

Uganda's WBTi Experience, how the Government considered the report

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Background

- Total land area: 199,810km² (77,147 sq miles)
- Population Size: 45,641,795
- Fertility rate: 5.01
- Infant Mortality Rate
 - 43 per 1,000 Live births
- Under 5 Mortality Rate
 - 64 per 1,000 Live births
- Prevalence of Stunting: 21%
- Prevalence of Wasting: 4%



Breastfeeding Situation in Uganda

Increased/Improved

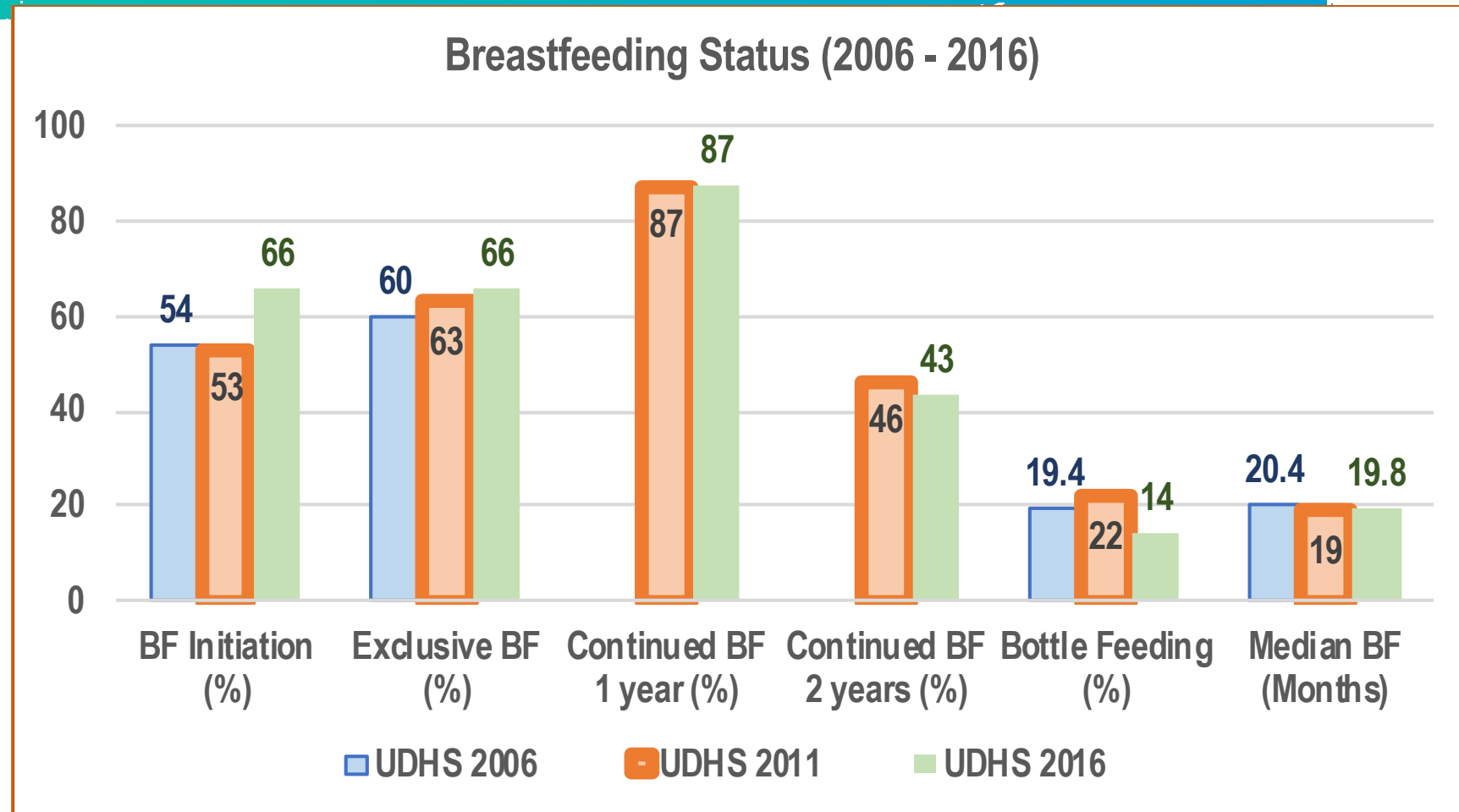
- Initiation of Breastfeeding
- Exclusive breastfeeding
- Bottle feeding
- Median duration of Breastfeeding

