



World Breastfeeding Week (#WBW2022)

1 - 7 AUGUST 2022

coordinated by the World Alliance for Breastfeeding Action (WABA)



The World Alliance for Breastfeeding Action (WABA) was formed in 1991. WABA is a global network of individuals & organisations dedicated to the protection, promotion & support of breastfeeding worldwide.

WABA coordinates the global World Breastfeeding Week (WBW) campaign that aims to inform, anchor, engage & galvanise action on breastfeeding & related issues.



Since 2016, we have aligned our WBW campaign to United Nation's Sustainable Development Goals (SDGs). We call this the WBW-SDGs Campaign.

World Breastfeeding Week 2022 (WBW2022) will focus on stepping up this capacity.



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#WBW2022

#WBW2022 will focus on strengthening the capacity of actors that have to protect, promote & support breastfeeding across different levels of society. These actors make up the warm chain of support for breastfeeding. Target audiences including governments, health systems, workplaces & communities will be informed, educated & empowered to strengthen their capacity to provide & sustain breastfeeding-friendly environments for families in the post pandemic world.

Education & transformation of existing systems, underpinned by evidence-based national policies, will help to ensure breastfeeding-friendly health facilities, supportive communities & workplaces, & will restore & improve breastfeeding rates, nutrition & health in both the short- & long-term.

Objectives of #WBW2022



INFORM

people about their role in strengthening the warm chain of support for breastfeeding



ANCHOR

breastfeeding as part of good nutrition, food security and reduction of inequalities



ENGAGE

with individuals and organisations along the warm chain of support for breastfeeding



GALVANISE

action on strengthening capacity of actors and systems for transformational change

CHALLENGES & SUPPORT NEEDED FOR BREASTFEEDING



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Supporting breastfeeding **involves many actors and levels**. Women need support from the health service, workplace and community to optimally breastfeed, progressing from one level to the other. This is called the **Warm Chain of Support for Breastfeeding**.

Labour and Delivery / Birth

Ongoing care



Antenatal care
(During pregnancy/
Before birth)

**Postnatal care / First six
weeks after birth**

**Special circumstances
& Emergencies**

Parents need preparation for breastfeeding, & this is crucial during pregnancy. However, they may not fully understand the need to breastfeed their newborns or the need to prepare.

Parents need to know:

- Importance & duration of breastfeeding
- Plan for the birth
- Breastfeeding information
- Breastfeeding & work



Antenatal care (During pregnancy/ Before birth)



Challenges in delivering the information:

- Competing priorities for their education
- Antenatal staff are often insufficiently trained for the task
- Lack of staff and healthcare provider commitment

How to improve support antenatally:

- Raise awareness of the importance of breastfeeding preparation
- Integrate breastfeeding with each antenatal visit, use available technology & practical demonstrations using aids
- Train all antenatal staff
- Introduce parents antenatally to the community networks

Medical interventions during labour & the birth process can interfere with both the initiation & the establishment of breastfeeding.



Labour & Delivery / birth

Challenges during labour & delivery:

- Maternity services often lack a mother-friendly care policy
- Poorly implemented or no Baby-Friendly Hospital Initiative (BFHI) policy
- Shortages of midwives and nurses & a lack of adequate training for them

Mother-friendly care includes:

- Quiet & comfortable environment
- Freedom to move around, eat & drink
- Minimal medication & delivery position
- Immediate skin-to-skin contact & early initiation of breastfeeding
- Companion of choice



How to improve support:

- Advocate for policy, investment & implementation of mother-friendly care & BFHI within maternity facilities
- Integrate mother-friendly policies & BFHI into Maternal, Newborn & Child Health (MNCH) quality of care standards
- Ensure that healthcare providers have competency to implement mother-friendly care & immediate skin-to-skin contact

After the mother and baby leave the delivery room, postpartum care (for the mother) & postnatal care (for the baby) begins. Care is usually given by the staff in the hospital for a few hours or days, & others in the community service after discharge, which should continue for 6 weeks until the postpartum check.



Postnatal care / First six weeks after birth



Challenges during the postnatal period:

- Staff may not be trained to give effective practical help for breastfeeding
- Staff may not have enough time in the first day or two to help mothers breastfeed effectively
- Mothers may be left without the skills they require & breastfeeding may not be established

How to improve support:

- Train midwives / healthcare providers & community breastfeeding counsellors to give practical guidance
- Healthcare providers have competency to guide mothers & explain how to breastfeed responsively
- Inform mothers where they can get appropriate breastfeeding support
- Teach a mother how to express her milk

The rate of exclusive breastfeeding & continued breastfeeding may drop significantly after the postnatal period



Ongoing care

Challenges:

- Lack of support from the father/partner, extended family & community → mother lose motivation
- Mothers not having adequate maternity/parental leave & no support from workplaces
- Lack of practical knowledge & awareness among healthcare providers & the community generally



How to improve support:

- Advocate for health & community services to include breastfeeding counselling at contacts with mothers & babies
- Include fathers/partners & other family members at contacts
- Refer families to breastfeeding counsellors & peer support groups for further support beyond the health system
- Ensure that counsellors & support groups are trained
- Encourage employer to provide breastfeeding room, paid maternity/parental leave & flexible working hours
- Advocate normalising breastfeeding and breastfeeding-friendly environments

To establish & maintain breastfeeding, parents need additional assistance & support in infant feeding.

