

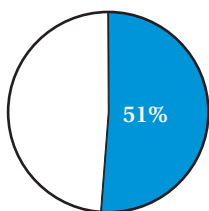
ZAMBIA

Report Card 2008

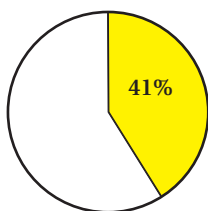


The State of Infant and Young Child Feeding (IYCF)

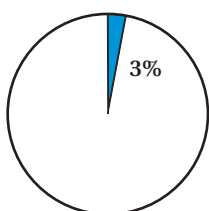
Practices (Indicator 1-5)



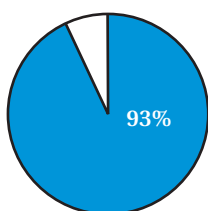
Indicator 1:
Early Initiation of Breastfeeding (Score: 9/10)



Indicator 2:
Exclusive Breastfeeding for the first 6 months (Score: 6/10)



Indicator 4:
Bottle-feeding (Score: 9/10)



Indicator 5:
Complementary Feeding (Score: 9/10)

Policies and Programmes (Indicator 6-15)

6. National Policy, Programme and Coordination
Concerns national policy, plan of action, funding and coordination issues.



7. Baby Friendly Hospital Initiative
Concerns percentage BFHI hospitals, training, standard monitoring, assessment and reassessment systems.



8. Implementation of the International Code
Concerns implementation of the Code as law, monitored and enforced.



9. Maternity Protection
Concerns paid maternity leave, paid breastfeeding breaks, national legislation encouraging work site accommodation for breastfeeding and/or childcare and ratification of ILO MPC No 183.



10. Health and Nutrition Care Systems
Concerns health provider schools and pre-service education programmes, standards and guidelines for mother-friendly childbirth procedures, in-service training programmes.



11. Mother Support and Community Outreach-Community-based support for the pregnant and breastfeeding mother
Concerns skilled counseling services on infant and young child feeding, and its access to all women. (During pregnancy and after birth)



12. Information Support
Concerns national IEC strategy for improving infant and young child feeding, actively implemented at local levels.



13. Infant Feeding and HIV
Concerns policy and programmes to address infant feeding and HIV issue and on-going monitoring of the effects of interventions on infant feeding practices and health outcomes for mothers and infants.



14. Infant Feeding during Emergencies
Concerns policy and programme on infant and young child feeding in emergencies and material on IYCF in emergencies integrated into pre-service and in-service training for emergency management.



15. Mechanisms of Monitoring and Evaluation System
Concerns monitoring, management and information system (MIS) as part of the planning and management process.



Total Score (Indicator 1-15): 111.5/150

Key to scoring, colour-rating, grading and ranking:

- The level of achievement of infant feeding practices is taken in 'percentage' except median duration, which is an absolute number of months.
- In the case of indicators 1 to 5 on practices, key to rating is used from the WHO's "Infant and Young Child Feeding: A tool for assessing national practices, policies and programmes". Scoring and colour-rating and grading are provided according to IBFAN Asia Guidelines for WBTi. Each indicator is scored out of maximum of 10.
- For indicators 6 to 15, there is a sub set of questions leading to key achievement, indicating how a country is doing in a particular area. Each question has possible score of 0-3 and the indicator has a maximum of 10.
- IBFAN Asia Guidelines for WBTi for rating and grading individual indicators 1 to 15 are as: 0-3 is rated Red or graded D, 4-6 is rated Yellow or graded C, 7-9 is rated Blue or graded B and more than 9 is rated Green or graded A.
- Total score of all indicators 1 to 15 is calculated out of 150.

Key GAPS

- The country does not have adequate funding sources for the implementation of IYCF program.
- Inadequate incorporation of IYCF activities in other sectors' annual plans
- Staffing at national and provincial levels (MOH) is inadequate and this leads to slow pace of scaling up trainings, follow ups and assessments.
- The numbers of health workers trained to carry out the BFHI activities are by far inadequate to facilitate the quick expansion of the BFHI program.
- None ratification and enactment of Maternity Convention 183. This entails that most of the issues being asked have not been addressed as they are contained in the same convention
- The IYCF component in the curricula for pre-service training in various institutions is weak.
- Scaling up of the community support systems has not reached full capacity
- Lack of comprehensive IEC strategy on infant and young child feeding
- IYCF in emergencies activities have not been well integrated into other programs.

Key Recommendations

- Coordination should be strengthened at provincial and district levels.
- More sectoral participation in IYCF programme should be encouraged.
- More funds should be mobilized targeted for IYCF program
- One more person at Ministry of Health level should be employed to coordinate the BFHI assessments so that scaling up is hastened.
- Social partners need to be consulted on the issue of maternity protection. NFNC through the MOH should write to MLSS requesting them to include the ratification of the convention 183 on the agenda for the tripartite meetings.
- The pre-service curricula for health care staff should be reviewed and strengthened.
- Involve more partners in implementation of community IYCF activities
- Develop and implement IYCF IEC Strategy
- Build capacity of staff and institutions to deal with IYCF in emergencies.

