Breastfeeding Promotion Network of India (BPNI)

BPNI BULLETIN



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From the Desk of the National Coordinator

No Child's Play: Malnutrition Needs Tackling in its Infancy

Eight of the world's distinguished economists, three of them Nobel laureates, gathered in Copenhagen six months ago to address a question: What issues would one prioritise to advance the welfare of developing countries, if one were to assume that an additional \$50 billion is at the disposal of their governments? They examined 30 proposals, accepted 17, ranked them in descending order of desirability and the 'Copenhagen Consensus 2004' emerged. HIV/AIDS received first priority and policies to attack hunger and malnutrition followed close behind. Additional spending on infant and child nutrition was one of these proposals. How do we deal with the huge problem of child health and nutrition in India?

India's response to the issue takes the form of the Integrated Child Development Services (ICDS) programme. Over the years, child malnutrition, which contributes to more than 60 per cent of the 2.4 million under-five child deaths annually, has been treated from the standpoint of treatment rather than prevention. Early solutions are needed, as malnutrition sets in during first two years and is virtually irreversible after that. According to the WHO and the Tenth Five-year Plan, child malnutrition is related to inappropriate infant feeding practices. However, efforts to deal with it only focus on supplementary food, which goes more often to older children. Data on the effect of food supply on child undernutrition, or the health and nutritional status of other family members, is non-existent.

Several studies have reported that infant feeding practices are very poor in India. Exclusive breastfeeding for the first six months is practised in about 40 per cent of the infants and appropriate complementary feeding after six months in about 33 per cent. It is not always understood that at this age children are dependant on care-givers, whose knowledge about infant and young child nutrition is poor. Adults succumb to commercial pressures, buying baby foods which only perpetuate poverty. Optimal feeding norms do not set in with food or money distribution, as the government might like to believe.

Some months ago, reports of malnutrition deaths from Maharashtra caught the attention of the media, even as more than 6,500 children under the age of five die in India everyday. Two-thirds of these deaths occur during the first year. Have we ever looked at the survivors numbering about 75 million below the age of three, of whom 36 million are underweight and destined not to reach their full development potential? We need to invest in their quality of life before their condition becomes irreversible.

Sadly, our policy-makers, planners, and programme managers seek solutions where none exist. It is "hunger" which gets treated with supplementary nutrition. The ICDS does not focus on preventing hunger. As the development of the brain occurs almost entirely in the first three years, it is intervention at this age rather than younger children as a whole that is crucial. Ensuring optimal infant and young child feeding is the best way out; it provides food, health and care all at once.

The ICDS reaches only a quarter of the child population, and current plans to universalise it are underway.

It would be disastrous if we cannot ensure quality of service delivery to prevent child malnutrition and reduce mortality. The bundle of services that the ICDS provides includes growth monitoring of children and education of families. But in actual fact this hardly happens. The anganwadi worker, the person who bears ICDS on her shoulders, has hardly any skills and sufficient knowledge to do so. Preoccupied with so many other tasks, we cannot expect wonders from her. The key to quality is to build capacity for delivery of family-based interventions with community involvement.

The Pradhan Mantri Gramodyog Yojna is meant to focus on nutrition of the under-three, but 'food' supplementation remains its mainstay. The reproductive and child health programme managed by the Centre suffers from similar

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Editorial

WBW celebration and Strengthening of District Branches



Hello BPNI members,

World Breastfeeding Week celebration has been the greatest social mobilization for breastfeeding movement which is owned by almost all social and professional organizations and groups. Keeping the tradition intact, this year also the week celebrations has been very well planned, executed and reported. Extensive countrywide action during world breastfeeding week took place. BPNI also hosts the `Award' for WBW. For this purpose, BPNI headquarters received 26 reports from districts, 11 reports from states and 26 reports from NGOs and Government. In addition 205 Inner Wheel Clubs participated in a big way. I am happy to say that

66 district BPNI branches are already existing. Twenty district study coordinators have been able to organize district level consultative meetings to mobilize several partners. At this event, they released district specific study of "Status of Infant and Young Child Feeding". Activities during the WBW celebration may form a platform for perennial activities to promote breastfeeding. Ultimate goal is to ensure BPNI's presence at district level. The task needs devotion, commitment and the art of advocacy. We have to pick up right piece of information and be short in presentation while convincing a politician, administrator or a public figure about infant and young child feeding. We need to be consistent in our approach.

I hope one day will ensure our vision of 200 district branch by 2007.

Dr. Tarsem JindalEditor, BPNI Bulletin
Finance Coordinator, BPNI

problems. Child care and nutrition, the critical elements, are missing from these programmes. Preventing malnutrition with focus on under-three cannot be expected from unsupportive healthcare systems and inadequately skilled workers.

