August 2015

HEALTH RESEARCH AND SOCIAL DEVELOPMENT FORUM (HERD)

Vol 2



[EXCLUSIVE BREASTFEEDING: A STEP TOWARDS CHILD'S GOOD HEALTH]

August 1 to 7 of each year is marked each year globally as Exclusive Breastfeeding Week. In Nepal too, numerous programmes have been launched to improve the health conditions of children. The slogan for this year is: "Breastfeeding and Work: Let's Make It Work". Exclusive Breastfeeding in all circumstances remain the cornerstone of ensuring a child's good health.



Ganga Karki, 23 of Kavre is expecting her second child. Karki who is currently residing at Hadigaun gave birth to a baby boy four years ago. She used to work as a housemaid but left it from the seventh month of pregnancy thinking it was the best decision for her child. She did exclusive breastfeeding for more than six months and then started providing other supplements.

Sharing her experience she said, "Initially I was worried that the decision would harm us economically as me and my husband didn't make much money then but now I feel that was the correct move. It wasn't just good for his health it was helpful economically as well, the powder milk costs a lot".

She started working in the house nearby when her son turned one, so that she can earn some money and spend time with her son. As her son was fit and healthy and they started earning well Karki planned for another child as she thought the gapping was perfect.

Pramuna Dahal, 22 of Ramechhap who is currently residing at Pulchowk, Lalitpur is still breastfeeding her 1 year old son. Dahal says that she does not provide other supplements as the milk is adequate for him. She says she won't work if she doesn't get a good job as she feels keeping her child's health at risk for little income will be stupidity and she doesn't want to depend upon others for her child's health. She said, "I am lucky that my husband has been earning enough for us but for those who aren't economically stable they do not have any option. I make sure that my child gets all the nutrients so for that I also eat lots of nutritional food".

She added, "Even with a small amount of money and food products available at home, we can manage to provide nutritious food like *leeto*. If someone thinks like this, no mother will be forced to work outside".

While talking to some of the fathers, they seemed unaware about how the child is being fed and if they are getting adequate care or not. All of them responded, "We go out to work, the baby stays with their mother and she takes care of him/her so I have no idea about it."

The scenario of exclusive breastfeeding in urban and rural area is different. Experts opine that the low level of knowledge and awareness is also the reason for lack of adequate breastfeeding. In rural areas, although mothers spend most of the time with their child due to lack of sufficient knowledge regarding the matter, they do not carry out exclusive breastfeeding. Same is the scenario of non-working mothers in urban areas.

Even though various mothers are leaving their job behind to feed the child, many stop breastfeeding in two months. Mostly in the urban areas the mothers do not get to breastfeed their child as they do not get enough maternity leave. There is also no provision of child care centres at the offices which would have eased the problem of working mothers. It can also be said that government and non-government organizations in Nepal are yet to be mother-friendly.

Every year the first week of August i.e. (1-7 August) is marked as exclusive World Breastfeeding Week globally. The theme for this year is: "Breastfeeding and Work: Let's Make It Work". According to <u>WHO</u>, the day is recognised in more than 170 countries to encourage breastfeeding and improve the health of babies around the world.

The day is being observed in Nepal by organising awareness programmes at primary health centres, district development committees, VDCs, municipalities and public places. The Nepal Demographic Health Survey-2011 shows that 45 percent babies are breastfed within the first hour of birth and 85 percent within a day. Exclusive breastfeeding is carried out till 3.4 months in urban areas while in rural areas it is carried out until 4.3 months.

According to National Household Survey 2012 (conducted by HERD with the support Health from Nepal Sector Support Programme), four-fifths of infants from the Terai (80%) were exclusively breastfed, compared to less than half from mountain districts (47%). Significant differences in exclusive breastfeeding between caste/ethnic groups were also observed, with Muslims (92%) more likely to breastfeed exclusively than Brahmins/Chhetris The (55%). Comprehensive District Assessment on Maternal and Child Health in Mugu (conducted recently by HERD with the support from KOICA) reveals that among the women, with under-5 children, 74.4% women in the in the six VDCs nearby the district headquarter and 62.2% in two VDCs far from the district headquarter reported that they exclusively breastfed their child.

Breastfeeding is regarded as a normal way to provide nutrition to the child. Experts recommend for exclusive breastfeeding up to six months. There are various benefits of breastfeeding for both mother and the child. It protects the child from various diseases and allergies as well as prevents them from being sick; reduces the risk of SIDS (Sudden Infant Death Syndrome). Breastfeeding also boosts the intelligence of the child and protects them from obesity. Studies have also shown that the more the women breastfeed, the more they are protected from breast and ovarian cancer.

WAY FORWARD

Public Health officials of HERD working in the sector of Maternal and Child Health express their opinions about improving exclusive breastfeeding practice:



Dr Sushil Baral

Breastfeeding, being a nutritional necessity is also closely linked with behavior change. Our health system, unfortunately, is yet to design specific interventions among the target groups. Lack of exclusive

breastfeeding practice is a problem not just among poor households in rural settings but also among the elite groups in urban settings. Therefore, Behaviour Change Communication approach should integrated within the Primary Health Care systems. These approaches therefore, should be embedded with our cultural practices. Locally tailored and culturally sensitive interventions are therefore critical exclusive to promote improved breastfeeding practice.



Abriti Arjyal

To promote exclusive breastfeeding organizations must boost, be supportive and increase days for maternity leave. Friendly environment must be created where they can work from home. Child Care Centers must be established. We know that exclusive breastfeeding means up to six months but

there is not enough leave provisions for working women. Most of the women are career oriented; they compromise and stop breastfeeding the child because of the fear of losing job.

It is very necessary to promote exclusive breastfeeding. Currently the scenario and context in Nepal is different, it's not as mentioned in the policy. Our health policies, plans and programmes should be developed giving high consideration to the actual situation of the targeted groups.

The government has been raising awareness about the post-natal care and the women's are also provided counselling by the health workers. But still they don't practice it fully. The issue must also be seen in a holistic approach.

The people must be aware how to benefit from the government health facility. Friendly environment must be created by establishing child-centres in various places as well as the public should also be supportive.

CONTRIBUTORS:

- DR. SUSHIL BARAL
- SUDEEP UPRETY
- KRITAGYA REGMI

CORRESPONDENCE:

• Sudeep Uprety, sudeep@herd.org.np

Health Research and Social Development Forum (HERD)

Thapathali, Kathmandu, Nepal

www.herd.org.np

Email: info@herd.org.np

Phone: +977-01-4238045, 4102072

