

By Dr Rizwan

Breast Feeding is a natural phenomenon that plays a key role in building a healthy society by promoting the health of babies and their mothers. It is also part of fundamental rights of 'child and mother', and part of a larger debate related to relative merits of breast feeding and the artificial baby-milk supplements.

Due to various reasons, sometimes not only the infants are deprived of the basic right of breast feeding but also denial of this right is not felt due to prevalent ignorance and customs. The factors responsible for depriving the children from their inherent right of feeding on mother's milk include:

- 1. Mother's ignorance about its importance.
- 2. Newborns or mothers pathological factors.
- 3. Different taboos and myths.
- 4. Lack of training by health workers for preparation of mother for breast feeding after delivery.
- 5. Awareness and effectiveness of law, its implementation and monitoring.

One of the reasons for reduction in the rate of breast feeding is easy availability of its supplements. The rising incidence of bottle feeding promoted by the breast-feed supplements-producers is of serious concern, as it is an important cause of gastroenteritis, respiratory diseases and Sudden Infant Deaths (SIDS), leading to high infant mortality (IMR) and morbidity apart from retarded physical and mental growth.

It is pertinent to mention that

Pakistan is a signatory to the global commitments like Millennium Development Goals (MDGs), meant and designed with a timeline of completion till 2015, to bring about a change in the lives and



improve the overall situation concerning basic human rights. MDGs through its Goal 4 and 5 are directly related to the well being of mothers and children, and we can increase AARR (Average Annual Reduction Rate) by sensitizing the people on the importance of breast feeding, thus contributing to realization of MDGs goals.

Editorial: Breast Feeding

he Network has been deeply involved in the issue of breast feeding for more than a decade. This newsletter represents the Network's continuing engagement with the issue since the publication of its report "Feeding Fiasco".

This newsletter on BF related issues covers a wide canvas, Waheed Iqbal's article shows cases of the current state of legislation and pin points the strength and weaknesses of the legislation. Dr. Rizwan discusses the notion of the right to breast feed as a basic human right. Other articles provide useful information on breast feeding and the issue of sudden infant deaths and the role of breast feeding in its prevention. These articles provide a first snapshot of what is intended to be a regular series on breast feeding.

We would love to hear from you on how we can improve the quality and content of the Newsletter.

Dr Arif Azad Executive Coordinator



Advantages of breast feeding

Incidence of breast feeding is in lapse for two decades in developing countries, where breast feeding was an old age practice. Scientific Committee of WHO in 1992 adopted this declaration:

"Nursing the first 6 months of life on nothing other than breast milk, not even water irrespective of the climate, is required to meet the normal infant's requirements."

Maternal advantages

- 1. Economical and not heavy on budget.
- 2. Easy and convenient access
- 3. Hygienic and fully nutritious, thus requiring no supplement
- 4. Promotes uterine involution.
- 5. Protects against breast cancer.
- 6. Strengthens Mother-Child bond.

Benefits to child

- 1. Hygienic
- 2. Produce natural immunity against many infections
- 3. Complete food to ensure normal growth of infant till first 6 months of life.
- 4. Breastfed children have an edge over bottle fed in all respects

Composition of colostrum:

Colostrum, a high density low volume deep yellow secretion, alkaline in reaction, is secreted in first 2-3 days after child birth. It is a high source of proteins, minerals and immunoglobulin [IgA] and low in fat and lactose. It also contains anti-oxidants. Microscopically it has fat globules epithelial cells and colostrums capsules [large round and oral leucocytes] colostrums protects against infective and haemorhapic disease of newborns. It has laxative action and is easily digestible. Ratio of human milk is 2:1. Human milk

contains a low concentration of iron and it is well absorbed from breast milk.

Being the first milk, it is usually wasted because of the old myth that it is dirty, where as it is not only highly nutritious but also composed of Immunological properties to protect against infections of gut and respiratory tract.



