

Breastfeeding as a 'Resilient' Food Security System

*Celebrating... And Problematizing Women's Resilience
in the face of chronic deprivation as well as
emergencies*

Dr Vandana Prasad

MBBS, MRCP (Ped) UK, MPH

Public Health Resource Network

The Framework of Resilience

- “An ability to recover from or adjust easily to misfortune or change”
- Historically arose from environmental/ecological concerns
- Attempt to challenge norms of consumption that assume that endless flow of (natural) resources is possible
- Avoids “pushing problems up-scale” (Resilience and Sustainable Development 2.0. Stockholm Resilience Centre, 2009)
- **Supportive of sustainable, community-based decentralised, flexible approaches**

Breastfeeding *is* a resilient food system

- Wholly community-based
- Eco-friendly
- Cost-effective
- No dependence on markets

✧ Universally accessible

✧ *Potentially*

✧ Sustainable

✧ *Potentially*

BECAUSE

Depends wholly upon the status of time, energy, health, nutrition and
GENERAL AVAILABILITY of WOMEN

The Current Default 'System':
A Solitary Breastfeeding Woman....

Women's Unpaid Care Work and Paid Work; No Time to Rest

Care work and care jobs for the future of decent work, ILO Geneva, 2018. Over 90 countries

No Time to Rest: Women's Lived Experiences of Balancing Paid Work and Unpaid Care

Work . Chopra, D. with Zambelli, E. (2017) Brighton: IDS. India, Nepal, Rwanda, Tanzania

- “Women perform **76.2%** of the total amount of unpaid care work, 3.2 times more time than men” (ILO)
- **Only 40%** reported substantial changes in unpaid care work in the first three months after childbirth
- Childcare took up the bulk of women's time, especially as they either took care of a child directly, or remained responsible for a child over an average of **13.48 hours a day** across the four countries
- **31 per cent reported giving up childcare** in order to be able to engage in paid work.

- Care work responsibilities also obviously affected paid work and careers through lowering the quality and amount of paid work that women could do, and thereby the income that they were able to obtain through it.
- 47% found care of children to be the hardest tasks to combine along with their paid work. Practically all women reported that they were very tired and therefore not as productive at paid work.
- Lack of public services was the single most important factor contributing to the drudgery of care work. Upto 90% women had no access to childcare

*Breastfeeding has to be carved out of this situation, exclusive breastfeeding taking a minimum of ~4 hours in a day (8*30 mts)*

Yet, in terms of support (ILO,2018)

Table 3.2. Maternity protection, ECCE services and maternal employment, by region, 2015–16 (percentages)

	Maternity protection		ECCE services		Labour force participation of women living with children aged 0–5 ^c
	Countries meeting ILO maternity protection standards (C.183) ^a	Mothers with newborns receiving maternity cash benefits ^b	Average gross enrolment rate in ECED programmes	Average gross enrolment rate in pre-primary programmes	
Europe and Central Asia	85	81	26	77	59
Americas	34	69	16	72	54
Asia and the Pacific	28	33	27	67	41
Africa	25	16	4	34	59
Arab States	0	n.d.	5	44	9
World	42	41	21	60	48

Notes: ^a Leave is ≥ 14 weeks, paid ≥ 2/3 of earnings and paid ≥ 2/3 by social security (data for 2016). ^b Effective coverage for mothers with newborns: percentage of women giving birth and receiving maternity cash benefits (data for 2015 or latest available year; no data for Arab States). ^c The presence of children living in the household is used as a proxy for motherhood. In high-income countries, women aged 25–54 years are included; in middle- and low-income countries it is 18–54 years (data for 2016 or latest year available). 89 countries.

Thus, the problem with celebrating **resilience**
without systemic support and adequate
investments...

- Especially inapplicable, even offensive, to the most marginalized women, whose children need it most, and who are managing to survive despite these deprivations
- It assumes the continuance of misfortune and deprivation of basic needs
- Antithetical to basic human rights
- Neglectful of women's status and aspirations as workers and the lack of social security that they contend with

I.e, in the context of the already marginalized, avoiding pushing solutions *up*-scale should not push further investments *down*-scale.....

How it Translates: 2 Case Studies

I. Breastfeeding as a resilient food system and the chronic emergency of severe acute malnutrition (SAM)

- The medicalisation of a predominantly socio-economic problem with no recognition of community food systems such as breast feeding and childcare as a possible intervention: thus, no investment
- Failure to recognise breastmilk as a critical source of protein and 'count' it in the treatment of SAM
- Failure to recognise breastfeeding as a health system in the prevention of child illnesses and mortality
- Attempts to introduce stand-alone magic bullet solutions of RUTF that often displace breast milk and at the very minimum reinforce the 'superiority' of packaged foods over community-based products and may cause metabolic problems

II. Breast feeding as a resilient food system and the acute emergency of the covid-19 pandemic

Exacerbation in the Covid-19 Pandemic

- “We hypothesize that there are **negative social, economic, corporate, and health-system forces** affecting the mother's decision to breastfeed that should be considered.”

Busch-Hallen J, Walters D, Rowe S, Chowdhury A, Arabi M. **Impact of COVID-19 on maternal and child health.** *Lancet Glob Health.* 2020 Oct;8(10):e1257. doi: 10.1016/S2214-109X(20)30327-2.

- **Social and economic**
 - Lockdown and increased domestic and childcare responsibilities
 - Lack of information and surfeit of misinformation on safety, transmissibility etc
 - Increased informal wage work due to loss of family income
- **Health systems**
 - Separation of Covid-19 mothers/babies for quite some time
 - Initial refusal of vaccination to lactating mothers
 - Disruptions of community-level ‘enabling environment’: counselling, post natal care etc
 - Lack of proactive dissemination of key messages by government on safety of breastfeeding
- **Commercial**

Free Supplies



Courtesy BPNI

Free Supplies



Baby food as promised 😊



👤 45

↑ 40

❤️ 464

↑

Courtesy BPNI

Broad Recommendations

- Universal Maternity Protection [Convention, 2000 (No. 183)]
 - Total: **34** ratifications (of 195 total countries of the world)
 - Africa: 6
 - Americas: 6
 - Arab States: 0
 - **Asia and the Pacific: 0**
 - Europe and Central Asia: 22
- Universally available childcare services
- Child budgeting alongside gender budgeting with major enhancements to both

- Clear SOPs for breastfeeding in Covid-19 (and all emergencies) to be proactively put out through wide public communication and campaign, and proactively monitored
- Clear instructions to administrators to desist from any collaboration with BMS companies, including receiving donations of BMS
- Better research for evaluating the potential contribution of breast feeding (with due support for wage compensation and increased nutrition to mothers) to SAM management
- Detailed time-use studies that focus on breastfeeding as unpaid care work.

Key Messages

1. Breast feeding is a resilient food system provided the facts below are taken into consideration:
2. Its resilience relies entirely upon the status of time, energy, health, nutrition and general availability of women that are already chronically disenfranchised.
3. Maintaining the resilience of this food system demands a transformative structural and systemic shift to community-based solutions that are adequately resourced.



A community run childcare centre in a deep tribal village,
Odisha, India
THANK YOU!