Men's Initiative E-newsletter

WABA Forum for Men's Involvement in the Protection, Promotion & Support of Breastfeeding

Content

•	Editor's note: Health & Wellness Common Interest	P.1
•	2009 WABA Gender Training In India	P.1
•	WABA Revamps Steering Committee	P.2
•	Volunteers Engage In Code Monitoring	P.2
•	Fathers' Attachment and Depression	P.3
•	Finland Fathers Support Mothers	P.3
•	Paternity Leave In Europe	P.4
•	Japan Lends A Hand To Swaziland	P.5
•	Journalist Backs Fatherhood	P.5
•	Becoming A Breastfeeding Father	P.5
•	One Baby, Two Parents	P.6
•	Dads Are Different Than Moms	P.6
•	World Breastfeeding Trend Initiative (WBTi)	P.7
•	Action on Diarrheal Disease	P.7
•	US Annual Summit On Breastfeeding	P.8

Editor's note

Health & Wellness Common Interest

Breastfeeding Babies are beautiful. Breastfeeding is essential to a child's health, yet very few mothers are supported to achieve their noble breastfeeding goals. This is a cause for concern as men are invited to get involved in all regions. Reaching out to women and men while the expectant mothers are still pregnant to inform them of breastfeeding support is one of the keys to helping them succeed. Supporting women once they have their babies is one of the best things men can do. Men's Initiative e-newsletter is inviting you to support women around the globe that are wanting to breastfeed, are breastfeeding, have breastfed or wanted to breastfeed as well as those that support these women. Staying 'abreast' of breastfeeding issues, i.e. the benefits to mom and to baby, the politics around breastfeeding and how to stay encouraged while protecting, promoting and supporting breastfeeding are some of the topics this enewsletter edition covers. The Men's Working Group appreciates the contributions made from the regions so far and would welcome more in the future. Your articles and contributions are very interesting and thought provoking. This confirms the positive feedback received from the take off edition last June.

Read, Share & Send Us

WABA MI E-newsletter Vol. 1 N°2 Page 1

2009 WABA Gender Training In India

24 Gender advocates from 13 countries including Bangladesh, Cameroon, Egypt, France, Germany, Brazil, Guatemala, India, Kuwait, Malaysia, Nepal, Philippines, Switzerland, Uganda and Zimbabwe participated in the 6^{th} WABA Gender Training from $6^{th} - 9^{th}$ July, 2009 in Delhi, India. It was the first time that Food First Information Action Network, FIAN, joint the World Alliance for Breastfeeding Action as facilitator organisation.

The men and women from Africa, Arab World, Asia, Europe and Latin America were exposed to the gender realities theoretically and practically with the help of the key facilitators Renu Khanna from India, Paul Sinnapen from Malaysia, Flavio Valente of FIAN, Sarah Amin and Lakshmi Menon of WABA. It was made clear that gender issues are not the concern of women alone. Paul Sinnapen and Flavio Valente emphasised on the fact that helping men understand how gender equality benefits them can help men become key allies in creating a more gender-equitable world.



Participants and resource persons in group picture

Gender sensitisation for men is relevant, because interventions for women and girls will not be derailed by male resistance. It was within the frame work of this reflexion that participants of the workshop returned understanding that the achievement of gender equality is not possible without the active involvement and support of men.

Men's role in promoting gender equality involves: July – December 2009

- Making men aware of the present patriarchal structure.
- Involving men in promoting reproductive health and rights.
- Influencing men's attitudes on gender-based violence.

Gender and breastfeeding was handled as a special theme of the training. The participants were invited during the closing ceremony of the workshop to duplicate the learnt skills back in their continents through participatory training methodologies including presentation, work exercises, games, group discussions, role play, case studies and experience sharing.

Gender Equality Training In Nigeria

Journalists from across Africa attended a course on gender equity from September 13 - 18, 2009 in Abuja, Nigeria. It was the second Gender Institute Course to explore the link between gender equality and health, governance, education, the economy and climate change, among other issues.