Programmes dealing with child health and development lack coordination, have a fragmented approach and are grossly under-budgeted. The child under the age six gets eight times less than the child over six, which makes it practically impossible to achieve the desired outcomes on child survival and development. The child under three does not get her due share from these resources.

The solution lies in improving infant and young child feeding practices through countrywide breastfeeding support centres in all public and private sector facilities, managed by a skilled counsellor. The budget for under-six children should substantially increase from the present level of Rs 3,000 crore. The share of the under-three facing sheer neglect needs to be defined. Instead of investment commissions to promote foreign inflows, we should be looking at investing in the child. Spending to prepare children for a better life is an imperative for a healthy economy and society. Interventions for the development of infants and young children — those who will vote, work, lead and sustain the country — are urgently needed, and they come at a price.

Dr. Arun Gupta, MD, FIAP National Coordinator, BPNI Regional Coordinator, IBFAN Asia Pacific

(This article is published on 31 December 2004 in Times of India, Delhi)



World Breastfeeding Week

Theme: Exclusive Breastfeeding: the Gold Standard - Safe, Sound, Sustainable_

World Breastfeeding Week is celebrated each year from August 1 to 7. This year's theme, as announced by the World Alliance for Breastfeeding Action (WABA) was *Exclusive Breastfeeding: the Gold Standard: Safe, Sound, Sustainable.*

In India the event is coordinated by the Breastfeeding Promotion Network of India (BPNI). World Breastfeeding Week (WBW) is celebrated with the objective to increase social mobilization for optimal feeding practices and generate awareness about the importance and beneficial effects of breastfeeding among general masses. BPNI is a coalition of members, an umbrella organisation in which State branches, District branches, State and District Coordinators and its members participate fully. With 2697 members BPNI reaches every nook and corner of India. WBW is certainly one of the most visible strategies to achieve the goals of the Tenth Five Year Plan for Infant Feeding Practices, with more and more groups getting involved in its activities. BPNI National Secretariat produced various materials including the theme brochure and sent it to all concerned.

With BPNI members and its branches, thousands of Rotary Clubs, Inner Wheel Clubs, Lions



Club, professional bodies, and other NGOs, BPNI played a key role to fulfill the activities on World Breastfeeding Week. BPNI supplied action materials, sample letters to various levels, sample press release etc. to all including governments, department of women and child development, ICDS centres, nutrition centres, hospitals, rotary and inner wheel clubs, and other NGOs who are interested in this issue. The action reports received gives BPNI a sense of pride.

Awards

To encourage action, BPNI instituted an award for World Breastfeeding Week. The selection was for the best two State branches and best five District branches, and best three collaborative NGOs.

An independent evaluation committee was constituted consisting of Dr. Tarsem Jindal, Dr. JP Dadhich and Dr Kuldip Khanna in Delhi which undertook the difficult task of evaluation and awarding the following most deserving based on the reports received by BPNI.

The award winners are:

State Branch:

- 1. BPNI Kerala
- 2. BPNI Karnataka

District Branch:

- 1. BPNI Wardha branch, Maharashtra
- 2. BPNI Amravati, Maharashtra
- 3. BPNI Akola, Maharashtra
- 4. BPNI Davangere, Karnataka
- 5. BPNI Ranchi, Jharkhand

NGOs & Collaborators

- 1. Nutrition Cell, Gangtok, Sikkim
- 2. Lactation Helpline, Bangalore, Karnataka
- 3. Catholic Relief Services AP

Hearty Congratulations to you all!

