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The Cost of Not Breastfeeding in the ASEAN Region


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unicef 

Costs associated with inadequate breastfeeding



Mortality

Child: Excess mortality from diarrhea and pneumonia attributed to inadequate breastfeeding

Maternal: Excess mortality from breast cancer since breastfeeding is protective



Health system costs

Excess costs for treatment for diarrhea and pneumonia



Cognitive losses

Inadequate breastfeeding impacts a child's ability to learn and future earning potential



Indirect costs

Travel, caregiver time, and uninsured health care costs borne by households for diarrhea and pneumonia



Formula

Share of income in Southeast Asia spent on formula

Breastfeeding saves lives

A background image showing a diverse group of people, primarily women and children, in a crowd. A large teal circle is overlaid on the left side, and a smaller teal circle is on the right side. The teal circles contain white text statistics.

50%

of child deaths (under two)
due to pneumonia and
diarrhea could be
prevented annually

10%

of maternal deaths due to
breast cancer could
be prevented annually

Child and maternal deaths

Annual lives lost



10,718

infants (<2 years of age)
die annually from
pneumonia and diarrhea
due to inadequate
breastfeeding
5,570 deaths (<6 months)
5,148 deaths (6-23
months)



**3,455 of
33,164**

maternal deaths
caused by breast
cancer could be
averted if 90% of
women breastfed for
two years, instead of
1,749 deaths at
current breastfeeding
levels

Health care and cognitive savings

Health care
costs



293 Million USD

could be saved by eliminating diarrhea and pneumonia due to inadequate breastfeeding (across all seven countries)

Cognitive
losses



1.6 Billion USD

could be generated annually by improving breastfeeding and subsequently a child's learning ability (across all seven countries)