Thirty participants of both sexes from all over Africa took part in the course which was sponsored by the Women Empowerment and Reproductive Health Centre (WERHC) of Africa.

WABA Steering Committee Revamped

Dr Audrey Naylor and Dr Arun Gupta will from the 1st January 2010 take seats as members of WABA Steering Committee during sessions. This is the outcome of election vote counting process of 29th July 2009 officiated and certified by a legal officer and WABA's auditor in the presence of the Co-Directors at the WABA International Secretariat in Penang, Malaysia. The mandate is for a period of three years and the elections were for three key renewal positions:

a. Global Steering Committee position – Dr Audrey Naylor

b. Asia-Pacific Steering Committee position – Dr Arun Gupta

c. For Europe position, untiring and caring mother, Felicity Savage was uncontested nominee as she was elected for the Europe Steering Committee position.

The WABA Men's Working Group congratulates the elected Steering Committee members and wishes them success for continued protection of the interests of our world's babies and their families.

WABA MI E-newsletter Vol. 1 N°2 Page 2

Volunteers Engaged In Code Monitoring

Tobias Zick of German Neon Magazine in Munchen and Per-Anders Pettersson, Swedish Freelance Photographer joined Cameroon Link in Douala to unmask company code violators of breastmilk substitute marketing regulations. The volunteers visited the Bamenda, North West highlands to witness how illegal milk market competition and dumping by companies was affecting breeders in Cameroon. The local breeders are faced with low market prices for their fresh cow milk in the region due to dumping of imported formula at give away prices.



Tobias and Per-Anders accompanied by Cameroon Link during the health area to health area surveys in Bonendale, Bonamikano, Ngwele and Grand Hangar in Douala City neighbours said, their investigation was another way to support WABA's Men Initiative efforts as men. They were thrilled by the impact of social mobilisation of populations by Community based organisations in Douala, as messages relevant to the theme of the World Breastfeeding Week 2009 were delivered during educative talk sessions. Tobias Zick from Germany and Per-Anders Pettersson of Swedish origin conducted interviews on the strategies put in place by the company violators of the international and national Code for reporting back to their news editorial boards and their news channels.

In Bamenda, Tobias was particularly touched by the extent imported infant formula powders distort market chances for farmers in Cameroon, as he documented recent examples of baby food marketing malpractices like poor labelling of products and illegal market competition.

The Federation of Cameroon Breastfeeding Promotion July – December 2009

Associations, FECABPA, had called on the government to strengthen Cameroon's national code on the marketing of breastmilk substitutes by including sanctions as part of the already well formulated articles of the country's national code. during the WBW 2009 launching mass event in Obala before the survey on code violations. The federation was created on the 14th September 2007 with the vision to protect, promote and support breastfeeding action through NGOs networking exchanges. FECABPA advocates for child rights, maternal and child care protection. For more information on the world breastfeeding week, click on the following link or copy and paste http://worldbreastfeedingweek.org/worldwide.htm or http://cameroonlink.blogspot.com

Fathers' Attachment and Depression

University of Oxford experts have warned that children whose fathers have mental health disorders are likely to have psychiatric or behavioural disorders themselves. The researchers were reviewing existing evidence and said, in the Lancet, that there has been too much focus on mothers' mental health issues and that boys in particular could be affected if their father had depression or was an alcoholic.

Mental health campaigners in the UK had revealed that men often had problems seeking help. This was interpreted as meaning that men who could not help themselves, were likely to be unable to help their partners.

The Oxford team said, it was not surprising much of researchers' emphasis had focused on mothers as, in most societies; it is mothers who provide the majority of childcare - particularly when children are very young and that the role of men had been "underemphasized". The researchers observed that men have more influence on their children's development than previously thought.

