In the 15 years since the adoption of the original Innocenti Declaration in 1990, remarkable progress has been made in improving infant and young child feeding practices worldwide. Nevertheless, inappropriate feeding practices – sub-optimal or no breastfeeding and inadequate complementary feeding – remain the greatest threat to child health and survival globally. Improved breastfeeding alone could save the lives of more than 3,500 children every day, more than any other preventive intervention. Guided by accepted human rights principles, especially those embodied in the Convention on the Rights of the Child, our vision is of an environment that enables mothers, families and other caregivers to make informed decisions about optimal feeding, which is defined as exclusive breastfeeding\(^1\) for six months followed by the introduction of appropriate complementary feeding and continuation of breastfeeding for up to two years of age or beyond. Achieving this vision requires skilled practical support to arrive at the highest attainable standard of health and development for infants and young children, which is the universally recognised right of every child.

\(^1\) Exclusive breastfeeding means that no other drink or food is given to the infant; the infant should feed frequently and for unrestricted periods.

Challenges remain: poverty, the HIV pandemic, natural and human-made emergencies, globalisation, environmental contamination, health systems investing primarily in curative rather than preventive services, gender inequities and women’s increasing rates of employment outside the home, including in the non-formal sector. These challenges must be addressed to achieve the Millennium Development Goals and the aims of the Millennium Declaration and for the vision set out above to become reality for all children.

The targets of the 1990 Innocenti Declaration and the 2002 Global Strategy for Infant and Young Child Feeding remain the foundation for action. While remarkable progress has been made, much more needs to be done.

We who are assembled in Florence, Italy, on this Twenty-Second Day of November 2005 to celebrate the 15th Anniversary of the Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding declare that these actions are urgent and necessary to ensure the best start in life for our children, for the achievement of the Millennium Development Goals by 2015, and for the realisation of the human rights of present and future generations.

We therefore issue this Call for Action

22 November 2005, Florence, Italy
The Innocenti Declaration 2005 was adopted by participants at the meeting on 12–15 November 2005, convened by the Innocenti International Research Institute. The Call for Action made in this declaration was welcomed by the Executive Board of WHO at its 104th Meeting on 27 May 2006. The declaration underlines the importance of the Global Nutrition Target 2025, which aims to reduce by one-third under-five child mortality by 2025. The declaration calls for all countries to adopt and implement strategies to ensure that all women and infants have access to appropriate nutrition and health care. It also highlights the importance of breastfeeding and complementary feeding in achieving this target. The declaration encourages governments to take action to protect, promote, and support breastfeeding and complementary feeding, and to ensure that all women and infants have access to appropriate nutrition and health care. The declaration also calls for cooperation and coordination among all stakeholders to achieve these goals.
What everyone should know about breastfeeding*

1. Breastmilk alone is the only food and drink an infant needs for the first six months. No other food or drink, not even water, is usually needed during this period.

2. Newborn babies should be kept close to their mothers and begin breastfeeding within one hour of birth.

3. Frequent breastfeeding causes more milk to be produced. Almost every mother can breastfeed successfully.

4. Breastfeeding helps protect babies and young children against dangerous illnesses. It also creates a special bond between mother and child.

5. Bottle-feeding can lead to illness and death. If a woman cannot breastfeed her infant, the baby should be fed breastmilk or a breastmilk substitute from an ordinary clean cup.

6. From the age of six months, babies need a variety of additional foods, but breastfeeding should continue through the child’s second year and beyond.

7. A woman employed away from her home can continue to breastfeed her child if she breastfeeds as often as possible when she is with the infant.

8. Exclusive breastfeeding can give a woman more than 98 per cent protection against pregnancy for six months after giving birth – but only if her menstrual periods have not resumed, if her baby breastfeeds frequently day and night, and if the baby is not given any other food or drinks, or a pacifier or dummy.

9. There is a risk that a woman living with HIV may pass the virus on to her infant through breastfeeding, especially when breastfeeding is not exclusive. Women who are infected should be counseled by a trained health worker on the benefits and risks of all infant feeding options and supported in carrying out their infant feeding decision.

10. All women have the right to an environment that protects, promotes and supports breastfeeding, including the right to protection from commercial pressures to artificially feed their babies. The International Code of Marketing of Breast-milk Substitutes aims to provide the necessary protection by prohibiting the promotion of all breast-milk substitutes, feeding bottles and teats.


Get more information on breastfeeding by visiting
http://www.unicef.org/nutrition/index_breastfeeding.html