



CF/RAI/USAA/DB01/HS/2003-00125

Full Item Register Number [auto] **CF/RAI/USAA/DB01/HS/2003-00125**

ExRef: Document Series/Year/Number **IYF Materials 32**

Record Item Title

**BFHI News, The Baby-Friendly Hospital Initiative Newsletter, November 1993,
Article on family support of breastfeeding. Background info for International Year
of the Family IYF**

Date Created / on Item
23-Sep-2003

Date Registered
23-Sep-2003

Date Closed/Superceeded

Primary Contact **Upasana Young (RAM & Hist Proj. Assist. Consultant**
Owner Location **Record & Archive Manage Related Functions=80669443**
Home Location **Q, Fl 04, Rm 400, Row 032, SU 013, Lev 03, Pos 07**
Current Location **CF/RAF/ZW/J0101-1996-539173394 > CF/RA/BX/ED/PR/19**

Fd1: Type: IN, OUT, INTERNAL?
Fd2: Lang ?Sender Ref or Cross Ref
F3: Format

Container Record
Container Record (Title)

CF/RAF/ZW/J0101-1996-539173394
Launch of International Year of the Family in Malta

N1: Numb of pages
0

N2: Doc Year
0

N3: Doc Number
0

Full GCG Code Plan Number
Record GCG File Plan

Da1:Date Published

Da2:Date Received

Date 3

Priority

Record Type **A02a Item Hist Corr - CF/RAI/USAA/DB01/HS**

Electronic Details

No Document

DOS File Name

Alt Bar code = RAMP-TRIM Record Number

CF/RAI/USAA/DB01/HS/2003-00125

Notes

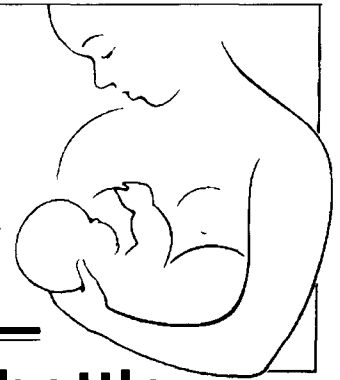
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BFHI NEWS



The Baby-Friendly Hospital Initiative Newsletter • November 1993

Hard to hold down a good idea

Like Malaysia, where this balloon took flight in Kuala Lumpur during World Breastfeeding Week in August, countries all over the world are busy converting hospitals to baby-friendliness. *BFHI News* would like to report accomplishments and success stories, as well as challenges.

Please send your news and photos to the Editor at the address on page 4. Remember to include relevant details: full names of institutions, agencies and people (including titles); dates of events; numbers in attendance; or extent of publicity. We will include your updates in 'Baby-friendly news from around the world'.



The bottle can break a family budget

It costs an urban family in El Salvador more than one-and-a-half times what it spends for the entire family's food just to bottle-feed a newborn. Powdered milk consumes an even larger part of the family food budget in rural areas, where wages are lower. According to a Wellstart assessment of infant feeding, bottle-feeding is beyond the means of most families in El Salvador and Peru. Breastfeeding is far more economical, even taking into account such costs as time spent and money needed for supplementary food for the mother.

"In addition to the monetary costs of bottle-feeding," pointed out Dr. Sandra Huffman, President of Nurture/The Center to Prevent Childhood Malnutrition, "there are costs to families for the treatment of acute respiratory infections and diarrhoea." These childhood ailments are linked to lack of breastfeeding. The susceptibility to infections can result from a bottle-fed baby's lack of the immunities normally derived from breastmilk. Also, the unsanitary water that is frequently used for cleaning bottles and diluting powdered formula is a leading cause of diarrhoea.

Dr. Huffman and others conducted a study in Peru sponsored by Wellstart entitled, 'The Economic Value of Infant Feeding', that found the total cost of one year's worth of infant formula, bottles and artificial nipples exceeds the household income levels of over half the population of Peru. "This calculation does not take into account the costs of heating the

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International Year of Family is chance to boost breastfeeding

The International Year of the Family (IYF), set for next year, will be an opportunity for BFHI advocates to point out why breastfeeding is important to a family's emotional and economic stability. It will also emphasize family support, so that mothers can breastfeed their infants adequately.

"The theme of IYF is to support the family for the welfare of the individual and of society," said Janet Nelson, Chief of the NGO Liaison Section at UNICEF. "Research has shown the importance of breastfeeding in terms of a child's emotional security and health, and it also contributes to strong family ties."