In addition, the peak age for men to be affected by psychiatric disorders is the same as the peak age for becoming a father - between 18 and Paternal depression during the postnatal period 35, measured at eight weeks after birth, has been associated with increasing the chance of the child subsequently developing behavioural and emotional problems from 10% to 20%. The Oxford team, led by psychiatrist Professor Paul Ramchandani, said more

WABA MI E-newsletter Vol. 1 N°2 Page 3

research was needed on how fathers' psychiatric disorders affect their children's development. He said, "Fathers are now more involved in child-rearing than they used to be.

FINLAND FATHERS SUPPORT MOTHERS By Yvonne Bekeny in Finland Email: <u>bekeny@yahoo.fr</u>

Breastfeeding in general and exclusive breastfeeding in particular has been a natural practice in Finland for several years due to the fact that the importance of breastfeeding is emphasized by health care staff during counselling. Families benefit from the practice through welfare services provided by the state apart from the gender sensitive approaches to child care implemented. Interviews were conducted to illustrate the fathers' support approaches in Finland. According to the testimonies, in most western countries, breastfeeding was not an issue or "fashioned as being sexy" 25 years ago. The mothers interviewed talk about how breastfeeding evolved and how fathers support mothers who breastfeed.



Liisa is 53 years old and breastfed her two grown up children.

"Breastfeeding was not common and was not strongly supported by the health personnel 25 years ago. I breastfed my children because I felt that it was natural and I did that exclusively for six months before introducing liquids and soft foods. I had so much milk that I extracted and donated to the hospital because milk banks in Finland generated income for women who gave some of their breastmilk to the hospitals to assist working mothers or others who had problems breastfeeding their babies. Hospitals made it easier by having health personnel go around from home to home to collect the milk for their first food banks. During the

periods I breastfed our babies, my husband was totally supportive and helped me with house chores and carrying the baby sometimes so I could rest. He learnt how to change the diapers at night and assisted me too with this task. Indeed, it was a total agreement between my partner and me to have the children breastfed and to do it well".

Sirpa is 53 years old and nurtured her two grown up children now aged 33 and 25.

"Breastfeeding was very much a mother's business and her personal decision because it was not emphasized in our days like today. To me, it was a burden because I did not get any support from my husband." It was a religious and legalistic burden on women because the state and the church did not provide any kind of support to women in those days. The state and religious organisations considered that it was the right of the child, that a mother should breastfeed her baby. Many did not see how men could be associated to the task of breastfeeding.

Annette is 23 years old and a first-time mother. Her baby is two years old already

"I did exclusive breastfeeding for four months before introducing water and supplementary foods. However, I continued mixed feeding until our son was 11 months old. My husband was extremely supportive. He did the house chores and this permitted me to have enough time to breastfeed. My partner took the baby and padded him after breastfeeding and this helped as father attachment to the baby. He gave me a lot of psychological support and I think most of my friends get that kind of support from their partners too".

Matti is a 24 year-old first-time father and husband of is Annette

"I supported Annette because I thought that our baby will benefit a lot from breastfeeding. I would give her pillows during the process for her to seat comfortably. I helped to make the place comfortable for her so that both mother and baby were in comfortable positions during the process. I used to get food for her because I knew that she needed to eat well to be able to breastfeed well too. I generally took care of the baby and made life easy for my partner. I tried to give her all the psychological support because it was tough for both of us. I did the house chores so she could have much time to rest". This kept us closer in the interest of our baby boy.

Jessica is 25 year- old mother of two children aged 7 and 6 years already.

WABA MI E-newsletter Vol. 1 N°2 Page 4

Jessica got her babies when Breastfeeding was already quite common: "My husband was very helpful and did the house tasks, changing the babies' diapers at night. Unfortunately, I had some allergies, so I could not practice exclusive breastfeeding completely. For this reason, my husband and I decided to introduce other foods quite early enough for the baby not to loss weight and my partner helped in preparing food for the babies too".

Tiina is 31 years old and has 3 children who are aged 7, 6 and 3.