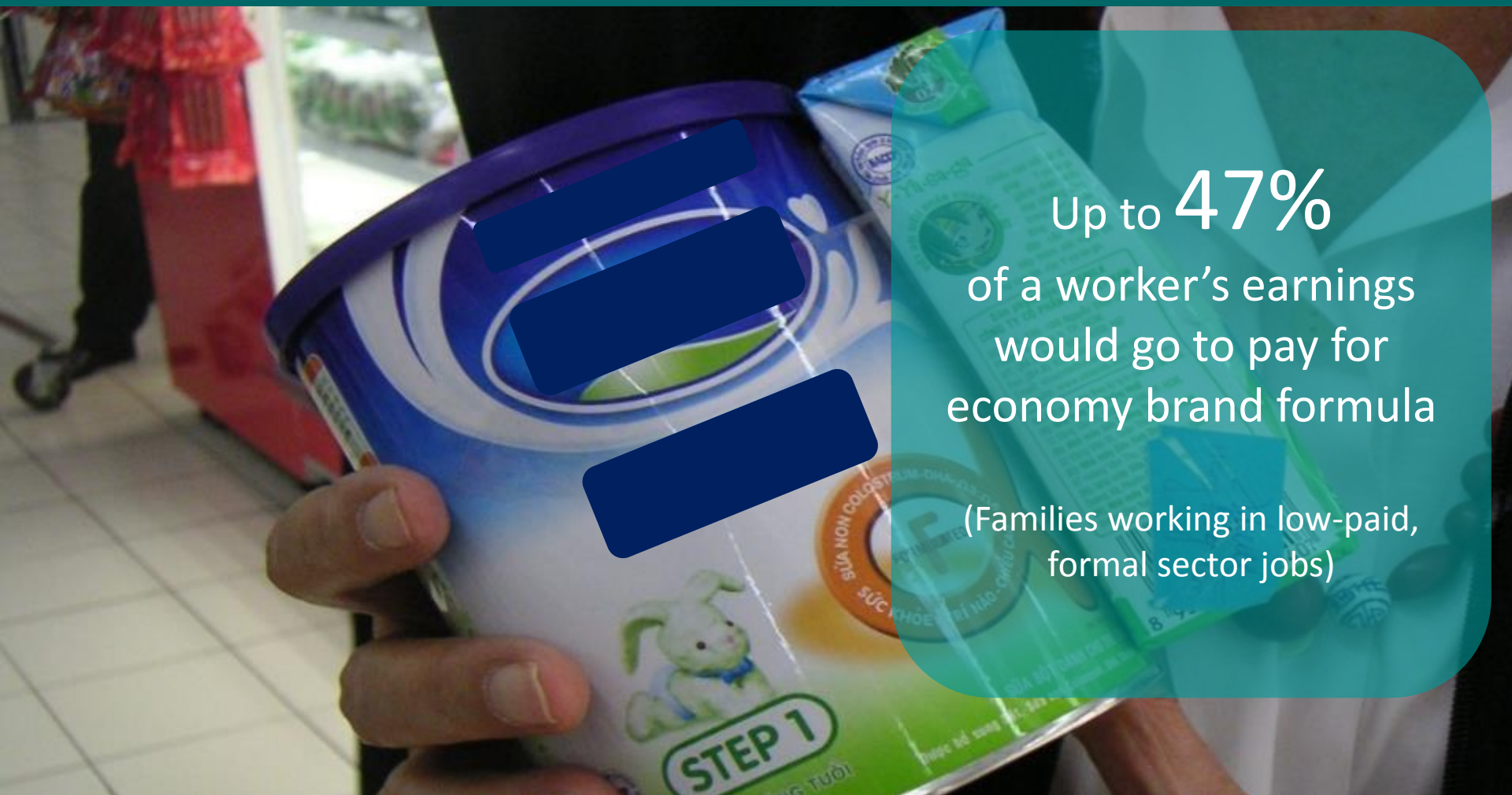
Breastfeeding reduces indirect costs

Families can incur additional
lost work and transportation

costs of up to **25%**
of the actual cost to treat
diarrhea and pneumonia



Breastfeeding eliminates formula costs



Up to **47%**
of a worker's earnings
would go to pay for
economy brand formula

(Families working in low-paid,
formal sector jobs)

What must policymakers do to support breastfeeding?

Costs associated with inadequate breastfeeding



Mortality

10,718 children and 1,706 additional mothers could be saved by moving from current levels to WHO-recommended levels



Health system costs

293.55 million USD in health care expenses could be saved per year



Indirect costs

Eliminating indirect costs to treat diseases can save families significantly – up to 25% of the cost to treat diarrhea and pneumonia



Formula

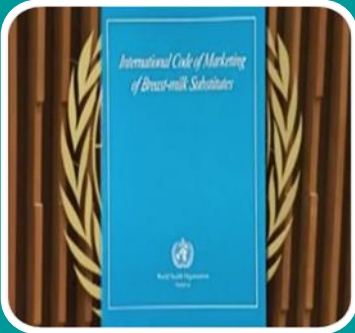
Breastfeeding is free and can save families up to half of their monthly earnings by not having to purchase formula



Cognitive losses

Adequate breastfeeding could save nearly 1,630,200,000 USD in annual wage losses

Policies and programs that support breastfeeding



International Code of Marketing of Breast-milk Substitutes

- Enact and enforce legislation to restrict aggressive marketing of products that undermine breastfeeding



Maternity protection

- Allocate sufficient public funds for minimum six months paid maternity leave
- Enact and enforce legislation that enables workplace lactation support and / or child care

Policies and programs that support breastfeeding



Policies and practices in health facilities

- Include nutrition counseling and the 10 Steps to Successful Breastfeeding in hospital standards and accreditation systems
- Cover the costs for nutrition services by health financing schemes such as social and health insurance
- Invest in pre- and in-service training curriculum for all healthcare providers



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

“Despite some progress, globally more than 800 million women workers (41%) do not have adequate maternity protection. Additionally, use of parental leave among men is low.

We need maternity protection and work-family policies that are more inclusive and supportive of gender equality.”

Guy Ryder, ILO Director-General, 2015

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