

GIMS + 5 ENDORSEMENT FORM

I/We have read the vision, purpose, focus and goals of the GIMS+5 and would therefore like to endorse this initiative and wish to participate in it.

Name: _____

Organisation: _____

Email Address: _____

Signature: _____

Date: _____

I/We would like to receive the WABA MSTF e-newsletter

Name of contact person: _____

Address: _____

Tel: _____

Fax: _____

Email: _____

Please complete and mail, email or fax a copy of this form to:
World Alliance for Breastfeeding Action
 P.O. Box 1200, 10850, Penang.
 Fax: 604-657 2655
 Email: waba@streamyx.com
 You can also go online and endorse at:
www.waba.org.my/whatwedo/gims/gimsendorsement.htm

GIMS + 5 ENDORSEMENT

I/We affirm and support that:

The World Alliance for Breastfeeding Action (WABA) maintains an initiative specifically targeted to ensuring that women who breastfeed receive the support they need in order to establish exclusive breastfeeding for six months and continued breastfeeding to two years and beyond. This initiative, the "Global Initiative for Mother Support" or GIMS for Breastfeeding will be carried out through the following points:

- All concerned parties will uphold, protect and support the maternity rights of mothers, including the health rights of mothers and their children
- Priority for attention and funding on international, national and local levels is given to implement mother support for breastfeeding activities and programmes
- Information and practical help is provided to the pregnant, childbearing and breastfeeding woman by institutions, organisations, governments and individuals
- Strategies for ensuring sustainability of mother support efforts are identified and implemented, including provision of opportunities for networking and sharing of experiences, models, and tools and international monitoring of outcomes.



The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations 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.
 WABA P.O. Box 1200, 10850, Penang. Fax: 604-657 2655
 Email: waba@streamyx.com Website: www.waba.org.my

WABA's core partners are International Baby Food Action Network (IBFAN), La Leche League International (LLL), International Lactation Consultant Association (ILCA), Wellstart International and Academy of Breastfeeding Medicine (ABM). WABA is in consultative status with the United Nations Children's Fund (UNICEF) and an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC).

Global Initiative for Mother Support GIMS + 5 (2007) WABA



Berlina Nugraho © WABA 2008

WABA GLOBAL INITIATIVE FOR MOTHER SUPPORT (GIMS) FOR BREASTFEEDING GIMS + 5 STATEMENT, 2007

Given that:

- Human milk provides all the nutrients an infant needs in exactly the right proportions; human milk also provides immunological benefits
- Breastfeeding contributes to the health and well being of mothers and children, families and communities
- Mothers are life givers, bearers and nurturers of humanity
- Motherhood is socially valuable
- Mothers have special rights and need particular support
- Mothers are the primary child care givers of their infants
- Mothers need support to optimally feed themselves and breastfeed their infants
- Traditional forms of support for mothers have been undermined and are threatened by forces of globalisation, modernisation and industrialisation
- Breastfeeding support groups have been shown to be effective in changing or maintaining optimal infant feeding behaviors
- Women need support in pregnancy, during childbirth and in the postpartum period
- Support for the breastfeeding mother is neither appropriately understood nor valued



We declare:

- A woman should be supported and respected for her decision on motherhood
- Mothers are considered active participants in the support dynamic, being both providers and recipients of information and support
- Mother support is viewed and valued as an important contribution to the establishment of exclusive and continued breastfeeding to two years and beyond
- Mother support is defined broadly as any support provided to mothers for the purpose of improving breastfeeding practices and the health and well being of both mother and infant/young child
- Mothers benefit from support throughout their entire reproductive cycle (before and during pregnancy, birthing and during lactation), with special attention on humanising pregnancy and childbirth care
- Breastfeeding support groups are an important way to provide support for the breastfeeding mother.
- Mother support is particularly important for mothers at greatest risk of not breastfeeding optimally such as working women, women in emergencies and other vulnerable situations, women with HIV and AIDS, women with premature and/or sick babies, and women living in regions where the majority of babies are bottle-fed.

We propose that:

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Hainis Pop Chávez © WABA 2007

The WABA Global Initiative for Mother Support (GIMS) for Breastfeeding is coordinated by the Mother Support Task Force (MSTF) of the World Alliance for Breastfeeding Action (WABA). Mother support is essential for successful breastfeeding which, with rare exceptions, ensures the optimal health and well-being of infants and young children and strongly benefits women's health. The initiative is based on an approach that respects women's and children's human rights; promotes measures to help mothers and their infants experience optimal breastfeeding and health and takes a holistic approach to women's sexual and reproductive rights.

The GIMS definition of mother support is "any support provided to mothers for the purpose of improving breastfeeding practices for both mother and infant and young child". Women need the support of evidence-based public health policies, health providers, employers, friends, family, the community, and particularly that of other women and mothers. The support needed varies from woman to woman but generally includes accurate and timely information to help her build confidence; sound recommendations based on up-to-date research; compassionate care before, during and after childbirth; empathy and active listening, hands-on assistance and practical guidance.