Management of breast feeding

Only a healthy, relaxed and confident mother can effectively breast feed her baby. First she is given awareness regarding the importance of breast feeding during third trimester of her pregnancy i.e. during antenatal visits she should be encouraged soon after delivery and then it can be on baby's demand or regular intervals as the situation demands (feed on demand pattern). Mothers should be taught proper method and alternate postures for breast feeding, especially after delivery and painful surgical procedures like Cesarean Section. Supplements should be strongly discouraged and mother should be encouraged for exclusive breast feeding for initial 6 months.

In developing countries mild and

moderate maternal malnutrition does not have any adverse effect on lactation, duration of lactation, quantity of milk secreted and growth of breast fed infants. However, further reduction in dietary intake, advent of next pregnancy or increase in workload results in deterioration in maternal nutrition status.

Promotion of breast feeding

Baby friendly hospitals initiative was launched by UNICEF in 1991 in order to promote breast feeding. Each such hospital must practice these steps for successful feeding where following breast feeding policy guidelines are written on prominent entry points of the hospitals:

- 1. Train all health care staff to implement this policy.
- 2. Inform all pregnant women about the benefits and management of breast feeding.
- 3. Help mothers initiate breast feeding.
- 4. Show mothers how to oval feed and how to maintain lactation.
- 5. Give newborns no food or drink other than breast milk.
- 6. Practice rooming.
- 7. Encourage breast feeds on demand.





Breastfeeding: A life-saving intervention during emergencies

By Mehnaz Ajmal Paracha

Breastfeeding is a simple, easy, inexpensive, traditional and protective practice that has the potential to save hundreds and thousands of infants and children each year.

Mother's milk is not only the source of all necessary nutrients for infant, it also protects children from common childhood illnesses and infections i.e. gastrointestinal illness, respiratory illness, ear and urinary tract infections, eczema, necrotizing enterocolitis, ulcerative colitis, lymphoma, allergic, chronic digestive illness and juvenile diabetes, through the anti-infective properties which it contains.

Emergencies both natural and human made annually affects millions of poor and vulnerable people, but women and children are their worst victims. Child mortality rate during emergencies rises from 2-70 times than average due to diarrhea, respiratory illnesses and malnutrition.

Food can play vital role to return children to normalcy but its is not ensured and practices like free distribution of packaged and formula milk by the donors is common everywhere including Pakistan.

Similarly use of packaged milk and formula milk, when water is contaminated and feeding bottles are not sterilized, leads to the increased risks of diarrheal disease, infections and malnutrition particularly in infants and children under five.

In such cases breastfeeding is a life saving intervention for infants. The recent wave of natural disasters like 2005 earthquake and man-made security situation in Pakistan, have further highlighted the importance of breastfeeding during emergencies, but support for mothers to breastfeed is often overlooked.

There are other problems faced by mothers during emergencies, like mother's own health, physical difficulties, as well as social and cultural barriers for effective and efficient breastfeeding. Time constraints due to standing in the queue for food, lack of security and protection due to the death and/or misplacement of the family members, lack of privacy due to camp life and lack of familiarity with social networks are other barriers to undertake Infant and Young Child Feeding (IYCF) efficiently. In order to deal with emergencies the issue of breast feeding should be looked in a holistic manner by addressing the pregnant women, lactating mothers and young children in addition to infants. One-to-one counseling and mother to mother support is needed to increase awareness and encourage breastfeeding. It is believed that capacity enhancement of the health workers who can help mothers establish breastfeeding will be much beneficial.

In Pakistan, Ministry of Health through Nutrition Wing has developed guidelines for "Promoting and Protecting Infant and Young Child Feeding" for the internally displaced persons (IDPs) in Pakistan, who have been forced to live in temporary accommodations in tents and crowded places. These guidelines ensure protection and restoration of breastfeeding.

The guidelines also recommend and prevent donations of Breastmilk Substitutes (BMS) and Powdered Milks as part of general rations and ensure availability and use of ageappropriate complimentary foods and supplements.