List of WBW Reports

Name	Place	State	Category	
Dr. K Kesavulu	Hindupur	A.P.	State Branch	
Dr. Mohinder Singh	Patiala	Punjab	State Branch	
Dr. R Satpathy	Sundergarh	Orissa	State Branch	
Dr. C R Banapurmath	Davangere	Karnataka	State Branch	
Dr. Kurian Thomas	Kottayam	Kerala	State Branch	
Dr. V Narayana Rao	Visakhapatnam	A.P.	State Branch	
Dr. Sunita Katyayan	Ranchi	Jharkhand	State Branch	
Dr.CB Dass Gupta	Kota	Rajasthan	State Branch	
President	Mumbai	Maharashtra	State Branch	
Dr. Shyam Kr Laishram	Imphal	Manipur	State Branch	
Dr. Komala V Maregudd	Chitradurga	Karnataka	District Branch	
Dr. V K Ahuja	Sangrur	Punjab	District Branch	
Dr. Rishi Garg	Sonepat	Haryana T.N.	District Branch District Branch	
Dr. R Arulmozhi Dr. B B Gupta	Neyveli Gorakhpur	1.N. U.P.	District Branch	
Dr. H V Kotturesha	Shimoga	Karnataka	District Branch	
Dr. Sanjio B Borade	Amravati	Maharashtra	District Branch	
Dr. Pradeep Kumar Kar	Sundergarh	Orissa	District Branch	
Dr. Geethalakshmi RG	Davangere	Karnataka	District Branch	
Dr. R M Bellad	Davangere	Karnataka	District Branch	
Dr. Sanjeev S Managoli	Chitradurga	Karnataka	District Branch	
Dr. K Janardhan	Cuddalore	TN	District Branch	
Dr. Mallikarjuna H B	Bangalore	Karnataka	District Branch	
Dr. Ajay Gaur	Gwalior	M.P.	District Branch	
Dr. Leen Agashe	Akola	Maharashtra	District Branch	
Dr. Jayant Vagha	Wardha	Maharashtra	District Branch	
Dr. Lakhan Poswal	Udaipur	Rajasthan	District Branch	
Dr. K V Raghunath	Kurnool	A.P.	District Branch	
Dr.G Sambasivam	Kumbakonam	T.N.	District Branch	
Mr.Sunil Kumar Sah	Rohtak	Haryana	District Branch	
Dr. Dinesh Khosla	Rohtak	Haryana	District Branch	
Dr. Asha Benakappa	Bangalore	Karnataka	District Branch	
Dr. Shyamal Gupta	Kolkata	West Bengal	District Branch	
Dr. Pradeep Kumar Kar	Sundergarh	Orissa	District Branch	
Dr. Anurag Singh Dr. Rajinder Gulati	Johdpur Ludhiana	Rajasthan	District Branch District Branch	
Dr. Neerja Pauranik	Indore	Punjab M.P.	NGO	
Dr. Rajat Gupta	Kashipur	Uttaranchal	NGO	
Dr. S N Bansal	Roorkee	U.P.	NGO	
Mrs. Sriranjini Dattatri	Shimoga	Karnataka	NGO	
Mr. Dipen Boruah	Ulubari	Guwahati	NGO	
Ms. Nalini Rammurthy	Jamshedpur	Jharkhand	NGO	
Ms. Bharati Prakash	Sullia	Karnataka	NGO	
Ms. Rekha S Tapadiya	Bangalore	Karnataka	NGO	
Mrs. Shashi Gupta	New Delhi	New Delhi	NGO	
Ms. Aruna Jain	Civil Lines	Delhi	NGO	
Ms. Indra Malhotra	Kailash Colony Extension	New Delhi	NGO	
Mrs. Kala Dewan	New Delhi	New Delhi	NGO	
Ms. Priya Gupta	Ghaziabad	U.P.	NGO	
Mrs. Rita Miglani	Sonepat	Haryana	NGO	
Prof. Azra J Ahmad	Aligarh	U.P.	NGO	
Mrs. Shoola Chandrashakar	New Delhi	New Delhi	NGO NGO	
Mrs. Sheela Chandrashekar Mrs. Anju Gupta	Shimoga	Karnataka U.P.	NGO NGO	
Dr. A Sengupta	Aligarh New Delhi	0.P. New Delhi	NGO NGO	
Dr. A Sengupta Dr. A Selvarajan	Virdhunagar District	T.N.	NGO	
K Aravinda Devi	Hyderabad	A.P.	NGO	
Dr.Asha Benakappa	Bangalore	Karnataka	NGO	
Dr. Pramila Sanjaya	Bani Park, Jaipur	Rajasthan	NGO	
Dr. Samadrita Mukherjee(Sardar)		West Bengal	NGO	
Ms. L D Bhutia	Nutrition Cell	Gangtok, Sikkim	NGO & GOVT	
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WBW Celebrations by Inner Wheel clubs-2004

In order to create mass awareness through out India about the importance of IYCF, Rotary Club of Chidambaram and BPNI Delhi are conducting competition for Inner wheel clubs in India since 1998. Resource materials on IYCF and 2004 year theme were sent. Reports on celebration of WBW were solicited from the clubs and a note on how we evaluate their reports was also enclosed to enlighten the clubs.

The Inner Wheel (IW) Clubs were grouped under four zones. Viz. North, South, East, and West. From each zone one club would be selected based on performance and the best club will be given a cash award of Rs. 1000. One cash award of Rs. 1000/- was also announced to the District Chairperson who motivates more clubs and better activities. Dr. Indralekha Muthuswami Inner Wheel District (IWD 298) has kindly accepted to sponsor the awards.

