

World Breastfeeding Week 2015

World Alliance for Breastfeeding Action (WABA)

Balancing work and family life, including breastfeeding, is increasingly necessary for women's rights and a strong, healthy and vibrant workforce—and better society. Today's global economic and labour conditions are changing rapidly, with some positives but many negative implications on women's health and livelihoods, as well as that of their children and families. By adequately integrating women's and men's productive and reproductive work and lives, all sectors of society will benefit. Benefits include productivity, family income and job security, women's and children's health and well-being, employers' long-term profits and a nation's socio-economic health and stability! This year's theme "Let's Make it Work" therefore involves EVERYONE. Together, WE CAN MAKE IT WORK!

2015 marks the 25th Anniversary of Innocenti Declaration 1990 where four targets were adopted by the international community. Over 20 years later, all targets need more attention, but particularly the fourth target "to enact imaginative legislation protecting the breastfeeding rights of working women and establish means for its enforcement."

WABA launched the World Breastfeeding Week (WBW) 1993 theme on Women, Work and Breastfeeding to rally global action to support women to combine breastfeeding and work. Much has been achieved in 22 years, such as the adoption of the revised International Labour Organisation (ILO) Convention 183 and Recommendation 191 on Maternity Protection (MP) in 2000—with stronger maternity entitlements, and more country initiatives improving national laws and practices. We also see more breastfeeding and mother-friendly workplaces accredited as such.

Despite these advances, global monitoring on infant and young child feeding¹ shows that this fourth Innocenti target remains the most challenging. Further, progress to increase support for women working in the non-formal sector to breastfeed is minimal. It is time to fully recognise, protect and support the unpaid care work and breastfeeding that women all over the world do.

2015 also marks the adoption of the Sustainable Development Goals (SDGs). The SDGs should include an 'exclusive breastfeeding target indicator' to firmly position breastfeeding in the global health and nutrition arena—and serve as a proxy indicator for monitoring the status of maternity protection at national level.

WBW Goals:

Supporting women to integrate productive and reproductive work is a complex and multi-level task, requiring diverse strategies and engaging different partners on shared agendas. As such the goals for this years' WBW 2015 are to:

- 1) Galvanise multi-dimensional support from all sectors to enable women everywhere to work and breastfeed safely and adequately.
- 2) Promote actions by employers to become Family/Parent/Baby and Mother-Friendly, and to actively facilitate and support employed women to continue breastfeeding their children.
- 3) Inform people about the latest in global Maternity Protection entitlements, and raise awareness of the need to strengthen related national legislation and implementation.
- 4) Strengthen, facilitate and showcase supportive practices that enable women working in the informal sector to breastfeed.
- 5) Engage with target groups e.g. Trade Unions, Workers Rights Organisations, Human Rights agencies, Women's, Occupational Health, and Youth groups, to protect the breastfeeding rights of women in the workplace.

1. World Breastfeeding Trends Initiative, WBTI 2012 Report by IBFAN.

2. "The future of work must also deal with the future of women at work" Statement by Guy Ryder, ILO Director-General, on the occasion of International Women's Day, 8 March 2015.

Breastfeeding and Work



Let's make it work!

"Support maternity protection and work-family policies: despite some progress, globally more than 800 million women workers, or 41 per cent, still don't have adequate maternity protection, and take-up rates among men of parental leave are low. Could we not design maternity protection and work-family policies that are more inclusive, and supportive of gender equality?"²

Guy Ryder, ILO Director-General, 2015

Yara Guariglia @ WABA 2015



Sudipto Das @ WABA 2015



Photos are winners of the World Breastfeeding Week 2015

Photo Contest. © 2015 Photographer and WABA.

All Rights Reserved.

Join Us & Take Action NOW!

www.worldbreastfeedingweek.org

WABA • World Breastfeeding Week • 1-7 August 2015

WHO BENEFITS FROM MATERNITY PROTECTION AT WORK?