In response to emergency situation in the world, World Alliance for Breastfeeding Action (WABA) provides very comprehensive recommendations to support women and children during emergencies, which can be used as a guideline in preparing integrated emergency plan. Their recommendations are:

- Mothers need active support to keep or establish breastfeeding during emergencies.
- Breastfeeding needs to be actively protected and supported before emergencies occur.
- Media needs to be aware of the dangers of artificial feeding particularly during emergencies.
- Bottles and formula supplements should not be donated during emergencies.
- Stress and crisis do not "dry up mothers' milk" – this is myth. Mothers can increase their milk supply, some may re-lactate and wet nursing may be an option as a temporary measure.
- Education: An appropriate emergency planning and intervention should be develops before an emergency arises.
- Emergency preparedness is vital and supporting breast feeding in non-emergency settings strengthens mothers' capacity to cope in an emergency.



Breastfeeding Tips for New Mothers

rmed with the correct knowledge, breastfeeding should be a pleasure for both mother and baby and will certainly give the infant a head start in life. No matter how attractively infant formula is packaged and marketed, nothing manufactured by man is going to come anywhere close to the immunity building, and brain developing properties found naturally in breast milk.

While some mothers struggle a little at first to get the baby to latch properly or worry because it seems like they are not getting enough milk, seeking help if necessary and persistent efforts will generally help both mother and child settling into a happy routine. Breastfeeding is the best gift a mother can give to her newborn.

Breastfeeding is Best

Many mothers are concerned that they will not be able to produce enough milk for the new baby. Three to four days following the birth, a woman's body stimulates a surge in milk production. Prior to that, the breasts were producing more watery, yellow looking milk called colostrums. Colostrum is full of antibodies and immunoglobulin, offering protection to the newborn from bacteria and viruses. Start breastfeeding immediately so that the baby can get the full benefit of this natural "immunization".

In the half hour following birth, the baby's suckling reflex is strongest, making this the ideal time to start breastfeeding. Breastfeeding every two to three hours will help to maintain milk production. Take the time to sit calmly in a peaceful, relaxed and stress free environment.

Correct Nutrition during Pregnancy

Breastfeeding means that a woman's body is taking on the feeding demands of another human being, though a small one. As in pregnancy, extra food can be consumed while lactating but do not make the mistake of over-eating, especially the wrong foods.

Now is the time to be especially careful to eat a wellbalanced diet that includes plenty of fresh fruits and vegetables, whole grains, legumes and fish. Junk and sugary foods should be eliminated. Be very careful taking any medication during this time, since it will make its way into breast milk.

Some new mothers are horrified that they have gained weight during pregnancy and are determined to lose it as soon as possible after the birth. A new mother, who goes on a strict weight-reduction diet or rigorous exercise routine in an attempt to rapidly lose weight after the birth of the child, will more likely not be able to



produce sufficient milk for her baby's needs.

Studies have shown that breastfeeding women tend to lose weight more rapidly than their formula feeding counterparts. In one study breastfeeding mothers were back to their prepregnancy weight by six months, whereas the formula feeding women were not. The process of breastfeeding causes the uterus to shrink more quickly to its prepregnancy size.

http://health.mweb.co.za/dietnfood/... http://www.promom.org/101/

POLICY DENT: BF Rules Launched

CONGRATULATIONS! Friends, real work begins NOW!

TheNetwork, secretariate of the National Alliance for Protection & Promotion of Breastfeeding (NAPBF) is proud over a succesful advocacy, which achieved long awaited notification of 'Protection of Breastfeeding & Child Nutrition Rules on 9th Oct 2009 and its launching and desemination on 9th Feb 2010 by Ministry of Health. NAPBF appreciates MoH for this step and looks forward to its immediate implementation in true letter and spirit.



Overview: Breastfeeding Legislation in Pakistan

By Waheed Iqbal Advocate

Breast-feeding and appropriate complementary feeding practices are universally accepted as vital for the satisfactory growth of infants and for prevention of childhood diseases.

Before the World War II, babies were exclusively breastfed, but after the industrial revolution it became difficult for working mothers to spare time to breast feed their babies. In 1845 with the invention of rubber nipple, food industry started to improve the quality of baby foods and later developments made it possible to provide alternative food and milk for babies.

In the mid of 20th century health professionals noted high rates of diarrhea, infections, malnutrition and deaths of infants due to formula milk. It led to first legislation to overcome the harm of infant formula milk, called "Baby Feed Supplies Control Act" by Government of Papua New Guinea in 1977.