The first two babies of Tiina were born with a difference of just one year. In Tiina's words, "I got very good support from my husband although he didn't stay up at night to help change the diapers. I used to have much milk and donated some to the hospital. My partner helped me in doing the extraction and because of his total support, we were able to breastfeed all three children exclusively for 1 year each before continuing with mixed feeding. Our first baby was breastfed for 14 months, the second for 20 months and the third for 29 months and this was thanks to the support I got from their father".

Yvonne Bekeny is a development and cooperation researcher of University of Jyvaskyla, Finland

Paternity Leave In Europe

Employed new fathers in the UK are now entitled to at least two weeks' paternity leave on the birth of their child. Some employers offer longer or more flexible deals than the legal minimum, but they cannot go below it. Paternity leave was introduced to the UK in 2003, and was long overdue! There's a minimum of 2 weeks off work, paid at a minimum of just over a £110 a week. This may not be much, but it's something.

In the Scandinavia, parental leave is quite a long period covered by the state for both father and mother. The duration of leave for the mother ranges from six months to ten months and even up to eighteen months in Sweden (Eydal, B. 2008). Paternity leave is a shorter period and it is three weeks in Finland and Iceland and two weeks in other Scandinavian countries. At the moment, the paternity leave in Denmark has been abolished. Nevertheless the father can share the parental leave with the mother according to their mutual agreement. The time period of such an agreement varies among the countries (Lammi-Taskula in Ellingsater & Leira 2006). In principle only one parent at a time stays home on

parental leave taking care of the child while the other goes to work or study. However it is normal for the other parent to take regular annual leave and stay at home with the other during this period. Paternity benefits in these countries also depend on the length of time the father has been in full employment. Lammi-Taskula in Ellingsater & Leira, also mention that 'in Finland, a father living together with the mother of the child is entitled to parental leave and benefit regardless of the mother's position in the labour market...in Sweden even if the father does not leave with the mother he is also entitled to parental benefit if their child lives in Sweden and the parents have shared custody'. These forms of leave are part of the Social Insurance scheme; therefore earnings related compensation is paid during the leave period.

Japan Lends A Hand To Swaziland

By Mantoe Phakathi, Swaziland

The Japanese government has awarded Swaziland \$2.57 million to improve maternal and child healthcare programmes in the next three years. Swazi men are reported less involved in caring for newborns and mothers due to cultural dynamics and practices. Rejoice Nkambule, Swaziland health department's deputy director of public health services observed that men are critical partners in ensuring mothers' well being.

"Getting men involved in maternal and child health care is a serious challenge because Swazi custom prohibits a man from physical contact with his newborn baby and his partner for a minimum of six months after delivery", She added.

The grant from the Japan Social Development Fund (JDSF) is said to bring behaviour change, especially as. the programme is being rolled out in the poverty-stricken Lubombo region in the eastern part of Swaziland.

A key part of the grant is targeting community mobilisation initiatives aimed at getting men involved in caring for the health of mothers and children. According to the director of the Swaziland Infant Nutrition Action Network (SINAN), Zanele Dlamini, mothers need their partners' assistance after giving birth because they are usually too weak to handle the baby on their own, and many mothers experience mood swings, hormonal imbalances, insecurity and emotional depression after giving birth. SINAN is a non-governmental organisation that promotes maternal and infant health through breastfeeding. Within the Japanese grant programme, a number of mobile clinics will provide family planning, HIV counselling and testing, sexually transmitted infections care and treatment in rural areas.

Journalist Backs Fatherhood

Donald MacIntyre hosted a London event mid-way this year, as part of a campaign to promote the importance of fathers. The Dancing on Ice contestant brought the "Think Fathers Shed Tour" to the South Bank of London, where he spoke to families about what fatherhood means to them as part of a tour of nine cities. The father-of-two was backing a Government initiative to make employers and services more "dad friendly".



