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Breastfeeding and Healthy Complementary Feeding from the Perspective of Food and Nutrition Education: Reflections from Online Social Media Support Group Work

Amamentação e alimentação complementar saudável sob a perspectiva da Educação Alimentar e Nutricional: reflexões a partir do trabalho de um grupo de apoio nas redes sociais on-line

Abstract

Introduction. Breastfeeding and access to healthy complementary feeding should be valued as a human right to adequate food. **Objective.** To present the convergence between promotion and support of breastfeeding and healthy complementary feeding developed by Women Supporting Women in Breastfeeding Group (Mulheres Apoiando Mulheres na Amamentação - MAMA) with Food and Nutrition Education Framework principles (FNE) for Public Policies. **Development.** This essay arises from reflecting on health care and education practices based on MAMA Group experience. In this regard, the context in which the group originated and the characteristics of this interinstitutional university extension program were described; an effort was made to establish the relationship between each of the nine FNE Framework principles and the alignment of the group's premises and organization, its voluntary modus operandi on virtual social networks, and production of original materials based on counseling; main lessons and challenges of this innovative initiative for promoting and supporting breastfeeding and healthy complementary feeding were presented. **Conclusion.** Collaboration with the Unified Health System (SUS), through consultations with mothers and families regarding their doubts and concerns on the mentioned themes, the training of professionals, and the development of related research, as well as the opportunity to establish partnerships with other member countries of the Community of Portuguese Language Countries, have been guiding the activities of Women Supporting Women in Breastfeeding Group, contributing to promoting healthy eating habits and, consequently, improving the quality of life.

Keywords: Breastfeeding, Complementary Feeding, Food and Nutrition Education, Online Social Networks.

Resumo

Introdução. A amamentação e o acesso à alimentação complementar saudável devem ser valorizados enquanto direito humano à alimentação adequada. **Objetivo.** Apresentar a convergência entre a promoção e o apoio à amamentação e à alimentação complementar saudável desenvolvidos pelo grupo Mulheres Apoiando Mulheres na Amamentação (MAMA) com os princípios do Marco de Educação Alimentar e Nutricional (EAN) para Políticas Públicas. **Desenvolvimento.** O presente

ensaio surge da reflexão sobre as práticas de cuidado e educação em saúde, a partir da experiência do Grupo MAMA. Nesse sentido, foram descritos o contexto em que se originou o grupo e as características desse programa de extensão universitária interinstitucional; buscou-se estabelecer a relação de cada um dos nove princípios do Marco de EAN com o alinhamento das premissas e organização do grupo, seu *modus operandi* voluntário nas redes sociais virtuais e a produção de materiais autorais que são baseados no aconselhamento; apresentaram-se os principais aprendizados e desafios dessa iniciativa inovadora de promoção e apoio à amamentação e alimentação complementar saudável. **Conclusão.** A colaboração para o Sistema Único de Saúde, por meio de atendimentos de mães e famílias com dúvidas e preocupações nas temáticas referidas, da formação de profissionais e do desenvolvimento de pesquisas correlatas, bem como a oportunidade do estabelecimento de parceria com demais países membros da Comunidade de Países de Língua Portuguesa, vem orientando as atividades do Grupo Mulheres Apoiando Mulheres na Amamentação, que contribuem para a formação de hábitos alimentares saudáveis e, conseqüentemente, para a melhoria da qualidade de vida.

Palavras-chave: Amamentação. Alimentação Complementar. Educação Alimentar e Nutricional. Redes Sociais Online

INTRODUCTION

Promoting breastfeeding is the first action in promoting Food and Nutritional Security (FNS) and should be valued as a practice promoting the human right to adequate and healthy food.¹⁻³ In recent decades, much progress has been made regarding advancements in this field of knowledge, its organization as a public health policy, its dissemination to the population, and consequently, the increase in its prevalence.⁴⁻⁷ Within this context, strategies of Food and Nutrition Education (FNE) are powerful tools for promoting breastfeeding and healthy complementary feeding (HCF).