In declaring 1994 the International Year of the Family, the United Nations General Assembly recognized the family as the basic unit of society, thus warranting special at-

tention. Families may vary in form from region to region, but they all provide emotional and material support for the growth and development of their members, particularly infants and young children.

Mutual support within families can empower members outside the home as well. Women should be able to draw upon the family's political strength, its strength in numbers, to confront unsympathetic employers who try to prevent them from breastfeeding.

An NGO forum, the only global event planned for IYF, will be held in Valletta (Malta) from 28 November to 2 December. Dr. Penny van Esterik, Associate Professor of Anthropology at York University in Toronto, will conduct a workshop entitled,

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In this issue: Families and breastfeeding

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Family should lend confidence to breastfeeding mother

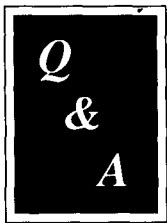
Beverly Winikoff, a senior medical associate at the Population Council, has been studying breastfeeding issues for more than 20 years. In the early 1980s, she conducted a study on women's choices of infant-feeding practices. The results of the study, sponsored by the US Agency for International Development (USAID) with support from the Rockefeller Foundation and UNICEF, were published as a book entitled, Feeding Infants in Four Societies: Causes and Consequences of Mothers' Choices (Greenwood Press, 1988). Currently, her work focuses on breastfeeding and family planning.



Beverly Winikoff.

Why is infant health important to the family?

Infant health is important to all family members. Both mothers and fathers are involved on an emotional basis, and it is also important from the point of view of resource allocation — if an infant is ill it will cost a certain amount in time and money to see the doctor, buy medicine and care for the child. A sick child will also keep a mother out of the workforce. Time costs of a child's illness mean that days aren't available for income earning. This can make a critical difference in a family's well-being.



Will the survival rate of children affect family size?

The child survival hypothesis is that when children in a family are more likely to survive, parents will be more likely to limit fertility voluntarily.

This also operates on a community basis. When communities perceive that children will survive, their members are less interested in having larger families. For the community at large, it is useful to have voluntary, spontaneous limitation of fertility.

What about breastfeeding as contraception?

Breastfeeding makes an important contribution to child-spacing, which is clearly

important to mothers, babies and families. People say it is unreliable, but for a mother who breastfeeds exclusively, day and night, up to the point when her menses return, it is as reliable as 'modern' contraception, especially in the first six months after birth.

When a breastfeeding mother is using contraceptive pills, she should ensure that her family planning programme provides her with the right type of pills. These pills should contain progesterin only. Pills with oestrogen can decrease milk.

Why is it important for family members to support breastfeeding?

People have to be aware of the time it takes to breastfeed. The mother may need to feed her infant, and thus she may not have time to fulfil other people's demands. It's especially important for fathers to be supportive. They can undermine breastfeeding if they are envious of the time taken up by the infant, or if they think they are being helpful by bringing formula as a gift. If fathers or other family members worry that the baby isn't getting enough to eat, they may undermine the mother's confidence.

This also applies to mothers-in-law. In industrialized countries, where grandmothers may not have breastfed, they may encourage a mother to curtail the practice early. They may say, "When is this baby going to stop nursing?"

How can family members support breastfeeding?

By complimenting the mother and noticing how well baby is doing. They must not plant doubts or create uncertainty, or imply that there is anything socially awkward about breastfeeding in public or beyond any specific duration. They can also help by relieving the mother of certain household tasks like shopping, cooking or looking after other children, especially in the first weeks, when breastfeeding and caring for an infant can be quite demanding.

What about households of extended families and single-parent families?

It is much harder to be a parent with-

out other adults around. In fact, the most successful family structures, those that have survived from an anthropological standpoint, are those with more than one adult, such as the nuclear family and the extended family. Even in cultures where there are high rates of divorce, mobility and separation of partners, a young mother alone with a child is one of the least common forms of household organization. She may live with her parents or with other adult members of an extended family. This is not to say it doesn't occur. The US is probably the country where you most frequently find mothers living alone with young children.

What can institutions and health care systems do to help families support breastfeeding?

Involving fathers in the process of pregnancy care and childbirth is very important. It is still uncommon for fathers to be present at the time of birth in hospitals or other medical facilities. In places where there are a large number of hospital births, as in urban areas, fathers are rarely present. If they are

See Q&A, next page

What is a family?

Families can be any combination of people who are biologically or emotionally related, according to Judith Bruce, a Senior Associate of Women's Roles and Status at the Population Council. There are immediate families, and extended families of two or more generations. "Obviously, we have to be flexible with our definition of family," Ms. Bruce said. "The more we learn about families, the more variety we see."

