As part of the human interest section of the *Lincoln County Herald*, the editor wants to include this article on breastfeeding vs. formula in India. The editor has given it to Jerry Rouche to edit for printing. Jerry was raised in Memphis, TN. He earned his degree in technical writing from the University of Memphis. He has been working for the *Herald* for nine years. Jerry feels the article is far too political for a human interest piece. He wants to make major changes to the content before it runs in the *Lincoln County Herald*. He also feels the picture that accompanied the original article is inflammatory and should not accompany the article in the *Lincoln County Herald*.

**The killer still at large**

**Third World Nations Look at Breastfeeding vs. Bottle-feeding**

A year ago, some nations of the world angrily and almost unanimously felt the need to call for a ban on the promotion of baby formula. Yet the WHO resolution, then hailed as a major Third World victory over mighty multinationals, is slowly turning out to be a damp squib. Hardly any government -- from Bangladesh and India in Asia to Mexico in Latin America -- has cared to translate the resolution into real action back home. And maybe they do not need to. Perhaps baby formula is not the evil that some environmental groups claim it to be.

The switch from breast-feeding to bottle-feeding has been described by many scientists as the most dramatic change to have occurred in biological behavior since human beings emerged. But it has now been proved to be a harmful form of modernisation encouraged by unethical marketing practices of private companies. These include sending sales representatives to maternity wards dressed as nurses to advise mothers that milk powder is best for their babies.
India presents probably the most dramatic case of a weakening in political will over the last year to control baby formula companies -- notwithstanding Prime Minister Indira Gandhi’s rousing speech in Geneva at the WHO. A working group of the ministry of social welfare had formulated a code for marketing of baby formula even before the WHO meeting began in May 1981. The code stipulates not just a ban on advertising of baby formula but also of baby food. But instead of becoming national legislation by now, the code still remains a confidential document. Even though 24 out of 25 members of the working group signed the final report nearly a year ago, the 25th member still has to sign it. Clearly the government is rethinking this drastic decision. The government has not yet stopped advertising of baby formula on television, either.

The pressure on the Indian government has come from The managers of the Amul Company, India's leading baby formula manufacturer. Its managers insist that a ban on advertising baby formula is unnecessary because only about two per cent of Indian babies are bottle-fed, and these are mainly rich children with access to clean water. Clean water is a large concern in India.

R K Anand, a leading breast-feeding activist who was a member of the government's working group, strongly disputes these claims of baby formula manufacturers. He points out that studies have shown that the incidence of bottle-feeding in urban areas across India varies from 10 to 28.6 per cent in poor families and 60 per cent in middle class families. In his own hospital -- the Nair Charitable Hospital in Bombay—Anand studied 200 consecutive infants admitted to the pediatric ward. Some 55 per cent of these infants were being bottle-fed. Over three-fourths of the parents earned less than Rs 150, or $3, per month. Nearly half the mothers bottle feeding were illiterate. Nine out of 10 bottle-fed babies came from homes without continuous water supply. Out of these 200 babies, 13 eventually died. All of them were bottle fed. However, there is no proof that there is a
connection between poor health and baby formula. If the mothers were illiterate then perhaps they simply did not know how to properly use the baby formula. Manufacturers of baby formula have to make a living just like everyone else, and it is not fair to penalize them just because mothers do not know how to make good decisions regarding their children’s health. Breast feeding makes a woman’s breasts unattractive, and it can also be inconvenient for a working woman. Therefore, many women decide against it, but it is a woman’s responsibility to make sure she is making the best decision for her baby, not the baby formula manufacturer’s.

The problem is, therefore, increasing among the urban poor and is slowly spreading even to rural areas. Augustine Veliath of the Voluntary Health Agencies of India in New Delhi says, “I have traveled across the country from one end to the other and have yet to find a rural chemist who does not stock at least five brands of baby food.” Various voluntary organizations recently set up the National Alliance for the Nutrition of Infants (NANI) to campaign for the implementation of the code formulated by the ministry of social welfare.

According to them, the ultimate question really is whether a poor society should allow commercial interests to distort popular feeding habits. Use of milk powder is well recognized to be dangerous for the poor and, therefore, must be prevented from reaching them. As the habits of the rich set the trends for the poor to imitate, it is only legitimate that the rich, too, must be disallowed from indulging in such socially harmful extravagance.