ADVOCACY BRIEF

BREASTFEEDING AND PREVENTION OF OVERWEIGHT IN CHILDREN

Breastfeeding gives children the healthiest start in life. Breastmilk provides all the energy and nutrients needed for the first six months of life and continues to partially fulfil children’s nutritional needs until age 2 and beyond, alongside nutritious complementary foods. The benefits of breastfeeding for mothers and babies are universal and apply as much to industrialized societies as to low- and middle-income countries.

The short-term benefits of breastfeeding are well-known: breastfed babies are more likely to survive, and breastfeeding provides children with critical protection against infectious diseases, such as diarrhoea, respiratory infections and gastrointestinal and allergic diseases.¹

Breastfeeding also has long-term health benefits for children — including reducing their current and future risk of overweight and obesity.²

As global rates of overweight continue to rise, the role of breastfeeding in prevention is critical. Some 40 million children under five worldwide are already affected by overweight. Between 2000 and 2016, the number of school-aged children with overweight and obesity nearly doubled and is rising rapidly across every continent.³ Against this backdrop, prevention is an increasing priority for many countries.

The prevention of overweight should start as early as possible — and improving breastfeeding practices in the earliest years of life can help set children on the path to a healthy diet and a brighter future.

GLOBAL BREASTFEEDING COLLECTIVE

UNICEF and the World Health Organization (WHO) are leading a Global Breastfeeding Collective to increase political commitment for breastfeeding — one of the smartest investments a country can make.

We seek to join forces with partners also working to realize the Sustainable Development Goals’ vision of a better world. Our aim is to integrate agendas, messages and advocacy to maximize our collective impact.

Together, we will go further.

Breastfeeding has important benefits throughout a child’s life. It reduces the risk of overweight and obesity and protects children from negative health consequences throughout the life course.
KEY MESSAGES

Breastfeeding reduces the risk of childhood overweight and obesity.

Children who are never breastfed or who breastfeed for a short period of time have a higher risk of childhood obesity than those who breastfeed for six months, according to a recent study using nationally representative data from 22 countries. Childhood overweight and obesity have immediate effects on child health and wellbeing but also significantly increase the risk of adult obesity, as it is difficult to reverse a trajectory of excessive weight gain.

Breastfeeding protects against overweight by regulating food intake and improving gut health.

Exclusive breastfeeding prevents the early introduction of complementary foods, which can lead to unhealthy weight gain. Breastfeeding also protects against the risk of excess protein and energy intake, which are higher among formula-fed infants and increase the risk of childhood overweight. The preventative effect of breastfeeding is also linked to gut health: breastfeeding helps populate the child’s body with ‘good’ bacteria from his or her mother, which provide protection against excessive weight gain. Breastmilk contains hormones and other biological factors involved in the regulation of food intake that may help shape the long-term physiological processes responsible for maintaining energy balance. Feeding of infant formula by bottle may interfere with a child’s recognition of satiety and thus lead to overeating.

The protective effect of breastfeeding continues into adulthood.

A meta-analysis of available studies published in 2015 calculated a 26 percent reduced chance of overweight and obesity among individuals who were breastfed. While the protective effect of breastfeeding on overweight is most marked in children and adolescents, the meta-analysis found that even adults are at reduced risk of overweight and obesity if they were breastfed. Breastfeeding also has positive effects on the risk of other noncommunicable diseases, such as type-2 diabetes, hypertension and cardiovascular disease during adulthood, independent of weight status.

Improving breastfeeding rates and preventing overweight and obesity reduces costs to national health systems and society.

Overweight and obesity are becoming increasingly common in low- and middle-income countries. In addition to the health consequences for individuals and families, these conditions have a direct and indirect economic impact through increased healthcare costs and losses in productivity. Global economic costs related to obesity are estimated at US$2 trillion, or 2.8 percent of global gross domestic product (GDP). Preventing childhood overweight and obesity is therefore cost-effective, and investments in optimal breastfeeding practices are a smart choice for reducing healthcare costs and supporting the growth and development of both children and nations.
KEY FACTS

- Nearly 100,000 cases of childhood obesity could be avoided each year by breastfeeding in line with global recommendations. The protective effect of breastfeeding on overweight and type-2 diabetes is particularly strong in children and adolescents. A recent multi-country study conducted in Europe showed that breastfed children had a significantly lower risk of obesity than children who were never breastfed or breastfed for a shorter period.

- A review of over one hundred studies in both high-income and low-or middle-income settings found that breastfeeding was associated with a 26 percent reduction in overweight and obesity in adults.

- In 2018, the breastmilk substitutes industry reached an all-time high of US$61 billion in global sales (from US$45 billion in 2014) and is expected to reach US$119 billion by 2025. The commercial pressures of this industry influence the feeding decisions made by families, with long-lasting negative consequences on children’s health throughout their lives.

- Breastfeeding in line with global recommendations would save US$302 billion in healthcare costs annually. The adoption of recommended breastfeeding practices is one of the most cost-effective interventions for reducing costs to health systems.

CALL TO ACTION

There is compelling evidence that breastfeeding has a lasting impact on children’s health that extends throughout their lives, protecting them against the risk of childhood obesity and non-communicable diseases in adulthood. This is true in low-, middle- and high-income countries alike. Policies and programmes that effectively increase the prevalence of breastfeeding practices would improve health and wellbeing and reduce healthcare costs related to obesity and diet-related noncommunicable diseases.

We invite partners to join us in advocating with governments and donors for the implementation and monitoring of policies and programmes that support optimal breastfeeding for mothers and babies. Working together, we must:

- Disseminate accurate information on the value of breastfeeding as a powerful intervention for preventing overweight and obesity across the life course.

- Advocate for regulating the breastmilk substitutes industry by implementing, monitoring and enforcing the International Code of Marketing of Breast-milk Substitutes and subsequent World Health Assembly Resolutions — in particular, Resolution 69.9 on ending the inappropriate promotion of foods for infants and young children.

- Increase investments in breastfeeding to scale up proven interventions that support mothers and babies in achieving optimal nutrition.

- Advocate for paid maternity leave — a critical measure for enabling exclusive and continued breastfeeding — in line with International Labour Organization Convention 183 and recommendation 191; and advocate for paternity leave and other family-friendly workplace policies.

- Strengthen health systems by providing breastfeeding-friendly health and maternity services, including skilled breastfeeding counseling and support.

- Encourage the formation of community and peer support groups that are linked to the health facilities to enable a continuous support to breastfeeding mothers.
REFERENCES


FOR MORE INFORMATION AND TO JOIN THE COLLECTIVE:
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