



International Baby Food Action Network (IBFAN)

ASIA



Annual Report 2008

Submitted by:



Breastfeeding Promotion Network of India (BPNI)/
IBFAN Asia

BP-33, Pitampura, Delhi-110034

Tel: +91-11-27343608, 42683059

Fax: +91-11-27343606, Email: info@ibfanasia.org

Supported by:



Ministerie van Buitenlandse Zaken
Ontwikkelingssamenwerking



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Organization:



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Tel: +91-11-27343608, +91-11-42683059, Fax: +91-11-27343606

Email: info@ibfanasia.org

Contact Person:

Dr. Arun Gupta

Regional Coordinator, IBFAN Asia

BP-33, Pitampura, Delhi-110034

Tel: Mob. +91-9899676306, Home. +91-11-27026426

Email: arun@ibfanasia.org

*Focus on Infant Health is Critical to
Sustain Long-term Human Development.
Early Breastfeeding within One Hour and
Exclusive Breastfeeding for the First Six
Months Plays a Significant Role in
Achieving this.*

*I*BFAN's 7 Principles

1. The right of infants everywhere to have the highest level of health.
2. The right of families, and in particular women and children, to have enough nutritious food.
3. The right of women to breastfeed and to make informed choices about infant feeding.
4. The right of women to full support for successful breastfeeding and for sound infant feeding practices.
5. The right of all people to health services, which meet basic needs.
6. The right of health workers and consumers to health care systems, which are free of commercial pressures.
7. The right of people to organise in international solidarity to secure changes, which protect and promote basic health.

Acknowledgements

IBFAN Asia acknowledges with thanks the support provided by Norad and Sida to implement our Strategic Plan for 2008-2013. It would not have been possible to achieve the result without this support during the first year of the Plan.

I am very thankful to the sub-regional representatives of IBFAN; Ms. Innes for Southeast Asia and Ms. Kim for East Asia. It is with their dedication and commitment that this action could be conducted in both these regions.

I am most grateful to the Royal Government of Bhutan, Ministry of Public Health for hosting the fifth “South Asia Breastfeeding Partners’ Forum” at Thimpu in Bhutan. We thank UNICEF Regional Office for South Asia (ROSA) for their support and collaboration at the Forum-5.

In South Asia, I am indebted to the contribution of our national focal points of SAARC countries, Afghanistan, Nepal, Maldives, Pakistan, India, Sri Lanka, Bangladesh, and....

I would like to thank Dr. Vandana Prasad of Public Health Resource Network, the key collaborating organization in India’s WBT*i* assessment along with 14 partners of governments and civil society.

I truly appreciate the role of our media partner, Complete News & Entertainment Broadcast (CNEB) for helping us during the launch of the One Million Campaign.

My sincere appreciation is due for everybody in our IBFAN Asia /BPNI team, who have spent several hours, day in and day out to make the Plan for 2008 successful.

Last but not the least, I thank all those who worked as background support people, who helped print the materials, develop the kits, packing and dispatching and contributed towards the success of the launch event and would I like to place on record deep appreciation for their kind efforts.

Dr. Arun Gupta MD, FIAP
Regional Coordinator
IBFAN Asia

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IBFAN ASIA Annual Report 2008

Introduction

The narrative report follows the objectives stated in the Strategic Plan 2008-2012/13 and the Annual Operational Plan of IBAFN Asia (Annex-1). This report is for the period January 2008-December 2008. The plan has been jointly supported by funds from Norad (January to December) and from Sida (July to December 2008). This is the complete report of the year 2008, reflecting our achievements based on the operational plan, which was developed after securing funds. The operational plan 2008 was a realistic target set based on level of funding. Some of the activities planned under the overall strategic plan had to be given up because of lack of resources. As stated in the Strategic Plan, the Overall Goal is “To contribute to reduction in child malnutrition, and improvement in infant and young child survival, health and development through improved infant feeding practices”, and all the objectives of both the Strategic and the Annual Plan have been designed to meet this Overall Goal. Activities and results (outputs) are provided for each of the objective developed for this purpose. IBFAN Asia activities relate to its three sub regions, South Asia, East Asia and Southeast Asia. As the Regional coordinating office is based in India, activities under objectives are clubbed under 1-5, 6 is about East Asia and 7 about Southeast Asia. However, several of the activities and their impacts cross over to other objectives too; they could well be fitted under several heads.

