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M. J. Sanders/UNICEF Canada Memo on 'Weekend Sun, Feb 5, '94 & Vancouver Sun, Feb 26 '94 on Nestle Corporation / International Year of the Family (IYF) and let from JG Desgagne, Dir Gen of Canada Committee on IYF on Nestle Infant formula / WHO / BFHI

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Notes

Scanned in as PDF files for historical reference to materials concerning the International Year of the Family. Title of Weekend Sun Article 'Deadly Corporate ties poison family tribute' by Alicia Priest and Nestle rebuttal Vancouver Sun, Feb 26 '94 'Nestle denies complicity in deaths of infants'. Also attached is WABA Activity Sheet, World Alliance for Breastfeeding Action, Ontario Canada and Penang Malaysia and WABA info on Breastfeeding,

Print Name of Person Submit Images

Signature of Person Submit

Number of images without cover

Upasana Young

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End of Report

UNICEF

DB Name CFRAMP01

InterOffice Memo

To: Paula Donovan
From: Marilyn J. Sanders
Date: March 3, 1994
Subject: BFHI

Hello!! It was good to speak with you yesterday-- thanks for returning my call so promptly! I am looking forward to receiving the copy of the Evergreen video you promised to send me. Can I ask that I get a copy of the covering memo when you've prepared it so I have any necessary information -- i.e.: Wah Wong advised that we were not to duplicate this video. Our normal procedure is to either allow duplication or to duplicate at cost IF the video will be used for educational purposes only. If this does NOT apply in this case, please advise. Thank you!!

Per our discussion, I am enclosing a copy of my copy of the "Weekend Sun" article on Nestles and IYF in Canada. I have alerted Robert Lussier that there may be another story this weekend and he will keep his eye out for it. If it appears I'll forward you a copy ASAP.

After I spoke with you yesterday I talked with Elizabeth Sterken of INFACT Canada. She reminded me that she is still waiting for copies of Protecting, Promoting and Supporting Breastfeeding and the Innocenti Declaration pamphlet which I spoke with you about in December and referred to in my memo to you of January 21. I had ordered 125 copies of the former and 2-300 copies of the latter. My stock of Innocenti pamphlets is running low and Elizabeth has none left. Neither of us have any copies of the WHO book. Could I ask you to look into this and let me know where we stand. I am assuming the WHO book is still available and the problem is simply getting it from Geneva. If there is a problem supplying the Innocenti pamphlets, please let me know. Elizabeth also asked whether there would be any chance that the new BFHI brochure you have budgeted for 1994 will be ready in time for her conference June 9? I said I was doubtful, but promised to ask. Can you let me know about that too? Thanks!

Elizabeth told me she had been speaking to you recently and that you had indicated there was still a possibility you would be coming to the conference in June. Apparently the conference brochure will be ready in a couple of weeks -- I'll send you a copy when I get mine as you wanted more information on the conference. Apparently Leah will be making the keynote UNICEF speech to the conference. She has also suggested to Elizabeth that as they are hoping to have people from across Canada at the conference, consideration be given to extending the meetings into Friday, June 10 to try to get more work done. This is apparently being considered, if it makes any difference to your plans.

Elizabeth also mentioned that you had told her that UNICEF was considering doing a letter/statement of some kind to either/or heads of government/Ministers of Health in industrialized countries regarding ending free and low cost supplies by June 1994. We were discussing materials for the conference kits and she said she would very much like to have a copy of this to include. You didn't mention this to me when we spoke yesterday so it was new information to me but I said I would check it out. Is her information correct? If so, would she be able to include copies in the conference kits?

I have today sent a fax to Wah Wong advising that I have alerted you to his presence in New York next week. I also mentioned briefly your comments on the two NGO meetings held in early February, especially your reference to trying to include Canada in any work undertaken in the US in the next few months. He will probably raise this with you when you meet.

I think that about covers it so I will close for now. Take care and I hope to hear from you soon, especially re the ordered materials referred to above. cheers!!

Encl.



