Breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants. It is also an integral part of the reproductive process with important implications for the health of mothers.

The World Health Organization (WHO) recommends mothers worldwide to exclusively breastfeed infants for the child’s first 6 months to achieve optimal growth, development and health. Thereafter, they should be given nutritious complementary foods and continue breastfeeding up to the age of 2 years or beyond. This is strongly supported by systematic review of the evidence showing that on a population basis, exclusive breastfeeding of infants with only breast milk, and no other foods or liquids, for 6 months has several advantages over exclusive breastfeeding for 3 to 4 months followed by mixed breastfeeding. The Dietary Guidelines for Children and Adolescents in Singapore aged 0 to 18 years published in 2007 supported the WHO recommendation.

Breastfeeding is the most natural thing in the world and it appears that there is no need to learn about it. The unfortunate fact is that although it seems so natural to breastfeed, the ability to do it successfully does not necessarily come naturally. There are still so many women in the world who simply cannot do it. They find breastfeeding difficult, unacceptable or even downright distressing. Some people consider breastfeeding to be unimportant today because of the practical alternative available, while others think that it is an essential part of good mothering. Both views are, of course, extreme but it is surprising how difficult it is to discuss breastfeeding because the whole subject has become such an emotional one.

The normal newborn baby needs no teaching on how to feed. That is a natural instinct. But breastfeeding no longer comes instinctively to many mothers nowadays and it has to be learnt, just like any other skill. Most mothers need advice and encouragement if they are to succeed. It is so important for mothers to realise that failure to breastfeed usually results from the lack of the right sort of help rather than from their genes. There is so much more to breastfeeding than just getting food into the baby. If the atmosphere is right, almost every woman can breastfeed happily and successfully for as long as she and her baby want.

Today’s society is not geared to helping young mothers to breastfeed, even when they want to. A girl can reach motherhood without ever having seen a baby at the breast. Breastfeeding is rarely mentioned in schools, even in biology and sex education classes. Her friends and relatives are far more familiar with bottle-feeding and, while not actively discouraging her from breastfeeding, they will do a good job in persuading the mother-to-be that a bottle-fed baby will be as contented and healthy as a breastfed one. Through their aggressive advertising and marketing, baby milk manufacturers always claim that their formulae are as good as breast milk, although they are fully aware that it is an impossible task for them to keep up with the advances in the understanding of the composition of human milk.

Though more mothers start to breastfeed their babies now, the vast majority of babies are soon completely or almost completely bottle fed in the following months. A National Breastfeeding Survey conducted by Health Promotion Board in 2001 showed that 95% mothers initiated breastfeeding. At 2 months, 50% were still breastfeeding but at 6 months the proportion was only 21%. Exclusive breastfeeding was not a common practice in Singapore. Most mothers supplemented breastfeeding with formula feeds. Only 23% of the mothers were exclusively breastfeeding at 1 month and the rate dropped to 14% and 0% respectively, at 2 and 6 months.

The fact is that today’s young woman is brought up and educated to think of herself as a wage earner and career woman. When she marries, her income will almost certainly be necessary to start a home and it is difficult for her to think of giving this up when a baby comes along. In any event, she is not thinking of herself in relation to her baby but rather of her role in relation to her husband and job. Therefore, today’s mother does not breastfeed for the simple reason that she has to go back to work very soon. However, if the environment is conducive, many of these mothers can continue to breastfeed their babies successfully even when they return to work part-time or even full-time.

There is still appalling ignorance about breastfeeding. Unfortunately, this ignorance spreads right through the

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medical and nursing professions and so makes it very difficult for today’s mother to know where to turn for good advice. This has been made even more difficult because medical advice itself can be confusing and often contradictory. For example, the clock should have no part to play in breastfeeding and yet mothers are being told to feed three-hourly or four-hourly. There is also the appalling catchphrase to feed “ten minutes each side”, an advice that ignores the basic physiology of lactation. Doctors and nurses are also influenced by society and fashion. It is not unusual to find them paying lip service to breastfeeding and not going all out to convince mothers that it is the very best thing. They may advise mothers according to their own experience or the breastfeeding experience of their own wives.

In Singapore, the Ministry of Health established the Sale of Infant Foods Ethics Committee, Singapore (SIFECs) in 1979, 2 years before the 34th World Health Assembly adopted the WHO International Code of Marketing of Breast-milk Substitutes in 1981. The Committee formulated and implemented the marketing code called the “Code of Ethics on the Sale of Infant Formula Products in Singapore”,4 which has been continually updated to keep pace with the rapidly changing marketing practices of the infant food companies. Together with the Breastfeeding Mothers’ Support Group (Singapore) and the Association for Breastfeeding Advocacy, Singapore (ABAS), they have played important roles in protecting, promoting and supporting breastfeeding in Singapore. However, much more needs to be done.

Twenty years ago, the World Alliance for Breastfeeding Action (WABA) launched its first World Breastfeeding Week (WBW) campaign with the theme “Baby-friendly Hospital Initiative (BFHI)” to strengthen maternity practice to support breastfeeding. WHO and UNICEF jointly developed and launched the Global Strategy for Infant and Young Child Feeding in 2002, reaffirming the targets of the Initiative and described the essential interventions towards exclusive breastfeeding. The BFHI has been implemented in about 16,000 hospitals in 171 countries and it has contributed to improving the establishment of exclusive breastfeeding worldwide.1 It is recognised that improved maternity services help to increase the initiation of breastfeeding, support throughout the health and social systems are required to assist mothers sustain exclusive breastfeeding.

While Singapore has been ranked amongst the countries with the lowest infant mortality and under-5 mortality rates in the world for many years,5 it is ironical that none of the hospitals with maternity service in Singapore is certified “Baby-friendly” under the BFHI. Mothers in Singapore are known to go all the way to give the very best to their children, and yet they seem to be adopting a contented approach towards breastfeeding.

In celebrating the 20th World Breastfeeding Week from 1 to 7 August with the theme “Understanding the Past—Planning the Future”, let us make a pledge in support of the BFHI and move to put Singapore on the world map as a truly “Baby-friendly” nation.

REFERENCE