Executive Summary

The Overall Goal of the Strategic Plan is “To contribute to reduction in child malnutrition, and improvement in infant and young child survival, health and development through improved infant feeding practices”, and the annual Plan for IBFAN Asia for 2007-08 were designed to meet this through seven objectives. Some of the activities planned under the overall strategic plan had to be given up because of lack of resources. IBFAN Asia activities relate to its three sub regions, South Asia, East Asia and Southeast Asia. As the Regional coordinating office is based in India, activities under objectives are clubbed under 1-5, 6 is about East Asia and 7 about Southeast Asia. The first year of the five-year plan of IBFAN Asia has led to enhanced capacity of the regional office to take action, network, organise, launch new initiatives and contribute to the global agenda on Infant and Young Child Feeding and Nutrition. This has been particularly evident in the objectives related particularly to World Breastfeeding Trends Initiative, the ONE MILLION CAMPAIGN, and advocacy conducted by the RCO, especially in India.

The **first Objective**, related to the World Breastfeeding Trends Initiative (WBTi) was met in full, with more than 51 countries conducting national assessments on the status of implementation of the Global Strategy. These include countries in South, South East and East Asia, Africa and Latin America. So far reports from 16 countries have been sent to the Coordinator of the newly set up Google group “WBTi Coordinators Group”. The release of Report and Report Card of

India by the Minister of Panchayati Raj was covered extensively by media, highlighting the low status of breastfeeding in the country. South Asia Breastfeeding Partners' Forum 5, which was organized at Thimphu, Bhutan from 13th-15th October 2008 was organised by the Ministry of Health, Royal Government of Bhutan and the International Baby Food Action Network jointly, once again highlighting RCO's successful advocacy with governments in the region. Outcomes included (i) A plan of action 2009-2011 for each participating country; (ii) a regional plan of action; (iii) A Thimphu Declaration on Infant and Young Child Feeding

The **second objective**, to launch the international web campaign and build global public opinion to support women and mothers, has been equally successful, with the launch being conducted in several countries on February 9, 2009. The website is called www.onemillioncampaign.org. While the launch was delayed due to the time taken to develop an extremely user-friendly website, till date persons from 128 countries have signed the first petition to be delivered to world leaders at the World Health Assembly in May this year. The petition calls for governments to ensure breastfeeding friendly work places and stricter implementation of the International Code for Marketing of Breastmilk Substitutes.

Objective 3, that of facilitating and supporting programmes for increasing health workers skills (using the "3 in 1" training programme), has also been especially successful in India where several states are working with IBFAN's host organisation, Breastfeeding Promotion Network of India, to train both trainers of trainers, as well as breastfeeding consultants, middle level trainers and field workers. RCO also supported a training programme in Nepal.

The **4th Objective** - Strengthening HIV and Breastfeeding working group in Asia – has seen continuous functioning of the working group, now with 19 members from different countries, on HIV and breastfeeding, which is being coordinated by the regional office and setting up of Google group <http://groups.google.co.in/group/afhivibfanasiagroup>. The RCO has been instrumental in developing the updated version of "the IBFAN Asia position statement on HIV and infant feeding" based on recent research evidence including WHO HIV and Infant Feeding Technical Consultation; this position statement was released by the health minister of Royal government of Bhutan during the 5th South Asia Breastfeeding Partners' Forum. RCO has also developed another policy document titled "Call to Drop Mixed Feeding" and has coordinated the process of writing, reviewing and editing and wide dissemination of both the documents. The RCO has, in addition, been networking with government agencies like National AIDS Control Organization in India on a regular basis.

It is probably in **Objective 5**, Increasing effectiveness of IBFAN in strengthening the breastfeeding movement and inputs at regional and international level, that the RCO has been most successful. BPNI, the host of IBFAN Asia, has been functioning as the regional coordinating office for South Asia since 1998 and of Asia since 2002. Besides coordinating all actions, the RCO maintains the websites of BPNI and IBFAN Asia, and now also the portals www.worldbreastfeedingtrends.org and www.onemillioncampaign.org. Through advocacy, RCO

has been strengthening the regional network and coordination of all actions in relation to planning and implementation, review and evaluation. Technical assistance on child health and survival, HIV and breastfeeding and other related issues are its major work to support partners. Networking and building capacities for national groups and governments is another.

