
View Point

WHY THE ACT?

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Sometime back, a shocked world sat up and took notice when the news of the gruesome Bhopal gas tragedy was splashed in the newspapers. However, the tragedy of the silent deaths of nearly 4000 babies every day in India—like one Bhopal gas tragedy occurring per day—goes unreported in the mass media as it is not "sensational" enough by their standards.

An observation of these deaths has revealed the fact that all these babies have been bottlefed and that most of them have succumbed to infections that are typically caused by bottlefeeding. No man with a conscience in the 20th century will or should remain unconcerned when he realizes that this tragedy is a preventable one and that the means to prevent it is the simple and natural process of breastfeeding of infants.

Elaborate research in recent times has proved that human breast milk being species specific, is "tailor made" to suit the baby's needs. It is known to

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protect the baby from several infections and allergies like asthma and comparative studies have even shown that breastfed babies have a higher IQ than the bottle fed ones, The number of bottlefed infants that die of diarrhea and pneumonia are 25 times more in number than the breastfed ones.

Bottlefeeding apart from being cumbersome and expensive, is totally unsafe in the Indian context because of the following factors. Seventy per cent of Indian mothers are illiterate. Sixty per cent of our population is below the poverty line. They face a shortage of fuel, clean water and kitchen facilities and the sense of hygiene among the Indian communities is practically non-existent. These factors are the main cause of acute diarrheas and malnutrition leading to colossal infant deaths.

The following three factors are mainly responsible for the erosion of the practice of breastfeeding. The World Alliance on Breastfeeding Action (WABA) has made each of these factors a theme of the World Breastfeeding Week (WBW) observed all over the world from Aug 1st to 7th every year.

1. Detrimental Maternity Home Practices: The newborn baby in the first 3 days of its life is started on bottlefeeds called "prelacteal feeds" by the staff of the maternity home thus depriving the baby of precious breastfeeds from the mother which it should have ideally received within the first hour after its birth. The activities of the World Breastfeeding Week (WBW) in 1992 centred around the removal of such de-

trimental maternity home practices. The Baby Friendly Hospital initiative (BFHI) was launched by the WHO/UNICEF in the year 1992 in order to give guidelines to maternity homes and to teach them the ten steps to successful breastfeeding, which give the best start early in life to the newborn.

2. *Adverse Social Factors:* The young working mother is not granted sufficient maternity leave to enable her to exclusively breastfeed her infant upto the age of six months; nor is she provided with a creche at her working place. The activities of the WBW in 1993 were focussed on the alleviation of these hardships of the young working mother and the means of facilitating the practice of breastfeeding inspite of her having to go out to work such as the practice of breastfeeding at night, expressing the milk and storing it for the baby's future use in the mother's absence, *etc.*

3. *The Unethical and Aggressive Marketing Strategy* adopted by the manufacturers of Infant Milk Substitutes (IMS) and feeding bottles. This issue formed the focus of the World Breastfeeding Week activities in 1994. The "Infant Milk Substitutes, Feeding Bottles and Infant Foods Act (Regulation of Production, Supply and Distribution) Act, 1992" which prohibits the advertisement and promotion of feeding bottles and infant milk substitutes by unethical marketing strategies came into force from 1st August, 1993. Violations of this act are punishable by imprisonment and a heavy fine.

What made us focus our attention on the Infant Milk Substitutes Industry instead of just continuing Breastfeeding

Promotional Activities was the realization that when the mother is discharged from the place of delivery, she falls a prey to the advice of the community or the health worker. These advisors have themselves been unknowingly influenced by the misguiding propaganda carried out by the manufacturers of Infant Milk Substitutes and Feeding bottles that undermines the practice of breastfeeding and promotes bottle-feeding in a large way. This results in the mother losing her self confidence in her ability to breastfeed her baby. She hooks her baby on to the feeding bottle initially at night and later on totally stops breastfeeding. The bottlefeeds of milk powder diluted with unclean water in order to save on the expenditure on baby milk powder throws the child into a whirlpool of malnutrition and infection, resulting ultimately in death." The certificate of death mentions "infections" as the cause of death and not "bottlefeeding" which has caused the infections.

Marketing strategies are targeted towards three types of consumers—the health worker, the health facility, the mother and the community.

Armed with the belief that "a good salesman should be able to sell a fridge to an Eskimo in the Tundra", the salesman has created the need for Infant milk substitutes where none initially existed.

The health worker is literally showered with personal favors and financial help by the IMS industry. Medical conferences and the other factors associated with them such as; air travel of the delegates, their hotel expenses, medals, mementos, journals, quizzes, talks on nutrition and gifts, *etc.*, are sponsored

by the IMS industry. Once under their obligation, the doctor starts prescribing the products of his benefactors in the IMS industry and becomes manufacturer friendly.

Health facilities like maternity homes are offered free samples and subsidized milk formulas so that they may be induced to give prelacteal feeds to the newborns in their maternity homes during the first three crucial days. Weak and low birth weight babies (30% of the newborns), cesarean babies and babies separated from their mothers and shifted to special care units, become the victims of bottlefeeds. Incidentally, bottlefeeding is considered as a convenient modern and scientific way of feeding "special" babies.

The community and the mother are exposed in a phenomenal way to the extensive propaganda and false claims made through advertisements in the audio-visual and print mass media given by the IMS industry. Advertisements show pictures of mothers with chubby babies supposed to have "grown well" on being bottlefed with particular brands of IMS. We find words like "tender little tummies", "maternalized" and "humanised" to describe the IMS in the advertisements. The vulnerable mother, not wishing to let her baby miss out on this "special baby milk" starts her baby on bottlefeeds with the "special" IMS and unsupported by proper advice from persons near her, totally stops breastfeeding eventually to the detriment of her baby. This is the moment when she desperately needs encouragement, empathy, sympathy and appropriate advice and support from her family and doctor so that she regains

confidence in herself to breastfeed successfully. It is an emergency like any other surgical emergency and "mother support" should be made available to her at that moment in the community, or health facility or from the health worker.

Contrary to the beliefs held by many, the market sales of IMS and Infant foods are definitely on the rise—a fact borne out by the following statistics. The IMF industry produced 60,000 metric tons of IMS in 1990-91. The market is worth Rs. 720 crores. Sizable sales to the lower middle class and low income group have been recorded with a large quantity offered as free samples to health workers. The sales are going up by 5 to 6%.

The act aims at stopping unethical, aggressive marketing carried out overtly, covertly or subtly in spirit or in intent. Nowadays we have several individuals and organizations that are totally committed to the Protection, Promotion and Support of breastfeeding such as the Wellstart International at California USA, the World Alliance for Breastfeeding Action (WABA) the La Leche League International and The Breastfeeding Promotion Network of India (BPNI) in India.

It is the duty of all responsible individuals, health workers, doctors, nurses professionals and NGO's to monitor the act and report violations of the act committed by the IMS Industry as we need to keep the killers (namely the feeding bottle and the IMS) out. All those who are already violating the law or are planning to do so need to remember and beware of one fact—

"The Act has Teeth".