Breastfeeding for child survival, development and health

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Dr. Arun Gupta
National Coordinator, BPNI
arun@ibfan-asiapacific.org
Introduction

• Child survival and development in India
• Criticality of infancy (first year) for sustainable human development
• North data
• Our 10th and 11th plans
• Action Ideas
First year is critical!

- Malnutrition strikes in infancy from 11% at 0-6 months reaches its peak by 23 months, then flat.
- 36 million under three/nearly 60 million U-5 are underweight and undernourished thus underdeveloped
- 2.4 million children die and 2/3rd in first year

Years of life

Brain development

Underweight (-2sd) NFHS-2
Over 60 million

Child deaths U-5 (Lancet 2003)
16 Lacs during first year and 8 lacs during next 4 years
What happens with infants?

- 2.4 million U-5 deaths in India (10.9 M global deaths)
- 2/3rd during 1st year alone, according to the WHO, these are related to inappropriate infant and young child feeding.
- Only 40% EX BF for the first 6 months, 33% adequately CF 6-9 months.
- Brain development is dependent on level of interaction with the child.
Under-5 deaths preventable through universal coverage with individual interventions (2000)

*Breastfeeding: Exclusive for first 6 months and continued for 6 to 12 months*

Source: Jones et al. LANCET 2003;362:65-71
Breastfeeding!

- We are a breastfeeding nation
- We are “drop outs” in EX BF
- Only 90% EX BF can achieve benefits described in Lancet

<table>
<thead>
<tr>
<th>Months</th>
<th>Brain development</th>
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<tbody>
<tr>
<td>0</td>
<td>Exclusive BF 0-6 months (NFHS-2)</td>
</tr>
<tr>
<td>6</td>
<td>Breastfeeding status (NFHS-2)</td>
</tr>
<tr>
<td>12</td>
<td></td>
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<tr>
<td>18</td>
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<td>24</td>
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Breastfeeding enhances brain development

- Brain develops in first two years the most
- Depends on amount of interactions
- Breastfeeding contributes to IQ, visual acuity, mathematical abilities and analytical capacity. (evidence available)
- Prepares children for BETTER LEARNING at PSE/Schools
## Advantage CHINA

<table>
<thead>
<tr>
<th>Indicator</th>
<th>CHINA</th>
<th>INDIA</th>
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<tbody>
<tr>
<td>infant mortality rate (IMR)</td>
<td>30</td>
<td>63</td>
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<tr>
<td>No. of U5 deaths</td>
<td>692,000</td>
<td>2180,000</td>
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<tr>
<td>U5 underweight</td>
<td>10 (92,555,000)</td>
<td>47 (118,568,000)</td>
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India’s Underweight population of 10 years olds: 141,504,188
U3 UW: 30 90,321,822
IMR: 40 – U3 underweight: 47 144,665,211
Under Weight U-3 (-2sd)

(NFHS-2)

This cannot be “poverty”
Underweight U – 3 (Numbers)
Infant Mortality Rate (NFHS-2)

- Uttaranchal: 50
- Punjab: 52
- Jammu & Kashmir: 50
- Haryana: 67
- Himachal Pradesh: 60
- Delhi: 32
- Chandigarh: 28

Chandigarh
Delhi
Himachal Pradesh
Haryana
Jammu & Kashmir
Punjab
Uttaranchal

0 20 40 60 80 100
Infant deaths in North (NFHS-2)
Exclusive Breastfeeding Status and Tenth Plan Goals

- Chandigarh: 60, 33.9
- Delhi: 13.2, 19.1
- Himachal Pradesh: 17.5, 25.4
- Haryana: 3.3, 47.2
- Jammu & Kashmir: 11.4, 68.4
- Punjab: 0, 41.5
- Uttaranchal: 25.6, 45.3
- NFHS-2
- Tenth Five Year Plan Goals
- BPNI Data
Our present response

Imm., SNP, Vit A, IMNCI, HNE...

UNIVERSAL COVERAGE CAN PREVENT 63% DEATHS

Years of life

Brain development

Underweight (-2sd) NFHS-2

Child deaths U-5 (Lancet 2003)
11th Plan is at Arms length

- Infant Nutrition is critical for infant mortality
- Suggested MCH clinics and Day Care Centers

Suggestions

- Put a budget line for breastfeeding at least as much as for immunization
- Offer a “Neonatal Integrated Package” that includes, clean delivery, newborn care and breastfeeding education including for HIV positive mothers (UN task force on MDGs)

Understanding what is BF education is needed
What is “Breastfeeding education”

• Good accurate information
• timely counseling,
• Building confidence when they have a ‘feeling’ of not enough milk,
• Assistance
  – To initiate breastfeeding within one hour,
  – Assistance in proper sucking position to allow effective sucking;
  – Prevent breast problems like sore nipples and engorgement,
  – Solve problems if they do arise,
  – Answer any questions if mothers may have,
• Counsel on adequate and appropriate complementary feeding,
• Counseling for HIV positive mothers for infant feeding options and support to their choice.
• Practical help and support from all quarters especially health care providers.

SKILLFUL ACTS, NOT LIKE DELIVERY OF A VACCINE
Ideas for Action

• Establish breastfeeding support centers in MCH clinics/day care centers manned by a trained woman (7 day training)
• Create a critical mass of skilled women
• Provide skills training ASHA and AWW for 3 days in breastfeeding and lactation management fulfilling NNP objective of 1995.
• Begin with Distt. Level –Block-Villages
• BPNI offers to train district level critical mass.
Breastfeeding Support Centers
Private Hospitals/Nursing Home

Breastfeeding Support Centre
Breastfeeding Support Centre

PHC / CHC/Block level
Action Ideas

• CM Haryana today announced the scheme “Improving Infant and Young Child Feeding”
  – Baseline documentation
  – 3-day skills training of all AWWs in IYCF
  – Counseling guide for each AW

Government of India and each state need to create budget head and launch such a scheme

Uttranchal: Documenting status of Infant and Young Child Feeding at district level followed by development of specific plans of action for the state

• Punjab planning to call a state level consultation to move forward.

Ways to move ahead!
Reorganize resources, each step requires allocation.

- **Prenatal- 0-6/12 months**
  - CARE
  - Skills training
  - BF edu.

- **6/12 m-3 yrs**
  - HEALTH
  - Immunization etc

- **3 -6 yrs.**
  - SNP
  - for Hunger/ PSE
Tracking by village PRIs

**Indicators**
- Under Weight at 1
- Exclusive breastfeeding at 6 months
- Infant deaths

- **Above** 85%
- 50-85%
- **Below** 50%
Exclusive breastfeeding Prevents HIV in infants

Cumulative % with HIV infection according to early breastfeeding pattern

Most mothers are either negative or not tested, better prevent transmission as well as ensure HIV free child survival

Early Exclusive Breastfeeding reduces the risk of postnatal HIV-1 transmission and increases HIV-free survival. AIDS 2005 19:699-708
It prevents Obesity

- And thus diabetes and other chronic problems
- Sufficient evidence available that BREASTFEEDING/ExBF prevents childhood obesity
- 15% urban populations are projected to be obese
- The USA promotes breastfeeding as number one preventive intervention along with decreased TV viewing
- Treatment costs are horrible and unaffordable even by USA
Make breastfeeding visible!

Thank you

The First Lady of Timor Leste at 7th Ministerial Consultation on Children