



A Review For Reasons Of Withdrawal By Working Mothers From Exclusive Breastfeeding And Strategies To Enable It At Work Place In India

¹Dr. Ratna Vishwanath Damle, ¹Dr. Manjiri Sadanand Deshpande

¹Assistant Professor, ²Professor CPGRAS at Tilak Ayurved Mahavidyalay, Pune

¹ Department of Rognidan,

¹Govt. Ayurved College, Nagpur, India

Abstract: Breastfeeding is one of the most important ways to ensure child health and survival. World Breastfeeding Week was endorsed as the most important health promotion strategy by the World Health Assembly in 2018. Despite of the importance and promotion, prevalence of breastfeeding is reducing globally and India is no exception. Even the laws and acts that promote breastfeeding prevail, there is a downfall of breastfeeding the babies below 6 months of age especially among working mothers. This present article aims to explore the present prevalence of breastfeeding globally and in India. Also, to explore the current laws and Acts prevailing in the country that promote breastfeeding in general and at work place. The probable reasons for the withdrawal of working mothers from exclusive breastfeeding for babies below 6 months of age will be compiled and probable strategies to enable breastfeeding for working parents from different perspectives will be explored.

Index Terms: Breastfeeding, Laws, Acts

I. INTRODUCTION

The first week of August every year is observed as Breastfeeding Week under the support of WHO, UNICEF and other Ministries of Health and civil society partners in memory of Innocenti Declaration from 1990 on Protection, Promotion and Support of Breastfeeding that recommended all nations to develop policies for breastfeeding and set proper targets accordingly. ^[1]

The joint statement by UNICEF Executive Director, Catherine Russel and WHO Director, Tedros Adhanom Ghebreyesus on the occasion of World Breastfeeding Week 2023 is, "Let us make Breastfeeding and work, work." ^[2]

World Breastfeeding Week was endorsed as the most important health promotion strategy by the World Health Assembly in 2018. ^[3]

Breastfeeding is one of the most important ways to ensure child health and survival as breast milk has zero contamination and is loaded with antibodies that help the child in protecting against innumerable childhood diseases. ^[4]

Breastfed children have a higher Intelligence Quotient, a low risk of obesity and are less prone to diabetes in later life. On the other hand, women who breastfeed have low risks for ovarian and breast malignancies. ^[5]

WHO recommends exclusive breastfeeding for babies till 6 months of their age and has taken measures to implement the same. But despite all the campaigns aimed at promoting breastfeeding, recommendations by WHO and various measures taken by countries, only 38% of the infants under 6 months, are exclusively given breast milk. ^[6]

The reasons are many like improper marketing of food supplements, early return to work after delivery, fear of disfigurement on new mothers' behalf, accommodation to the feeding in early days, et cetera.

Objective:

This present article aims to explore the present prevalence of breastfeeding globally and in India. Also, to explore the current laws and Acts prevailing in the country that promote breastfeeding in general and at work place. The probable reasons for the withdrawal of working mothers from exclusive breastfeeding for babies below 6 months of age will be compiled and probable strategies to enable breastfeeding for working parents from different perspectives explored.

Material And Methods:

A robust study about the literature available on breastfeeding was done. The causes of dropouts among new working mothers from exclusive breastfeeding for 6 months globally and in India were studied from different surveys and reports available on PubMed, online Magazines, et cetera were compiled. Different Laws and Acts promoting breastfeeding in general and for working mother in India were studied and the lacunae in them were explored and discussed. Many strategies for making exclusive breastfeeding for babies below 6 months in working mothers feasible were suggested.