The understanding of breastfeeding as a multidimensional practice broadens the perspectives of health promoters and implies need for investment in cross-cutting actions involving various government sectors and civil society.⁸ These actions run through the formation of dietary habits, both through the opportunity to experience breastfeeding from birth,^{9,10} as well as by having this right guaranteed in early childhood education environment. Thus, support for and promotion of the practice and culture of breastfeeding and healthy complementary feeding should be incorporated into the school's political-pedagogical project as one of Food and Nutrition Education (FNE) themes aiming to a conceptual alignment and to be assimilated by the school community from Food and Nutritional Security (FNS) perspective for the full development of children.^{11,12}

Goals aimed at improving investments in breastfeeding have been agreed upon globally, such as those proposed by Global Breastfeeding Collective, a partnership among 20 international agencies, which align with the Sustainable Development Goals for 2030.⁵ Brazil stands out on the international scenario for its political organization promoting, protecting, and supporting breastfeeding, with an impact on increasing the prevalence of exclusive breastfeeding for six months from 4.7% in 1986 to 45.8% in 2019.^{6,13} This recognition also occurred in cases such as the Innocenti Declaration in 1991; Brazilian Standard for the Marketing of Infant Foods at the 34th World Health Assembly, and Maternity Protection in Convention No. 103 of International Labor Organization of 1952, in which Brazil responded with local legislation capable of meeting recommendations coming from these agreements, implementing actions such as the 'Hospital Amigo da Criança' (Child-Friendly Hospital) Initiative and legislation protecting working mothers.¹⁴

Triggered in 2020, the health crisis resulting from pandemic caused by the SARS-CoV-2 coronavirus, which causes Covid-19 disease, altered daily life, and led to various adaptations. Among these, there was the difficulty in accessing comprehensive health care for mother-baby dyad, impacted by the sudden reorganization of health services to prioritize Covid-19 cases and by the recommendation for social distancing.¹⁵ Many professionals and users began to prioritize virtual care, avoiding even greater overcrowding of health institutions.¹⁶ In these circumstances, teachers from healthcare courses in Rio de Janeiro, aware of the demand for promoting breastfeeding through virtual technology, proposed a coordinated action with health professionals and university students, which gave rise, in July 2020, to Women Supporting Women in Breastfeeding Group (Mulheres Apoiando Mulheres na Amamentação - MAMA).

Therefore, understanding the nature of FNE, within the scope of actions, MAMA Group organizes itself so that they dialogue with Food and Nutrition Education Reference Framework for Public Policies principles (FNE Framework).¹⁷ This article aims to present the convergence between promotion and virtual support for breastfeeding and HCF developed by MAMA Group, with FNE Framework principles.

Women Supporting Women in Breastfeeding Group (Mulheres Apoiando Mulheres na Amamentação - MAMA)

Nutrition and Nursing professors from public universities were mobilized by Child's Food of the Alliance for Adequate and Healthy Food thematic group (Comida de Criança da Aliança pela Alimentação Adequada e Saudável - Aliança) to coordinate responses to Covid-19 crisis concerning promotion and support of breastfeeding. This working group defined three lines of action: to systematize the knowledge being produced on the topic; to organize a network of professionals who volunteered to provide online assistance to nursing mothers concerning doubts or difficulties regarding breastfeeding or healthy complementary feeding; and to produce educational materials suitable for virtual social networks to support communication on the topic.¹⁸

In the development of the work fronts, it is worth noting the rapid formation dynamics of the voluntary support network, with online and free assistance. Initially, it was possible to count on the prompt acceptance of health professionals linked to the Interinstitutional Technical Group on Breastfeeding of the State Department of Health of Rio de Janeiro (Grupo Técnico Interinstitucional de Aleitamento Materno da Secretaria de Estado de Saúde do Rio de Janeiro - GTIAM/SES-RJ). However, for these volunteers, it was a major challenge to be on virtual social networks in a professional manner. Overcoming this challenge came with students from Nutrition and Nursing courses participation, giving rise to MAMA Group. The integration between breastfeeding consultants (teachers and/or health professionals) and technological supporters (students or health professionals with less experience in breastfeeding but familiar with the use of social networks) has enabled exchanges of technical knowledge, experiences, and affection.