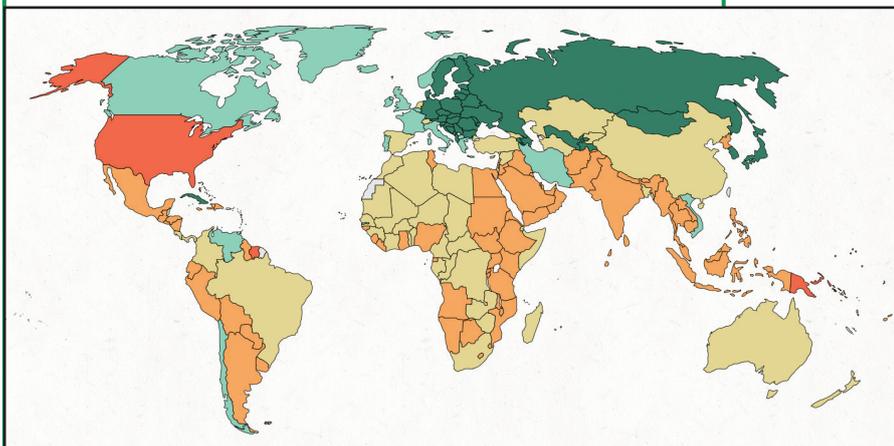
Everyone benefits from measures protecting maternity at the workplace!

- Mothers and babies are healthier, happier, more rested, and less stressed. Improved long and short term health.
- The entire family benefits from the protection a woman receives in job security, cash and medical benefits, and peace of mind to be with her newborn and to recuperate.
- Fathers and partners benefit from being equal partners in parenting, and sharing parental and paternity leaves.
- Babies are sick less often, so both families and nations save on health care costs, with lower morbidity and mortality rates.
- Employers benefit from having a more contented and productive workforce due to less employee absenteeism, increased loyalty and less staff turnover. *"Lactation programs have been found to produce a 3 to 1 Return on Investment!"*³
- States become more egalitarian and enhance human resource, wealth and societal well-being by protecting women workers and facilitating maternity rights!⁴



Helen Regina @ WABA 2015

WHERE IS PAID LEAVE AVAILABLE FOR MOTHERS OF INFANTS?



- | | |
|----------------------------------------------------------|-----------------------------------------------------------|
| ■ No paid leave | ■ 26 - 51.9 weeks |
| ■ Less than 14 weeks | ■ 52 weeks or more |
| ■ 14 - 25.9 weeks | |

Source: <http://worldpolicyforum.org/policies/is-paidleaveavailable-for-mothers-of-infants>

THE FORMAL, ORGANISED SECTOR

Status Of Maternity Protection (MP) Globally

We often think of MP mainly in terms of maternity leave, but it is much more than that. MP includes the seven areas of (1) scope, (2) maternity leave, (3) maternity/cash benefits, (4) health protection, (5) job protection and non-discrimination, (6) breastfeeding breaks, and (7) breastfeeding facilities. According to the ILO in 2012, less than one-third of countries' national legislation satisfies two of the seven provisions of ILO Convention No.183. These include the length of maternity leave, paid benefits and payment schemes.⁵

Regarding length of leave, the majority of countries (85%) provide 12 weeks or more, in line with ILO Conventions No.3 and No.103, but ONLY 53% of these countries provide more than 14 weeks as stipulated in ILO Convention No. 183. Less than 20 countries provide at least 6 months post-natally (immediately after birth) which is needed for exclusive breastfeeding. (See map for global overview).

Legalised breastfeeding breaks fare better with 122 out of 182 countries having such a provision, but fewer countries have paid breaks (114 out of 182)⁶. Even taking legal breaks is a challenge and depends on effective enforcement, the working environment and staff attitudes. Globally, this provision has progressed modestly since 1995 with only 15 more countries providing guaranteed breaks⁷.



Jaime ER Navarrete @ WABA 2015

WHAT WOMEN NEED FOR ADEQUATE MP

While paid maternity leave is a NECESSARY condition for women to breastfeed optimally, it is NOT a sufficient condition. Research found that in addition to the provision of paid maternity leave, women need information and support during antenatal and postnatal period to address factors at individual, family and workplace levels.⁸

The range of **What Women Need for Adequate Maternity Protection** is summarised in the generic areas of TIME, SPACE & SUPPORT (See Insert).

