The World Breastfeeding Trend Initiative (WBTi)

Tracking, Assessing and Monitoring (TAM) the Global Strategy for Infant and Young Child Feeding Practices, Policies and Program Worldwide



Bangladesh Report Card 2020

The state of policies and program on Infant and Young Child Feeding (IYCF) in Bangladesh











Scoring and Colour-Coding

Policies and Programmes (Indicator 1-10) Score Out of 10					
	2015	2020			
1. National Policy, Governance and Funding Concerns national policy ,plan of action, funding and coordination issues.	9.5	7			
2. Baby Friendly Hospital Initiative / Ten Steps to Successful Breastfeeding Concerns percentage BFHI hospitals, training, standard monitoring, assessment and reassessment systems.	8	8	Practices (Ind	licator 11-15)	
3. Implementation of the International Code of Marketing of Breastmilk Substitutes Concerns implementation of the Code as law, monitored and enforced.	9	9	69%	65%	
4. 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	5.5	8.5	Indicator 11: Early Initiation of Breastfeeding	Indicator 12: Exclusive Breastfeeding	
5. Health and Nutrition Care Systems (in support of breastfeeding & IYCF) Concerns health provider schools and pre-service education programmes, standards and guidelines for mother-friendly childbirth procedures, in-service training programmes.	9	9		for the first 6 months	
6. Counselling Services for the Pregnant and Breastfeeding Mothers Concerns skilled counseling services on infant and young child feeding, and its access to all women. (During pregnancy and after birth)	9	10	28.8 months Indicator 13: Median Duration of Breastfeeding		
7. Accurate and Unbiased Information Support Concerns national IEC strategy for improving infant and young child feeding, actively implemented at local levels.	10	10			
8. 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.	9	10	17%	34%	
9. Infant and Young Child 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.	10	10	Indicator 14: Bottle-feeding	Indicator 15: Complementary Feeding	
10. Monitoring and Evaluation Concerns monitoring, management and information system (MIS) as part of the planning and management process.	7	10			
Total Country Score	86	91.5			
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. For indicators 1 to 10, there is a sub set of questions leading to key achievement, indicating how a country is doing in a particular area. Each indicator has a maximum of 10. The WRTi Guidelines for rations individual indicators 1 to 10 are as: 0 = 3.5 is rated Red. 4 = 6.5 is rated Yellow, 7 = 0 is rated Rive and more than 0. 					

- 3. The WBTi Guidelines for rating individual indicators 1 to 10 are as: 0 3.5 is rated Red, 4 6.5 is rated Yellow, 7 9 is rated Blue and more than 9 is rated Green.
- 4. Total score of policy and programmes indicators 1 to 10 is calculated out of 100.
- 5. In the case of indicators 11 to 15 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". Colour-rating are provided according to WBTi Guideline.
 - a. The WBTi Guidelines for indicator 11 are as: 0.1 29% is rated Red, 29.1 49% is rated Yellow, 49.1 89% is rated Blue and 89.1-100% is rated Green.
 - b. The WBTi Guidelines for indicator 12 are as: 0.1–11% is rated Red, 11.1–49% is rated Yellow, 49.1 89% is rated Blue and 89.1-100% is rated Green.
 - c. The WBTi Guidelines for indicator 13 are as: 0.1–18 months is rated Red, 18.1–20 months is rated Yellow, 20.1–22 months is rated Blue and 22.1-24 months is rated Green.
 - d. The WBTi Guidelines for indicator 14 are as: 29.1–100% is rated Red, 4.1–29% is rated Yellow, 2.1 4% is rated Blue and 0.1-2% is rated Green.
 - e. The WBTi Guidelines for indicator 15 are as: 0.1–59% is rated Red, 59.1–79% is rated Yellow, 79.1–94% is rated Blue and 94.1-100% is rated Green.



Key Gap and Recommendations

Key Gaps

- 1. Irregular Meeting of National Breastfeeding Committee.
- Action plan of Infant and Young Child Feeding (IYCF) not fully executed to align with the policy and timely release and utilisation of fund is challenging.
- 3. Irregular monitoring system, inadequate assessment & revitalization and Irregular activities for implementation of Baby Friendly Hospital Initiative.
- 4. Due to limited financial and human resource of BMS act, 2013 is not monitored regularly and enforcement of law is very weak.
- 5. Lack of awareness and initiative on the importance of Maternity Protection in private sector is observed.
- 6. Adequate policy is there but practice is irregular specially Lack of interest of service providers for best practices.
- 7. Insufficient IYCF and Breastfeeding Counselling support in distant Locations.
- 8. Counselling, follow up reports on HIV and routine availability of VCCT with a less awareness.
- 9. All the indicators of IYCF could not be monitored through the existing system of DHS2, DGHS.
- 10. Inadequate communication to parents on need of timely introduction of appropriate complementary feeding.

