

the risk of getting HIV from breast milk. In addition, a mother should continue taking her medicines normally for the rest of her life. Taking medicines reduces the chances of passing on the HIV virus to the baby through breastfeeding.

If both mother and baby are HIV positive, Mothers are strongly encouraged to exclusively breastfeed for the first 6 months of life and continue breastfeeding up to two years or beyond.

The HIV-positive mother should strictly follow the good practices of breastfeeding which include the following:

- Correct positioning and attachment of the baby to the breast. This means the baby should suckle well without any pain or discomfort to both mother and baby during breastfeeding.
- Breastfeed your baby exclusively for the first 6 completed months of life. Introduce soft foods thereafter, and continue breastfeeding.
- Ask for advice from a trained health worker at the clinic if you develop any breastfeeding problems such as sore nipples or swollen breasts. This will help in reducing the chances of you passing on the HIV virus to your baby.
- If you decide to stop breastfeeding at any time, you should stop slowly within one month.

- Whether you are HIV-negative or HIV-positive, during pregnancy and breastfeeding:
 - Eat a variety of foods available at home to help your body fight infections.
 - Breastfeed often to produce more milk.
 - Go for treatment immediately if you suspect that you have a sexually transmitted infection (STI).
 - Join a support group to share breastfeeding experiences and learn from each other.

NOTE: If you are HIV positive use condoms to avoid getting infected or re-infected with HIV.



Produced by The National Food and Nutrition Commission and partners with support from SUN-FUND



BREASTFEEDING AND

HIV

BREASTFEEDING AND HIV

Many parents face a challenge with regards to breastfeeding and HIV. Some have little information while others have no information at all.

Knowing about breastfeeding and HIV is very important for everyone; health workers, parents, families and the communities. This will help them make informed choices on the best feeding options for our babies. Firstly, it is important for couples to know their HIV status even before they plan to have a child. Going for voluntary counselling and testing as a couple is very important. If both of you are HIV negative, work at staying HIV negative. If either of you is HIV positive, ask for advice from a health worker to ensure your unborn child is protected from getting infected.



Immediately you know you are pregnant, visit the antenatal clinic and get tested for HIV, if you have not done so already. If you are HIV positive, the health worker will give you some advice and medicines that will help protect your baby against HIV. It is important that you take these medicines and follow the advice that you and

your partner will be given.

Babies can get HIV from their mothers during pregnancy, labour or through breastfeeding. Although babies can get HIV through breastfeeding, the risk is very low. All mothers, including those who are HIV positive can breastfeed. Breast milk is the baby's best food; it contains all the nutrients that babies need.



A trained health worker should be able to give you more information about how to breastfeed properly to avoid passing on the virus to your baby. Some women breastfeed their babies and also give them milk formula before the baby is 6 months old. This practice is called MIXED FEEDING and is dangerous. This practice is dangerous because it may damage the stomach of the baby and make it easier for the HIV virus to enter the body; and the baby might get sick from infections like diarrhoea when the milk formula is not well prepared. Therefore, mixed feeding should be avoided.



IS EXCLUSIVE BREASTFEEDING POSSIBLE WHEN THE MOTHER IS HIV POSITIVE?

Yes. Even if you are HIV positive, you can and should exclusively breastfeed (that is giving your

baby breast milk only) for the first 6 completed months of life. Exclusive breastfeeding reduces more child deaths in the first year of life in infants exposed to HIV compared to mixed feeding and other forms of feeding.

After six (6) completed months, other foods and other milks (including infant formula) can be fed to the baby as breast milk alone is not enough to support the needs of the growing child. At this age the baby's body can fight some infections – therefore reducing the chances of contracting the virus. The baby's body will also be able to breakdown additional foods.

FOR HOW LONG SHOULD AN HIV POSITIVE MOTHER BREASTFEED HER BABY?

HIV positive mothers should exclusively breastfeed their infants for the first 6 completed months of life.

If a baby is born HIV negative or of unknown status and the mother is HIV positive, the baby should be given only breast milk for the first six months. Thereafter, soft foods, high in nutrients, should be introduced while continuing breastfeeding until the child is 12 months old. When a safe diet, high in nutrients cannot be provided, the mother should continue breastfeeding even after 12 months. This means that an HIV positive mother can continue breastfeeding even after 12 months until a safe diet, high in nutrients can be provided for the baby without breast milk. It is important that the child continues receiving HIV medicine even after 12 months to reduce