Supportive conditions are needed firstly, for women to decide on motherhood and then secondly, for safe pregnancy and delivery. All women should be able to give birth in the company of those they select to share this experience. After birth, all women, including employed women, should receive support for practicing exclusive breastfeeding for the first six months and continued breastfeeding with the introduction of complementary foods for up to 2 years and beyond. Their right to adequate paid maternity leave should be upheld and facilitated by public policies.

GIMS emphasises gender-sensitive policies and support services, women's right to appropriate sexual and prenatal education and care, and women-centered birthing practices – all of which should give an appropriate and adequate measure of control to women over their bodies, health and lives. GIMS takes an approach that calls for men's participation and community involvement. GIMS recognises the special role of experienced women in the community who can share their knowledge on health, food, herbal alternatives, and who are part of daily support networks.

GIMS is further defined by networks of individuals and organisations concerned with breastfeeding support and focused on strengthening community support systems, mother-to-mother support, support groups, public policies and health services.



Josephine © WABA 2007

History of GIMS

In 1990, policy makers from 31 governments, and representatives of 10 UN agencies at a WHO/UNICEF meeting adopted the Innocenti Declaration on the Protection, Promotion, and Support of Breastfeeding. During the decade of the 1990's, the Innocenti Declaration provided momentum for the global breastfeeding movement, particularly in launching the Baby-Friendly Hospital Initiative (BFHI) and strengthening implementation of the International Code of Marketing of Breastmilk Substitutes. The Innocenti Declaration also served as a driving force for setting international targets, increasing support for working women and establishing national breastfeeding committees. A further meeting in 2005, to celebrate the achievements of the Innocenti Declaration, strengthened these targets, while recognising the need to "empower women in their own right, and as mothers and providers of breastfeeding support and information to other women."

In reviewing the current state of breastfeeding, WABA identified areas that need reinforcing. The BFHI, focuses on the infant in the hospital and maternity facility and does not sufficiently address the needs of women and mothers. Pregnant women and those who have recently given birth are often in a precarious situation due to a lack of supportive health care. In some cases, practices are abusive and may even violate women's basic rights. The revised BFHI protocols (2006) take these concerns into consideration and include mother-friendly care and community support modules to ensure that antenatal, labor, delivery and postnatal care for mother supports women's health and well being, recognising that this also supports optimal breastfeeding.

Vision

Every woman irrespective of her circumstance of residence, age, ethnicity, religion, economic and social and professional/educational status will have professional, lay and social support for breastfeeding and will receive information, education, assistance, and encouragement which enable her to have a satisfying breastfeeding experience.

Purpose

To create the appropriate environment of awareness and support for a mother to initiate and sustain breastfeeding and to ensure optimal outcomes for the mother and her infant and young child, with the focus on practices before and during pregnancy, childbirth and post-partum that affect a woman's decision to breastfeed and breastfeeding outcomes.

Goals

To promote a global understanding of mother support that values, gives credibility to, and actively strengthens all forms of mother support including community-based breastfeeding mother support programmes and networks.

To broaden the support for mothers to include: support before and during pregnancy, at birth, and during the breastfeeding period.

To link and collaborate with other issue movements such as those working on natural, compassionate childbirth and health practices, family support, midwifery, women's health and rights, youth, HIV and AIDS support

groups, etc. in order to facilitate a holistic view of mother support which is respectful of the integrity of women's rights and the optimal health and survival of infants and young children.

To work with interested organisations to develop guidelines, tools and training for transforming birthing and health care practices that specifically affect breastfeeding and women's rights into compassionate and gender sensitive, birthing and health care practices.

To support Step 10 of the Baby Friendly Hospital Initiative (BFHI), by broadening the understanding of breastfeeding support and support groups, being open to innovative ways to support the mother after birth.

To initiate, act on and support changes in public policies, cultural attitudes, employment, health facilities, marketplace and social policies and practices so that women experience optimal conditions to decide on their maternity, pregnancy, birthing and breastfeeding practices.



Ali Budiman Lo © WABA 2008

Current HIV and Infant Feeding Policies

HIV and infant feeding policies were initially based on a public health rationale: HIV-infected mothers in industrialised countries were advised to formula-feed, whereas HIV infected mothers in developing countries were advised to continue breastfeeding. Then, from 1997 to 2006, recommendations for developing countries focused on private rights. Currently, due to research results demonstrating high malnutrition and mortality for formula-fed babies in developing countries, the 2006 revised HIV and infant feeding recommendations re-endorse a public health rationale in all settings, as follows:

- o The most appropriate infant feeding option should continue to depend on a mother's individual circumstances, including her health status and the local situation, but should take greater consideration of available health services.
- o Governments and other stakeholders should re-vitalise breastfeeding protection, promotion, and support in the general population and should also actively support HIV-infected mothers.
- o HIV-exposed infants should receive exclusive breastfeeding for the first 6 months of life and continued breastfeeding with additional complementary foods after 6 months unless replacement feeding is acceptable, feasible, affordable, sustainable and safe.