



## **Mothers in the Informal Economy and Changes in Child Feeding and Caring Roles in Kampala, Uganda**

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### **Abstract**

The paper examines the child feeding and caring practices of mothers in an informal economy in Kampala City, using qualitative data collected in 1996. It was found that the supplementary feeding of children in this context started as early as three weeks despite the widespread belief among mothers that full breast feeding should go on up to at least three months. This action was justified in terms of insufficient milk, working away from home, maternal illness, increased appetite of the child, sex of the child, child illness and contraception. This discussion, therefore, explores the ways in which, due to financial constraints, relatives as childcare providers are normally relied on heavily by working mothers.

### **Résumé**

Cet article s'intéresse aux pratiques en cours concernant l'alimentation et les soins assurés par les mères, dans le secteur informel, à Kampala, en Ouganda. L'analyse est basée sur des données qualitatives collectées en 1996. L'étude révèle que dans ce cas de figure, l'alimentation complémentaire des enfants commence dès les trois semaines de celui-ci, même s'il est établi que l'alimentation exclusive au sein doit être pratiquée au moins jusqu'aux trois mois de l'enfant. Les raisons invoquées étaient l'insuffisance de lait, les activités pratiquées loin du domicile, les maladies maternelles, une augmentation de l'appétit du nourrisson, le sexe de l'enfant, les maladies infantiles et la contraception. Cette contribution montre bien la dépendance des mères actives envers les membres de leur famille qu'elles chargent de prendre soin de leurs enfants.

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## **Introduction**

The pattern of women's work in the developing world has changed in the recent past. Increased urbanisation, industrialisation, poverty and migrations have caused greater numbers of women to seek income generating employment away from home (Oppong 1993). There is, therefore, a genuine need in most low-income households for mothers to earn income at the same time as they are bearing and raising children. The shift to wage employment away from home, however, makes it difficult for working mothers to combine work-related aspects and proper feeding and childcare. This outcome is because the work environment and nature of work do not warrant easy compatibility of the two roles of worker and mother. The dimensions of the crisis for working women regarding how to cope with the feeding and caring needs of young children goes largely unrecognised and unanswered – particularly in terms of workplace design and supportive aspects. The emphasis in large-scale studies has been on number of children born rather than on the qualitative issues of modes of caring. Yet it is the latter which is of paramount importance for the outcomes in terms of child survival, development and investment in human resources.

In Uganda, the increasing participation of women in employment outside the home can mainly be attributed to the worsening economic situation and the ever increasing cost of living, which have marginalised women's incomes, especially the earnings from agricultural produce (Asowa-Okwe 1993). According to the Household Budget Survey (HBS) for 1989-90, 30.6 percent of the urban women in Uganda were in the labour force, of which 7.5 percent, 1.3 percent, and 20.4 percent were involved in agriculture, industries, and services respectively. By 1992, the percentage of women in the labour force of women had risen to 42.8 percent in the urban centres, of whom 28 percent were in service sector, and 10.4 percent and 1.8 percent in the agricultural and industrial sectors respectively (The World Bank 1995).

Of great concern however is not the increased participation of women in the market economy per se, but the increasing number of working mothers, for whom employment and family responsibilities are spatially separated. The incompatibility of the two roles of mother and worker is likely to arise because of new role expectations as well as changing opportunities and resource constraints (Oppong and Abu 1985).

Traditionally, women's roles as mothers focus on their activities as bearers, nurses and socialisers of the next generation, while their occupational roles may be defined in terms of context, activities and

functions. One can thus say that a woman's ability to cope with an occupational role as well as child rearing depends partly on the context, flexibility and formality of the occupation. This makes the relationship between women's work and child rearing practices worth studying because the resultant conflicts between the two aspects often tend to disfavour proper child rearing practices. It implies an increased use of artificial milk and a more restricted use of breast feeding. In addition, mothers have to find alternative childcare while at work which may take the form of housemaids, daycare centres, siblings, relatives and neighbours.