The RCO has a resource centre that publishes a newsletter to share information and update its contacts (more than 600). Given the nature of the work and points of advocacy, the IBFAN Asia newsletter was delayed so that details of the launch of the ONE MILLION CAMPAIGN and the assessment under WBTi could be included. It will shortly be distributed to the various partners.

RCO is also responsible for contributing to the regional and the global agenda on child health and nutrition and participates in regional and international meetings to advocate for implementation of the global strategy for infant and young child feeding as well as other issues related to Code. It also coordinates the participation of sub-regional representatives in international policy guidance meetings of IBFAN every alternate year. Regular communication through SKYPE or using other channels, answering emails enquiries, writing regional and national advocacy articles, and meetings with parliamentarians and ministers, policy managers and other high profile individuals and holding media workshops are among ongoing works that the regional coordinator does for enhancing support to breastfeeding programmes. RCO coordinates to develop a yearly regional plan through a consultative process, which also helps to internally monitor and evaluate. Asia also plans to have an independent evaluation in 2011/2012. As BPNI, the host of the RCO is also the regional focal point of WABA, there is close cooperation and synergy created between the three networks.

In addition to the above tasks, the RCO has been playing an important role in advocacy to protect infant and young child feeding through prevention of conflict of interest at the international, regional and national level, including both governments and civil society groups. This advocacy has included several issues which impact optimal infant and young child feeding, such as national policies related to the Integrated Child Development Scheme in India, development of National Child Health Policy in India, public private partnerships in health and nutrition in India and internationally, changes in standards related to infant and young child feeding at Codex Alimentarius Commission, the role of international agencies such as Global Alliance for Improved Nutrition and UNICEF, WHO, FAO, etc. in protecting, promoting and supporting breastfeeding, and so on.

Objective 6 relates to Southeast Asia: To stimulate people's action in code implementation and monitoring of Global Strategy for Infant and Young Child Feeding at national level. The batch of countries to participate in the WBTi in 2008-2009 include Philippines, Malaysia, Vietnam, Laos, Indonesia, and Thailand. The launch of the ONE MILLION CAMPAIGN took the message of supporting women to breastfeed to policy makers, employers and employees. IBFAN Southeast Asia representative has been involved in ongoing advocacy and support at national level in these countries.

Objective 7 relates to IBFAN's work in East Asia: To strengthen implementation of the Code and the Global Strategy for Infant and Young Child Feeding in East Asia. In 2008, IBFAN EA launched various activities for strengthening the implementation of the Code and the Global Strategy on IYCF. For this activities, East Asia facilitated conducting the national assessment of the implementation of the Global Strategy for Infant and Young Child Feeding in Bangkok. The EA Representative visited Japan for strengthening EA Network. Each country in the region launched capacity building activities. East Asian countries of Mongolia and Korea have very successfully launched the ONE MILLION CAMPAIGN. However, youth awareness workshops to build their capacity on IYCF have been postponed to 2009.

Highlights

First year of the five-year plan of IBFAN Asia has led to enhanced capacity of the regional office to take action, network, organise, launch new initiatives and contribute to the global agenda on Infant and Young Child Feeding and Nutrition. While it is a continuation of the past work, new ideas have emerged over these years. One of these is strengthened advocacy effort in 51 countries, through a new initiative - World Breastfeeding Trends Initiative (WBTi). More than 500 civil society groups in 51 countries have taken it up as their issue and are together looking at the means to bridge gaps in policy and programmes on Infant and Young Child Feeding. Further, the launch of ONE MILLION CAMPAIGN Support Women to Breastfeed - www.onemillioncampaign.org - provided an excellent opportunity for action. This campaign, which is essentially web-based and available in 5 languages, has now been strengthened to reach people who have no access to the internet. Another important highlight is the involvement of governments in both these exercises; at many places it is only governments who are involved in national assessments. IBFAN Asia has developed an updated position statement on HIV and Infant Feeding and disseminated it widely to policy makers, civil society groups and those working with HIV/AIDS. IBFAN Asia has also developed some practical guidance notes, a call to Drop Mixed feeding which provides detailed information on what needs to be done in each infant feeding option chosen by HIV positive women. South Asia Breastfeeding Partner's Forum 5 was once again a successful event organised in South Asia and hosted by Ministry of Health Bhutan. In India, BPNI in partnership with civil society launched a campaign to oppose the entry of commercial interests in nutrition, being promoted by GAIN, through development of a statement on PPP issues and high-level advocacy with the Government of India. Contribution to the Norad's international seminar on 'Nutrition and Development' to position nutrition high on donor agenda is also an important highlight of this year. Nothing seemed to fail as per plans rather we were able to leverage more out of it. However, for reasons related to development of the website and the unavailability of a newsworthy decision-maker/celebrity in that period, we had to delay the launch of ONE MILLION CAMPAIGN from 2008 to February 2009. The details of the launch and its impact are included in this report as it was planned for 2008, and its impact has been far more positive than expected. Heightened trust of the governments to increasingly work in partnership with IBFAN could easily be labeled as the highlight of the year 2008, as demonstrated by several governments taking active part in the work. Prime Minister of India invited the regional coordinator to be a member of the National Council on India's Nutrition challenges, Bhutan Ministry of Health hosting the South Asia Breastfeeding Partner's Forum 5, and many countries including Pakistan, Mongolia, Korea, and Laos involved directly in the programmes.

