



FEDERAL
MINISTRY
OF HEALTH

BREASTMILK:

The only source of water and nutrients that infants need for the first six months of life



PHOTO CREDIT: ALIVE AND THRIVE

Breastmilk improves the health of women and children and contributes to child brain development, increased intelligence, and lifelong productivity.¹ Promoting exclusive breastfeeding is one of the smartest investments a country can make. Exclusive breastfeeding for the first six months of life means that a baby receives only breastmilk—no water, infant formula, nor other liquids. **Breastmilk contains all the water and nutrients a baby needs during the first six months of life—even in hot, dry climates.**

Despite the benefits of breastmilk, 25 percent or less of infants in Nigeria are breastfed exclusively for the first six months of life.^{2,3} In Nigeria, the practice of giving infants liquids other than breastmilk is common: 46 percent are given water in addition to breastmilk in the first six months of life.² Families mistakenly believe that additional water for infants is necessary for life, quenches thirst, relieves pain, prevents colds, and/or soothes the infant.

Myths about breastfeeding practices often pass from one generation to the next through the advice of family and community members, especially grandmothers and mothers-in-law.

GIVING WATER TO INFANTS BEFORE SIX MONTHS PUTS THEM AT RISK OF MALNUTRITION AND OTHER ILLNESSES, SUCH AS DIARRHEA

Giving infants water before the age of six months reduces breastmilk intake and supply, hinders absorption of nutrients from breastmilk, and increases the risk of illness from contaminated water and feeding bottles, especially in emergency situations.⁴ An infant's stomach is very small; any amount of water or other liquids can fill the stomach and reduce appetite for nutrient-rich breastmilk. Breastmilk is 88 percent water: clean, safe, and designed specifically to meet

COMPOSITION OF BREASTMILK

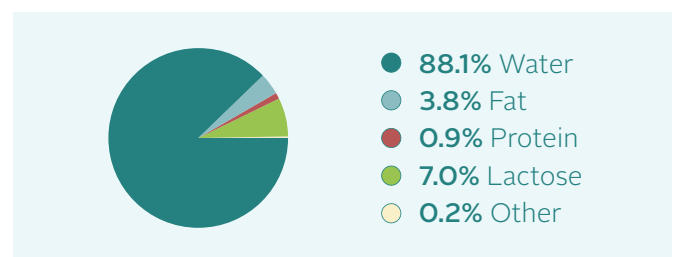


FIG. 1. Lawrence, R., "Breastfeeding: A guide for the medical profession" 4th ed., 1994.

all of an infant's water needs.^{1,5} Replacing breastmilk with another fluid can negatively impact an infant's nutritional status, survival, growth, and development.⁶

WE MUST ACT TO PROTECT, PROMOTE AND SUPPORT EXCLUSIVE BREASTFEEDING FOR INFANTS UNDER SIX MONTHS IN NIGERIA

Exclusive breastfeeding during the first six months of life is one of the most cost-effective interventions for preventing child deaths, with enormous impact on the healthy development of children throughout Nigeria.⁷ In addition to the role that families play, policymakers, community and religious leaders, programme managers, and health workers can be important advocates to ensure that infants are not offered water before six months:



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POLICYMAKERS AT ALL LEVELS SHOULD:

- **Fund the implementation, monitoring, and enforcement** of existing nationwide policies that support exclusive breastfeeding, such as the National Regulations for Marketing of Breast-Milk Substitutes and Designated Products, the Baby-Friendly Initiative (BFI), and the National Strategic Plan of Action for Nutrition (NSPAN)
- **Provide working mothers with breastfeeding rooms**, on-site crèches and a flexible working environment to uphold baby-friendly workplaces
- **Extend maternity leave** to six months with full pay for both private and public-sector employees

PROGRAMME MANAGERS SHOULD:

- **Train healthcare providers** to deepen their knowledge on exclusive breastfeeding, and equip them with the skills to effectively counsel mothers and caregivers on the importance of not giving water to infants younger than six months

COMMUNITY AND RELIGIOUS LEADERS SHOULD:

- **Facilitate dialogue sessions** with various community groups (fathers, mothers-in-law, traditional birth attendants, etc.) on the benefits of exclusive breastfeeding, and the importance of not adding water or other liquids and foods such as infant formula and herbs
- **Encourage fathers to provide** food, money, materials, and encouragement to pregnant and breastfeeding mothers
- **Discuss and discourage cultural and traditional practices** that can negatively impact breastfeeding at various council meetings and religious leaders' gatherings
- **Promote exclusive breastfeeding** during traditional and religious ceremonies (village meetings, New Yam)
- **Preach about the advantages** of exclusive breastfeeding, using holy scriptures during religious gatherings

HEALTH WORKERS SHOULD:

- **Actively promote early initiation of breastfeeding and exclusive breastfeeding** during routine service delivery with pregnant and breastfeeding mothers (one-on-one counseling and group counseling during antenatal and post-natal visits)
- Encourage mothers to breastfeed in emergency and conflict situations, and when other health complications exist

1. Victora, C.J., et al., *The Lancet*, Vol 387, "Breastfeeding in the 21st Century: epidemiology, mechanisms, and lifelong impact." January 30, 2016.
2. Nigeria National Nutrition and Health Survey 2014.
3. National Bureau of Statistics (NBS) and United Nations Children's Fund (UNICEF). 2017 Multiple Indicator Cluster Survey 2016-17, Survey Findings Report.
4. Branca, F., & Schultink, W., World Health Organization, "Breastfeeding in emergencies: a question of survival," May 20, 2016.
5. The Rehydration Project, "Exclusive Breastfeeding: The Only Water Source Young Infants Need Frequently Asked Questions (FAQ)," April 2014.
6. Bégin, F., et al., UNICEF, "From the first hour of life: making the case for improved infant and young child feeding everywhere," October 2016.
7. *The Lancet*, "Maternal and Child Undernutrition," Special Series, Vol. 371, January 2008, "Newborn, and child health interventions," 2012.



PROTECT CHILDREN'S RIGHT TO BREASTMILK:
The Healthiest Possible Start In Life

