

World Breastfeeding Trends Initiative (WBTi): Success Story So Far

Dr Arun Gupta

Regional Coordinator, IBFAN Asia



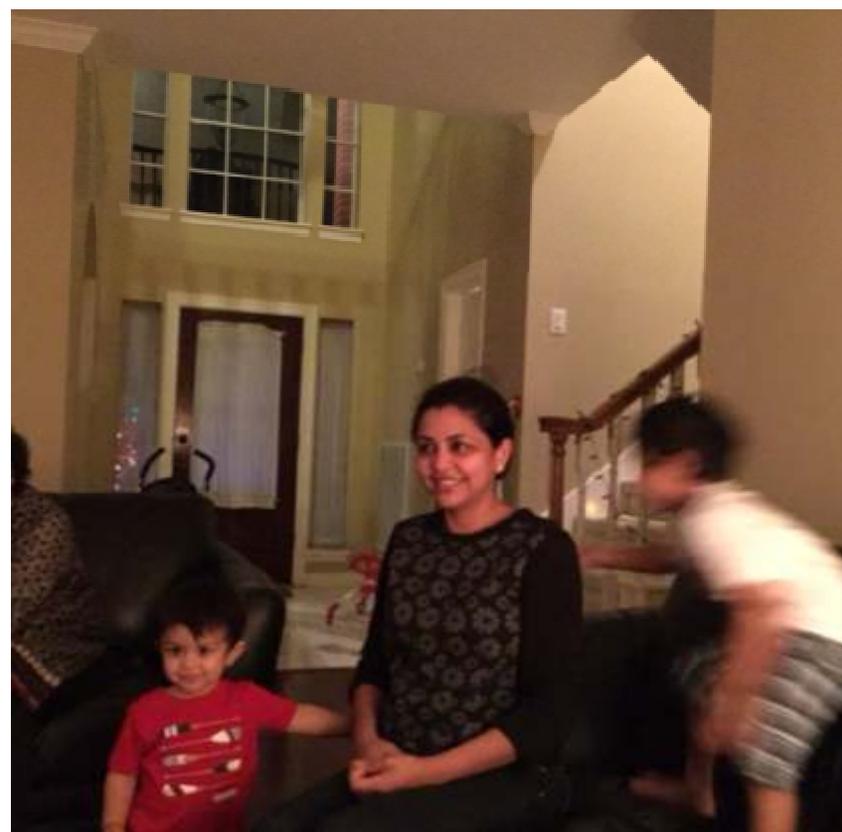
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defending grassroots







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defending breastfeeding





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defending breastfeeding

Overview



- Basis
- About the Tool
- The Journey
- Recognitions
- Results of 84 country report, its impact and way forward

BASIS

Innocenti Declaration -1990

1. Appoint National Level Committees and National Coordinators.
2. Ensure maternity facilities by following the Ten steps of BFHI.
3. Give effect to the *International Code* and adopt national legislations.
4. Enact maternity protection legislation to protect the rights of working women.

INNOCENTI DECLARATION

On the
Protection, Promotion
and Support of
Breastfeeding

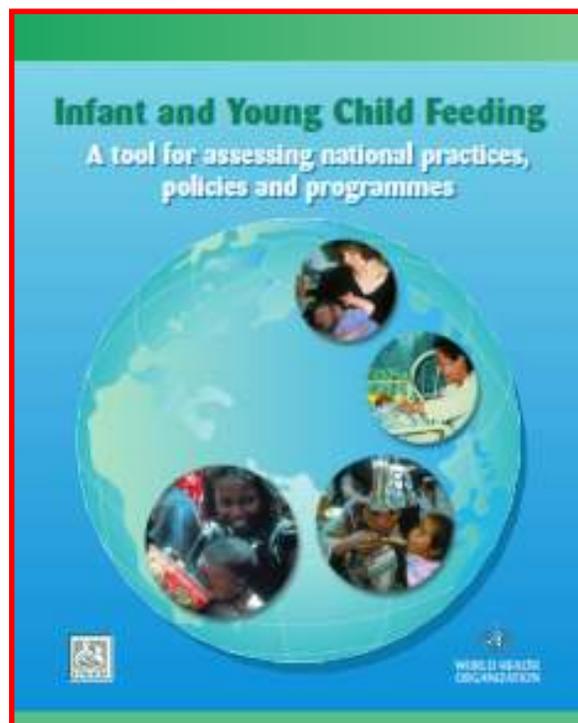
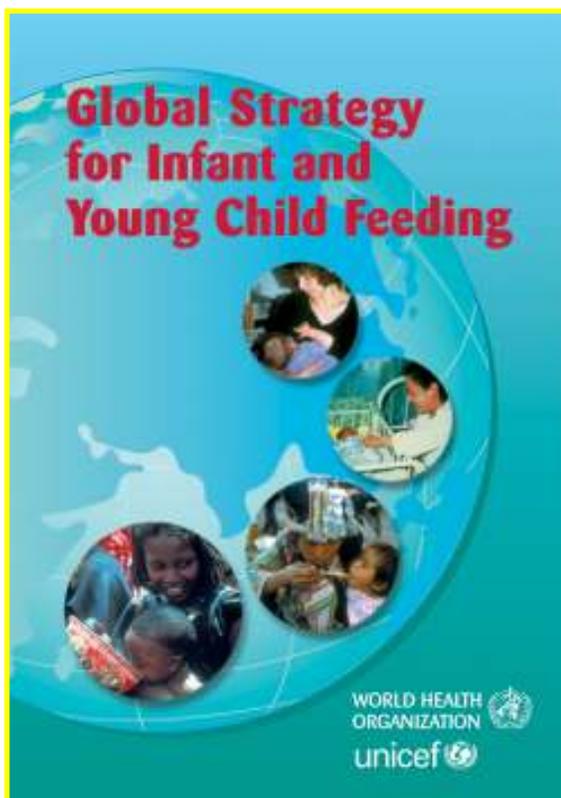


1 August, 1990
Florence, Italy

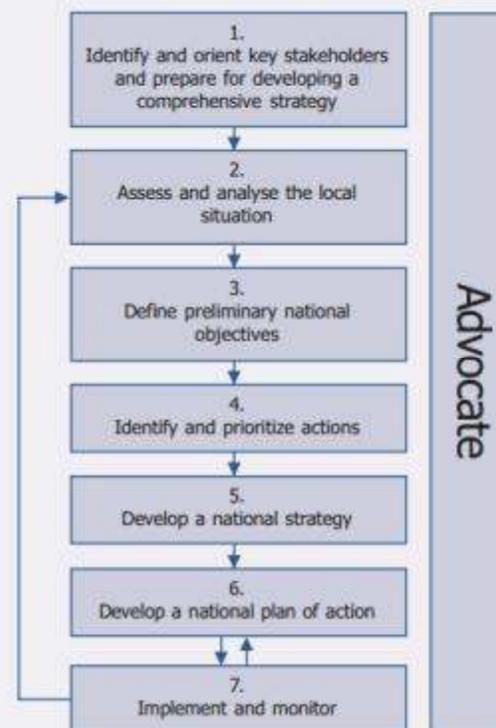
Additional Targets set by the Global Strategy

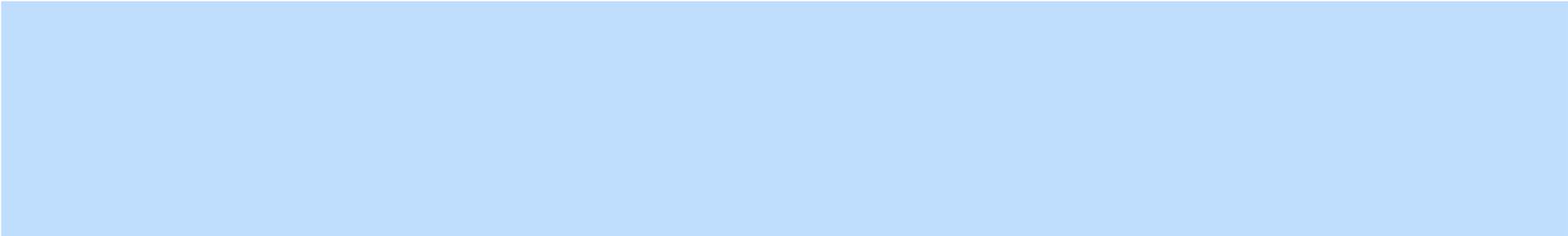
1. Develop, implement, monitor and evaluate a policy on infant and young child feeding.
2. Protect, promote and support exclusive breastfeeding for first six months.
3. Ensure continued breastfeeding for two years with appropriate and timely complementary feeding.
4. Develop guidelines for infant feeding during HIV and infant feeding during emergencies.
5. Support women's care and nutrition
6. Initiate communications and advocacy for these issues.

The Global Strategy for Infant and Young Child Feeding (2002), Tool for National Assessment (2004) and Planning Guide for implementation of Global Strategy (2007)



Proposed planning steps in moving from Global Strategy to national action





ABOUT THE TOOL



IBFAN
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World Breastfeeding Trends Initiative(WBTi) Tools

<http://worldbreastfeedingtrends.org/wbti-tool/>



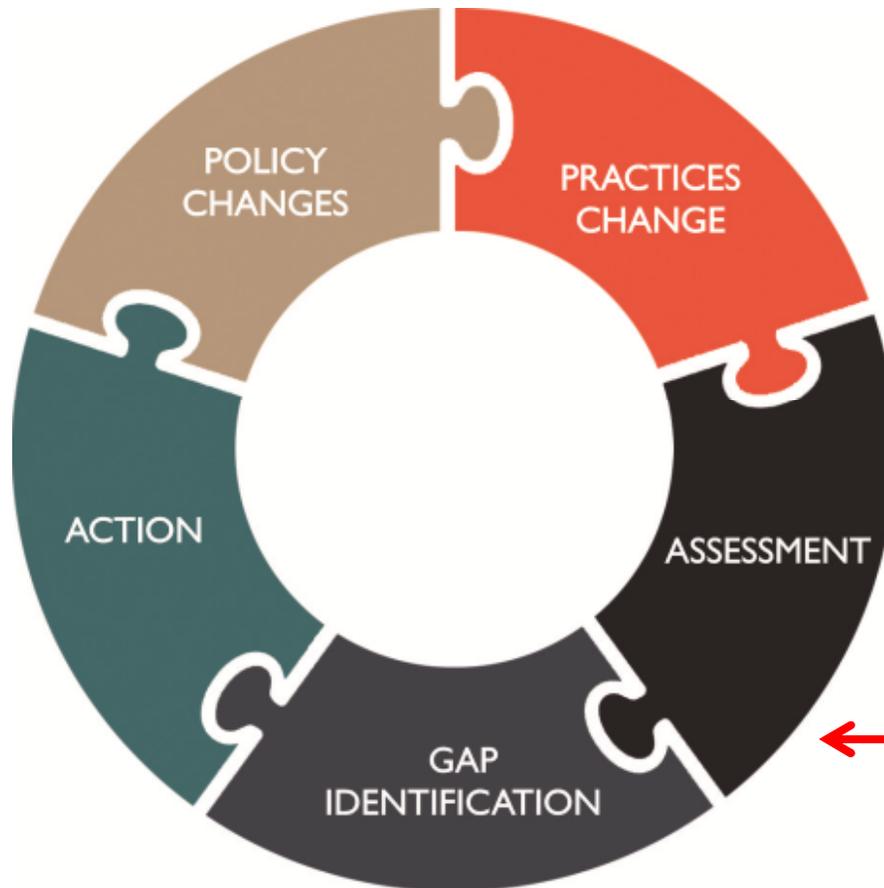
Objectives of WBTi

- To provide critical information to policy makers/governments, needed to bridge gaps in infant and young child feeding policy, programmes and practice.
- To provide evidence to IBFAN and other groups to advocate for greater effort and investment to promote early, exclusive and continued breastfeeding/IYCF in the respective countries and regions.
- To contribute to reducing child malnutrition (both under and over nutrition), under-five mortality and improve women's health through improvement in breastfeeding and complementary feeding rates.

How it works ..WBTi

- A : Action oriented
- B: Brings people together
- C: Consensus and commitment building
- D: Demonstrates achievements and gaps
- E: Efficacy improving programme

How WBTi Works?



784 Partners in 84 countries

The assessment-analysis-action-re-assessment (Triple A)

What WBTi does in a country?

Debates, discussions, consensus building, find own solutions,
BRINGS Change

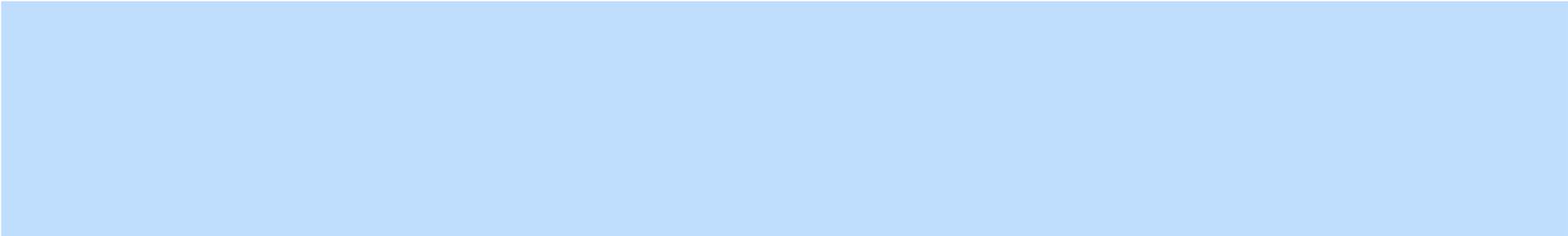


What makes WBTi different?



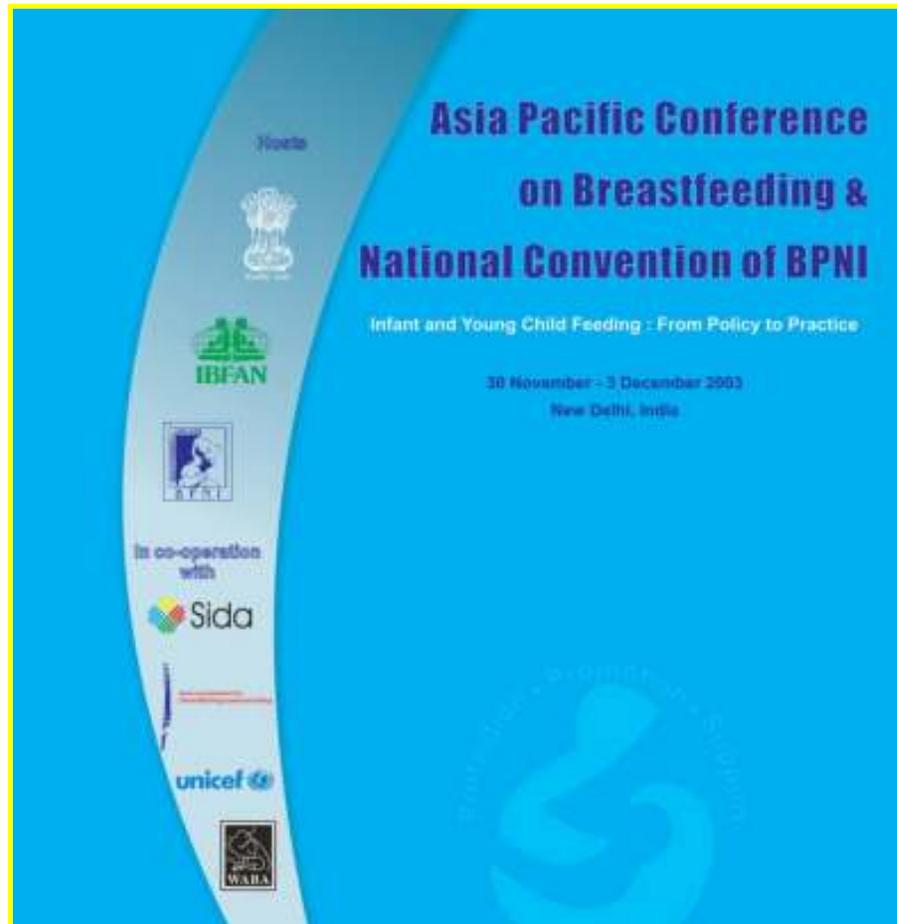
The WBTi is not just another databank on infant feeding data. Although www.worldbreastfeedingtrends.org has the potential to become the largest web portal of a database on policies and programmes on infant and young child feeding, it will be much more than a databank because:

1. It stimulates action and builds consensus and public health partnerships at national level that is without any conflict of interest.
2. It has the capacity to analyse serial data and to showcase trends.
3. It will be a key and dynamic web resource for information not only on feeding practices, but also on policies and programmes at country level.
4. It is unique and will be accessible to all.
5. Any one can use data tables and charts for preparing reports and presentations like smart, easily understood demonstrable graphics.
6. It can be used to study the impact of a particular intervention over a period of time.



THE JOURNEY

APPAR developed by IBFAN Asia - 2003



Plenary 6: Assessment, Monitoring, and Evaluation of IYCF Programmes

xiii) Software Tool Kit use for Monitoring the Status and Progress of Global Strategy for Infant and Young Child Feeding: The Asia Pacific Participatory Action Research (APPAR) Tool kit

WBTi launch in SABPF-1 in Bangladesh (2004)



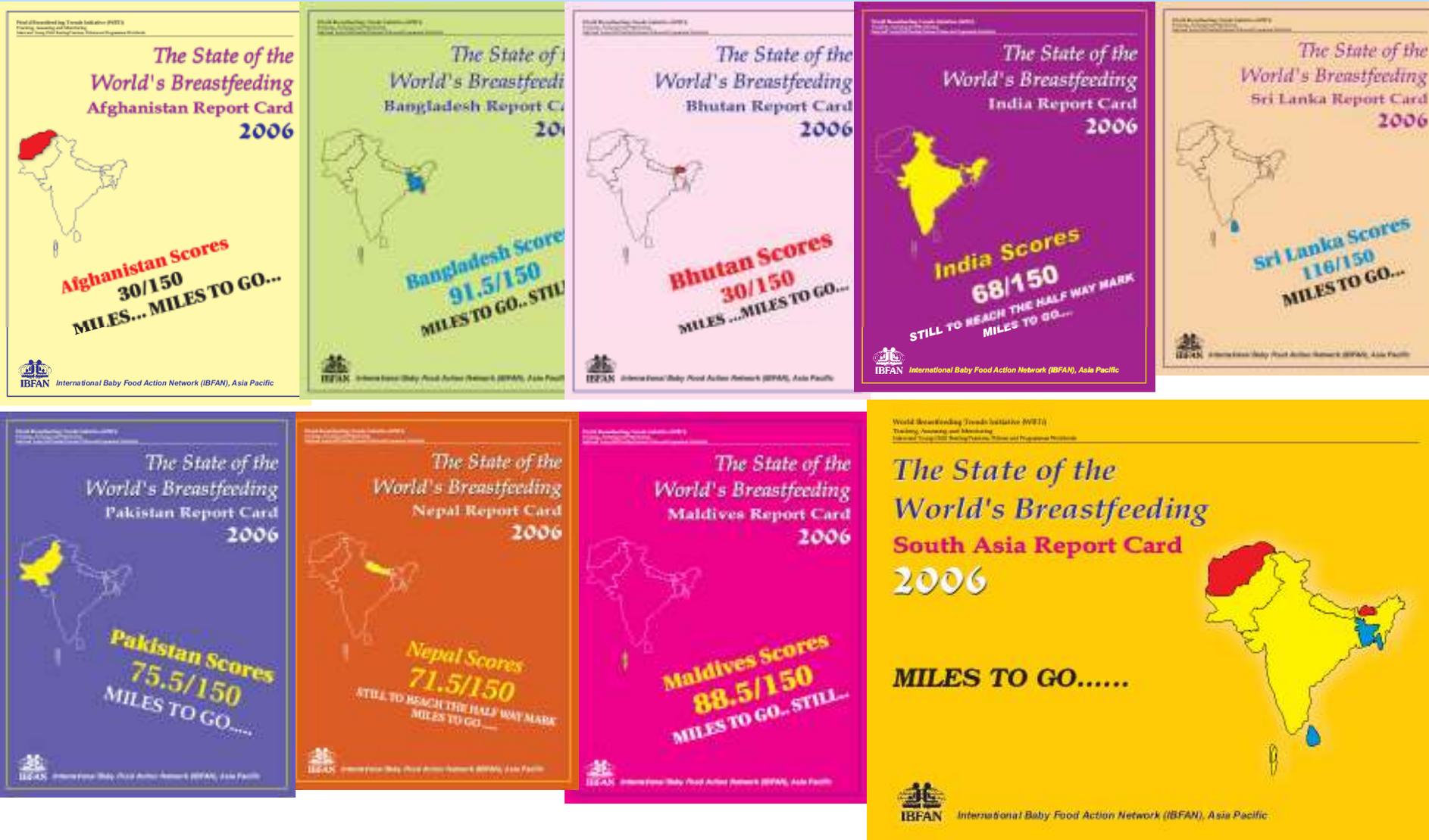
WBTi Assessment findings sharing in SABPF-2 (2005)



