



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

National Breastfeeding Week (1-7 August 2011) Fact Sheet

BACKGROUND

The purpose of this document is to provide information and guidance on key message to be communicated during the breastfeeding week 2011. This will also ensure that key promotional messages are harmonized across the country. A question and answer document will also be developed in line with the agreed upon key messages to be communicated using various channels to promote the breastfeeding week.

Target groups

The targeted groups for the National breastfeeding week includes mothers, pregnant women, and women of child bearing age, families and communities.

The problem

Most women want to breast-feed; however they are not doing it exclusively. According to, the latest survey findings from the 2008 HSRC report, 25.7% of children aged 0 to 6 months were reported to be exclusively breastfed. This is the highest recorded rate since 1994.

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The same study also reported that 22.5% of children 0-6 months were exclusively formula fed. In South Africa the addition of other liquids (water, teas and even porridge or other drinks) whilst breastfeeding starts very early. The study also showed that more than half (51.3%) of this age group were mixed fed (i.e. fed both formula milk and breastfed).

Among factors contributing to most women not exclusively breastfeeding and mixed feeding is the aggressive marketing of infant formula to the general public and modernization. Mothers also experience difficulties with breast-feeding such as complaining of not having enough milk, a crying baby, the breasts are too full and painful, swelling breasts, cracked and sore nipples. These problems contributes to women stopping to breastfeed or choosing to give the baby other foods or drinks whilst breastfeeding in the first six months.

Objectives for the BF week 2011

- In line with the 2011 international theme for the breastfeeding week that emphasizes the use of Communication as an essential part of protecting and promoting and supporting breastfeeding.
- There is a need to use various channels of communication (media, social networks such as email, twitter, face book, radio, billboards, TV etc.) to encourages the sharing of knowledge and experience, thus enabling wider outreach towards achieving the following objectives:-
 - To promote, protect and support breastfeeding as a key child survival strategy in South Africa
 - To reinforce breastfeeding as a cultural practice in SA
 - To emphasize the importance of exclusive breastfeeding
 - To raise awareness on the new recommendations on HIV and infant feeding

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Outcomes

- Increased BF rates , more especially the number of mothers breastfeeding exclusively for 6 months
- Awareness on the new policy direction on infant feeding in the context of HIV

Key messages 1

“Exclusive Breastfeeding for the first six months saves lives”

- During the first six months of life, all babies (except in a few rare conditions) can grow optimally by being fed breast milk alone without giving any food, drinks, not even water or other formula/ milk
- Breast milk protects babies against infections like diarrhea, respiratory illnesses, allergies and ear infections
- Breast milk remains the cleanest, safest , best quality and most readily available food and water for the baby for the first six months
- Introducing any other foods / not giving breast milk alone in the first six months may affect the baby’s wellbeing because of the missed benefits of the antibodies in breast milk which supports the baby’s immune system. Breast milk strengthens the baby’s immune systems to fight infections. Babies not exclusively breastfed have a higher risk of diarrhoea, respiratory illness, allergies and ear infections
- Introducing any other foods before six months may lead to your baby being given foods that are not so nutritious, this leads to malnutrition.

Key Message 2

“HIV positive mothers can breastfeed up to 12 months”

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- Research shows that a combination of breastfeeding and the use of antiretroviral treatment can significantly reduce the risk of transmitting HIV to babies through breastfeeding
- WHO is recommending that HIV positive mother or their infants take antiretroviral medication throughout the period of breastfeeding with safe introduction of complementary foods at six months and continue breastfeeding until the baby is 12 months old. Breast milk reduces the chances of babies dying from common childhood illnesses such as diarrhoea or pneumonia and will also have little risk of becoming infected with HIV.
- All HIV negative women or women of unknown HIV status and or have HIV positive babies are advised to breastfeed their babies for the first six months of life and to continue breastfeeding with complementary foods up to at least two years.

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Material for further reading

- South African national HIV Prevalence, Incidence, Behavior and Communication Survey, 2008
- Guidelines on HIV and infant feeding: Principles and recommendations for infant feeding in the context of HIV and a summary of evidence Principles and recommendations for infant feeding in the context of HIV and a summary of evidence, 2010
- WHO/UNICEF. Global strategy on infant and young child feeding. Geneva, World Health Organization, 2003.
- Infant and Young Child Policy. Department of Health. 2007.
- WHO/ UNICEF. Baby-friendly hospital initiative: Revised. Updated and expanded for integrated care. Section 3, Breastfeeding promotion and support in a baby-friendly hospital: a 20- hour course for maternity staff, 2009.

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