Many of these conditions, including the maternity rights of women are recognised in a series of international conventions, treaties and declarations. These include:

- The various ILO Conventions 52, 103, 183 and Recommendation 191
- Convention of the Elimination of Discrimination against Women (CEDAW), 1979
- Convention on the Rights of the Child (CRC), 1989
- Innocenti Declarations 1990, 2005
- Beijing Declaration and Platform for Action, 2005
- Global Strategy for Infant and Young Child Feeding, 2002.

3. The Business Case for Breastfeeding – Worksite Lactation Support– http://everymother.org/worksite_lactation_support.php

4. <http://ibfan.org/ips/IBFAN-Statement-on-Maternity-Protection-at-Work.pdf>

5. Working Conditions Laws Report 2012, p. 37

6. http://www.waba.org.my/whatwedo/womenandwork/pdf/mp_chart_2015_updated-Feb%202015.pdf

7. Atabay, Moreno, Nandi et al (2014). Facilitating working mothers' ability to breastfeed: global trends in guaranteeing breastfeeding breaks at work, 1995-2014

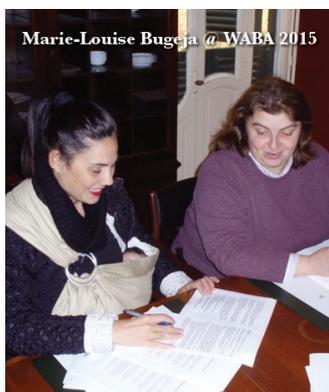
8. 'Negotiating the tensions of having to attach and detach concurrently': A qualitative study on combining breastfeeding and employment in public education and health sectors in New Delhi, India. Midwifery. 3-1(2015) 473-481.

ADVOCACY FOR BETTER MATERNITY PROTECTION THROUGH LEGISLATIONS!

How can you find out the status of Maternity Protection (MP) in your country?

A country's maternity protection status according to the seven areas (mentioned previously) can vary widely and may exclude large groups of working women. To improve MP in your country, you first need to find out its status, identify the weakest aspects, and then decide where to focus your WBW 2015 campaign efforts. Various resources can be referred to for this, including:

1. WABA Maternity Protection Chart.⁹
2. ILO Data Collection on Maternity Protection.¹⁰
3. Maternity at Work: a Review of National Legislation Findings from the ILO Database of Conditions of Work and Employment Laws, Geneva, International Labour Organization, 2010.
4. World Breastfeeding Trends Initiative Report - Are Our Babies Falling Through the Gaps?¹¹
5. IBFAN CRC and CEDAW alternative reports on IBFAN's website.¹²



WHAT CAN YOU DO?

What can you do to improve MP in your country?

Once you have identified the gaps in legislation and implementation, focus your actions to address them. Collaborate with trade unions, workers and women's groups, local government, employers and others for greater impact!

The focus of your action could be on any one or more of the following legislative aspects:

- increase the length of paid maternity leave;
- extend the scope of coverage for MP to more sectors of working women;
- extend paid leave to parental, paternity and other forms of leave that give more time for parents and infants to be together;
- strengthen anti-discrimination policies at the workplace;
- legislate paid breastfeeding breaks for at least 6 months or more;
- work with government to find ways for creative financing of maternity benefits to ensure sustainability and not burden employers alone.

You can also:

- Regularly monitor the implementation of these laws and practices to ensure that more women actually receive maternity benefits due to them.
- Link with national and/or global Trade Union MP campaigns, as well as national breastfeeding advocacy organisations to cooperate on MP actions to improve on the seven MP areas.
- Study and adopt ways to value women's reproductive work, including breastfeeding and include it in your country's Gross Domestic Product. See "Making Mothers' Milk Count"¹³ to kick off national discussion and initiate steps for change.
- Rally around the 25th Anniversary of the Innocenti Declaration in 2015 on this fourth target.