Decreased

- Continued breastfeeding at 2 years

Remained same

- Continued breastfeeding at 2 years



Policy Statements on IYCF

Counsel and Support:

- All mothers irrespective of their HIV status on timely BF initiation and breastfeed exclusively
- Mothers of LBW infants:
 - Can suckle to breast feed
 - Cannot suckle well to express breast milk & give by cup, spoon or nasogastric tube
- All mothers living with HIV on adherence to ART while continue to breastfeed until baby is 12 months of age
- Mothers, caretakers and families to practice optimal IYCF in emergencies and other exceptionally difficult/ special circumstances

...Policy Statements on IYCF

Counsel and support:

- Mothers/caretakers to give children a diversified diet with a variety of locally available foods from main food groups
- Parents on timely introduction of nutritionally adequate, safe and appropriate complementary foods
- Mothers/caretakers to feed sick and recuperating infants and children on small, frequent meals of soft consistency and enriched with high protein, fat and mineral content

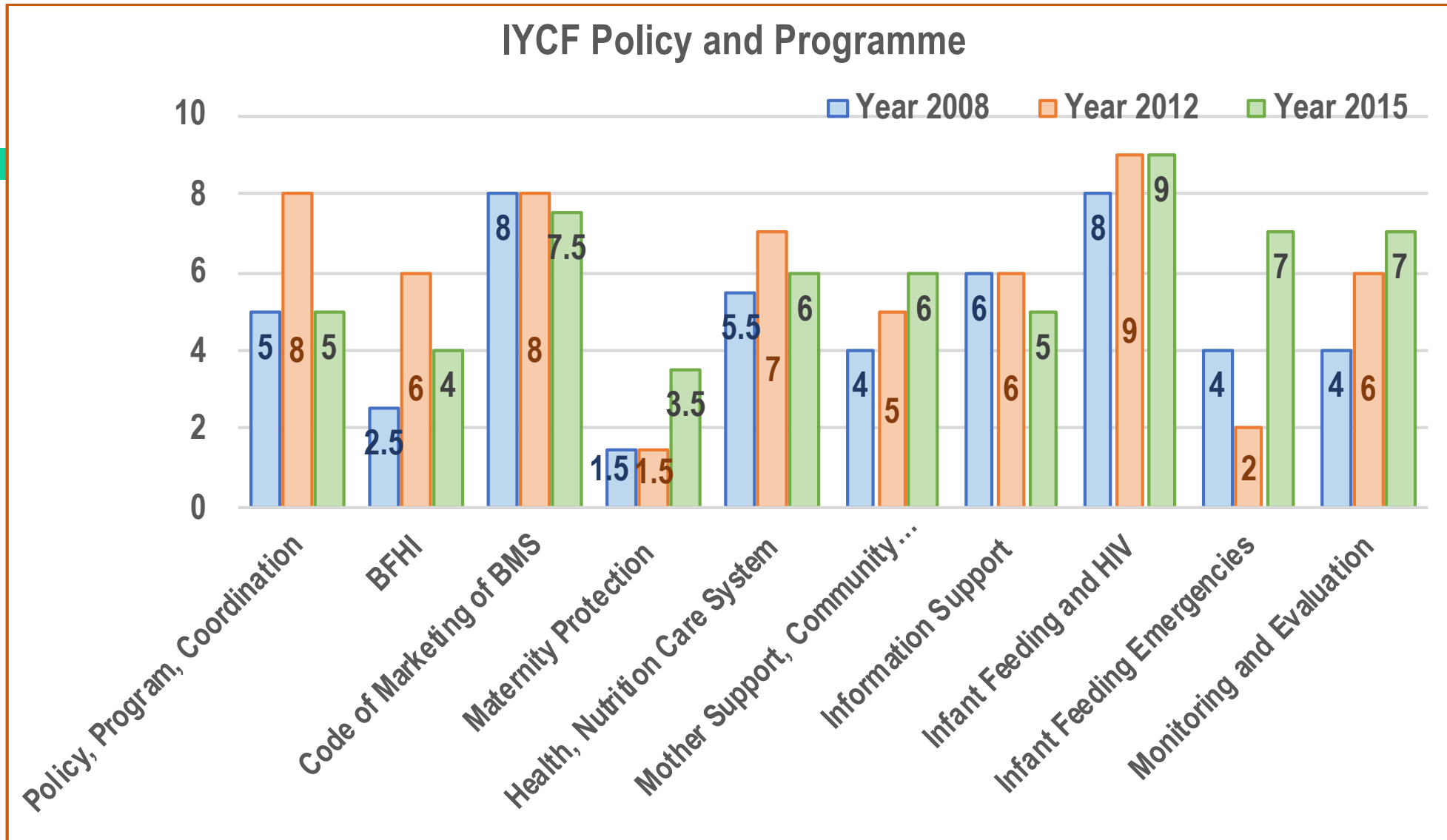
WBTi Process in Uganda

- WBTi Training conducted in Swaziland with a team of experts – *One person from IBFAN Uganda participated*
- In collaboration with National IYCF focal person, trained a core team of IYCF experts on WBTi at National level
- National IYCF focal person coordinated Uganda WBTi Assessments:
 - First in 2008
 - Second in 2012
 - Third in 2015

