



WORLD BREASTFEEDING
TRENDS INITIATIVE

The Guide Book

World Breastfeeding Trends Initiative (WBT*i*)

Galvanising action and making a global data repository (breastfeeding & infant and young child feeding- policies and programmes)

About BPNI

The Breastfeeding Promotion Network of India (BPNI) is a 32 years old registered, independent, non-profit, national organisation that works towards protecting, promoting and supporting breastfeeding and appropriate complementary feeding of infants and young children. BPNI works through policy analysis, advocacy, social mobilization, information sharing, education, research, training and monitoring the company compliance with the IMS Act. BPNI is the Regional Coordinating Office for International Baby Food Action Network (IBFAN), South Asia. BPNI also serves as the global secretariat for World Breastfeeding Trends Initiative (WBTi) programme, that analyses policy & programmes and galvanises action at country level.

About IBFAN

The International Baby Food Action Network (IBFAN) was founded in 1979. It is a network of more than 273 public interest groups in 168 countries, working around the world to save lives of infants and young children by working together to bring lasting changes in infant feeding policies and practices at all levels. IBFAN aims to promote the health and wellbeing of infants and young children and their mothers through protection, promotion and support of optimal breastfeeding & infant and young child feeding practices. IBFAN works towards universal and full implementation of '*International Code of Marketing of Breastmilk Substitutes*', subsequent relevant World Health Assembly (WHA) resolutions and the '*Global Strategy for Infant and Young Child Feeding*'

IBFAN is the 1998 Right Livelihood Award Laureate.

About WBTi

Launched in 2004, the World Breastfeeding Trends Initiative (WBTi) assists countries to assess the status of and benchmark the progress in implementation of the *Global Strategy for Infant and Young Child Feeding* in a standard way. It is based on the WHO's tool for national assessment of policy and programmes on infant and young child feeding. The WBTi assists countries to measure strengths and weaknesses on the ten parameters of policy and programmes that protect, promote and support optimal infant and young child feeding (IYCF) practices. The WBTi also maintains a Global Data Repository of these policies and programmes. The unique web-tool helps in colour-coding and scoring each indicator. The WBTi process stimulates local action, bringing people together and encourages collaboration and networking amongst key organisations such as government departments, UN, health professionals, academics, civil society and other players (without conflicts of interest). It assists in consensus building. Through use of the WBTi tool, countries work towards producing a “report card” and “report” that can be used to mobilise action at local level by defining the gaps and recommendations for change. The WBTi encourages re-assessments every 3-5 years. The Global Secretariat at BPNI manages the WBTi and its repository.

Vision & Mission Statement

The WBTi envisages that all countries create an enabling environment for women to be successful in breastfeeding their babies optimally at home, health facilities or at work places. The WBTi aspires to be a trusted leader to motivate policy makers and programme managers in countries, to use the global data repository of information on breastfeeding and IYCF policies and programmes. WBTi envisions to serve as a knowledge platform for programme managers, researchers, policy makers and breastfeeding advocates across the globe. WBTi's mission is to reach all countries to facilitate assessment and tracking of IYCF policies and programmes through mobilising local partnerships without conflicts of interest and building a data repository for advocacy.

Ethical Policy

The WBTi works on 7 principles of IBFAN and does not seek or accept funds, donation, grants or sponsorship from manufacturers or distributors and the front organisations of breastmilk substitutes, complementary foods, infant and young child feeding related products like breast pumps, or from any organization that has conflicts of interest.

Merits of WBTi

The WBTi is Participatory: It seeks to involve all concerned partners, while avoiding conflicts of interest, working on infant and young child feeding, including governments, international agencies, academia and CSOs/NGOs. It is highly participatory and engaging. The local people collect information, analyse the findings, locate gaps, and take action based on the results. In the process, the participants develop networking skills, investigative techniques, planning skills, analysis, monitoring and reporting methods.

The WBTi is Action-oriented: It aims to stimulate action. Having more information is not helpful unless there are strategies in place for translating the information into tools for change and for taking action to improve the situation. Other than bringing people together and building consensus, it leads to a call to action for change. Linking national or regional advocacy with WBTi findings is the key to generate action. It also encourages developing budgeted plans.

