

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

Breastfeeding is one of the best buys in global health to improve social, health, and economic development outcomes.

Globally, improving breastfeeding practices could save more than 820,000 lives annually—87 percent of them infants under six months of age. In Madagascar, only 42 percent of babies are exclusively breastfed for six months, falling below the global target of 50 percent. Failing to breastfeed according to World Health Organization (WHO) and UNICEF recommendations amounts to real costs in human life, quality of life, and national economic outcomes.

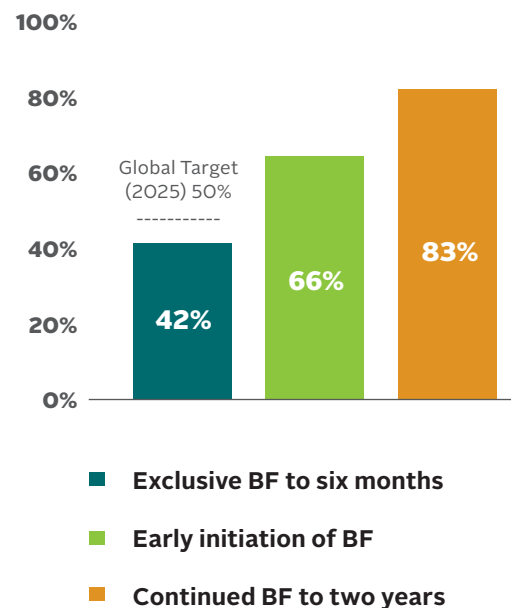
Research completed by Alive & Thrive and published by Health Policy and Planning Journal in June 2019 has quantified the economic toll that inadequate breastfeeding takes on individuals, communities, and countries.

Key findings in Madagascar

Each year, optimal breastfeeding practices have the potential to:

- Save **3,000 children's lives**—an important contribution to reducing overall under-five child mortality
- Save over **US\$1 million** in health system treatment costs related to inadequate breastfeeding
- Generate an additional **US\$125 million** for the economy, or **1.24% of Madagascar's GNI**, over children's productive years by increasing cognitive capacity and preventing premature mortality, and reducing the risk of maternal mortality
- Reduce families' out of pocket expenditures to treat diarrhea and pneumonia
- Save families up to **\$41 million** of their nominal wages by not having to purchase formula

Breastfeeding prevalence in Madagascar



What are the costs of not breastfeeding?

Increased vulnerability to disease results in more maternal and child mortality



When children are not exclusively breastfed for the first six months, they are more susceptible to diarrhea and pneumonia—the two leading causes of childhood death worldwide. By supporting mothers to practice recommended breastfeeding practices, nearly **3,000 deaths** caused by diarrhea and pneumonia for under-two children could be prevented annually in Madagascar.

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. Increased breastfeeding rates in Madagascar could prevent **52 maternal deaths** from cancers and type II diabetes each year.



Health care costs to treat children and mothers

Inadequate breastfeeding causes over **1.4 million avoidable cases of childhood diarrhea and pneumonia** 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\$1.4 million** a year. This cost could rise dramatically as the health system costs increase, but it 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. Madagascar stands to lose **US\$125 million a year** due to future cognitive losses.



Indirect costs to treat diseases result in significant costs for families

When children become ill due to diarrhea and pneumonia caused by inadequate breastfeeding, parents and caregivers often incur costs to take them to a health care facility to seek treatment. The economic losses that result include lost productivity and transportation costs. Studies from a range of countries indicate that families can incur additional lost work and transportation costs up to **25 percent of the health care treatment** of diarrhea and pneumonia.



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

As Madagascar's economy grows, it attracts greater marketing and investment from companies that sell breastmilk substitute products. The costs to purchase infant formula can be significant for families—up to **US\$41 million** in nominal wages country-wide for economy brand formula—compared to breastmilk, which is free, safe, and hygienic for all babies.

Policymakers must invest in national policies and programs to support breastfeeding

To realize essential health and economic benefits, Madagascar must invest to scale-up breastfeeding at the national level. Policymakers should move quickly to adopt, strengthen, and implement the following policies that will help all mothers breastfeed according to WHO-recommended guidelines.

- **Policies and Practices in Health Facilities:** Health facilities should prioritize preventive nutrition to protect the first 1,000 days of nutrition. Ensure health providers can deliver high coverage and quality of services and provide counseling on maternal nutrition and infant and young child feeding.
- **International Code of Marketing of Breast-milk Substitutes:** Strengthen national legislation to restrict the aggressive marketing of products that undermine breastfeeding, improve violation monitoring mechanisms, and enforce consequences for violators.
- **Paid Leave and Workplace Policies:** Strengthen and expand maternity benefits and workplace breastfeeding policies for all workers in the formal and informal sectors and allocate public funding.
- **Social and Behavior Change Communication:** Support national campaign efforts to highlight best practices for nutrition during the first 1,000 days, including practicing exclusive breastfeeding and complementary feeding.

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

Citation

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