Key Recommendations

- Need to increase funding in the Operational Plan (OP)/on specific line items of relevant Ministries and to regulate the activities (e.i. committee meeting) of National Breastfeeding Committee.
- Need to establish a regular monitoring system, assessment & reassessment and to regularize the activities of Baby friendly hospital initiative in government program/project/activity.
- 3. Need to increase resource allocation to establish monitoring system and to strengthen the enforcement of BMS Act in government system.
- 4. A guideline need to prepare for Maternity Protection including all maternity benefits for Government and Private Sector in align with all relevant Ministries.
- 5. Need to strengthen the program and policy on Mother Support Group (MSG).
- 6. All Media and Strategic govt. and non govt. administration should be used for dissemination of IYCF information & practices.
- 7. BMS Act 2013 and its rules 2017 should be disseminated to relevant ministries to prevent the Conflict of Interest.
- 8. Separate monitoring system to see the IYCF situation should be established.



Process of assessment

To conduct the World Breastfeeding Trend initiative (WBTi) assessment in Bangladesh, one representative from Bangladesh Breastfeeding Foundation received three days training on WBTi-IYCF assessment from IBFAN Asia at Delhi in the year 2008. After the training a meeting was organized in Dhaka where this issue was discussed with key stakeholders and further action resulted in preparing a report in 2008. A repeat assessment was conducted in 2012 and 2015 to study trends.

In 2020, to uphold the assessment in Bangladesh a (one) National Consultative meeting and 3 (three) Expert Committee Meeting was held through Zoom. The Assessment process was done by the National Nutrition Services (NNS), Institute of Public Health Nutrition (IPHN) with the technical assistance of Bangladesh Breastfeeding Foundation (BBF)

National Consultative Meeting on WBTi Assessment 2020, the meeting was held on 14th December, 2020 through 'Zoom' from 3.00 pm to 4.30 pm. More than 47 participants from different organizations attended the meeting. The event was graced by the Chief Guest Dr. S M Mustafizur Rahman, Line Director, NNS, IPHN. Dr. Fatima Akhter, Program Manager, NNS, IPHN welcomed everyone. The Key note Presentation was given by Prof. Dr. S K Roy, Senior Scientist and Chairperson, BOT, BBF. The 'Group formation & Distribution of the responsibilities' session was moderated by Ms. Khurshid Jahan, Director, BBF and the vote of thanks was delivered by Dr. Supta Chowdhury, Deputy Program Manager, NNS, IPHN.

In the welcome speech, Dr. Fatima Akhter, Program Manager, NNS, IPHN stated the objectives of the meeting and the Background of WBTi Assessment in Bangladesh. In the key note presentation on 'The background and method of WBTi assessment', by Prof. Dr. S K Roy, Senior Scientist and chairperson, BOT, BBF discussed on the state of World Breastfeeding Trends Initiative (WBTi) in Bangladesh from 2005 to 2015, objectives of WBTi analysis, process of scoring and description of the indicators on Policies and Programmes (Indicator 01-10) and Practices (Indicator 11-15). He also mentioned that, the WBTi is expected to create a data bank of infant feeding practices as well as policies and programmes. WHO and UNICEF, has recognized conducting a WBTi assessment every five years. Further, it has set a target that at least 75 percent countries of the world should do their WBTi assessment by 2030.

Partner Organizations:

- 1. Alive & Thrive
- 2. Banggabondhu Sheikh Mujib Medical University (BSMMU)
- 3. Bangladesh Centre for Communication and Program (BCCP)
- 4. Bangladesh Medical Association (BMA)
- 5. Bangladesh National Nutrition Council (BNNC)
- 6. Bangladesh Neonatal Forum (BNF)
- 7. Bangladesh Paediatric Association (BPA)
- 8. Bangladesh Perinatal Society (BPS)
- 9. Bangladesh Private Medical Practi tioners Association (BPMPA)
- 10. BARTAN
- 11. BAMANEH
- 12. BIRDEM Hospital
- 13. BIRDEM, Nutrition
- 14. Board of Trustees, BBF
- 15. BRAC
- 16. BSTI
- 17. CARE Bangladesh
- 18. Caritas Bangladesh
- 19. College of Home Economics
- 20. Community Based Health Care (CBHC)
- 21. Concern World Wide
- 22. Dhaka Medical College Hospital (DMCH)
- 23. Directorate General of Family Planning (DGFP)
- 24. Directorate General of Health Services (DGHS)
- 25. Division of Women Affairs
- 26. DSHE
- 27. EMINENCE
- 28. EPI
- 29. Family Planning Association of Bangladesh
- 30. FHI-360
- 31. GAIN
- 32. Helen Killer International (HKI)
- 33. Institute of Child and Mother Health (ICMH)
- 34. Institute of Public Health Nutritio (IPHN)
- 35. Jahangir Nagar University



Process of assessment

The Chief Guest Dr. S M Mustafizur Rahman, Line Director, NNS and Director (Acting), IPHN said, the World breastfeeding trend provides a useful tool to assess how countries are faring, and what stands out as a gap. Use of this information helps to galvanize action to achieve the targets at country level. Today we all here to initiate our country assessment on IYCF and with the technical assistance of BBF, NNS, IPHN will conduct the whole process. For this, we will work in groups; discuss the gaps, build consensus and develop action plan to bridge them and will develop the country report & report cards and use these to advocate for increased funding of policy and programmes. I wish the success of the activity and announce the inauguration of the WBTi Assessment 2020. After that, Ms. Khurshid Jahan, Director, BBF gave the vote of thanks and discussed about the Group formation & Distribution of the responsibilities. It was decided that the representatives of the Governments, INGOs, NGOs, Civil Society Organizations, Professional Groups, Medical College and Hospitals ensure their engagement in group (A, B or C) through mail within the three (3) working days after the meeting.