South Asia WBTi Report Card launch in SABPF-3, Afghanistan (2006)



IBFAN
defending breastfeeding



Launch of The State of World's Breastfeeding-South Asia (2007)



The State of the World's Breastfeeding



South Asia Report



International Baby
Food Action
Network (IBFAN),
Asia

*Tracking Implementation of the Global
Strategy for Infant and Young Child Feeding*

February 2007



Geneva

2008: WBTi
Training
workshops



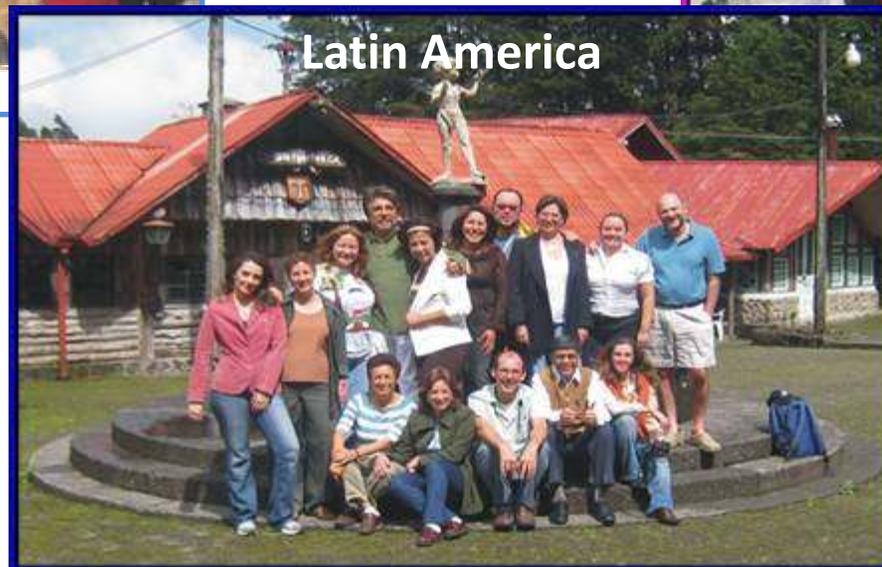
India



Bangkok



Africa



Latin America

WBTi Training workshop in Arab World (2009)



WBTi Training workshop in South Africa (2010)



Launch of WBTi 33 country report (2010)



WBTi
World Breastfeeding Trends
Initiative (WBTi)

The State of Breastfeeding in 33 Countries 2010



gbi&s

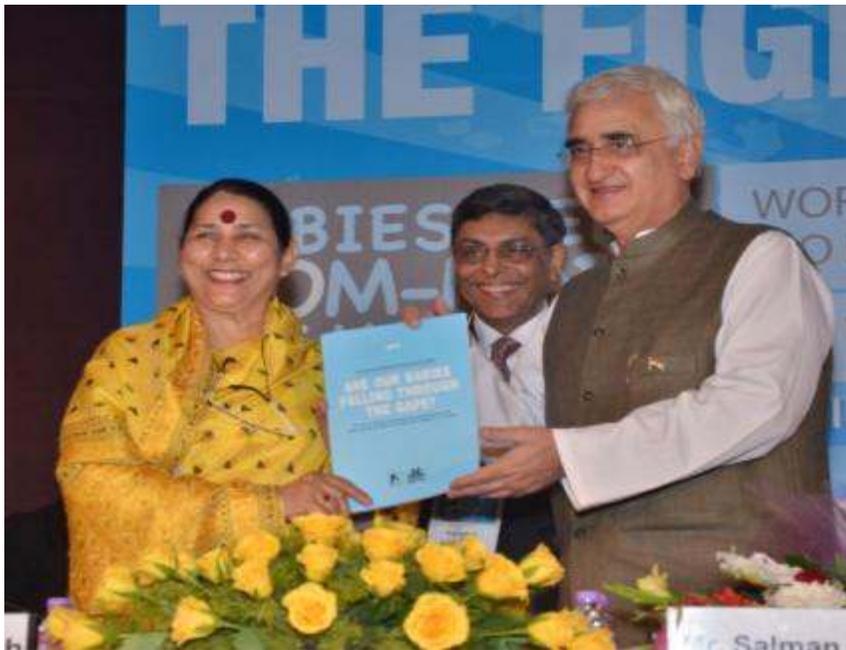


Tracking Infant and Young Child Feeding
Policies and Programmes Worldwide

WBTi Training workshop in Fiji (2011)



Release of WBTi 51 country report (2012)



2012

The World Breastfeeding Trends Initiative (WBTi)

ARE OUR BABIES FALLING THROUGH THE GAPS?

*The State of Policies and Programme Implementation of the
Global Strategy for Infant and Young Child Feeding in 51 Countries*



WBTi training at South East Asia, Arab World & Palau Islands (2014)



WBTi Europe (round 1) training at Geneva (2015)



11 countries took part and 9 have completed assessment



US makes it on WBTi Map (2016)



United States of America 2016



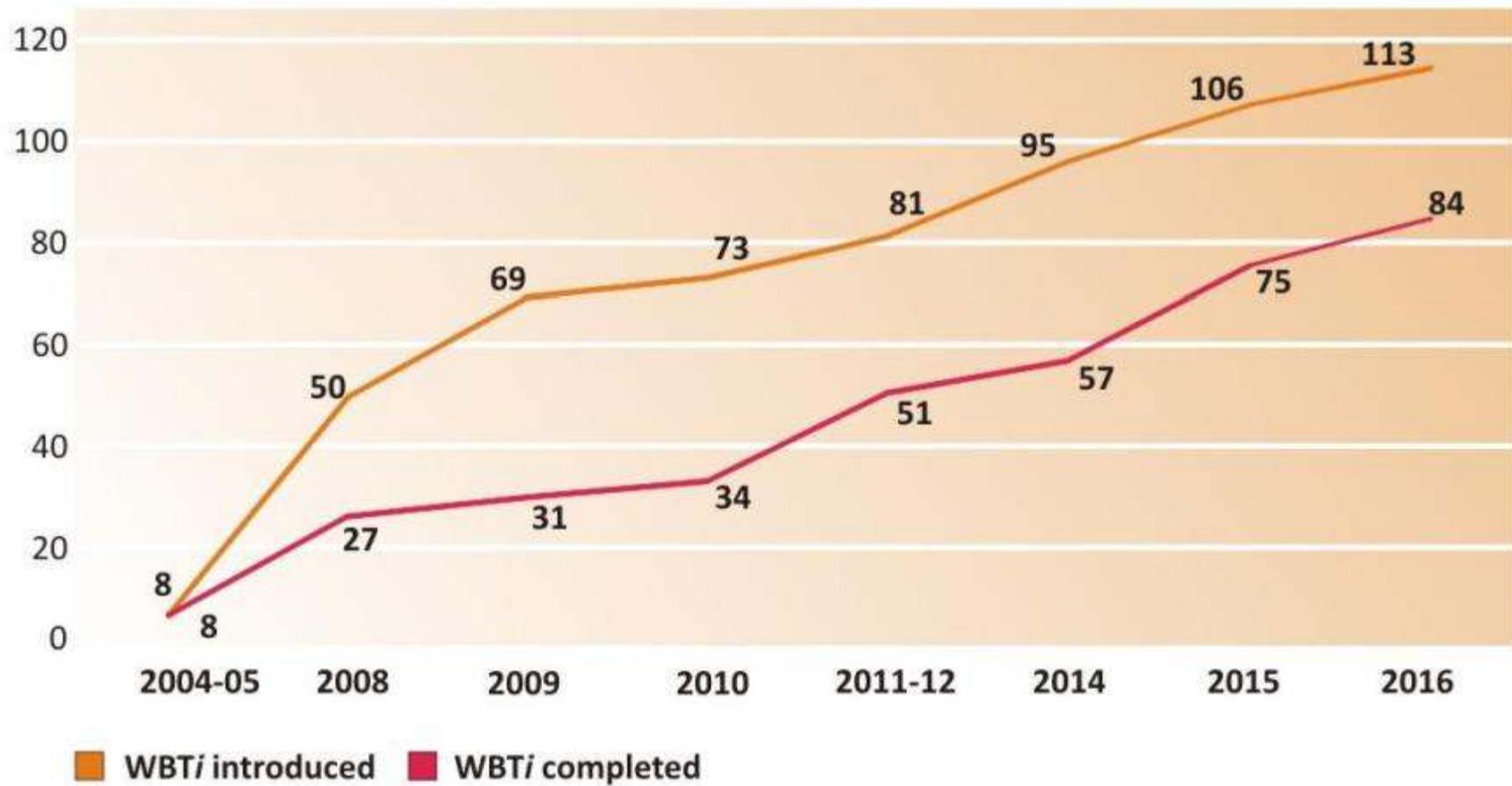
WBTi Europe (round 2) training at Portugal (2015)



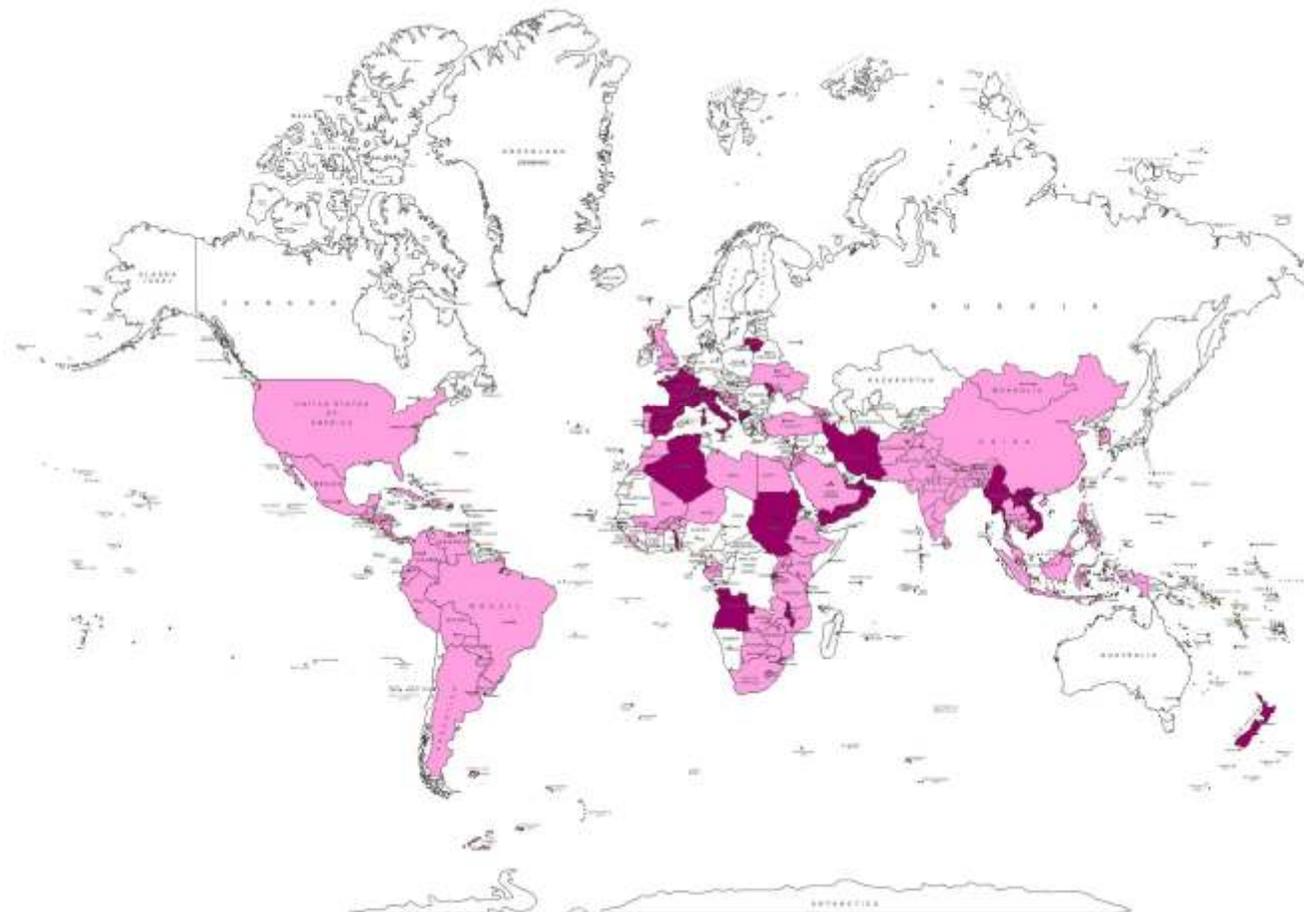
6 countries took part and and in process of completing assessment by May 2017



Progress of WBTi



WBTi in 113 - 84 completed assessment



Assessment completed



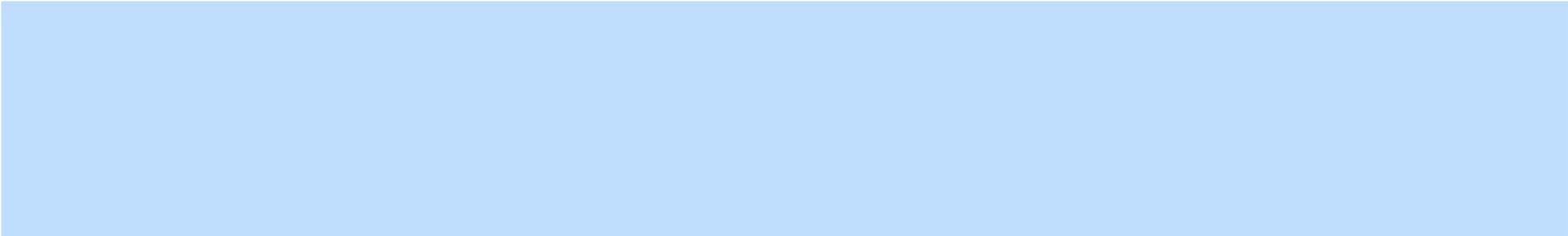
Training Completed



The Web Portal



- <http://worldbreastfeedingtrends.org/>



RECOGNITIONS

Story about WBTi in BMJ (2011)



The screenshot shows the BMJ website interface. At the top, there are navigation links for 'Edition: India', 'Subscribe', 'My account', 'BMA Members', and 'Sign in'. The main header features the BMJ logo and the tagline 'Helping doctors make better decisions'. Below this is a search bar and a navigation menu with categories like 'Research', 'Education', 'News', 'Comment', 'Multimedia', 'Careers', 'Specialties', and 'Archive'. The main content area displays a news article with the title 'More than half of infants in developing countries are breast fed for less than six months, report says'. The article includes a sub-headline, publication details (BMJ 2011; 342 doi: http://dx.doi.org/10.1136/bmj.d18), and a list of related topics such as 'Infant nutrition (including breastfeeding)', 'Childhood nutrition', and 'Reproductive medicine'. On the right side, there is a 'LATEST COMMENTS AND MOST COMMENTED' section with several comments and their publication dates. At the bottom of the page, there are advertisements for 'Novo Nordisk' (HbA1c control) and 'Tamiflu'. The browser's taskbar at the bottom shows various icons and the system clock indicating 2:16 PM on 9/30/2013.

Several sources were used to review the status of Code implementation:

- WHO. *Summary code survey for the report to the World Health Assembly on the implementation of the International Code of Marketing of Breast-milk Substitutes*. Geneva, WHO, 2008.
- WHO. *Survey for the global nutrition policy review: module 3 on the International Code of Marketing of Breast-milk Substitutes*. Geneva, WHO, 2010.
- UNICEF. *National implementation of the International Code of Marketing of Breast-milk Substitutes*. New York, UNICEF, 2011.
- Pan American Health Organization [PAHO]. *30 Años del Código en América Latina [30 years of the Code in Latin America]*. Washington DC, PAHO, 2011.
- World Breastfeeding Trends Initiative [WBTi]. *Toolkit (2011) and website (for reports where a ministry of health is indicated as a part of the monitoring process)*, <http://www.worldbreastfeedingtrends.org/>, accessed 12 May 2012.
- European Union Project on Promotion of Breastfeeding in Europe. *Protection, promotion and support of breastfeeding in Europe: a blueprint for action (revised)*. Luxembourg, European Commission, Directorate Public Health and Risk Assessment, 2008.

