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 Lao PDR as a nation. Every $1 invested in breastfeeding in low—and middle-income countries can generate as much as $35 in economic returns. Only 40 percent of babies in Lao PDR are exclusively breastfed for six months—well below the global target of 50 percent. Breastfeeding not according to World Health Organization 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.

**THE ECONOMIC COST OF NOT BREASTFEEDING ON HUMAN CAPITAL DEVELOPMENT AND HEALTH SYSTEMS IN LAO PDR**

**Key findings in Lao PDR**

Each year, adequate breastfeeding practices have the potential to:

- Prevent 1,597 child deaths, an important contribution to reducing overall under-five child mortality
- Prevent 117 maternal deaths from cancers and type II diabetes
- Save over US$312,000 in health system treatment costs related to inadequate breastfeeding
- Generate an additional US$235 million for the economy, or 1.96 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

**Breastfeeding prevalence in Lao PDR**

![Breastfeeding prevalence chart]

### Adequate breastfeeding improves human capital development and reduces health expenditures for families and Lao PDR

**Decreasing vulnerability to disease can accelerate reductions in child mortality**

When children are not exclusively breastfed for six months, they are more susceptible to diarrhea and pneumonia—the two leading causes of childhood death worldwide. By supporting mothers to practice proper breastfeeding, nearly 50 percent of under-two child deaths caused by diarrhea and pneumonia could be prevented annually across the ASEAN region compared to a situation with no breastfeeding. In Lao PDR, **1,597 additional children’s lives** could be saved annually by moving from the current levels of breastfeeding to World Health Organization guideline levels, contributing to overall under-five child mortality reduction.

Breastfeeding also helps protect the health of mothers. If 90 percent of mothers breastfed for two years, 10 percent of maternal deaths due to breast cancer could be prevented annually across the ASEAN region. Increased breastfeeding rates in Lao PDR could prevent **117 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 **205,000 avoidable cases of childhood diarrhea and pneumonia** and **521 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$312,000 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 their future earning potential. Lao PDR stands to lose US$7 billion a year a year due to future cognitive losses associated with inadequate breastfeeding.

Eliminating indirect costs to treat diseases can result in significant savings
When children become ill due to diarrhea and pneumonia caused by inadequate breastfeeding, parents 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 ASEAN countries indicate that families can incur additional lost work and transportation costs up to 25 percent of the actual cost to treat diarrhea and pneumonia.

Eliminating formula costs increases a family’s disposable income
As Lao PDR achieves economic growth, increasing disposable incomes will unfortunately attract companies to market their breastmilk substitute products to mothers to feed their children. The costs to purchase economy brand infant formula can be significant for families 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, Lao PDR must invest to scale-up breastfeeding at the national level. Policymakers should move quickly to adopt, strengthen, and implement the following policies to support all mothers to properly breastfeed to WHO-recommended guidelines.

• 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.

References

Additional citations include:

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.