Breast-Feeding and Working Mothers

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ARUN GUPTA and Jon E Rohde's article 'Economic Value of Breast-Feeding in India', EPW, June 26' is a commendable attempt to lift the discussion about breastfeeding into the macro-economic sphere by attempting to quantify some of the critical parameters. Undoubtedly this is a good way to create awareness about the importance of breast-feeding for the welfare of children and hence for the economy in general among social scientists and policy planners accustomed to thinking along macro-economic lines. As a dramatic device to focus attention on this issue, it evokes ungrudging respect from those of us in the 'soft' disciplines who often seem to have trouble in being heard. However, the authors appear to be working from a limited perspective and have failed to attend to certain crucial social dimensions of the problem. As a result, they tend to draw simplistic conclusions, trivialise some issues and take a fragmented, uni-dimensional view which may do little to promote the very cause they seek to serve.

In estimating the quantity of breast milk produced by Indian women, the authors have not mentioned the undeniable link between lactation performance and the nutritional and health status of the mother. While they may have taken it into account in calculating what they describe as "a conservative lower daily production estimate" of 600 ml per day, the authors seem unaware of the implications of the link--namely, that promotion of breast-feeding, if taken seriously would require nutritional support to a large number of malnourished and anaemic Indian mothers who cease or reduce breast-feeding, not out of perversity but as a consequence of poor lactation, among other reasons. It may be a worthwhile economic exercise to estimate the costs of such support.

It is known that there are very few empirical research studies about the lactation performance of Indian women, and analogies have often to be drawn from studies of similar populations elsewhere. However, the honest statement that their estimates of losses in breast milk production are "educated guesses by experienced observers" is followed by the extraordinary and flippant remark that "this could be readily modified by the curious reader" which merely trivialises the issue, and casts doubt on the seriousness of the approach.

It seems that for purposes of calculation,

an average value of daily milk production by Indian women has been taken. This however, could be very misleading, since it has been established that production varies considerably over the entire period of lactation, as a result of many factors including both responsiveness to infant demand and level of maternal nutrition, among others. The production of milk builds up slowly over the first two or three months and is related to infant demand; while later on, a variety of factors are responsible for increase, maintenance or decline of milk production. Failure to take this into account would lead to considerable errors in the final result.

In the paragraph on household economy, the authors seem to have proceeded on the untenable assumption that in all cases of partial or no breast-feeding, the infant is given the full amount of substitute milk required for healthy optimum growth, and then calculated that this costs Rs 450 per month. Anyone familiar with Indian poverty conditions would quickly appreciate the weakness of this assumption. In many poor homes, the quantity of powdered (or other substitute) milk given to the infant is most often not at the optimum level. The tendency in fact is to give the child far too little of the powdered milk in a diluted form, and much below the level required for satisfactory growth. Besides, the child may be given other foods such as tea or gruel in place of breast milk, or offered other adult foods and hence remain malnourished. By ignoring the social reality dimension, the authors may have trapped themselves into arriving at exaggerated figures of consumption of substitute milk. Such dramatic comparisons may be impressive in their impact, but do not rest on sure foundations.

This tendency to ignore the social constraints and confine themselves to a narrow perspective leads to the simplistic conclusion at the end of the paragraph "those who opt for the difficult and undesirable method of bottle-feeding *in order to* seek work outside the home, may be gaining *small fiscal benefit* at considerable health and nutritional risk to the infant" (italics mine). This statement, which has serious implications, can be faulted at several levels.

To begin with, that women opt to work implies a freedom of choice which rarely exists. At the risk of repeating the obvious, it must be stated that most women who work outside the home in India are poor and are working not out of choice but out of necessity, to help provide two meals a day. There is also now increasing evidence that large numbers of women are the primary family bread-winners, with the responsibility for feeding themselves and their children. Such women are faced with the cruel dilemma of either 'opting' not to work and facing starvation or 'opting' to work in order to feed their families. If they are breast-feeding mothers, they have to face a further dilemma of either leaving their infants behind with too little inappropriate and unhygienic substitute foods or carrying them along (if permitted to do so) to unsuitable, dangerous and unhygienic work places where conditions for breast-feeding are far from ideal. Add to this the likelihood that such women may themselves be in a state of health that does not allow for optimum lactation and we would begin to get some idea of the dimensions of the problem so



casually dismissed by the authors. The 'small fiscal benefit' may in fact be the amount required for survival among populations where the raw materials for the daily meal are purchased every day at the end of the day's work and where food is not cooked on the days no daily wage has been earned. While all working women may not be living on this margin, substantial numbers do and a very large number are just above it.