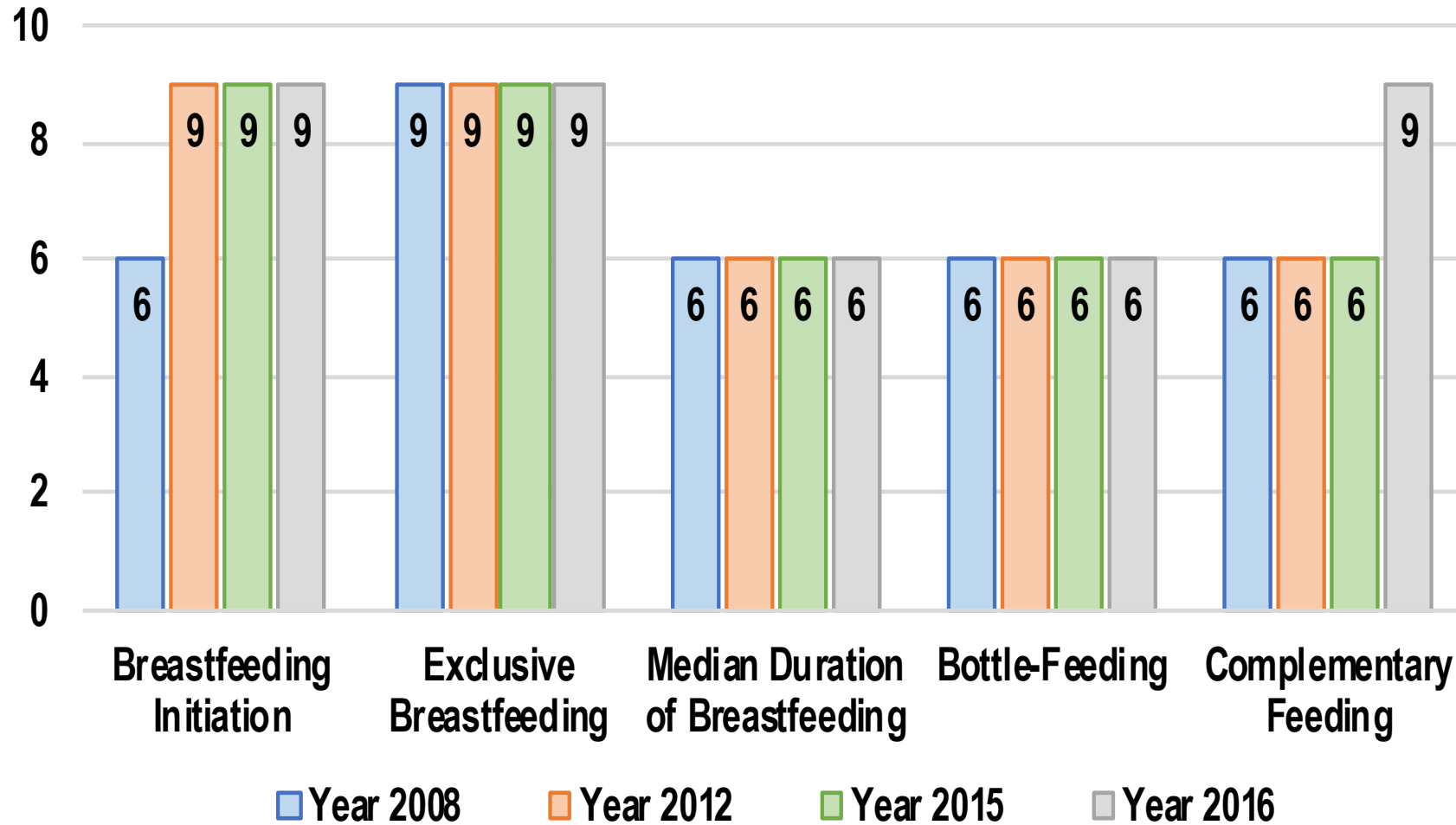
WBTi Process in Uganda

- Established 32 member WBTi core group
 - Ministry of Health - 9
 - Development partners (UN, USAID) – 4
 - NGOs – 10
 - Universities – 4
 - Hospitals – 3
 - District – 1
 - Line Ministry - 1
- Role of IBFAN in WBTi's process
 - Supported the assessments financially and technically
 - Built capacity of focal person and team of experts
 - Coordinated drafting and finalization of the report