Three Expert Committee Meeting for the Assessment of WBTi, 2020: The three Expert Committee Meeting was held through Zoom on 31st December, 2020 at 9.30 AM (Group A) at 12.00 PM (Group B) and at 3.00 PM (Group C). Total 18 experts in Group A, 15 experts in Group B and total 16 experts in Group C from different GO, NGO, INGO and Civil Society Organizations, Professional Groups, Medical College and Hospitals were participated. Within the groups, one by one the indicators were projected, elaborately discussed and the experts were analyzed the findings, identified the Gaps and brainstormed to frame recommendations. To incorporate the comments or suggestions only the national level data was considered as the source of information for authentication.

Finalization of the findings: the draft report was send to the experts of Expert committee (A, B and C) through E-mail for their feedback. Thereafter the comments or suggestions of experts on conclusion, gap and recommendation were incorporated into the final report.

Finalization of the assessment report: It was shared with IBFAN. Verification of data is done at this stage to check quality, national scope etc. The comments from IBFAN was Incorporated and then shared with the WBTi coordinating office.

Partner Organizations:

- 36. Max Foundation
- 37. Ministry of Health and Family Welfare (MOHFW)
- 38. Ministry of Commerce
- 39. Nari Maitree
- 40. National College of Home Economics.
- 41. National Information Platforms for Nutrition (NiPN)
- 42. National Nutrition Services (NNS)
- 43. NIPORT
- 44. NIPSOM
- 45. Nutrition Foundation of Bangladesh (NFB)
- 46. Nutrition International (NI)
- 47. Nutrition Society of Bangladesh (NSB)
- 48. Obstetrics and Gynecological Society of Bangladesh (OGSB)
- 49. Plan International Bangladesh
- 50. PSTC
- 51. RADDA-MCH FP
- 52. SAMAHAR
- 53. SDF
- 54. Shaheed Suhrawardi Medical college hospital (ShSMCH)
- 55. Sir Salimullah Medical College and Hospital (SSMCH)
- 56. Swanirvar Bangladesh
- 57. UNDP
- 58. UNFPA
- 59. UNICEF Bangladesh
- 60. USAID
- 61. UTPS
- 62. WaterAid Bangladesh
- 63. WFP
- 64. World Health Organization (WHO)



CRC Commitment

The Convention on the Right of the Child (CRC) Committee considered the 5th periodic report of Bangladesh from September 14 to October 2, 2015 on 70th session. The Committee reviewed the progress of the implementation of the Convention on the Rights of the Child in Bangladesh. IBFAN submitted an alternative reports on the situation of infant and young child feeding in Bangladesh.

Recommendations of the CRC Committee

2015

In the concluding observations, Bang ladesh did not receive direct recommendation on breastfeeding, but was urged to implement the Techn ical Guidance on child mortality which refers directly to breastfeeding and calls specifically for implementation

and monitoring of the International Code of Marketing of Breastmilk Substitutes. Recom mendation of the CRC Committee substantially increase budget allocations to all social sectors, in particular, education, health and child protection, including earmarked resources for children in d isadvantaged or vulnerable situations who may require affirma- tive social measures: allocate sufficien t financial and human resources to health services in all regions and upazilas to eliminate regional disparities in the provision of health services; develop and imple- ment policies to improve health infrastructures, and intensify training programmes for all health profes- sionals: promote the measures in place to prevent mother-to-child transmission of HIV/AIDS and develop a road- map to ensure the implementation of effective preventive measures.

Global Commitments on Infant and Young Child Feeding

- Child Feeding 2002: World Health Assembly (WHA) and UNICEF adopted the Global Strat- egy, which sets five addtional 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/NU-TRI TION/gs_iycf.pdf
- Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding 1990: http://www.unicef.org/programme /breastfeeding/innocenti.htm
- Global Strategy for Infant and Young
 Wotld Health Assembly Resolutions: call
 WHO HIV and Infant Feeding Techniupon 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 file s/WHA58/WHA58 32-en.pdf http://www.who.int/gb/ebwha/pdf file s/A61/A61_R20-en.pdf
- cal Consultation Consensus Statement, Geneva, October25-27, 2006: http://www.who.int/hiv/mediacentre/In fantfeedingconsensusstatement.pf.pdf.
 - Millennium Development Goals: www.un.org/millenniumgoals/
 - Innocenti Declaration 2005 on Infant and Young Child Feeding: www.unicef.org/nutrition/index breast feeding.htm
 - Maternity Protection Convention: http://www.ilo.org/

For detailed report Please Contact



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WBTi Coordinating Office



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