The theme of this year’s launch cannot be more appropriate or timely in light of the dramatic collapse of the WTO talks on globalization a few days ago. But first – breastfeeding. We now know from cumulated research that almost all women can successfully and safely breastfeed exclusively up to six months. We also know the superiority of breastfeeding in terms of its nutritional, immunological and possibly behavioural benefits to the infant. We also know the important benefits of breastfeeding to the mother. But this paper will not be discussing the indisputable advantages of breastmilk and breastfeeding. It will focus on the threats and the opportunities for breastfeeding in our globalized world.

In Jamaica almost all mothers (98%) breastfeed at birth. However, by six weeks more than half stop breastfeeding exclusively,1 even though they can do so safely up to 6 months. There are several explanations for this trend, but I wish to remind ourselves of the key one. Breastfeeding is robust, strong and very resilient in various biological conditions, however, in the face of inadequate sociocultural support, breastfeeding is fragile. Let me explain: breastfeeding can be very successful and for long duration whether the mother is well off and lives in the exclusive areas or whether she is poor and lives in the inner city. What makes a mother breastfeed is not where she lives, but her exposure to positive and negative social, cultural and economic influences and how she reacts to them.

Yes, we have to continue informing mothers and potential mothers about the value of breastfeeding. But if we seriously want to reverse that decline in breastfeeding rates from birth to six months, we have to do

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1Presented at the National Launch of Breastfeeding Week 2003 in Jamaica under the theme “Breastfeeding in a Globalized World for Peace and Justice”.

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more than that. We must first identify those factors which create conditions for inadequate sociocultural and economic support which could be a threat to the practice of breastfeeding and globalization presents one such scenario.

GLOBALIZATION

Globalization is the increasing interconnectedness of people and nations through economic integration and communication. One stated intention is to impose rules of free trade and free financial flows throughout the world.

Caribbean countries have open economies and agreements such as the Free Trade Area of the Americas (FTTA) and the Caribbean Single Market and Economy (CSME) are expected to reform our economies in keeping with the imperatives of globalization. There is concern, however, that the region is entering these agreements at a time when our technological capacity and level of competitiveness cannot match the requirements of a fierce-trading globalized world.

Globalization through free trade is expected to create prosperity, peace and justice throughout the world. But free trade is not necessarily fair trade. Many people around the world are disgusted with the obvious loopholes in the key principles of globalization and they are expressing it in forceful and often violent ways. The late Jamaican reggae star Peter Tosh said “I don't want no peace, I want equal rights and justice” meaning of course that if you get equal rights and justice first then peace will eventually follow. It seems Peter Tosh's sentiments resonated among the demonstrators at the globalization meeting in Cancun in September. There was one suicide and several mass protests outside and inside the meeting which led to the abandonment of the talks. We all recall the previous violent clashes between protesters and police in Seattle, Prague and Genoa – now Cancun. And it will continue every year. And why? Because the benefits of globalization are not evenly shared and there are too few winners and too many losers in the process. For us in small Caribbean states this is particularly true, as we cannot compete effectively with subsidized products of larger economies.

Now you may ask – what has this got to do with breastfeeding? On the surface – it may appear to be little. But as we examine the impacts of globalization, the effects on breastfeeding become more pronounced and more profound.

In this globalized environment: the need for economic gain puts profits before people – a major concern for the social sectors such as health.

In this globalized environment: the needs of mothers and children are easily jeopardized.
In this globalized environment breastfeeding-friendly practices can be lost, while the commercialization of infant feeding practices through breastmilk substitutes becomes the norm.

In this globalized environment, therefore, we must be vigilant.

So what should we watch for? Generally, trade agreements should not be used as an excuse not to develop and enforce national infant feeding policies which cover exclusive breastfeeding, indigenous complementary foods and the labeling of infant foods and food safety standards. We must ensure that the globalization process through agreements such as: WTO – a global process, FTAA – a hemispheric process which starts in 2005 and the CSME – a Caribbean process which is already with us, do not supersede the international code of marketing of breastmilk substitutes. In recent years the baby food industry has attempted to mislead people to think that the Code is no longer valid. Now with globalization one can easily see how the Code can be further manipulated and interpreted as a restriction on the rights of formula manufacturers to compete freely in the market place. The relevant clause in agreements refers to “trading in like products”. Breastmilk cannot and should not be compared with infant formula as a “like product” hence any such WTO agreements cannot and should not stand. Furthermore, we should remember that there are provisions which allow governments to put aside trade agreements in order to protect the health of consumers. These need to be explored vigorously. We note the ruling in September by the WTO which, for health reasons, allowed the local manufacture of essential drugs which could make them cheaply available in developing countries. Breastfeeding should be protected by similar rulings in trade talks.

COMMUNICATION THROUGH GLOBALIZATION

Through globalization the world will be much more interconnected. We note that internet connections and email have helped to link up the breastfeeding committees across the region and the world providing instant access to various advocates. Breastfeeding networks can find new and creative ways to ensure that infant and child health is protected through appropriate feeding practices. Global communication, therefore, has the potential to educate people on the importance of breastfeeding, appropriate complementary feeding and the health risks of artificial feeding. The potential certainly exists, but the reality in the Caribbean is that few such programs are aired. The truth is that we see the flooding of our airwaves with the enticements of breastmilk substitutes. The infant food companies have infinitely more resources to have their products and persuasions reach the public. So while
globalization will allow free trade and free access to the media by anyone, in reality only those who can afford it will reach the public.