The service provided to the population is carried out through online consultations, which take place in daily shifts form, from 9 am to 5 pm, conducted by at least one pair consisting of a breastfeeding consultant and a technological supporter, via private written messages, audio, or video, as well as by making available copyrighted materials on social media platforms (Instagram® and Facebook®).^{19,20}

Thus, what started as an emergency response to the pandemic has been consolidated and became established as an interinstitutional university extension project involving Nutrition Faculty of Federal Fluminense University, Nutrition Institute and Nursing School of State University of Rio de Janeiro, and Anna Nery Nursing School of Federal University of Rio de Janeiro, with the support of Aliança and GTIAM/SES-RJ. More recently, this initiative has been updated to an interinstitutional extension program, as it effectively encompasses teaching and research activities. Only one of the essay's authors is not part of the interinstitutional extension program titled "Online Support for the Maternal and Child Population: Women Supporting Women in Breastfeeding Group". This author is part of the research group linked to the program.

On MAMA Group's Instagram® and Facebook® profiles, both mothers and their families, as well as healthcare professionals, have access to a vast array of materials in different formats (posts, pamphlets, videos, and live sessions). These materials were developed based on the identification of the main questions and difficulties related to breastfeeding and healthy complementary feeding during online consultations or by the opportunity to address various topics related to maternal and child health with emphasis on feeding. They stand out as well for their foundational characteristics: having a visual identity; presenting a direct and simple language; and being easily shareable.

The process of developing materials follows some principles defined since MAMA Group formation: 1) Being based on scientific evidence; 2) Disseminating knowledge published by national and international health organizations, such as Dietary Guidelines for Brazilian Population (*Guia Alimentar para a População Brasileira*)²¹ and Dietary Guidelines for Brazilian Children Under 2 Years of Age (*Guia Alimentar para Crianças Brasileiras Menores de 2 Anos*)²²; 3) Respecting and valuing cultural diversity and being anti-racist; 4) Promoting autonomy through health literacy; 5) Valuing interprofessional work; 6) Being free of conflicts of interest; and 7) Being guided by planning, monitoring, and assessment.

The development process involves dynamic interaction among volunteers, which occurs exclusively using virtual technology. This process ranges from identifying topics to be organized into a publication schedule to evaluating the performance of each material, based on feedback from mothers or professionals when using it. Besides, metrics are analyzed to check the engagement rate, which measures the followers' involvement concerning the content published on a profile. This rate is calculated by the number of interactions (likes, comments, shares, and saving posts) divided by the number of followers.

Recently, MAMA Group has incorporated other interaction strategies, such as the publication of short videos (stories or reels) to address general topics that strengthen healthy regional habits and promote sustainable consumption, for example. The publication schedule planning included topics linked with the cultural calendar dates. This playful strategy aims to bring lightness to communication and greater proximity between volunteers and their followers..

MAMA Group and Food and Nutrition Education Reference Framework activities for Public Policies

The first point worth highlighting is the alignment of premises and organization of MAMA Group with Food and Nutrition Education concept (FNE). According to the FNE Framework, "Food and Nutrition Education is a field of continuous and permanent knowledge and practice."¹⁷ With this in mind, daily, in addition to online consultations with mothers and their families, there are exchanges of information and discussions related to breastfeeding and healthy complementary feeding among all volunteers in the group, "in a transdisciplinary, intersectoral, and interprofessional manner." Activities are carried out considering different topics related to the theme and complementary knowledge from healthcare areas of professionals who are part of MAMA Group (nutrition, nursing, speech therapy, and pediatrics).

