

# Towards a pro-breastfeeding culture in South Africa

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South Africa has one of the lowest rates of exclusive breastfeeding (EBF) for infants from 0 to 6 months on the continent. At a rate of less than 32% in 2016, it is unlikely that the country can meet the Who's (World Health Organisation's) global target of a 70% EBF rate by 2030. In line with international codes, the country has regulations in place to protect breastfeeding, and to limit the formidable marketing powers of infant formula producers. So, what more needs to be done?



Breastmilk is the natural, sustainable food for the healthy development of babies and young children. It cannot be replicated by infant feeding formulas. It provides for all the nutritional needs of an infant up to 6 months of age while also conveying immune-boosting antibodies from mother to child. Breastmilk continues to play vital nutritional and developmental roles once babies are introduced to age-appropriate complementary foods after 6 months, and therefore the Who recommends ongoing breastfeeding for two years, and beyond.

According to Unicef (United Nations International Children's Emergency Fund), babies who are exclusively breastfed are 14 times more likely to survive to six months of age than those who are formula fed. Breastfeeding can provide protection against many childhood illnesses such as diarrhoea, allergies and middle ear infections. Yet, formula feeding is widely accepted in South Africa, even though it creates a significant financial strain in low income households. An additional concern in the country is that the required hygiene standards in the proper preparation and use of infant formula are impossible to meet in households and communities with no access to clean, running water and lack of consistent access to energy for boiling water and sterilising bottles and utensils.

Maria van der Merwe, president of [Adsa \(The Association for Dietetics in South Africa\)](#) says: "We are battling the legacy of the once unfettered marketing, including free giveaways, of infant formula not just to new mothers, but also to the health professionals engaging with them. There's still a pervasive false view that when it comes to infant health and development, breastfeeding and infant formula are somehow equal, which they are most definitely not. It is uncontested that scientific evidence shows that 'breast is best'. We need a whole-society approach and multi-level advocacy if we are to create a pro-breastfeeding culture in South Africa that supports higher rates of EBF, and longer breastfeeding durations once complementary foods have been offered."

Although South Africa has acceptable regulations governing the marketing of infant formula in the country, well-resourced

infant formula marketers are adept at finding loopholes. Dr Chantell Witten, from the DST/NRF Centre of Excellence for Food Security at the University of the Western Cape, is one of the country's leading breastfeeding advocates, and is passionate about infant nutrition. She says: "Research has shown that we are not effective enough yet at attenuating the aggressive influence and interference of the formula industry. They are involved in the training and continuous development of health professionals, sponsoring conferences and putting promotional speakers forward at events. They are reaching mothers through social media channels and gathering their data. Marketing tactics are used to present breastfeeding as arduous, to undermine mother's confidence in their abilities to produce milk, raising insecurities about their bodies and their parenting skills. There's an insidious campaign, flying under the radar of the code that is grooming mothers to formula feed. So much of this is playing out in under-regulated digital spaces, and this demands a greater whole-society awareness that breast is best so that you have citizen advocates standing up to support breastfeeding moms."

Daddy Mathews, registered dietitian and deputy director, Nutrition Services in Limpopo, says that while the correct regulations and policies are in place to protect breastfeeding, enforcement is weak. He says: "There are inadequate resources, both human and financial, for monitoring and evaluation, and then a lack of serious fines or prosecutions for those who are out of line. We are seeing marketers shift promotions to social media channels where they are using cross-promotional tactics that breach the country's code. The powerful infant formula industry is taking advantage of loopholes, and resorts to legal threats if confronted. It is an ongoing concern that in a low to middle income country like South Africa, infant formula sales are sky-rocketing, which contributes to excess infant morbidity and mortality."

From an advocacy point of view, there is low public awareness of regulations, policies and codes, and therefore South Africans don't know what the protections are and don't notice if they are breached.

Van der Merwe says: "It is important to not only focus on the regulatory side, but to also actively strengthen the support to mothers. We will benefit from a whole-society approach where breastfeeding is normalised and supported. Having a breastfeeding mom frowned upon when she feeds her infant in public, or not having comfortable facilities for infant care in public spaces are barriers to breastfeeding. Equally important, partners, household members, family, friends and the community can all assist mothers and infants during their breastfeeding journey through emotional support. Support structures, especially during the first few days and weeks when breastfeeding practices are established, are key. This could include lactation support prior to and immediately after birth as well as continued support to ensure that the mother and baby are getting all the benefits of breastfeeding and to address any barriers or challenges. Taking a practical approach to supporting South African moms in more effective ways will help to increase breastfeeding rates for the benefit of our newest generation."

[World Breastfeeding Week](#) takes place from 1 to 7 August 2022.

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