



# **BREASTFEEDING TRENDS INITIATIVE OF NORTHERN STATE OF INDIA**

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## INDICATORS-PART 1-POLICY & PROGRAMME

INDICATORS	DELHI	PUNJAB	MADHYA PRADESH
1.POLICY	4	6	9
2.IMS ACT	9	0	NS
3.MATERNITY BENEFITS	4.5	4	0
4.BFHI	2.5	1.5	6
5.H & N CARE	6	3	0
6.MONITORING & EVALUATION	6	0	4
7.COMMUNITY INITIATIVE	6.5	5	5
8.IYCF DURING SPECIAL SITUATIONS	7	5	5



## INDICATORS PART II- IYCF PRACTICES

INDICATOR	Delhi	Punjab	Madhya Pradesh
11. Initiation of Breastfeeding	6 (40.5 )	2.5	6
12. Exclusive Breastfeeding for 6 months	6 (46.8)	5	6
13. Median Duration of Breastfeeding	10 (24.4 months )		10
14. Bottle Feeding (< 6 )months	6 (12.5 )		6
15. Complementary Feeding	3 (57.1)	2.5	3
TOTAL			31/50

Indicators	Delhi	Punjab	Madhya Pradesh
1.Policy	4	6	9

## 1.STATE POLICY

### PROGRAMME & COORDINATORS

There is a State IYCF guidelines

**But !!!!!**

### **GAPS-**

- **No Definite breastfeeding or IYCF Policy & committee in the State**  
**(Hence no meeting and coordination can be seen)**