Patron/Président d'honneur
His Excellency the Rt. Hon.
Son Excellence le très honorable
Ramon John Hnatyshyn
Governor General of Canada
Gouverneur général du Canada

February 2, 1994

Ms. Renée Hefti, RN, IBCLC
2222 Chairlift Road
West Vancouver, BC
V7S 2T5

Executive Committee:
Comité exécutif:

Andrée Ruffo
Co-Chairperson
Coprésidente
Judge, Youth Court, Quebec
Juge de la Chambre de
la Jeunesse (Québec)

Dear Ms. Hefti:

Thank you for your letter of December 14, 1993 regarding Nestlé Canada's sponsorship of International Year of the Family. We appreciate the opportunity to respond to your concerns.

Robert Couchman
Co-Chairperson
Coprésident
Ontario

As you are no doubt aware, the infant feeding controversy has been the subject of debate since the early 1970s. However, significant progress has been made since that time, as was reported by UNICEF and the World Health Organization last year. As of September 1993, more than seventy countries have legislation against the free distribution of infant formula.

Aziz Khaki
Vice-Chairperson/Secretary
Vice-président/secrétaire
British Columbia/
Colombie-Britannique

Before establishing a partnership with Nestlé, the Canada Committee fully discussed the issue with the company. As a result of those discussions we are confident that Nestlé markets infant formula responsibly and in accordance with the WHO Code. *Not true*

Ghislaine Picard-Mayer
Vice-Chairperson/Treasurer
Vice-présidente/trésorière
Quebec/Québec

With respect to your particular concerns about the marketing of Carnation infant formula in Canada, we offer the following:

G. Ann Charter
Vice-Chairperson
Vice-présidente
Manitoba

- All promotional material and product labels emphasize that breast-feeding is the best choice for babies.
- All material suggests that feeding options should be discussed with a doctor or health professional.
- We are aware that Good Start is marketing as hypoallergenic. The Canadian government recognizes it as such, and has approved the product claim.

Barbara Crosbie
Vice-Chairperson
Vice-présidente
Newfoundland/Terre-Neuve

Jean-Guy Desgagné
Executive Director
Directeur général



- It is our understanding that the material sent by Carnation to new mothers in your province is sent only at the mother's request. In addition Carnation sends valuable information about how to breast-feed, which clearly promotes breast-feeding.

not true besides Code states No free supplies to mother

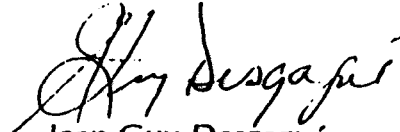
Finally, it is our understanding that 80% of all babies are now breast-fed in Canada; significantly up from a few years ago. As UNICEF Executive Director James Grant reported in 1993 "... the world has clearly navigated to turn back towards breast-feeding."

not true

This kind of progress is only possible when all groups including government, health professionals and industry work to resolve infant feeding issues together.

Thank you for taking the time to write to us, Ms. Hefti.

Sincerely,


Jean-Guy Desgagné
Director General

cc: Mr. Sokalski
IYF Coordinator

Deadly corporate ties poison family tribute

By ALICIA PRIEST

What does it mean when a corporate citizen sponsors an event meant to do good?

In an age consumed by public relations, strange bed-fellows are probably to be expected. But it seems odd to see some of them consummating their relationship in public so blatantly.

1994 is the International Year of the Family (IYF). The United Nations general assembly felt society's most fundamental and important unit deserved special attention. After all, women, children and youth have each had their own UN-appointed years.

And now a year has been arbitrarily chosen to celebrate something that's been around as long as the family. Why now?

In a book published for the occasion called *Families: Celebration and Hope in a World of Change* (Doubleday, \$24.95), author Jo Boyden says:

The family faces what may be its most difficult challenge in history. Never before have there been so many dramatic social and economic changes in so short a time."

Boyden, with help from UNESCO, identifies such enemies of the family as environmental destruction, commercialized media interests and Western individualism at the expense of the family unit.

In Canada, the IYF was handed over to the Conservative government, which formed a national 32-member committee and found sponsors. The ones they came up with were Labatt, MacMillan Bloedel, the Royal Bank, Canadian National Group, the Bank of Montreal and Nestlé.

