

Key messages on breastfeeding and COVID-19

prepared by the Global Breastfeeding Collective

Key messages for all groups

1. Breastfeeding saves lives. Research shows that, by increasing breastfeeding rates, we could save the lives of more than 820,000 children worldwide every year.
2. Breast milk provides antibodies that give babies everywhere a healthy boost and protect them against many infections. Antibodies and bio-active factors in breast milk may fight against COVID-19 infection, if baby is exposed.
3. The corona virus has not been found in breast milk, and transmission via breastfeeding has not been demonstrated.
4. Children with confirmed COVID-19 have generally shown mild symptoms; reported symptoms in children include cold-like symptoms, such as fever, runny nose, and cough.¹
5. Close contact and early, exclusive breastfeeding helps a baby to thrive, and the unparalleled benefits of breastfeeding outweigh any potential risk of transmission.

Messages for breastfeeding mothers with suspected or confirmed COVID-19

1. Close contact and early, exclusive breastfeeding helps your baby to thrive. If you are about to have a baby, you should be supported to breastfeed safely, hold your newborn skin-to-skin, and share a room with your baby.
2. You can breastfeed safely with appropriate hygiene precautions: practice respiratory hygiene during feeding, wearing a mask if it is available; wash hands before and after touching your baby; and routinely clean and disinfect surfaces you have touched.
3. If you are too unwell to breastfeed, there are other ways to safely provide your baby with breast milk, including expressing milk and donor human milk, if available in your area. Ask your breastfeeding counselor or healthcare professional to guide you through options available. If you are unable to maintain your milk supply while you are sick, it may be possible to restart breastfeeding after you recover.
4. Breastfeeding boosts the child's immune system, and the mother's antibodies are passed on to the child through breast milk, helping the child fight infections. If your infant or young child becomes sick with COVID-19 or any other illness, you should continue breastfeeding.

Messages for health workers

1. Health care services to help with breastfeeding, including counselling and skilled lactation support, need to be maintained. In the context of social distancing and overstretched health workers, options for remote support should be explored where necessary.

¹ <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/children.html>

2. All mothers and infants, regardless of COVID status, should be enabled to practice skin-to-skin contact, kangaroo mother care and to remain together and to practice rooming-in throughout the day and night, especially immediately after birth during establishment of breastfeeding.
3. Women with COVID-19 should be advised to breastfeed with necessary hygiene precautions during feeding: they should practice respiratory hygiene, wearing a mask where available; wash hands before touching the baby; and routinely cleaning and disinfecting surfaces they have touched.
4. If a woman with COVID-19 is too unwell to breastfeed, she can be supported to safely provide her baby with breast milk in other ways, including expressing milk and donor human milk, if available. Relactation support should be offered after recovery if breastfeeding was temporarily stopped.
5. Mothers should be counselled to continue breastfeeding should the infant or young child become sick with suspected, probable, or confirmed COVID-19 or any other illness.
6. Health workers should inform mothers about the costs and risks associated with the use of infant formula, especially when access to clean water and hygienic conditions are compromised, increasing the risk of diarrhoea and other diseases.

Messages for governments

1. Governments have a critical role to play to ensure that all mothers have the proper resources and information to breastfeed whether they or their infants have suspected, probable, or confirmed COVID-19.
2. Governments should ensure the rights of women to breastfeed for as long as they want and have access to accurate and unbiased information by implementing and enforcing the International Code of Marketing of Breast-milk Substitutes and subsequent WHA resolutions through national regulations with independent monitoring mechanisms and deterrent sanctions.
3. In the context of the COVID-19 pandemic, governments should pay particular attention to protecting families from the formula industry exploiting the panic and fears of contagion to make false claims about the safety of breastmilk substitutes or intensify their aggressive marketing practices.
4. Governments should not seek or accept donations of breastmilk substitutes (BMS), complementary foods and feeding equipment.
5. Governments should invest more in training healthcare professionals to ensure health facilities and professionals deliver optimal breastfeeding counselling and support to mothers, families, and infants.
6. In countries where human milk banks are available, governments should ensure that they continue to operate through the pandemic to ensure that fragile babies have access to life-saving milk, and donations of human milk can be safely made by following the appropriate hygiene precautions.

Messages for implementing partners

1. Programmes and services to protect, promote and support optimal breastfeeding (early and exclusive) and age-appropriate and safe complementary foods and feeding practices should remain a critical component of the programming and response for young children.
2. Full adherence to the International Code of Marketing of Breast-milk Substitutes and subsequent WHA resolutions (including WHA 69.9 and the associated WHO Guidance on ending the inappropriate promotion of foods for infants and young children) in all contexts in line with the recommendations of IFE Operational Guidance.
3. Implementing partners should not seek or accept donations of breastmilk substitutes (BMS), complementary foods and feeding equipment.
4. Implementing partners can help ensure that mothers receive lactation support beyond the health facility through pre-existing community structures, such as community care groups, mother support groups, and community volunteer home visits.

Sources

- [WHO Q&A on COVID-19, pregnancy, childbirth and breastfeeding](#)
- UNICEF brief: Infant and Young Child Feeding in the Context of COVID-19, March 2020
- Message Framework for the Global Breastfeeding Collective