24	Mexico	Many provisions into laws and regulations	In 1992, manufacturers of BMS and MoH entered into agreement to regulate promotion and distribution of BMS to health workers. Agreement was ratified in 1995 and 2000. Law on Health (amended 31 May 2009) clearly adopts some standards of the Code in relation to promotion to the general public.	PAHO, 2011; UNICEF, 2011; WBTi, 2011; WHO, 2008 & 2010
25	Montserrat	No action	No available information	WHO, 2010
26	Nicaragua	Many provisions into law	On 12 December 1981, first to pass Decree on promotion, support and protection of breastfeeding after WHA endorsement of the Code. Law No. 295 passed in 1999. MoH studying possibility of strengthening law.	PAHO, 2011; UNICEF, 2011; WBTi, 2010
27	Panama	Full into law	Law No. 50 was passed 23 November 1995.	PAHO, 2011; UNICEF, 2011; WHO, 2008
28	Paraguay	Few provisions into law	Law 1478 on marketing of BMS passed 8 October 1999.	PAHO, 2011; UNICEF, 2011; WHO, 2008
29	Peru	Full into law	Decree No. 020-82-SA approved in 1982, making it	UNICEF, 2011; WBTi, 2011; WHO, 2008 &

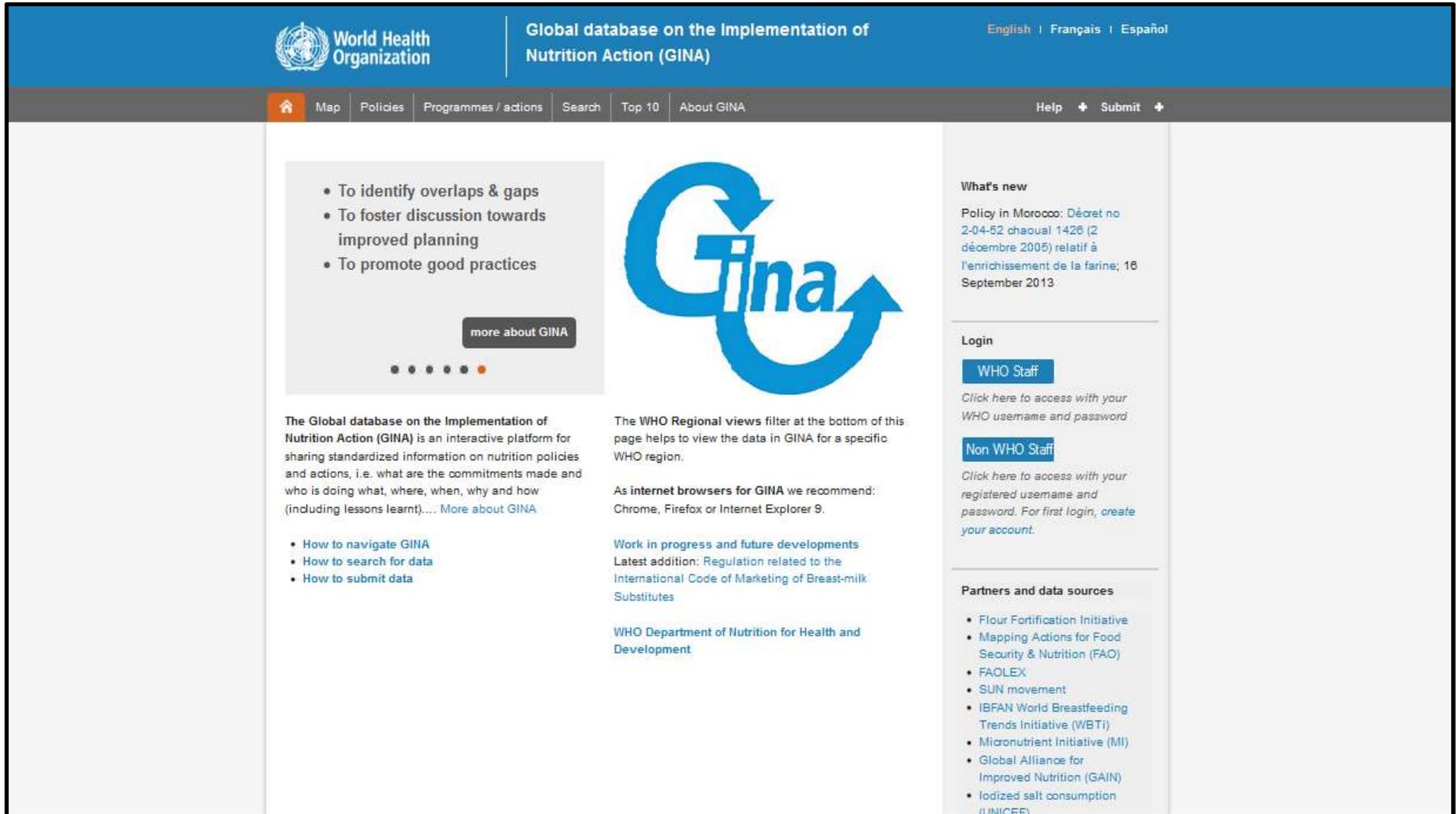


WBTi used as a Master's Degree (MPH) thesis (Wright State University) (2011)



The screenshot shows a web browser window displaying the 'Core Scholar' page for a Master's thesis. The browser tabs include 'Gmail' and 'Gaps and Strengths in US Policies on...'. The page header identifies the site as 'WRIGHT STATE UNIVERSITY LIBRARIES CORE SCHOLAR CORE' with navigation links for 'Home', 'About', 'FAQ', and 'My'. The main title is 'Master of Public Health Program Student Publications'. The specific thesis title is 'Gaps and Strengths in US Policies on Infant and Young Child Feeding: An Analysis Based on the Global Strategy on Infant and Young Child Feeding' by Linda J. Smith, Wright State University - Main Campus. The document type is 'Master's Culminating Experience' and the publication date is '2011'. An abstract is provided, detailing the research project's focus on infant and young child feeding policies in the US. A 'Download' button is visible. The page also features a 'Search' sidebar, a 'Browse' section with links to 'Collections', 'Disciplines', and 'Authors', and a 'Submit' section with links to 'How to Submit', 'Content Guidelines', 'Rights and Responsibilities', and 'FAQ'. A 'Links' section at the bottom right includes 'SelectedWorks Gallery', 'Contact Digital Services', 'Notify me via email or RSS', and 'CORE'. The browser's taskbar at the bottom shows icons for Internet Explorer, Firefox, and Google Chrome, along with a 'Desktop' button and a help icon.

WBTi included as data sources in GINA (WHO) (2012)



World Health Organization | Global database on the Implementation of Nutrition Action (GINA) | English | Français | Español

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- To identify overlaps & gaps
- To foster discussion towards improved planning
- To promote good practices

[more about GINA](#)

The WHO Regional views filter at the bottom of this page helps to view the data in GINA for a specific WHO region.

As internet browsers for GINA we recommend: Chrome, Firefox or Internet Explorer 9.

Work in progress and future developments
Latest addition: Regulation related to the International Code of Marketing of Breast-milk Substitutes

WHO Department of Nutrition for Health and Development

What's new
Policy in Morocco: Décret no 2-04-52 chaoual 1426 (2 décembre 2005) relatif à l'enrichissement de la farine; 18 September 2013

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Partners and data sources

- Flour Fortification Initiative
- Mapping Actions for Food Security & Nutrition (FAO)
- FAOLEX
- SUN movement
- IBFAN World Breastfeeding Trends Initiative (WBTi)
- Micronutrient Initiative (MI)
- Global Alliance for Improved Nutrition (GAIN)
- Iodized salt consumption (UNICEF)

Publication in Peer-reviewed indexed journal (2012)

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The status of policy and programmes on infant and young child feeding in 40 countries

Arun Gupta¹, Radha Holla¹, J P Dadhich¹, Shoba Suri¹, Marta Trejos² and Joyce Chanetsa³

+ Author Affiliations

*Corresponding author. Arun Gupta, Regional Coordinator IBFAN Asia, BP-33 Pitampura, Delhi 110088, India. E-mail: arun.ibfan@gmail.com. Tel: +91-11-27343608. Fax: +91-11-27343606.

Accepted March 21, 2012.

Abstract

This Article

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First published online: July 4, 2012

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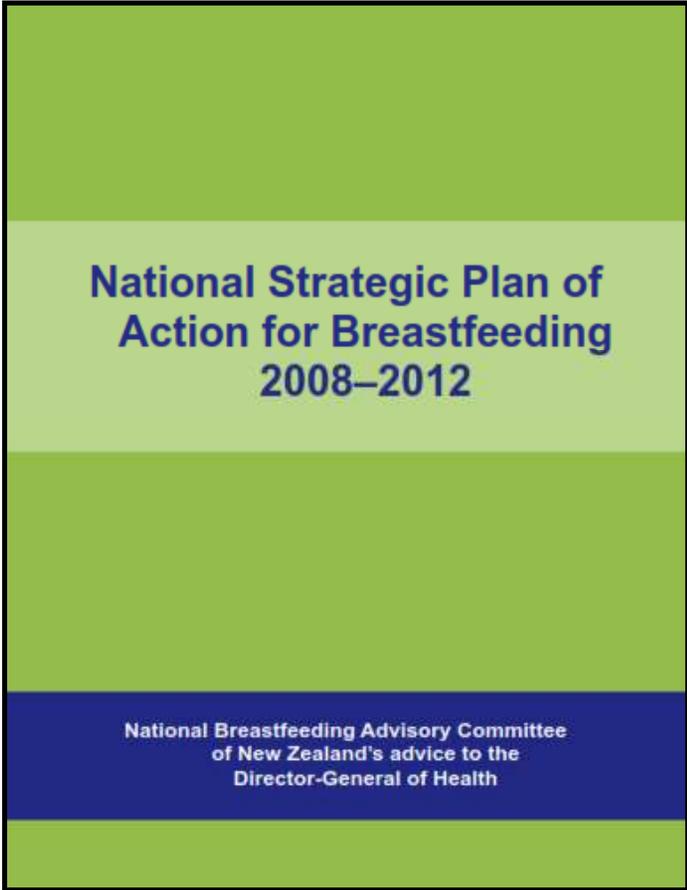
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Current Issue

September 2013 28 (6)



Governments are using WBTi for formulating policies



National Strategic Plan of Action for Breastfeeding 2008–2012

National Breastfeeding Advisory Committee
of New Zealand's advice to the
Director-General of Health

International guiding documents

The Plan is informed by a well-established international framework provided by:

- the *International Code of Marketing of Breast-milk Substitutes* (WHO 1981) and subsequent relevant World Health Assembly resolutions;
- the Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding (1990 updated 2005);
- the Baby-Friendly Hospital Initiative and, as implementation progresses, the Baby-Friendly Community Initiative (initiated in 1997);
- International Labour Organization Maternity Protection Convention 183 (2000);
- the WHO/UNICEF *Global Strategy on Infant and Young Child Feeding* (2003);
- United Nations Convention on the Rights of the Child (1990); and
- World Breastfeeding Trends Initiative established by the International Baby Food Action Network (IBFAN)*.

WBW Theme (2012)



Understanding the Past - Planning the Future: Celebrating 10 years of WHO/UNICEF's Global Strategy for Infant and Young Child Feeding

What is the World Breastfeeding Trends Initiative (WBTi)?

In 2004 (2005), the International Baby Food Action Network (IBFAN) adapted the World Health Organization (WHO) tool and WBTi's philosophy to launch a new initiative, a tool for assessment and action - the World Breastfeeding Trends Initiative (WBTi). Having seen its success in South Asian countries, it was then launched in other regions in 2005/06, and has now been introduced to 67 countries. Led by IBFAN Asia, the WBTi process documents a set of gaps in policy and tools for action to mobilise national action to bridge the gaps. IBFAN has mobilised more than 200 groups in the 40 countries, leading to strengthened relationships among civil society, governments and other key stakeholders. WBTi generated action in several countries, some have reported success e.g. Afghanistan and Bhutan created a database on practices, Cambodia established a new nutrition policy and included the issue of nutrition in emergency response frameworks, the national policy guidelines on IYCF, India made provisions for stronger and wider maternity protection, Philippines strengthened legal protection, while the Latin America and Caribbean (LAC) region put much emphasis on infant feeding during emergencies.

Child, maternity protection, skilled counselling and so on. The 40 Country assessments and list of participating groups can be seen on the WBTi website (see <http://www.worldbreastfeedingtrends.org/>). We could all work around these above-mentioned indicators, either by beginning new action, or strengthening existing ones. The analysis will give us a fair idea of what we are looking for in each country, not only now but also to keep track of every 2-3 years. Many countries, which do not appear in the 40 Country report because they did not participate so far, could surely have significant achievements in any of these 10 areas. This is what we need to find out in all countries.

WHY SHOULD YOU ACT?

Because it leads to change!

Understanding the past and planning for the future envisages a series of actions. Some of this needs to be completed before the World Breastfeeding Week, some during the Week and some after the Week celebrations are over. Countries that have completed the assessment and found gaps, could work on the priority that they identified. And if you are interested in carrying out WBTi assessments, you can do the following:

How to do an assessment in your country?

While there may be several ways of doing an assessment on the progress of IYCF in your country, the WBTi is one way which is tried and tested, and has been found to be a useful model for country groups to use for both advocacy and for generating action. The following steps have been found to be the most helpful:

1. First form a core group of 4-5 members, by bringing together stakeholders including government, professional bodies, civil society organisations and international organisations like WHO and UNICEF. Identify a coordinator to lead the process.
2. Second understand the indicators of the assessment and the questionnaires available on WBTi website.
3. The Core group can study and assess each indicator, list findings and take note of gaps.
4. Share the findings in the country with the larger group and achieve consensus.
5. Develop a set of recommendations and build consensus around them.

Continued on slide 4

Ten Indicators of policy and programme

1. National Policy, Programme and Coordination
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. Mother Support and Community Outreach- Community based support for the pregnant and breastfeeding mother
7. Information Support
8. Infant Feeding and HIV
9. Infant Feeding during Emergencies
10. Mechanism of Monitoring and Evaluation Systems

Five indicators of practice

1. Percentage of babies breastfed within one hour of birth
2. Percentage of babies 2-6 months of age exclusively breastfed in the last 24 hours
3. Median duration of breastfeeding in months
4. Percentage of breastfed babies less than 6 months old receiving other foods or drinks from bottles
5. Percentage of breastfed babies receiving complementary foods at 6-8 months of age

WBTi referred as a source of information (2013)

unite for
children

unicef 

MEDIA RELEASE

Strong gains in exclusive breast-feeding must be sustained, says UNICEF

August 1, 2013: On the occasion of World Breastfeeding Week, UNICEF called on government and industry to ensure that the [International Code of Marketing of Breast-milk Substitutes](#) continues to be strongly enforced.

Sri Lanka was one of the first countries in the world to adopt this Code in 1981. The Code protects and promotes breastfeeding, through the provision of adequate information on appropriate infant feeding and the regulation of the marketing of breast milk substitutes.

The [International Code of Marketing of Breast-milk Substitutes](#) stipulates that absolutely no promotion of breast milk substitutes, bottles or teats should be made available to the general public; that neither health facilities nor health professionals should have a role in promoting breast milk substitutes; and that free samples should not be provided to pregnant women, new mothers or families.

Sri Lanka is ranked first among the countries in South Asia in the World Breastfeeding Trends Initiative index (WBTi) 2012 Report Card. Monitoring mechanisms such as the Committee on the Code of Marketing of Breast-milk Substitutes chaired by the Secretary to the Ministry of Health, regularly reviews violations to the Code and ensures that Sri Lanka stays on track.

Breastfeeding has and continues to be essential in protecting against infectious diseases, in providing essential nutrients, and in preventing stunting. This is particularly important in Sri Lanka, given that a seventh of all children under the age of five are stunted. Recognizing the benefits of breastfeeding, the Government has put breastfeeding at the centre of its child nutrition programme and is presently revising the Code of Marketing of Breast-milk Substitutes to take in new and emerging developments.

UNICEF has supported Governments efforts in the promotion and protection of breastfeeding since the early 90's through the Baby Friendly Hospital Initiative, helping to establish lactation management centres in all major hospitals in the country, and supporting the development of the National Policy on the Code of Marketing of Breast-Milk Substitutes.

For further information, please contact:
Suzanne Wooster, Communication Officer, UNICEF Sri Lanka
077 316 5378); sdavey@unicef.org



Understanding the past — Planning the future:
Celebrating 10 years of WHO/UNICEF's Global Strategy for Infant and Young Child
Feeding

WORLD BREASTFEEDING WEEK 2012

To monitor the implementation of the Global Strategy for Infant and Young Child Feeding in countries, WHO developed a tool for assessing national practices, policies and programmes. Based on this tool, the International Baby Food Action Network of Asia developed the *World Breastfeeding Trends Initiative* to monitor and report on infant and young child feeding practices, policies and programmes worldwide.

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Partnerships for SD

The International Baby Food Action Network (IBFAN) commits to advocate to increase the number of infants who are exclusively breastfed for the first six months

Description/achievement of initiative

The International Baby Food Action Network (IBFAN), a network of 250 not-for-profit, non-governmental organizations in 166 developing and developed countries, commits to advocate on behalf of the Global Strategy for Women's and Children's Health's goal to increase the number of infants who are exclusively breastfed for the first six months, by 21.9 million by 2015, an increase of about 40% from current numbers.

Implementation methodologies

From a policy perspective, IBFAN will advocate implementation of legal measures based on the International Code of Marketing of Breastmilk Substitutes (the Code); support country-level assessment of the Global Strategy for Infant and Young Child Feeding (2002) through the World Breastfeeding Trends Initiative, and bridge the gaps in implementation. IBFAN will also advocate for enhancing 'maternity entitlements', for example, paid maternity leave in order to afford mothers and babies the opportunity for 6 months of exclusive breastfeeding, breastfeeding breaks for women returning to work, etc. From a service delivery perspective, IBFAN will support monitoring of the Code, and national and regional level training of

INFORMATION

- Submitted by: *International Baby Food Action Network (IBFAN)*
- Topic: Health and population
- Keywords: Food and Nutrition, Youth and Women, Healthcare Services, Health and Population
- Location: Global
- Date of completion: 2015
- [Click for more information](#) ↗

DELIVERABLES & RESOURCES

- [1 deliverable\(s\)](#)
- [0 resource\(s\)](#)

ACTION NETWORK

- This voluntary initiative came from Every Woman Every Child

Global Nutrition researchers find it worthwhile...
Chessa K. Lutter and Ardythe L. Morrow.
Adv. Nutr. 4: 213,219, 2013



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Protection, Promotion, and Support and Global Trends in Breastfeeding^{1,2,3}

Chessa K. Lutter^{4*} and Ardythe L. Morrow⁵

+ Author Affiliations

↵*To whom correspondence should be addressed. E-mail: lutterch@paho.org.

Abstract

A number of case studies have shown that promotion of breastfeeding (BF) coincides with improved BF and exclusive BF (EBF) practices. We quantify the relationship between BF promotion and changes in BF practices by analyzing the relationship between implementation of the WHO/UNICEF Global Strategy for Infant and Young Child Feeding as measured by the World Breastfeeding Trends

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This Article
doi: 10.3945/an.112.003111
Adv Nutr March 2013 Adv Nutr vol. 4: 213-219, 2013

» Abstract
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Analysis shows it is possible to increase breastfeeding rates if policy and programmes are put in place and WBTi has been found to be a valid tool to predict success.

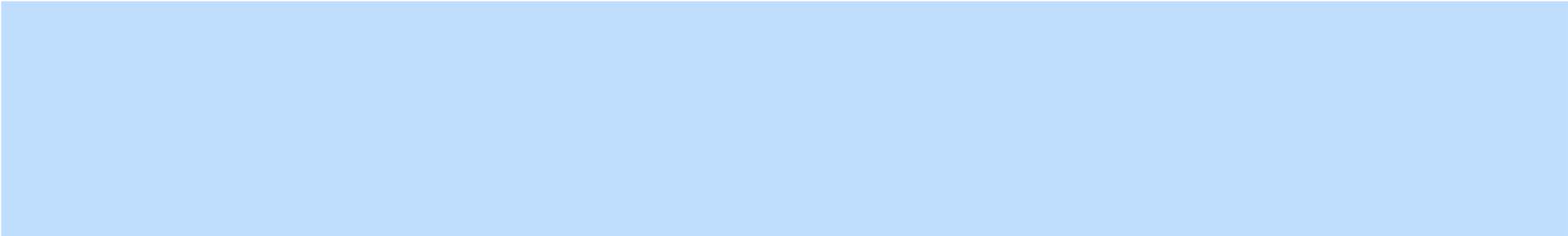
UNICEF takes note ... (2013)

IBFAN also hosts the *Global Breastfeeding Initiative for Child Survival (gBICS)*, a civil society-driven initiative aiming to accelerate progress in attaining the health-related MDGs, especially Goal 4, by scaling up early, exclusive and continued breastfeeding. A major focus is the assessment of the status of breastfeeding practices and policies and strategies in countries through the *World Breastfeeding Trends Initiative (WBTi)*¹⁰⁰, the results of which are intended to be used to influence policies, for advocacy, for programme initiatives etc. The WBTi uses "combined" data on breastfeeding practices (not verified or endorsed by WHO or UNICEF at global level) together with the data reported by countries on the status of policies and programmes to give countries an overall score.



