

Six months exclusive breastfeeding

of course we can do it!

Women have repeatedly shown that they can breastfeed exclusively, when they understand what it means, and when they get support. Mother support groups see this all the time among women who attend the groups.

Here are some of the different ways in which support from the community, from peer counsellors, from primary care workers, and from health workers in hospitals have empowered and helped more mothers to breastfeed exclusively.



In Mexico mothers from the community were trained to counsel about breastfeeding during home visits. 12% of mothers who were not visited breastfed exclusively; and the rate increased to 50% for mothers who were visited three times, and 67% for mothers who were visited six times.

Ardythe Morrow et al. The Lancet 1999. Vol 353 pages 1226-31

In Norway and Sweden breastfeeding rates are much higher than in other parts of Europe. This is partly because health authorities consulted mothers' organisations. Their advice and criticisms are listened, respected and followed more than in most countries.

The breastfeeding investigation in year 2000. Eide I, et al. Report submitted to the Board of Health, Norway, May 2003

In Belarus 43% of the mothers who delivered in the 16 baby-friendly hospitals breastfed exclusively at three months, but only 6 % for mothers who delivered in the 15 hospitals which are not baby-friendly.

Kramer MS, et al. Journal of the American Medical Association 2001; vol 285:pages 413-20.

In the Philippines baby-friendly crèches were formed to cater to working women. Mothers can drop in anytime to breastfeed, leave their expressed breastmilk, or avail themselves of the services of a wet nurse. Solid foods to complement breastmilk for babies above six months were made of natural and indigenous ingredients.

See <<http://www.waba.org.my/womenwork/seedgrants/arugaan.htm>>

In Bolivia, Guinea, India and Nicaragua NGOs such as Save the Children and CARE mobilised the community by training health and community workers, involving grandmothers and fathers, men's groups and mother support groups. Exclusive breastfeeding rates increased from 11% to 44% in Guinea; 41% to 71% in India and 10% to 50% in Nicaragua. In Bolivia, diarrhoea rates were halved and exclusive breastfeeding of infants under six months increased to over 75% when support groups were integrated into community activities in low-income neighborhoods in La Paz.

Save the Children final evaluation, Mandiana Prefecture, Guinea. CARE India, Nicaragua and Bolivia, Final Evaluation of Child Survival Projects, 2002 and 2003.

In the Gambia Village Support Groups, for example parent-to-parent support groups were trained to give accurate information and help with correct breastfeeding technique. More mothers started to breastfeed within an hour of delivery, and 99.5% breastfed exclusively for four months instead of only 1.3% at baseline. Over 200 communities in the Gambia are now Baby-Friendly Communities.

Semega Janneh II et al, Health Policy and Planning, 2001(2) pages 199-205



In Bangladesh mothers from the community were trained as peer counsellors for breastfeeding. They visited women during pregnancy and for five months after delivery, making a total of 15 visits. Counsellor mothers started breastfeeding earlier, with 70% of them breastfed exclusively for five months, compared with only 6% of the other mothers.

Haider R et al. Lancet 2000; 356: 1643-1647

In India health and nutrition workers learned to counsel mothers on breastfeeding while they were doing their other primary care work. At six months, 42% of mothers who were counselled breastfed exclusively, but only 4% of the mothers who were not counselled did so.

Nita Bhandari et al. The Lancet 2003; vol 361: pages 1418-23

In Ghana several different methods of communication, workshops, and training were used to reach the wider community – including grandmothers, fathers, and the media, and mother support groups were formed. Within two years, the number of mothers breastfeeding exclusively at five months had increased from 44% to 78%.

LINKAGES project Country Activities Report <www.linkagesproject.org/country/ghana.php>

In Ghana Village Banks made small loans to women to help them to become economically active. The women were also given education on health and child feeding. The average duration of exclusive breastfeeding increased from 1.7 months to 4.2 months, and the nutrition of the children at one year improved.

MkNelly B and Dunford C. Freedom from Hunger Research Paper 4, 1998