Review of Literature

Ayurveda literature has always hailed breastfeeding as the most important source of nutrition for babies. The babies are supposed to be exclusively breastfed till 6 months of their age. In fact, babies are given top speed after the age of 6 months or 8 months in a special ritual called *Annaprashan Sanskar*. ^[7]

Balyawastha (Childhood) is said till the child attains 16 years of age. It is classified into three depending on the manner of food given according to the age of the baby; namely *Kshirap* exclusively on milk, *Kshirannaad* (milk with food), and *Annaad* (food). ^[8]

Table 1 showing agewise classification of childhood based on type of nutrition

Sr. No	Avastha	Age of The Child	Type of Nutrition
1.	<i>Kshirap</i>	Upto 1 year after birth	<ul style="list-style-type: none"> Exclusively on milk upto 6 months, <i>Phalaprashan</i> (Introduction of Fruits, breastfeeding to be continued) at the age of 6months, <i>Annaprashan</i> (introduction of cooked rice, breastfeeding to be continued) at the age of 8 months upto 1 year of age
2.	<i>Kshirannaad</i>	From 1 year to 2 years after birth	Milk + Food
3.	<i>Annaad</i>	3 years to 16 years	Food

If the infant loses its mother, or if the biological mother cannot feed the baby under certain circumstances, then it is supposed to be given the milk of another woman called *Dhatri* (wet nurse or foster mother), a healthy lactating woman from a good background or an Indian cow. ^[9]

Milk supplements and formulas were earlier popular in Western countries. But with globalization, increased standard of living and improper marketing of these products, they became popular among Indian women as well, although being expensive.

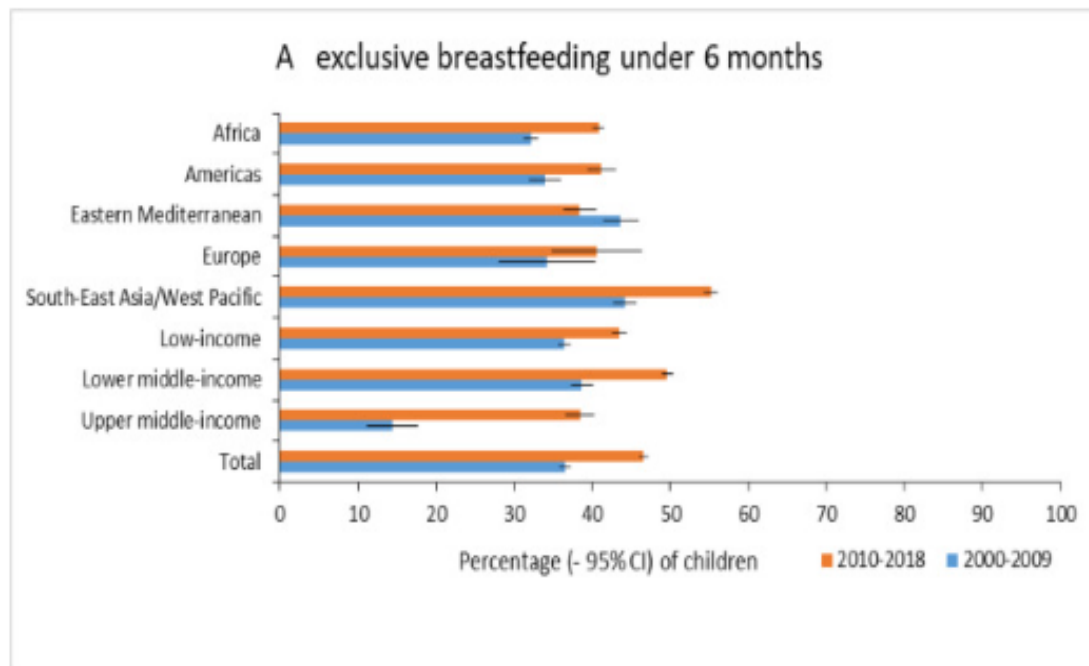


Figure 1 showing prevalence of breastfeeding in different regions of the world

As per a study during the period 2010-2018, Breastfeeding practices differed greatly across WHO regions. The global weighted prevalence of Exclusive breast feeding under 6 months was better in Lower Middle-Income countries (51.9 %) than Upper Middle-Income Countries (38.4%) Also, the prevalence of exclusive breast feeding was better in South East Asian / Western Pacific countries (55.2 %) than Mediterranean (34.5%) / European countries. (43.7%). In 44 selected LMICs from 2000 to 2009 to 2010–2018, total weighted prevalence presented an increase of 10.1% for exclusive breastfeeding under 6 months whereas the Eastern Mediterranean region had a 5.3% decrease of exclusive breastfeeding under 6 months. ^[10]

Thus, prevalence of exclusive breast feeding was better; in lower Middle-income countries than upper Middle-income countries, and better in South East Asian countries like India, also Western Pacific countries than Mediterranean and European countries.