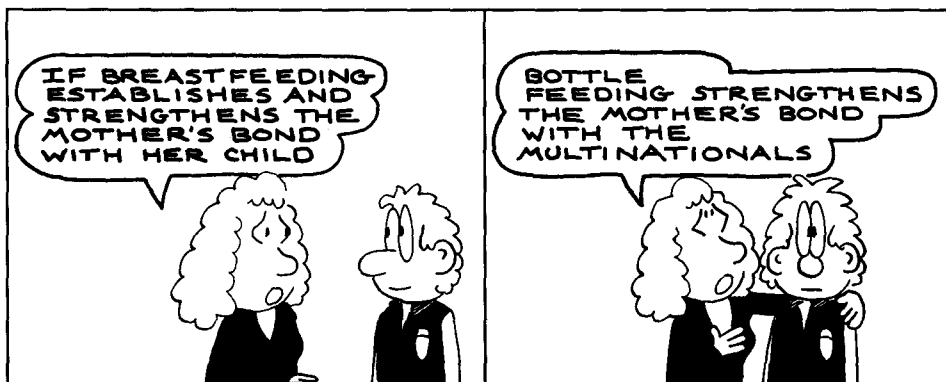
In a time when the numbers of family members living together are shrinking, said Ms. Bruce, "each family relationship becomes that much more important."

Bonding message reaches teen mothers

Promoting breastfeeding among young mothers as a way to create a strong, loving family may be more successful than pointing to its health benefits, according to research led by Carol Bryant, Assistant Professor of Community and Family Health at the College of Public Health, University of Southern Florida.

Researchers in the south-eastern US found that teenage mothers are most easily convinced that 'breast is best' if they learn of the strong bond that develops between a mother and her breastfed baby. "We found an overwhelming desire on the part of young mothers to love their baby and have it love them," said Ms. Bryant. "When they heard breastfeeding mothers rave about the bonding, that convinced them."

Ms. Bryant, founder of Best Start, Inc., a non-profit organization that has developed a breastfeeding promotional programme aimed at low-income women, studied hundreds of teenage mothers in the US. "We wanted to know why breastfeeding promotion among teens in the US was failing," she said. "Even though 98 per cent seemed to know that breast is best, they were still bottle-feeding." Her researchers identified five barriers to breastfeeding: Mothers' lack of confidence in their ability to provide adequate nutrition, loss of freedom and sac-



Doug Brunner

rifice of time, embarrassment, discouragement by other family members, and fear of pain.

Ms. Bryant found that mothers from difficult family situations wanted to provide better lives for their children, and those from stable families "knew they were fortunate and wanted to repeat the experience," she explained. Promoting breastfeeding as a way of bonding with the baby, the researchers found, was "far more effective than preaching the lofty health benefits."

Follow-up research is currently under way to study the mothers' self-esteem and 'self-efficacy' — a term Ms. Bryant favours as it describes the actual ability of mothers to breastfeed. "The teens we have worked with show incredible confidence and pride," said Ms. Bryant. "It just knocks you over."

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'Women, Work and Breastfeeding'. According to Ms. Nelson, the workshop will address one of the main obstacles to breastfeeding: "How economic structures geared towards productivity ignore the needs of families."

Promoting basic human rights within the family, fostering equality between men and women and bringing about a fuller sharing of domestic responsibilities are some of the principles underlying IYF. By encouraging all family members to contribute to the group welfare, some household burdens will be lifted from traditionally overworked mothers so they will be more able to find the time and energy to breastfeed.

COST, continued from page 1

formula or of acquiring clean water, which can be problematic in many of Peru's poor urban areas," Dr. Huffman said. Yet only 32 per cent of Peruvian babies below three months of age are exclusively breastfed. Bottle-feeding in the US, more prevalent among lower income groups, costs a family between US\$1,000 and \$3,000 per year.

This data leads to one obvious question, Dr. Huffman said. "Can mothers afford *not* to breastfeed their infants?"

The studies in El Salvador and Peru were conducted as part of a Health Sector Assessment under the auspices of the Ministry of Planning with the support of donor agencies including the World Bank, US Agency for International Development (USAID) and the Pan American Health Organization.

Q&A, continued from previous page

included from the beginning, fathers are more likely to support breastfeeding and not view it as a threat. When fathers are supportive, everyone feels more involved in the process of taking care of the baby.

What about the new marketing strategy for infant formula seen in some countries, promoting feedings that Dad can help with?