The WBTi is Local and Simple Research: It aims to stimulate research, investigation, ask questions, and find out why optimal breastfeeding does or does not occur. Local people do the investigation, not done by the external researchers. Simple research targets secondary data available in a country. When people identify their own gaps and solutions to bridge them, it stimulates action for change.

The WBTi is a Unique Data Repository: It is a dynamic web resource for information on policies and programmes that support women to practice optimal breastfeeding and infant and young child feeding practices. Other than this, the software allows creating graphics for easy understanding and reporting. WBTi tracks this information at country level, which can be quickly retrieved whenever needed from the portal.



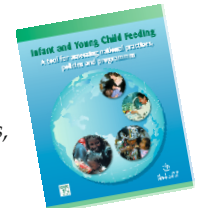
Introduction

The guidebook provides information about the World Breastfeeding Trends Initiative (WBTi) and its various components with a background, purpose and details of the process at country level. The BPNI has developed the WBTi under the umbrella of IBFAN. This guidebook is the updated version as of March 2024.

Background

The World Health Assembly (WHA) and the UNICEF Executive Board adopted the *Global Strategy for Infant and Young Child Feeding* in the year 2002. The *Global Strategy* has a framework of action on 10 indicators of policy and programmes to improve optimal breastfeeding and infant & young child feeding practices. It calls for urgent action by all Member States to develop, implement, monitor and evaluate a comprehensive policy and a plan of action on the *global strategy* to achieve a reduction in child malnutrition and mortality.

The World Health Organisation in 2003 launched the “*Infant and Young Child Feeding: A tool for assessing national practices, policies and programmes*”, and in 2007 a *Planning Guide for implementation of Global*



Strategy. In May 2005, the World Health Assembly adopted resolution WHA 58.32 that called upon Member States to assure resources for plans of action for improving infant and young child feeding practices whilst avoiding any conflicts of interest in the child health programmes.

The WBTi used the questionnaire and other materials from the WHO tool for national assessment and adapted it based on the feedback from countries in all regions of the world including Latin America, Arab World, Afrique, Oceania, Asia and Africa. BPNI team led the adaptation process guided by the global group. The BPNI launched the WBTi tool in Bangladesh in 2004 and all South Asian countries used it. Noting its success, BPNI launched it globally in 2008-09.

The BPNI also developed a training programme to build the capacity of regional/country groups/ individuals to lead the WBTi process. It addressed understanding various indicators, identifying gaps, developing recommendations and how to develop a plan of action and budget it. The BPNI also conceptualised and developed the WBTi web-tool that provides objective scoring and colour coding based on the weightage of each indicator & the WBTi guideline. A framework assists

countries to develop and or print of a national report & a report card. Further, BPNI developed yet another software tool the 'World Breastfeeding Costing Initiative (WBCi)' that helps to generate local, real time annual/ multi-year budgetary plans.

The World Health Assembly in 2012 set targets for nutrition by 2025 that include increased exclusive breastfeeding rates to at least 50%. To achieve this target the '*Global Breastfeeding Collective*' was launched in August 2017, led by UNICEF and WHO. The International Baby Food Action Network (IBFAN) is a member of the *Collective*, whose mission is to rally political, legal, financial and public support for breastfeeding, which will benefit mothers, children and society. Globally, the percent of infants under six months of age exclusively breastfed has reached 48% from 38% in 2012. Significant progress is possible, and the Global Breastfeeding Collective has set a target to reach 70% by 2030. The Collective has launched a call to action, which has 7 indicators. One of the seven indicators is to track progress on policies, programmes and funding using the WBTi. **The target: At least three-quarters of the countries of the world should be able to conduct a WBTi assessment every five years by 2030.**

The Purpose

1. To provide critical information to governments, needed to bridge gaps in policy and programmes in order to increase rates of breastfeeding and infant and young child feeding practices and to use the WBTi tools to galvanise action at country level.
2. To maintain a global data repository of information on policies in programmes related to breastfeeding and IYCF.