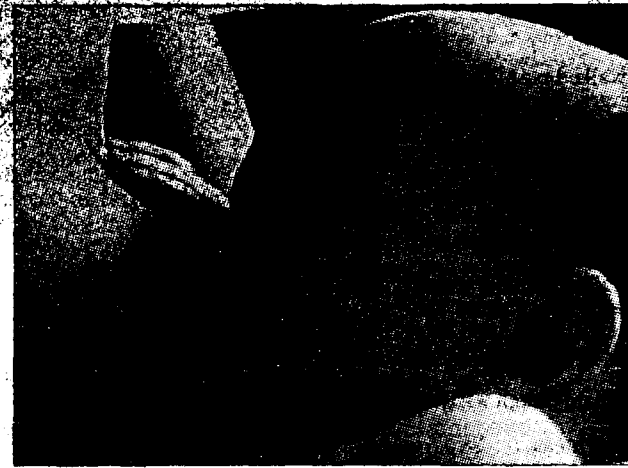
One might question how an alcohol-pushing brewery, a forest company mired



UNICEF/Sun Films

In poor nations where breast-feeding provides immunity to infection, bottle-fed babies receive powdered formula over-diluted with contaminated water in unsterile bottles. But the company sees no connection between the market and the environment it operates in.

During a 1978 U.S. Senate investigation into the bottle-feeding controversy, Nestlé was asked: "Can a product which requires clean water, good sanitation,



NOURISHMENT OF BODY AND MIND: impoverished mothers, like this Ethiopian woman waiting for food supplies at an emergency station in the remote village of Bumi (left), are targets of the infant-formula industry's propaganda, but ironically, in the West, it is educated mothers who are most likely to bottle-feed (below)



need for at least the first six months of life, it protects infants against cancer, diabetes, respiratory and gastrointestinal illness, crooked teeth and obesity. And medical science estimates that 97 per cent of women can successfully breast-feed.

But while Canadian

infant-feeding guidelines recommend that babies be exclusively breast-fed for their first six months and continue to receive breast milk up to a year, most mothers quickly give up breast-feeding and opt for formulas and solids.

So what? We have clean water and a largely literate population, and many Canadians, including me, were bottle-fed without dire consequences.

Well, hold the complacency. New research from a nutritional scientist at the University of Guelph reveals some unsettling information: North American babies fed with formula aren't getting enough of a vital nutrient needed for proper brain development and eye performance.

Bruce Holub has spent 15 years studying the health benefits of fatty acids, and one in particular — docosahexaenoic (DHA), which is vital for good visual and mental development. But while DHA exists naturally in breast milk, it is absent in North American formula.

"In my opinion, it's very serious," Holub was quoted as saying in a report. "I'm concerned about innocent victims who are not protected by law."

Backed by the Natural Sciences and Engineering Research Council of Canada, Holub tested formula products sold in Canada and found they "were totally devoid of DHA." Similar studies in Australia and Texas concluded babies not getting DHA have visual functioning that is 25 to 50 per cent lower than infants getting DHA, he said.

Back to Nestlé

be partnered with an event concerned with the well-being of mothers, fathers and children.

But the Swiss-based baby formula and food company Nestlé is the most notorious sponsor of all.

Internationally reviled by child health advocates for its aggressive and unethical marketing practices, Nestlé contributes to the deaths of hundreds of thousands of babies a year.

Bottle feeding kills and maims babies, not only in the developing world but wherever poverty and ignorance prevail. UNICEF reports that 1.5 million infants die each year from baby-bottle disease. That's one baby every 30 seconds.

D14 The Weekend Sun, Saturday, February 5, 1994

tions be properly and safely used in areas where water is contaminated, sewage runs in the streets, poverty is severe and illiteracy is high?

Nestlé answered "No."

Then asked if it had any corporate responsibility to find out the extent of those conditions where it sold formula, Nestlé again answered "No."

It's not only in Third World countries that formula companies can capitalize on ignorance. Wherever poverty is on the rise, impoverished mothers are the targets of the infant-formula industry. In Canada, mothers who use food banks are often the ones who bottle-feed.

Contrary to popular belief, women do not



UPI/Sun Files

harbor a breast-feeding gene. Humans are the only mammals whose decision to suckle their young depends more on culture than biology. In our advanced stage of civilization, women have to be taught — by a supportive society — how and why to feed their infants.