A number of studies have pointed out the lack of an inverse relationship between women's participation in the labour force and fertility, childcare and other domestic work in non-Western cultures (Lloyd 1990, Caldwell 1982). The major reason often cited is the prevalence of extended families in which grand mothers, older siblings, co-wives or other adults substitute for the mother in caring for the children. However, the extent to which extended kin members are actually available as childcare substitutes in urban areas of the third world today may be overstated. For example, Fapohunda (1982) reports that in Nigeria, this kind of support system is breaking down because aged parents are reluctant to stay in cramped, strange, urban environments when they have more comfortable options in villages. In addition, co-wives today live in separate houses and are also employed outside the home. The study further points out that it is only to a limited extent that urban families send their children to be raised by rural relations. Also declining is the residential pattern whereby poorer relatives are sent to help with childcare in the urban kins' homes. Even in the presence of housemaids, the mother of small children is forced to spend long hours away from her job sitting in line in overcrowded health clinics. The situation in Uganda, particularly in Kampala, is not any different. The growing urban childcare dilemma has led to the demand for commercial day care centres in Kampala (Najjumba and Sentongo 1994).

The relationship between women's work and childcare has been a subject of great interest in population studies. It is well known that the level and pattern of women's labour force activity is affected by the need for childcare, since women, not men, are almost always responsible for childcare. Childcare responsibilities therefore are an important factor facilitating women's ability to balance productive and reproductive roles. Some women stay out of the labour force altogether, while others take up work that can more easily be combined with child care because it is near or at home, has flexible or part time hours, or allows the child to be cared for at work (Connelly et al. 1991; Church 1978).

The availability of individuals who assume childcare roles is a function of many factors. One of these factors is composition and size of the residential domestic group, with socio-cultural norms and values determining the intra-household sharing and delegation of child care responsibilities among mother, spouse, older and younger children, grand parents, hired helpers, and other relatives who may come to live with the family (Oppong 1991). It is important to note however, that kin networks appear to be weaker in the urban areas of Uganda as is the case elsewhere, making it less likely that relatives will take on care giving roles. It is against this background that this paper attempts to address the child feeding and caring practices of mothers in the informal economy in Kampala.

### **The informal economy in Uganda**

In Uganda, the major activities in the informal economy include food processing, trading, metal fabrication, carpentry making, handicrafts, construction, repairing vehicles and working in restaurants (Manpower Planning Department Uganda 1989). These activities in most cases employ less than five persons, predominantly owned by family members, using labour intensive methods, with simple management systems and minimum documented controls. In addition, the technical know-how and operational skills required are frequently obtained outside the formal education system. The purpose of selecting the informal sector for the study is mainly twofold. First, by virtue of their low status, most of the women who are engaged in employment outside the home are absorbed into the informal economy because of the easy entry into the sector and the flexibility of the activities therein. Secondly, informal sector workers have no institutional protection such as paid maternity leaves or sick leaves, which makes the group distinct and worth studying. Unlike the formal economy, there are no stipulated regulations governing informal sector workers with regard to maternity leave or salary benefits while on leave. While the work in the informal sector seems to have flexible schedules, the work environment does not warrant childcare while at work. This is because either the operational area of informal activities is too small or the hygiene too poor and thus a health hazard to the children. These two aspects necessitated the formulation of bye-laws prohibiting mothers working in the markets from bringing children under five years old with them to work.

### **Methodology**

The data on which this paper is based were collected in a qualitative study, which was conducted among informal sector mothers in Kampala in 1996.

Study participants had to have children who were under two years of age. This is because children in this age group have particular nutritional needs, due to the combined effects of rapid growth and a high prevalence of infectious diseases (Leslie and Buvinic 1989). Second, most Ugandan women do not breast feed beyond two years (Uganda Statistics Department and Macro International 1996). The data were generated in two phases. The first phase used key informants (KIs), and data collected from focus group discussions (FGDs) formed the second phase. These qualitative methods were used because they enable observation, open discussion and an in-depth understanding of the problem under investigation.

