



Several key outcomes of the Forum II were:

- The Framework for Action formed by the breastfeeding and HIV issue groups on the AIDS pandemic.
- Revitalisation and expansion of the Baby-Friendly Hospital Initiative.
- Higher profile to be accorded for the International Code of Marketing of Breastmilk Substitutes in light of the globalisation and corporatisation process that has been foreseen to envelope the world; and
- A start-up process for developing a World Breastfeeding Charter as a popular mobilisation tool.

The proceedings of WABA Global Forum II is available as a printed report at the WABA Secretariat. Some inspirational moments from the Forum II coordinator:

A key thing that happened at the second Global Forum was the pre Forum HIV Colloquium. I recall lots of last minute registrations. People were paying full fees and didn't care if it was standing room only and that we had no more background papers to give. It was over-subscribed but a highly successful colloquium. That was when the draft WHO/UNICEF HIV and Infant Feeding Framework policy was being examined and discussed. There was a lot at stake. Stephen Lewis of UNICEF made a very strong speech. It was also at this Forum that Reina from the Dutch Foreign Ministry (DGIS), whom we met for the first time in Arusha, witnessed how WABA worked. She was so impressed that the following year WABA got the 5-year core funding from DGIS!

– Susan Siew, former WABA co-Director



International Policy on HIV and Breastfeeding: A Comprehensive Resource (2012)

Thanks to the collective work of Pamela Morrison and a large team of reviewers and experts in the area of HIV and breastfeeding, WABA had the best human resource team available to produce this kit which was a much needed resource, offering clear guidance in the midst of conflicting messages and confusion due to changing HIV and infant feeding guidance in the past decade. Today, the Kit is a ready handbook for policymakers, breastfeeding advocates, national breastfeeding committees, public health advocates, women's health activists, and for those working in the community. These groups have often faced difficulty accessing accurate information and may struggle with misinformation and misunderstanding.