Narrative Report 2008

Objective 1: To organize assessments of the global strategy for IYCF using and expanding world breastfeeding trends initiative, to other regions.

This is part of strengthening our global advocacy efforts to mainstream Infant and Young Child Feeding in child health and development programmes.

The World Breastfeeding Trends Initiative (WBTi) is a global initiative to assess policy and programs that support women to breastfeed. It is an integral part of the project “Global Breastfeeding initiative for Child Survival” (gBICS). Its purpose is to promote implementation of the global strategy with policy makers, health workers and other partners in order to create a positive environment for countries to take steps to harmonise/strengthen their national policies with the global strategy. The Assessment, carried out by national groups, often with involvement of government and its agencies, highlights the gaps in policies and programs and makes recommendations for bridging the gaps.

The WBTi has taken off in 51 countries, in Asia, Africa and Latin America. Many more are likely to join in 2009; in fact we have plans to reach about 100 nations permitting resources and action by other regional offices. Follow up in these countries would lead to development of national reports and report cards and these would be used for advocacy and briefings at national level. Country actions were shared and future plans were developed during the South Asia Breastfeeding Partners’ Forum 5 at Bhutan in October 2008.

The results of WBTi assessments are entered into the WBTi web portal as soon as they are received and verified. Over the years the portal will also provide a study of trends after having repeat assessments every three years, and will allow countries to compare their indicators with other countries or regions. It will also provide easily understandable and user-friendly graphic and mapping service to create reports, which would be particularly useful to donors and planners to effectively commit their resources in the area most in need.

The IBFAN Asia RCO supported the training programmes at Geneva, Africa and LAC with resource persons, material and financial assistance. The RCO is fully coordinating action in the Asian Region – South Asia, Southeast and East Asia – including supporting meetings, presentations, creating reports and report cards.

IBFAN Asia achieved the results of this objective by more than 100%.

Activities and Results

Training for, Organizing, and Coordinating Regional Assessments and Reports

1.1. Orientation and Training of IBFAN Coordinators at Geneva 27-28 June 2008

The Regional Coordinating Office conducted international orientation training for WBTi in Geneva on 27-28 June 2008 for IBFAN regional coordinating offices and WABA secretariat. The participants were familiarized with the process of national assessment of the states on the Global Strategy for Infant and Young Child Feeding and generating reports and country graphs from the website www.worldbreastfeedingtrends.org.



1.2. Updating of Assessment criteria

The Geneva Meeting, where the participants discussed the criteria on which assessments are being done, came up with several suggestions for fine-tuning the assessment questionnaires. The World Alliance for Breastfeeding Action coordinated important submissions regarding the assessment of programmes and policies related to maternity protection. The suggestions were incorporated and the new assessment questionnaire was finalised. Similar inputs were incorporated in other indicators also. On the basis of the training held in Geneva, a trainer's manual was also prepared to assist trainers at regional training, and then national trainers who would need to train national groups that would participate in the assessment. <http://worldbreastfeedingtrends.org/documents.php>

1.3. Training of East Asia and Southeast Asia Regions August 16-18, 2008

The first World Breastfeeding Trend Initiative (WBTi) Training Workshop for the regions was conducted by the RCO at Bangkok (East Asia and Southeast) from August 16-18, 2008. The objectives were (i) to introduce the World Breastfeeding Trends Initiative (WBTi) to participants, and to seek their collaboration and support for initiating the process at national level; (ii) to share



IBFAN Asia plan of work for 2008-2012 and apprise the participants on new and emerging challenges i.e. Conflicts of interests and PPPs; (iii) to understand the "ONE MILLION CAMPAIGN"; and (iv) to understand the concept of the conflict of interest and how to avoid it at national level. Eleven countries took part in the training: Philippines, Vietnam, Indonesia, Lao PDR, Malaysia, Thailand from Southeast Asia and Republic of Korea, Mongolia, Taiwan, PR China and Hong Kong from Asia. There

was good participation from several of the governments of these countries, and coordinators were appointed to carry out national assessments after training national groups.