Yet mother's milk is nothing less than a miraculous elixir no chemist can duplicate. Besides providing all the nutrition babies

babies dying in Africa from baby-bottle disease triggered a public outcry against Nestlé, which has 50 per cent of the infant-formula market. It led to the largest non-union consumer boycott in history.

The result of this international pressure was, in 1981, the passage of the World Health Organization's International Code of Marketing of Breastmilk Substitutes. Its recommendations include: no advertising of formula, no free samples to mothers; no low-cost or free supplies to hospitals; no promotion of products through health-care facilities.

CONTINUED ON NEXT PAGE

FROM PREVIOUS PAGE

Promises by Nestlé to clean up its act led to a lifting of the boycott in 1984. But four years later, the boycott — which now extends to some 70 countries — was renewed.

The company's marketing tactics have shifted slightly but they still aim to dissuade and discourage mothers from breast-feeding.

In the Philippines, Nestlé teaches its sales staff how to circumvent the Philippines' infant-formula marketing law, including the use of bribery, says the Infant Feeding Action Coalition.

In the U.S., Nestlé advertises its Carnation Good Start formula against the guidelines of the American Academy of Pediatrics.

In Canada, Nestlé sends a can of Carnation formula, formula coupons and a booklet on how to breast-feed to new mothers' homes.

In Mexico, a Nestlé-funded study shows the company violated Mexican law by distributing free formula to hospitals.

In China, where Nestlé is the major distributor of formula, pediatricians report that during the 15 years since China opened up its markets, breast-feeding rates

dropped to about 56 per cent from what used to be a 100-per-cent rate.

In Zimbabwe, which is recovering from a devastating drought, Nestlé donates free infant formula under the guise of relief.

Even when mothers themselves are malnourished it is better for their babies to be breast-fed than formula-fed. Yet women throughout the developing world — swayed by the slick advertising of multi-national formula companies — consider formula-feeding the modern thing to do.

(Ironically, in the West, it is educated mothers who are most likely to breast-feed.)

According to the International Baby Food Action Network, Nestlé violated 22 sections of the World Health Organization's marketing code between 1980 and 1991.

In response to the boycott issue, Marianne King-Wilson, Nestlé director of corporate and consumer affairs, says the company strongly supports breast-feeding and has made great progress in complying with the WHO code. But she admitted that donations of free formula continue. The formula industry, she says, expects government to take the initiative in ending free supplies.

"We've said that as an industry, for government to be active in the Baby-Friendly Hospital Initiative (a process aimed at end-

ing free supplies to hospitals by 1992) is the best way for it to work. It has to be through government agreement," King-Wilson said in an interview from Toronto.

"We've been working with considerable diligence to resolve this issue and as you can see, it's quite difficult to do. But certainly... there has been enormous progress.

"Clearly there's still work to be done."

King-Wilson says the alleged violations of the code have not been reported to the company or to a formula industry ombudsman.

Elizabeth Sterken, national coordinator of the Toronto-based Infant Feeding Action Coalition (INFACT), has this to say about Nestlé: "They can kill babies in the Third World and then sponsor the Year of the Family in Canada. Really, they are absolutely beyond the pale."

"It is their policy to try to look wonderful and support family life and be fuzzy and loving and all these things... But it's very naive and irresponsible that the Canadian committee doesn't check out their sponsors so that they have a good, credible track record in family issues."

Nestlé spreads its message with pictures as well as words. Stressing the "nest" in Nestlé, the company's logo is a mother bird

feeding her two nestlings.

But Action for Corporate Accountability, the American-based group coordinating the international boycott, twists that image. There in the nest squirm two thin, crying, bloat-bellied human babies, while above them a vulture holds out a bottle of formula.

When Action discovered the Canadian IYF-Nestlé connection, boycott director Karlyn Sturmer asked the Canadian committee this question:

"Can you accept financial support for the IYF when Nestlé is responsible for so many newborns never making it past infancy and when it causes so much pain, despair and impoverishment to families across the globe?"

How does the Canada committee for the IYF justify its choice of sponsors?

Executive director Jean-Guy Desgagne gave me this response: "We are not embracing Nestlé's problems. They are supporting us. We are not supporting them."