GLOBALIZATION, WORK AND BREASTFEEDING

Turning briefly to the workplace, we note the chief reason why breastfeeding mothers are not adequately protected by employers is because of the need to maximize the time at work in productive activity. But there are also other reasons. In Jamaica, where 44% of households are headed by women, a study in 1991 showed although mixed feeding was introduced early, still more than half of the infants were still breastfeeding at one year of age. There was remarkable similarity in infant feeding practices between employed and non-employed mothers suggesting that cultural and other sources of maternal support also play important roles.2

At the workplace managers are ever so aware of the fierce economic competition in the marketplace and ultimately, therefore, profits come before people. And this will increase as globalization intensifies. It is unfortunate that the protective effect of exclusive breastfeeding on infant health is greatest during the precise period when women are most likely to abandon this behaviour. In this increasingly globalized world, how can we get businesses in both the public and private sector to provide adequate leave, safe working conditions before and after childbirth, freedom from discrimination and remove the fear of losing her job?

I have two specific recommendations to offer:

1. Make the case in financial terms; and
2. Insist that three essentials are in place.

Making the Case in Financial Terms

In the old days breastfeeding, with its undeniable benefits, was regarded as a social good and that was enough to obtain commitments and resources to promote and protect breastfeeding. In today's globalized world, dominated by finance and economics, almost every investment needs to be justified by “value for money”. Today we need to go beyond the cherished virtues of breast feeding and make the case for breastfeeding in monetary terms. And we do have a strong case to make.

At the national level there can be savings in reduced expenditure on formula, lower net food cost to households and lower overall health care costs. In the US in 2001 it was estimated that increasing breastfeeding at 6 months from 29% to 50% could save a minimum of $3.5 billion, most of it attributable to preventing premature deaths.3 In Jamaica in 1991 the cost of feeding a 3-month old
Infant which included cost of formula, bottles, cooking pot for sterilization and fuel was estimated and the total cost expressed as a percentage of monthly salaries. So, for the minimum wage worker, the cost of feeding this 3-month old was 90% of salary. For a community health aide it was 78%, a clerk 36%, a teacher 26% and a registered nurse 22% (4). That was 12 years ago. It is important that those estimates are redone and the costs versus the benefits of breastfeeding be calculated at the family and at the national level. I have little doubt that a strong case can be made for public and private sector entities to invest in this practice not only to benefit the health of the worker and her child but also to benefit the financial health of the company – through less health care costs of the family and fewer days away from work to care for the child.

**Insist on the 3 Essentials**

It is not known what globalization will bring to the Caribbean but regardless of its full impact, positive or negative, we must be prepared. If we wish to improve the breastfeeding rates during those critical first months of infancy, we must insist that three essentials are in place – time, space and support.

**Time**

Breastfeeding requires time of the mother – provided mainly by the family, and when the mother also is employed outside the home, by her employer. Employers often impose time constraints which have marked negative impacts on breastfeeding success because of adverse effects on suckling and milk production. Employment policies also need to recognize the importance of adequate maternal leave, (and paternal leave). Arrangements for temporary part-time employment of the mother should not adversely affect her full-time employment opportunities later.

**Space**

A mother should feel comfortable and confident in the available space she has to breastfeed. It is not often that we see women in the Caribbean expose a part of their breasts to feed in buses or other public places. One could conclude that our women are shy and modest. But it is interesting to note that, with our rapidly changing dress code, much more of those same breasts, and other parts of the anatomy, are revealed readily – in public places, at shows, and other venues of entertainment. If a woman wanted to display her breasts in public, I would have thought that breastfeeding would have been a most legitimate and acceptable reason to do so. But that seems not to be the case.

Despite this pattern, I still argue that venues should be more conducive to breastfeeding for those mothers who wish to do so. I refer to places of employment, worship, business and
entertainment. Why should a mother who wishes to breastfeed feel that she cannot go to church or a fair because she needs to stay home to breastfeed in privacy and comfort?

**Support**

For an infant to obtain the full benefits of breastfeeding there should be safe and adequate food for the mother; complementary infant foods for the period of mixed feeding and fair labor compensation that recognizes the need of families. Other forms of support center around interventions by government, business, community, health professions, and educational and research institutions.

Earlier I dealt with the need for government to introduce the required laws to protect and promote breastfeeding. I also dealt with business houses and the need for adequate parental leave and adherence to the Code.

But one issue which cuts across the various support systems relates to what is the generally expected mode of feeding babies and infants. How many young and teenage girls plan to breastfeed exclusively for six months and continue feeding breastmilk for at least one year? This is a critical question because it speaks to a fundamental aspect of our culture and tradition. The implication from this question is that we cannot wait until pregnancy before we start talking with mothers about the benefits of breastfeeding. This process has to start early in our education system and reinforced in churches, clubs and other such institutions until it becomes an understood and accepted way of life. Here is where we as health professionals need to further our outreach programmes. Here is where we, as researchers, have to find out why our new mothers might not want to breastfeed and what can be done to break those barriers.

The characteristics of globalization impose a special responsibility on all of us in the Caribbean to safeguard breastfeeding and the well-being of women. We can do this by assuring access to a safe and adequate food supply throughout the life cycle and the provision of adequate time, space, and social, cultural and economic support to women and their families.

This challenge is indeed great but our resolve must be even greater.

**REFERENCES**
