



Council of International Neonatal Nursing (COINN) Position Statement on Child Health, Poverty and Breastfeeding

COINN Position:

“In the battle to eradicate poverty, one small step would be to ensure that every newborn is breastfed. This would provide the best nutrition, the greatest infection protection, the most illness prevention, and the greatest food security and psychological protection for the infant”.

Ruth. A. Lawrence, MD, 2007¹

The Council of International Neonatal Nurses (COINN) recognizes the critical contributions made by breastfeeding, breast milk, and mother-baby bonding, to not only enhance developmental outcomes but also child survival. Intergenerational cycles of poverty and health inequalities are also factors linked to not breastfeeding the infant.

The highest risk of death is during the neonatal period. Positive survival and health outcomes result from relatively simple and safe measures such as breastfeeding.² Keeping mothers and infants together as much as possible, providing breastfeeding counseling, assisting mothers to provide breast milk for their preterm unwell babies and supporting breastfeeding initiation, exclusivity and continuance, even in the workplace, are essential components for child survival. Supportive health care practices, such as these, are a prerequisite to reach optimal breastfeeding goals.³

Research has previously indicated that in less developed countries exclusive limited breastfeeding with abrupt weaning may have been the safest option for some women.⁴ However, recent research appears to indicate that this abrupt weaning even in HIV positive women may lead to adverse neonatal/infant outcomes.⁵

COINN supports the International Code of Marketing of Breastmilk Substitutes and subsequent, relevant World Health Assembly resolutions.⁶

Key points:

- The importance of breastfeeding and use of breast milk to child survival requires global coordinated health efforts to support breastfeeding.
- Globally neonates (first 28 days of life) have the highest risk of death but a mortality gap exists between developing and developed countries, especially for countries experiencing conflicts or crises.⁷
- Infants born in less developed countries, who are not breastfed, have a six-fold greater risk of dying from infectious diseases in the first two months of life than those who are breastfed.⁸

- The Global Strategy on Infant and Young Child Feeding confirms that breastfeeding is a public health priority globally.⁹
- Initiation and support of breastfeeding are essential components of infant care¹⁰ in all settings including the woman's workplace.
- Protection and support of mother-baby bonding and breastfeeding, beginning shortly after birth, or as soon after birth as possible,[including situations where babies are born preterm or unwell and admitted to a neonatal or special care unit] are essential components for increased child survival.
- Breastfeeding and breast milk provide optimal, species specific, nutrition and are an essential component of any program to improve child health.
- Breastfeeding and breast milk save lives by protecting babies from infection and by modulation of the immature immune systems of babies.¹¹
- The use of any breast milk substitutes in emergencies is a risk factor for neonates and infants due to unhygienic conditions, lack of water or clean water and lack of knowledge about safe preparation of these products.^{12, 13}
- International guidelines around HIV and infant feeding currently states that breast feeding is recommended unless replacement feeding is acceptable, feasible, affordable, sustainable and safe.^{14, 15}
- Although mothers who are HIV positive are advised not to breastfeed in Western industrial countries it is possible to heat treat human milk to inactivate the HIV virus. Breast milk from a screened HIV negative donor could also be used in certain circumstances.
- Early abrupt weaning from exclusively breastfed infants, of already HIV-infected babies, causes significantly worse outcomes. A 2008 study showed that abrupt weaning by HIV-infected women did not improve the rate of HIV survival and it was harmful to HIV-infected infants.¹⁶

"The world cannot afford to continue to lose one of its most valuable resources - its children."

Carole Kenner, 2007¹⁷

References

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COINN acknowledges that some countries may not be able to implement the recommendations as written due to limited resources-personnel, financial, and equipment. However, to improve health outcomes all the neonatal community must strive to uphold these recommendations. Determinations must be made within local and national organizations as to what constitutes basic, essential, and advanced care.

Approved by COINN Board of Directors

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