Indicator	Delhi	Punjab	M..P
2.IMS Act	9	0	Not sure

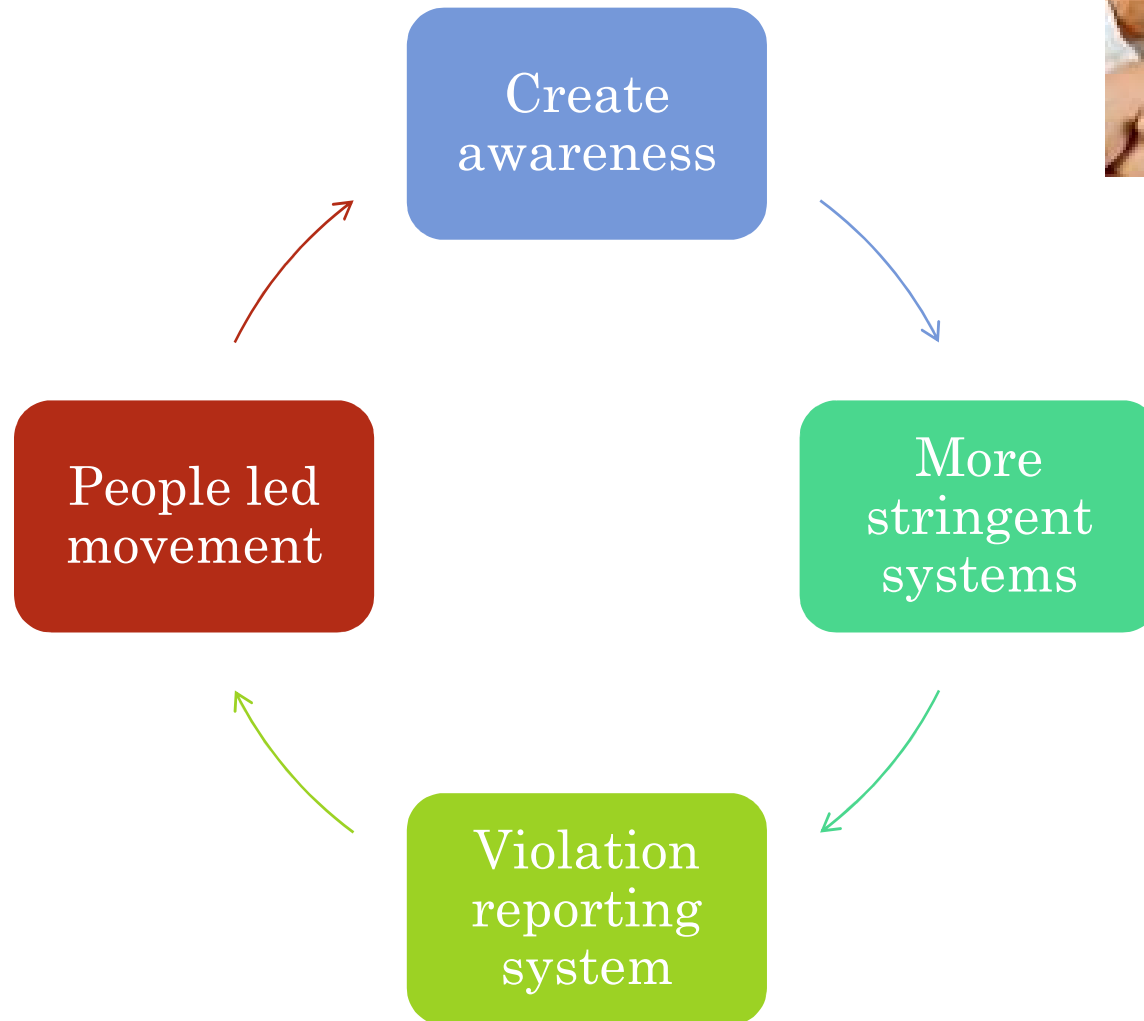
## 2.IMS ACT

### GAPS-

- Awareness in very low
- Act is not a part of the health Curriculum .



# STRENGTHENING OF IMS ACT



### 3.MATERNITY BENEFITS

4.5

4

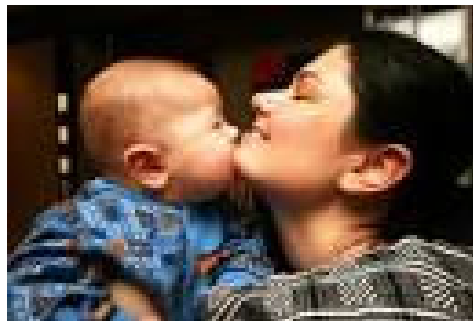
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## 3.MATERNITY BENEFITS

### FOR PROTECTING & SUPPORTING BREASTFEEDING

#### GAPS

- There is Great disparity between the states as well as for Government and private sector for Maternity benefits (as Maternity leave given to center Govt employees only)
- No Infrastructure in place to promote breast feeding like Feeding areas & Crèche at work place.



4.BFHI

2.5

1.5

6

## 4. BABY FRIENDLY HOSPITAL INITIATIVE

### GAPS-

- No action taken to revive and revitalize BFHI initiative .



**5. Health &  
Nutrition care**

**6**

**3**

**0**

## 5. HEALTH & NUTRITION CARE SUPPORT

### GAPS-

- No Standardization and universalization of Skill training on IYCF (in Schools, Pre service & In-service education program).
- In almost all the states there is a need for a trained skill workers ( doctors, nurses, paramedics, dieticians ...)