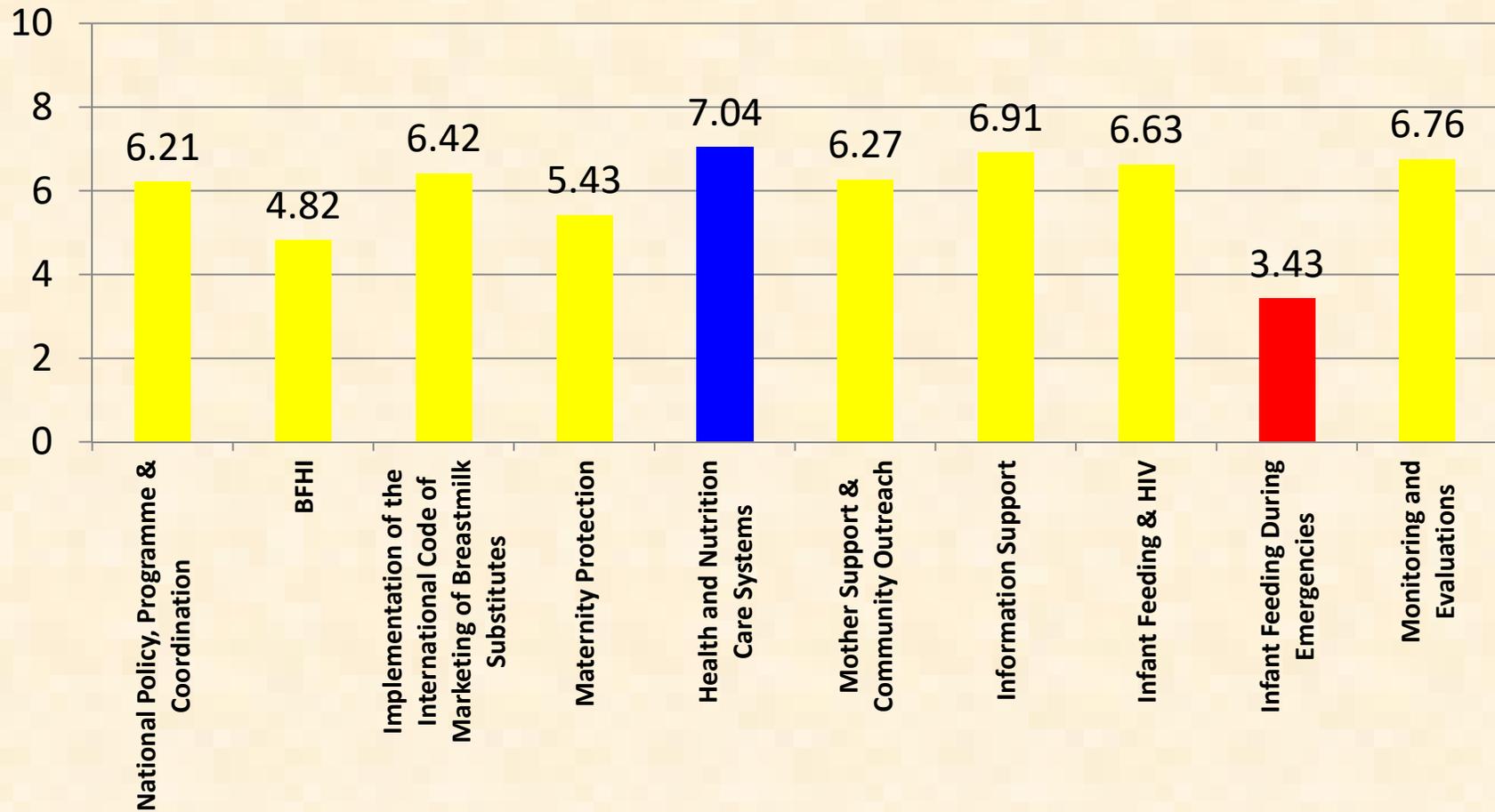
BREASTFEEDING ON THE WORLDWIDE AGENDA

Findings from a landscape analysis on political commitment
for programmes to protect, promote and support breastfeeding



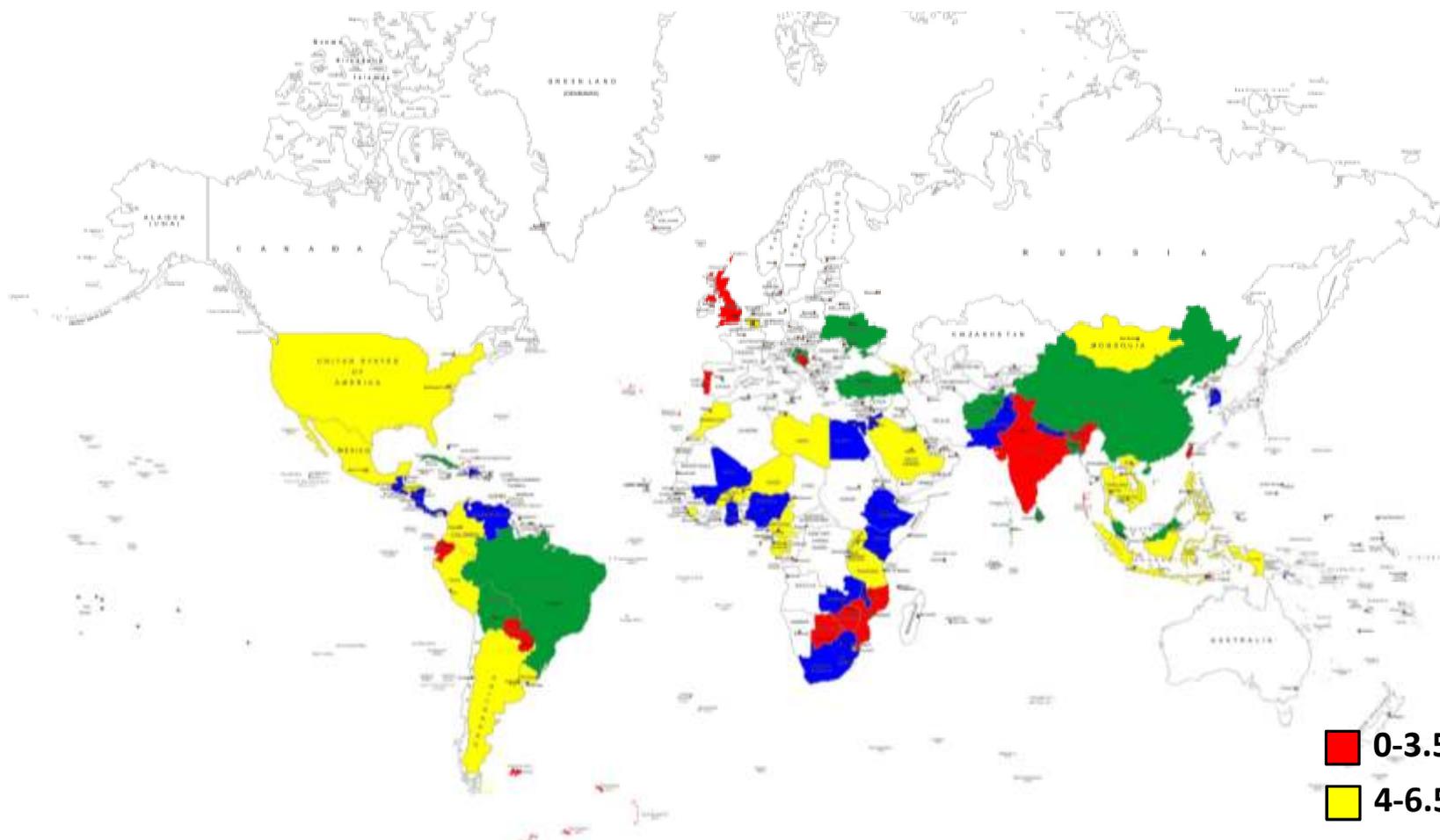
RESULTS OF 84 COUNTRY REPORT SCORING & ANALYSIS

Average Score of 10 indicators of Policy and Programmes of 84 Countries



INDICATOR WISE

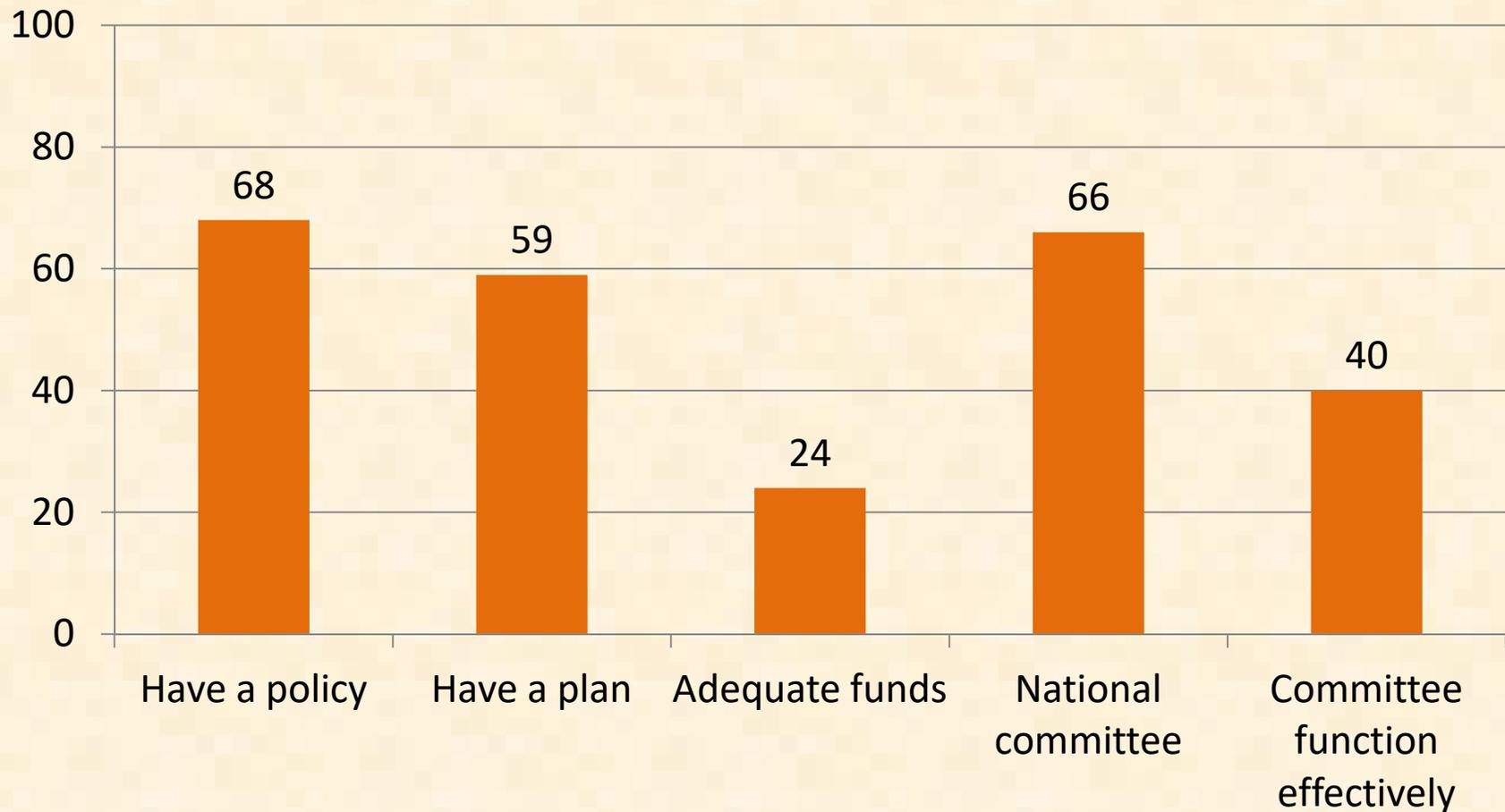
Ind No.1: Status of 84 countries on national policy, programme and coordination based on colour coding



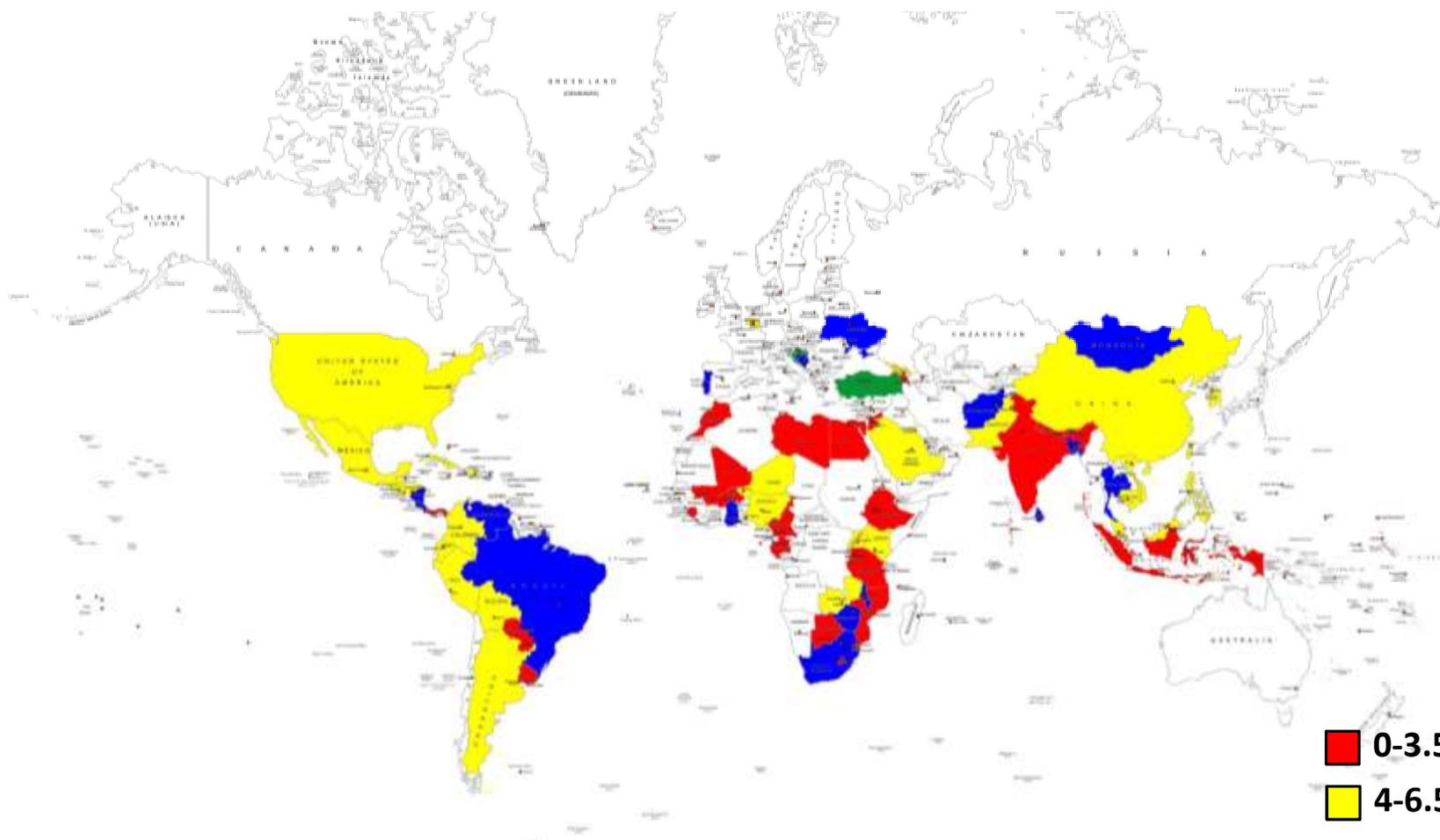
17 countries are in GREEN color code and 15 in RED



Ind No.1: National policy, programme and coordination : Analysis



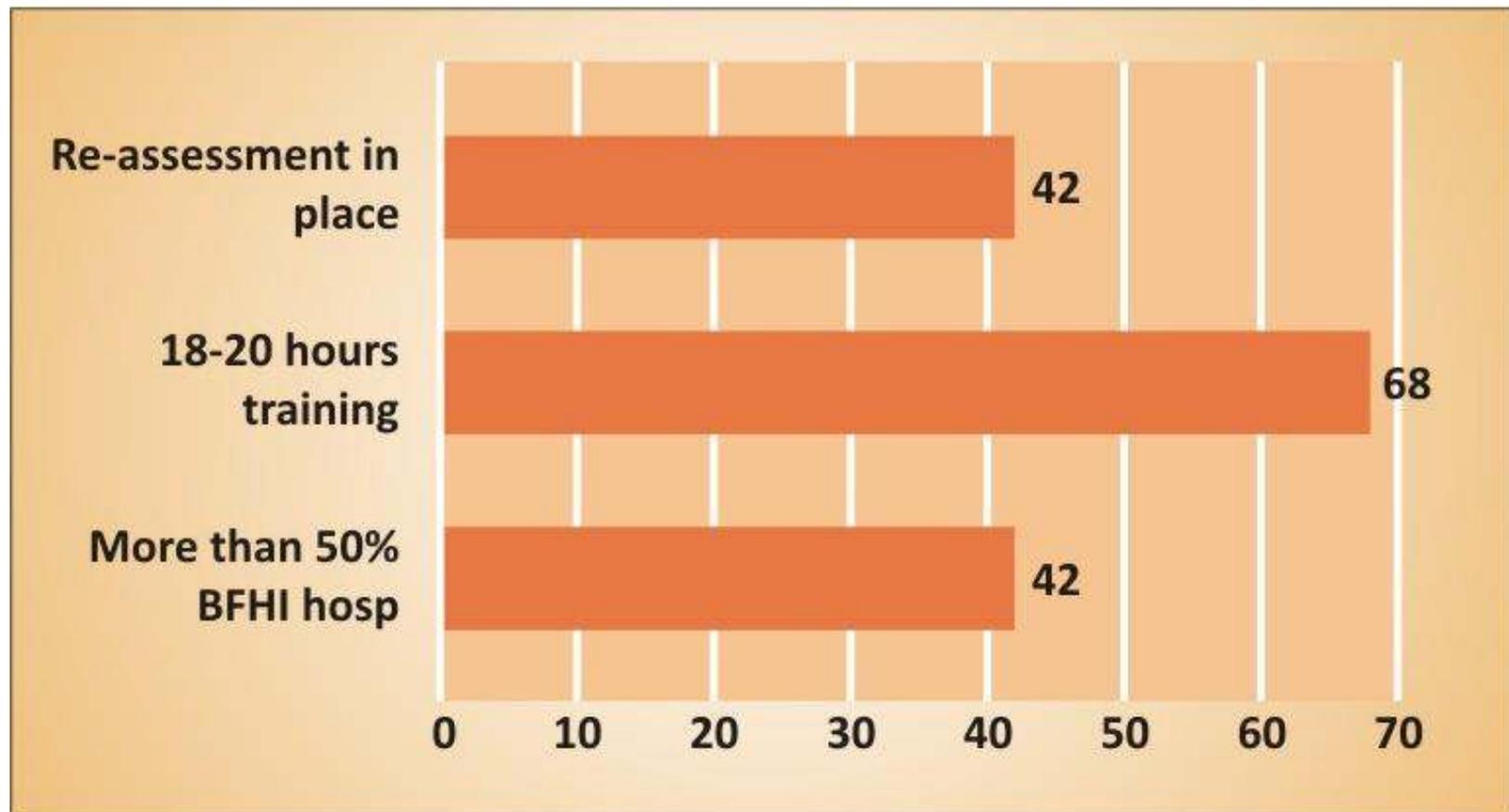
Ind. 2: The state of Baby Friendly Hospital Initiative in 84 countries on a scale of 0-10



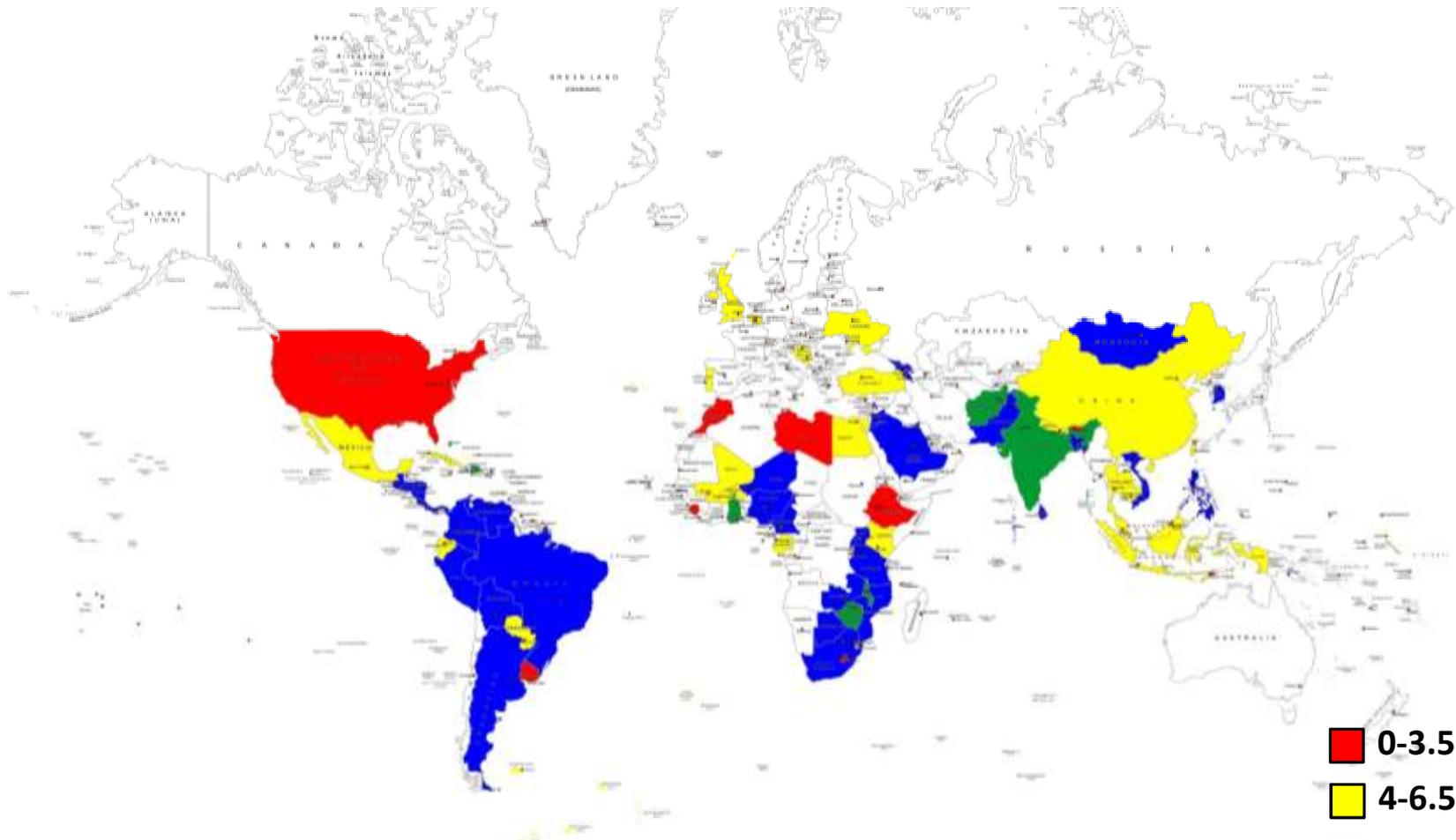
2 countries are in GREEN color code and 29 in RED

