

Report Card 2018



THE STATE OF INFANT AND YOUNG CHILD FEEDING (IYCF)

Policies and Programmes (Indicator 1-10)

[score out of 10]

National Policy, Programme and Coordination 1.5

Baby Friendly Hospital Initiative 0

Implementation of the International Code 8.5

Maternity Protection

Health and Nutrition Care System

Mother Support and Community Outreach

Information Support

Infant Feeding and HIV

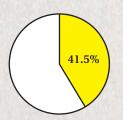
Infant Feeding during Emergencies 0

Monitoring and Evaluation

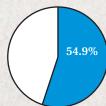
Total Score (Policy and Programmes) 45/100

5

Practices (Indicator 11-15)



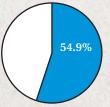
Indicator 11: **Early Initiation of** Breastfeeding (Score: 6/10)



Indicator 12: Exclusive Breastfeeding for the first 6 months (Score: 9/10)



Indicator 14: Bottle-feeding (Score: 6/10)





Indicator 15: Complementary Feeding (Score: 3/10)

Total Score (Practices) 34/50

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 parti
- 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". Scoring and colour-rating are provided according to IBFAN Asia Guidelines for WBTi. Each indicator is scored out of maximum of 10.

29.6 months Indicator 13: Median Duration of breastfeeding (Score: 10/10)

- $IBFAN\ Asia\ Guidelines\ for\ WBTi\ for\ rating\ individual\ indicators\ 1\ to\ 10\ are\ as:\ 0-3.5\ is\ rated\ Red,\ 4-6.5$ is rated Yellow, 7-9 is rated Blue
- Total score of all indicators 1 to 15 is calculated out of 150.

India Assessment 2018

The present assessment is the fifth round of WBTi for India following 2005, 2008, 2012, and 2015. This assessment has been jointly carried out by the core group i.e. Breastfeeding Promotion Network of India (BPNI), Public Health Resource Network (PHRN), WHO, UNICEF, All India Institute of Medical Sciences (AIIMS), Sitaram Bhartia Institute of Science and Research, National Institute of Public Co-operation and Child Development (NIPCCD), Institute of Home Economics, Doctors for You and Kalawati Saran Children's Hospital between April and June 2018. The core group met twice to discuss the findings of each of the indicators and reach a consensus on scoring, gaps, and recommendations.

For each indicator, primary responsibility was invited from an

organization that has been working on the issue. They were further advised to hold secondary meetings with other related organizations and create a draft analysis, gaps and recommendations for their indicator. Some of the evidences collected by BPNI were shared with the group.

Once the draft report had been created, a consensus meeting was called upon and the findings were presented to a larger group of experts attended by 33 persons from governments, academic institutions, civil society organization etc. The invitees made significant suggestions; however there was a high level of consensus on the findings. The discussions at the consensus meeting were taken into account into finalizing this

Kev GAPS

- 1. Coordination on breastfeeding/IYCF issues is lacking at Centre and States.
- 2. No plan of action or dedicated funding for implementation of breastfeeding/IYCF policies and programmes.
- 3. Mechanisms to enforce the IMS Act are inadequate.
- 4. Weak implementation of 'Ten steps to successful breastfeeding"
- 5. Community support and counselling is inadequate.
- 6. Current laws and policies on maternity benefits do not include majority of the women working in informal sector.

Key Recommendations

- 1. Strengthen coordination, develop a plan of action for the country and each state including fixing targets to achieve by 2025.
- 2. Allocate funding for achieving the targets by 2025.
- 3. Strengthen capacity of the maternity staff in skills for counselling and support to women both in public and private health facilities.
- 4. Set up block level teams to supervise and mentor family level counselling in the community.
- 5. Enforce IMS Act at district level by authorsing officers.
- 6. The Maternity Benefit (Amendment) Act 2017 may be clarified to include all women workers engaging in the informal/unorganized and agricultural sectors, and universalise PMMVY urgently.

Convention on the Rights of the Child (CRC)

CRC Commitment

On the 3rd of June 2014, the Committee on the Rights of the Child completed its consideration of the combined 3rd and 4th periodic report of India on the implementation of the provisions of the Convention on the Rights of the Child in the country.

IBFAN presented an alternative report to inform the CRC on the situation on the issue of infant and young child feeding in India.

Recommendations of the CRC Committee 66/2014

Prioritize the development of the National Plan of Action to implement the 2013 National Policy for Children; expeditiously improve its data collection system; provide all professionals working for and with children with adequate and systematic training in children's rights. the existing disparities in access to and quality of health services, including by establishing partnerships with the private sector; ensure that appropriate resources be

allocated to the health sector, with particular attention to specific maternal and child health care policies, programmes and schemes to improve the health situation of children, in particular to respond to high rates of acute respiratory infections, malnutrition and diarrhoea; ensure the effective implementation of the National Food Security Act, enhance efforts to promote exclusive breastfeeding practices, including the promotion of breastfeeding from birth, complementary feeding strategies with or without provision of food supplements as well as micronutrient interventions for mothers; ensure the effective implementation of, and compliance with, the International Code of Marketing of Breastmilk Substitutes, and establishment of a monitoring and reporting system to identify violations of the Code, as well as of stringent measures in all situations of violations of the Code. Violations include the promotion and distribution of samples and promotional materials by the private sector institutions involved in the Infant formula marketing and distribution.

For detailed report please contact:

National Coordinating Organisations



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WBTi Global Secretariat



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