The report of a survey organized by the Nutrition Foundation of India specified that, although breastfeeding is the traditional standard of infant nutrition in India, good infant feeding practices depend on education provided by health services. Interviews with 4926 mothers with infants under 1 year indicated that over 97% mothers suckle their infants, and 75% or more in most centers are still breastfeeding when the infant is 1 year old. At age 5 months 30-40% of infants are fed entirely from the breast; at age 1, 5-10% were getting no other food. Of the very small number of mothers who never breastfed their infants, most belonged to the highest income group. Indian mothers are reluctant to give older infants any normal family foods except cereals. ^[11]

But the prevalence of exclusively breastfed infants in India up to the age of five months in 2021 saw a decrease compared to 2012, when the share of infants stood at just above 53.1 percent. Moreover, exclusive breastfeeding refers to feeding an infant with no other food or drink, also not even water, except breast milk for the first five to six months of life. This includes expressed milk or milk from a wet nurse. ^[12]

Some women continue breastfeeding even beyond 6 months say up to 2 years but most of the women quit breastfeeding even before 6 months. Also, breastfeeding is challenging in the early days, especially among new mothers. Low milk supply, over milk supply, strong let-down reflex, engorgement of breasts, plugged duct, breast infections (mastitis), fungal infection of nipples, flat, everted or inverted nipples; improper latching of the baby to the nipple play an important role in hindering breastfeeding during the early days after delivery. ^[13]

Table 2 showing general reasons of new mothers for discontinuation of breastfeeding before 6 months

Unavoidable causes	Biological problems related to the mother	Problems related to the baby
<ul style="list-style-type: none"> ● Loss of the mother after birth ● Baby born out of Surrogacy ● Separation of Parents ● Psychological problems of the mother ● Mother consuming recreational drugs or other medicines hazardous to the bay 	<ul style="list-style-type: none"> ● Low milk supply ● Overmilk supply ● Strong let-down reflex ● Everted, inverted or flat nipples, Fungal infections of the nipples, Sore or cracked nipples ● Engorged breasts, plugged duct, Mastitis, 	<ul style="list-style-type: none"> ● Improper latching of the baby ● Low birth weight baby hence cannot suck ● Other disease like congenital heart diseases where the baby cannot suck ● Lactose intolerance

Breastfeeding challenges are different for working mothers. Challenges of joining back to work, rigid work schedules, tension between the biological impulse to nourish the child and the practicalities of workplace dynamics eventually leading to stress, lactation problems, frequent pumping to continue milk supply and privacy to pump, embarrassment of feeding in public, running back to work to make ends meet, dearth of reserved lactation spaces, tight break schedules, and inadequate maternity leave and unpaid leaves; lack of understanding and support from colleagues and seniors are much more serious causes for working women to quit breastfeeding before 6 months. ^[14]

Table 3 showing reasons for quitting breastfeeding by working mothers

Psychological and Physical Causes	Reasons Related to work and workplace	Social Reasons
<ul style="list-style-type: none"> ● Tension between biological impulse to nourish the child and workplace dynamics ● Stress ● Lactation problems ● Frequent pumping to continue milk supply 	<ul style="list-style-type: none"> ● Joining back to work early to meet the ends ● Rigid work schedules ● Tight break schedules ● Inadequate maternity leaves and Unpaid leaves 	<ul style="list-style-type: none"> ● Lack of feeding places at work place ● Lack of Privacy to pump ● Embarrassment to feed in public ● Lack of understanding and support from colleagues and seniors

Irrespective of all these challenges breastfeeding is all its worth. These problems need to be tackled at different levels by different sectors of society.