Report:

Two hundred five Inner wheel Clubs from 20 Inner Wheel districts participated in the competition. This year there is slight drop in participation at District level and club level.

The following clubs received the best Club cash award of Rs. 1000 each.

S. No.	Zone	Name of Club.	IWD No.
1	North	Kanpur East	311
2	South	Nammakal	298
3	East	Machilipatnam	302
4	West	Malegaon	303

The best Inner Wheel District cash award is bagged by Mrs.Nandhini Raveendran (IWD 320). Participation certificates were sent to the concerned IWD Chairperson for distribution during an eventful function.

Special recognitions.

The motivational work of Mrs. Sayali Prabhu, Chairperson (IWD 317) is highly commendable. She has motivated 79% of clubs. The Inner Wheel club of Mehasana (IWD 305) is also commendable. BPNI Delhi is pleased to honour the above two with memento and certificates.

The following Dist. Chairperson and Clubs have also done well but missed the awards and we heartily congratulate them.

Dist. Chairpersons. 1. Mrs Raj Ruprah (326) 2. Mrs. Dr. Uma Balaji (302) 3. Praveen Jindal (311)

Clubs. 1. Mandepeta (302) 2. Vijayawada (302) 3. Warda (303) 4. Kota (305) 5. Ambala Cantt. (308) 6. Coimbatore North (320)

Following clubs have used the baby food company materials for publicity and with deep pains we had to disqualify them since they are against BPNI policy.

1. Pondicherry (298) 2. Jalandhar West (307) 3. Sangli MT (317) 4. Cuttack MT (326)

We greet all the participants and wish them Happy New Year.

Rtn. Dr. A. Muthuswami

Activities at Headquarters

Release the second edition of the book "The Law to Protect, Promote and Support Breastfeeding"

On 6th of August, Smt. Kanti Singh, Minister of State for Human Resource Development, launched two important publications "National Guidelines on Infant and Young Child Feeding" and a BPNI's publication "The Law to Protect, Promote and Support Breastfeeding". While releasing these books she said that we have to empower mothers with accurate information on sound infant feeding practices and utilize all available channels of communication to achieve this goal. Smt. Singh highlighted the catalytic role of District Authorities, Medical College and training institutions etc. on this occasion. The minister also called for the active cooperation of various organisations in women and child welfare programmes. Smt. Reva Nayyar, Secretary, Department of Women & Child Development said that breastfeeding is an unequalled way of providing ideal nutrition for the healthy growth and development of the infants. She also underlined the various initiatives taken by the government to promote and protect breastfeeding including enactment of The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992, as amended in 2003 (IMS Act). The book has message by Shri Arjun Singh, Minister of Human Resource Development and preface by Shri. Prasanna Hota, Secretary, Department of Family Welfare.

National Partner's meeting on Breastfeeding

BPNI was a partner with Ministry of Health and Family Welfare to organise a meeting on breastfeeding at India Habitat Centre, New Delhi on 7th August 2004. The presentation by Dr. Arun Gupta, National Coordinator on exclusive breastfeeding for the first six months was appreciated. Dr. NB Kumta from Mumbai, Dr. S Srinivasan from Pondicherry, Khalida Jabeen from J & K, Sukhda Sharma from Himachal Pradesh and Dr. Tarsem Jindal, Dr. J.P. Dadhich and Dr. Jagdish C. Sobti from Delhi participated on behalf of BPNI.

Release of a National Report on "Status of Infant and Young Child Feeding in 49 Districts (98 Blocks) of India 2003."

BPNI released its National Report on "Status of Infant and Young Child Feeding in 49 Districts (98 Blocks) of India 2003" at Hotel Claridges, New Delhi on 1st September. This report based on interviews of about 9000 mothers, reveals a very low rate of starting breastfeeding within one hour and exclusive breastfeeding for the first six months. This study was conducted from two blocks each of 49 districts across 25 states and 3 UTs of India. The report emphasizes that promotion of optimal infant and young child feeding practice, including exclusive breastfeeding for the first six months, continued breastfeeding for two years or beyond along with appropriate and adequate complementary feeding starting after six months, is crucial for the prevention of malnutrition. The report was released by Shri Jairam Ramesh, Member of Parliament and member of the National Advisory Council. He pointed out that malnutrition was high not only in poorer states but also in certain pockets of progressive states. He also said that if we continue in the present way, it will take 40 years to effectively reduce child malnutrition. Thus Infant and Young Child Feeding provides a great window of opportunity towards lowering Infant and Young Child malnutrition. Smt. Reva Nayyar, Secretary Department of Women and Child Development (DWCD), Ms. Erma Manoncourt, Dy Director,



National Partners' Meeting on Breastfeeding in Delhi



Release of a National Report on "Status of Infant and Young Child Feeding in 49 Districts (98 Blocks) of India 2003."

