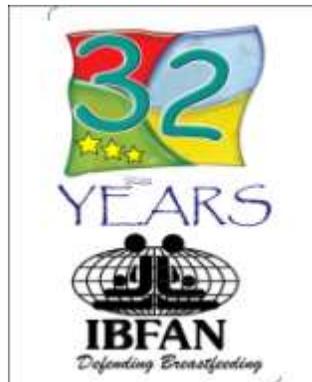


THE CONVENTION ON THE RIGHTS OF THE CHILD

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REPORT ON THE SITUATION OF INFANT AND YOUNG CHILD FEEDING IN THE NIUE ISLAND



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IBFAN – International Baby Food Action Network
CONFIDENTIAL

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References:

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1) General points concerning reporting to the CRC

Niue ratified the CRC in 1996 and reported to UNICEF. The report has yet to be tabled in the house.

2) General situation concerning breastfeeding in Niue

General Data

Seeking data information was not straight forward as sections involved with Maternal Child Health keeps their own records and data available is raw data.

No of children under 12months	20
No of children under 2years	53
No of children under 5years	110
Infant mortality Rate (IMI)	1 (2007)
Maternal Mortality rate (MMR)	nil

Breast feeding Data

Initiation to breast feeding	99%
Exclusive breast feeding birth- 3months	99 – 100%
Breast feeding at 3months	70%
Breast feeding at 6months	20%
Complementary feeding 4-6mths	99%
Continued breast feeding 12- 15mths	1%
Mean duration of breast feeding	6 – 9 months

The above data was taken from the Maternal Child Health records given by the Charge nurse. From the data available it appears that the babies are exclusively breastfed from birth to 3 months almost 100%,

and then exclusive breastfeeding rates dropped and by 6 months it is reduced they are down to 20%. Up to 12-15 months breast feeding is much less. Complementary feeding starts at an early age for all babies: 99% of babies have already started complementary feeding at 4-6 months.

The reason for the reduction of breastfeeding at the age of 3 months is because the mother goes back to work.

Obesity

The 1987 National Nutrition and Dietary Survey among adults >20 years, found a prevalence of 34.0% of overweight (BMI between 25-29) and 15.0% of obesity (BMI ≥ 30) among males, and 38.0% of overweight and 46.0% of obesity among females.

3) Government efforts to encourage breastfeeding

There is no programme at national level that focuses on infant and child nutrition and health other than during the antenatal period between the Medical Officer and the individual mother. During the postnatal period, the mother is advised and educated about breastfeeding by the midwife in the hospital, and continued in the community by the Maternal Child Health.

There is no national food and nutrition policy or national plan of action on nutrition. The Niue Food and Nutrition Committee, formally under the Ministry of Health, works within the Healthy Island Project.

There are no NGOs working in this field, and Niue does not have an IBFAN group. The continued support is provided by mothers, family and friends who are the most influential people in the life of the mother especially the young mothers.

There is no organised training specifically on breastfeeding for HIV/AIDS. The Health staffs rely on their basic training knowledge and learn on the job.

International Code of Marketing of Breastmilk Substitutes

There is no National Code of Marketing of Breast-milk Substitutes, but a policy and guidelines exist as part of the National Health Policy.

4) Baby Friendly Hospital Initiative (BFHI)

Niue is one island, and it has only one hospital situated on the main village Alofi, Niue Ffoo Hospital. It is a new hospital of 5 years old¹. It is a general hospital that provides all health services to the people and it provides easy access to the residents.

The hospital has 8 beds including the Maternity unit and a Paediatric room for babies and children.

Niue Ffoo is not a baby-friendly hospital but wishes to be part of the network. The staff is aware of the BFHI but the hospital lacks commitment and resource to provide training for staff to ensure required strategies are in place and their implementation.

There is a Breast Feeding Policy in place but it is not activated as Niue Ffoo Hospital does not network with external partners for assistance in this area.

5) Maternity protection for working women

Niue has a law that prevents girl children under 15 years of age to work. In 2006, there were 403 women in the labour workforce and 164 women not included in the work force (Census 2006).

Women have the opportunity to work and some hold senior positions in the work place. Most of them are Government employees mostly work in the Health, Education department and other government departments. There also some in the hospitality area in the private sector and a few own their own business.

Maternity leave is granted to female government employee with pay up to 6 months with a guarantee of employment if return to work within 6months.

A woman on maternity leave receives full pay for the first month, ½ salaries for the second month up to 3months, no pay afterwards.

Men have 5 days paternal leave without pay to stay home and assist the wife and baby. If more leave is needed, men can apply for paid annual leave.

The women engaged in work in the private sector are not so fortunate to receive the same benefits as the government employees. This depends on the goodwill of the employers.

For the working mother to continue breastfeeding, breaks can be arranged between the employee and the employer. This is based on an understanding that benefits for the baby and mother at the same time are beneficial for and do not putt the employer at a disadvantage and avoid causing unhealthy relationships amongst workers.

¹ The devastating Cyclone 'Heta' that struck Niue in January 2004. It destroyed the only hospital and claimed all medical records and destroyed national archives. Consequently it may be difficult to access accurate data. The Niue Ffoo Hospital (foo means new) was constructed in 2005.

The conditions for support of government employees are covered in the breastfeeding policy. For example, sick leave is given to the breastfeeding mother for up to 3 days to be with the child.

6) HIV and infant feeding

Niue is still fortunate not to have HIV/AIDS but this does not mean to be complacent about awareness and prevention.

The policy on HIV/ AIDS is outdated and does not cover HIV/AIDS and infant feeding. The department is looking to have a new policy drafted in the near future. The health department staffs are still capable to make decisions for a woman when it is required for counselling and drafting of a feeding regime.

7) Obstacles and recommendations

The following obstacles have been identified:

1. Exclusive breastfeeding to 6 months and mean continuation of breastfeeding are extremely low.
2. The commitment of the Health staff to implement the Breastfeeding Policy.
3. Lack of training opportunities for doctors, nurses and support staff in breastfeeding.
4. No coordination of ante-natal care education for mothers in breastfeeding.
5. Lack of data on breastfeeding, vital statistics for the health status of the people.
6. Lack of promotion and education on breastfeeding and infant feeding.
7. Maternity protection laws do not protect women working in the private sector. Also, government employees are not guaranteed paid leave up to 6 months to ensure for exclusive breastfeeding.
8. Breastfeeding breaks are not covered by the law on maternity protection, but are left to employers to decide.

Recommendations

- 1. Raise awareness on the importance of exclusive breastfeeding for the first 6 months of a child's life and the risks of artificial feeding.**
- 2. Support mothers, with adequate counselling on breastfeeding during both ante and post-natal care.**
- 3. Implement the Breastfeeding Policy.**
- 4. Take steps to certify the Niue Foou Hospital as a Baby Friendly Hospital.**
- 5. Re-establish collaboration with UNICEF for assistance.**
- 6. Ensure collaboration of activities for infant and child nutrition health in the Niu Moui Olaola Integrated Plan.**