Indian legislation and breastfeeding

Indian legislation mentions breastfeeding as an inalienable constitutional right of a mother. Justice Krishna S. Dixit observed “breastfeeding needs to be recognized as an inalienable right of lactating mother; similarly, the right of the suckling infant for being breastfed too has to be assimilated with mother’s right; arguably, it is a case of concurrent rights; this important attribute of motherhood is protected under the umbrella of Fundamental Rights guaranteed under Article 21 of the Constitution of India.” ^[15]

The Indian government adopted the National Code for Protection and Promotion of Breastfeeding in 1983. National guidelines on infant and young child feeding have been layered by the Ministry of Human Resource Development Department of Women and Child Development (food and nutrition board) 2004 which encourages the promotion of breastfeeding. ^[16]

Infant milk substitute, feeding bottles and Food, regulation and production supply and distribution act 1992 is implemented by the Department of Women and Child Development 1993 which restricts the advertisement of milk substitutes and improper sale of supplements to promote breastfeeding. ^[17,18]

The Maternity Benefit Act (Amendment) 2017 was passed by Rajya Sabha and Lok Sabha under which every establishment having 50 or more employees must provide facilities of creche within a reasonable distance separately or with common facilities. It entitles women to 26 weeks of paid maternity leave with full wages

compensation by the employer. This act requires employers to provide nursing breaks for new mothers to express breast milk.

These nursing breaks a fully paid and available till the child reaches 15 months of age. ^[19]

For women working in factories, employers of the factories under Factories Rule 1963 should build a creche accompanied by a washroom within a feasible distance.

For women working in shops commercial establishments in factories, there is a mention of suitable rooms for the creche within a 1 km radius. ^[20]

Pradhanmantri Matra Vandana Yojana under the National Food Security Act for women doing informal work provides cash transfers to pregnant and lactating mothers as partial compensation for wage loss but many women are unaware of the schemes. It provides a cash incentive of ₹ 5,000/- in three installments directly to the Bank/ Post Office Accounts of Pregnant Women and Lactating Mothers (PW&LM) in DBT Mode during pregnancy and lactation. ^[21]

Breastfeeding under the state laws is applicable in the states of Andhra Pradesh Maharashtra Karnataka Uttar Pradesh Rajasthan Tamil Nadu Gujarat and West Bengal which are more or less similar. ^[22]

Table 4.1 showing laws and acts enabling breastfeeding in general

Laws and Acts	Provisions
Fundamental Rights guaranteed under Article 21 of the Constitution of India	breastfeeding as an inalienable constitutional right of a mother and the child as well
National Code for Protection and Promotion of Breastfeeding in 1983	encourages the promotion of breastfeeding
Food, regulation and production supply and distribution act 1992	Restriction of the advertisement of milk substitutes and improper sale of supplements

Table 4.2 showing laws and acts enabling breastfeeding at workplace

Laws and Acts	Provisions
The Maternity Benefit Act (Amendment) 2017	<ul style="list-style-type: none"> • Provision of facilities of creche within a reasonable distance • to 26 weeks of paid maternity leave with full wages compensation by the employer <p>fully paid nursing breaks to feed or express milk till the child reaches 15 months of age</p>
Factories Rule 1963	<ul style="list-style-type: none"> • Provision of creche with attached washroom within a feasible distance. <p>suitable rooms for the creche within a 1 km radius for women working in shops</p>
<i>Pradhanmantri Matra Vandana Yojana</i> under the National Food Security Act	cash incentives in 3 instalments for Pregnant and Lactating mothers doing informal

Breastfeeding and orphaned child

Lokmanya Tilak municipal medical College and government hospital Mumbai in 1989 Asia's first human milk Bank. Around 3000 to 5000 babies are benefited from this every year. Nearly 800 to 1200 litres of human milk are received per year.