Ind No.2

. Contd....Baby Friendly Hospital Initiative: Analysis

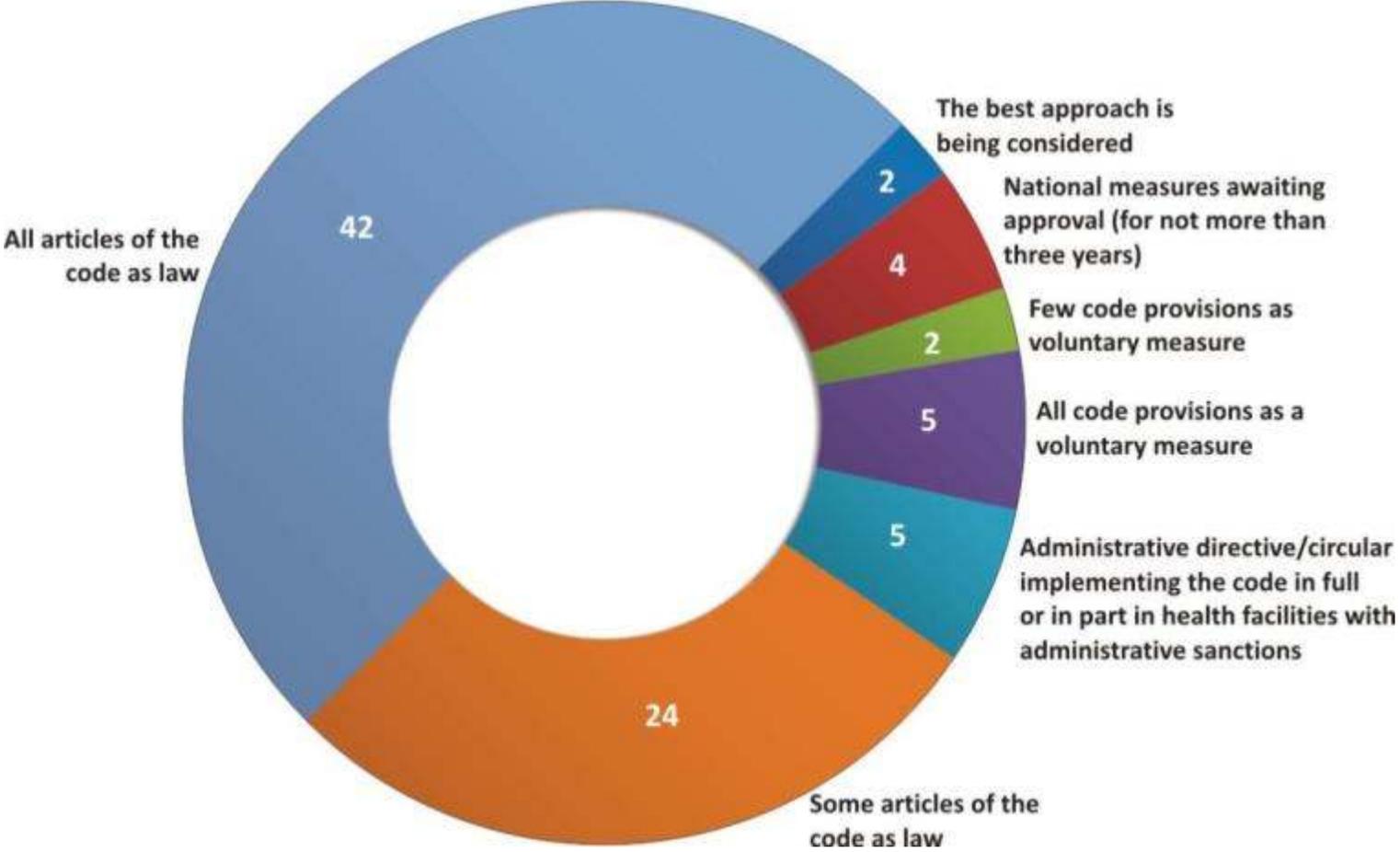


Ind. 3: The state of implementation of the International Code of Marketing of Breastmilk Substitutes in 84 countries on a scale of 0-10

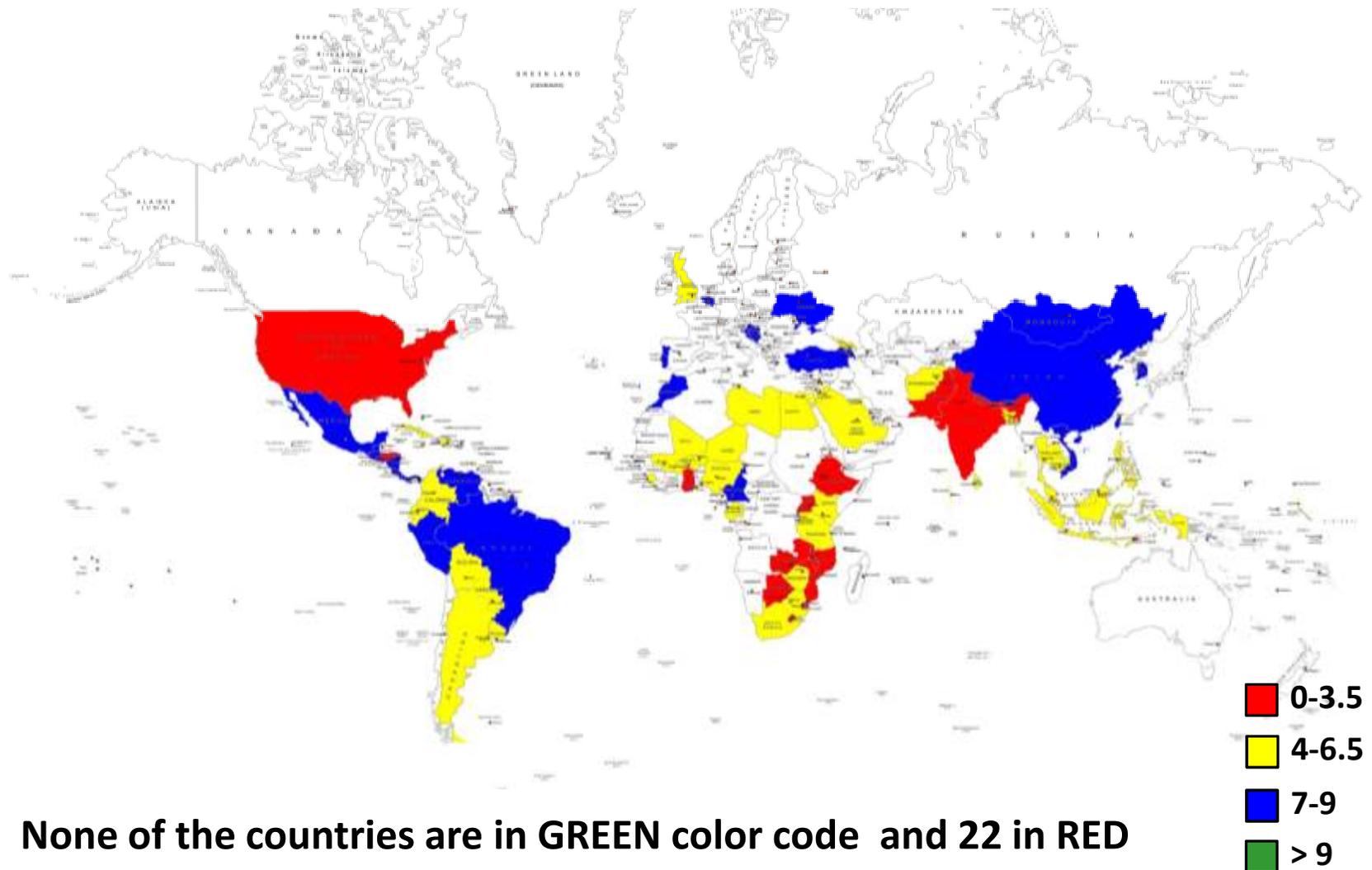


7 countries are in GREEN color code and 11 in RED

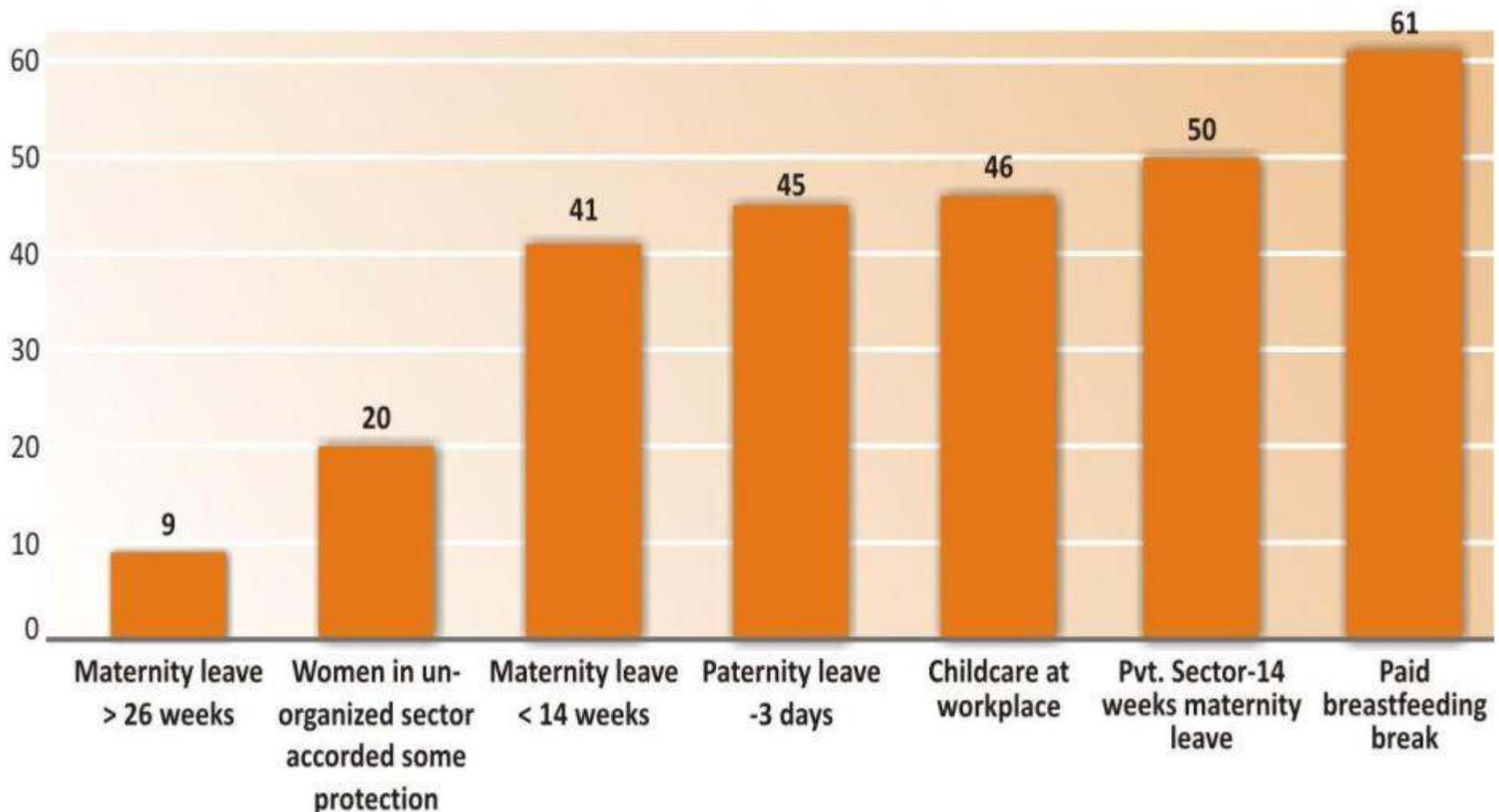
Ind.3 Contd...Status of the International Code: Analysis



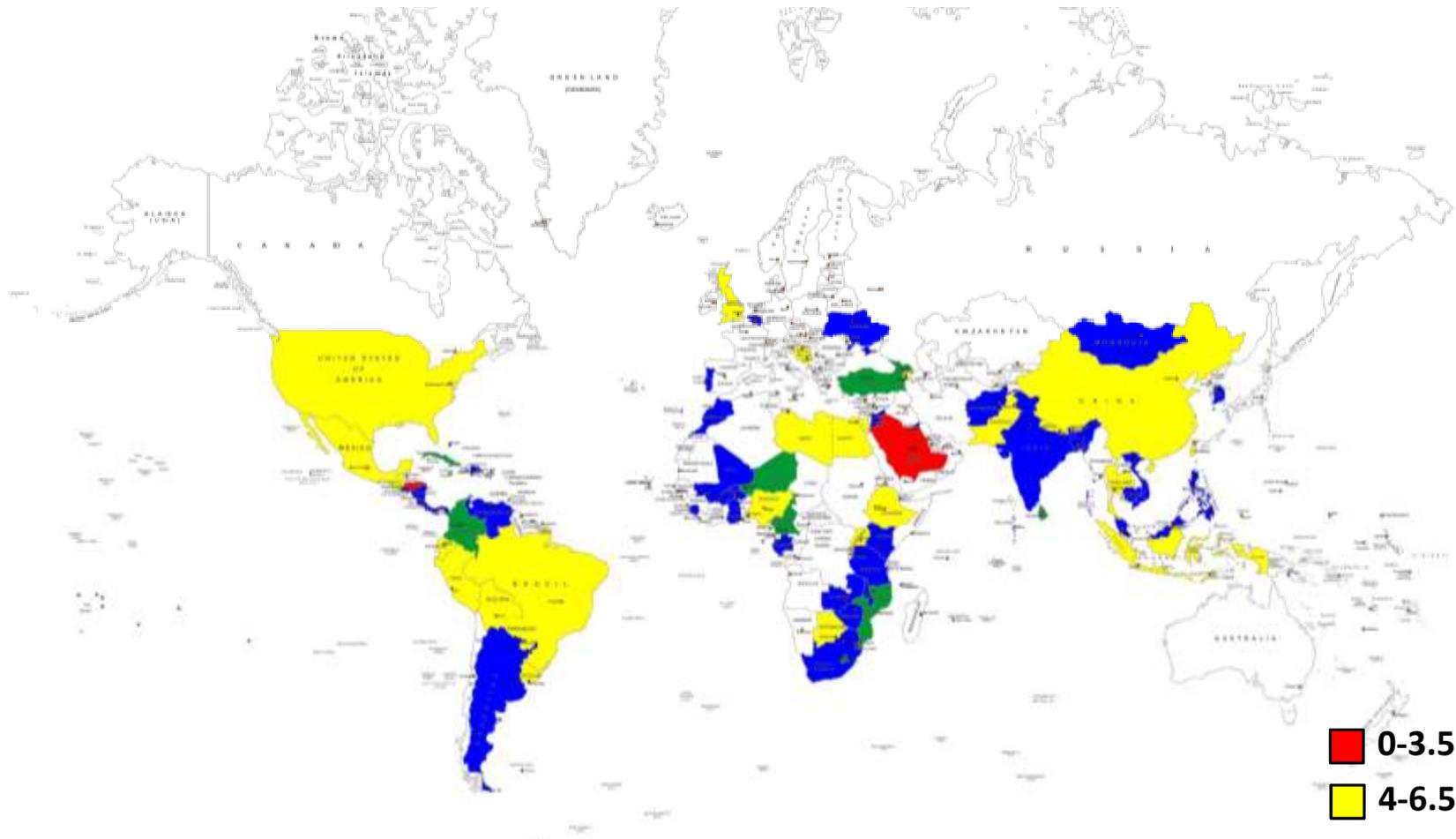
Ind. No. 4: The state of maternity protection in 84 countries on a scale of 0-10



Ind. 4 contd. Maternity Protection : Analysis



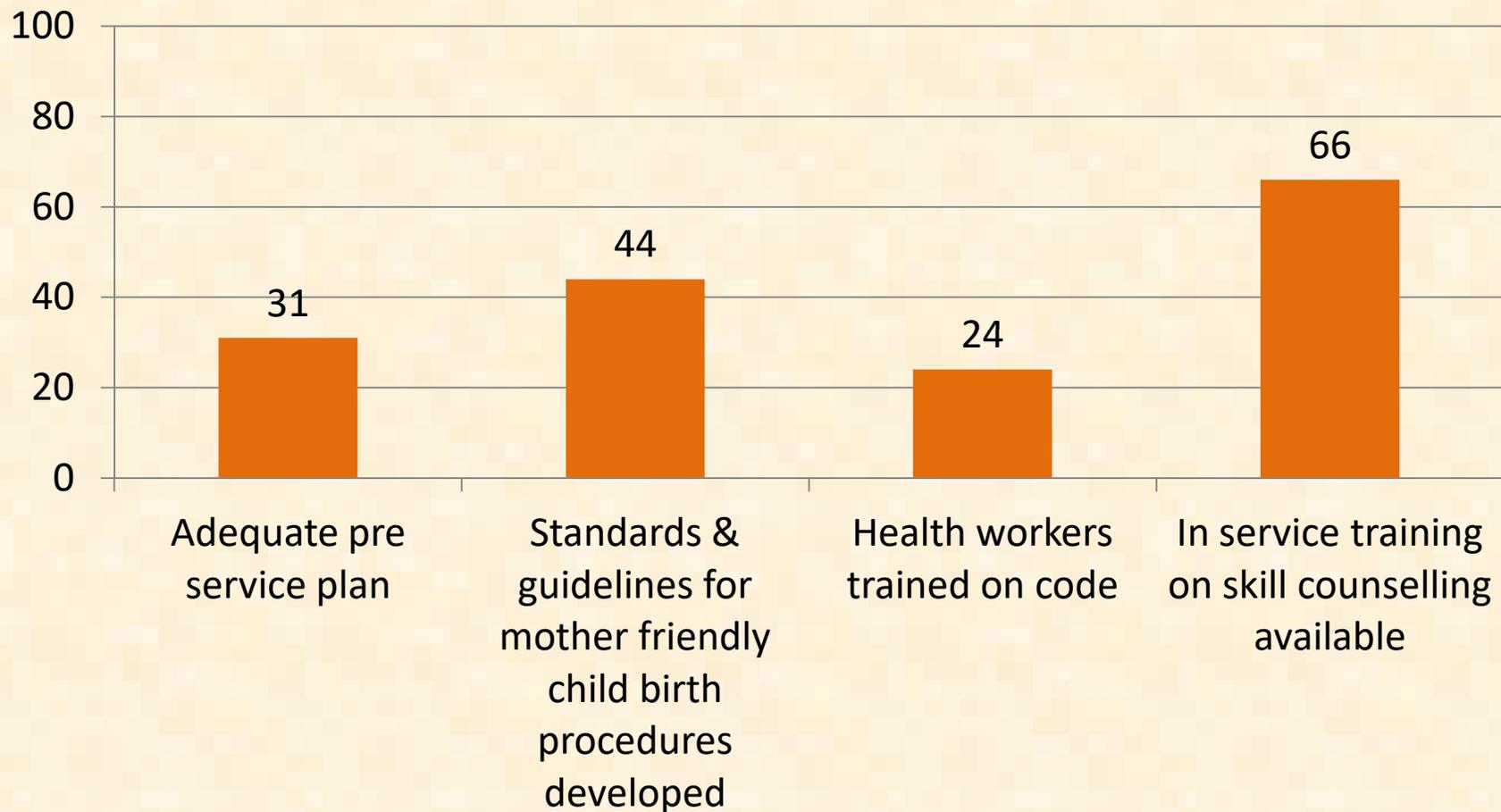
Ind. 5 : The state of health & nutrition care system in 84 countries on a scale of 0-10



