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CELEBRATING THE INNOCENTI DECLARATION ON THE PROTECTION, PROMOTION AND SUPPORT OF BREASTFEEDING 1990–2005,
Florence, 21-22 November 2005

KEY FINDINGS AND MESSAGES

**Child survival depends on exclusive breastfeeding.**

- Child malnutrition is a global crisis. It contributes to more than half of all child deaths. Over 300 million children in the developing world are under-nourished. These numbers can, and should, be reversed.

- Exclusive breastfeeding is vital for infant survival. By guarding against malnutrition and disease it is already saving about six million infants annually. Together with better complementary feeding after six months, it could save an additional two million young lives each year.

- Optimal infant and young child feeding is critical to achievement of the Millennium Development Goals on child mortality and maternal health.

**The Innocenti Declaration gave breastfeeding a critical boost...**

- Global breastfeeding rates are rising. Between 1990 and 2000, exclusive breastfeeding levels in the developing world increased 15 per cent overall among infants less than four months old (from 46 to 53 per cent) and among infants less than six months old (from 34 to 39 per cent). Rates in some countries have quadrupled.

- More hospitals support breastfeeding. Under the Innocenti-inspired Baby-Friendly Hospital Initiative, at least 20,000 hospitals in 150 countries have been awarded baby-friendly status.

- Legal protection has strengthened. More than 60 countries currently have laws or regulations implementing the International Code of Marketing of Breast-milk Substitutes fully or in part. Over 20 countries have draft laws awaiting adoption.
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…but more support is still needed from governments and societies.

- Exclusive breastfeeding rates are still very low. Only 39 per cent of infants in the developing world are exclusively breastfed. The heavy workload of rural women and uncertain work opportunities for urban poor are major obstacles to proper feeding.

- Working mothers need more protection. In the past 10 years the number of women in paid employment increased by nearly 200 million. But only 59 countries having ratified at least one of the three International Labour Organization maternity protection conventions.

- Infant feeding and HIV/AIDS needs more attention. When early studies reported that HIV could be transmitted through breastmilk, breastfeeding promotion began to falter in some countries. Preventing mother-to-child HIV transmission must not undermine support for breastfeeding, because most children’s health and survival depend on it.

- Breastfeeding during emergencies is paramount. During crises such as the Pakistan earthquake, child illness and death rates can multiply by more than 20 due to disease and inadequate nutrition. Relief organizations need to be trained to support breastfeeding as an essential alternative to providing infant formula.

We must seize fresh opportunities for action.

- A clear path exists towards optimal infant and young child feeding. The 2002 Global Strategy for Infant and Young Child Feeding, developed by WHO and UNICEF, strengthens the original Declaration with new targets reflecting current realities, including HIV/AIDS and emergencies.

- Governments are responsible for meeting these targets. Countries have a legal obligation to improve infant and young child feeding practices, in accordance with international human rights instruments, including the Convention on the Rights of the Child.

- Health professionals also have a key role. They must ensure high standards of support for early, exclusive and continued breastfeeding, both within the medical profession and in the community.

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