This act made it necessary to obtain a prescription from a registered health worker to provide formula milk and in 1981 World Health Organization adopted International Code of Marketing Breast-milk Substitutes and Pakistan voted in favor of adopting the International code.

In Pakistan each year many deaths of children occur because of inappropriate infant feeding practices, though the Constitution of Pakistan (Article 9) provides every citizen, security of life irrespective of sex and age. The word life used in Constitution has wide meanings, as interpreted by the apex court in Shehla Zia Case. "The

word life is very significant as it covers all facts of human existence. The word life has not been defined in the Constitution but it does not mean nor can be restricted only to the vegetative or animal life or mere existence from conception to death. Life includes all such amenities and facilities which a person born in a free country is entitled to enjoy with dignity, legally and constitutionally (PLD 1994 SC 693)." Article 35 also provides that "The state shall protect the marriage, the family, the mother and child"

Prior to 2002 in Pakistan there was no legislation for protection of breastfeeding. In response to civil society pressure, the government enacted "Protection of Breastfeeding and Young Child Nutrition Ordinance 2002."

This legislation controls marketing and promotion of following products:

- Baby formula milk
- Any products manufactured, marketed, promoted or otherwise represented as a complement to mother's milk to meet the growing nutritional needs of an infant.
- Any feeding bottle, teat, valve for feeding bottle, pacifier or nipple shield

The following practices are prohibited by ordinance:

- Creating impression that the Infant's formula milk is better than mother's milk and encouraging the use of product.
- Giving gift or benefit to health workers or his family or any personnel employs.
- Distribution and donation of infant formula milk and products.
- Contracting general public

for the promotion of products.

- Educational and informational material relating to products or infant and young child feeding.
- Distribution and acceptance of free samples.
- Pictures, graphics or texts that encourage bottlefeeding or discourage breast-feeding.
- The labels should bear statements and warnings and other information in Urdu and there should not contain anything that may discourage breast-feeding.



The Government notified the Rules and Regulation regarding breastfeeding ordinance on Feb 9, 2010, but infant formula milk companies are aggressively marketing and promoting designated products and violating the provisions of law but no action had been taken under the Ordinance.

A survey conducted after the ordinance to assess the effectiveness of the law presents a dismal picture. It shows that majority of 427 health workers interviewed were unaware of the breastfeeding law.

(http://www.internationalbreastfeedingjourna l.com/content/3/1/24)



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Campaign for Advocacy & Awareness on Breastfeeding

TheNetwork in collaboration with UNICEF has launched a campaign named, "Advocacy, Awareness & Monitoring of Implementation of Breast Feeding (BF) laws and promotion of Iodine Deficiency Disorders (IDDs) legislation enforcement".

Alliance Building

The Government of Pakistan has promulgated "Protection of Breastfeeding and child nutrition Ordinance 2002" but the implementation of the BF Law is crucial.

As part of TN's Advocacy Campaign for implementation of the Infant and Young Children Feeding



Sensitization sessions with Healthcare workers on IYCF

According to a cross sectional study in Urban Hospitals carried out by TheNetwork in 2006, only 30% of healthcare workers are aware "Protection of Breastfeeding & Child Nutrition 2002". TN has initiated capacity building activity in selected hospitals of twin cities and has sensitized 200 for healthcare workers in Holy Family Hospital, Bilal Hospital, Social Security Hospital, KRL hospital and PIMS Hospital.





(IYCF) strategies in Pakistan, National Alliances on BF have been formed with different stakeholders such as Media, Civil Society and Health Professionals to support the implementation of IYCF strategies. National Alliance for Protection & Promotion of Breastfeeding & National Alliance of Media on Promotion of Breastfeeding strongly advocated the early notification of Rules of BF Ordinance 2002.

The notification and launch of BF Rules on 9th February 2010 is a great accomplishment of a successful advocacy by the alliance partners. Partners are enthusiastic about monitoring the implementation of recently launched rules.

Advocacy through Media

TN reached million of people through its 3 TV programs on importance, challenges and constraints of Breastfeeding in Pakistan, Media Bites on FM 100 and regular presence of the issue in print media.