The order of preference should be expressed
breastmilk (infant's mother) > breastmilk
(healthy wet nurse @ human-milk bank) >
breastmilk substitute (infant formula fed
with a cup)



Special circumstances & Emergencies



How to improve support during emergencies:

- Orient & train relevant staff
- Develop a contact list of available people skilled in breastfeeding counselling
- Prepare plans for IYCF support & breastfeeding & artificial feeding, & management of vulnerable children
- Develop plans for prevention and management of donations of breastmilk substitutes

How to improve support during special circumstances:

- Establish human milk banks to provide donor milk when needed
- Practice Kangaroo Mother Care to breastfeed babies born prematurely @ low birth weight
- Encourage relactation and wet-nursing where appropriate

THE ROLES, EDUCATION & TRAINING OF ACTORS IN THE WARM CHAIN





Breastfeeding counsellors



Breastfeeding support groups



Certified lactation consultants



Community health workers



Obstetricians



Paediatricians



Midwives & nurses



Nutritionists & dietitians



Doulas & traditional birth attendants



Family doctors & general practitioners



Policymakers in health systems / Healthcare administrators

Healthcare Actors

Healthcare actors play an essential role in the support of breastfeeding & for this they need a consistent & appropriate evidence-based education.

Both pre-service education & regular in-service training should be available, and training of trainers' programmes help to create sustainable programs.

Healthcare actors need to understand mother-friendly care, & the BFHI to be able to implement the policy of the health facility & specific breastfeeding counselling competencies.

Code training is essential to meet their responsibilities under the Code & they need to know about cultural practices & beliefs and how these affect breastfeeding.



Academicians



Community members



Employers & trade unions



Media



Faith groups



Young people



Environmentalists



Fathers/Partners



Grandparents & family members

Community Actors

Community actors play an important role in supporting national & international advocacy & programmes to protect, promote & support breastfeeding like WBW.

They need awareness of the tactics of the BMS industry in providing misinformation & unethical promotion of formula milk.

Community actors also need education & training to understand how they can support parents to breastfeed.

They can work collaboratively with healthcare actors to help breastfeeding parents & close the breastfeeding support gaps when parents are discharged from the hospital.

STEPPING UP THE WARM CHAIN



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To PREPARE for breastfeeding, parents need education & anticipatory breastfeeding counselling from both healthcare & the community.



Healthcare actors can work together with community actors to ensure that parents receive consistent antenatal information.



To INITIATE breastfeeding, mothers need mother-friendly care during labour & delivery & skin-to-skin contact with skilled guidance immediately afterward.



Pre-service and in-service education need to ensure that healthcare actors have the relevant competencies.



To **ESTABLISH breastfeeding postnatally**, breastfeeding counselling must be available in the maternity facility and after discharge.



Close communication is needed between different actors in the health system & the community to ensure continuity & consistency in breastfeeding counselling at this critical time.



To **MAINTAIN breastfeeding**, parents need breastfeeding counselling contacts for at least the first year, & if possible, longer.



Healthcare and community actors along the Warm Chain need to arrange these contacts between their respective services with appropriate referrals when needed.



To **PROTECT breastfeeding**, all Warm Chain actors need to be free from the commercial influence of breastmilk substitutes & feeding bottle manufacturers & distributors.



They must be educated about their responsibilities under the Code to ensure that parents make unbiased informed decisions.



To **STEP UP for breastfeeding** and achieve the global breastfeeding target, the capacity of all actors in the Warm Chain needs to be strengthened.



Governments and decision-makers need to invest in education and support for breastfeeding to create an enabling environment for families with babies.

The misinformation about COVID-19 & rampant marketing by the BMS industries as the safer option scared parents into formula feeding.

Sponsoring free education for healthcare workers impedes breastfeeding support in the health system by giving misleading information, biassing healthcare provider attitudes & interfering with the establishment of breastfeeding.

Ensuring Code compliance within the health facility will enable parents to receive independent unbiased information & make them aware of the tactics of the BMS industry.

JOIN THE #WBW2022 CAMPAIGN:

1. [Pledge](#) & [Report](#) your #WBW2022 activities (physical and/or virtual)
2. Participate in the #WBW2022 Ask Me Anything (AMA)
3. Follow the [WBW website](#) & social media platforms ([Facebook](#), [Twitter](#) & [Instagram](#)) for more activity ideas & updates
4. Use our campaign hashtags in your social media posts:

#WBW2022

#worldbreastfeedingweek2022

#WABA

#stepupforbreastfeeding

#breastfeeding

#educateandsupport

#SDGs

#WarmChain