In-depth interviews were held with Key Informants (KIs) who were selected on the basis of occupation, child-rearing experience, age and willingness to be a respondent. These women were selected from the four most common informal sector activities, in which women dominate, namely: market vending, shop proprietorship, tailoring, and hairdressing. The locations where the respondents were drawn were Kalerwe market area, Kiyembe, Luwum Street, Wandegeya, and William Street. Informants from each of the above mentioned occupational categories were identified primarily on the basis of having at least one child who was under two years, and having been involved in the activity for more than two years. For each pair of informants, one member had to be less than 24 years while the second one had to be 25 and above, in order to cater for differentials in child rearing experience arising from age differences. These helped in the identification of the important aspects concerning these particular activities with respect to methods of obtaining products together with marketing, child rearing experience, role conflict and/or compatibility together with coping mechanisms normally adopted.

Five focus group discussions (FGDs) of eleven members each were conducted (1 in Kiyembe market, 2 in Nakasero market, and 2 in Owino market). The first focus group served as a pilot group, which enabled the researchers to assess the success and usefulness of the information that was to be generated from the focus groups. The choice of Nakasero and Owino markets was a result of these two places being the hubs of women involved in small petty trade and market activities. In addition, the concentration of women in these two particular work places was an advantage in the formation of focus groups. Age of mothers and type of activity/occupation were the criteria used in the organisation of the focus groups, and these were arrived at after regular visits, observations and consultations with the women representatives of both markets.

The first two focus group discussions were held in Nakasero market, which is popularly known for its specialisation in both fresh and dry foodstuffs. Focus group 1 (FGD1) consisted of mothers in the age bracket 15–24 while mothers who were aged 25 years and above formed the second focus group (FGD2). Owino market, however, is more diversified in activities, and women there mainly engage in trade in second hand items like clothes, shoes, handbags, etc., together with the preparation (cooking) and serving of food and drinks to the entire market population. From observation, vendors of second hand items are relatively older than those involved in food preparation. Based on this, FGD3 comprised of older mothers (25 years and above) who were vendors of second hand items, while FGD4 was formed by young mothers who were selling cooked food/drinks in the market.

### **The study findings**

The findings presented in the sections that follow focus on child feeding and caring practices of the index child together with compatibility of worker and mother roles.

#### ***Breast feeding***

Full breast feeding is defined as a situation whereby a child's only source of nutrition or food is breast milk. Included under this definition is exclusive breast feeding (feeding the child on only breast milk) and almost exclusive breast feeding (occasional tastes of ritual foods or water) (Labbok et al 1990). It is worth noting that in most cultures in, particularly, Africa, a number of liquids may be given in the form of sugared water, herbal teas, honey water mixtures, ghee, mushroom infusion, paps, etc., as early as one month of age (King and Ashworth 1987). In the light of the above, 'full breast feeding' was used in the study to accommodate both exclusive and almost exclusive breast feeding (where children also receive water, juice or traditional herbal mixtures in very little amounts of around two to three teaspoons per day), which is also very common in most Ugandan societies.

In the study, mothers were asked to state the ideal period in months within which children should be fully breast fed and there seemed to be a consensus that this should be between 3 to 4 months. However, almost all of them reported not to have done so. Respondents were thus requested to supply information about factors responsible for their early initiation of supplementary feeds to the children's diet. The common factors mentioned were: insufficient breast milk, working away from home, maternal illness, growth pattern and sex of the children as reflected in the appetite, child's illness and contraception.

Insufficient breast milk emerged as the most important factor in all focus group discussions, which governed the mothers' decision to terminate full breast feeding. It was reported that this normally leads to an inadequate food intake for the child, thus making mothers introduce other foods to supplement the breast milk. Reflections of this practice can be found in the following statements:

In most cases, you realise that you no longer have adequate breast milk to satisfy the baby. So, you end up introducing supplements (Respondent FGD1).

I cannot fully breast feed for more than one and half months because I do not have sufficient milk for the baby (Respondent FGD3).

I cannot produce adequate breast milk for the baby 3 weeks after birth. So, I introduce supplements before the end of the first month (Respondent, FGD2).