MacIntyre said: Since becoming a father, he realised how important dads are to their children. Nothing can prepare a person for what it's like - fatherhood isn't always an innate skill and many dads don't have the support needed to play their role in the family. The Shed Tour is seen as a great way for everyone to get an insight onto what it's like being a dad today - hear about the highs and lows of fatherhood and get to the heart of what it's really like for men." A shed was used in the campaign as a symbol of a "stereotype" of fatherhood. Britain's Children and Families Minister Beverley Hughes said: "All children need active and engaged fathers and we must do all we can to make sure dads get the support they need to get involved". He added that, "The 'Think Fathers' campaign is about how to better support dads and encourage them to play an active role in their families. We need to make sure that we "Think Fathers" celebrate dads and urge services and employers to be more father-friendly."

BECOMING A BREASTFEEDING FATHER By Velvet HERE, Arugaan, Philippines

Adam is a part-time nanny for his two daughters and breastfeeding father, though an IT by profession. His IT cadetship program started when they got married. Unlike most fathers, his sense of fatherhood began not when his wife gave birth but when both discovered that there was a new life inside the family. There was an overwhelming feeling of fast paced change from being

single to being married to being a father. Pregnancy was a new software language that Adam needed to learn.

Adam and his partner didn't have too many friends to support them and no relatives around either. The upside to this was that both were on a survival mode. They needed to be equipped to be able to overcome this pregnancy stage. For this reason, they read books, browsed the internet and went to child birthing classes, but never thought of breastfeeding. Adam's partner was terrified of needles and he was silently terrified of the expenses incurred during childbirth. At the classes, they learned breathing techniques, pregnancy exercises, fetal growth, and stages of delivery and newborn care which included breastfeedina.

According to Adam, he turned into a nagging husband because of the lazy and stubborn lady he was sleeping with. Much to his surprise he became his wife's birthing coach. Birthing plan for their second daughter was more challenging since his wife decided to have the delivery in water.

Though all the efforts, Adam's partner still did not see him as an excellent birthing coach, just because she was not massaged on her back and there was no camera to take souvenir snap shots.

Just as Adam was getting adept at his wife's pregnancy, he had to learn another new language: breastfeeding. software Не needed to learn this new rope. In his words, "my wife's pregnancy was easy, childbirth was like a pop in the balloon, and breastfeeding was another story." The most challenging part of breastfeeding was the first three weeks of their elder daughter's birth. Adam's wife had nipple pains. She developed low selfesteem: she had low-milk supply, her stomach was bulging, painful episiotomy and there were black patches of skin on her body. So he would buy food to cheer her up or surprise her with something just to put a smile on her face.

For three weeks, they were mixed feeding. It was a difficult time for Adam, especially as he had to work during the day and wake up at

WABA MI E-newsletter Vol. 1 N°2 Page 6

dawn to prepare a bottle. There was all these hassle of cleaning the bottles and the shock of seeing the prices of formula milk. It was terrible time for him, he affirms, because there was a lot of work and little rest. Fortunately, they met a breastfeeding advocate who helped his wife just by telling her that "you have milk." Those were the magic words that sparked his wife's enthusiasm. Three days after, she was exclusively breastfeeding. This was the Lord's first Mother's Day gift to her and Adam thinks her most memorable one since this, was the day she never gave formula to her child. She became upbeat again! Adam was so happy because that was also the day he didn't have to buy expensive milk or wake-up to prepare a bottle.

ONE BABY, TWO PARENTS

By Patrick Houser, United Kingdom

While no one was looking the very foundations of our society, our culture and our families have undergone a metamorphosis. A baby in the womb, at birth and in the first year of life is totally dependent on others for having their needs met; nothing new here. By nature's design, the origin of a baby's support comes primarily from the mother during the early stages. Until several decades ago the activities surrounding pregnancy, birth and early infancy were left almost entirely to a mother, close female relatives and her healthcare providers. Men have rarely had a background to prepare themselves for their role in the family, as it exists today. His family of origin, and the culture that he grew up in, did not likely involve the type of parenting he is being called on to provide for his children; he has no role models to draw on.

The missing link in the family support system should be blindingly obvious at this point. If a father is to helpfully support his partner during this impactful time and be a beneficial contributor in his children's lives, he needs his own preparation, education and support. This could actually be quite efficient if you think about it.