IEC Material dissemination

TN produced 3000 brochures and posters on Breastfeeding in emergencies and has disseminated it throughout the country.





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Sensitization Session at Holy Family Hospital

National Seminar



Breastfeeding: A key Element to Achieve MDGs and Save Lives in Emergencies" held on 26th August, 2009 at Serena Hotel, Islamabad

As part of Global Breastfeeding Week Celebrations 2009, a National Seminar was organized on 'Breastfeeding a key element to achieve MDGs and save lives in emergencies' by TheNetwork for Consumer Protection, the convener of National Alliance for Promotion & Protection of Breastfeeding, The objectives of the seminar were to highlight the importance of breastfeeding in achieving MDGs, life saving role of breastfeeding in emergencies and to advocate for notification of rules and regulations of Breastfeeding Ordinance 2002.







Dr. Arif Azad, Mr. Martin Mogwaja-UNICEF, Dr. Rasheed Jooma-DG Health, Dr. Shadula-WHO, Mr. Yaqoob Queshi-NW, Dr DS Akram

Chief guest, Dr. Rasheed Jooma, Director General Helath

Breastfeeding Shown to Decrease the Risk of SIDS

Sudden Infant Death Syndrome (SIDS) is the sudden unexplained death of an infant and is the number one cause of death in U.S. babies who are less than one year old. Fortunately the SIDS rate has dropped over 50% since 1983, but it is still responsible for 2500 deaths each year according to the American SIDS Institute.

There are many hypotheses for SIDS but there is no known cause. Factors such as stomach sleeping, a smoker in the house, and blankets in a baby's bed increases the risk.

Research has shown that a baby who is breastfed has a much lower risk of dying of SIDS than a formula fed baby. The benefits of breastfeeding in general are very well known, and breastfed babies are less likely to get various infections because of the maternal antibodies in breast milk.

In fact, breastfeeding is known to be so beneficial that the Centers for Disease Control (CDC) has included breastfeeding as part of its Healthy People 2010 Objectives. The goals stated in these objectives are to have the percentage of breastfed newborns at 75%, infants breastfeeding at 6 months at 50%, and babies breastfeeding at one year at 25%. Data collected by the CDC in 2004 reported these figures at about 73%, 42%, and 21%, respectively.

In addition to reducing the risk of disease,

breastfeeding has been shown to reduce the risk of dying from SIDS. Breastfeeding is beneficial for this for a number of reasons.

***Breathing:** Breastmilk is non-irritating to airways like a foreign material such as formula could be. In addition, aspirated breastmilk is less likely to cause apnea.

***Swallowing:** Learning to coordinate swallowing and breathing is important in reducing SIDS risk. Research has shown that breastfed babies learn to coordinate more quickly than bottlefed babies because they are usually fed more often (so they get more practice) and also because breastfed babies tend to have better alignment of the jaw and muscles which helps to keep airways open.

***Reflux:** Breastfed babies are less likely to have gastric reflux which can increase risk of SIDS.

***Mother/child connection:** Breastfed mothers have hormonal cues that keep them more in tune with their baby during the night. As a result they may be more likely to read changes during their baby's breathing or sleep rhythm.

Breastfeeding is beneficial to babies in countless ways. Decreasing the risk of SIDS is a huge incentive to encourage mothers to breastfeed their babies.

Sources: American SIDS Institute, (www.sids.org)

China executes two for tainted milk scandal

China executed a dairy farmer and a milk salesman for their role in a tainted infant formula scandal in which at least six children died and 300,000 were made ill.

Nineteen others have been jailed since January in connection with the case, which involved deliberately contaminating milk with melamine, a chemical used in manufacturing plastics and fertilizers. Zhang Yujun, a farmer, was executed for endangering public safety and Geng Jinping for producing and selling toxic food, the state news agency Xinhua reported.



Zhang Yujun, second right, seen here before the trial last December, was executed for endangering public safety. Photograph: China Daily/Reuters

Around 200 families are calling for more compensation, saying the deal organised by the government - 1.1bn yuan ($\pounds 97m$) from 22 companies, divided between the hundreds of thousands affected – is inadequate.



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