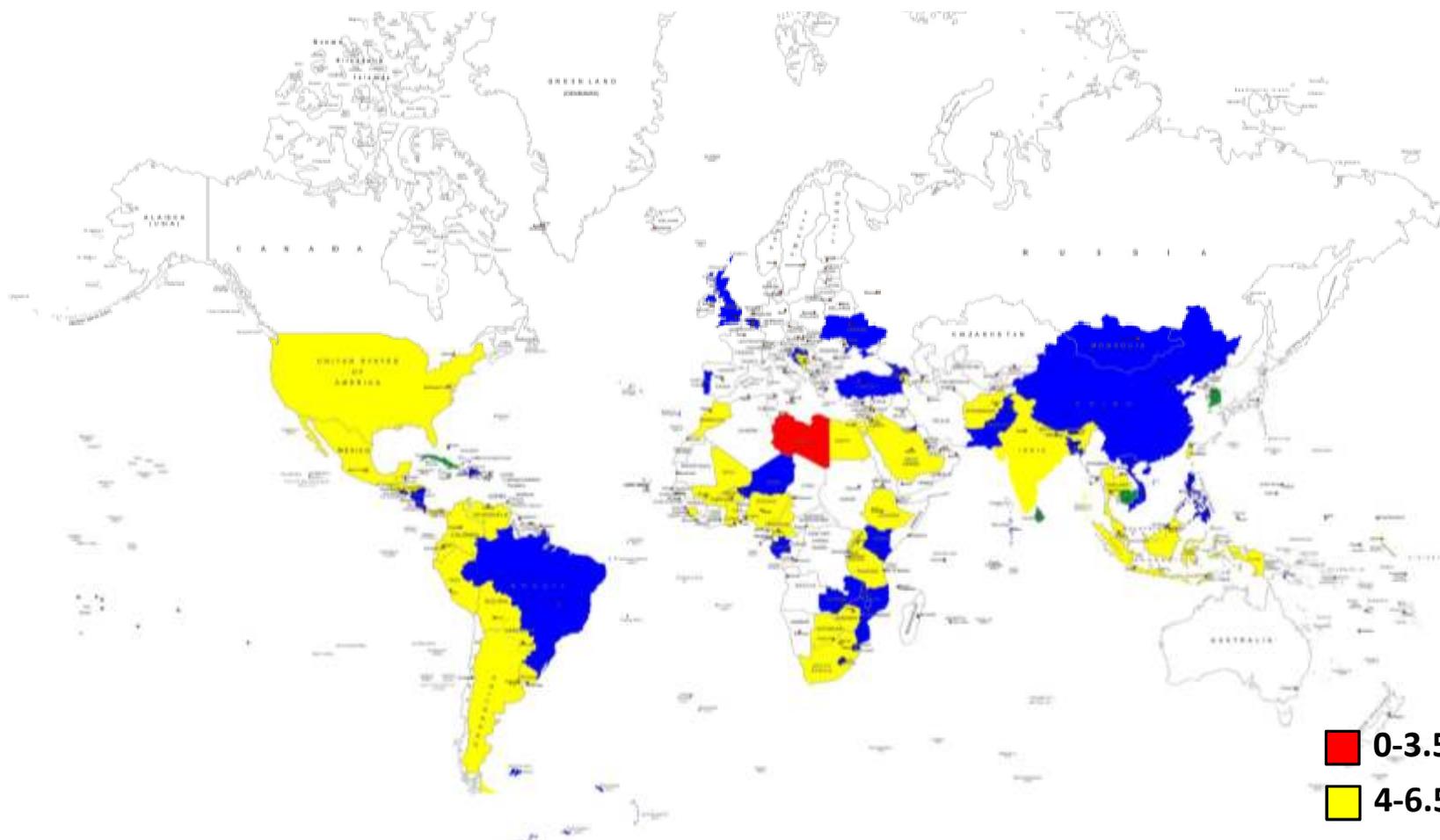
10 countries are in GREEN color code and 3 in RED

Ind No.5

Contd. Health & Nutrition Care System Analysis

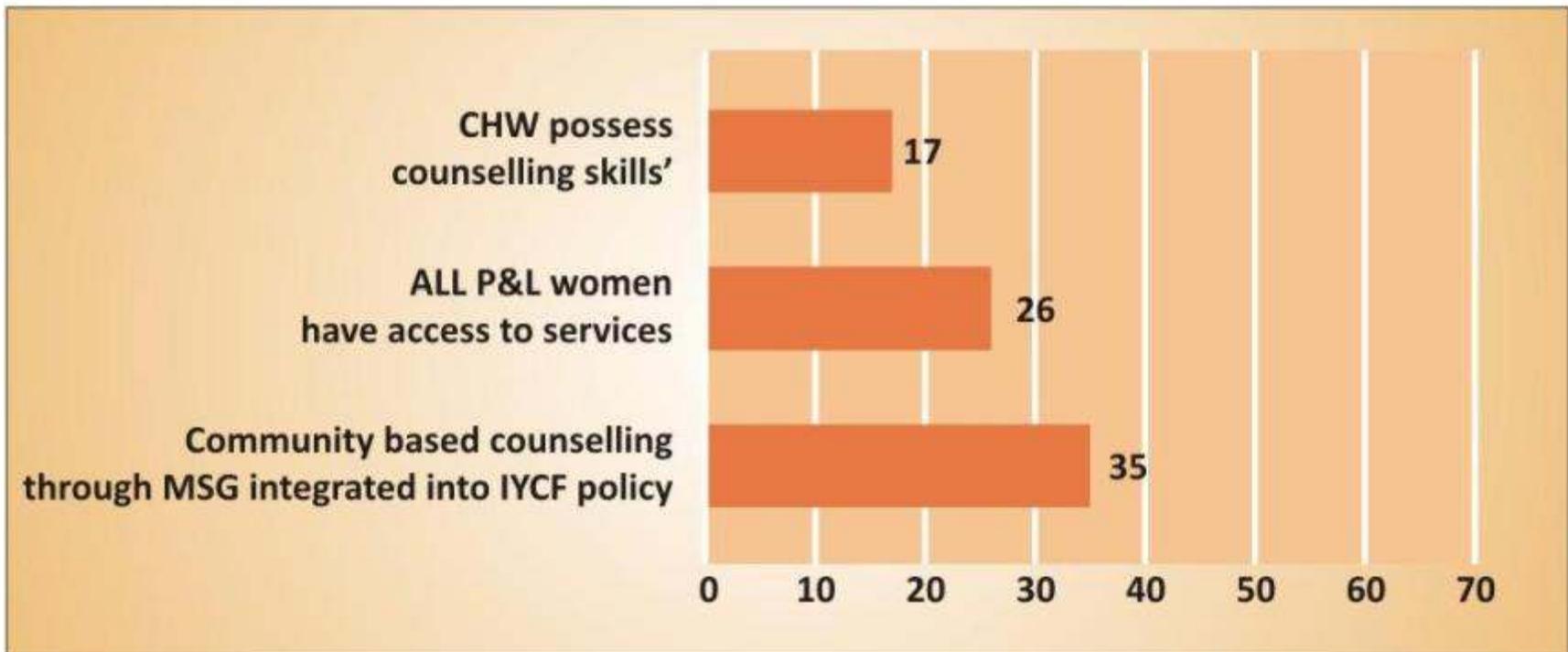


The state of mother support and community outreach in 84 countries on a scale of 0-10

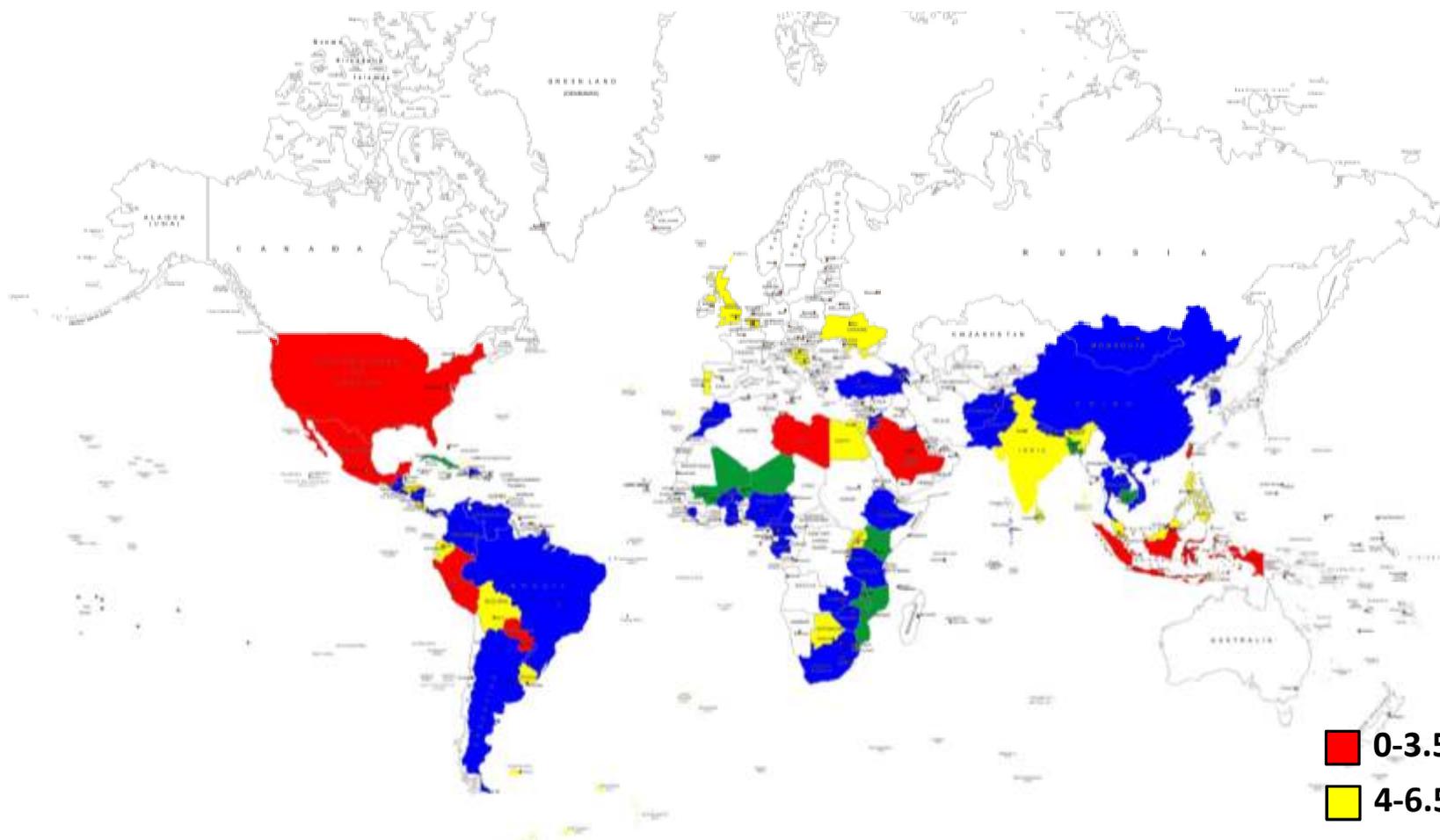


6 countries are in GREEN color code and 2 in RED

Mother Support and Community Outreach: Ind No.6



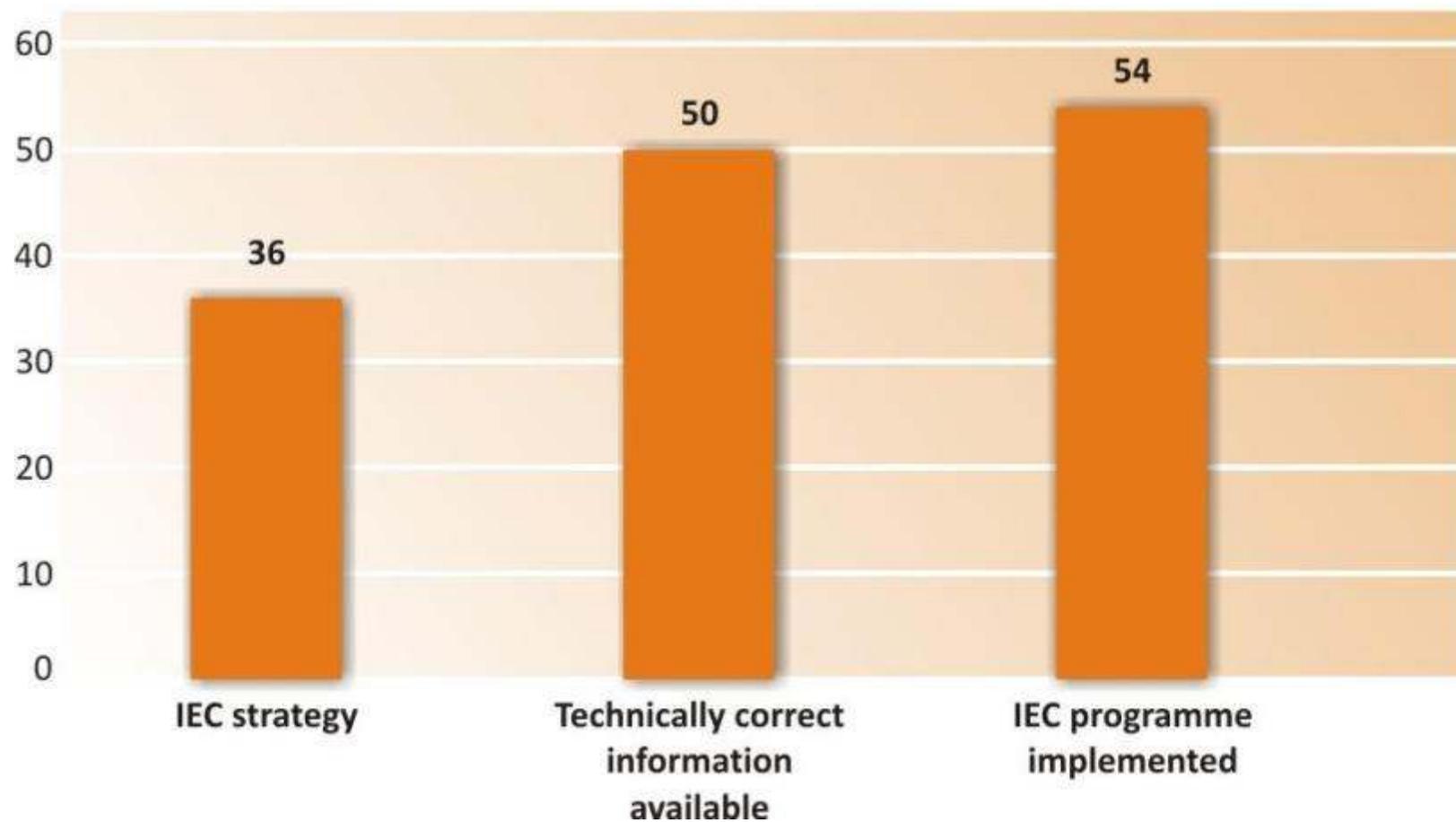
The state of information support in 84 countries on a scale of 0-10



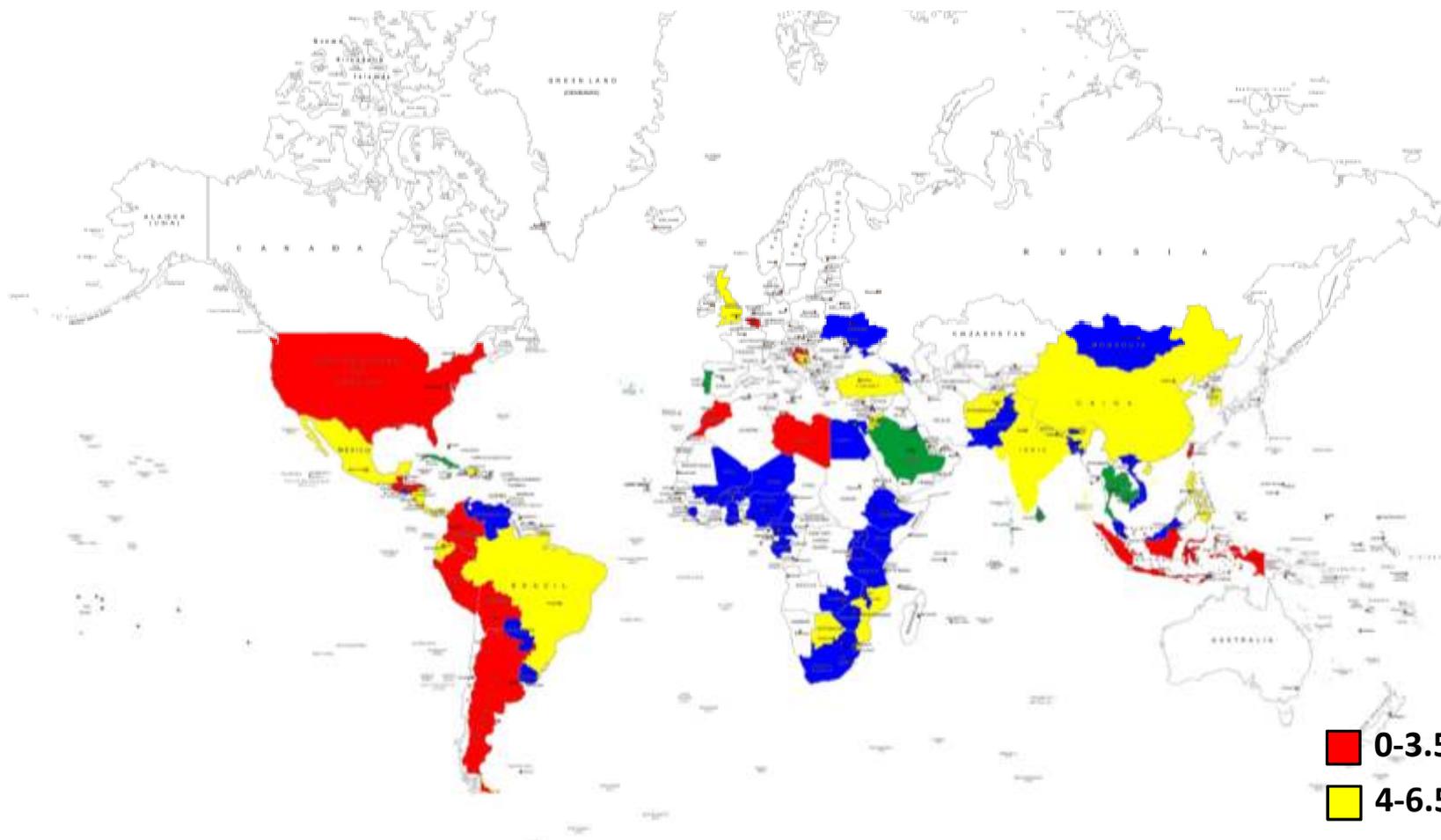
10 countries are in GREEN color code and 9 in RED