The Components

WBTi has 4 components

1. A process of national assessment of policy and programmes.
2. A process for generating country reports on the gaps.
3. A web- based tool for colour coding and objective scoring of indicators, as well as a data bank on policy & programmes.
4. A system to use the findings and launch a 'Call to Action'.

1. A process of national assessment of policy and programmes

Key objective of a national assessment is to document the gaps in 'Ten' policy and programmes that are required to support women in breastfeeding their babies. It involves initiating a national assessment through coordinating a core group and national partners to work together. They identify gaps in existing policies and programmes, build consensus around the gaps and develop recommendations for action to bridge the gaps. The WBTi encourages re-assessment every 3-5 years.



Working together on the assessment, Bolivia, 2017

Sources of Information to identify gaps: For each information used in the assessment, possible sources include websites, official documents, interviews with key officials and national/DHS surveys for practice indicators.

The 15 indicators of assessment

The WBTi assessment focuses on a wide range of indicators, which provide an impartial global view of key factors. It has 15 indicators with each indicator having specific significance. These are 10 parameters related to policy/programmes, including how women are supported by the national policy, by the health care system both during delivery and in the community, by labour policies for maternity protection, by legal protection from commercial sector, by encouraging babies to breastfeed under disaster management policies, by policies of HIV department and monitoring of all of these. And 5 indicators are on infant and young child feeding practices based on secondary data which is national in scope. Each indicator has a subset of questions to be answered. Questionnaires are available at <https://www.worldbreastfeedingtrends.org/resources/wbti-tool>.

2. A process for generating country reports on the gaps

Having information in hand the *core group* helps facilitate debates and discussions around the findings with a larger audience for developing recommendations to bridge the gaps. A draft report emerges which is shared with the WBTi global secretariat for verification of

THE WBTi 15 INDICATORS

Policy & Programme

1. National Policy, Governance and Funding
2. Baby Friendly Hospital Initiative / Ten Steps to Successful Breastfeeding
3. Implementation of the International Code of Marketing of Breastmilk Substitutes
4. Maternity Protection
5. Health and Nutrition Care Systems (in support of breastfeeding & IYCF)
6. Counselling services for the pregnant and breastfeeding mothers
7. Accurate and Unbiased Information Support
8. Infant Feeding and HIV
9. Infant and Young Child Feeding during Emergencies
10. Monitoring and Evaluation

Practices

11. Timely Initiation of Breastfeeding within one hour of birth
12. Exclusive Breastfeeding for the first six months
13. Median duration of Breastfeeding
14. Bottle-Feeding
15. Complementary Feeding-Introduction of solid, semi-solid or soft foods

accuracy and quality. After having it finalised, the core group assists in advocacy for improving infant and young child policies and allocation of resources. The WBTi report and report card can be developed using the templates (available at <https://www.worldbreastfeedingtrends.org/resources/reporting-templates>).



Use of report/report cards: Governments to consider action, donors to prioritise funding, advocacy groups to showcase how well the country is doing in order to pinpoint improvements, researchers for setting up their research agendas and media for communication and help in advocacy.

3. A web-tool for colour coding and objective scoring of indicators, as well as a data repository on policy & programmes.

The WBTi has a web-tool on its portal www.worldbreastfeedingtrends.org

After having finalised the report, data on all 15 indicators is fed into the web-tool. Score is generated for each individual indicator or all indicators together. The toolkit objectively quantifies the data to provide a colour coding i.e. 'Red', Yellow, Blue and Green based on ascending order of performance. The web-tool has the capacity to generate visual graphics in easily understandable formats to assist in developing reports/report cards and advocacy at all levels e.g. national, regional and international. These graphics quickly present the status and progress. It helps in demonstrating to the programme planners and policy makers where improvements are most needed. Focus of



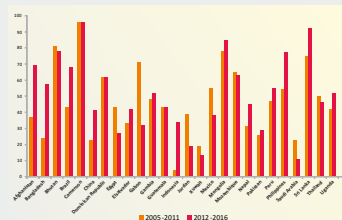
WBTi assessment remains on policy and programmes.

The web-tool stores information on policy and programmes, accessible to everyone. It serves as a unique global data bank of policies and programmes on breastfeeding and infant and young child feeding.

