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## Introduction

## CICELY WILLIAMS

A champion for breastfeeding

Cicely Williams, paediatrician, was not yet famous when she delivered this provocative speech to the Singapore Rotary Club in 1939. She was angry! Angry about the bottle baby sickness caused by the use of sweetened condensed milk instead of breastmilk. Her speech shocked the Singapore Rotarians and was not printed anywhere until almost 40 years later, in 1977, when it was heralded as "the first salvo in the battle of breast versus bottle".

Cicely Williams is now almost 93 and still active. She was born in Jamaica in December 1893 and educated in England where she graduated as one of the first women doctors from Oxford. Cicely spent much of her life practising 'primary health care' (decades before it became fashionable) in countries such as Ghana and Malaysia. While in the Gold Coast (Ghana) she accurately diagnosed the cause of a common childhood disease as protein-calorie malnutrition and called it "kwashiorkor", but her evidence was not acknowledged by her seniors until much later.

A few years after she made the "Milk and Murder" speech, she was to suffer severe malnutrition herself during three and a half years internment in Japanese prisoner-of-war camps in Singapore, during World War II. But even under near-starvation conditions in Changi jail, she kept records on the state of nutrition of all prisoners and reported: "Twenty babies born, 20 babies breastfed, 20 babies survived. You can't do better than that."

In 1948, Cicely Williams was appointed as the first head of the new World Health Organisation's Maternal and Child Health Services. In subsequent years her appointments varied between lecturing and field work in numerous countries around the world. Everywhere she went she gave insight and inspiration. Always simple, full of common sense and often witty, many of her speeches and sayings will remain valid forever. Like these "Cicelyisms":

"If you learn your 'nutrition' from a biochemist, you are not likely to learn how essential it is to blow a baby's nose before expecting him to suck. Or to realize when it is that a child needs cuddling just as much as calories." (1973)

"Unless the maternal and child welfare centres are sufficiently adapted to the needs of the people, they will inevitably degenerate into milk and immunization stations." (1955)

"I'm told that milk firms do no harm. I'm afraid I know better." (1973)

"There is nothing that civilization has to offer which is better than the welfare of children." (1935)

Many of us in the International Baby Food Action Network (IBFAN) have been impressed by Cicely's pioneering work and her unflinching fight to promote breastfeeding as an essential factor in reducing infant malnutrition and mortality. The welfare of children is too important to be left only to the health establishment.

IBFAN presents this reprint of the 1939 "Milk and Murder" address both as a tribute to Cicely Williams and as a contribution to the struggle to protect and promote breastfeeding in all countries, as necessary in 1986 as it was in 1939.

Annelies Allain

Penang, Malaysia October 1986



Let us define these words. As everyone knows, milk is a specialized secretion from certain glands in females of the mammalian species. Murder is the death of some individual which has been brought about intentionally. Legally speaking you must prove the intention of procuring death with malice. But colloquially you and I talk about "sheer murder" when someone performs an ill-considered act which is likely to result in death.

How are these things connected, milk and murder? Human babies are, as you know, appallingly at the mercy of their surroundings. They are exceedingly liable to die from digestive diseases and from unsuitable food. Milk is about the only food that they can live on. Anyone who, ignorantly or lightly, causes a baby to be fed on unsuitable milk, may be guilty of that child's death.

The whole subject of infant feeding is a very important one. It is a perpetual preoccupation for all those who are interested in the care of children. It is a subject that is of great importance to the welfare of society, and it is a subject of which a large section of the population shows abysmal ignorance and irrational prejudices.

There is no possible doubt, the best possible food for a baby is its mother's milk. Nothing has yet been invented that provides a satisfactory substitute. Statistics have been collected to show that the death rate among artificially fed babies is much greater than that among breastfed babies. And this is a death rate that shows a very marked class prejudice.

Among the tuan besars, the taipans and the towkays, \* the death rate among artificially fed babies is only slightly higher than that among breastfed babies.

Among the keranis, \*\* the small shopkeepers and the middle class population the death rate is distinctly higher.

 <sup>\*</sup> Tuan besar, taipan, towkay, are Malay and Chinese words used in Singapore for "big bosses".
\*\* Kerani, Is Malay for clerk.

