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# INNOCENTI DECLARATION

## On the Protection, Promotion and Support of Breastfeeding

### RECOGNISING that

Breastfeeding is a unique process that:

- provides ideal nutrition for infants and contributes to their healthy growth and development;
- reduces incidence and severity of infectious diseases, thereby lowering infant morbidity and mortality;
- contributes to women's health by reducing the risk of breast and ovarian cancer, and by increasing the spacing between pregnancies;
- provides social and economic benefits to the family and the nation;
- provides most women with a sense of satisfaction when successfully carried out; and that

Recent research has found that:

- these benefits increase with increased exclusiveness<sup>1</sup> of breastfeeding during the first six months of life, and thereafter with increased duration of breastfeeding with complementary foods, and
- programme interventions can result in positive changes in breastfeeding behaviour;

The Innocenti Declaration was produced and adopted by participants at the WHO/UNICEF policymakers' meeting on "Breastfeeding in the 1990s: A Global Initiative", co-sponsored by the United States Agency for International Development (A.I.D.) and the Swedish International Development Authority (SIDA), held at the Spedale degli Innocenti, Florence, Italy, on 30 July - 1 August 1990. The Declaration reflects the content of the original background document for the meeting and the views expressed in group and plenary sessions.

### WE THEREFORE DECLARE that

As a global goal for optimal maternal and child health and nutrition, all women should be enabled to practise exclusive breastfeeding and all infants should be fed exclusively on breast milk from birth to 4-6 months of age. Afterward, children should continue to breastfeed while receiving appropriate and complementary foods, for up to two years or beyond. This child-feeding ideal can be achieved by creating an appropriate environment of awareness and support for women who can breastfeed in this manner. Attainment of the goal requires, in all countries, the reinforcement of a "breastfeeding culture" and its vigorous defence against the insidious influences of a "bottle-feeding culture". This requires a sustained commitment and advocacy for breastfeeding, utilizing to the full the professional authority of acknowledged leaders in all walks of life.

Efforts should be made to increase women's confidence in their ability to breastfeed. Such empowerment involves the removal of constraints and influences that manipulate perceptions and behaviour towards breastfeeding, often by subtle and indirect means. This requires sensitivity, continued vigilance, and a responsive and comprehensive communications strategy involving all media and addressed to all levels of society. Furthermore, obstacles to breastfeeding within the health system, the workplace and the community must be eliminated.

Measures should be taken to ensure that women are adequately nourished for their optimal health and that of their families. Furthermore, ensuring that all women also have access to family planning information and services allows

exclusive breastfeeding and avoid long intervals that may compromise nutritional status, and that of

should develop national policies and set appropriate targets for the 1990s. They should establish a system for monitoring the progress towards targets, and they should pay particular attention to such as the prevalence of breastfed infants at discharge from hospital and the prevalence of breastfed infants at four months of

These countries are further urged to integrate breastfeeding policies into their national development policies. In so doing they should reinforce all actions that protect, promote and support breastfeeding within complementary programmes such as prenatal and perinatal care, nutrition, family planning services, and prevention and treatment of common maternal and childhood diseases. All healthcare staff should be trained in the skills necessary to implement these breastfeeding policies.

<sup>1</sup>Exclusive breastfeeding means that no other drink or food is given to the infant; the infant should feed frequently and for unrestricted periods.

<sup>2</sup>World Health Organisation, Geneva, 1989.

### OPERATIONAL TARGETS:

All governments by the year 1995 should have:

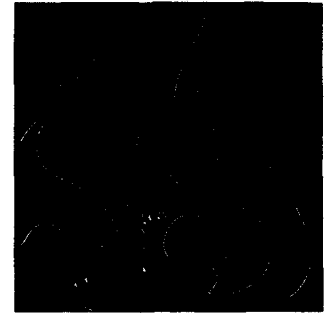
- appointed a national breastfeeding coordinator of appropriate authority, and established a multisectoral national breastfeeding committee composed of representatives from relevant government departments, non-governmental organizations, and health professional associations;
- ensured that every facility providing maternity services fully practises all ten of the *Ten Steps to Successful Breastfeeding* set out in the joint WHO/UNICEF statement<sup>2</sup> "Protecting, promoting and supporting breast-feeding: the special role of maternity services";
- taken action to give effect to the principles and aim of all Articles of the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly resolutions in their entirety; and
- enacted imaginative legislation protecting the breastfeeding rights of working women and established means for its enforcement.

We also call upon international organisations to:

- draw up action strategies for protecting, promoting and supporting breastfeeding, including global monitoring and evaluation of their strategies;
- support national situation analyses and surveys and the development of national goals and targets for action; and
- encourage and support national authorities in planning, implementing, monitoring and evaluating their breastfeeding policies.

# INNOCENTI DECLARATION

## On the Protection, Promotion and Support of Breastfeeding



1 August, 1990  
Florence, Italy

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