The donor mothers are screened for Hepatitis B, Human Immune Deficiency Virus, Sexually Transmitted Diseases, et cetera and also if the milk is sufficient for the own baby of the donor. ^[23]

Amaara human milk Bank inaugurated in February 2019 in Jaipur Rajasthan in India is the first government mother milk Bank. The initiative was taken by the government of Rajasthan in partnership with a non-profit organization.

Milk Donated by the lactating mothers is collected, processed and given for distribution after a strict screening process. Later it is pasteurized after ensuring its safety. Thus, even an orphan child can be benefited from breast milk from this Bank. [24]

Discussion

There are numerous facilities at the legislative level. These laws are made to encourage working women to continue breastfeeding for a longer period. Government of India has always followed the WHO guidelines and made necessary amendments in the Acts with time and need. But the provisions of these laws and Acts are not so popular among working mothers, women doing formal or informal work and society at large.

Prevalence of exclusive breast feeding was better; in lower Middle-income countries than upper Middle-income countries, and better in South East Asian countries like India, also Western Pacific countries than Mediterranean and European countries. As the milk substitutes are costly, lower middle-income and middle-income countries still prefer breast milk feeding over substitutes. But due to non-availability of proper facilities especially in informal sector, or due lack of awareness about the Laws and Acts promoting breastfeeding at working place; many working mothers either introduce food supplements or cow's milk instead of breastmilk. The milk supplements are most of the times fortified or enriched with multivitamins which further is lacked by the food supplements.

Lacunae

There are still some lacunae which are needed to be taken care of.

1. India has no legal statute for dealing with breastfeeding in public.
2. Laws for children born out of surrogacy

Surrogacy regulation act 2021 has no provision mandating the surrogate mother to keep the custody of the child for a specific period for breastfeeding.

If the intended parents do not want the surrogate mother to pump, she can donate the expressed milk to the milk banks or suppress lactation using prescribed drugs.

The child born out of surrogacy is deprived of breast milk.

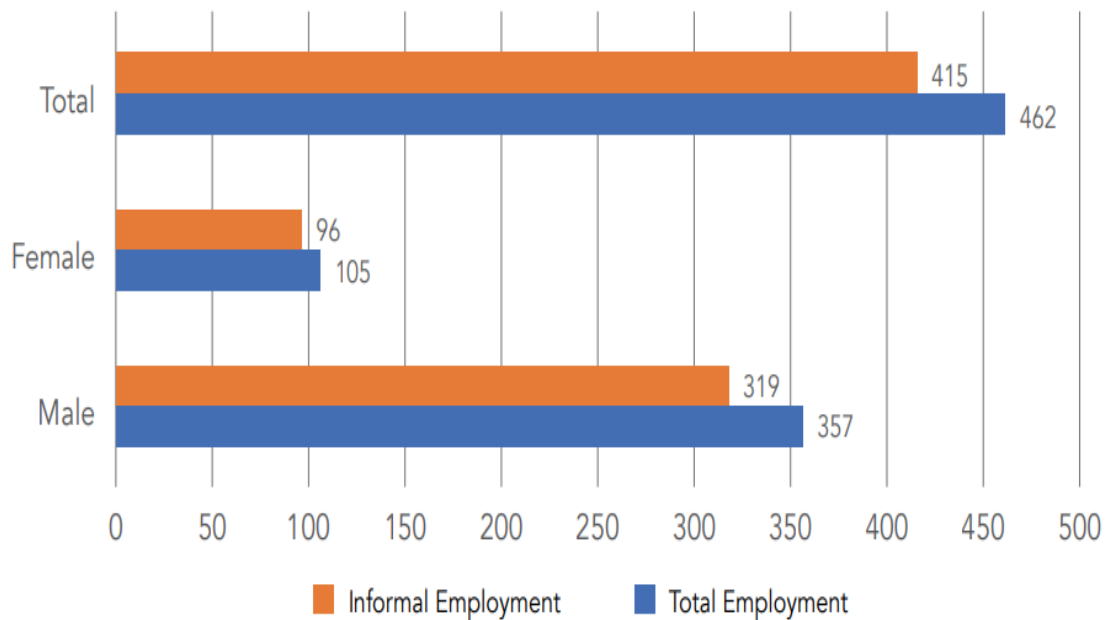
Strategies to Enable Breastfeeding:

At Legislative level:

There should be proper Laws or guidelines for dealing with Breastfeeding in the public.

