

THE ECONOMIC COST OF NOT BREASTFEEDING ON HUMAN CAPITAL DEVELOPMENT AND HEALTH SYSTEMS IN CHINA

Breastfeeding is one of the best buys in global health to save lives and improve the health, social, and economic development of both individuals and for China as a nation. Every \$1 invested in breastfeeding in low- and middle-income countries can generate as much as \$35 in economic returns¹. Yet only 21 percent of babies in China are exclusively breastfed in the first six months—well below the global target of 50 percent. Breastfeeding not according to World Health Organization (WHO) and UNICEF recommendations amounts to real costs in human life, quality of life, and national economic outcomes.

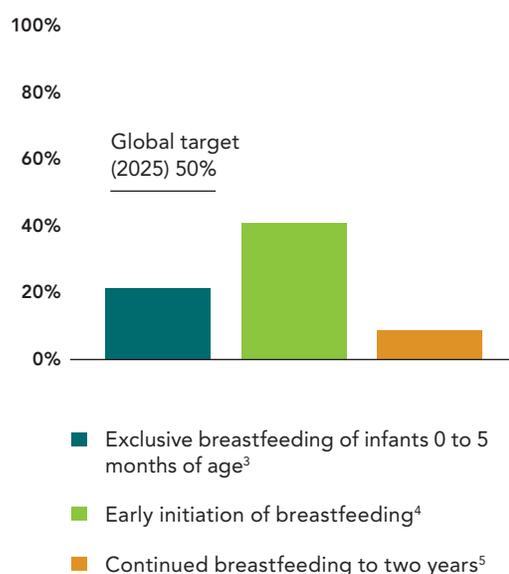
Research completed by Alive & Thrive and published by Health Policy and Planning Journal in June 2019, has quantified the economic toll that inadequate breastfeeding takes on individuals, communities, and countries.

Key findings in China

Each year, adequate breastfeeding practices have the potential to:

- Prevent 16,146 child deaths, an important contribution to reducing overall under-five child mortality
- Prevent 22,537 maternal deaths from cancers and type II diabetes
- Save over US\$196 million in health system treatment costs related to inadequate breastfeeding
- Generate an additional US\$66 billion for the economy, or 0.61 percent of its GNI, over children's productive years by increasing cognitive capacity and preventing premature mortality in the early years
- Reduce families' out of pocket expenditures to treat diarrhea and pneumonia
- Save families up to 4.1 percent of their nominal wages by not having to purchase formula

Breastfeeding prevalence in China



Adequate breastfeeding improves human capital development and reduces health expenditures for families and China



Increased vulnerability to disease results in increases in maternal and child mortality

When children are not exclusively breastfed for the first six months and continue to receive breastmilk up to two years, they are more susceptible to diarrhea and pneumonia—the two leading causes of childhood death worldwide.⁶ By supporting mothers to practice recommended breastfeeding practices, nearly 50 percent of under-two child deaths caused by diarrhea and pneumonia could be prevented annually compared to a situation with no breastfeeding. In China, improved breastfeeding practices⁴ could save **over 16,000 children's lives** each year.

Breastfeeding also helps protect the health of mothers. A mother's risk of developing invasive breast cancer decreases by six percent for every year she breastfeeds.⁷ Increased breastfeeding rates in China could prevent **22,537 maternal deaths** from cancers and type II diabetes each year.



Health care costs to treat diarrhea and pneumonia could be eliminated

Inadequate breastfeeding causes over **5.1 million avoidable cases of childhood diarrhea and pneumonia** and **250,000 cases of childhood obesity** each year. The current cost to the health care system for the treatment of children with diarrhea and pneumonia and type II diabetes in mothers that visit a health facility due to inadequate breastfeeding is estimated to be approximately **US\$196 million a year**. This cost could rise dramatically as the health system coverage of treatment for diarrhea and pneumonia increases, but could also be reduced with increased breastfeeding practices.



Cognitive losses result in lost wages for individuals

Inadequate breastfeeding impacts a child's ability to learn and consequently hinders their future earning potential. China stands to lose **US\$59 billion** a year due to future cognitive losses associated with inadequate breastfeeding.



Indirect costs to health care systems are significant burdens on health resources

When children become ill due to diarrhea and pneumonia caused by inadequate breastfeeding, parents and caregivers often incur costs to take them to seek treatment at a health care facility. Based on estimates from another country in Asia, the economic losses that result from lost productivity and transportation costs could amount to **25 percent of the cost of the health care** treatment itself.



Formula costs are significant and reduce a family's disposable income

Economic growth and increasing disposable incomes have attracted companies to market their breastmilk substitute products to mothers to feed their children. Chinese households spend over **US\$8.3 billion on breastmilk substitutes per year**, costing workers up to **4 percent** of their nominal wages to pay for economy brand infant formula for the first two years.

Policymakers are essential to the development and implementation of national policies and programs to support breastfeeding

In 2012, the 194 countries of the World Health Assembly (WHA) committed to a target of increasing the global prevalence of exclusive breastfeeding in the first six months of life to at least 50 percent by 2025. To reach this target and realize the essential health and economic benefits of breastfeeding, China must invest to scale-up breastfeeding at a national level. Policymakers should move quickly to adopt, strengthen, and implement the following policies and programs to support mothers to properly breastfeed:

- **Policies and practices in health facilities:** Include nutrition counseling and the 10 Steps to Successful Breastfeeding in hospital standards and accreditation systems.
- **International Code of Marketing of Breast-milk Substitutes:** Enact and enforce national legislation to restrict the aggressive marketing of products that undermine breastfeeding and strengthen the consequences for violators.
- **Paid Leave and Workplace Policies:** Expand paid family leave and workplace breastfeeding policies for all workers in the formal and informal sectors and allocate public funding to support.
- **Social and Behavior Change Communications:** Communicate social and behavior change through multiple communication channels tailored to the local context, including through community networks and community-based workers.

The evidence is clear: investing in policies and programs that support mothers to breastfeed saves lives and provides a high return on investment.

References

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Acknowledgements

The research was completed by Alive & Thrive, an initiative managed by FHI 360 and currently funded by the Bill & Melinda Gates Foundation, Irish Aid, the Tanoto Foundation, and UNICEF.