"When you're looking at big companies like this — whether it's foundations even — there's always something somewhere that's wrong."

In Canada, the IYF seems to have landed in the lap of a dysfunctional "family." ♦

Alicia Priest is a reporter with The Sun's FYI section.

The Weekend Sun, Saturday, February 5, 1994 **D15**

Nestlé denies complicity in deaths of infants

Alicia Priest's *Deadly corporate ties poison family tribute* (Feb. 5) contains gross inaccuracies and distortions. Priest says Nestlé contributes to the deaths of hundreds of thousands of babies each year from the sale and market-

Vancouver Sun Feb 26/94

ing of infant formula in developing countries. Totally false.

This accusation grossly distorts our long-held corporate position and actions; but more importantly, it detracts from the urgent need to deal cooperatively with the problem of child nutrition in developing countries.

In the developing world, babies' lives are threatened by war, famine, poverty and disease.

Breast-feeding can save lives. Infant formula can save lives.

Priest alleges that Nestlé marketing tactics aim to dissuade and discourage mothers from breastfeeding.

This is blatantly untrue.

For 128 years, Nestlé has agreed that breast-feeding is the best way to nourish an infant.

Our founder wrote in 1869: "The mother's milk will always be the most natural nutriment, and every mother able to do so, should herself suckle her children." All Nestlé formula packaging and literature states clearly that breast-feeding is best.

Priest claims women throughout the developing world are swayed by the "slick advertising of multi-national formula companies." Not by Nestlé, which has not advertised infant formula in developing countries since 1978.

For over 15 years we have actively worked to curtail promotional activities in developing countries by the industry that might influence mothers to choose formula over breast-feeding — this despite the fact that our overall formula sales account for only one per cent of our international turnover.

"According to the International Baby Food Action Network (IBFAN)," Priest writes, "Nestlé violated 22 sections of the World Health Organization Code between 1990-1992." The truth is that Nestlé was the first company to announce support for the WHO 1981 Code. We have been a leader in applying and enforcing its principles in the developing countries.

Nestlé guidelines, issued to the field in 1982, are even tighter than the code itself. For example, one code article states that information from companies to health professionals must not imply that "bottle-feeding is equivalent to breast-feeding." Nestlé instructions state that its personnel must "emphasize the superiority of breast-feeding."

Priest highlights recent studies about potential consequences of the lack of [the fatty acid] docosahexaenoic (DHA) in North American-manufactured infant formulas. Nestlé is committed to manufacturing infant formulas of the highest quality and nutritional value.

As with any food product, infant formulas must comply with regulations set and enforced by Health Canada. At this time, the addition of DHA to infant formula is prohibited.

Finally, Priest reveals that in Canada, Nestlé sends formula coupons, formula samples and a booklet on how to breast-feed to new mothers' homes.

This is true.

Priest neglects to point out, however, that all information, coupons and samples are sent only at the request of the consumer.

As a final note, throughout the article Priest refers to events and circumstances of the 1970s. While clearly there are issues still to be resolved, significant progress has been made since that time.

FRANK CELLA
Nestlé Canada, Inc.
Toronto



Breastfeeding and the well-being of Families

Breastfeeding is at the heart of the family because breastfeeding is an expression of love, care, protection and a way of nurturing. Breastfeeding contributes to the well-being of families in the following ways:

Family Health

Breastfeeding contributes significantly to the health of both babies and mothers in developed and developing countries. Babies who are exclusively breastfed have stronger immune systems than those who receive breastmilk substitutes. These babies have extra protection against malnutrition, acute respiratory infections, and diarrhoea. The World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) recognise that exclusive breastfeeding on demand is an important factor in child survival.

Breastfed babies are well-nourished since breastfeeding works by supply and demand. The more the baby breastfeeds, the greater the mother's milk production. Mothers can feel secure in knowing that their baby is receiving the best nutrition possible. Moreover, breastmilk is readily available and convenient. In contrast, reliance on bottle-feeding is

particularly risky for families with low incomes and limited access to clean water and fuel. Too often, contamination occurs when bottles cannot be properly sterilised, and malnutrition results when babies are bottle-fed liquids such as diluted juices or teas.