WBTi Assessments



IYCF Practices



Improvements 2008 and 2016

- * Breastfeeding initiation
- * Timely introduction of Complementary Foods

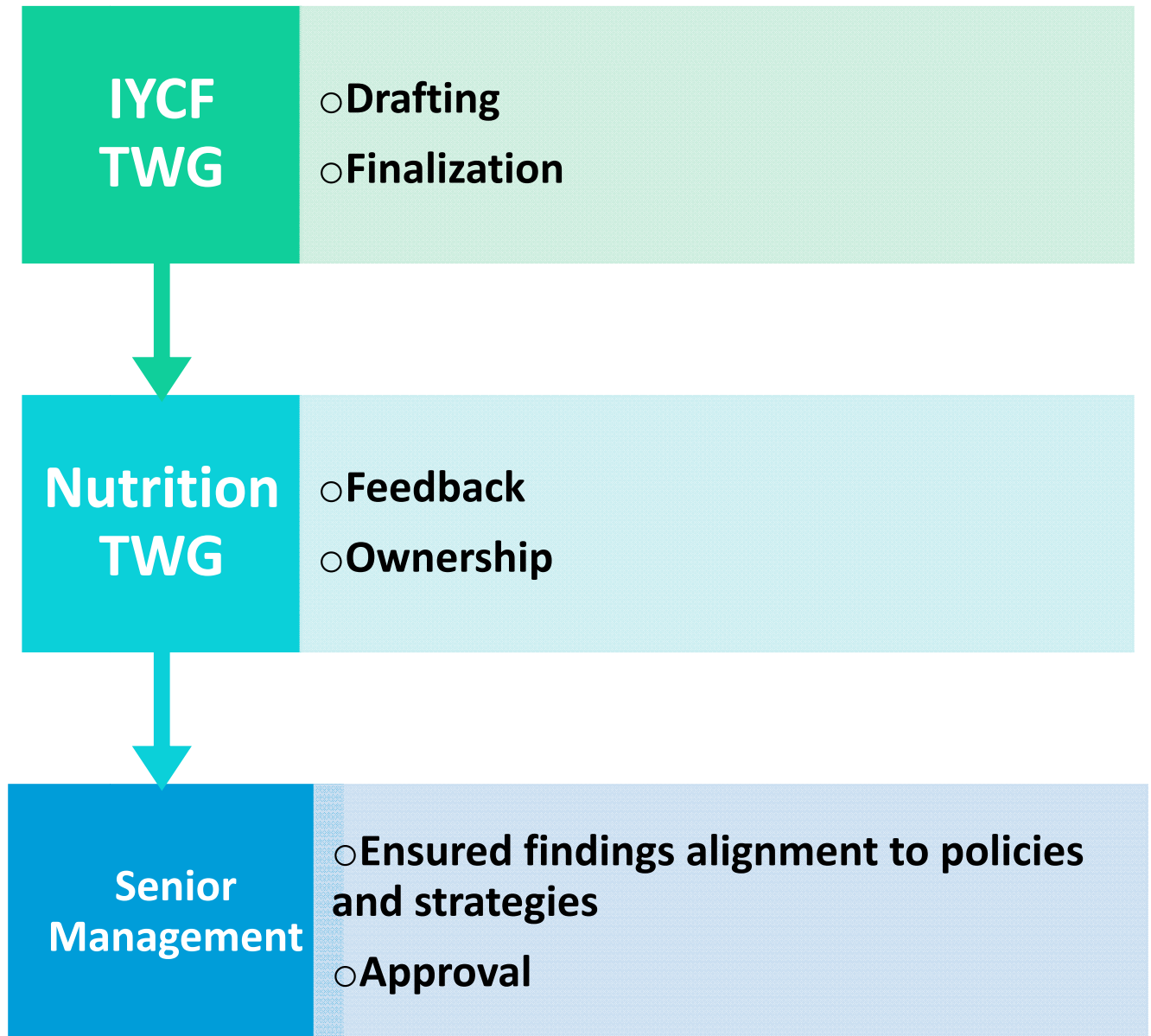
Declined between 2008 and 2016

- * None

No change/Difference

- * Exclusive Breastfeeding
- * Median duration of BF
- * Bottle feeding

Government Response to WBTi Reports



Government commitment following WBTi Assessments

- Improvements in policies, programmes and funding
 - Revised policies on IF/HIV (new WHO guidance), IFE (IMAM), M&E (HMIS), MP (Workplace policies)
 - Drafted multisectoral Uganda Nutrition Action Plan II prioritized BF as cost effective intervention
 - Laws related to Maternity Protection currently being revised
 - Regulations on marketing of BMS being revised to address gaps in monitoring and enforcement
- Development of strategies and tools for improved IYCF
 - MIYCAN guidelines and Action Plan
 - MIYCAN training manuals for community and health care providers
 - MIYCAN counselling job aides with strong component on IYCF

Government commitment following WBTi Assessments

- Improved collaboration and partnership
 - Fully functional committee on Nutrition – Legal based on Regulations on marketing of Infant Foods
 - Addresses issues of IYCF among others
- Enriching surveys and reporting systems
 - Strengthened effort to monitor and report on IYCF indicators through HMIS and sector reports
 - Monitoring of the Regulations on marketing of Infant Foods improved
- Capacity Building for Improved Health Delivery
 - Trainings on BFHI, Code, IFE, IYCF related surveys
 - Building capacity of both public and private health facilities in BFHI implementation

Challenges in Applying WBTi

- Support from leadership at the sub-district level for IYCF
 - Adaptation of the tool for use at sub-district level??
- Sustaining the WBTi working group
- There is no stipulated budget lines earmarked for WBTi yet re-assessment is due