Zambia Assessment 2008

The assessment was carried out with the support of IBFAN Africa an NGO that is involved in infant feeding activities. The National Food and Nutrition Commission (NFNC) which was the lead institution in this exercise selected a team from the Infant and Young Child Feeding Committee members to collect the data used in the write up of the report. The data was collected from various partners involved in IYCF activities in Zambia. The assessment lasted for about 3 months from October to December 2008. The assessment report was circulated to partners for further input and was finally presented to the IYCF partner's meetings for their comments and approval. The presentation was done jointly with the WHO assessment mission on Infant and Young Child Feeding. The key findings in the two reports

were used to develop an action plan for 2009-10 which is aimed at achieving the objectives and goals in the IYCF Operational Strategy. This took place from 19th to 20th February 2009.

Partner Organisations

1. Raider Habulembe Mugode - National Food and Nutrition Commission
2. Jane Chitanda National Food and Nutrition Commission
3. Bupe Bwalya - National Food and Nutrition Commission
4. Dorothy Nthani Natural Resources Development College
5. Patrick Amanzi Ministry of Health

Convention on the Rights of the Child (CRC)

CRC Commitment

The 2nd report of Zambia was reviewed in 2003. The discussion included, amongst others, the following topics: efforts made to harmonise customary and domestic laws in regards to CRC provisions, the coordinating role of the Council, awareness raising about the CRC (seminars, leaflets, training of teachers, etc.), corporal punishment in schools, increase in illegal abortion among young girls, street children and orphans due to HIV/AIDS (600,000) and poverty, adoption, gender issues and violence against women, freedom of expression and participation of children, disparity in ages concerning definition of the child, role of NGOs, birth registration in distant regions, sexual violence against girls and punishment of offenders, freedom of association, school dropouts...

In regards to health, HIV/AIDS and disabled children were discussed at length. Health indicators were difficult to read because of mortality due to HIV. There were several questions related to the rates of exclusive breastfeeding, the Zambian Code of marketing of breastmilk substitutes, breastfeeding HIV+ mothers.... Policy in Zambia is that mothers with HIV are informed about the risks of transmission; exclusive breastfeeding and exclusive replacement feeding are

recommended in these cases. and those mothers who choose not to breastfeed are supplied with alternatives. Social workers have been trained to deal with these problems. The Zambian Code of marketing of breastmilk substitute has now law and being implemented.

Recommendations of the CRC

"The Committee recommended that the State party: (a) Reinforce its efforts...to improve the health situation of children, particularly in rural areas; (b) Facilitate greater access to free primary health services; reduce the incidence of maternal, child and infant mortality; prevent and combat malnutrition... reinforce family planning services..."

Breastfeeding advocates thus have a relatively concrete programme to follow, reducing infant and young child mortality, including through better feeding practices, and preventing and combating malnutrition. These objectives are very general but they include better breastfeeding information and practices, training of concerned parties, meeting with mothers, etc.

It is also timely to pressure the government into adopting the Zambian Code of marketing of breastmilk substitutes which still needs to be officially adopted.

Global Commitments on Infant and Young Child Feeding

- **Global Strategy for Infant and Young Child Feeding 2002:** World Health Assembly (WHA) and UNICEF adopted the Global Strategy, which sets five additional targets: national policy on infant and young child feeding, community outreach, information support, infant feeding in difficult circumstances and monitoring and evaluation. http://www.who.int/child-adolescent-health/New_Publications/NUTRITION/gs_iycf.pdf
- **Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding 1990:** <http://www.unicef.org/programme/breastfeeding/innocenti.htm>
- **World Health Assembly Resolutions:** call upon Member States to implement policies and programmes to improve infant nutrition. The recent resolution adopted on May 27, 2006 calls on Member States to implement Global Strategy for Infant and Young Child Feeding and multilateral and bilateral donor arrangements and international financial institutions to direct financial resources for Member States to carry out these efforts. Resolutions 49.15, 58.32, 61.20 call upon member states to avoid conflicts of interests in programmes of child health. http://www.who.int/gb/ebwha/pdf_files/WHA58/WHA58_32-en.pdf

- http://www.who.int/gb/ebwha/pdf_files/A61/A61_R20-en.pdf
- **WHO HIV and Infant Feeding Technical Consultation Consensus Statement, Geneva, October 25-27, 2006:** <http://www.who.int/hiv/mediacentre/Infantfeedingconsensusstatement.pdf>
- **Millennium Development Goals:** www.un.org/millenniumgoals/
- **Innocenti Declaration 2005 on Infant and Young Child Feeding:** www.unicef.org/nutrition/index_breastfeeding.html
- **Maternity Protection Convention:** <http://www.ilo.org/>

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WBTi Coordinating Office



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The World Breastfeeding Trends Initiative (WBTi) is IBFAN Asia's flagship programme. WBTi is being implemented as an integral part of two projects "Global Breastfeeding Initiative for Child Survival" (GBiCS) in partnership with the Norwegian Agency for Development Cooperation (Norad) and Global Proposal for Coordinated Action of IBFAN & WABA: Protecting, Promoting and Supporting Breastfeeding through Human Rights and Gender Equality" in partnership with the Swedish International Development Cooperation Agency (Sida).