Expectant dads need their own antenatal class. This class should cover pregnancy, birth and early infancy in a way that he is able to grasp. Get more about Father2Father at www.fatherstobe.org

Global Forum 3 Canada 2010 Cancelled

WABA has announced the cancellation of the 3rd Global Forum in Quebec City, Canada due to

funding constraints. Information on a possible alternative event will be made known by WABA Secretariat. ASPQ Canada will continue to hold its National Congress on perinatality, with the theme "Birthing the World", in Quebec City, June 2010. Details on the National Congress will be available from ASPQ soon

Dads are Different Than Moms

By Mary Lou B. Johnson

It's a good thing that dads are different than moms—kids need them to be! In many families, moms might send a message that they know the "right" ways to do things with the children and may have taken over most of their care. But children need fathers' styles too. So fathers can be sure to carve out plenty of time with their offspring. All children need to learn from their dads—about the world, how language works, how dad interacts with others, and how he accomplishes things.

Dads can build on their interests, skills, and personalities to help their children grow and learn. That's Good For Kids. To boost language development, make lots of straight forward comments to your child, and resist the urge to ask a lot of questions. You are your son or daughter's best male mentor. Make the most of your child's early years—share your talents.

Mary Lou B. Johnson is a Speech-Language Pathologist and creator of the site -<u>www.HelpYourChildSpeak.com</u>

World Breastfeeding Trend Initiative (WBTi)

Two-day orientation workshops on the assessment of the Global Strategy on Infant and Young Child Feeding using the World Breastfeeding Trend Initiative (WBT*i*) are currently rolled out in all regions of the globe. WBTi is based on the WHO's 2003 "Infant and Young Child Feeding: A tool for assessing national practices, policies and programmes" and WABA's Global Participatory Action Research (GLOPAR) which was developed in 1993 to track 4 targets set by 1990 Innocenti Declaration.

WBTi is an extension of GLOPAR, since it tracks additional targets set by the 2002 Global Strategy. WBTi builds on the two initiatives in order to induce action for creating a data bank of infant feeding practices as well as policies and programmes.

WABA MI E-newsletter Vol. 1 N°2 Page 7

The WBTi is being implemented as an integral part of the project "Global Breastfeeding Initiative for Child Survival" (GBiCS) in partnership with NORAD in order to contribute to the achievement of the Millennium Development Goals 4 and 5.

The present phase of the WBTi was launched in July 2008. So far, it has been rolled out in 51 countries across the globe. IBFAN Asia, the global coordinating centre for the initiative, facilitated regional trainings to country representatives in South Asia, South East Asia, East Asia, Africa and Latin and Central America. 31 countries have already submitted reports after undertaking country assessments. 16 reports have been uploaded on the WBTi website

(<u>http://www.worldbreastfeedingtrends.org/document</u> <u>s.php</u>).

Action on Diarrheal Disease

Diarrhoeal disease still takes the lives of more infants and young children around the world than nearly any other illness. To change that situation, "Health Education to Villages", an initiative coordinated by a WABA Father, Nand Wadhwani, has made a call for action. Nand Wadhwani announced the initiative early this year saying, with more resources and effective implementation of available health, water and sanitation solutions, we can save millions of children's right immediately. He added that with diarrhoea remaining a leading cause of death among children around the world, this exemplifies the urgency of reinvigorating efforts to improve child health and human development.

The call for action by "Health Education To Villages Initiative" is to demonstrate a unified show of support for aggressively meeting the challenge diarrhoeal disease presents today.

According to the coordinator of the initiative, support from the health, water and sanitation, and environmental sectors will take a coordinated and cross-sectoral effort across these disciplines. He has invited donors, international health policymakers, national leaders, and the private sector to commit resources and political will to reduce deaths and illness from diarrhoeal disease.

Over the last three decades, the global community has shown that it has the tools to dramatically reduce childhood death and illness from preventable

and treatable diseases, such as diarrhea. During that time, for example, millions of children's lives have been saved by protecting them against diarrheal disease and its consequences through proven and affordable solutions.