I have very little milk and therefore cannot fully breast feed for more than 1 month (Respondent FGD4).

In general terms, the mother's perception of the adequacy of her own milk appears to be a prime determining factor in the decision to begin supplementation. Karamagi (1985) explains that early introduction of solids into an infant's diet impairs the mothers' lactation by decreasing the appetite of the infant and thus the vigour in stimulating the nipple to elicit prolactin and milk let-down reflexes. He thus observes that early weaning of children (introduction of supplements) may be a cause rather than a 'cure' for insufficient milk.

Related to the above reason is the mothers' working away from home. The participants felt that working away from home deprives them of the ability to access their children whenever they wanted so that they could fully breast feed on demand. The following are some of the statements that were made by some participants in the focus group discussions:

I only breast fed fully for 3 weeks because I had to resume work (Respondent FGD3).

I normally breast feed fully for 2 months because I am an employee (Respondent FGD4).

I breast fed my second last born fully for 3 months because I was not working. But the one I have now, I only breast fed him for 1 month because I had to go back to work (Respondent FGD4).

Another reason to explain the early introduction of supplemental foods by mothers, which featured in all focus groups, is the children's appetite and growth pattern. Participants felt that children who have a very high appetite (which is normally the case with fast developers) easily lose interest in breast milk thus leading to early initiation of supplements. An

element of sex preference was observed in the course of this discussion, with most participants expressing the view that boys cannot feed on breast milk alone for more than a month. It was claimed that boys need early supplementation because of their high appetite and growth pattern compared to girls. This was echoed in statements such as the following:

If it is a baby boy, he has to start eating other foods at an early age because of his appetite (FGD2 Woman 6).

Some children, particularly boys have such high appetite that you just need to initiate supplements very early in their diet (Respondent FGD1).

Other factors which came up include sickness of the mother such that she could not get sufficient milk to fully breast feed. Other respondents said that their children were given supplemental foods by other family members without the mothers' knowledge. In so doing, children started liking other foods in addition to breast milk. An example of this phenomenon can be found in the following statement:

Baby sitters normally give supplements and solids to our children very early, around 2 months without our knowledge; particularly when the child is of the type that cries a lot (Respondent FGD1).

A child's illness was also mentioned as one of the reasons that could induce mothers to introduce supplements early in a child's life in the belief that the child would recover faster. At times the sick child refuses to breast feed and forces the mother to use supplements. Also some mothers maintained that breast milk alone may lead to child illnesses. For example, two mothers said:

If a child falls sick, you cannot continue breast feeding it fully. You just need to introduce supplements. I have experienced this and I know what it means (Respondent FGD2).

Breast milk makes my children develop diarrhoea. So, I cannot fully breast feed for more than 3 weeks (Respondent FGD2).

There was general consensus among the respondents that contraception and breast feeding were incompatible. It is believed that contraceptives, particularly oral pills, can lead to insufficient breast milk, thus leading to the shorter duration of full breast feeding. One of the participants in the focus group discussions said:

I normally give up full breast feeding at 2 months because of contraception. Pills normally reduce my supply of breast milk, and I have to introduce supplements once I start contraception (Respondent FGD3).



An observation made in the course of the group discussion was that mothers were unaware of any difference between breast milk and any other milk or infant formula. To respondents, the introduction of other forms of milk to the child's diet was the same as actual breast feeding. One participant echoed this belief by saying

I always stop full breast feeding early (around 1 month) and I introduce cow's milk to the child because it is actually the same as breast milk (Respondent FGD3).

### ***Prolonged breast feeding***

The study probed mothers' perceptions about advantages of prolonged breast feeding to both mother and child, the ideal period within which a child should be fed on the breast, and the problems of early weaning. There was a consensus among respondents that a child who is breast fed for a long time develops much faster than one who is breast fed for a short period; and that breast milk increases the child's intellectual capabilities, which may later be reflected in the child's performance at school. Some also mentioned the reduction in the incidence of disease but only after a probe. The following sample of statements illustrates:

A child who is breast fed for long develops much faster and swiftly goes through every stage of development – e.g walking, talking and even performing well at school (Respondent FGD3).

