



MOTHER-FRIENDLY URBAN WORKPLACE INTERVENTION TO IMPROVE INFANT AND YOUNG CHILD FEEDING PRACTICES IN BANGLADESH

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The Challenge

Over 52 million children globally suffer from malnutrition.¹ As populations move into urban areas, more women are likely to have jobs that are away from their children. In recent years, more urban women in Bangladesh are joining the labour market; and in the garment sector alone account for 3.5 million female workers.² Inadequate workplace policies may force women to return to work too early after birth—making it difficult to exclusively breastfeed until six months. This can lead to premature introduction of other milks and can risk illness from unhygienic bottle cleaning, which can have long-term health and nutrition impacts on children.

The Intervention

Eminence implemented a workplace programme in Bangladeshi garment factories to ensure an enabling environment for working women to provide adequate infant and child feeding (IYCF). The intervention included advocacy and training with factory management and health providers in “mother-friendly” working conditions. The programme trained mothers on IYCF practices and provided a handbook on breastfeeding and hygiene and a lactation kit containing four breastmilk expression containers and a 24-hour breastfeeding cycle chart. Posters were placed throughout factories to promote appropriate IYCF. Factories also set up private spaces for women to breastfeed or for breastmilk expression.

The Evaluation

This quasi-experimental evaluation was conducted in twelve garment factories in four regions of Dhaka, Savar and Gazipur districts in Bangladesh over two years. Another twelve factories were selected as a comparison group. Pregnant and lactating



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women with children under six months were the target population for the study. Management, co-workers, health care providers and family members were secondary target groups. The primary outcomes of interest were knowledge and practices on hygiene and child feeding, child nutritional status, and mother absenteeism and drop out at work.

The Results

A total of 628 pregnant and lactating women were enrolled into the study. Women in the treatment group had greater increases in knowledge for handwashing, breastfeeding and complementary feeding compared to the comparison group. Specifically, treatment mothers increased their knowledge on breastfeeding initiation (50% vs. 4%) and exclusive breastfeeding duration (28% vs. 19%), breastmilk expression (78% vs. 2%), complementary feeding initiation (54% vs. 5%), and what foods to introduce (40% vs. 4%). By the intervention’s end, the median duration for exclusive breastfeeding was 3 months for the treatment group and 1.5 months for the comparison group—compared to one

month at baseline for both. As well, over half of the treatment mothers were practicing breastmilk expression by the end of the study. As a result, underweight and wasting decreased in treatment infants, and they became sick less often than the comparison infants. Treatment mothers also experienced less absenteeism and less dropout than comparison mothers.

The Lessons Learnt

Factory management can be reluctant to prioritise breastfeeding when they want to focus on workplace issues, such as production peak time, audit and worker unrest. It is important to engage with management on the impact of IYCF for working mothers and how it contributes to worker absenteeism and dropouts. Additionally, most women returning to work stop exclusively breastfeeding because they do not have the support or structure to maintain it. For these mothers, introducing relactation support is necessary to ensure appropriate child feeding up to six months for all infants. It is also important to ensure refrigerators or ice packs are available so that mothers have a cold place to store expressed milk.

Looking Ahead

This study contributes to the evidence base on how to promote IYCF with urban working mothers in developing countries. Because this model uses the workplace as its setting, factory management must be engaged to ensure acceptability and sustainability. Future IYCF programming should also look at including workplace childcare to make it easier for working mothers to be near their children to breastfeed during the workday. The results can also support policy changes at the national level to ensure breastfeeding promotion for all mothers and their infants.

References

¹ Black RE, Allen LH, Bhutta ZA, et al. Maternal and child undernutrition 1 - Maternal and child undernutrition: global and regional exposures and health consequences. *The Lancet*. 2008 Jan 19;371(9608):243–60.

² Yunus, M.; Yamagata, T. The Garment Industry of Bangladesh. In Fukunishi, T., ed. *Dynamics of the Garment Industry in Low-Income Countries: Experience of Asia and Africa*. Tokyo: IDE- JETRO; 2012:1-28.

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