfeeding.

Through this regional drive, I attended the UNICEF Train the Trainer training course. Learners delivered a brief session to peers demonstrating how they would teach an aspect of theory on breastfeeding. As part of my presentation, I developed the mnemonic CHIN (see Box 1).

This was based on the theory covered during the training and captured the main principles of good attachment. I have often used mnemonics within my practice and as a student to help remember key information, and there is much evidence to support their effectiveness (Bloom and Lamkin, 2006; Keshavan, 2010). Many memory experts use a range of mnemonic strategies to aid memory and recall (Collins, 2007).

Using the mnemonic
I hope that the CHIN approach may be of use to practitioners, but also to mothers, particularly in the early days of breastfeeding. Good attachment is essential to prime milk producing cells and stimulate production, and prospective and new mothers should receive support and advice on positioning and attachment (National Institute for Health and Clinical Excellence, 2008). The UNICEF trainers were impressed with the mnemonic and it has since been incorporated within UNICEF training programmes.

The approach has also been cited within regional resources used to support healthcare professionals and promote breastfeeding. In addition to this, Janette Westman (a midwife and lactation consultant, as well as working for UNICEF) has been using the approach in practice, with some positive feedback from breastfeeding mothers.

As pathway lead for health visiting at Teesside University, I am keen to embed breastfeeding education and training within our programme, and we are working toward having the SCPHN health visiting pathway accredited by UNICEF. I would like to investigate the value of the CHIN approach further before incorporating it within the programme. Wallace and Kosmala-Anderson (2007) found that only 54% of practitioners felt competent or expert in positioning and attachment, and so the CHIN approach may be useful.

‘Good attachment is essential to prime milk producing cells’

References

We welcome feedback and interest from practitioners, email: l.harland@tees.ac.uk

Box 1. CHIN: Close, Head free, In line, Nose to nipple
- Close – babies need to be held close during breastfeeding. This allows them to attach to the breast, but is also more comfortable for the mother
- Head free – the baby's head should be supported, but free to move so that they may tilt their head to a good angle to attach to the breast
- In line – the baby should be held in line with the mother's stomach. This is a guide for good positioning
- Nose to nipple – a good way to ensure that the baby is in a good position to be able to attach to the breast.