Prolonged breast feeding increases a child's intellect. In most cases, such a child would perform well in school which would be of great benefit to the parents (Respondent FGD2).

With respect to problems associated with early termination of breast feeding on the part of the child, most respondents gave as reasons the increased incidence of disease, increased crying of children causing great disturbance for the mother, and loss of appetite and at times general failure of the child to adjust to a breast milk-free diet.

For the mother, the only advantage of prolonged breast feeding mentioned in both focus group discussions and in-depth interviews was delayed pregnancy because of the contraceptive benefits of lactation. Most of the younger participants aged 15-24 mentioned between 12 and 18 months, while older participants cited 24 months and over as the ideal period within which a child should be breast fed. Cow's milk was the most popular milk given to children, while food included mashed potatoes and beans mixed with milk and margarine.

### **Child care arrangements while away from home**

It was observed in the course of interviews and discussions with the respondents that almost all participants relied on relatives, rather than maids, as providers of care to children while the mothers were at work. These normally included younger sisters, nieces and sisters-in-law. A few women mentioned their own mothers as baby caretakers.

The high costs of maintaining maids ranked as the most important reason for not using maids as providers of childcare. Other reasons were the dishonesty of the maids, and the lack of adequate space in homes to accommodate the maids. Samples of the statements from focus group participants included:

I cannot afford to take on a house maid because her wage is expensive yet I do not pay anything to the relatives with whom I leave my children (Respondent FGD1).

House maids are expensive. One has to pay them every month, which is not the case with relatives. The latter are your own people and thus do not ask for any payment (Respondent FGD3).

Unless you have a spacious room, it is hard to stay with a maid in small houses like the ones in which we stay (Key informant Wandegeya).

The women however pointed out that relying on relatives also has its problems with the free child care service notwithstanding. Some of the problems included not being able to give proper and explicit instructions on how you want your child to be cared for, and also a relative might have her own problems making it difficult for her to look after someone else's child.

In her study on market women in Kampala, Davis (1997) found that the economic burden of supporting an extra person in the household (baby sitter) was a serious and stressful aspect regarding childcare arrangement for mothers. This is made worse by most mothers lacking enough money as capital to restart their businesses after child delivery.

When probed on whether spouses provide any assistance in relation to child care, all respondents and discussants pointed out that they receive mainly financial assistance in form of 'buying things needed by children at home', 'paying medical bills of the child when sick', and 'buying milk and food for children'. The women however complained of the inadequacy of the assistance rendered by some spouses. This is not surprising because childcare is a woman's role in most of the African societies. A man's parental responsibilities are mainly assessed in terms of financial provisions towards aspects like health care costs when the child is sick and material goods like clothes. This can be confirmed by findings of a

study carried out on market women in Kampala. The study respondents mentioned the specific household items that a husband was expected to provide at the minimum and these included: clothes for the family, particularly children, paying school fees, and paying for medical treatment (Davis 1997).

### **Self-executed child caring tasks**

The participants were asked about the child caring tasks that they normally undertook by themselves. The tasks mothers reported to prefer to do for themselves were: feeding the baby, preparing food like porridge for the baby, cleaning the cups and other feeding items, preparing clothes and whatever the baby is going to use for the day, etc. One respondent said:

I always believe that any responsible mother should be directly in charge of what the child will put on for the day and food and drinks that will be given to the child while one is away (Key informant, Kalerwe).

This is evidence that much as mothers are engaged in productive activities outside the home, they still feel obliged to carry out maternal roles and responsibilities particularly those that enhance the welfare of their children. In her findings on ordering of daily activities by market women in Kampala, Davis (1997) reveals that preparing the baby's breakfast ranked very high on their childcare agenda.