COUNTRY CASES

Not many countries globally have six or more months paid maternity leave. In 2008, Brazil extended its maternity leave from 120 days to six months for all public sector employees (except for some municipalities). In November 2014, Myanmar passed legislation for six months maternity leave with pay as well as Vietnam and Bangladesh.

In many countries the scope for paid maternity leave is limited to certain groups of women and often excludes those most in need. You can galvanise action to increase the scope of leave and/or advocate for additional forms like parental and paternity leaves. Some countries like Sweden are moving towards parental leave to address gender equality issues and encourage greater balance in sharing parenting time. This move however should not shorten breastfeeding or take health protection away from pregnant and breastfeeding women.



In Australia, a national scheme for Paid Parental Leave was introduced in 2011 funded from general taxation and covers the minimum wage for 18 weeks. Unlike earlier where 12 months leave was unpaid and only 12 weeks was paid by the employer to public service or professional women, the new scheme has wide eligibility and includes the self employed, casual workers, etc. and all mothers employed for more than a week in the year before birth.¹⁴ Paid paternity leave of one week is also provided. The scheme has been successful in increasing breastfeeding duration at 12 months¹⁵, benefited employers as women returned to work earlier than otherwise, and benefited mothers' mental health by longer leave.¹⁶



In Venezuela in 2012, the new Labour Law for Workers established postnatal leave of 20 weeks, adding 6 weeks prenatal leave, equivalent to six and a half months of prenatal and postnatal paid leave. In addition, the father receives 14 days postnatal leave and 21 days for multiple births in order to support the mother. The Law also requires every employer to have a centre for early childhood education and a nursery room, and provides for two 30 minutes breastfeeding breaks if there is a lactation room in the worksite, otherwise one and a half hours twice a day if there is none!



Philippines passed a law in 2009 titled Expanded Breastfeeding Promotion Act, co-authored by a breastfeeding mother. It advocates for 45 minutes paid breastfeeding breaks for working women at the workplace and the establishment of breastfeeding stations. Companies observing the law are privileged through tax deductions.

These, and many other successful cases, have been the result of long term national level advocacy, ordinary people taking action and doing so consistently. You can draw from these success stories that have improved MP laws and practices. See WBW website for more.

9. http://www.waba.org.my/whatwedo/womenandwork/pdf/mp_chart_2015_updated-Feb%202015.pdf

10. http://www.ilo.org/travail/areasofwork/maternity-protection/WCMS_145724/lang-en/index.htm

11. http://www.ibfan-alc.org/noticias/Are_babies_falling_through_gaps.pdf

12. <http://ibfan.org/committee-on-the-rights-of-the-child/>; and <http://ibfan.org/cedaw>

13. Smith, JP (2014) 'Making Mothers' Milk Count'. Counting on Marilyn Waring: New Advances of Feminist Economics, M Bjørnholt & A McKay. Bradford, Ontario, Demeter Press: 267-286.

14. <http://www.humanservices.gov.au/customer/enablers/centrelink/parental-leave-pay/eligibility-for-parental-leave-pay>
<http://www.humanservices.gov.au/customer/enablers/centrelink/parental-leave-pay/work-test-for-parental-leave-pay>

15. <http://www.dailytelegraph.com.au/news/nsw/dads-fail-to-claim-baby-pay-cash-under-the-parental-leave-scheme/story-fni0cx12-1227252860019>

16. <https://www.dss.gov.au/our-responsibilities/families-and-children/programmes-services/paid-parental-leave-scheme/paid-parental-leave-evaluation>

WORKPLACE SOLUTIONS TO SUPPORT WOMEN COMBINE BREASTFEEDING AND PAID EMPLOYMENT:

Breastfeeding and Family-Friendly Workplaces

Legislative changes take time; so shorter-term solutions for supporting working women to breastfeed and care for children should also be pursued. These include strategies to make the workplace a family or breastfeeding-friendly environment. Over the past two decades, since the 1990 Innocenti Declaration, many advances in workplace policy and practices are visible around the world and should be celebrated! (See column on the right)



WHAT CAN YOU DO?