Another characteristic of MAMA Group's action, aligned with the FNE Framework, is the pursuit of "promoting autonomous and voluntary practice of healthy eating habits" through the promotion of breastfeeding and healthy complementary feeding. The application of counseling principles, in online consultations and in the guidance of posts and other educational materials, reinforces this intention, as well as fulfills another proposal of the FNE Framework, towards the construction of "problematizing and active educational resources that facilitate dialogue with individuals."¹⁷

In view of the centrality of principles of FNE Framework for educational practices qualification, a comparison was made between each of the nine principles and the actions carried out by MAMA, and the theoretical references that support such practices were identified (Table 1).

Table 1. Articulation Matrix of Food and Nutrition Education Framework principles for Public Policies aligned with premises and actions of Women Supporting Women in Breastfeeding Group. Rio de Janeiro, 2024.

| Food and Nutrition Education Framework Principle for Public Policies | MAMA Group Action | Theoretical references |
|--|---|--|
| Social, environmental, and economic sustainability (Principle I) | Produce educational materials that highlight the relationship between breastfeeding and complementary feeding with social, environmental, and economic sustainability. Promote conscious consumption. | PNAN, 2013. Available at: https://bvsms.saude.gov.br/bvs/publicacoes/politica_nacional_alimentacao_nutricao.pdf <i>Dietary Guidelines for Brazilian Children Under 2 Years of Age- Guia Alimentar para Crianças Brasileiras Menores de 2 Anos</i> , 2019. Available at: http://189.28.128.100/dab/docs/portaldab/publicacoes/guia_da_crianca_2019.pdf |
| Comprehensive approach to food system (Principle II) | Guide the provision of fresh foods, preferably those in season and minimally processed. Guide the use of processed foods in culinary preparations and discourage offering ultra-processed foods. Guide the provision of potable water, as well as preparation method and use of appropriate utensils. Promote the consumption of organic and agroecological foods for both child and mother during pregnancy and breastfeeding. Encourage the production of home gardens. Promote conscious consumption. Produce materials on NOVA classification of foods and food groups. | <i>Guia Alimentar para Crianças Brasileiras Menores de 2 Anos</i> , 2019. Available at: http://189.28.128.100/dab/docs/portaldab/publicacoes/guia_da_crianca_2019.pdf <i>Dietary Guidelines for Brazilian Population - Guia Alimentar para a População Brasileira</i> , 2014. Available at: https://bvsms.saude.gov.br/bvs/publicacoes/guia_alimentar_populacao_brasileira_2ed.pdf 6ª CNSAN, 2023 (Base document). Available at: https://www.gov.br/secretariageral/pt-br/consea/conferencia/documento-base-da-6-cnsan-09-08-23_site.pdf |
| Valuing local food culture and respecting diversity of opinions and perspectives, considering the legitimacy of knowledge of different natures (Principle III) | Value respect for diversity in MAMA's consultations, considering regional particularities. Create visual identity as an expression of women diversity in relation to their cultural, regional, and ethnic-racial aspects. . | PNAN, 2013. Available at: https://bvsms.saude.gov.br/bvs/publicacoes/politica_nacional_alimentacao_nutricao.pdf PNAISC –Ordinance nº 1130/2015. Available at: https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/s/saude-da-crianca/pnaisc Lawnº 12.288, 20 July 2010. Available at: https://www.camara.leg.br/proposicoesWeb/pr op_mostrarintegra?codteor=1831258#:~:text=L EI%20N%C2%BA%2012.288%2C%20DE%202 0%20DE%20JULHO%20DE%202010&text=Art, demais%20formas%20de%20intoler%C3%A2 ncia%20%C3%A9tnica. <i>Guia Alimentar para Crianças Brasileiras Menores de 2 Anos</i> , 2019. Available at: http://189.28.128.100/dab/docs/portaldab/publicacoes/guia_da_crianca_2019.pdf |