### **Child fostering**

Participants were further introduced to the subject of child fostering in an effort to establish the desirability of the practice among working mothers, given the competing needs of motherhood and working. The results generated by the interviews revealed that all the key informants were strongly against the practice of child fostering. They went further to suggest associated problems like lack of maternal love, guidance and care, and the poor socialisation of the child. Two informants for example said:

The children do not get special love like that of the mother... they also tend to develop aggressiveness because they would all the time be reminded by the people they stay with that they are not in their home (Key informant Luwum St).

When you go to visit such a child, you may find it stunted and very dirty which may even make one hate the person staying with the child (Key informant Kalerwe).

Participants in the focus group discussions as can be evidenced from the following answer held similar views. One respondent said: 'It is not good

to foster children because acceptable behaviour varies from one person to another. You would rather be with her/him and teach her/him everything' (Respondent FGD2).

The fears expressed by the respondents can be confirmed by Oni (1995). Using data from Ekiti in Nigeria, Oni found that fostered children among the Yoruba were faced with psychological strain arising from their separation from parents, and their fear of questioning whatever was done to them by their foster parents in the new environment. In addition, fostered children within the Mende households in Sierra Leone were reported to have been found to lack good and nutritious food in their foster homes (Bledsoe, 1990). Bledsoe further claimed that non-fostered children were treated better while fostered children were often mistreated.

With regard to the circumstances that may force mothers to foster their children, there was a lot of argument on why mothers may resort to such a strategy. Some respondents strongly maintained that it was not good at all whatever the circumstances for mothers to part with children. Some of the statements said in support of this included:

I will live anywhere with my children. It is only death that can separate us (Respondent FGD2).

I am the only one responsible for rearing my children. I cannot transfer this responsibility to anybody whatever the case (Respondent FGD3).

To some other members, financial inability (though presented in different dimensions) came out as the most important factor which may induce mothers to part with their children, followed by a heavy workload, as reflected in the following sample of statements:

If it were not for financial problems, I would stay with my children, and avoid giving problems to anybody (Key informant, Wandegeya).

You may not have a job, hence no money to look after the child (Key informant, Luwum St).

You may not have the money to pay for the house-girl and to buy food for both of them (child and maid) (Respondent FGD4).

In FGD2 the issue became very controversial with respect to marital disruption. To the discussants, marital disruption (not occasioned by death) came up as the only factor due to which mothers would have to separate from their children, but with financial problems again emerging as an

underlying force though operating through marital disruption. For example, some of the respondents said:

If my husband chases me away and has his own house, then it would be better for one to leave the children with the father. I for one cannot afford to rent a house as good as the one I am staying in now with my husband and I do not want a bad environment for my children (Respondent FGD2).  
If my husband is caring and provides for his children, then it is best for one to leave them behind because nobody can assist you when you have children and you may fail to provide for them (Respondent FGD2).

All women gave their mothers as the only ideal people whom they would like to give their children because of their love for them, respect and exemplary behaviour. Isiugo-Abanihe (1985) in his analysis of data from Ghana also found that grandparents were the most frequent recipients of fostered children, because it is assumed that their experience in child rearing is beneficial to children.

### **Possibility of bringing children to the work place**

Asked whether they would have liked to take their children to work with them, participants in all the focus groups expressed their desire to do so but cited the conditions at work and the nature of their jobs as strong deterrents. Two women noted:

It is a good idea but the child may mess itself up when you are in the middle of transacting business. You cannot attend to the child and touch the food thereafter. It would be very unhygienic (Respondent FGD4).

Even if I am allowed to bring her, the environment where I work would not warrant that kind of arrangement... There is a sewer underneath my stall and the timber on which I operate my business is very loose. Very soon, it will give way (Respondent FGD3).

Similar views were held by most of the key informants, with disruption of business by the children coming out as the key factor in their opposition to the suggestion, followed by difficult working environments as the key factor against staying with children at the place of work.

I used to bring my child with me and stayed with him at work but it taxed me a lot. The child was disturbing me, wanting us to play, pulling clothes, wanting to be on my lap all the time such that I could not work. I eventually had to get somebody to stay with him at home (Key informant William St).

