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# Policy Support for Infant & Young Child Feeding in Vietnam

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## Leader Perspectives



2010

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## Executive Summary

With regard to malnutrition control in the last two decades, the main focus has been on providing children with adequate levels of food and qualified food as until the early 1990s there has been still 58% of households in Vietnam living under the poverty line (cannot acquire 2100 cal/person/day)<sup>1</sup>. However, Vietnam has been moving towards becoming a developing country over the last 20 years. The country has shifted from being a rice-imported country in the 1980s to the second largest exporter of rice in the mid 1990s and currently a recognized exporter of many food products. Malnutrition has decreased, however obesity rates are increasing more populous cities and rates of stunted children are not improving. This will influence the IYCF by adopting new approaches.

This qualitative study, approved by the Ministry of Health, conducted with 42 leaders from national agencies, government departments, mass media organizations, medical associations and hospitals in the year 2010. The study was implemented under the scope of the Alive and Thrive project Vietnam. The interviewed respondents acknowledge the values of breast milk and support the promotion of breastfeeding. Said stakeholders recognized the changes in young mother's breastfeeding and practices and the underlying reasons for not doing it for example: workload; inappropriateness of maternity leave policy; formula advertisement; poor knowledge; environment that does not allow or encourage it and poor instructions from health workers. It is obvious that the key areas for improving nutrition problems in Vietnam over the next decade are: to reduce rates of stunted children malnutrition; increase the height of Vietnamese children and improve food fortification. This information has been communicated to policy makers by the National Institute of Nutrition.

Although all policy makers support the breastfeeding promotion, many of them doubt the success of this program. The general improvement of IYCF and exclusive breastfeeding in particular in Vietnam will undergo various challenges for a number of reasons:

- **Breastfeeding is not a priority of the government.** The health sector in Vietnam has numerous areas that require financial resources in order to be improved such as: primary health care; hospital management; cost of medication, health information management; human resources, health financing; structure of the health system; health insurance etc). There is a possibility that improved quality and increased quantity of human resources in health facilities would improve the uptake of breastfeeding. Policy makers and the government now have to address the above problems in order for breastfeeding rates to improve. This may result in limited financial support from the government as aforementioned areas of the health sector compete as a larger priority.
- **The country lacks a good information system which makes it hard** to identify the true status of the IYCF and adoption of breastfeeding practices. Policy makers, health activists and the general population lack evidence necessary to understand the benefits of breastfeeding. Additionally, there is no database on exclusive breastfeeding rate across decades across Vietnam and current efforts (research and models) on breastfeeding was collected and produced for public archive. The role of independent institutions in the dissemination of information policy review was not properly recognized by governmental agencies while independent institutions recruited many intellectual scientists and policy activists.
- **Vietnam does not have the systems in place to monitor, supervising and evaluate policy implementation and policies do not support one another** in improve the IYCF (e.g. the gaps in Decree 21 and Decree 45, WHO recommendation and maternity leave policy). As a result, policies have had limited success and are not respected by the general population. Currently, Vietnamese society supports health issues that are campaigned over a short space of time for example: Vitamin A Day, Breastfeeding Week, Food Safety

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<sup>1</sup> GSO (2003) Vietnam Living Standard Survey, General Statistics Office

Month, Child Safety Month, Traffic Safety Month, etc) as opposed to reducing the burden of a health issue on a daily basis.

- **Hospital overload in MCH hospital and obstetric department, performance of health workers in counseling and behavior change communication (BCC) to young mothers** will be major challenges to overcome. Only if these issues are solved as well as the training of health workers, the application of regulation or performance protocol and good supervision will there be an improvement in childcare, health worker performance and breastfeeding rates.
- **The health sector and mass media organizations in IYCF do not collaborate enough to make progress.** Having nutrition and breastfeeding recognized as a health issue has brought together stakeholders such as the IEC/BCC, policy makers and implementers within the health sector with less participation from the following: mass media organizations; education; MOLISA and enterprises). To date, the MOLISA currently is responsible for managing general issues that affect children while the MOH focuses on clinical treatment. In the past, breastfeeding promotion was successful as the women's union, nurseries and kindergartens, media and factories all played key roles (equally as important as the health sector) to young mothers and families. In the past, mothers were encouraged to breastfeed and instructed on how to do so at on a regular basis at childcare centers and hospitals.
- **Aggressive marketing and readily available infant formula is another major challenge.** The milk corporations have won the favor of the media and a proportion of young mothers who are average and decent income earners. Milk corporations are being supported by strong lawyer force and have been successful in misleading these mothers to believe that 'formula milk helps your child to be taller'. This message is culturally significant in Vietnam as this is an aspiration of the Vietnamese people. Large financial resources allow milk corporations to deceive the country into believing that formula is more beneficial to a child's health than breast milk and consequently influence breastfeeding practices. Media is a powerful force but 50% to 90% of the media's budget is funded by milk corporations, as stated by media leaders. With limited budget capacity, how can the government and the community-based organizations work together to reverse the situation and ask the media to cooperate for the community's benefit? It remains a key question.

It is believed that Vietnam has now lost its focus on breastfeeding as the commitments and focus of international forces on this issued have faded. Nutrition used to be a higher priority, but due to perceived progress on the issue, it has fallen off the radar. The research team believes that in the past, breastfeeding was of great concern as there was strong evidence that breastfeeding affects morbidity and mortality of Vietnamese children. If consistent and reliable evidence that details the advantages of breastfeeding is likely to also: improve emotional and cognitive development; reduce social and financial burdens by now having to purchase formula, use health services use and use supplementary food after six months of age in order to provide a sufficient amount of nutrients and micronutrients for child height and weight; then the whole society and the political force will pay attention and invest in breastfeeding, supplementary feeding and childcare.

Mothers, family members and society at large need to understand the absolute and non-replaceable values of breast milk so that mothers are provided with milieus that are conducive to breastfeeding and also so that they are supported to exclusively breastfeed for the first six months of a child's life. The promotion for breastfeeding and early childcare should be conducted in the way that Vietnam has been united the whole society to participate in eradicating illiteracy.