Programs, UNICEF India, WHO, various NGOs and professional bodies participated in the report release function.

National Nutrition Week

State Level workshop on the theme Malnutrition - a silent Emergency was organised by Food and Nutrition Board Delhi during NNW (1-7 September). Dr. Tarsem Jindal was invited as an Expert to speak on "Breaking the intergenerational cycle of malnutrition" on 2nd September 2004.

Meeting of experts on Infant and Young Child Feeding

On 8th November a meeting of experts and the key government departments concerned with infant and young child nutrition was held under the chairpersonship of Smt. Reva Nayyar, Secretary, DWCD in New Delhi. The objective of this meeting was to brainstorm the issue of promoting optimal IYCF practices in the country so that the same could be reflected suitably in the agenda for the first

meeting of the National Nutrition Mission likely to be held shortly under the chairpersonship to Hon'ble Prime Minister.

Workshop on ICDS

On November 29-30 in Mussoorie a workshop was conducted at Center for Rural Studies Mussoorie and Center for Equity Studies on "Universalization with Quality: An Agenda for the ICDS". Dr. Arun Gupta presented "Infant and Young Child Feeding Counselling: Services to sustain" as means to improve quality of ICDS. Participants included representatives of the governments, other agencies involved in ICDS, researchers and key persons from National Advisory Council. The idea has been well received and understood. Outputs of the workshop will be sent as a report to the National Advisory Council of Government of India.

BPNI Managing Committee meeting

A meeting of managing committee of BPNI conducted in BPNI headquarters Delhi, on 2nd

(Contd....10)

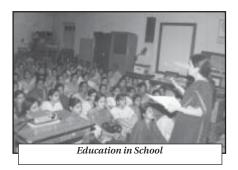
Inner Wheel Club Ambala

Mrs. Rema Radhakrishnan, discussing the IMS Act in Tamil Nadu









World Brea Week



Dr. N.B. Kumta, Chief coordinator of E Maha



astfeeding 2004



PNI inaugurates the WBW in Mumbai, rashtra















December. National Coordinator presented its activities and the committee discussed its future plans in detail.

National Coordination Committee of JSA

BPNI is a part of National Coordination Committee of Jan Swasthya Abhiyan (People's Health Movement - India) on 18th December 2004. This meeting was to find out the feedback on functioning of National Secretariat and Regional Convenors. Discussion also took place on Jan Swasthya Abhiyan (JSA's) involvement in international initiatives.

National Sharing Workshop for District Coordinator of BPNI

To address the issue on Infant and Young Child Feeding, BPNI implemented a 3 year project "Protection of Breastfeeding in India" supported by the Government of Luxembourg and UNICEF NATCOM Luxembourg. A sharing meeting of the constraints and experience of the study was conducted on 3-4 December 2004 at Delhi. The aim of the project was to kick start action on IYCF at District level and BPNI organised a three-day capacity building workshop for the district coordinators on 5-7 July 2002. These district level persons were to conduct study on IYCF in their district. It is believed that such an exercise would initiate a process that would arise from the grass root level according to the needs of the community and will generate more action. Any intervention thereafter would be more prudent and effective to improve infant feeding practices at district level. The



Group Discussion in National Sharing Workshop at Delhi

study was then conducted in three phases in 98 blocks of 49 districts in 25 states and 3 UTs of India.

During phase-I, quantitative data was collected from 98 blocks in 49 districts by interviewing mothers and families of infants 0-9 months old.

During phase-II, in the same blocks, qualitative data was collected through in-depth interviews of mothers, mother-in-law, health workers and others.

During phase-III, data was collected on the systematic monitoring of the compliance with the Infant Milk Substitutes (Regulation of Production, Supply and Distribution) Act 1992 (The IMS Act).

Outcomes of the study -

Two major outcomes have emerged from this study

- 1. The project led to district specific reports on IYCF of these 36 districts with three elements (monitoring of IMS Act, qualitative and quantitative), 39 districts with qualitative and quantitative and 49 districts with quantitative study. It has quantitative and qualitative data on IYCF as well as investigation on the implementation of the IMS Act. The study clearly shows that the infant feeding practices remain quite inappropriate and are still influenced by old traditions and beliefs, incidence of exclusive breastfeeding is low and the practice of giving prelacteal feed is also universal. Commercial promotion by companies is still on.
- 2. After the study many districts have organized a district level sensitization /mobilization meetings on "Status of Infant and Young Child Feeding A Way Forward" with several partners in the month of November.



Study Coordinators in National Sharing Workshop at Delhi

A two day programme conducted in Delhi with the above background. Twenty study coordinators participated in the programme. The introductory session started with a warm welcome by the Chief Coordinator of BPNI, Dr. NB Kumta. Dr. Tarsem Jindal briefed the aims and objectives of the workshop and Dr. Arun Gupta, National Coordinator of BPNI made a presentation on IYCF. Dr. Raj Anand in his address emphasized to make use of government's positive attitude. His vision includes increase membership of BPNI, make use of BPNI's training on IYCF, make efforts for unity at any cost and the expansion of district branches of BPNI. Group discussions were conducted and a recommended action plan was compiled on the second day.

Pediatrics AIDS - perspectives and strategies

A conference was conducted by Indian Academy of Pediatrics, Noida, on Pediatric AIDS - Perspectives and Strategies on 5th December and National Coordinator of BPNI participated as a chairperson in the breastfeeding in HIV infection session.

Public hearing on "Right to Health Care"

Part of an ongoing series of regional public hearing on "Rights to Health Care" organised by National Human Rights Commission in collaboration with the Jan Swasthya Abhiyan on 16 and 17 December in Delhi and National Coordinator of BPNI was one of the invitee. Programme inaugurated by the Hon'ble Health Minister. Brief reports by state health officials on action taken and action plan to protect and establish health rights were presented. Different sessions were conducted on women's right to health care, children's right to health care, health rights in situations of conflict and displacement, mental health rights, right to essential drugs etc.

Training on Breastfeeding, Complementary feeding and HIV & Infant Feeding

During this period BPNI in collaboration with UNICEF and CARE conducted various training courses and produced good number of trainers in various states. In Bhopal, from 23-29 August 2004, State Level Trainers Development Course on Infant and Young Child Feeding conducted in Bhopal, from 23-29 August 2004. This was organised at RCVP Narohna Academy of Administration by BPNI, UNICEF and Government of Madhya Pradesh. This purpose of the training was to initiate the process of establishment of core trainers as counselors on breastfeeding and complementary feeding practices in the state. This was conducted for 7 days with aim

A programme telecasted by SAB TV on 5th January 2004 on breastfeeding and BPNI was asked to be in the panel. The questions raised by the general public who were the part of this programme was very useful. We are including these questions for the use of our readers.

Question Raised During Programme "Kuch Dill Se" on SABTV

1. Do companies list all the ingredients well on the label?

Ans. Yes they are reasonably well illustrated. But the contents of the tinned milk are better on the basis of theory, as there is a possibility of the contents being harmful also. If the milk is high in sodium, later on in life it can cause the problem of high blood pressure.

- 2. Are there any test done on these tinned milk? Has any Governmental agency ever done the testing? Ans. No, I don't think so. Anyone of us has not come to a situation like that.
- 3. But don't you think there is a need to regularly test all the infant milk substitutes and infant foods available in the market?

Ans. Yes, definitely

4. If the mother is not able to consume nourishing foods for any reason, so in that case also will breastfeeding remain beneficial?

Ans. Yes, a mother may be in any condition, her feed is enough for the baby for the first six months and she should feed the baby with her own milk. The production of mother's milk remains same even if mother is slim or fat, or if the mother's breasts are big or small. The milk is produced in quantities, which the baby demands.

to be contd. in the next Bulletin No. 27...



State level training in Madhya Pradesh

to provide resource person as key trainers for their own state. Training course was inaugurated by Shri. O.P. Rawat, Principal Secretary to Hon'ble Chief Minister of Madhya Pradesh. The program was presided over by Shri Manoj Jhalani, Commissioner Health. Shri Tapas Dutta from UNICEF was guest of honour. Dr. S.S. Bhambal, Chairperson BPNI M.P. was local organizer for the course. Dr. M.M.A. Faridi, Dr. Anita Gupta, Dr. Ramneek Sharma and Dr. S.S. Bhambal were trainers for the course. A total number of 20 participants benefited this course which includes pediatricians, gynecologists, medical college faculty, nutritionist, district public health nurse officer, home science teachers, ICDS functionaries, and representatives of local NGOs.

In Rajasthan 9-14 October 2004 an integrated course on breastfeeding, complementary feeding and HIV & Infant feeding counseling at hotel Jaipur Palace conducted a trainers course for 15 participants from Bihar and Rajasthan.

As a follow up of this trainers course, in Gaya (Bihar) a training course conducted from 10-16 December 2004. 24 trainers of frontline workers of RCH-ICDS who are existing instructors and trainers of ANMs/AWW centres were trained for seven day by 7 Bihar State trainers under supervision of BPNI Course Directors.



 $Training \, in \, Jaipur$

Congratulations

Dr.Tarsem Jindal Senior Consultant and Chairman,
Dept of Pediatrics, Jaipur Golden Hospital, Delhi has
been elected a Fellow of Indian Academy of
Pediatrics in recognition of outstanding contribution
to pediatrics. This award was bestowed upon him at
the Annual National Conference of IAP by the
President of the academy at Kolkata on 6th January
2005.



Growth of exclusively breastfed term IUGR infants upto six months of age and nutritional composition of breastmilk

Anuradha Mangla, MMA Faridi, DK Shrivastava

This prospective study was carried out in the Division of Neonatology, UCMS & GTB Hospital in order to explore the adequacy of breastmilk for ideal nutrition and growth of a term IUGR baby.

Materials and methods: A total of 377 exclusively breastfed term IUGR infants were recruited to study the growth pattern for first 6 months of life. Babies were followed up at 2 weeks, 6 weeks, 10 weeks, 14 weeks and 6 months and velocity of gain in weight, length, head and chest circumference was calculated. Moreover the protein, fat, carbohydrate, energy, calcium and phosphorus content of breastmilk of term AGA and term IUGR infants was estimated in 109 and 101 mothers respectively at both 2 weeks and 6 months.

Results:

- 1. Exclusive breastfed term IUGR infants gain adequate weight i.e. >500gm / month for the first six months of life. Their mean gain in length 3.5 cm / months and 2.0 cm./ month during 0-3 and 3-6 months respectively also fulfils the criteria of adequate gain in length. They also exhibited adequate gain in head circumference i.e. 2 cm / month (0-3 months) and 1 cm / month (3-6 months).
- 2. There is no significant difference in protein, fat, energy and phosphorus content of breastmilk of mothers of term IUGR and TAGA infants. However, the carbohydrate content in term IUGR group is significantly lower at two weeks.
- 3. The breastmilk content of calcium in the mothers of term IUGR infants is higher than that of a TAGA infant's mother at both two weeks and six months.

Conclusions:

- 1. The milk of the term IUGR baby's mother is baby specific
- 2. Exclusive breastfeeding adequately (adequate gain in weight, length, head circumference, chest circumference, BMI) supports the physical growth of term IUGR infants upto 6 months of life.

Research in the field of IYCF at community level

This is a matter of great satisfaction that more and more young scientists are taking up subjects related with IYCF for their Dessertation. The study reports were received by BPNI Head Quarter.

 Breastfeeding practices amongst higher educated mothers of Udaipur city – a dessertation submitted for the degree of Doctor of Medicine (Pediatrics) to the University of Rajasthan, Jaipur. (Author: Dr. L.S. Jadoun)

It focus on some pertinent issues regarding the status of infant feeding practices in the urban population of Udaipur city. The rate of exclusive breastfeeding for 6 months was only 8.2%. Majority of mothers (55.97) did not receive any advice or support regarding initiation of breastfeeding. A large number of (63.12%) babies received pre-lacteal feeding. Practices like time scheduled feeding, water supplementation and early introduction of artificial feeds are still prevalent. The study reveals that the infant feeding practices requires considerable amount of improvement among the educated urban mothers of Udaipur city. The initiatives taken in this regard may benefit other urban areas also.

Socioeconomic significance of breastfeeding

 a report submitted to BPNI, New Delhi.
 (Author: Ms. Deeksha Sharma)

It assessed feeding practices and the mother child health and nutrition status in rural areas especially from the disadvantaged families from a state like Rajasthan. The study reports a delay in initiation of breastfeeding for $2^{\rm nd}-3^{\rm rd}$ day and practices like pre lacteal feeding, early supplementation and delayed initiation of complementary feeding.

About half of children in the study population were underweight and stunted. A half of the mothers in the study area were found not taking adequate calories per day. Unless the status is improved, the chances of nutrition levels improving with successive generations are quite bleak.

Release of District Specific Report on "Status of Infant and Young Child Feeding in 2003"

Release of District Specific Report on "Status of Infant and Young Child Feeding in 2003."

A district specific report on "Status of Infant and Young Child Feeding" released in various districts during November-December 2004. This is a part of the study on "Status of Infant and Young Child Feeding in 49 districts of India", carried out in 25 States and 4 Union Territories of India, conducted in three phases during the year 2003.

- 1. In Phase I quantitative data was collected by interviewing mothers and families of infants between the ages of 0-9 months.
- 2. During Phase II qualitative data was collected through in-depth interviews of mothers, mothers-in-law, health workers and others.
- 3. Phase III the data was collected on implementation of and compliance with the IMS Act through interviews of hospital authorities, chemist shop owners, health workers and mothers.

The objective of this study was to assess current infant and young child feeding practices across the district, to capture, in particular, the geographical and socio-cultural differences in breastfeeding practices. The study had the following specific objectives.

- · To assess the status of infant and young child feeding practices
- · To understand the barriers of optimal breastfeeding practices

The report provides not only a view of infant and young child feeding practices in the district, but also brings to light several reasons that help or hinder these practices. The report consists of a brief background, methodology, findings of the above three phases. It also attempts to make recommendations for future action.



Ludhiana, Punjab



Davangere, Karnataka



Anantpur, Andhra Pradesh



Sonitpur, Assam



Kurnool, Andhra Pradesh



Rohtak, Haryana



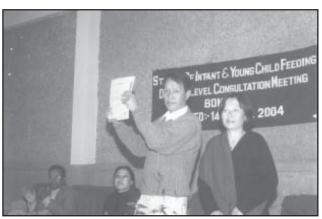
Imphal, Manipur



Chidambaram, Tamil Nadu



Rohtak, Haryana



Gangtok, Sikkim



Allahabad, Uttar Pradesh

Resources

Website

• www.bpni.org: This is designed for parents, public, professionals, media and any other person interested in infant feeding issues to get information about various aspects of breastfeeding including technical information. It also gives information about the organisation, its areas of work and resources available. It has links with various other International Organisations working on infant feeding.

Books & Booklets

- TETT
- **Protecting, Promoting and Supporting Breastfeeding** The Indian Experience: This book is more than a documentation of the growth of the Indian movement to centrestage breastfeeding in national and international health policies, and restrain the infant food industry's unethical marketing practices. It also helps in understanding why breastfeeding is central to child survival, what undermines breastfeeding, and what can be done to prevent it. **Rs. 290**
- Breastfeeding and Complementary Feeding: Guidelines for Doctors: This book is prepared for doctors, the first line health professionals, to enable them to promote optimal infant feeding practices and dispel beliefs regarding infant feeding in the communities. They can use this book to update their knowledge and teach young students or counsel mothers. Rs 150
- Breastfeeding & Complementary Feeding-Guidelines for Nutrition professionals: This book is specially prepared for nutrition professionals to help them counsel mothers and teach students on optimal infant feeding practices. It helps to update their knowledge about infant feeding issues. Rs 150
- Breastfeeding & Complementary Feeding-Guidelines for Nurses: This book is specially prepared for nurses, to enable them to self learn and use this as a teaching tool about infant feeding. This will also help them to promote optimal infant feeding practices and dispel false beliefs of mothers regarding infant feeding. Rs 150

- Breastfeeding and Complementary Feeding: A Guide for Parents. Rs 25
- The Science of Infant Feeding: A book on breastfeeding and infant feeding with scientific advances of 20th century (Published by Jaypee Brothers.) Rs 450
- The Law to Protect, Promote and Support

 Breastfeeding: A book of BPNI that explains the provisions of the IMS Act in a simple manner. Rs 60 (Second edition 2004)
- Maternity Home Practices & Breastfeeding an ACASH (Mumbai) publication (English) Rs 75
- Helping Mothers to Breastfeed an ACASH (Mumbai) publication (in English) Rs 125

Information Sheets

 Information Sheet 1 – Guidelines for Breastfeeding and Complementary Feeding: (ALL STATE SPECIFIC INDIAN LANGUAGES) This four page document provides accurate information on infant feeding for people, women in particular, especially pregnant women and breastfeeding mothers, Rs 3 (Minimum ORDER 100 COPIES)

Posters

- Breastfeeding Posters: 12" X 18" (Art Paper, four colour, sticker tape (in English and Hindi) Rs 5
- Closeness and Warmth: 15" X 20" Breastfeeding a Bliss. Rs 10

Video

Video Cassette

 Maa Ka Pyar- Shishu Ahar: This BPNI video covers early initiation, exclusive breastfeeding, how to breastfeed and complementary feeding, Rs 250

Video CD

 Maa Ka Pyar – Shishu Ahar: This BPNI CD covers early initiation, exclusive breastfeeding how to breastfeed and complementary feeding, Rs 100 (Reduced Price)

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2. Please add 10% to the total value of your order for postage, packing and handling charges.

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Tel: 011-27312445, Tel/Fax: 27315606, Email: bpni@bpni.org. Website: www.bpni.org

Compiled by: Dr. Tarsem Jindal & Mrs. Jessy George Layout by: Amit Dahiya

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