4. A system to use the findings and launch a 'Call to Action'

Once the process of WBTi is complete the core group prepares for the launch of final report of assessment findings along with 'Call to action' to the respective governments and others concerned. The World Breastfeeding Costing (WBCi) tool is also available to create a budgeted plan of action, which can be used to advocate for funding with policy makers and programme managers.

***Tracking trends:** The web-tool can be used to track trends by re-assessments. It helps to study various indicators, assess the progress and impact of any particular intervention.*



The WBT*i* steps at country level

Following steps describe how WBT*i* assessment is accomplished

Step 1: Assessment

- 1.1. Identifying a key person as 'national WBT*i* coordinator'.
- 1.2. **Identifying a core group of 4-5 persons, including representatives from the government, UNICEF, WHO, NGOs and other professional organizations, but avoiding conflicts of interest.**
- 1.3. Meeting of the core group to discuss and plan for the assessment.
- 1.4. Facilitation of assessment according to WBT*i* guidelines.
- 1.5. Fixing responsibilities, who will do what on all 1-15 indicators.
- 1.6. Collection of information and sharing within the core group.
- 1.7. Finalizing the draft report identifying gaps and recommendations.

Step 2: Local Discussion & Consensus

- 2.1. Presenting the draft report to a wider audience for review, comments and consensus.

- 2.2. Incorporating comments or suggestions into the report.
- 2.3. **Sharing the draft report with WBT*i* Global Secretariat for review and verification.**
- 2.4. Finalisation of the report by the core group and approval to upload on the WBT*i* portal.
- 2.5. The WBT*i* secretariat facilitates data entry to generate colour-coding and scoring.

Essentials to be in the WBT*i* repository

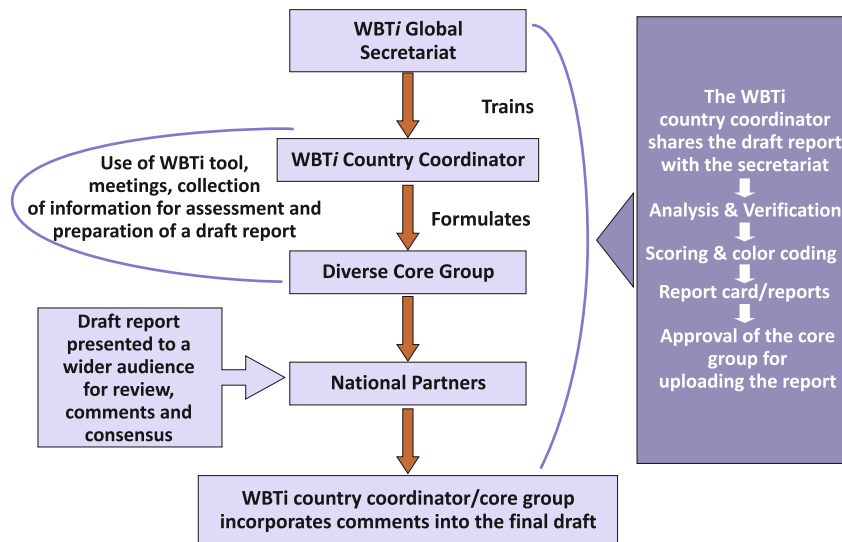
1. Use of WBT*i* tools of IBFAN
2. A diverse core group
3. Verification and quality check
4. Approval of the core group for uploading the report on WBT*i* portal

Step 3: Reporting & Call to Action

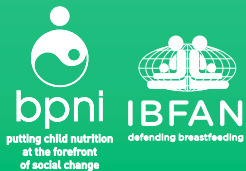
- 3.1. A country report and report card are developed based on the scores and colour codes. The templates are available
<https://www.worldbreastfeedingtrends.org/resources/reporting-templates>.
- 3.2. A call to action is organised nationally to share findings with the governments who are potential users and

other partners like donors, researchers, academia, CSOs working on women and children's issues and MCH advocacy groups.

- 3.3. Reports and report cards are made public through media.
- 3.4. Reports can be used to generate journal articles.
- 3.5. Reports can be used for specific advocacy with the donors to seek support where most needed.



The WBTi steps/processes



WBTi Global Secretariat

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