**6. Monitoring & evaluation**

**6**

**0**

**4**

## 6. MONITORING & EVALUATION

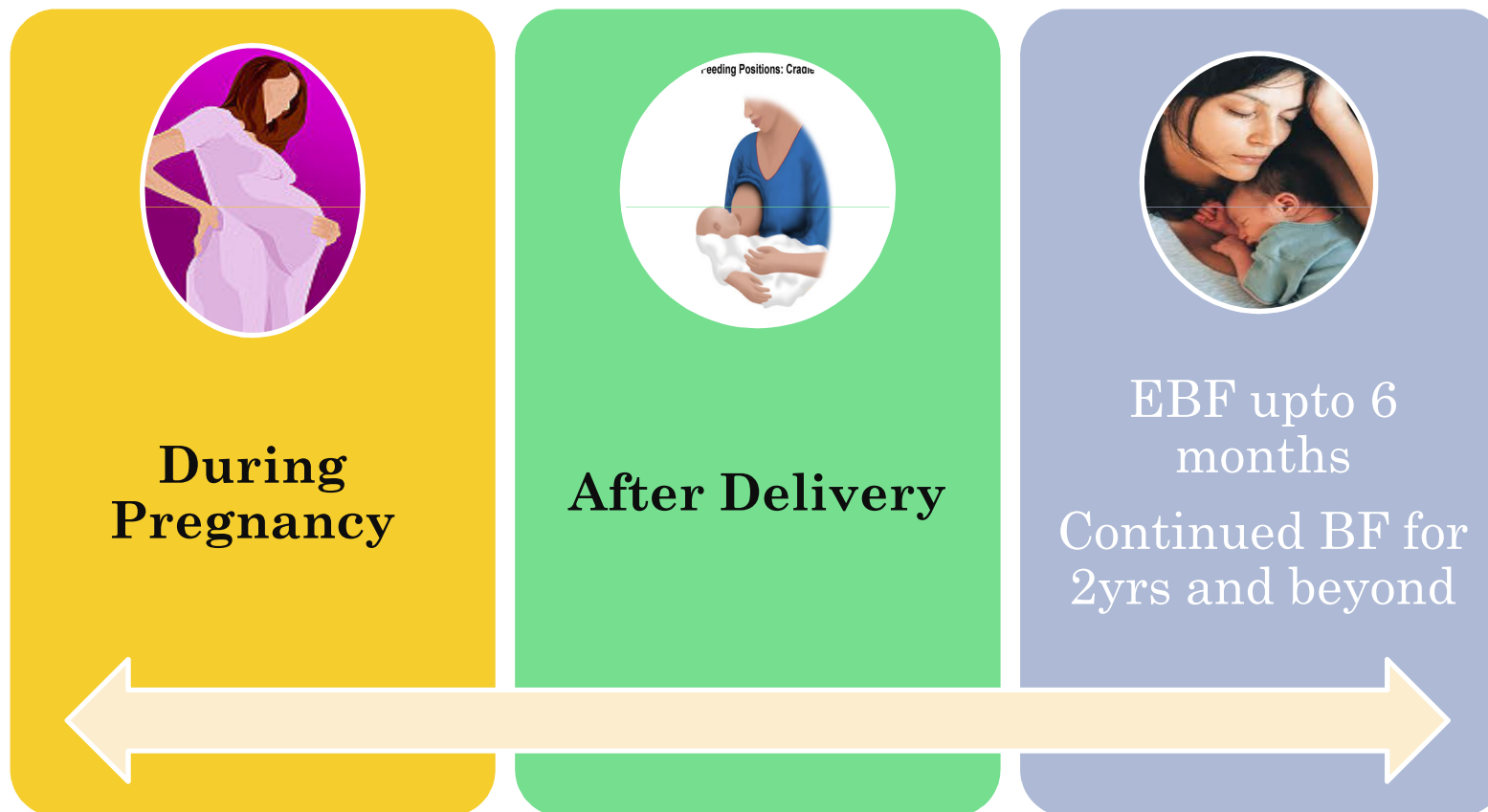
### Gaps-

- Huge gap between national surveys & There is no rapid surveys done.
- All IYCF indicators not included for Monitoring & evaluation .



## 7.COMMUNITY INITIATIVES & SUPPORT FOR B F -

NO LINKING SYSTEM BETWEEN HOSPITAL & COMMUNITY ---&  
TRAINED STAFF FOR COUNCELLING



**7.IYCF in  
special  
situations**

**7**

**5**

**5**

## **8.INFANT FEEDING DURING (SPECIAL SITUATIONS) DISASTERS & HIV**

### **GAPS-**

- IYCF not added as a part of Disaster Management Module
- Inadequate training of ICTC counselor



## GROUP RECOMMENDATIONS

- Formulation of Uniform state policy along with appropriate budget for all sectors ( Organized, Unorganized and Private ) with regular meetings of committee to assess gaps in IYCF.
- Strict Implementation of IMS Act has to be ensured with regular Monitoring & Reporting system in place.
- Universal maternity, paternity and breastfeeding protection law that should be applicable for all sectors and states. (Including minimum maternity leave for 180 days and paternity for 15 days).
- Standardization of module and universalization of training on IYCF .



- Monitoring & Evaluation of IYCF Indicators should be streamlined and strengthened.
- Enforcement, enactment and revitalization of the BFHI – this would include certification, recertification and monitoring of BFHI.
- IYCF to be added as a part of Disaster Management Module



## GROUP DECLARATION

- Formulation of State Level IYCF Policy is mandatory



THANK YOU

