

European Commission, Directorate-General Health and Consumer Protection Unit C4 – Health Determinants E-mail: <u>SANCO-C4-NUTRITIONGREENPAPER@cec.eu.int</u> Postal address: L-2920 Luxembourg Fax: (+ 352) 4301.34975 31st March, 2006

RE: GREEN PAPER Comments from the Breastfeeding Network on "Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases"

Dear Sir,

The Breastfeeding Network welcomes the opportunity to provide comments on the above green paper.

The Breastfeeding Network is a mother-to-mother support organisation with over 800 members. We provide independent support and information to breastfeeding women and others.

We are very pleased to see breastfeeding is mentioned on page 18 (Annex 2, para 12) however we do not feel that this current version recognises the crucial role breastfeeding plays with regards the health of both the baby and the mother in the short and long term.

We suggest removal of the word 'probable' on page 18, point 12. This is now widely recognised.

Babies who are artificially fed are at greater risk of developing

- gastro-intestinal infection
- respiratory infections
- necrotising enterocolitis
- urinary tract infections
- ear infections
- allergic disease (eczema, asthma and wheezing)

The Breastfeeding Network, PO Box 11126, Paisley PA2 8YB Tel/Fax: 0870 401 4007 e-mail: admin@breastfeedingnetwork.org.uk www.breastfeedingnetwork.org.uk

The Breastfeeding Network

• insulin-dependent diabetes mellitus

Women who breastfed are at lower risk of

- breast and ovarian cancer
- hip fractures
- diabetes.

*see http://www.babyfriendly.org.uk/health.asp for more details and references

This lack of recognition of the importance of breastfeeding in the document not only for the prevention of obesity¹ but also in the prevention of specific diseases (diabetes, breast cancer), contradicts other important European documents such as "Protecting, promoting and supporting Breastfeeding in Europe: a blueprint for action" and "Feeding and Nutrition of Infants and Young Children - guidelines for the WHO European Region" (no. 87 of the European series of WHO Regional Publications) and the "European Strategy for Child and Adolescent Health and Development" (document EUR/05/5048378 of the WHO Regional Office for Europe). This document also needs to be in line with the Global Strategy on Infant and Young Child Feeding.

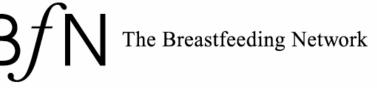
We request an official endorsement in Europe that protection, promotion and support of exclusive and continued breastfeeding is the best nutritional strategy for ensuring best possible standard of health and development of infants and young children.

Page 8 point V.3. A focus on children and young people

We agree with V.3.1. which states "Important lifestyle choices pre-determining health risks at adult age are made during childhood....." but feel this is missing a part which mentions the importance of exclusive breastfeeding for the first 6 months and continued breastfeeding along side safe complementary foods, for up to 2 years or beyond. We would like to see a paragraph which includes the significant impact parents' choices can have, on the health of the baby, when making decisions on infant feeding. Parents should have access to independent information based on good quality, independent, research on infant feeding so that their choices can made free from commercial pressures.

¹ J Pediatr. 2004 Nov;145(5):600-5. Feeding effects on growth during infancy.

Kramer MS, Guo T, Platt RW, Vanilovich I, Ševkovskaya Z, Dzikovich I, Michaelsen KF, Dewey K; Promotion of Breastfeeding Intervention Trials Study Group. (As an observational cohort study nested within a large (n=17,046), cluster-randomized trial this evidence is stronger than the other, more general, observational studies.)



In part V.4 Food availability, physical activity and health education at the work place

As this document focuses on causes of avoidable illness and premature death, we feel it is important in this section to include reference to maternity protection and entitlements for breastfeeding women in the work place. This should touch on Health and Safety legislation and include allowing time for breastfeeding women to express breastmilk. See Annex 1

V.7 Socio-economic inequalities

Measures which help promote healthy diets in infancy would be implementation of UNICEF Baby Friendly Initiative (1) and Peer support schemes which offer mother to mother support such as offered by LLLI and other voluntary organisations.

To conclude we would like to see the following in line with Baby Milk Action recommendations

1 An official endorsement in Europe that protection, promotion and support of exclusive and continued breastfeeding is the best nutritional strategy for ensuring best possible standard of health and development of infants and young children.

2 the need to ensure that all the policies and practices of all EU-based organisations, European Commission, EU Governments and the commitments made in the EU Platform for Action, are in line with the **Global Strategy on Infant and Young Child Feeding, (which includes the** *International Code of Marketing of Breast-milk Substitutes* and subsequent relevant World Health Assembly Resolutions, **the** *Blueprint for Action on the Promotion, Protection and support of breastfeeding,*, the *Global Strategy on Diet, Physical Activity and Health* and the *Convention of the Rights of the Child*

3 the need to ensure that the sections of the above documents which all contain safeguards regarding the need to avoid potential conflicts of interest are fully recognised and implemented so that the food industry is not involved in the production of educational materials intended for use in schools and health care systems.

References

1. An introduction to the Baby Friendly Initiative <u>http://www.babyfriendly.org.uk/pdfs/infosheets/introduction_infosheets/et.pdf</u>

> The Breastfeeding Network, PO Box 11126, Paisley PA2 8YB Tel/Fax: 0870 401 4007 e-mail: admin@breastfeedingnetwork.org.uk www.breastfeedingnetwork.org.uk

3 The Breastfeeding Network

Annex 1 http://www.hse.gov.uk/mothers/law.htm#1

Workplace (Health, Safety and Welfare) Regulations 1992

The Workplace Regulations require employers to provide suitable rest facilities for workers who are pregnant or breastfeeding. The facilities should be suitably located (e.g. near to toilets) and where necessary should provide appropriate facilities for the new or expectant mother to lie down.

http://www.hse.gov.uk/pubns/indg373hp.pdf

New and expectant mothers at work - a guide for health professionals 2003

Rest facilities for pregnant and breastfeeding women

Many pregnant women feel tired and need to rest. Breastfeeding mothers need a clean, private place to express and store their milk. Employers are legally required to provide suitable rest facilities for workers who are pregnant or breastfeeding. Also, although not a legal requirement, employers are encouraged to provide a healthy and safe environment for nursing mothers to express and store milk. This could be provided in the suitable rest facilities. However, it is not suitable for toilets to be used for this purpose.

Yours sincerely

Sarah Saunby (Breastfeeding Supporter & Administrator) and Phyll Buchanan (Breastfeeding Supporter and Research and development coordinator) on behalf of The Breastfeeding Network.

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