



Health professionals' and managers' view on the implementation of a human milk bank in a military hospital

Visão dos profissionais e gestores de saúde sobre a implantação do banco de leite humano em um hospital militar

Visión de los profesionales y gestores de salud sobre la implantación de un banco de leche humana en un hospital militar

ABSTRACT

Objective: to understand the health professionals' and managers' perceptions regarding the implementation of a human milk bank in a Brazilian Navy hospital in Rio de Janeiro. **Method:** this is a descriptive, exploratory and qualitative study with semi-structured interviews conducted between November 2021 and January 2022. A total of 47 health professionals and managers from a Brazilian Navy hospital in Rio de Janeiro participated in it. The data was transcribed in full and subjected to content analysis. **Results:** the milk bank is a space for collection, pasteurization, quality control and storage. It also has a multidisciplinary team whose work focuses on the benefits of human milk for the baby and the complications of breastfeeding for the mother. **Conclusion:** the articulation with the milk bank proposal is in line with the health professionals' and managers' view in terms of guaranteeing its implementation in the military unit. **Descriptors:** Maternal and child health; Infant, newborn; Breast feeding; Human milk banks; Health policy.

RESUMO

Objetivo: Conhecer as percepções dos profissionais e gestores de saúde em relação à implantação do banco de leite humano em um hospital da marinha brasileira do Rio de Janeiro. **Método:** Estudo descritivo, exploratório, qualitativo com a realização de entrevista semiestruturada entre novembro de 2021 e janeiro de 2022. Participaram 47 profissionais e gestores de saúde de um hospital da marinha brasileira do Rio de Janeiro. Os dados foram transcritos na íntegra e submetidos à análise de conteúdo. **Resultados:** O banco de leite constitui um espaço de coleta, pasteurização, controle de qualidade, armazenamento. Além disso, tem uma equipe multiprofissional cuja atuação é voltada para os benefícios do leite humano para o bebê e as intercorrências da amamentação para a mãe. **Considerações finais:** A articulação com a proposta do banco de leite alinha-se com a visão dos profissionais e gestores de saúde de garantir a implantação na unidade militar. **Descritores:** Saúde materno-infantil; Recém-nascido; Aleitamento materno; Bancos de leite humano; Política de saúde.

RESUMEN

Objetivo: Conocer las percepciones de los profesionales y gestores sanitarios sobre la implantación de un banco de leche humana en un hospital de la Marina brasileña en Río de Janeiro. **Método:** Se Trata de un estudio descriptivo, exploratorio y cualitativo con entrevistas semiestructuradas realizadas entre noviembre de 2021 y enero de 2022. Participaron 47 profesionales y gestores de salud de un hospital de la Marina brasileña en Río de Janeiro. Los datos fueron transcritos en su totalidad y sometidos a análisis de contenido. **Resultados:** El banco de leche es un espacio de recogida, pasteurización, control de calidad y almacenamiento. También cuenta con un equipo multiprofesional cuyo trabajo se centra en los beneficios de la leche humana para el bebé y las complicaciones de la lactancia para la madre. **Consideraciones finales:** La articulación con la propuesta del banco de leche está en línea con la visión de los profesionales y gestores de la salud para garantizar su implementación en la unidad militar. **Descritores:** Salud materno-infantil; Recién nacido; Amamantamiento; Bancos de leche humana; Política de salud.

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INTRODUCTION

The importance of breastfeeding (BF) is widely known and publicized in academic studies, as it has numerous benefits⁽¹⁻⁶⁾ for the survival of the newborn (NB), by promoting health for the child's growth and development.

The World Health Organization (WHO) recommends that, from birth, all newborns should be placed in skin-to-skin contact with their mothers, with BF beginning in the first hour of life. Among its recommendations, Exclusive Breastfeeding (EBF) should be encouraged during the first six months of life and Complementary Breastfeeding (CBF) until two years of age or more, with the introduction of other foods with Breast Milk (BM). This is an opportune strategy for promoting EBF and women's and children's health, especially for preventing early weaning⁽²⁾.

EBF has the potential to reduce comorbidities in the lives of NBs and children, such as anemia, gastrointestinal infections, atopy and asthma. The provision of BM is therefore an important strategy with the greatest impact on reducing morbidity and mortality in children less than five years of age⁽⁴⁾. Accordingly, BM is a universally accepted, safe and successful food for the child's physical and mental health⁽²⁾.