Information Support : Ind No.7



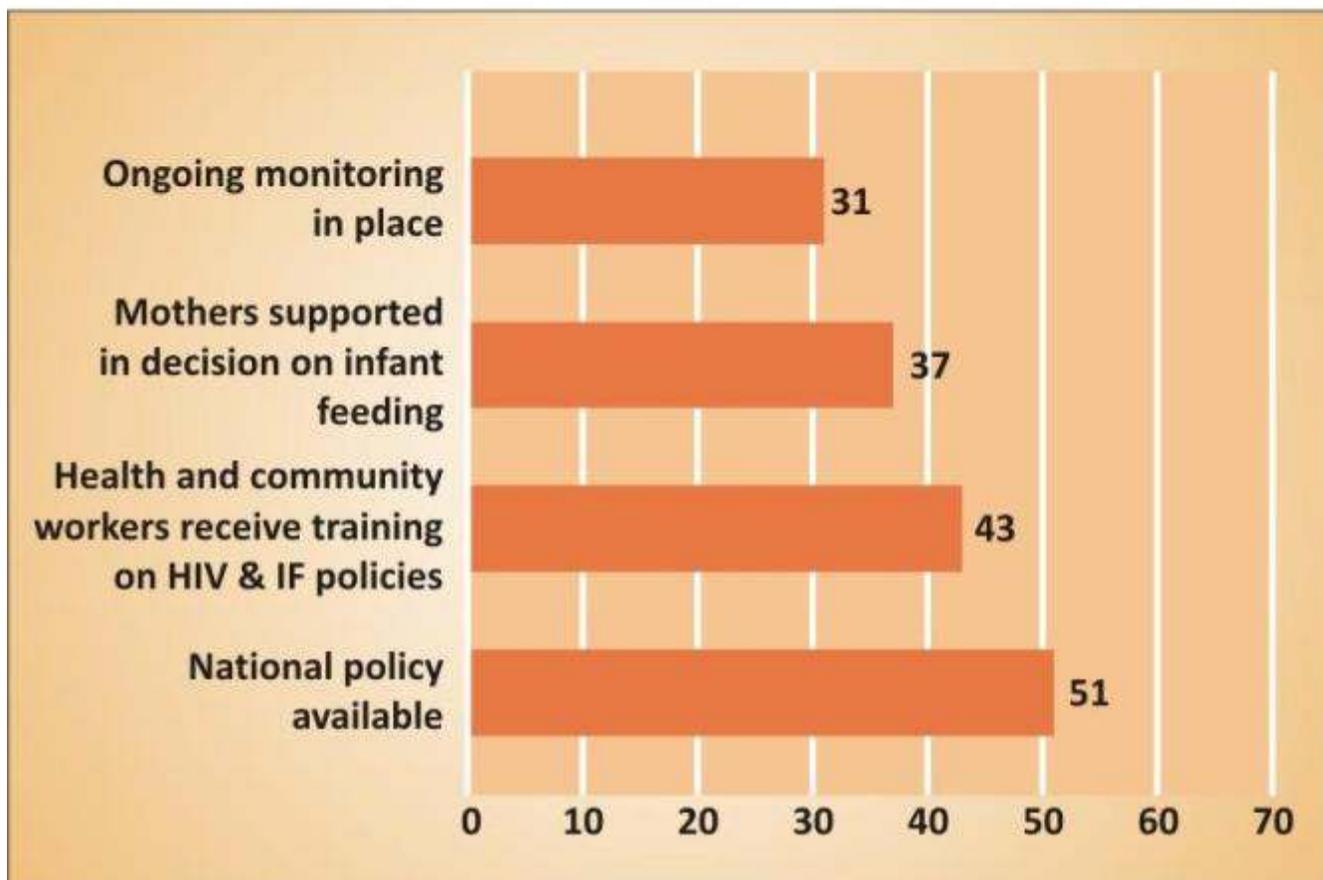
The state of infant feeding and HIV in 84 countries on a scale of 0-10



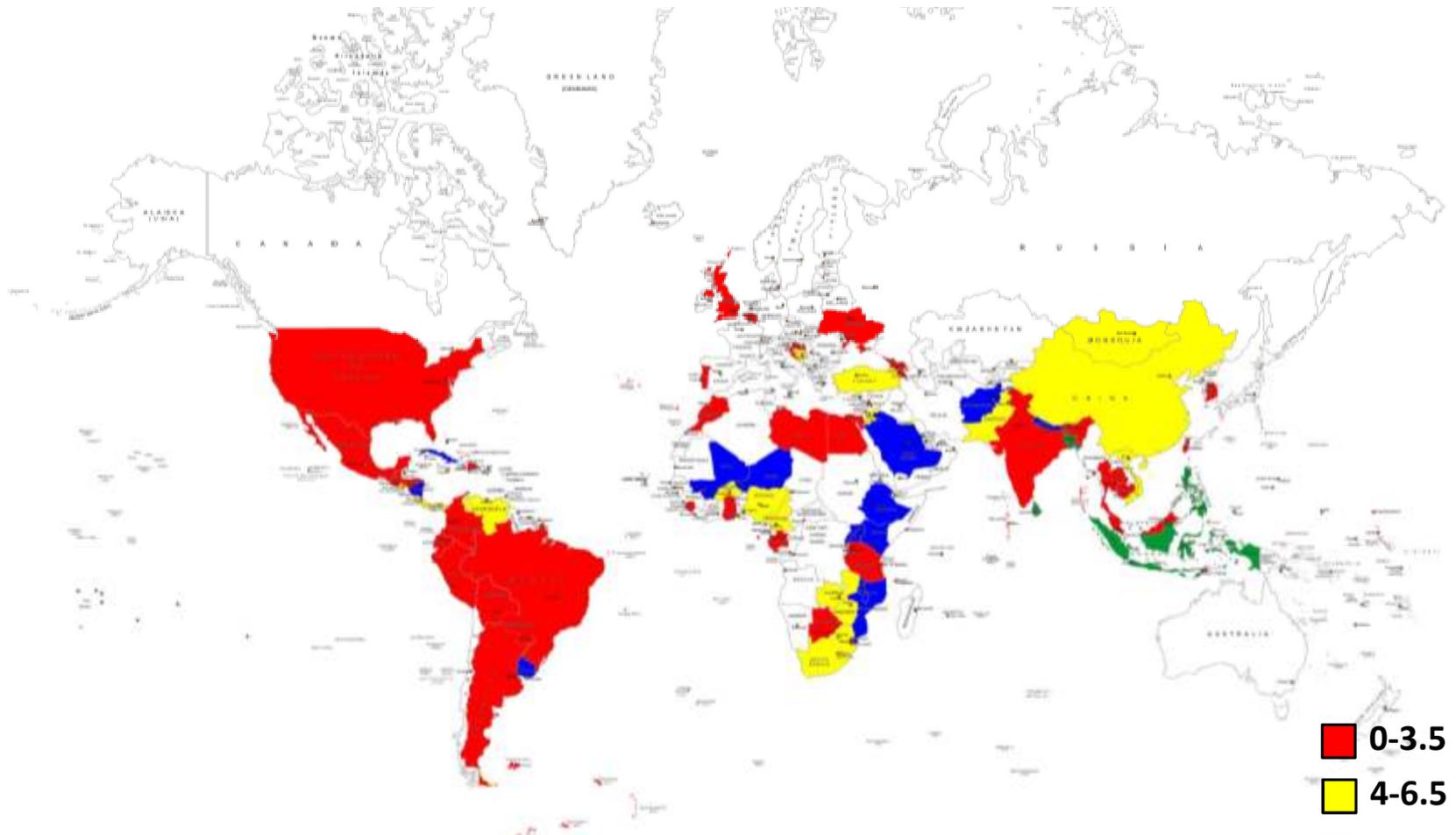
8 countries are in GREEN color code and 14 in RED



Infant Feeding and HIV : Ind No.8



The state of infant feeding during emergencies in 84 countries on a scale of 0-10

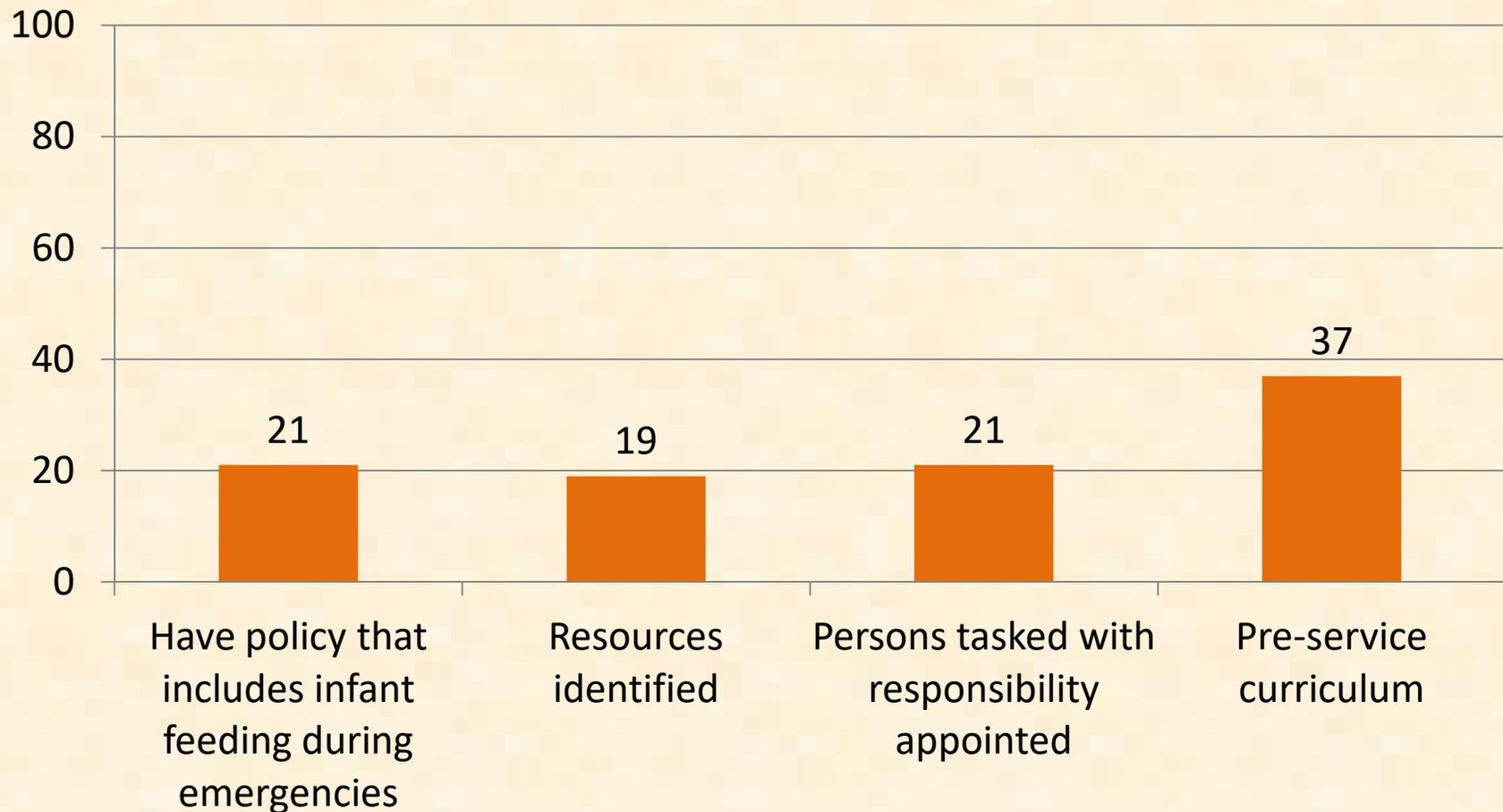


4 countries are in GREEN color code and 48 in RED



Infant Feeding during Emergencies : Ind No

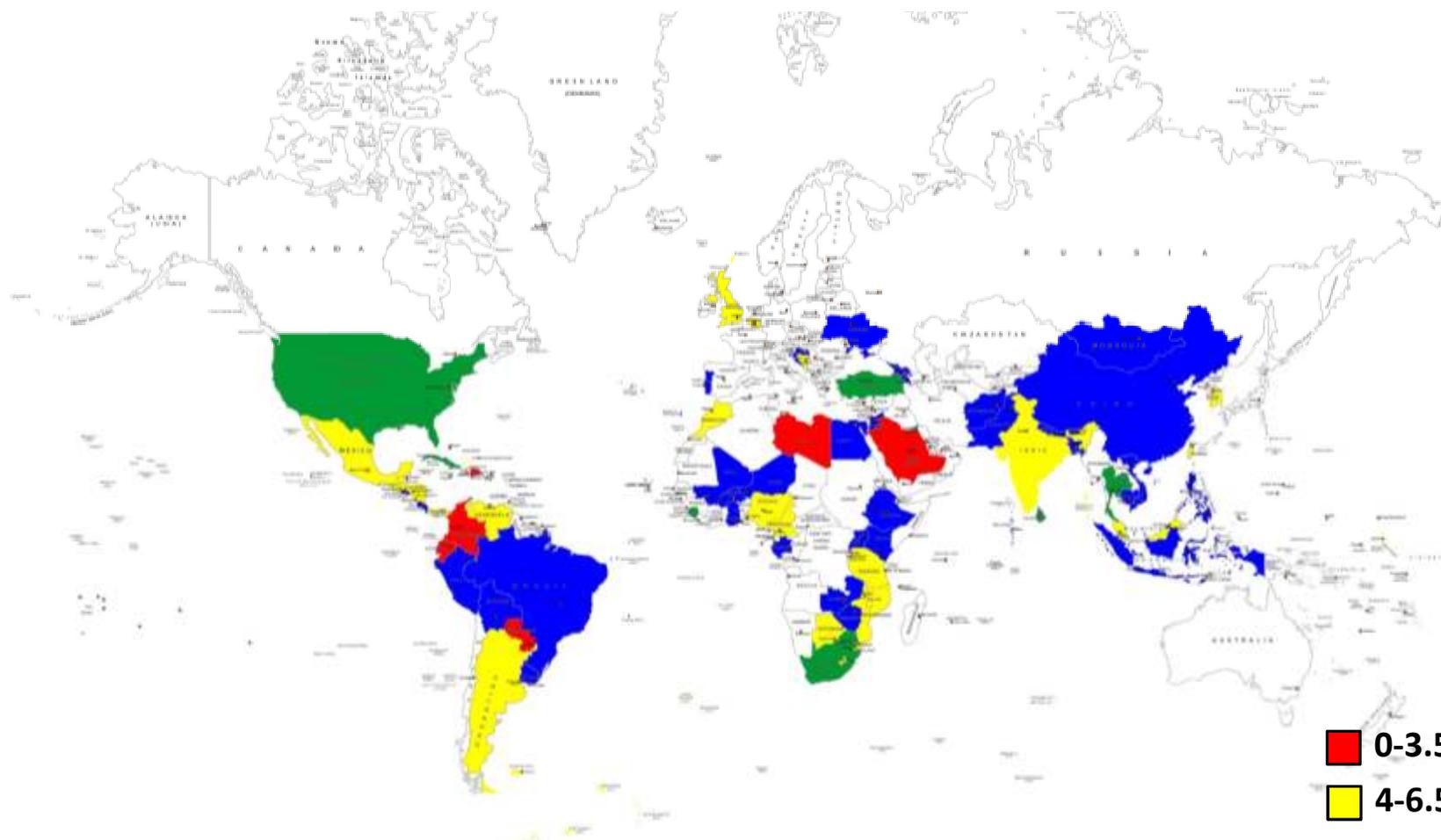
9



The state of mechanisms of monitoring and evaluation system in 84 countries on a scale of 0-10



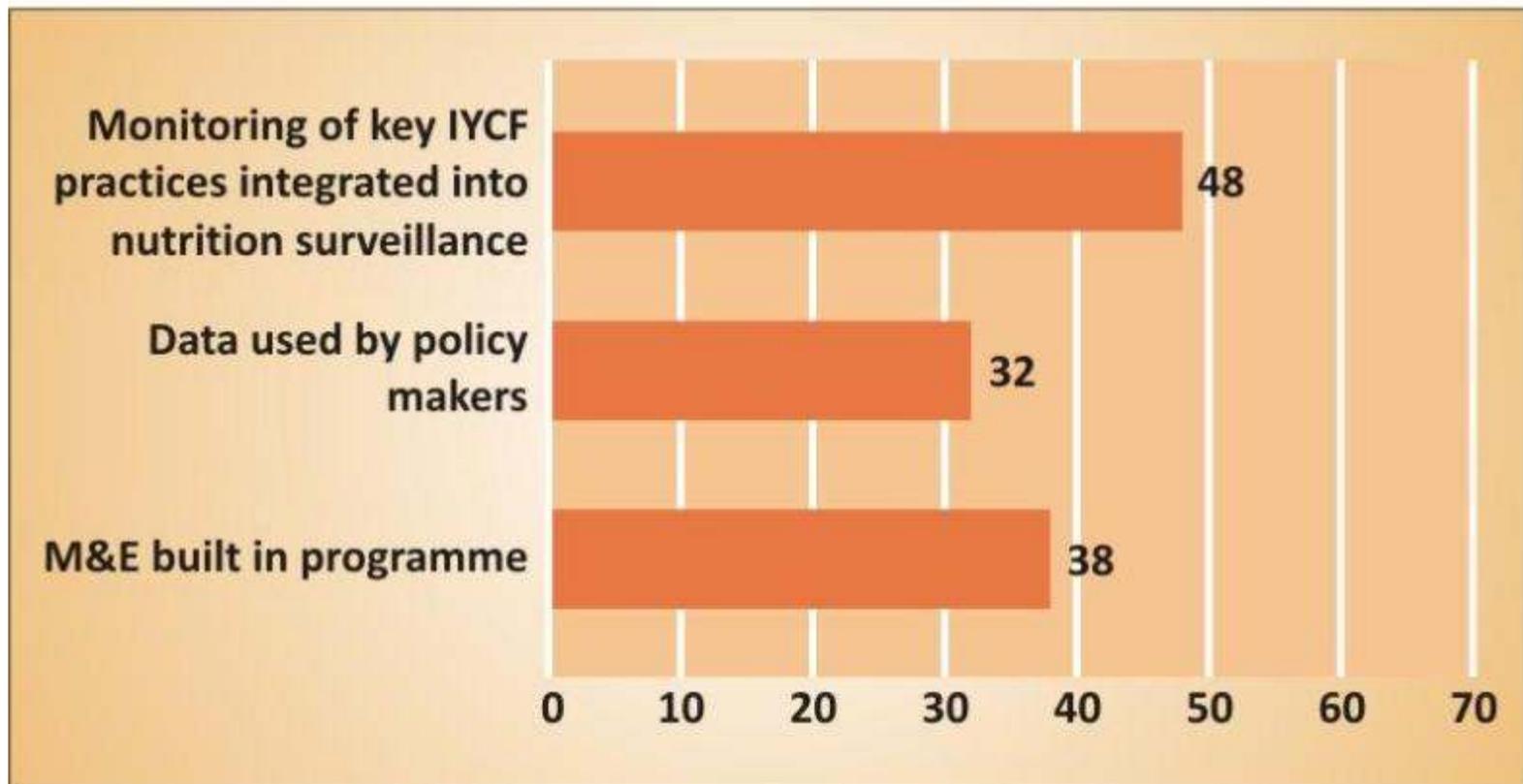
IBFAN
defending breastfeeding



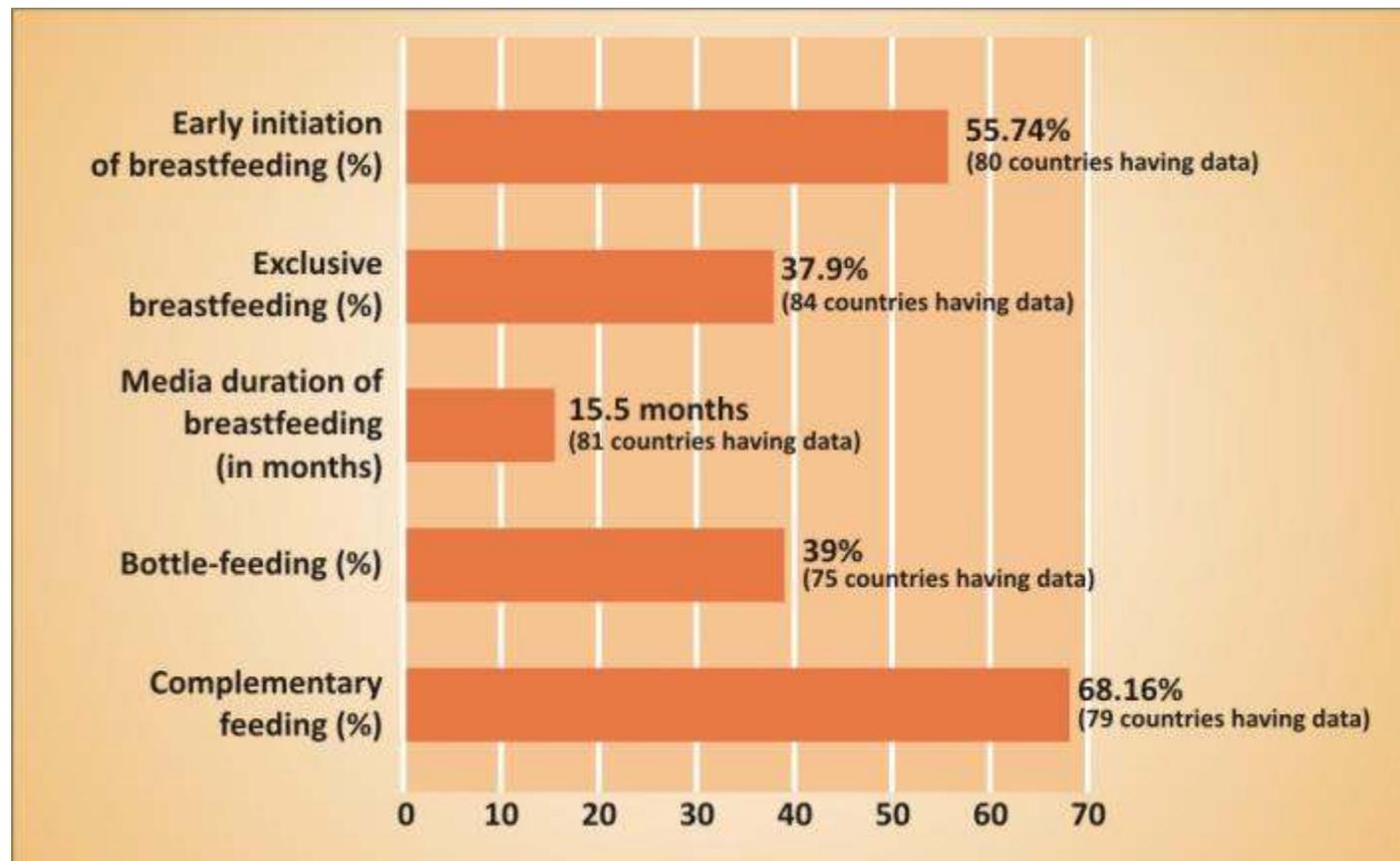
10 countries are in GREEN color code and 7 in RED