1.4. Training of South Asia region August 22-23, 2008.

The RCO conducted similar training for eight South Asian countries at New Delhi on August 22 and 23. The countries were: India, Afghanistan, Bhutan, Bangladesh, Nepal, Pakistan, Sri Lanka and Maldives. These countries are carrying out the assessment to note what improvements have occurred since the first assessment in 2005 and see what areas still need action. The governments of Bhutan, Pakistan and Maldives were represented at the meeting.



1.4. Training in African region September 10-12, 2008

Nineteen participants from 14 African countries: Angola, Cape Verde, The Gambia, Ghana, Lesotho, Malawi, Mozambique, Rwanda, Sudan, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe, took part in the training organised by IBFAN Africa and RCO Asia at Mbabane Swaziland from September 10 to 12. Once again, the governments of several countries were present at the meeting and received training to create national core groups and carry out the assessment in their countries.



1.5. Training in Latin American region September 14-15, 2008

This was organised by RCO Asia and IBFAN – LAC at Costa Rica from September 14 to 15. Eighteen countries - Bolivia, Ecuador, Uruguay, Colombia, Mexico, Brazil, Dominican Rep, Argentina, Nicaragua. Costa Rica. Guatemala. Venezuela. Honduras. Cuba. Panama. El Salvador. Puerto Rico and Paraguay – attended the workshop and became committed to carrying out national assessments in their countries.



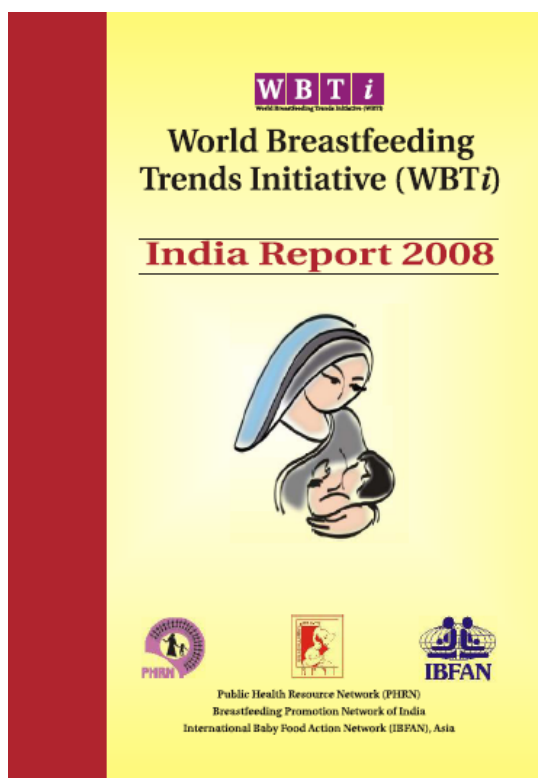
1.6. Creation of WBTi Coordinators Google group

In order to smooth communication and to strengthen inter and intra group participation, WBTi Coordinators Google Group was formed by the RCO and is being coordinated by RCO. The group helps the coordinators in the various countries keep in constant touch with one another as well as with the RCO. The Group has been particularly helpful in sharing information and seeking solutions to problems.

1.7. Conducting Assessments and Preparing Reports

The Coordinators of each country have formed a Core Group and conducted assessments of their national breastfeeding status, programmes and policies based on documentation that is national in scope. So far, fifteen countries have completed their assessment and sent their data for verification to the RCO, following which they will be uploaded onto the web portal, reports and report cards will be printed (**Annex-2**). The RCO has prepared a template for preparing the report and report cards, which has been distributed to all the countries that are participating in the assessment.