Children exclusively breastfed for the first six months of life are more likely to survive than non-breastfed children, who account for around 41% of global deaths in children less than five years of age in sub-Saharan Africa, due to inadequate breastfeeding practices⁽²⁾. In this sense, data from the II Breastfeeding Survey in Brazilian state capitals and the Federal District carried out in 2008 showed that

the prevalence of exclusive breastfeeding in children less than six months of age was 41%⁽⁵⁾. Moreover, it was found a reasonable rate of between 50 and 89%, below the ideal (above 90%), highlighting the need for effective action to guarantee satisfactory health for children⁽¹⁾.

Breastfeeding rates are increasing in Brazil, a fact confirmed by the preliminary results of the Ministry of Health's National Child Feeding and Nutrition Study. In the study, 14,505 children under five years of age were evaluated, with 53% of the children being breastfed in the first year of life, where 45.7% were included in the exclusive breastfeeding index. Compared to the last 34 years, there has been an almost 16-fold increase in the rate of exclusive breastfeeding in children less than six months of age. With regard to the indicator of continued breastfeeding, i.e., up to 24 months of age, there was a 22.7-fold increase in the first year of life⁽⁷⁾. The data shows the need to expand policies and strategies to better promote breastfeeding indicators in Brazil.

Thus, in addition to guaranteeing the donation of HM, the Human Milk Bank (HMB) was conceived with the aim of implementing actions for the Promotion, Protection and Support (PPS) of breastfeeding, with the promotion of the child's health. It is noted that international data show the relevance of perinatal care for HMB, with women, children and their families, in addition to support for lactation and the cost-effectiveness of actions and possible reductions in hospitalizations⁽⁴⁾.

In fact, human milk is considered by pediatricians and neonatologists to be the fundamental nutrient for critically ill newborns, especially premature infants, as

it promotes the child's adequate growth, competent immune protection and, from a psychological point of view, the participation of mothers in neonatal units as a support factor⁽⁵⁾. Thus, HMB plays a key role in terms of promoting, protecting and supporting BF.

The study therefore had the following guiding question: What is the view of health professionals and managers on the implementation of a Human Milk Bank in a military health unit?

The implementation of a HMB allows the hospital unit to offer individualized care, guaranteeing the survival of newborns admitted to the neonatal care unit (ICU) and enabling care that is articulated with the health demands of this particular public. Professionals' and managers' views on implementation are required to promote discussion of the issue in this institutional context and to ensure the health of the community involved in health care.

In view of the above, the study had the objective of finding out health professionals' and managers' the perceptions regarding the implementation of the human milk bank in a Brazilian Navy hospital located in Rio de Janeiro.

METHODS

This is a descriptive, exploratory and qualitative study involving managers and health professionals from the Brazilian Navy Hospital called Marcílio Dias, located in the Lins de Vasconcelos neighborhood, belonging to the city of Rio de Janeiro, Brazil. The naval military unit focuses on maternal and child health and has a Neonatal Intensive Care Unit, an Obstetric Center, a Rooming-in Setting, a Pediatric ICU and a Pediatric Ward, with actions

aimed at BF.

The selection was made by convenience recruitment and met the following inclusion criteria: 1) over 18 years of age; 2) working in the maternal and child area for more than six months. The exclusion criteria were limited to those who were on medical leave or on statutory vacation during the period planned for data collection.

Data was collected between November 2021 and January 2022 by means of individual semi-structured interviews that were recorded and lasted an average of 35 minutes, during working hours, in a private room where only the interviewee and the researcher were present. The interviews covered the following questions: What is your view on the human milk bank and its implementation in the military hospital? What are the benefits of its implementation? Do you agree with it or not, and what are your reasons for implementing it? After being recorded and transcribed, the participants' testimonies were identified by the initials HP (Health Professionals) followed by a continuous number (HP1, HP2, HP3, [...], HP47), in order to guarantee the anonymity and confidentiality of the interviewee. The interviews were closed according to data saturation, when the meanings were understood through the similarities in the participants' meanings⁽⁶⁾. Saturation occurred in the 44th interview, and three more interviews were carried out before closure.

After this process, the interviews were transcribed in full by the main researcher and subjected to content analysis⁽⁹⁾. The goal of this analysis was to uncover the content of the testimonies.

It was held in three stages: 1) pre-analysis of the testimonies (the organization of the material was carried out, with floating reading, choice of documents to be analyzed); 2) exploration of the material and treatment of the results (with coding and categorization of the material – coding involves cutting out the units of meaning, which can be words, the theme, the object or referring to the event. In order to select the units, it is necessary to consider pertinence, being able to obtain frequency or occurrence, called contingency analysis. Categorization followed the semantic, syntactic, lexical or expressive criteria)⁽⁹⁻¹⁰⁾.

In the final phase, 3) treatment of the results, interference and interpretation, they became significant and valid with the presentation of the formulated categories, constituting a type of controlled interpretation, which could be based on the constitutive elements of the classic mechanism of communication by the message – meaning and code – and by the sender and the receiver⁽⁹⁾.

The study was approved by the Research Ethics Committee of the Fluminense Federal University School of Medicine and the Marcílio Dias Navy Hospital, respectively, under protocol n° 4.927.254/2021 and protocol n° 4.988.084/2021, in accordance with Resolution n° 466/2012 of the Brazilian National Health Council. In order to participate, all participants signed the Free and Informed Consent Form. The study was guided by the Consolidated Criteria for Reporting Qualitative Research (COREQ).

RESULTS

The 47 participants in the study included 33 health professionals and 14

managers. Of these, 10 were physicians, 14 nurses, 16 nursing technicians, 3 nutritionists, 2 speech therapists, 1 social worker and 1 dental surgeon.

The coding of the excerpts of the testimonies in units was carried out with the identification of the following meanings: conceptualization, social role and objectives of the HMB (55%); promotion, protection and support for BF (45%); manual expression of the breasts (31%); benefits in the care of women and newborns (26%); benefits in the growth and development and health problems of newborns (60%); Implementation of the HMB (44%); financial resources and infrastructure (36%), human resources and professional training (37%).

Based on the non-aprioristic categorization, which emerged from the context of the participants' responses, where the thematic unit was based on the following proposition: "The HMB and its social function for the benefit of breastfeeding", which gave rise to two thematic categories, namely: 1) The concept of the human milk bank: health professionals' view; 2) The benefits of the HMB in the military hospital: effective care for women and newborns. The concepts and discussions were based on the scientific evidence of breastfeeding and the national policy to promote, protect and support breastfeeding.

The concept of the human milk bank: health professionals' view

Health professionals demonstrated that they were aligned with the conceptualization of HMB, as determined by government organizations, such as the Ministry of Health:

"It is the place where human milk is

processed for later distribution, as prescribed, to children who are unable to breastfeed from their own mother or in cases where the mother's milk is insufficient for the child, especially for premature babies." (HP3)

"It is a place in a hospital institution that has the role of collecting, analyzing, storing and delivering milk in conditions to be administered safely". (HP5)

The understanding of the importance of the role played by HMBs to guarantee access to newborns at risk, representing an important public health strategy in the recovery and maintenance of the lives of these babies, is expressed in the following testimonies:

"The milk bank is a sector responsible for the collection of human milk (both at home, in registered donors, and for postpartum women who accompany their hospitalized NBs), milk control (colostrum and mature milk), observing caloric and protein levels and screening for viral diseases. There is guidance for postpartum women with breastfeeding difficulties. The donated human milk will be administered to premature newborns admitted to the neonatal ICU". (HP4)

"It is a sector responsible for the processing of human milk and its availability for use by NBs who cannot be breastfed by their mothers". (HP18)

In this way, aiming to deepen the knowledge about the role played by HMBs in the hospital structure and what health professionals and managers directly involved in maternal and child care think, it is observed that the discourses issued by health professionals refer to the understanding of the objectives of HMB as an important strategy to support, promote

and protect breastfeeding and establish indicators favorable to maternal and child health:

"It is aimed at capturing, processing and supplying human milk to premature babies or those who need it for any other reason. In addition, it serves breastfeeding women with breastfeeding needs (asking questions, guiding them)". (HP4)

"Processing and making human milk available to neonates and infants, aiming to promote breastfeeding in the most varied conditions". (HP10)

Specialists from various areas like medicine, nursing, nutrition, biology and food engineering can work in HMB by developing a work based on the excellence of work processes, in order to guarantee babies admitted to the NICU of a hospital the best nutrition created for their physiological needs in all functional aspects, according to the participants' testimonies:

"HMB is a multidisciplinary space, and can have, in addition to obstetric and neonatal nursing, pediatricians and obstetricians, speech therapists, nutritionists, child psychologists, higher level nursing and technicians". (HP4)

"It develops the specialties involved in primary care, since it promotes and protects the health of mothers and newborns". (HP34)

The manual expression of HM must be conducted with hygienic and sanitary rigor capable of guaranteeing the maintenance of the immunological and nutritional characteristics of HM. To this end, it is essential that the nursing mother is instructed on appropriate care. If the expression of HM is not well conducted, the product itself may contain dirtiness, strange odors and contamination by mi-

croorganisms, with degradation of its quality. Accordingly, guidance becomes essential for its application.

“Professionals working in HMBs guide the appropriate technique for massages and milking, as well as their periodicity and hygiene care during milk removal”. (HP10)

“The Milk Bank has a very important role in terms of encouraging and promoting breastfeeding by guiding pregnant women in the prenatal period with important information, so that they can succeed in breastfeeding; care for postpartum women with difficulties related to breastfeeding, guiding them on the correct techniques (latch, suction and position), providing emotional support, always inserting the family in this process”. (HP32)

In this way, the knowledge on the part of health professionals in the military hospital was evident in relation to the purpose of a HMB in an institution to promote better care in the maternal and child area, especially in the NICU setting.

The benefits of the HMB in the military hospital: effective care for women and newborns

The speeches issued by the health professionals show the benefits that a HMB can provide to the hospital, with the process of the PPS of breastfeeding, whose success can directly impact the indicators with the favoring of the growth and development of NBs hospitalized in the military unit, according to the following testimonies:

“Promotion of maternal and child health, stimulation of the growth and development of premature children, encouragement of breastfeeding and reduction

of infant mortality”. (HP9)

“In addition to promoting and encouraging breastfeeding, the administration of expressed human milk to premature infants with a reduction in hospitalization time and complications related to prematurity”. (HP21)

The HMB develops breastfeeding care and PPS activities, individually or in groups, highlighting the advantages and encouragement of breastfeeding for nursing mothers, babies, families, society and the environment. Moreover, it provides guidance on the continuity of lactation even in cases of impossibility due to injury or work, preventing and treating breast complications early, in order to avoid complications. The speeches of the research participants align with the purpose of the HMB:

“Incentive to the donation of breast milk, act in the prevention and treatment of breast problems aiming at the success of breastfeeding”. (HP6)

“Promotion and guidance of the importance of breastfeeding regarding the properties of human milk and in the development of the NB with campaigns aimed at this purpose. Protection and observation of the technical guidelines originating from the Ministry of Health and regulatory agencies (ANVISA) to safeguard the processing and distribution of human milk to newborns who need to receive it. Breastfeeding support reflects on the infrastructure to be guaranteed throughout the process (collection, processing and distribution)”. (HP13)

It specializes in terms of processing and quality control of human milk, from donor selection and expression of human milk, performing milk collection, selection

and classification activities (colostrum, transitional, mature, anterior milk, posterior), processing (pasteurization, cooling, physicochemical and microbiological quality control), storage and distribution according to medical prescription. The reports issued by the interviewees are in line with what a HMB can contribute to the success of breastfeeding:

"With an adequate structure and trained professionals, nursing mothers will receive quality care with relevant information to be able to understand the importance of exclusive breastfeeding". (HP13)

"Greater access to the benefits of breastfeeding, such as promotion of weight gain, growth and development of immunity". (HP22)

Success in this process depends on comprehensive, multidisciplinary, centralized and individualized work, and it is necessary to establish hospital routines that favor the promotion of BF. With regard to the donation of HM, professionals guarantee the guidance and care required for its extraction for donation purposes:

"Welcoming nursing mothers, guiding the milking technique, collection and storage. Instructing the nursing mother to start milking to stimulate contact with the newborn. The neonatal ICU team coordinates the beginning of breastfeeding". (HP42)

"The HMB will welcome the nursing mothers and will advise that, even if they cannot breastfeed, the bond can be established in some way, through contact and the use of tubes, for example". (HP45)

In this way, the HMB in the military hospital unit can guarantee better care for society, with the actions of the PPS ai-

med at breastfeeding and better survival of hospitalized newborns.

DISCUSSION

HMB is a structuring policy of the Ministry of Health to guarantee the best perinatal care. Thus, the view revealed by professionals, managers, nursing mothers and donors is an important tool for providing quality care to meet the needs of both women and NBs. HMB is a space that guarantees the success of breastfeeding, with the role of collecting, processing, storing and distributing HM for newborns admitted to NICUs, who have special nutritional needs to support growth and development^(1,4,11).

A HMB provides adequate support for the nutritional needs of newborns admitted to hospital units, as one of its priority actions is to help to reduce infant morbidity and mortality, especially during the lactation period, as well as supporting and promoting breastfeeding among mothers of premature newborns and those with pathologies admitted to neonatal ICUs. In this sense, from the point of view of health professionals and managers, it is necessary to maintain the lactation and the health of NBs by supporting the donation of breast milk.

A study carried out with three family health teams on the donation of HM to the human milk bank shows that this is a valuable practice that brings countless benefits to maternal and child health. It contributes to growth and development, especially for hospitalized and premature infants, and is an important resource for surviving their weakened health.⁽¹²⁾

In this sense, HMB is established as a space for both care and activities for collecting, donating, processing, storing

and distributing HM, in order to meet the needs of NBs, and is an important policy that aims to guarantee quality of life for children. Its objective is equivalent to this thought, with the provision of nutrition for hospitalized NBs, guaranteeing the promotion, protection and support of breastfeeding for women, contributing to the reduction of complications and promoting care for mothers and NBs^(1,13-15).

In this way, HMB aims to strengthen public policies aimed at encouraging breastfeeding. It fulfills its role of providing care to the Brazilian population, whether in relation to difficulties associated with the practice of breastfeeding or in the collection, processing or quality control of colostrum, transitional milk and mature milk⁽¹⁾. The increase in the number of HMBs in the country is noteworthy, as is the importance of this support for a vulnerable population that depends on them as a factor for survival, the premature newborns, guaranteeing the food and nutritional security of this population⁽¹⁾.

A study carried out with data from Demographic and Sanitary Surveys of ten East African countries from 2015 to 2022 showed that breast milk is an essential support for child survival, growth and development. Thus, harmful effects on nutrition are serious in low socioeconomic and development populations⁽¹⁶⁾.

In order to guarantee quality care, such as the control of HM, a specialized, multidisciplinary team is required. Moreover, this space requires the health professionals who work there to be grounded in research, technical and scientific knowledge, understanding that these dimensions are interdependent and interrelated with empathetic care, aimed

at human responses in all their dimensions⁽¹⁷⁾. The authors⁽¹⁷⁾ reinforce this need, showing that HMB is aligned with shared care, as recommended by the WHO, which strengthens bonds, encourages breastfeeding and involves parents in terms of caring for their newborns. In this way, when talking about PPS, breastfeeding is considered a very important practice, but it needs to be aligned with care practices supported by valid theoretical and scientific knowledge.

One of the supports provided to women by health professionals is the manual expression of the mother's breast, also known as milking. This activity must be carried out by a professional trained to provide information to them, in order to guarantee the extraction of HM in a safe and contamination-free manner, whether for consumption by children or for donation to any HMB. In this way, the nutritional and immunological characteristics of the extracted breast milk will be ensured.

Manual expression of breast milk is a technique for its removal, using the hands or pumps to facilitate the extraction of milk, with the purpose of providing nutrition to the NB, for donation or even as a technique for preventing problems like breast engorgement and mastitis⁽¹⁸⁾.

A prospective cohort study carried out in Kinshasa from October 2012 to July 2013 showed that the main complications of breastfeeding are nipple cracks, sore nipples, insufficient milk production, breast engorgement and mastitis, mainly in the first week or month of breastfeeding.⁽¹⁹⁾

In this way, the work of the multidisciplinary team in a HMB will guarantee the best care and meet the needs of both

women and NBs⁽¹⁷⁾. The actions carried out by the professionals make it possible to align the technical and scientific knowledge of BF with the promotion, protection and support for the success of this practice. Thus, direct care, as well as quality control actions in the processing, pasteurization and storage of HM, is the central point that guarantees the survival of children and makes it possible to contribute to the growth and development of NBs with specific needs and those admitted to NICUs^(1,4,13,17).

HMBs can guarantee access and food security for newborns admitted to neonatal ICUs using human milk from donors, ensuring infant survival, growth and development⁽²⁰⁾. The HMB in a military unit will encourage breastfeeding, providing better survival for NBs admitted to the unit as a result of prematurity and low birth weight, as well as preventing health problems⁽¹⁻⁴⁾, since feeding based on HM provides safety in the feeding process and better hospitalization and cost indicators.

In this sense, a survey conducted with professionals from the HMB located in Rio de Janeiro states that actions to improve children's quality of life, aimed at maintaining breastfeeding until the sixth month of life, and EBF until the age of two, as well as the consensual recognition of the close relationship among breastfeeding, disease prevention and infant growth throughout adulthood, have been crucial and proven to be beneficial to children's health⁽²⁰⁾. In this way, the Brazilian Policy for the Promotion, Protection and Support of Breastfeeding constitutes an important basis for guaranteeing actions focused on promoting, protecting and supporting

breastfeeding.

These actions include working with groups of pregnant women, nursing mothers, partners and families, with the aim of working on the benefits of breastfeeding for women's health (postpartum recovery, with a reduction in breast cancer and other conditions, such as type II diabetes, rheumatoid arthritis and cardiovascular diseases), for children's health (providing all the nutritional value, immunological protection, with infant growth and development, whether biological, psychological or cognitive, with a reduction in health conditions, such as diarrheal and nutritional problems), as well as for health services, covering the entire society (economic cost with health expenditures for the population). These health benefits significantly reduce infant mortality and strengthen the bond between mother and child⁽²²⁻²³⁾.

To this end, it is necessary to follow the WHO and UNICEF recommendations on the practice of EBF and CBF in health care settings, in order to guarantee greater care and support for BF⁽²³⁾. In this context, support groups provide opportunities for health education, offering information for everyone to know, as well as establishing actions for successful breastfeeding, especially in the prevention of breast complications, such as nipple cracks, breast engorgement and mastitis, which are the main problems causing early weaning⁽²⁴⁾. For this reason, in the view expressed by health professionals and managers, support for breastfeeding is essential for a healthy and comprehensive practice.

The HM offered to newborns in the neonatal ICUs is a tool for food safety, with

the aim of guaranteeing better survival and quality for the child, especially when compared to the supply of industrialized milk. Thus, HMB guarantees food safety and has a direct impact on treatment in the health unit. In the view expressed by health professionals and managers, the structure of a HMB will enable processing (thawing, refreezing, pasteurization at 62.5 °C for 30 minutes, cooling, sample collection for microbiological quality control and storage in a freezer at - 20 °C for up to six months)⁽²⁵⁾.

Processing influences the nutritional composition of HM and its value in terms of guaranteeing the nutritional needs for the recovery of NBs. Thus, according to the view expressed by health professionals and managers, training in the service becomes necessary to guarantee the quality required to offer processed milk for nutrition and recovery of NBs.

An important point is the establishment of actions to attract donations of HM, using campaigns to raise awareness among donors in order to guarantee adequate nutrition and treatment for NBs admitted to neonatal ICUs, especially low birth weight and very low birth weight premature babies. As HMB does not aim for market profitability, since buying and selling are illegal practices, health education campaigns should be used to raise awareness among potential donors. The aim is to encourage breastfeeding and provide information from HMBs to ensure that these women are assisted to overcome any difficulties in terms of manually expressing HM, with strict monitoring of hygienic and sanitary controls⁽²⁶⁾.

Faced with this problem, it is believed that an increase in the recruitment

of donors could occur once health professionals are willing to encourage and guide pregnant women, promoting understanding of the importance of donating human milk⁽²⁷⁾. It is proposed that they begin to understand this action as a practice that saves lives, and not just as a food alternative⁽²⁶⁾.

The breastfeeding strategy is an important tool that should be encouraged by health professionals, managers and institutions in order to guarantee the best care for NBs, offering nutritional security and adequate treatment.

FINAL CONSIDERATIONS

Based on this study, the importance of HMB for the military unit was evidenced from the point of view revealed by health professionals and managers, leading to a proposal for its implementation.

In the view of these health professionals and managers, knowledge about the HMB's actions with women, children and families corresponds to a specialized and multidisciplinary service that guarantees activities to promote breastfeeding. This service includes the participation of support groups in health education activities and actions for the clinical management of breastfeeding related to the main complications related to breastfeeding.

HMB is an important space for guaranteeing the best care and promoting changes in maternal indicators, where BF is an important strategy for children's development and growth, considerably increasing the survival of newborns admitted to hospitals, whether due to prematurity or low birth weight. In addition, this important strategy will provide a range of evidence for women's and children's health.

A limitation of the study is the restricted number of professionals, especially outside the context of nursing, whose field is characterized by being local. Thus, there are no indications for generalizing the results.

REFERENCES

1. Fonseca RMS, Milagres LC, Franceschini SCC, Henriques BD. The role of human milk banks in promoting maternal and infant health: a systematic review. *Cien Saude Colet*. 2021;26(1):309-18. Disponível em: <https://doi.org/10.1590/1413-81232020261.24362018>.
2. Admasu J, Egata G, Bassore DG, Feleke FW. Effect of maternal nutrition education on early initiation and exclusive breast-feeding practices in south Ethiopia: a cluster randomised control trial. *J Nutr Sci*. 2022;11:e37. Disponível em: [10.1017/jns.2022.36](https://doi.org/10.1017/jns.2022.36).
3. Hackman NM, Sznajder KK, Kjerulff KH. Paternal education and its impact on breastfeeding initiation and duration: an understudied and often overlooked factor in U.S. Breastfeeding Practices. *Breastfeed Med*. 2022;17(5):429-36. Disponível em: [10.1089/bfm.2021.0338](https://doi.org/10.1089/bfm.2021.0338).
4. Marrom A, Shenker N. Receiving screened donor human milk for their infant supports parental wellbeing: a mixed-methods study. *BMC Pregnancy Childbirth*. 2022;22(1):455. Disponível em: [10.1186/s12884-022-04789-7](https://doi.org/10.1186/s12884-022-04789-7).
5. Ministério da Saúde (BR). II Pesquisa de Prevalência de Aleitamento Materno nas Capitais Brasileiras e Distrito Federal. Brasília: Editora do Ministério da Saúde; 2009. Disponível em: [https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/s/saude-da-crianca/publicacoes/ii-pesquisa-de-prevalencia-de-alei-](https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/s/saude-da-crianca/publicacoes/ii-pesquisa-de-prevalencia-de-aleitamento-materno-nas-capitais-brasileiras-e-distrito-federal/view)
6. Marano D, Melo RX, Silva DA, Vilarim MM, Moreira MEL. Nutritional composition of human milk and its association with maternal and perinatal factors. *Rev Paul Pediatr*. 2024;42:e2023001. Disponível em: <https://doi.org/10.1590/1984-0462/2024/42/2023001>.
7. Universidade Aberta do Sistema Único de Saúde (BR). Pesquisa inédita revela que índices de amamentação cresceram no Brasil. Brasília. 2020. Disponível em: <https://www.unasus.gov.br/noticia/pesquisa-inedita-revela-que-indices-de-amamentacao-cresceram-no-brasil>.
8. Alcântara VCG, Silva RMCRA, Pereira ER, Silva DM, Flores IP. O trabalho no trânsito e a saúde dos motoristas de ônibus: estudo fenomenológico. *Av. enferm*. 2020;38(2):159-69. Disponível em: <https://doi.org/10.15446/av.enferm.v38n2.81874>.
9. Sousa JR, Santos SCM. Análise de conteúdo em pesquisa qualitativa: modo de pensar e de fazer. *Pesquisa e Debate em Educação*. 2020;10(2):1396-1416. Disponível em: <https://doi.org/10.34019/2237-9444.2020.v10.31559>.
10. Sampaio RC, Sanchez CS, Marioto DJF, Araujo BCS, Herédia LHO, Paz FS, Souza JR. (2022). Muita Bardin, pouca qualidade: uma avaliação sobre as análises de conteúdo qualitativas no Brasil. *Rev Pesqu Qualit*. 2020;10(25):464-494. Disponível em: <https://doi.org/10.33361/RPQ.2022.v.10.n.25.547>.
11. Arslanoglu S, Moro GE, Tonetto P, Nisi G, Ambrozzi AM, Biasini A, et al. Recommendations for the establishment and operation of a donor human milk bank. *Nutr Rev*. 2023;81(Suppl 1):1-28. Disponível em: <https://doi.org/10.1093/nutrit/nuad011>.

em: 10.1093/nutrit/nuad012.

12. Freitas MIF, Miranda WD, Passos MC, Bonolo PF. Doação de leite humano na perspectiva de profissionais da atenção primária à saúde. *Cad. Saúde Colet.* 2019;27(3):301-306. Disponível em: <https://doi.org/10.1590/1414-462X201900030408>.

13. Santos MV, Alves VH, Rodrigues DP, Tavares MR, Guerra JJV, Calandrini TSS, et al. Promotion, protection and support for breastfeeding in prisons: a scoping review. *Cien Saude Colet.* 2022;27(7):2689-702. Disponível em: <https://doi.org/10.1590/1413-81232022277.19432021EN>.

