

<p align="center">The Role of Nutrition and Infant and Young Child Feeding in Addressing the Millennium Development Goals</p> <p align="center">Developed by the UN Standing Committee on Nutrition Working Group on Breastfeeding / Complementary Feeding, 2004</p> <p align="center">Miriam Labbok, MD, MPH, Senior Advisor on IYCFC, UNICEF, Chair</p>		
Goal Number and Targets		Contribution of Infant and Young Child feeding¹
1	<p>Eradicate extreme poverty and hunger Halve, between 1990 and 2015, the proportion of people:</p> <ul style="list-style-type: none"> • whose income is less than \$ 1 a day. • who suffer from hunger. 	Breastfeeding significantly reduces early childhood feeding costs, and exclusive breastfeeding halves the cost of breastfeeding ² . Exclusive breastfeeding and continued breastfeeding for two years is associated with reduction in underweight ³ and is an excellent source of high quality calories for energy.
2	<p>Achieve universal primary education Ensure that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary education.</p>	Breastfeeding and adequate complementary feeding are prerequisites for readiness to learn ⁴ . Breastfeeding and quality complementary foods significantly contribute to cognitive development
3	<p>Promote gender equality and empower women Eliminate gender disparity in primary and secondary education, preferably by 2005 and in all levels of education no later than 2015.</p>	Breastfeeding is the great equalizer, giving every child a fair start on life. Most differences in growth between sexes begin as complementary foods are added into the diet, and gender preference begins to act on feeding decisions. Breastfeeding is uniquely a right of women, and should be supported by society ⁵
4	<p>Reduce child mortality Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.</p>	Infant mortality could be readily reduced by about 13% with improved breastfeeding practices alone, and 6% with improved complementary feeding. ⁶ In addition, about 50-60% of under-5 mortality is secondary to malnutrition, greatly caused by inadequate complementary foods and feeding following on poor breastfeeding practices. ⁷
5	<p>Improve maternal health Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio.</p>	The activities called for in the Global Strategy include increased attention to support for the mother's nutritional and social needs. In addition, breastfeeding is associated with decrease maternal postpartum blood loss, decreased breast cancer, ovarian cancer, and endometrial cancer, as well as the probability of decreased bone loss post-menopause. Breastfeeding also contributes to the duration of birth intervals, reducing maternal risks of pregnancy too close together
6	<p>Combat HIV/AIDS, malaria and other diseases Have halted by 2015 and begun to reverse the spread of HIV/AIDS.</p>	Based on extrapolation from the published literature on the impact of exclusive breastfeeding on MTCT, exclusive breastfeeding in an otherwise untested breastfeeding HIV-infected population could be associated with a significant and measurable reduction in MTCT.
7	<p>Ensure environmental sustainability</p>	Breastfeeding is associated with decreased milk industry waste, pharmaceutical waste, plastics and aluminum tin waste, and excess use of firewood/fossil fuels. ⁸
8	<p>Develop a global partnership for development</p>	The Global Strategy for Infant and Young Child Feeding fosters multi-sectoral collaboration, and can build upon the extant partnerships for support of development through breastfeeding and complementary feeding. In terms of future economic productivity, optimal infant feeding has major implications.

¹ Early and Exclusive Breastfeeding, continued breastfeeding with complementary feeding and related maternal nutrition

² Bhatnagar, S., Jain, N. P. & Tiwari, V. K. Cost of infant feeding in exclusive and partially breastfed infants. *Indian Pediatr.* 33, 655-658 (1996).

³ Dewey, K. G. Cross-cultural patterns of growth and nutritional status of breast-fed infants. *Am. J. Clin. Nutr.* 67, 10-7 (1998).

⁴ Anderson, J. W., Johnstone, B. M. & Remley, D. T. Breast-feeding and cognitive development: a meta-analysis. *Am. J. Clin. Nutr.* 70, 525-35 (1990).

⁵ Labbok M. Breastfeeding: A Women's Reproductive Right. In Keith L (ed), FIGO (International Federation of Gyn/OB) Annual Report, 2006, *Int J Gynaecol Obstet.* 2006 Sep;94(3):277-86

⁶ Jones, G. *et al.* How many child deaths can we prevent this year? *Lancet* 362, 65-71 (2003).

⁷ Pelletier, D. & Frongillo, E. Changes in child survival are strongly associated with changes in malnutrition in developing countries. *J. Nutr.* 133, 107-119 (2003)

⁸ Labbok M. Breastfeeding as a women's issue: conclusions and consensus, complementary concerns, and next actions. *IJGO* 1994; 47(Suppl):S55-S61