World Breastfeeding Week 2014
Breastfeeding – ensuring a healthy future for newborns

Initiation of breastfeeding within one hour of birth and exclusive breastfeeding for the first six months of an infant’s life is a key factor for the survival of a newborn. Ensuring optimal breastfeeding depends on the care and support a mother receives during pregnancy, child birth and immediately after delivery. Healthcare providers play a critical role in assisting mothers and their families to initiate and promote breastfeeding and enable all infants to reach the goal of survival, optimum growth and development. In the Member States of WHO’s South-East Asia Region an estimated 51% of the infants are exclusively breastfed, with a range varying from 15% to 85%. Sustained efforts are required to enhance the breastfeeding rates further in the countries.

Every year the World Health Organization joins its partners in observing the World Breastfeeding Week during the first week of August. This year’s theme draws attention to the critical role played by the communities – mothers, fathers, families, employers and healthcare providers to initiate and promote breastfeeding.

Breast milk is the best food for newborns and infants, providing all the nutrients they need for their healthy growth and development. It protects newborns and infants from common childhood illnesses – such as diarrhoea and pneumonia – that are the leading causes of under-five mortality in South-East Asia. Breastfeeding also benefits mothers’ health in several ways: it induces a lack of menstruation offering longer intervals between births with lower risk of maternal morbidity and mortality; and in the long term, reduces the risks of several chronic diseases such as breast and ovarian cancer, osteoporosis and coronary heart disease.

Nearly a million newborns die every year in WHO’s South-East Asia Region, many of whom can be saved by early and exclusive breastfeeding. High newborn mortality in this Region is one of the reasons that the Millennium Development Goal’s target of reducing child mortality by two-thirds by 2015 is unlikely to be achieved. In recognition of this constraint, WHO promotes a package of ‘Essential Newborn Care Interventions’ that includes breastfeeding as an important component.

Globalization and increasing industrialization have led to large numbers of women, including those from the developing countries of South-East Asia, entering the formal and informal employment sectors. It is the lack
of an environment conducive for breastfeeding at the workplace that has been identified by women as the main constraint to continue breastfeeding when they return to work after childbirth.

In line with international agreements that protect the rights of women and children, several Member States in the South-East Asia Region have established policies, practices and legislation that guarantee maternity leave, provide protection and relief to mothers who are breastfeeding and create a more enabling environment at the workplace. However, the benefits of these measures have yet to reach the majority of women who want to continue breastfeeding at their workplace. WHO has been advising Governments to encourage mothers to exclusively breast feed for first six months and will continue to emphasize this with Member States and partners.

Recent global initiatives like the UN Secretary-General’s ‘Strategy for Women’s and Children’s Health’, ‘A Promise Renewed - Call to Action for Child Survival’, and ‘Every Newborn Action Plan’ have all emphasized the importance of breastfeeding. Breastfeeding is also one of the global indicators for monitoring and accountability towards progress in child survival. At the same time, Member States must strengthen the implementation and monitoring of the International Code for the Marketing of Breastmilk Substitutes, scale-up the implementation of the ‘Baby-Friendly Hospital Initiative’, and ensure adequate ‘Maternity Protection’. In this connection, the recent ‘Joint UN Declaration for the South-East Asia Region’ has emphasized that the evidence-based packages of interventions for maternal, newborn and child health, including breastfeeding, should be rapidly scaled-up in the Member States to reach a high and equitable coverage to accelerate progress towards the achievement of MDGs 4 & 5.

I call upon families, civil society, employers, health care providers, professionals -obstetricians and paediatricians - and governments to partner in providing a supportive environment to promote breastfeeding to ensure the best start to life for all newborns.