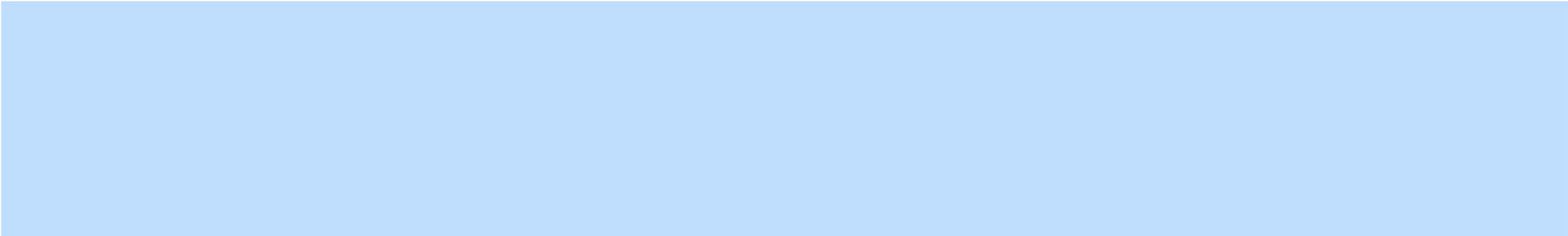


Mechanisms of Monitoring and Evaluation: Ind No 10



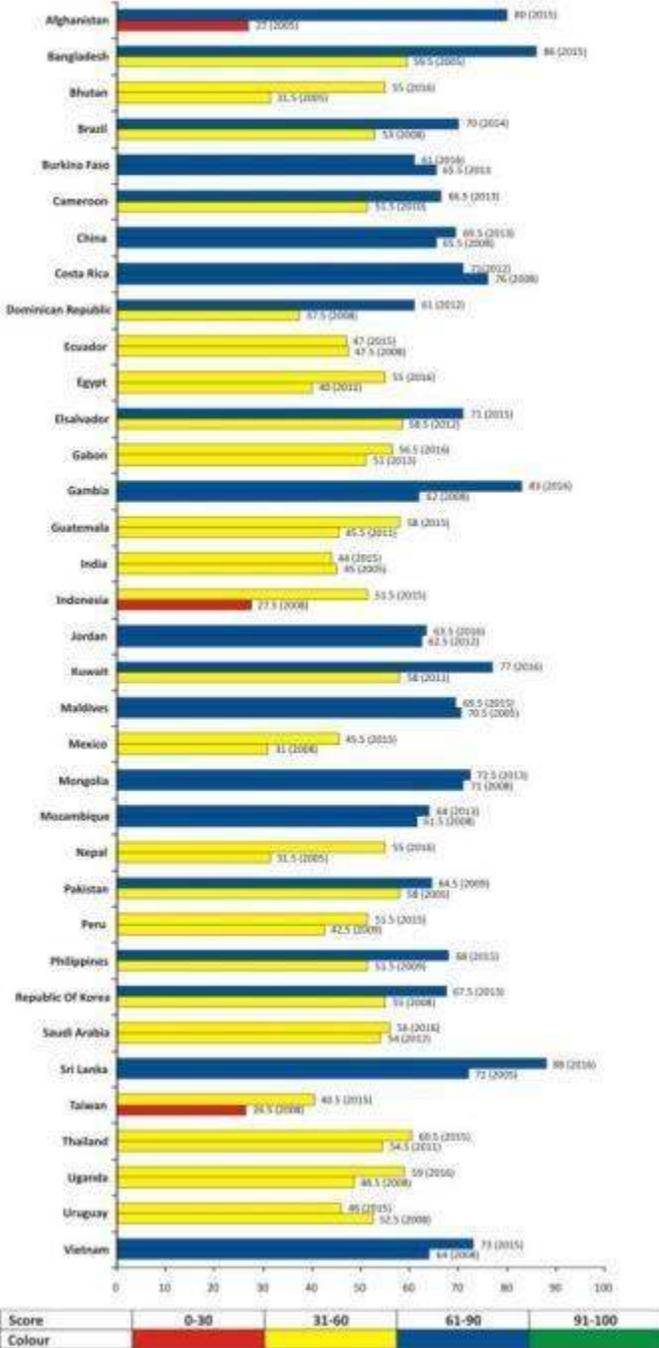
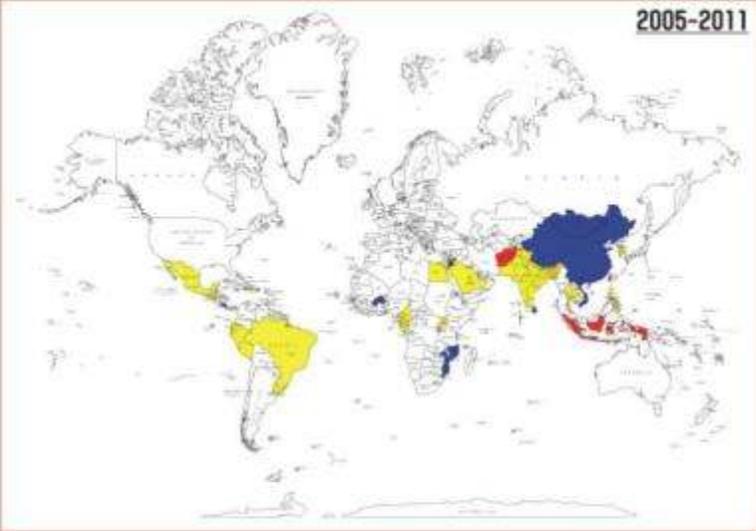
IYCF Practice Indicators 11-15





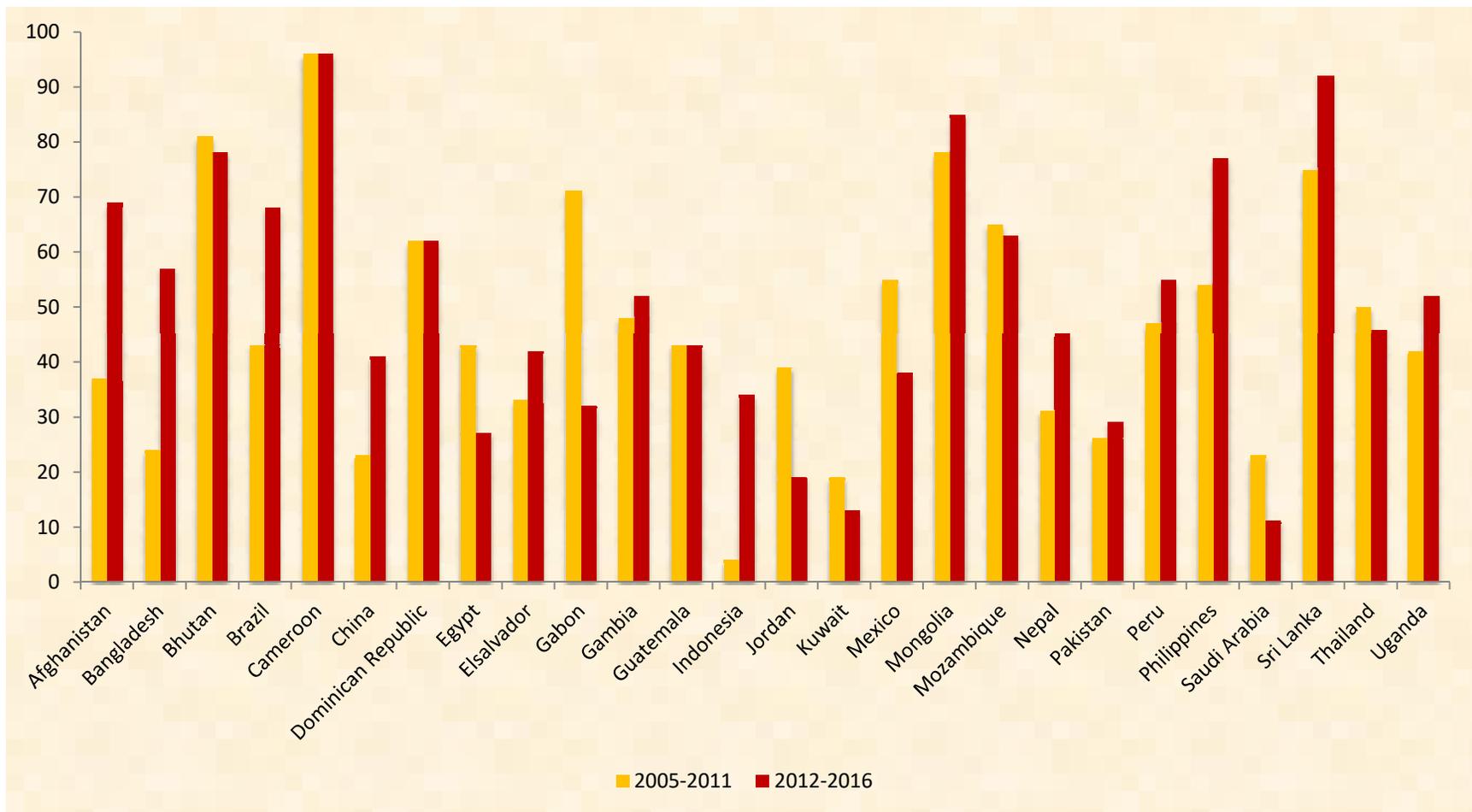
IMPACT/TRENDS

Policy Trends in 35 Countries

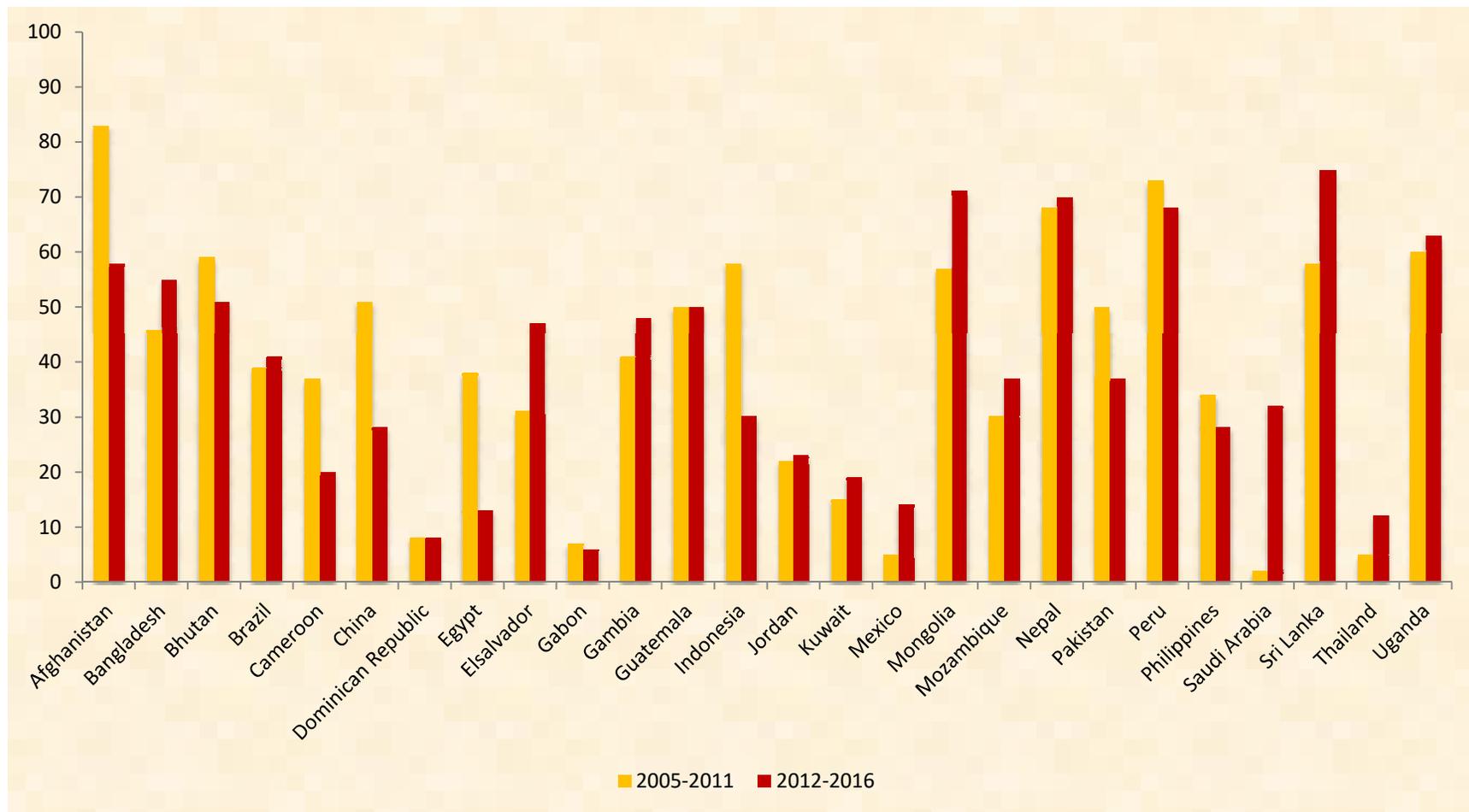


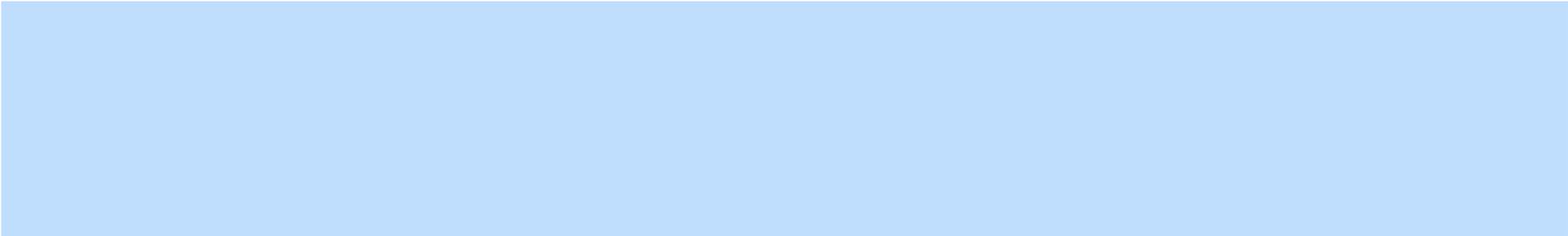
Score	0-30	31-60	61-90	91-100
Colour	Red	Yellow	Blue	Green

Trends of initiation of breastfeeding from 26 countries (%)

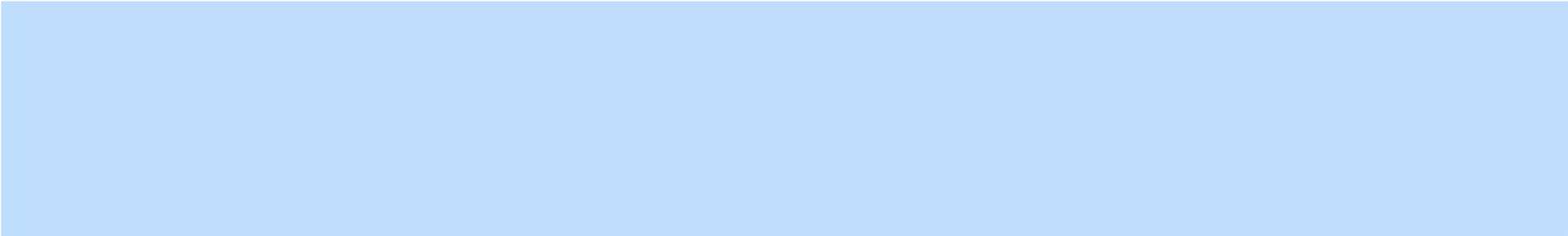


Trends of exclusive breastfeeding for the first six months from 26 countries (%)





OPINION/CASE STUDIES



WAY FORWARD

- **National level Action :**
 - Have BF/IYCF Plan of action, monitored and budgeted activity for next 10 years.
 - Conduct regular assessment of policy and programmes every 3-5 years, and take action to bridge the gaps in specific indicators.
- **Donors and Development Partners:**
 - Invest in BF/IYCF in countries and prioritize on indicators that need most.

**Global : World Health Assembly:
Should adopt a Resolution to budget BF/IYCF interventions,
have a plan and report on progress every 2 years.**



Copy of the report is available on our website
<http://worldbreastfeedingtrends.org/>

Write to us at info@ibfanasia.org to request for
the printed version

Thank You and support our campaign!



GlobalGiving

GIVE JOIN ABOUT

A screenshot of a project page on the GlobalGiving website. The page is divided into two main sections by a diagonal line. The top section is a navigation menu with links for 'Reports (3)', 'New Report', 'Donations (39)', 'Disbursements', and 'Advanced'. The bottom section displays the project title 'Breastfeeding Counselors in India' and the description 'Help Create 2000 Breastfeeding Counselors in India by Breastfeeding Promotion Network of India (BPNI)'. The project is categorized under 'HEALTH' and 'INDIA' and is identified as 'PROJECT #22596'. A 'VETTED' badge is visible next to the project name. The text 'PE' and 'Edit Project' are also visible in the top right corner of the screenshot.

PROJECT #22596

Help Create 2000 Breastfeeding Counselors in India by [Breastfeeding Promotion Network of India \(BPNI\)](#)