BPNI and the Public Health Resource Network (PHRN), together with other core group members, conducted the India Assessment. It was coordinated by BPNI. The information on the ten indicators of the Global Strategy and the national breastfeeding status was divided between four core group members in August 2008. A larger consultation with partners was called in October 2008 for verifying the assessment, consensus building and for making recommendations. A report card was designed by RCO, and the draft report prepared, which were sent to the partners for comments. The comments and suggestions were incorporated and printed.



<http://worldbreastfeedingtrends.org/report/WBTi-India-Assessment-Report-2008.pdf>

1.8. South Asia Breastfeeding Partners Forum 5 – October 13-15 2008

South Asia Breastfeeding Partners' Forum 5 was organized at Thimphu, Bhutan from 13th-15th October 2008. The Ministry of Health, Royal Government of Bhutan and the International Baby Food Action Network jointly organized the Forum. Experts from seven South Asian countries (Afghanistan, Bhutan, Bangladesh, Nepal, Pakistan, Sri Lanka and India) participated and had thematic discussions on “Protecting, Promoting and Supporting Breastfeeding: Assess, Analyse and Act”. It must be noted that earlier Forums led to increased interest and support to IYCF from both governments and civil society.

Forum 5 brought together the results of national assessments of the state of policy and programmes related to Infant and Young Child Feeding and breastfeeding in all the seven participating countries. The UNICEF regional office for South Asia supported Forum 5 partially. The objectives of Forum 5 were: (i) To share results of the assessment of national policies and programmes on IYCF in the countries of South Asia.; (ii) to share and discuss the progress made since the last assessment in the year 2005; (iii) to follow up on “the South Asia Declaration on Empowering Women for Optimal Infant and Young Child Feeding” endorsed during the last Forum at New Delhi; (iv) to share the implementation models from the region to achieve optimal infant and young child feeding practices and (v) to discuss about the new challenges posed by the public private partnerships. Expected Outcomes included (i) A plan of action 2009-2011 for each participating country; (ii) a regional plan of action; (iii) A Thimphu Declaration on Infant and Young Child Feeding. **(Annex-3)**

H.E. Lyonpo Zangley Dukpa, Hon'ble Minister of Health inaugurated the Forum. Dr. Dasho Gado Tshering, Secretary, Ministry of Health and Mr. Sonam Rinchen, Director of Public Health were also present. The Minister believed that the 5th Forum would help provide a stronger mandate to implement the programmes to bridge gaps found in 2005 and 2008. “The theme, Assess and analyze, is perfect to critically dissect and review policy regulations on which the health and lives of children depend”, he said.



H.E. Lyonpo Zangley Dukpa, Hon'ble Minister of Health inaugurated the Forum.

The countries shared the findings of the assessments conducted nationally. (See box for major gaps identified).

MAJOR GAPS IDENTIFIED THROUGH NATIONAL ASSESSMENT IN SOUTH ASIA

Policy and Programme

- Lack of national infant and young child feeding policy
- No plan of action for the infant and young child feeding
- Lack of technical expertise/nutritionist
- Inadequate knowledge of Policy Makers
- the national breastfeeding committee not existing
- the national breastfeeding committee not meeting regularly
- Poor coordination mechanism in the national breastfeeding committee
- Components in the policy not materialized
- Programmes recommend Exclusive breastfeeding up to 4 months

Baby Friendly Hospital Initiative (BFHI)

- Low commitment of hospital staff
- High turnover of hospital staff
- Weak supervision and monitoring
- Transfer of trained staff
- Lack of skilled trainers
- No sustained action to revive BFHI
- BFHI not included in child health programs
- Lack of time bound program
- Not owned by government, basically donor driven

International Code

- Inadequate mechanism to report violation and enforce the IMS Act
- No law/no system for code monitoring
- Lack of awareness about the Code
- Lack of awareness in implementation of the Code

Maternity Protection

- Poor family support
- Insufficient maternity leave
- Not applicable to private and informal sectors
- Work site facilities/crèches/breastfeeding breaks absent
- Paternity leave not universal
- No monitoring mechanism for implementation of the Maternity Protection
- Information about maternity protection not given to women/mothers
- Private sector is not covered
- No paternity leave

Health & Nutrition Care

- Poor infant and young child feeding reflection in basic package in health service
- Low technical and financial services for nutrition program
- Inadequate C component in the child health program
- Maternal nutrition is neglected
- No health worker is responsible for code implementation
- No pre-service practical training of doctors and nurses in infant and young child feeding
- infant and young child feeding not included in school curriculum