But among the 'coolie' population, the really poor people of Chinatown and the kampongs, the death rate among artificially fed babies is at least twice as high as that of the breastfed babies.

Now a very large number of babies in Singapore are artificially fed. Let us examine the reasons for this.

The first reason is convention. Breastfeeding is not considered smart by a large section of the population, Chinese, Malay, European, Eurasian, Indian, every one of them. In Singapore there is some deadly influence which affects rich and poor alike. "I cannot feed my baby" is a sort of parrot cry which one continually hears, often quite devoid of veracity, which is a claim to chic and often the death knell of the baby. The Indian community is the one that is the least guilty in this respect, and it is the community with the lowest infant mortality.

Secondly we find that overwork and unsuitable food will have an adverse effect on the ability of the mother to produce milk. Often mothers have stopped breastfeeding their babies for some weeks because they have no milk, but a restful life and a good diet will in many cases restore powers of lactation to the mother and health to the child.

The third reason is bad technique. What does this mean? It means that there is a great deal of ignorance on the management of breast-feeding. Perhaps soon after birth the baby is unwilling to suck, or the milk supply is not abundant. What happens? The baby is immediately given sweetened condensed milk. This is to be deprecated. The baby develops a liking for this sweet, palatable stuff, and then refuses to take milk from the breast, with the result that the breastmilk fails.

The fourth and most deplorable reason is bad economic conditions which force mothers to go out to work. As we have seen then, mothers are known to abandon breastfeeding for one or several of the following reasons:

- 1. she feels weak;
- 2. she has no milk;
- 3. the baby will not suck;



- 4. the mother has to go out to work;
- 5. the grandmother wishes to take control of the baby;
- 6. the mother does not consider it smart to feed the baby;
- 7. someone advised them to give sweetened condensed milk.

So the baby is given sweetened condensed milk out of a dirty bottle. It is rarely or never taken out into the sunlight. It is hung up in a sarong and gets hot and sweaty. The baby gets fever and then is never washed. It develops boils and finally when they think it is going to die, the parents bring it into hospital in order to avoid funeral expenses. The infant is then found to be suffering from the following conditions: malnutrition, rickets, anaemia, beri-beri, boils and bronchitis. Possibly it suffers from a disease of the eyes due to a lack of vitamin A. If the child is over six months it has worms and finally dies from pneumonia or diarrhoea or both.

And so a baby is murdered by a community that permits the mother to live under such conditions and to discontinue breastfeeding.

Among the well-to-do classes the mother abandons breast-feeding because she wishes to be free to go out and play mahjong or because she considers it beneath her dignity to feed her own baby.

Sweetened condensed milk is unsuitable as the only food for a small baby. Why? Because it is cow's milk which has had a lot of cane sugar added to it, which means that, when it is diluted, the final percentage of fat in the mixture is poor. It is less than one third of what is in average human milk. Now fat contains two important vitamins, A and D.

Vitamin A protects the eyes and skin from harm and the body from various infections, while vitamin D protects from rickets and from convulsions. The low percentage of fat in this milk means that baby is insufficiently protected against these things, while the high percentage of sugar makes him more susceptible to boils and sores and diarrhoea.

If the tuan besar's baby is given sweetened condensed milk, it is also given cod liver oil or some expensive preparation containing the vitamins A and D. It also gets bathed regularly; it gets plenty of fresh air and sunshine. It

wears soft, fine clothes that are regularly washed. It lives in an atmosphere that is relatively free from infection and it grows fat and smiling.

But what happens to the 'coolie' baby in the slums of Singapore? Why, just what I described to you, the Singapore Disease, that is malnutrition with rickets, anaemia, boils, it may be blindness and finally diarrhoea and pneumonia.

Among the sick babies being admitted to hospital there are far more artificially fed than breastfed children.

During the first two months of this year there were 21 babies admitted with rickets. Of these 20 had been fed on sweetened condensed milk.

Of 12 babies with convulsions due to bad diet, eleven were fed on sweetened condensed milk.

