

Botswana, Ecuador, The Gambia, Ghana,  
Mozambique, Nepal, Pakistan, Panama, Senegal



**SEVENTY-FIRST WORLD HEALTH ASSEMBLY**  
**Agenda item 12.6**

**A71/CONF./x**  
**xx May 2018**

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## **Infant and young child feeding**

### **Draft resolution proposed by Botswana, Ecuador, The Gambia, Ghana, Mozambique, Nepal, Pakistan, Panama, Senegal**

The Seventy-first World Health Assembly,

(PP1) Having considered the reports on maternal, infant and young child nutrition;<sup>1</sup>

(PP2) Recalling resolutions WHA33.32 (1980), WHA34.22 (1981), WHA35.26 (1982), WHA37.30 (1984), WHA39.28 (1986), WHA41.11 (1988), WHA43.3 (1990), WHA45.34 (1992), WHA46.7 (1993), WHA47.5 (1994), WHA49.15 (1996), WHA54.2 (2001), WHA55.25 (2002), WHA58.32 (2005), WHA59.21 (2006), WHA61.20 (2008), WHA63.23 (2010), WHA65.6 (2012) and WHA69.9 (2016) on infant and young child nutrition, appropriate feeding practices and related questions, as well as resolutions WHA68.19 (2015), WHA69.8 (2016) and United Nations General Assembly resolution 70/1 (2015);

(PP2bis) Reaffirming the commitment made in the 2030 Agenda for Sustainable Development, including to end all forms of malnutrition by 2030;

(PP3) Reaffirming the commitments to implement relevant international targets and action plans, including WHO's global maternal, infant and young child nutrition targets for 2025 and WHO's global action plan for the prevention and control of noncommunicable diseases 2013–2020 and the Rome Declaration on Nutrition resulting from the Second International Conference on Nutrition;

(PP4) Reaffirming also that breastfeeding is critical for child survival, nutrition and development, and maternal health;

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<sup>1</sup> Documents A71/22 and A71/23.<sup>2</sup> [http://apps.who.int/gb/ebwha/pdf\\_files/EB142/B142\\_3Rev2-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/EB142/B142_3Rev2-en.pdf)

(PP4bis) Affirming that the protection, promotion and support of breastfeeding contributes substantially to the achievement of the Sustainable Development Goals on nutrition and health, and is a core element of quality health care;

(PP5) Recognizing that appropriate, evidence-based and timely support of infant and young child feeding in emergencies saves lives, protects child nutrition, health and development, and benefits mothers and families;

(PP6) Expressing concern that nearly two in every three infants under 6 months of age are not exclusively breastfed; that fewer than one in five infants are breastfed for 12 months in high-income countries; and that only two in every three children between 6 months and 2 years of age receive any breast milk in low- and middle-income countries;

(PP7) Acknowledging that achievement of the WHO global target to increase to at least 50% the proportion of infants under 6 months of age who are exclusively breastfed by 2025 requires sustainable and adequate technical and financial resources, and supportive and protective policy and regulatory interventions as well as political will, and that this needs to be part of broader efforts to strengthen health systems;

(PP8) Welcoming the inclusion of support for exclusive breastfeeding in the Thirteenth General Programme of Work, 2019–2023;<sup>1</sup>

(PP9) Welcoming the annual celebration of World Breastfeeding Week as an opportunity to communicate the importance of breastfeeding and advocate for the protection, promotion and support of breastfeeding;<sup>1</sup>

(PP10) Recognizing recent efforts made by WHO to provide guidance and strengthen technical support to Member States to improve infant and young child feeding, and protect, promote and support breastfeeding in particular, including through new guidelines and implementation guidance on the Baby-friendly Hospital Initiative;<sup>2,3</sup> an implementation manual on ending the inappropriate promotion of foods for infants and young children;<sup>4,5</sup> a tool kit on strengthening monitoring and enforcement of the International Code of Marketing of Breast-Milk Substitutes and subsequent relevant Health Assembly resolutions;<sup>6</sup> operational guidance on infant feeding in emergencies;<sup>7</sup> updated guidelines on breastfeeding in the context of HIV;<sup>8</sup> and breastfeeding advocacy materials,<sup>9,10,11</sup> as well as noting the ongoing process

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<sup>1</sup> [http://apps.who.int/gb/ebwha/pdf\\_files/EB142/B142\\_3Rev2-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/EB142/B142_3Rev2-en.pdf)

<sup>1</sup> <http://worldbreastfeedingweek.org/>

<sup>2</sup> <http://www.who.int/nutrition/publications/guidelines/breastfeeding-facilities-maternity-newborn/en/>