Mother support and community outreach

- Lack of definite package of community nutrition outreach
- Cultural and traditional barrier to good practices
- Inadequate training of staff
- Crèches inadequate
- infant and young child feeding counseling not accessible to mother as a service
- Traditional Birth Attendants never trained for supporting breastfeeding

Information Support

- Lack of information support strategy on infant and young child feeding
- No budget for infant and young child feeding information support

HIV and Infant Feeding

- Lack of information to the community on the subject
- Poor coordination between HIV programme agency, Nutrition agency and the ministry of health
- The national AIDS control programme promote replacement feeding for HIV+
- No policy on HIV and Infant feeding
- BFHI does not include HIV and infant feeding
- Inadequate counseling to HIV+ women regarding infant feeding
- Lack of training of health and community workers on HIV and Infant Feeding

Infant feeding during emergencies

- Lack of training module/course on the subject
- Lack of data collection system in emergency situation
- Preparation plan is inadequate
- Lack of policy on Infant feeding during emergencies
- No mechanism to monitor violation of the Code/IMS Act
- Lack of coordination mechanism
- Disaster management programmes are donor driven
- Inadequate facilities on health outlets
- National Coordination Committee on disaster management does not include all stake holders

Monitoring and Evaluation

- Lack of nutrition surveillance
- Limited technical expertise
- infant and young child feeding indicators not addressed in the monthly reporting
- Lack of monitoring and evaluation indicator in the national child health program
- Lack of baseline data on the infant and young child feeding

Each country group had a group discussion to take the stock of the situation and key issues in the individual country to formulate a country plan for 2009-2011.

The discussions also covered issues of fund raising for breastfeeding, capacity building and implementation of the International Code. Dr. Arun Gupta, Regional Coordinator IBFAN Asia spelt out the new challenges to breastfeeding, particularly those that are trying to undermine the code by attempting to commercialize infant and young child nutrition.

Among the new initiatives was Youth for Breastfeeding, represented by young activists from different countries. Young participants from Bangladesh reiterated their commitment for the movement and expressed their willingness to contribute positively. Similar views were expressed by the participants from Bhutan and India.

The Thimphu Declaration on Infant and Young Child Feeding was developed and unanimously endorsed by all the participants.

The Report of the Forum is in the process of being finalized after getting suggestions from the participants.

1.9. Launch of the India Report and Report Card – December 9, 2008

Sh. Mani Shankar Aiyar, Minister for Panchayati Raj, Government of India, in front of a large audience including several media persons, released the India Report (<http://worldbreastfeedingtrends.org/report/WBTi-India-Assessment-Report-2008.pdf>) and Report Card (<http://worldbreastfeedingtrends.org/reportcard/India-reportcard-2008.pdf>) of WBTi assessment 2008 on 9th December. (**Annex-4, India Report Card**)



The Report revealed the dismal state of support to women for breastfeeding and the lack of will to invest in this most effective intervention for saving newborn and infant lives and preventing early malnutrition.

According to the report, India stands in YELLOW band, in a grid of Red, Yellow, Blue and Green in ascending order of performance, which denotes poor performance. The Report Card that was issued along with the detailed report, highlights succinctly that not much has changed since the previous assessment conducted in 2005; in fact, India's marks have improved by mere four points, from 65 out of a total of 150 to 69.

According to Mani Shankar Aiyar, "The report highlights deficiencies in all areas that require action, justifying a highly coordinated and budgeted activity for achieving optimal breastfeeding". He further emphasized that "Panchayati Raj Institutions (PRIs) can play an

indispensable role in propagating, supporting and sustaining initiatives aimed at optimal breastfeeding”

Her Excellency Ann Ollestad, Ambassador of Norway, who breastfed both her children, sent the following message through the “In Norway breastfeeding has been re-established with urban, well-educated women taking the lead. (the Norwegian government has two ministers who have actively breastfed (Brustad/Pedersen), the Royal Family have also been active advocates for breastfeeding. ...In today’s world one cannot take Breastfeeding for granted as this practice is vulnerable in modern societies. Breastfeeding must be a priority of a nation’s health policy. Every country should develop a policy to promote, protect and support breastfeeding according to the WHO global strategy on infant and young child” Ms Ann Ollestad could not attend the launch due to ill health. Mr. Jan Olsson, from Norwegian embassy in India, participated in the function, on behalf of the ambassador.