Table 1. Articulation Matrix of Food and Nutrition Education Framework principles for Public Policies aligned with premises and actions of Women Supporting Women in Breastfeeding Group. Rio de Janeiro, 2024.

| Food and Nutrition Education Framework Principle for Public Policies | MAMA Group Action | Theoretical references |
|--|---|--|
| Food and feed as references; valorization of cooking as an emancipatory practice (Principle IV) | Value human milk as the first natural food of life. Emphasize the importance of fresh and minimally processed foods as a basis of nutrition. Explain that preparing food enables the development of autonomy and generates self-care. Promote cooking through video posts and cards about maternal, infant, and family nutrition. Ratify the need to confront the marketing culture of the infant formula industry. | <i>Guia Alimentar para Crianças Brasileiras Menores de 2 Anos</i> , 2019. Available at: http://189.28.128.100/dab/docs/portaldab/publicacoes/guia_da_crianca_2019.pdf Law nº11.265/2006. Available at: https://www.planalto.gov.br/ccivil_03/_ato2004-2006/2006/lei/111265.htm Resolution nº 9.579/18. Available at: https://www.planalto.gov.br/ccivil_03/_ato2015-2018/2018/decreto/d9579.htm |
| Promotion of self-care and autonomy (Principle V) | Use Breastfeeding Counseling approach with the woman as the protagonist. Consider structural factors that affect self-care. Strengthen mother and family members self-esteem. Support and reinforce women's bond with health network in the territory where they are assisted, with emphasis on Primary Health Care | World Health Organization: Guideline Counseling of women to improve breastfeeding practices, 2018. Available at: https://www.who.int/publications/i/item/9789241550468 PNPS 2017 –Consolidation Ordinance nº2/2017. Available at: https://bvsms.saude.gov.br/bvs/saudelegis/gm/2017/prc0002_03_10_2017.html#ANEXO PNAISC - Ordinancenº 1.130/2015. Available at: https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/s/saude-da-crianca/pnaisc |
| Education as a permanent process and generator of autonomy and active and informed participation of individuals (Principle VI) | Value educational process that underpins interaction during consultations. Produce educational material collectively, based on the needs identified needs during consultations. | PNEPS 2004. Available at: Ordinance nº 198/GM, February 13,2004. |
| Diversity in practice settings (Principle VII) | Guide families who speak Portuguese, regardless of their location. | PNPS 2017 –Consolidation Ordinance nº2/2017. Available at: https://bvsms.saude.gov.br/bvs/saudelegis/gm/2017/prc0002_03_10_2017.html#ANEXO |
| Intersectorality (Principle VIII) | Disseminate the mission of MAMA in various settings within Health and Education institutions both nationally and internationally. Prioritize breastfeeding and healthy complementary feeding in university spaces for academic directories in Brazil. | PNAISC - Ordinance 1130/2015 Available at: https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/s/saude-da-crianca/pnaisc PNPS 2017 –Consolidation Ordinance nº2/2017. Available at: https://bvsms.saude.gov.br/bvs/saudelegis/gm/2017/prc0002_03_10_2017.html#ANEXO |
| Planning, evaluation, and monitoring of actions (Principle IX) | Plan, evaluate, and monitor actions in a procedural manner within the work dynamics. | PNPS 2017 –Consolidation Ordinance nº2/2017. Available at: https://bvsms.saude.gov.br/bvs/saudelegis/gm/2017/prc0002_03_10_2017.html#ANEXO |

MAMA's educational materials production values Principle I by highlighting breastfeeding as a practice embraced by various cultures, beneficial to the planet as it does not require extensive use of natural resources like water, does not generate waste or pollution, and saves time and monthly expenses on infant formula purchases, among many other costs associated with early weaning.^{22,23} Economic benefits of breastfeeding also include reducing healthcare costs due to fewer hospitalizations, preventing thousands of deaths among children and women, lowering the incidence of non-communicable chronic diseases such as obesity and diabetes, and increasing intelligence quotient (IQ), which subsequently enhances educational attainment and monthly income.⁷

