



International Baby Food Action Network - IBFAN
Red internacional de grupos pro alimentación infantil
Réseau international des groupes d'action pour
l'alimentation infantile

Geneva Infant Feeding Association - GIFA

1998 Recipient of the Right Livelihood Award



**IBFAN-GIFA Recommendations to CEDAW regarding
Maternal Health and Work-related issues,
Malawi
Session 45, January 2010**

Members of the CEDAW Committee

Geneva, 11 January 2010

Dear Members of the CEDAW Committee,

For the very first time we would like to send your Committee a very brief report concerning information related to articles 11 and 12 in **Malawi**.

1) Data (from Malawi Demographic and Health Survey Reports 2000, 2004)

Exclusive breastfeeding:	< 2 months:	75%
	< 3 months:	59%
	< 6 months:	53%
Duration of exclusive breastfeeding:		2.5 months
Duration of breastfeeding:		23.2 months

Malawi is one of the countries with the highest levels of malnutrition that have remained stagnant over the years. Almost half of the under-five children (48%) are chronically malnourished, 22% are underweight and 5% are wasted.

2) Data on Maternal mortality rate (from UNICEF Breastfeeding indicators, State of the World Children, 2008)

2003-2008 reported	810
Adjusted	1100
Lifetime risk of maternal death: 1 in:	18

Maternal, infant and under-five mortality rates in Malawi are still unacceptably high. Malnutrition, poor health and sanitary conditions are among the main causes for maternal and infant mortality.

The CRC Committee (session 29, April 2002) recommended that “*the State Party... (b) Facilitate greater access to free primary health services; **reduce the incidence of maternal, child and infant mortality**; prevent and combat malnutrition, especially among vulnerable and disadvantaged groups of children; promote proper breastfeeding practices; reinforce family planning services; and increase access to safe drinking water and sanitation.*”

In 2009, the CRC Committee (session 51) recommended “*that the State party take appropriate measures and action to ensure that health care and relevant nutritional interventions are accessible and affordable and that health care centres have adequate human and material sources...*”

Concerning maternal mortality, two other issues are relevant: age of young mothers and female genital mutilation. In both of these cases, the CRC made recommendations in 2009: early pregnancies (paras 53, 54, 55); legislation prohibiting FGM, with sanctions; awareness-raising; eradication; complaints mechanism (paras 56, 57).

3) Maternity Protection at work (Source: IBFAN-GIFA report, sent to CRC in Jan 2009, session 51)

The Malawi government recognises the right of the mother to breastfeed and the need to create a conducive environment for the mother to exclusively breastfeed. Hence, maternity leave was increased from 1 to 3 months. This was based on the WHO recommendation of exclusive breast feeding for 6 months.

However in 2003, **Parliament reduced the maternity leave to 2 months in the private sector** based on the gender equity agenda. The argument from the lady MPs, who advocated for the reduction, was that the long maternity leave puts women at a disadvantage in terms of employment opportunities in the private sector. Therefore the **current status is 3 months paid maternity leave in the public sector and 2 months paid in the private sector. The agriculture sector and small business scale and housewives** are not protected under this law.

Besides the fact that all women should be entitled to the same length of leave, it is essential to understand that women need a leave as long as possible in order to rest after delivery, recover their health, as well as bond with their new child. The Ministry of Health has participated in advocacy meetings on nutrition for Members of Parliament and extension of maternity leave was one of the issues stressed. There are plans to continue the advocacy and to extend it to employers.

4) IBFAN-GIFA’s recommendations:

- **Provide primary health care services to mothers, including ante and post-natal care. Health care services should be made available (free of charge) and accessible (distance) to all; their quality should be improved.**
- **Promote proper breastfeeding practices and inform mothers on the optimal infant and young child feeding and the risks of not breastfeeding, including for their own health and child spacing.**
- **Strengthen the national maternity protection law allowing at the minimum, a 3-month paid leave to both public and private sector employees; consider extending paid leave to women working in agriculture as well as in the informal economy.**

We thank you for your assistance and understanding, and hope that it will be possible to bring up these issues during the country review. Yours sincerely,

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