It plays on the myth that fathers aren't involved unless they are feeding. That is not what being a father is about. Caring for the baby is what is important, holding it, changing the diapers, bathing and dressing it, and taking care of the other children. Fathers should not feel they have to bottle-feed to contribute to care of the

baby. In fact, the best thing a father can do for his baby is to support breastfeeding. When a baby begins taking solid food, then the father can begin to feed it.

Marketers always try to keep one step ahead of us. First, they marketed to mothers, then directly to health care workers as a more efficient method. Now that the social impetus is to have fathers more involved in raising children, the formula companies are marketing to them. It is really unfortunate and irresponsible. The net result is that babies will be put at risk.

Certainly the evidence is clear that exclusive breastfeeding provides the healthiest start, and that babies fed other foods have more health problems. This goes for both developed and developing countries.

Dates to Watch

8-12 November

**Advancing the Rights of Children:
A Call to Action for NGOs**

Central American conference in Antigua (Guatemala), sponsored by the NGO Committee on UNICEF, tel: 212-326-7304; fax: 212-326-7260

28 November-2 December

Promoting Families for the Well-Being of Individuals and Society

A conference in preparation for the International Year of the Family (see related story, page 1) at the Mediterranean Conference Centre, Valletta (Malta). For more information, contact the IYF/NGO Secretariat, tel: 43-1-513-8687; fax: 43-1-512-163875

29 November-10 December

80-hour BFHI training course in French

Bangui (Central African Republic). For more information, contact Helen Armstrong, BFHI Training Coordinator, fax: 212-303-7911.

Study compares growth of breastfed babies

A study comparing exclusively breastfed infants from 'affluent' and 'poor' communities showed similar growth patterns for the first six months of life. However, both groups grew more slowly than the standards of the WHO growth charts, which

are based primarily on formula-fed infants.

In the breastfeeding paper for the month of November, which reports on this study, the authors recommend that breastfed infants be assessed using a breastmilk-based growth chart, as formula-based charts may result in infants being assessed as 'faltering', when in fact the breastfed babies may be perfectly healthy.

**Breastfeeding
Paper of the
Month**

Such factors as energy density in breastmilk substitutes can lead to higher growth rates and obesity in formula-fed infants. 'Growth patterns of breastfed infants in affluent (United States) and poor (Peru) communities: Implications for timing of complementary feeding' was published in the *American Journal of Clinical Nutrition*, 1992, vol. 56: 1012-8. To receive a copy of the paper, contact UNICEF field offices or the Nutrition Cluster, UNICEF, 3 UN Plaza, H-10F, New York, NY 10017, USA.

BFHI NEWS

BFHI NEWS is produced monthly by the Division of Information, UNICEF New York. The Baby-Friendly Hospital Initiative is a worldwide effort undertaken by UNICEF and WHO to protect, promote and support breastfeeding.

Martha Thomas, Editor

BFHI NEWS

UNICEF, 3 UN Plaza, H-9F
New York, NY 10017, USA
Tel: (212) 326-7072
Fax: (212) 326-7768
Telex: 175989.

Resources

Baby-Friendly Hospital Initiative

8-minute video. Available in English, French and Spanish.

Baby-Friendly: The Fabella Experience

12-minute video. Available in English, French and Spanish.

Breastfeeding: A Global Priority

30-minute video. Available in English, French and Spanish.

BFHI Colour Slide Series with captions.

The following sets are available with English captions: BFHI in Brazil, Kenya and Thailand (black and white prints also available from these

countries); 'Breastfeeding Advocacy' in the Philippines; and 'Breastfeeding Management' (also in French and Spanish).

All the above available from:

UNICEF, 3 UN Plaza, H-9F
New York, NY 10017, USA
Tel: 212-326-7072

or

UNICEF, Distribution Unit
Palais des Nations
1211 Geneva 10, Switzerland
Tel: 41-22-341-6300

Or contact your local UNICEF office.

BFHI training course in Spanish

The 18-hour course outlines basic training needed to improve staff skills in helping mothers to breastfeed. Field offices can request copies from the Training Coordinator at UNICEF headquarters in New York.

Women, Work and Breastfeeding

A monograph by Penny van Esterik about issues that women in many different work settings face in combining their productive and reproductive lives. Send US\$5 to Cornell International Nutrition, Savage Hall, Ithaca, NY 14853, USA.

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3 UN Plaza, H-9F
New York, NY 10017
USA



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MR. RICHARD JOLLY
DEPUTY EXECUTIVE DIRECTOR, PROGRAMMES
ROOM H-13L
UNITED NATIONS CHILDREN'S FUND
3 UN PLAZA
NEW YORK - N.Y. 10017

unicef 
United Nations Children's Fund