- Advocate for a breastfeeding-friendly programme within your workplace. Assume collective responsibility for sustaining it with a supportive work environment.
- Offer breastfeeding support and practical information on managing work and breastfeeding for pregnant women and women going back to work.
- Learn about other Family/breastfeeding-friendly employers and the shared benefits for employer and employees when women are supported to combine paid work with motherhood.
- Check out inspiring examples of breastfeeding-friendly workplaces, accreditation processes and other online resources. See web links under Workplace Support in the Resource section. Be a cutting edge employer.
- Support part time work arrangements for your breastfeeding staff as breastfeeding could take up to half the work time of a woman.¹⁷
- Health professionals and staff can discuss strategies with women on combining work and breastfeeding
- Campaign for safe and breastfeeding-friendly child care services that are Code compliant in or near your workplace or home.



17. Time use research in Australia has shown that exclusive breastfeeding at 6 months takes around 17 hours a week of the mothers time. This is half of a full time job. This and other studies show that having a part time job is less harmful to optimal breastfeeding practices. See Baxter, J, AR Cooklin, et al. (2009) 'Which Mothers Wean Their Babies Prematurely from Full Breastfeeding? An Australian Cohort Study', Acta Paediatrica 98 (8): 1274-1277. Also see Smith, JP, PE McIntyre, et al. (2013) 'Workplace Support, Breastfeeding, and Health', Family Matters 93 (December): 58-73.

COUNTRY CASES



In Australia, for instance, the implementation of the Breastfeeding-Friendly Workplace Accreditation (BFWA) by the Australian Breastfeeding Association (ABA) has made great strides with over 150 organisations accredited since the programme began. The parliamentary committee in 2007 recommended that the Australian government provide funding to expand this initiative¹⁸. One outstanding example is the Royal Australian Air Force that led the way in 2014 by becoming the first military organisation in the world to achieve accreditation as a Breastfeeding-Friendly Workplace.¹⁹



CALMA-IBFAN El Salvador developed the Women and Child-Friendly Working Centers in 2010 with the national authorities that include breastfeeding rooms, training for the workers in companies, industries and commercial settlements both in public and private sector, and surveillance of MP laws implementation. Two-hundred inspectors have been trained. The programme now has 532 breastfeeding rooms for approximately 15,823 women.



In Peru, the Supreme Decree No. 29896 established the implementation of breastfeeding and breastmilk rooms in the public and private sector to promote and support breastfeeding. They are obligatory for all public or private establishments with 20 or more workers.



In Colombia, a law by the Council of Bogotá requires Family and Children-Friendly Rooms to be established in communities and enterprises, irrespective of the number of women workers.



In New Zealand, "industrial and service workers, in particular women in sales, restaurant, hotel, factory or service occupations have the greatest difficulty in managing breastfeeding and thus require greater support from their employers to balance their work and family responsibilities."²⁰ The Breastfeeding-Friendly Workplaces Programme has been set up as a national service to provide information and support to women, employees and employers encouraging the latter to be accredited as Breastfeeding-Friendly Workplace similar to the Australian programme.²¹



In Switzerland, the Swiss Foundation for the Promotion of Breastfeeding provides ample resources on their website for working women, employees and employers in a number of languages.²² Numerous other examples exist showing a real growth in public information and workplace support via Breastfeeding-Friendly programmes (i.e. USA, Australia, New Zealand, Switzerland, and others).



In Brazil, the breastfeeding support rooms (SALM) are spaces within the workplace for expression of breastmilk and storage when breastmilk is to be transported to homes at the end of the day. These rooms have been growing in number all over the country since their launch in 2010 by the Ministry of Health. A few SALM exist in non-hospital health units open to informal workers of the community as well.