Breastfeeding also contributes to maternal health. Women who have breastfed are less likely to develop breast and ovarian cancers, and have less osteoporosis later in life.

Finally, breastfeeding strengthens the bonding relationship between mother and baby. This is particularly important for women whose work separates them from their children.



Family Planning

Exclusive breastfeeding contributes significantly to family planning and child-spacing. Women who exclusively breastfeed have 98% protection against pregnancy during the first six months after giving birth as long as the mother is fully breastfeeding, and the mother's menstrual bleeding has not returned.

The level of protection due to breastfeeding then falls off in relation to the intensity and frequency of breastfeeding. In Senegal, where mothers breastfeed for an average of 19 months, and in Bangladesh, where mothers breastfeed an average of 31 months, births are at least two years apart.

The child-spacing effect of breastfeeding is especially relevant to women for whom contraception is unaffordable, unavailable, or unacceptable.

Family Economics

Breastfeeding saves families time and money that would be spent on purchasing infant formula, bottles and fuel. For example, the average cost of feeding a six-month old baby for one month on infant formula is equal to at least the

average household's monthly per capita income in many developing countries.

Because breastfed babies are healthier than those who receive breastmilk substitutes, families save time and money that would be spent on visits to health practitioners and on purchasing medicines. In short, breastfeeding enables families to achieve great self-sufficiency, thus reducing their dependency upon commercial (and inferior) products.

Families and sustainable development

When women breastfeed, families and communities are contributing significantly to sustainable development. Breastfeeding is ecologically sound since it uses only renewable resources and produces only biodegradable wastes. In contrast, bottle-feeding uses non-renewable resources such as tin, plastic, glass and silicon, and produces non-biodegradable waste and pollu-

tion. Moreover, while breastmilk is produced locally, and on demand, bottle-feeding products are often transported considerable distances by multinational companies.

Obstacles to breastfeeding

Despite the many benefits of breastfeeding, many factors inhabit families from choosing breastfeeding. These include:

- **Misinformation**

Families often lack accurate information about the benefits of breastfeeding. Decades of infant formula advertising and promotion have influenced perceptions about breastfeeding and bottle-feeding. In developing countries, bottle-feeding has often been promoted as positively associated with "modernity", and wealth. In industrialised countries, health professionals often falsely equate breastmilk and infant formula.

Families sometimes lack information about basic principles of

breastfeeding. For example, women may not be aware of the importance of frequent feeding and of basic information such as alternating breasts to avoid insufficient milk. Unfortunately, when older generations of women have not breastfed, they are less able to help their daughters to breastfeed.

Many women who discontinue breastfeeding early do so due to concern that they have "insufficient milk". However, studies show that mothers who receive accurate information about breastfeeding and practical support are less likely to experience such anxiety during breastfeeding. In North America, women who successfully breastfeed for the longest periods tend to be of higher socio-economic status and have higher educations.

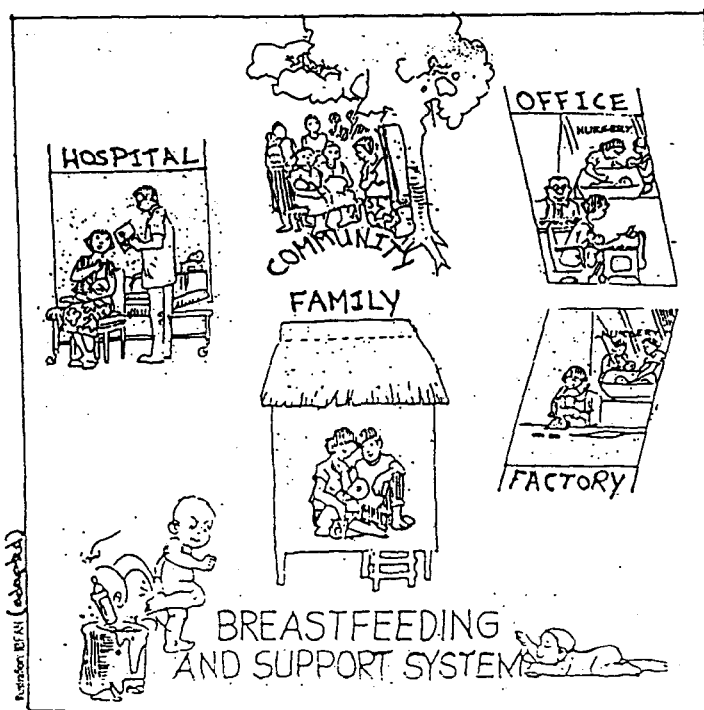
- **Hospital practices**

Globally, women who give birth outside the formal health system are more likely to successfully breastfeed than those who give birth in hospitals. Midwives are particularly well-placed to support breastfeeding.