As for the small numbers (in both absolute and percentage terms) of working mothers at the other end of the economic spectrum who may have a greater degree of freedom of choice, it should be understood that their choices are not determined only by fiscal benefit on the one hand to be ranged against "health and nutritional risk" on the other. Since the reproductive period of a woman's life tends to coincide with a critical phase of her life as a productive worker and since the present laws and conventions of the work place are not supportive of breast-feeding by working mothers, such women are faced with another kind of cruel dilemma, having to 'choose', with no social support, between breast-feeding and adverse consequences on work and career. To place the responsibility (and the guilt) for making such choices entirely on the woman, in isolation from the legal, social, and cultural climate in which she exists, betrays a very narrow understanding of the issues.

In this context, my calculations (1991) of the numbers of working mothers of young children below six who require child care support services and of the numbers of young children who require such services, is, in national terms, about 20 million women and 45 million young children. It would be useful if the authors could apply their skills to calculate the number of working mothers with young children below two who require breast-feeding. That would be a genuine step forward in working out the kind of support programmes needed to enable these women to combine breast-feeding with work (as well as those others who are kept off the labour market or forced to seek lower paid employment because of lack of child care facilities and their need to breastfeed and take care of young children. Only a broader understanding of the various dimensions of the problem can help in moving towards actions that will promote breastfeeding. Otherwise we are in danger of going back to the stereotyped categorisation of women into 'good' mothers who stay home and breast-feed and 'bad' mothers, who prefer to work, which seems to be implied in the facile statements made about opting to work instead of breast-feed.

Finally, in the last paragraph comes an astounding change of ground. Suddenly, we are urged to unite all efforts to protect the public (italics mine) from the onslaught of commercial interests intent on replacing mothers' milk with artificial substitutes. Concern for children has inexplicably been transformed into agonising on behalf of the public. It is very hard to see how the public is in danger, unless the word is read as an cuphemism for tax-payer. Again, the villains of the piece seem to be the 'bad' mothers who consciously 'opt' out of breastfeeding, thereby, by some mysterious logic, endangering the hapless 'public'. This may be merely careless writing but if taken seriously one would have to question the underlying values.

One cannot but welcome the support for the promotion of breast-feeding from economists who can offer quantified arguments in its favour. However, quantification would be more valuable if based on a holistic perception which does not betray indications of growing out of an essentially antiwoman stance.

In an earlier article on this theme ('Breastfeeding, the Working Mother and the Law', EPW, December 28, 1991) I have argued that "laws and policies which attempt to promote breast-feeding by merely restricting artificial feeding without providing for positive social support measures may be damaging to children, besides being unfair and unjust to women" and have urged the need for comprehensive laws and policies that will promote women's right to breastfeed. I also went on to analyse some of the constraints placed by current laws and policies on breast-feeding by working women. While all authorities recommend at least four months of exclusive breast-feeding, the present maternity laws applicable in the organised sector, in which 11 per cent of the female workforce is found, allow for an average of only six to 10 weeks leave after childbirth. Thus the mother is obliged to reduce or discontinue breast-feeding and return to work and to 'opt', often against her will, for artificial feeding, which the new laws make more expensive and hard to get.

On the other hand, in the unorganised sector, in which 89 per cent of the female workforce finds itself, there are *no* laws or policies at the national level to help women stay off the labour market for four months (though many do so out of concern for their children and appreciation of the household economics of breast-feeding). Some states, like Gujarat and Tamit Nadu, have recently started schemes offering cash benefits at childbirth to women below the poverty line, but these seem highly inadequate in relation to the need, and no objective assessment has yet been made of their reach or effectiveness.

As regards nutritional and health support to lactating women, the most outstanding success story is that of Tamil Nadu Integrated Nutrition Project; but even here it is reported that less than 50 per cent of the cligible women took advantage of the supplement. The reasons for this phenomenon have remained unexplored, but those familiar with the field situation would realise that it could well be related to the obvious but strangely ignored fact that women are not only mothers, but also workers at the same time. If the timings of food distribution are such that a woman must choose between going to work and collecting her supplements, she may 'opt' for the former.

These are the kind of parameters that macro-economists would do well to take into account in developing their arguments. Rigorous studies on lactation performance and maternal nutrition, realistic assessment of use and cost figures, conceptual differentiation between 'social' and 'household' costs, etc, need to be made and the necessary tools developed, if they are not already available. But this will not be enough. In addition, comprehensive reviews of laws and policies and evaluation of schemes and programmes based on recognition of the triple roles of women as mothers, producers and consumers will be needed to develop support services for breast-feeding mothers. Only then can the campaign for the promotion of breast-feeding move from the level of slogans, ritualistic celebration of days and weeks and token activities into that of action that will support millions of poor women to breast-feed. Economists with their powerful tools and their commanding influence on policy can make a fine input into this campaign if they join hands with other disciplines.