18. http://www.aph.gov.au/parliamentary_business/committees/house_of_representatives_committees?url=haa/breastfeeding/report.htm

19. "Breastfeeding support for working mums in the construction industry," by Maggie Lighezzolo and Natasha Pollock, http://printgraphics.net.au/myfiles/Essence_Magazine_Vol_41_Issue_1/index.html#/28/zoomed

20. http://www.bfw.org.nz/Breastfeeding-and-work_280.aspx

21. See also <http://www.bfw.org.nz/default.aspx>

22. See http://www.allaiter.ch/logicio/client/stillen/summary.php?lang_iso639=en

THE NON-FORMAL, UNORGANISED SECTOR & THE HOME FRONT:

Most global and national responses to maternity protection have been policy based through MP laws and practices. However, the majority of women needing such support work outside the formal work environment where such policies do not cover them—being in the non-formal or informal sector.

Since 1993, WABA has defined women's work broadly from paid employment, self-employment, seasonal and contract work to unpaid home and care work. The home front is an especially challenging domain. Women do huge amounts of work, but often face gender discrimination, violence and abuse. This makes it doubly difficult for women to successfully integrate productive and reproductive work without cost to their own health and well-being. The range of women working in vulnerable situations includes domestic workers, migrant workers (who also suffer from human trafficking), women in agriculture, and displaced people in conflict situations.

In the world's poorest regions, over 50% of the women work in vulnerable employment, characterised by low pay, long hours of work and informal working arrangements. With the increasing feminization of labour, countries need to strengthen maternity protection, especially for women working in the unorganised sector, and provide support services like crèches if rates of optimal infant and young child feeding have to increase.²³

It is therefore urgent that breastfeeding advocates, together with women's health, gender and rights advocates, trade unionists and others seek (collaborative) ways to respond. Working with men, youth, and men's groups is also important to sensitise men in order to increase their awareness and active involvement in supporting women, in fathering and fatherhood. This will also help to build greater gender equality at the home, the workplace and in public spaces.

WHAT CAN YOU DO?

- Share your experiences as inspiration for other women.
- Find out about your maternity entitlements and general rights to health, safety, work and livelihood.
- Join a Mother or other Support group that offers help with motherhood, child care and breastfeeding.
- Forge partnerships with young people and youth groups to support young mothers to breastfeed and care for their children.
- As fathers or partners, get information on breastfeeding prenatally and find out how you can better support your wife/partner to breastfeed.²⁴ Learn what other men are doing and how to be part of the family's nurturing and breastfeeding experience.
- Look for gender inequalities at home and give proactive support like helping with household chores.
- Partner with the ILO on the MP campaign. Strategise on effective ways to support women working in the informal sector to breastfeed; and promote decent work.²⁵
- Introduce decent work and child care policies and practices that address marginalised women and those displaced by wars, poverty, and environmental degradation.
- Restore and/or build breastfeeding support measures for migrant and refugee women where family or communal support systems are broken.



COUNTRY CASES

Interestingly, there have always been women and communities that have found resourceful ways to support women who work and breastfeed in these non-formal settings. For example, women in many markets in Latin America and the Caribbean have created support networks to look after their children through informal care systems. Women in migrant and non legal situations support each other to care for children left in their home country, and to ensure communication and solidarity mechanisms.



In the Philippines, the Alliance of Leaders of Workers in the Informal Economy/Sector (ALLWIES) representing about 700,000 vendors, sellers, transport drivers, waste pickers, etc. have organised lactation stations at their worksites following Breastfeeding Peer Counselling Training in 2014 using ARUGAAN's Peer Counselling manual. The group PARE who are garbage scavengers was set up in Quezon City with the collaboration of UNICEF, ILO and WHO. In the province of Naga City, Camarines Sur, NAMASFED, a federation of vendors and sellers in the public market set up a lactation room where people can avail themselves of the breastfeeding counselling and facility. It is run by the vendors themselves who are also now involved in lawmaking to protect breastfeeding rights for workers through local ordinance.



There are also examples where governments have extended MP laws to cover certain vulnerable populations such in Costa Rica where all women, including migrants and those working in the non-formal sector have access to health services.