The place is very dirty. I cannot even dare come with my child (Key informant Wandegeya).

### **Possibility of checking up on the child during working hours**

The respondents were asked about the possibility of checking on their children during working hours, which is also an indication of the flexibility of their work routines. Responses on this issue were however not favourable since many pointed out problems related to the expense in terms of transport and loss of business as can be seen from the following statements:

I cannot even afford it. I stay very far away from here (place of work) and thus it is expensive. Customers may also come by when I am not around, which would be very bad for my business (Key informant William St).

My home is so far that I cannot even think about it (Key informant Luwum St).

Some customers may come while I am away, and I don't like to leave my products unattended to because I will then lose clients and hence income (Key informant Wandegeya).

### **Delegation of productive chores**

Respondents were asked if it is possible for them to delegate work-related chores so that they could fulfill their maternal roles. Responses reflected on the intricacy of such an arrangement due to the high demands of their jobs in terms of skills – like the basic technical skills for jobs that require some training, and customer care. In addition, all key informants and discussants in focus groups stressed dishonesty, and lack of commitment on the part of most people to whom the mothers would want to delegate the tasks. The following statements back up these sentiments:

I cannot delegate any task to anybody. My machine is delicate and I am the only one who knows how to handle it. Delegation might lead to unnecessary maintenance costs (Key informant Luwum St).

Delegation is not that easy. In most cases one loses products and money because most of the people are dishonest (Key informant William St).

The person you delegate the duties to might not work as expected due to lack of interest and this may lead to collapse of one's business (Key informant Wandegeya).

Dishonesty of people may lead to poor returns from business because you do not have any mechanisms for detecting whether you got any customer while you were away or not (Key informant Kalerwe).

All participants stressed that delegation needs somebody who is dependable, trustworthy, honest, skilled in customer care, and with the knowledge of the commodities being sold.

Asked about the circumstances under which mothers may decide to delegate their productive roles, most of them gave 'death of a family

member, no maid at home, and when self is sick'. Circumstances under which the mother has to attend to child caring roles were mentioned after probing, and respondents cited only 'taking children to hospital'. These reactions show that the working mothers are only willing to delegate their economic activities in cases of emergencies, which implies that normal child feeding and caring are secondary to the income generating activities.

### **Discussion and conclusion**

The findings presented show that children are breast fed for very short periods. The idea of free childcare is always taken advantage of by the informal sector mothers as reflected in their reliance on relatives, due to mainly financial constraints. However, one needs to explore more about what happens with when mothers' incomes increase. Much as mothers are engaged in productive activities outside the home, they still feel obliged to carry out maternal responsibilities, particularly those that enhance the welfare of children. The findings also seem to contradict the popular belief that informal sector work is compatible with child rearing responsibilities. The popular belief has always been that these workers can ably take their children with them to work and/or can easily go home in the course of the working day to breast feed – which is not easy. Regulations and the environment at the workplace together with financial constraints operate against these desirable practices regarding child survival and development. This however does not mean that women should not participate in gainful employment outside the home, because their contribution is very vital in the enhancement of the country's economic growth and overall development of their children, families and country. Instead, avenues which can help them minimise the conflict particularly in the direction of increased full and optimal breast feeding together with provision of proper child care services near work places need to be encouraged. This is because women's employment outside the home has important direct and indirect effects on demographic behaviour through its effect on household and child rearing economics. There is therefore, a need to provide adequate information about the benefits of breast feeding, so that working women can practice optimal breast feeding which will enhance child survival; encourage women to breast feed fully and frequently for the whole period of maternity leave to give the baby the benefit of breast feeding and to build up the mother's milk supply; urge women to continue to breast feed at night and in the early morning, and at any other time that the mother may be at home since many babies learn to suckle more at night and obtain most of the milk they need at that time; disseminate messages

regarding determinants of breast milk supply in order to enlighten mothers that insufficient breast milk supply can be dealt with by more suckling rather than less; and tailor breast feeding education programmes in such a way that they also address the needs of working mothers whose numbers are growing not only in Uganda but in most of the developing world.

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