Yet diarrheal disease still unnecessarily takes the lives of over 4,000 children daily, despite the fact that we hold in our hands more cost-effective and proven solutions for preventing and treating diarrhea than any other childhood illness. By increased and effective allocation of resources in a portfolio of improved treatment, nutrition, and water and sanitation interventions, we can help ensure that this common disease is no longer a leading killer of children in low-income countries.

We ask our leaders to consider the burden that diarrheal disease imposes on billions around the world and within their own countries, and to recognize that our investment in deploying solutions must be commensurate with the toll that diarrhea takes. To that end, he calls upon donors, international health policymakers, national leaders, and the private sector to:

Invest the resources to ensure that funding for diarrheal disease, including both prevention and treatment interventions, is commensurate with the scope of the burden the illness places on families and communities around the world.

Redouble commitment to reducing the child mortality by 2015 as stated in the WHO/UNICEF joint statement on the Millennium Development Goals, focusing on diarrheal disease as a strategy for clear and rapid progress towards that goal.

Invest in the research and development of new effective, appropriate and affordable prevention and treatment options for diarrheal disease. Prioritize the implementation of an appropriate combination of diarrhea interventions, including improved water, hygiene and sanitation; optimal infant and young child feeding; increased access to and uptake of vitamin A, ORS and zinc and rotavirus vaccination. Include diarrhea prevention and control in international, regional and country plans on sanitation, water and hygiene. Conversely, include sanitation, water and hygiene interventions in health efforts, and commit to strengthening health systems capacity to address the environmental determinants of diarrheal disease.

US Annual Summit on Breastfeeding

By Irene Rayman, Washington,USA

Experts in maternal, infant health and health policy from the Obama Administration in the United States of America have presented timely information and recommendations for new policy initiatives to support America's national breastfeeding agenda. This was made known at the 1st Annual Summit on Breastfeeding, from June 11-12, in Washington, D.C. The Summit, "First Food: The Essential Role of Breastfeeding," was presented by the Academy of Breastfeeding Medicine, and its official peer-reviewed journal, Breastfeeding Medicine. The Summit marked the 25th anniversary of the Surgeon General's Workshop on Breastfeeding and Human Lactation, hosted in June 1984 for the first time. During the summit, participants focused on the development of health policy solutions for improving breastfeeding rates, removing barriers to breastfeeding, and eliminating health disparities by better supporting the health needs of underserved mothers and their vulnerable children. For more visit-(www.bfmed.org)

WABA MWG Core Group Members

Coordinator: James Achanyi-Fontem, Cameroon Per Gunnar Engblom, Sweden Ray Maseko, Swaziland Qamar Naseem, Pakistan Arturo Arteaga Villaroel, Mexico Peter Breife, Sweden Jose Quiros, Costa Rica Santiago Vallone, Argentina

The Men's Initiative Newsletter is designed to share news, plans and men's/young males actions of involvement and roles the in breastfeeding movement, mother support, gender justice and other areas of interest. The views expressed in the articles, supplements and inserts, however, do not necessarily reflect the views or policies of WABA or its Core Partners.

......

The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations

WABA MI E-newsletter Vol. 1 N°2 Page 8

concerned with the protection, promotion and support of breastfeeding worldwide based on the Innocenti Declarations, the Ten Links for Nurturing the Future and the WHO/UNICEF Global Strategy for Infant and Young Child Feeding. Its core partners are International Baby Food Action Network (IBFAN), La Leche League International (LLLI), International Lactation Consultant Association (ILCA), Wellstart International and Academy of Breastfeeding Medicine (ABM). WABA is in consultative status with UNICEF and an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC). WABA, PO Box 1200, 10850 Penang, Malaysia

Tel: 604-658 4816 Fax: 604-657 2655

Email:waba@waba.org.my, camlink2001@yahoo.com http://www.waba.org.my/whatwedo/mensinitiative/index .htm