23. ILO Report, Women in labour markets: Measuring progress and identifying challenges, ILO March 2010,

24. "Fathers' experiences of supporting breastfeeding: challenges for breastfeeding promotion and education," in Maternal and Child Nutrition (2014), 10, pp.510–526 by Amy Brown and Ruth Davies.

25. See <http://www.ilo.org/global/about-the-ilo/decent-work-agenda/lang--en/index.htm>



EMPOWERING WOMEN!

Whether a woman is working in the formal, non-formal or home setting, it is necessary that she is empowered in claiming her and her baby's right to breastfeed. It may be easier for women to claim their maternity entitlements in more formal work settings. However, in less formal work and home settings, women need to know about their right to reproductive health, food and safety. These rights are enshrined in many of the International Conventions and documents mentioned earlier.

Any approach that supports women to combine employment and unpaid work with reproductive work must do so from an empowerment approach so that women are not recipients of charity! Maternity rights are rights of all women and need to be supported, facilitated and upheld as such.

WHAT CAN YOU DO?

- Listen to women's needs! Respect a woman's decision on infant feeding and child care, and offer support for her choice without prejudice or being channels of commercial interests.
- Join the WBW 2015 campaign in your country or city by developing solidarity actions with other women. Recognise that mothers are in more vulnerable circumstances than usual. Participate in women rights struggles to improve MP.
- Using the framework of women's rights to food and health, campaign for women's access to medical follow-up and quality health care, adequate food and nutrition, skilled counselling and breastfeeding support and protection. Some of these can be provided through innovative schemes such as food or cash transfers or local health care insurances.
- Develop and sustain partnerships with international, regional or national women's organisations and trade unions that champion women's and women workers' rights to work, livelihoods and reproductive health during WBW and other relevant Days of Action!

ADDITIONAL RESOURCES

Maternity Protection Campaign Kit (WABA and the MP Coalition) 2003

<http://www.waba.org.my/whatwedo/womenandwork/pdf/contents.pdf>

Maternity Protection Resource Package: From Aspiration to Reality for All

by the ILO, other partners and IBFAN – http://www.ilo.org/global/publications/ilo-bookstore/order-online/books/WCMS_193968/lang--en/index.htm

Working Conditions Laws Report 2012: A global review

http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---travail/documents/publication/wcms_235155.pdf

Maternity and paternity at work: Law and practice across the world

http://ilo.org/global/publications/ilo-bookstore/order-online/books/WCMS_242615/lang--en/index.htm

Breastfeeding Friendly Workplace: An Australian Breastfeeding Association Initiative

– <http://www.breastfeedingfriendly.com.au/>

Breastfeeding Friendly Workplaces (New Zealand)

– <http://www.bfw.org.nz/>

The business case for Breastfeeding Friendly Workplace Accreditation – New Zealand

– <http://www.bfw.org.nz/default.aspx>

The Business Case for Breastfeeding: Steps for Creating a Breastfeeding Friendly Worksite – Employers' Guide to Working and Breastfeeding

<http://uhs.berkeley.edu/Facstaff/pdf/healthmatters/Breastfeeding%20and%20Working%20from%20WomensHealth.pdf>

More Breastfeeding Support for Employers

<http://www.womenshealth.gov/breastfeeding/employer-solutions/more-support.html>

Breastfeeding Counselling: A training course WHO/UNICEF 1993, Revised 2015, Session 30.

– <http://worldbreastfeedingweek.org/pdf/BFC-Session30PM%200312.pdf>

Maternity Protection Campaign Kit section 9 – How to Support Women in the Informal Economy to Combine Their Productive and Reproductive Roles

<http://www.waba.org.my/whatwedo/womenandwork/pdf/09.pdf>

Women, gender and the informal economy: An assessment of ILO research and suggested ways forward – Sylvia Chant and Carolyn Pedwell London School of Economics