<sup>3</sup> <http://www.who.int/nutrition/publications/infantfeeding/bfhi-implementation/>

<sup>4</sup> [http://apps.who.int/gb/ebwha/pdf\\_files/WHA69/A69\\_7Add1-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_7Add1-en.pdf)

<sup>5</sup> <http://www.who.int/nutrition/publications/infantfeeding/guidance-ending-inappropriate-promotion-food-manual/en/>

<sup>6</sup> <http://www.who.int/nutrition/netcode/toolkit/en/>

<sup>7</sup> <http://www.enonline.net/operationalguidance-v3-2017>

<sup>8</sup> [http://www.who.int/nutrition/publications/hivguideline\\_hiv\\_infantfeeding\\_2016/en/](http://www.who.int/nutrition/publications/hivguideline_hiv_infantfeeding_2016/en/)

<sup>9</sup> [https://www.unicef.org/nutrition/index\\_98477.html](https://www.unicef.org/nutrition/index_98477.html)

<sup>10</sup> <http://www.who.int/nutrition/publications/infantfeeding/global-bf-collective-investmentcase/en/>

<sup>11</sup> <http://www.who.int/nutrition/publications/infantfeeding/global-bf-scorecard-2017/en/>

to develop tools to safeguard against possible conflicts of interest in policy development and implementation of nutrition programmes;<sup>1</sup>

(PP11) Also recognizing the ongoing implementation by WHO of the Framework of Engagement with Non-State Actors to effectively manage, including by, where possible, avoiding conflict of interest and other forms of risks to WHO in nutrition programmes,

OP1. URGES Member States<sup>2,3,4</sup> in accordance with national context and international obligations:

(1) to increase investment in development, implementation and monitoring of laws, policies and programmes aimed at protection, promotion and support of breastfeeding, including through multisectoral approaches and awareness raising;

(2) to reinvigorate the Baby-friendly Hospital Initiative, including by promoting full integration of the Ten steps to successful breastfeeding, in efforts and programmes aimed at improving quality of care for maternal, newborn and child health;

(3) to implement and/or strengthen national monitoring and enforcement mechanisms for effective implementation of national measures aimed at giving effect to the International Code of Marketing of Breast-milk Substitutes and subsequent relevant Health Assembly resolutions;

(3bis) to promote timely and adequate complementary feeding in accordance with the guiding principles for complementary feeding of the breastfed child,<sup>5</sup> as well as guiding principles for the feeding of the non-breast-fed child (6–24 months of age);<sup>6</sup>

(4) to continue taking all necessary measures in the interest of public health to end the inappropriate promotion of foods for infants and young children, including, in particular, implementation of the guidance on ending the inappropriate promotion of foods for infants and young children, while taking into account existing legislation and policies, as well as international obligations;

(5) to take all necessary measures to ensure evidence-based and appropriate infant and young child feeding during emergencies, including through preparedness plans, capacity-building of personnel working in emergency situations, and coordination of intersectoral operations;

(6) to celebrate World Breastfeeding Week<sup>7</sup> as a valuable means to promote breastfeeding;

OP2. REQUESTS the Director-General:

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<sup>1</sup> <http://www.who.int/nutrition/consultation-doi/comments/en/>

<sup>2</sup> And where applicable, regional economic integration organizations.

<sup>3</sup> Taking into account the context of federated states.

<sup>4</sup> Member States could take additional action to end inappropriate promotion of food for infants and young children.

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(1) to provide, upon request, technical support to Member States in implementation, mobilization of financial resources, monitoring and assessment of the International Code of Marketing of Breast-milk Substitutes and subsequent relevant Health Assembly resolutions, the guidance on ending the inappropriate promotion of foods for infants and young children, and the Baby-friendly Hospital Initiative and to review national experiences with monitoring and enforcing relevant national legal, regulatory and/or other measures;

(2) to continue developing tools for training, monitoring and advocacy on the Ten steps to successful breastfeeding and the Baby-friendly Hospital Initiative, to provide support to Member States with implementation;

(3) to support Member States on establishing nutrition targets and intermediate milestones for maternal, infant and young child nutrition indicators, consistent with the time frame for implementation of the Framework for Action, the conference outcome document FAO's Second International Conference on Nutrition and the United Nations Decade of Action on Nutrition (2016–2025);

(3bis) to continue providing adequate technical support to Member States in assessing policies and programmes, including good-quality data collection and analyses;

(4) to develop tools for training, monitoring, advocacy and preparedness for the implementation of the operational guidance on infant and young child feeding in emergencies and support Member States to review experiences in its adaptation, implementation and monitoring;

(5) to report to the World Health Assembly on the progress made in implementing this resolution and in alignment with the reporting requested in resolution WHA69.9.

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