Of five babies who were blind or partially blind from vitamin A deficiency every single one had been fed on sweetened condensed milk. While of the breastfed babies who die, beri-beri is about the largest single

cause of death.

We have no time here to discuss psychology but every single psychologist in the whole of creation will tell you how exceedingly important it is both for mother and child that the baby should be breastfed.

How can we correct this unfortunate state of affairs? Who is to bring about the reforms that are necessary? You, ladies and gentlemen, only you can do it.

You can insist that only unpolished rice is used in your households and that your wives and your daughters and your daughters-in-law feed their own babies. You can demand that lessons in hygiene and in citizenship that are given in schools are so practical that they will influence the lives of each one of your sons and daughters.

You can ask for legislation which will forbid the adoption, sale and transfer of babies under six months old. Up to this age a baby needs milk from its



own mother. Only the death or serious illness of the mother should deprive it of its rights. Mind, I repeat, serious illness. There is a vast number of cases in which the parents give the excuse that the mother is "not very strong" or "not very well" that are pure fabrication.

A short while ago a small baby was admitted to my wards, dying of diarrhoea. The baby had been fed on sweetened condensed milk and disaster had resulted. I asked the doctor why the mother had not fed the baby. "She did not wish to" he replied. "If I insist on the mothers breast-feeding the babies, then all my patients will leave me". It is your fault, it is public opinion, misguided and obstinate as it is, that is murdering so many children.

You can insist on decent housing conditions.

There is another thing that you can do. All women workers, clerks and coolies, teachers, doctors, and domestic servants alike, should have adequate time after confinement in order to feed their own babies.

If anyone wants to get rid of a baby and throws it into the river, then that person is at once prosecuted for murder. If by sheer carelessness he or she allows the child to be burned, scalded, dropped or otherwise injured, then the carelessness becomes a serious offence, punishable by law. But a child may be killed by being fed on unsuitable food, it may be neglected to the point of death, and it is difficult to prove anything against those who are responsible.

If you are legal purists you may wish me to change the title of this address to Milk and Manslaughter. But if your lives were embittered as mine is, by seeing day after day this massacre of the innocents by unsuitable feeding, then I believe you would feel as I do that misguided propaganda on infant feeding should be punished as the most criminal form of sedition, and that these deaths should be regarded as murder.

For further reading on Dr Cicely Williams:

Child and Family, 16: (1), 50, 1977, an American magazine edited by Dr Herbert Ratner, who was the first to publish the "Milk and Murder" speech.

Retired, Except on Demand, the Life of Dr Cicely Williams, complete biography of Cicely Williams, by Sally Craddock. Published by Green College, Oxford, UK, 1983.

Primary Health Care Pioneer, the Selected Works of Dr Cicely Williams, edited by Naomi Baumslag. Published by the World Federation of Public Health Associations and UNICEF, Washington, USA, 1986.

"Poor infant feeding practices and their consequences are one of the world's major problems and a serious obstacle to social and economic development. Being to a great extent a man-made problem, it must be considered a reproach to our science and technology and our social and economic structures, and a blot on our so-called development achievements."

Statement from a meeting on Infant and Young Child Feeding, organised by the World Health Organisation (WHO) and the United Nations Children's Fund (UNICEF), Oct. 1979

"Evidence from the developing countries indicates that infants breast fed for less than 6 months, or not at all, have a mortality rate 5 to 10 times higher in the second 6 months of life than those breast fed for 6 months or more."

Dr Halfdan Mahler, Director-General, WHO, 1981

"...then there is breastfeeding. And in this case, it was the voluntary organizations that did the pioneering work..., [and people like] Cicely Williams, who was an advocate for breastfeeding in the 30's,... [who made it] an acceptable topic for governmental action. WHO and UNICEF, I regret to say, would never have gotten into this, but for the fact that the field was made an acceptable one for discussion."

James Grant, Executive Director of UNICEF, April 1986.

"Recent research has repeatedly confirmed the scientific basis of these statements made by Dr. Cicely Williams in 1939. They are still very pertinent today. Had her advice been heeded, many lives would have been saved. The time to act is now."

Dr. Gary Kneebone, Professor of Paediatrics, Flinders University, Adelaide, Australia, 1986.