In contrast, some hospitals undermine breastfeeding by separating mother and baby after birth, and giving free infant formula supplies at discharge. The Baby-Friendly Hospital Initiative (BFHI), a world-wide campaign, aims at transforming maternity services into breastfeeding supportive institutions. Since doctors are in positions of authority, the messages that they give about breastfeeding greatly influence family decisions about infant feeding.

- **Workplace barriers**

Women increasingly combine unpaid domestic and child-care work with paid work outside the home. In order to successfully breastfeed in these circumstances, women need adequate support. Support may be informal and provided by



their peers, such as when women working in markets cooperate in caring and feeding babies. Mother support groups are also important in formal work settings, as are policy initiatives such as paid maternity leave; infant and child-care facilities; flexible work hours; and the opportunity for mothers to express and store breastmilk.

Such workplaces are "mother-friendly" in that women's productive and reproductive labour is supported. Recognising that both female and male workers must increasingly integrate family and work responsibilities, many trade unions now advocate "family-friendly" workplaces.

Questions about breastfeeding and families

Women do the majority of unpaid domestic labour in families. Does breastfeeding reinforce this division of labour?

No, breastfeeding need not reinforce the traditional sexual division of labour in households. Many mothers who successfully breastfeed do so with the support of their husband and by re-distributing household labour to other family members. These mothers claim their right to breastfeed and challenge ideologies that represent women as having exclusive responsibility for nurturing children.

Can breastfeeding contribute to women's empowerment and equality in families and in society?

Yes. In practising breastfeeding, women gain a strong sense of self-esteem and self-reliance as they realise their unique ability to nurture babies. Women who breastfeed are less dependent upon medical professionals and commercial products. Instead, women who breastfeed affirm their own knowledge and capabilities, particularly in the context of mother support groups.

In general, women's successful breastfeeding is linked to conditions of gender equity (such as equal distribution of food within households) and to human rights (such as the right to breastfeed in public).

Does promoting breastfeeding suggest that women belong in the home?

No. Women increasingly work outside the home and head households. In promoting women's right to breastfeed, WABA challenges governments and communities to acknowledge the value of women's productive and reproductive work and to encourage the development of mother-friendly workplaces. Mother-friendly and family-friendly workplaces enable women to nurture their children without loss of job security, wages or status.

Can family members aside from the mother play an active role in breastfeeding?

Yes, particularly when the mother works outside the home. For example, older children or elders often care for a baby while a mother is working, and the baby is brought to the mother for feedings. Family members also support successful breastfeeding by ensuring that the mother receives adequate nutrition and rest while breastfeeding. In many non-Western societies, the postpartum period is viewed as a time when mothers are particularly vulnerable.

The period following the birth of a child is often associated with sexual abstinence and rituals to ensure the mother's well-being. During this period, the mother is able to establish breastfeeding while others take over some of her domestic work. There are valuable lessons here for families in industrialised countries who find it difficult to give mothers adequate postpartum recovery time or to make time for children.

How do families unintentionally undermine breastfeeding?

Families are not always successful in supporting a breastfeeding mother. When elders or young children are in charge of caring for infants full-time, a mother may be discouraged from breastfeeding. A mother will also be inhibited from breastfeeding if her partner is unsupportive.

Some men, for example, are uncomfortable with women breastfeeding. This is especially the case in contexts where breasts are seen as sex objects.

Finally, when mothers are overburdened with work (paid or unpaid), and when mothers receive less food and rest than other family members, breastfeeding is more difficult. In order to support a breastfeeding mother, family members need to address these common inequalities.

How can breastfeeding mothers be supported?