Despite these laws, women are forced to return to work early after childbirth after 3 to 4 weeks.

But lack of awareness among the beneficiaries, that is breastfeeding women, is the main cause for the decline of breastfeeding. Also, the nature of work also matters for the beneficiaries and proper execution of the laws.



Source: Computed from the Periodic Labour force Survey (2017-18) unit level data.
 Note: Usual Status of employment is considered.

Figure 2 showing percentage of women doing informal work with respect to their male counterpart

Figure 2 shows that employment in India is overwhelmingly informal and 90 per cent of all workers are employed in the informal economy (in 2017–18). workers living in rural areas (91 per cent) were more likely to be in informal employment than those in urban areas (79.2 per cent), and a higher percentage of rural women were found in informal employment (93.1 per cent) than urban women (77.2 per cent) (in 2017–18). Among the poorest consumption class, nine out of ten persons are in informal employment, whereas among the top consumption class, six out of ten are likely to be in informal employment (in 2017–18). Women doing informal work are vulnerable and more prone to discontinue breastfeeding as there is very less check of the governing bodies. ^[26]

However, these provisions of several laws and Acts promoting breastfeeding for working women can be robustly run and followed better in formal sector and cities than the informal one as the women doing informal work would always be vulnerable.

Hence proper advertisement of these Laws, Display of these Laws at workplace, inclusion of these provisions in the contract of the employees or laborers should be made mandatory. Regular follow ups, surprise visits by the Government agencies to check the same can also boost the awareness of these laws among the employees.

Strategies at employers' level

Inclusion of the provision of Acts and laws meant for pregnant and lactating women on the legal contracts that are done with the employee as well as display of the same at work place would certainly raise awareness about them among the employees. Also, Facilitating workplace be it factory, industry or a shop; with a creche, feeding stations also called as "Hirkani Chambers", allowing transition options such as paid maternity leaves, flexible joining and schedule, feeding timeouts, part-time work, telecommuting, job sharing, allowing access to the baby at work through onsite child care, allowing the caregiver to bring the baby to the mother at work to nurse; and allowing the mother to bring the baby at work up to 6 months and providing all other facilities that are provided by the government will not only empower the mothers to continue the exclusive breastfeeding but would also lead to a happy and healthy environment at workplace eventually resulting in increased productivity.

Strategy at the level of working Parents

Knowledge, aptitude and practice about the advantages of breastfeeding among new lactating mothers, proper medical advice, use of pumping instruments, soothing agents and proper diet are a few measures that can help in encouraging the mothers to continue breastfeeding for 6 months and beyond. There are many groups on the social media where people with common problems including that of working pregnant women and new mothers come together and discuss about the problems and solutions. Connecting to such groups where women encourage each other to face these challenges would certainly help in continuing breastfeeding for 6 months and beyond.

Hence, being vigilant about the provisions of different facilities provided by the government is a big requirement today.

Strategies at the level of Society

Support of family members, friends; and colleagues and seniors at working place can help in making a difference for the feeding mothers. Forming groups of social workers who exclusively work for promoting breastfeeding, sensitize new mothers about benefits of breastfeeding during prenatal and post-natal period and to help them deal with problems hindering breastfeeding can do a big difference here. Also, Non-government Organizations, Social workers, Volunteer groups can make the new mothers, women employees aware about the provision of the laws by communicating them at hospitals, labor unions, et cetera.

Lastly, the feeding mother should not feel embarrassed to feed the baby in public or its workplace. It is the responsibility of the mother and also the society to preserve the sanctity of this act.

Conclusion:

Thus, awareness about the provisions of different laws and acts promoting breastfeeding among the employees, attitude of the new mothers towards breastfeeding, support from society, friends and colleagues at working place, a few amendments in laws can enable breastfeeding among working women up to 6 months and even beyond.

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