Principle II approach is addressed in consultations regarding new foods introduction. Recommendations on organic and agroecological foods consumption are made, as there is a wide range of studies confirming health risks associated with pesticide use, including detection of their residues in breast milk.²⁴

Convergence with Principle III begins with MAMA's logo creation and extends to defining visual identity of produced materials, aiming to represent women diversity concerning their cultural, regional, and ethnic aspects. Work primary audience is families served by Unified Health System (SUS), which, although it is a universal system, mostly serves Black women. Often, materials available in literature and digital media do not represent races and ethnicities diversity.²⁵ Furthermore, respecting this diversity is valued in MAMA's consultations by taking into account regional particularities that influence cultural practices related to breastfeeding and family nutrition.

Regarding Food and Nutrition Education Framework Principle IV, it is worth highlighting MAMA Group mission to emphasize human milk as the first natural food in life, which helps build the child's palate, preparing them for flavor changes during new foods introduction, since the taste of breast milk is influenced by mother's diet.²⁶ Fresh and minimally processed foods, which should form the basis of our diet from HCF, need to be prepared for consumption. Knowing how to prepare food promotes autonomy and self-care,²⁷ as referred to in Principle V. Therefore, preparing meals at home and involving child and other family members fosters affection and strengthens bonds among its members, contributing to consumption reduction in ultra-processed foods.²⁸ Dietary Guidelines for Brazilian Children under 2 years of age (*Guia alimentar para crianças brasileiras menores de 2 anos*) is in line with this principle and, as pointed out, is one of the main references used by MAMA Group, which promotes cooking through video posts and cards about feeding the mother, the baby, and the whole family.²²

Similarly, messages from MAMA Group confirm the need to tackle the marketing culture of infant formula industries.²⁹ Brazil has legislation regulating the promotion of products that compete with breastfeeding, based on International Code of Marketing of Breast-milk Substitutes (1981). Brazilian Norm for Marketing of Infant Foods and Infant Formulas, Nipples, Pacifiers, and Baby Bottles (NBCAL) is one of the most advanced legislations worldwide, nevertheless, it is not updated for digital marketing strategies, like the International Code, especially on social media.³⁰⁻³²

Breastmilk substitute industries have been benefiting from digital marketing to increase intention of using their products³³ and, consequently, boost sales,³⁴ affecting breastfeeding outcomes, which poses a challenge for regulatory institutions overseeing these products. The strategies of these companies often include posts with images and words idealizing the use of breast milk substitutes and promotional offers such as coupons, samples, and discount codes.³³

A social listening survey found that posts about breast milk substitutes had a reach three times larger than posts about breastfeeding, indicating that the greater the reach, the higher the number of views, thereby increasing the chances of interaction and purchase. Advertisers show a significant increase in the sale of

breast milk substitutes with this type of advertising, confirming that digital marketing impacts decisions regarding infant feeding.³³

Marketing ability to promote use of breast milk substitutes and consumption of unhealthy foods, such as ultra-processed ones, is already well-established and associated with reduced health. A study involving 126 countries showed that for every kilogram of formula sold per child, breastfeeding rates were 1.9 percentage points lower.³⁴

This context reinforces the importance of prioritizing the rights of children and women for protecting the families from this type of commercialization,³⁴ underscoring the need for ongoing investments in public health campaigns and marketing in favor of breastfeeding,²⁹ as being carried out by MAMA Group.