Mothers

- Form mother-support groups to share practical information on breastfeeding. Establish cooperative child-care arrangements.
- Offer informal help and support to new mothers.

Other family members

- Ensure that the breastfeeding mother is well-rested and well-nourished so that she can successfully breastfeed.

Family-related organisations

- Educate women, men and children about the benefits of breastfeeding.
- Educate family members about the needs of a breastfeeding mother.

Health practitioners

- Help mothers to establish breastfeeding immediately after birth.
- Provide follow-up support to mothers, including those who return to paid work. Involve family members in supporting the breastfeeding mother.

Non-governmental organisations

- Integrate breastfeeding and

gender equity into development projects.

Employees

- Establish progressive policies that support employees in balancing their family and work responsibilities. These include: maternity and paternity leave; child-care facilities; flexible work hours; a private space where women can express and store breastmilk.

Government

- Contribute to establishing affordable infant and child-care.

Union and workers' groups

- Develop cooperative child-care programmes.
- Develop policies that support workers in balancing family and work responsibilities. Address the needs of mothers who are breastfeeding.

RESOURCES

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This activity sheet is part of a series from WABA to assist groups with their activities to protect, promote and support breastfeeding.

WHY AREN'T WOMEN BEING TOLD THAT BREASTFEEDING....



- **Reduces their risk for breast cancer by as much as 50%?**
- **Increases women's bone density, thus decreasing their risk of osteoporosis?**
- **Prevents nearly as many births as all other modern contraceptive methods combined?**
- **Enhances women's recovery from childbirth by diminishing their risk of post-partum bleeding and hastening their recovery from childbirth?**
- **Offers protection from iron-deficiency anemia by delaying the return of the menstrual cycle?**
- **Reduces the financial burden on families by decreasing the number of infant hospitalizations and illnesses, and eliminating unnecessary expenditures on breastmilk substitutes?**

....BECAUSE THERE ARE PROFITS TO BE MADE FROM SUPPRESSING THIS INFORMATION!

WHO GAINS?

**Baby milk, food and bottle industry
Doctors
Hospitals
Pharmaceutical companies**

WHO PAYS?

**Women
Families
Society
Governments**

BREASTFEEDING CONFIRMS A WOMAN'S POWER TO CONTROL HER OWN BODY AND CHALLENGES THE COMMERCIALIZATION OF WOMEN'S REPRODUCTIVE HEALTH.

BREASTFEEDING IS A WOMEN'S ISSUE AND MUST BE A PART OF THE PLATFORM OF ACTION FOR THE 4TH WORLD CONFERENCE ON WOMEN.

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BREASTFEEDING AND THE WELL-BEING OF FAMILIES

Recommendation:

Recognizing that breastfeeding benefits families in that it:

- bonds the mother and child;
- ensures healthy babies and better health for mothers;
- can contribute to natural family planning;
- saves families money;
- contributes to household food security;

And recognizing that breastfeeding practice is threatened by:

- misinformation and conflicting advice;
- lack of a supportive environment for breastfeeding;
- inappropriate hospital practices;
- workplace barriers;
- aggressive marketing practices of infant food companies.

We recommend that:

- government institutions, policy-makers and family-related organizations take a pro-active role in supporting and promoting breastfeeding (in the workplace and in general);
- NGO's working on family issues make a conscious attempt to integrate breastfeeding within their action plans;
- social service organizations that have direct contact with families actively encourage breastfeeding, emphasizing the role of family members in supporting breastfeeding mothers;
- employers and communities endorse and work towards creating mother-friendly workplaces.

Resolution submitted by the WABA workshop on Breastfeeding and Women's Work to the International Year of the Family (IYF) Conference, Malta, December 1993.

WABA RESOURCES

Action Folders:

1. **Baby-Friendly Hospital Initiative (1992)**
2. **Mother-Friendly Workplace Initiative (1993)**

Activity Sheets:

1. **Breastmilk: A World Resource**
2. **Mother-to-Mother Support for Breastfeeding**
3. **Transforming Health Colleagues into Breastfeeding Advocates**
4. **Breastfeeding: A Feminist Issue**
5. **Breastfeeding and the well-being of Families**
6. **Maternity Legislation: Protecting women's rights to breastfeed**

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