

MY HEALTH, MY RIGHT CAMPAIGN! A Breastfeeding perspective

Press Release

WABA World AIDS Day Statement

28 November 2017

The **World Aids Day Campaign 2017** claims the right to health for everyone living with HIV, regardless of culture, gender, orientation, age, social class and belief. This includes the right of everyone living with and affected by HIV, to the prevention and treatment of ill health, to make decisions about their own health and to be treated with respect and dignity without discrimination.¹ The right to health depends on social justice, sanitation, a clean environment, and access to skilled professionals,¹ all of which are underpinned by the Sustainable Development Goals (SDGs). Also, the *my health, my right* campaign increases visibility about the need to achieve good health for everyone, everywhere.



Considering that women represent 52% of all people affected by HIV,² WABA draws attention to the role of the protection, promotion and support of optimal breastfeeding as a way of ensuring women's rights.³

👤 My health, my right for women and children

Today the gender gap drives the HIV epidemic in countries of high incidence and prevalence.² Many women are prevented from seeking education and work outside their homes and from seeking access to health assistance which significantly compromises their access to HIV diagnosis and effective treatment. Many of these women also lack support for breastfeeding.

WABA believes that effective policies and programmes can empower women and girls, including the participation of boys and men in behavioral and structural interventions, to reduce women and girls' vulnerability to HIV.

WABA calls for recognition of the evidence that breastfeeding⁴ is the main resource to promote infant health and survival, and contends that support for breastfeeding can contribute to the achievement of all the SDGs by year 2030.^{5,6}

👤 My health, my right for breastfeeding

Currently it is recommended that women diagnosed positive for HIV initiate ART as early as possible,^{7,8} and continue lifelong drug therapy with good adherence. There should be no restriction to breastfeeding duration.⁹ Thus, women under lifelong ART are recommended, in line with recommendations for the general population, to breastfeed exclusively for the first six months, followed by continued breastfeeding with adequate complementary food for two years or beyond.⁹

ACT LOCALLY TO CREATE A WARM CHAIN TO PROTECT, PROMOTE AND SUPPORT BREASTFEEDING AMONG WOMEN LIVING WITH HIV

Identify ACTIONS to promote, protect and support breastfeeding in the HIV context, according to country policy (e.g. produce a community mapping to understand the health assistance needed by women living with HIV):¹⁰

During pregnancy guarantee that all women:

- be tested for and receive rapid diagnosis of HIV,
- start lifelong ART as early as possible, at least 13 weeks before labour,⁷
- in areas of high HIV incidence and prevalence, if women test negative to HIV, receive re-testing after 3 months.⁷

During labour/childbirth guarantee all women living with HIV:

- respectful treatment with the right to have a companion at the health facility,¹¹

- support by a skilled birth attendant,
- skin-to-skin contact with her baby immediately after birth and assistance to initiate breastfeeding within one hour after birth.⁵

During rooming-in at a health facility guarantee all women living with HIV and their newborn infants:

- close, and continuous support to establish breastfeeding,
- counselling at the time of the discharge, to seek support for lifelong ART, and ARV prophylaxis for their babies (e.g. for 4 to 6 weeks), breastfeeding support (e.g. through mother to mother peer support in the community), infant to be tested for HIV and enrollment at a family planning facility.

At the community level guarantee all breastfeeding women living with HIV and infants:

- close and continuous support for women and their babies to receive ART and appropriate ARV prophylaxis, adequate follow-up and retention in care,⁷
- HIV testing for infants at birth, at 6 weeks, 6 months and 18 months,⁷
- support for exclusive breastfeeding for six months and continued breastfeeding with appropriate complementary food for 2 years or beyond,⁵
- uninfected woman should be offered HIV-testing during the breastfeeding period.⁷

By creating this [Warm chain](#) of support across the continuum of care, women who are living with HIV can be ensured their rights to health and be supported in their breastfeeding journeys.

References

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