Principle V begins with breastfeeding and HCF promotion, which goes beyond cooking, as seen in the discussion of the previous principle. Another aspect to be considered, as it is fundamental to MAMA, is Breastfeeding Counseling.³⁵ In this approach, the woman is the protagonist. However, the responsibility for breastfeeding should lie with all those directly or indirectly involved with families experiencing this moment. Therefore, attention must be paid to factors affecting this practice (such as gender inequalities and the pressure from the infant formula industry, which exploits families' concerns about child nutrition), as the goal must be to strengthen the self-esteem of mothers and family members.^{36,37}

It's worth also highlighting that one of the theoretical frameworks of the National Strategy for Breastfeeding and HCF Promotion in the Unified Health System (SUS)²³ is critical-reflexive education in breastfeeding and HCF educational process, emphasizing the active participation and autonomy of individuals in activities related to their well-being. Thus, MAMA Group aligns itself with SUS, constituting yet another opportunity for dissemination of literacy in breastfeeding and HCF.

Enabling the quick resolution of doubts regarding: breast milk production; baby's signs of hunger and satiety; techniques for preventing engorgement or nipple fissures; techniques for expressing and storing breast milk, as well as supporting women with difficulties regarding proper latch and positioning for breastfeeding or introducing solid foods, can facilitate the establishment of breastfeeding and HCF in critical phases, such as the first months of life, return to work, or adaptation to nursery school. Additionally, MAMA's principle is to support and reinforce women's bond to local healthcare network where they receive care. Therefore, whenever the need for an in-person consultation is observed, guidance is provided regarding possible SUS healthcare units near their homes.

Principle VI is evident during the production of MAMA materials, where there is an opportunity for ongoing education based on counseling among volunteers. This is provided through the phase of researching and discussing scientific evidence, which anchors production and revision of foundational texts; through the creation of artworks, where coherence with the guiding principles mentioned is observed; and through the review of the products to be disseminated.

Moreover, education permeates interaction during consultations, which involves active and close listening to the reported concerns, with recognition of different forms of knowledge and practices. Often, in addition to exchanging written messages and providing educational materials alongside the conversation with mothers, resources available on digital platforms such as audio or video calls are used to facilitate the establishment of a bond, with empathy and listening as a compass, always respecting users' privacy as well as their personal and health information.

During these exchanges with the mother and her family, MAMA Group volunteers need to be attentive to counseling skills: using open-ended questions; accepting what the mother thinks and feels; not judging

her; praising her; helping her to analyze the causes of her problems and reflecting on options in order to empower her and contributing to promoting her autonomy in decisions regarding what would be best for herself and her child.³⁵

Thus, in MAMA Group, counseling skills enable the shared construction of knowledge, practices, and contextualized solutions, not only in discussions of cases assisted, in original materials development, in ongoing education but in work process evaluation.

Regarding Principle VII of the Food and Nutrition Education Framework, which addresses diversity in practice settings, a direct relationship with MAMA activities can be observed. The virtual environment allows reaching different situations of action and contact with a wide diversity of Portuguese-speaking population groups, regardless of their location.

In three years of existence, the vast majority of over 10 thousand followers of MAMA's social media profile on Instagram® are from Brazil (91.6%), but users from Portugal (4.8%), the United Kingdom (0.4%), and the United States (0.4%) are also observed, for example. Therefore, in consultations, it is essential to observe the real needs of the woman, using various tools (text and/or audio messages, video calls, and sending educational materials) that best support the issue at hand.

Investing in intersectoriality, Principle VIII of the Food and Nutrition Education Framework, is one of MAMA Group goals that requires greater focus for its development. Volunteers, in their various interactions with health and education institutions, both nationally and internationally, seek to disseminate the mission of MAMA. Additionally, a promising start was being able to count on the support of Aliança, a coalition created to advocate for healthy eating, based on scientific evidence and free of conflicts of interest.

Other examples of publicize the work in the search of partners for the fight for the right of university women to breastfeed were participating in university extension events and advocating for this issue in academic directories in Brazil.

Planning, assessment, and monitoring activities of MAMA's actions, referred to in Principle IX of Food and Nutrition Education Framework, occur in a procedural manner within the work dynamics, based on the principles and strategies elected by the group as guiding this action, which are: counseling-based welcoming, problem-solving, relationship with local SUS networks, humanization, and compliance with official SUS policy recommendations. This assessment is based on consultations records that take place during shifts and, in a structured manner, on the analysis of a data spreadsheet, which is consolidated monthly. Additionally, there is an analysis of online social network metrics, as mentioned earlier. Assessment is regularly conducted in team meetings held monthly. During these meetings, actions are planned to enhance consultations, such as copyright materials production that, besides facilitating interaction with users on platforms, are made available for public use. Continuous education, participation in scientific events, research development, communication strategies, as well as establishment of national and international partnerships, are also planned.

Learnings for Breastfeeding and Healthy Complementary Feeding Care in SUS

MAMA Group has emerged as an innovative initiative for promotion of breastfeeding and healthy complementary feeding (HCF). West & Farr³⁸ report that innovation involves intentional introduction and application of new ideas, processes, products, or procedures within a group or organization, aiming to produce significant benefits for individuals and community. In this regard, innovation in health primarily seeks to improve Unified Health System (SUS) quality.

Among innovative aspects of the initiative described here, use of digital technologies to provide support and guidance to women stands out, emphasizing care and bond through the incorporation of principles of critical and reflective education. Thus, MAMA presents itself as a channel on virtual social networks for information exchange, using language that facilitates dialogue with women and families, addressing their daily needs and issues. Additionally, it promotes actions to combat aggressive marketing of ultra-processed infant formulas.

Although this initiative was proposed during a period when face-to-face meetings were discouraged due to Covid-19 pandemic, the working model developed constitutes a learning experience that can be carried forward into the post-pandemic context as a powerful strategy in supporting actions of SUS Network, given the increased use of digital information and communication technologies by society.

MAMA Group virtual social media profiles are also being accessed by healthcare professionals and students, which can inspire in-service training activities and local initiatives development. In this way, MAMA Group work can support managers, professionals, and other healthcare workers, as well as different actors in society, in implementing health education strategies, both virtual and in-person, in the scope of prenatal care and good practices in labor and childbirth, and in comprehensive healthcare for children and women in primary healthcare. Thus, as an interinstitutional university extension program, MAMA Group is collaborating with the role of health courses in supporting Unified Health System (SUS), through the training of professionals and research development..

FINAL CONSIDERATIONS

MAMA's actions alignment with FNE Framework principles reaffirms the group's commitment to ensuring health and promoting breastfeeding and HCF practices as a human right to adequate and healthy food, within the context of healthy and sustainable food systems. Therefore, dialogical and practices that foster welcoming, bonds and autonomy stand out.

In this regard, the extensive theoretical foundation on the topic of breastfeeding and healthy complementary feeding underpins the development of FNE actions to promote these practices as a human right to adequate and healthy food that should be ensured, according to Brazilian Constitution.

The close relationship between MAMA Group and Health Care Network (Rede de Atenção à Saúde - RAS), guiding women in their search and valuing actions developed within this network, promotes and consolidates a system that positively impacts the promotion of healthy habits and, consequently, improves the quality of life.

Strategies development that complements actions developed by Health Care Network (Rede de Atenção à Saúde - RAS) is an opportunity that aligns with the advances achieved, which have contributed to increased prevalence of breastfeeding and healthy complementary feeding (HCF). These results reflect continuous and progressive efforts driven by the management and political coordination of an interfederative, intersectoral, interinstitutional, supportive, collaborative, and coordinated network.

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Contributors

Rito RVF, Damião JJ, Farias SC, Tavares EL, Rodrigues EC, Pereira JR, Figueiredo MS and Peres PLP. All authors participated in all stages of the study, as well as in the review and approval of the version to be published.

Conflict of Interest: The authors declare that there are no conflicts of interest.

Received: June 3, 2023

Accepted: April 12, 2024