– <http://goo.gl/rcVznH>

Women in Informal Employment: Globalizing & Organizing (WIEGO)

http://wiego.org/search/apachesolr_search/maternity

WBW Coordinating & Distributing Centres

OVERALL COORDINATION

WABA Secretariat

P O Box 1200, 10850 Penang, Malaysia
Fax: 60-4-657 2655, waba@waba.org.my
www.waba.org.my
www.worldbreastfeedingweek.org

AFRICA

IBFAN Africa

P O Box 781, Mbabane, Swaziland
Fax: 268-40 40546, ibfanswd@realnet.co.sz

IBFAN Afrique

Cite Ouaga 2000, 01 BP 1776,
Ouagadougou 01, Burkina Faso
Fax: 226-50-374163, ibfanfan@fasonet.fw

ASIA

WABA Secretariat

(See address under OVERALL COORDINATION)

SOUTH ASIA

Breastfeeding Promotion

Network of India (BPNI)

BP-33, Pitampura, Delhi 110 034, India
Fax: 91-11-2734 3606, bpni.india@gmail.com

EUROPE

Baby Milk Action

34 Trumpington Street, Cambridge
CB2 1QY, UK Fax: 44-1223-464 417
info@babymilkaction.org

IBFAN-GIFA

Avenue de la Paix 11, 1202 Geneva,
Switzerland
Fax: 41-22-798 4443, info@gifa.org

Aktionsgruppe

Babynahrung Ev (AGB)

Untere Maschstrasse 21
D-37073 Göttingen, Germany
Fax: 49-551-531 035, info@babynahrung.org

LATIN AMERICA

CEFEMINA

Apartado 5355, 1000 San Jose, Costa Rica
Fax: 506-224 3986
cefemina@racsa.co.cr

IBFAN Brasil

Rua Carlos Gomes, 1513,
Sala 02 Jd. Carlos Gomes
Jundiaí-SP-Brasil.
CEP: 13215-021
Tel/Fax: (11) 4522 5658
coordenaiibfan@terra.com.br

NORTH AMERICA

LLL International

35 E. Wacker Drive, Suite 850
Chicago, IL 60601, USA
Fax: 1-312-644 8557
www.llli.org

INFAC Canada

522 Colborne Street, London, Ontario,
Canada, N6B 2T5
Fax: 1-416-591 9355
info@infactcanada.ca
www.infactcanada.ca

PACIFIC

Australian Breastfeeding Association (ABA)

P O Box 4000, Glen Iris,
VIC 3146, Australia
Fax: 61-3-9885 0866
info@breastfeeding.asn.au
www.breastfeeding.asn.au

Development Officer PINDA

c/o Christine Quested
Nutrition Centre Health Department
Private Mail Bag, Apia, Western Samoa
Fax: 685-218 70
christineQ@health.gov.ws

Your local contact:

WABA does not accept sponsorship of any kind from companies producing breastmilk substitutes, related equipment and complementary foods. WABA encourages all participants of World Breastfeeding Week to respect and follow this ethical position.

ACKNOWLEDGEMENTS

WABA would like to thank the following for drafting and providing inputs towards the final WBW Action Folder: Sarah Amin (Key-writer), Maryse Arendt, David Clark, Elaine Petitot-Coté, Ines Fernandez, Rukhsana Haider, Miriam Labbok, Mimi Maza, Jeanette McCulloch, Rebecca Norton, Amal Omer-Salim, Felicity Savage, Jay Sharma, Julie Smith, Marta Trejos, and Penny Van Esterik. Designed by: C-Square Sdn Bhd. Produced by: Jennifer Mourin. Printed by: JUTAPRINT, Penang.



The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations concerned with the protection, promotion & support of breastfeeding worldwide. WABA action is based on the Innocenti Declaration, the Ten Links for Nurturing the Future and the Global Strategy for Infant and Young Child Feeding. WABA's present Core Partners are also all the main international breastfeeding organisations: Academy for Breastfeeding Medicine (ABM), International Baby Food Action Network (IBFAN), International Lactation Consultant Association (ILCA), La Leche League International (LLL), and Wellstart International (WI). WABA is in consultative status with UNICEF, and is an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC).