Press Release - July 31, 2002

World Breastfeeding Week (WBW) 2002
Theme: Breastfeeding Healthy Mothers and Healthy Babies

Breastfeeding provides the best possible start to life, a foundation for fulfilling the rights of a child. Scientific research during the last three decades has rediscovered that breastfeeding provides the ideal nutrition to the baby, protects them against infections, allergies and asthma. Breastfeeding particularly exclusive during first six months and continued for two years or beyond along with adequate and appropriate complementary feeding promotes physical, physiological, motor, mental and psychosocial growth and development. Breastfeeding has also been related to possible enhancement of cognitive development, it prepares babies for enhanced learning giving them a head start.

Breastfeeding is a well recognized means to protect, promote and support the health and development of infants and young children. Mother's milk fosters optimal growth and development of a baby's brain, immune system, and general physiology and is a vital factor in preventing common illnesses, especially diarrhea and infections of the respiratory tract (including pneumonia), ear, and urinary tract. The act of breastfeeding releases growth hormones, promotes healthy oral development, and establishes a trusting relationship between baby and mother. Exclusive breastfeeding for the first six months reduces the risk of environment-borne illnesses, malnutrition, food sensitization and allergy.

Breastfeeding also has definite benefits for mothers. It is a fundamental, physiologic continuation of pregnancy and childbirth. Sometimes it is referred to as "fourth stage of labor". Beginning exclusive breastfeeding shortly after birth lowers the mother's risk for excess post-partum bleeding and anemia. Once mother and baby have learned to do it easily, breastfeeding can reduce a mother's stress by keeping her infants or young children healthy and well nourished. Exclusive breastfeeding for the first six months saves the family money, energy, and time: nothing to buy, prepare, or clean up.
Exclusive breastfeeding can also boost a mother's own immune system, help delay a new pregnancy, and reduce the insulin needs of diabetic mothers. In the long term, breastfeeding can help protect a mother from ovarian cancers and osteoporosis (brittle bones). In a recent worldwide study it was found the breastfeeding significantly reduces breast cancer, "The longer women breastfeed the more they are protected against breast cancer"...(Lancet 2002,360:187-95.)

Very often, a mother's needs go unrecognized or unsupported. Her physical and emotional health, her level of education, and the help she receives from others, and her household economics influences her breastfeeding practices and other aspects of caring for her children. In particular, a woman's pregnancy and childbirth experience can greatly impact the way breastfeeding begins and continues.

Keeping this in mind this year's theme focuses on the health and nutrition of young women, of pregnant women and the childbirth options to help her succeed in breastfeeding.

Role played by nurses and midwives/ ANMs or Anganwadi workers cannot be undermined. BPNI feels that they have always had an important and crucial role in healthy childbirth and a healthy infancy as also in ensuring mother's best health and well being during pregnancy and after birth. Most of the expecting mothers and new mothers have a very positive and reassuring image of the nurses which care for them in the health care facilities, hospitals, nursing homes and health canters and Anganwadi centers. They confide their health problems to the nurses and follow their advice with care and diligence.

It is now well established and based on scientific evidence available that high rates of exclusive breastfeeding can be achieved but only through support and help to women by counselling on breastfeeding by the "peer counsellors". Such interventions have been conducted all over the Globe in developing and developed areas particularly Latin
America and studies within India from States of Haryana have shown tremendous success.

It is estimated that there are about 13-14 lac women in the country who can be relied upon to act as "peer counsellors" provided they have the Skills. They can provide appropriate counselling to women during and before pregnancy and after birth to ensure healthy and nutrition information and information about infant feeding is given to women for them to make informed choices.

This massive human resource could be used to ensure early and exclusive breastfeeding of babies the key intervention to promote infant health and development and reduce infant mortality rate, which is almost stagnant around 70 since a few years.

According to a BPNI study based on interviews of 1200 nurses across 13 states and 600 hospitals, only about 20 % of nurses has had any training regarding breastfeeding counselling or; lactation management. Another surprising fact is that only 28% of these knew about the very existence of the Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992' that is crucial for protection of breastfeeding in the country.

What is needed NOW, Government can act for a far reaching impact is imparting skill training to these nurses and other women health and nutrition workers in counselling women for appropriate nutrition and breastfeeding. Given them the role of "Breastfeeding or lactation counsellors" we could definitely increase our exclusive breastfeeding rates in the communities which is only about 19% for babies of 0-6 months and the Planning Commission of India has set targets for the 10th five year plan increase it to 80%.

BPNI feels that media could play a significant role in getting this agenda receive high priority with the Government of India. And media could help us in reaching every citizen
of India by transmitting accurate information to them and not relying on information from unreliable sources to help us in eliminating misinformation from the media.

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