14. Souza CB, Melo DS, Relvas GRB, Venancio SI, Silva RPGVC. Promotion, protection, and support of breastfeeding at work, and achieving sustainable development: a scoping review. *Ciênc Saúde Coletiva.* 2023;28(4):1059-1072. Disponível em: <https://doi.org/10.1590/1413-81232023284.14242022>.

15. Marchiori GRS, Alves VH, Pereira AV, Vieira BDG, Rodrigues DP, Dulfe PAM, Santos MV. Nursing actions in human milk banks in times of COVID-19. *Rev Bras Enferm.* 2020;73(suppl 2):e20200381. Disponível em: <https://doi.org/10.1590/0034-7167-2020-0381>.

16. Terefe B, Habtie A, Chekole B. Multilevel modeling analysis of bottle feeding and its determinants among children 0-23 months in East Africa: evidence from recent DHS data (2015-2022). *Int Breastfeed J.* 2024;19:24. Disponível em: <https://doi.org/10.1186/s13006-024-00629-w>.

17. Marchiori GRS, Alves VH, Rodrigues DP, Vieira BDG, Pereira AV, Calandrini TSS. Reflection on the organization of Nursing work in the milk bank: shared and multidisciplinary care. *Esc. Anna Nery (Online).* 2022;26:e20210174. Disponível

em: <https://doi.org/10.1590/2177-9465-E-AN-2021-0174>.

18. Moraes VC, Ferraz L. Educational technology on expressing breast milk: development and validation of a Serious Game. *Rev. Bras. Saúde Mater Infant.* 2021;21(3):857-867. Disponível em: <https://doi.org/10.1590/1806-93042021000300007>.

19. Babakazo P, Bosonkie M, Mafuta E, Mvuama N, Mapatano MA. Common breastfeeding problems experienced by lactating mothers during the first six months in Kinshasa. *PLoS One.* 2022;17(10):e0275477. Disponível em: 10.1371/journal.pone.0275477.

20. Hartmann BT. Benefit by design: determining the "value" of donor human milk and medical products derived from human milk in NICU. *Semin Perinatol.* 2019;43(7):151157. Disponível em: 10.1053/j.semperi.2019.06.005.

21. Branco MBLR, Alves VH, Rodrigues DP, Souza RMP, Lopes FO, Marinho TF. Protection and support breastfeeding: a contribution of bank of human milk. *Rev. Pesqui. (Univ. Fed. Estado Rio J., Online).* 2016;8(2):4300-12. Disponível em: <https://doi.org/10.9789/2175-5361.2016.v8i2.4300-4312>.

22. Nobrega VCF, Melo RHV, Diniz ALTM, Vilar RLA. Social support networks for Breastfeeding: an action-research. *Saúde debate.* 2019;43(121):429-40. Disponível em: 10.1590/0103-1104201912111.

23. Cabral CS, Cavalcanti DS, Barbosa JM, Vasconcelos ACCP, Vianna RPT. Inserção de um grupo virtual na rede social de apoio ao aleitamento materno exclusivo de mulheres após a alta hospitalar. *Interface (Botucatu, Online).* 2020;24:e190688. Disponível em: <https://>

doi.org/10.1590/Interface.190688.

24. Ferreira APM, Silva PCA, Ferreira AGN, Rodrigues VP, Lima ABS, Aroucha LAG, et al. Banco de leite humano: mulheres com dificuldades na lactação. *Cogitare Enferm.* (Online). 2020;25:e65699. Disponível em: <http://dx.doi.org/10.5380/ce.v25i0.65699>.

25. Ribeiro KDS, Melo ILP, Pristo AZO, Dimenstein R. Efeito do processamento do leite humano sobre os níveis de retinol. *J. pediatr. (Rio J.)*. 2008;81:61-64. Disponível em: <https://doi.org/10.2223/JPED.1284>.

26. Muller KTC, Souza AIP, Cardoso JMF, Palhares DB. Conhecimento e adesão à doação de leite humano de parturientes de um hospital público. *Interações*. 2019;20(1):315-26. Disponível em: <https://doi.org/10.20435/inter.v0i0.1588>.

27. Alves VH, Rodrigues DP, Branco MBLR, Souza RMP, Souza RRB, Medeiros FVA. Banco de leite humano na perspectiva da mulher doadora. *Rev Rene* (Online). 2013;14(6):1168-76. Disponível em: <http://www.periodicos.ufc.br/rene/article/view/3734>.

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