Dr. Arun Gupta, Sh. Mani Shankar Aiyar, (Minister for Panchayati Raj, Government of India), Mr. Jan Olsson, Dr. J.P. Dadhich and Dr. Vandana Prasad releasing the India Report

1.10. Leverage

The national World Breastfeeding Trends assessment process in India has sparked interest to carry out similar assessments at the state level. The process of State Assessment has been initiated in Madhya Pradesh in India and tool has been locally adapted after discussions with several partners.

1.11. Impact

The impact of the activities related to World Breastfeeding Trends Initiative has been manifold. They can broadly be categorised as:

Strengthening of regional networks: The regional networks of Asia, Africa and LAC have been considerably strengthened through the exercise of capacity building for assessment. The creation of the WBTi Coordinators Google Group has furthered this strengthening by giving the groups an opportunity to share their strengths and seek solutions with coordinators in other regions and countries.

Strengthened national actions: The fact that national groups know about what are the gaps in current policy and programmes through an assessment process in which they were involved helps in

consideration of bridging gaps. Many national government and civil society participants have indicated their concerns after assessment was over.

Involvement of governments: In almost all regions, governments of several countries have become involved in the assessment process. For e.g., in Bhutan, Maldives, and several African countries the government has been the primary actor in conducting the assessment. In other countries such as Pakistan, Sri Lanka, Hong Kong, etc., government has been one of the core partners in conducting the assessment. The involvement of the government increases the stake of government in planning for action to improve breastfeeding rates.

In countries such as India, government agencies such as National AIDS Control Organisation, Indian Council of Medical Research have been partners to verification of data and developing recommendations. The Minister of Panchayati Raj launched the Report. Of the five Forums held so far, Forum 3 in Afghanistan and Forum 5 in Bhutan have been held by the respective Ministries of Health in collaboration with IBFAN Asia. UNICEF has also been giving some financial support for the various forums held so far.

Involvement of Civil Society: The exercise of conducting the World Breastfeeding Trends national assessments has seen the close involvement of civil society groups in all the countries carrying out the assessment. These groups represent not just medical and nursing professionals and nutritionists, but also legal groups, groups representing child rights, groups working on issues of gender and child care, groups working on community health issues, on legal issues, workers' rights, etc. This close cooperation has, in India, led to strengthening civil society organisations and movements for health and nutrition in general, and those relating to infant and young children in particular, especially in the creation of alliances between health professionals and activists.

Civil Society empowerment through use of Right to Information: In India, the core partners used the Right to Information tool to obtain answers from the government for several of the assessment questionnaires. The Right to Information Act allows the ordinary citizen to ask questions of the government, and thus promotes accountability of the government to its citizens. The use of this tool not only helped provide the latest information on the status of policy and programmes, it especially highlighted the gaps that exist, and thus strengthened civil society's demand that such gaps be met.

Involvement of media: The assessment of countries, their colour coding and ranking by the WBTi tool, is newsworthy, and this assessment has been no different. The India Report Card for example, was widely reported in the national media, and newspapers developed special features around it. **(See Box)**

Bottle aces baby battle

GS. MUDUR

New Delhi, Dec. 10: India's child health services and the national rural health mission have made little difference to the nation's dismal statistics on breastfeeding, a practice that prevents illness and deaths among infants, experts said today.

A new report on breastfeeding in India has revealed a slight dip in the proportion of babies exclusively breastfed till six months of age — as recommended by paediatricians — and an increase in the proportion of babies bottle-fed in the first six months.

The proportion of babies receiving milk from bottles in their first six months has climbed from 13 per cent to 16 per cent over the past three years, and the proportion exclusively breastfed is down from 46.9 per cent to 46.4 per cent.

"Both trends are bad signs," said Arun Gupta, a paediatrician and national coordinator of the Breastfeeding Promotion Network of India, and a member of the Prime Minister's National Council on India's Nutritional Challenges.

Fall in number of breastfed kids, health schemes fail



A large number of studies has established that exclusive breastfeeding till babies are six months old can dramatically reduce the risk of potentially life-threatening diarrhoea and pneumonia.

The government's child health programmes and the national rural health mission have paid only "lip service" to breastfeeding, Gupta said. "All our agencies acknowledge that breastfeeding is im-

portant, but there has been little action," he said.

"No one is investing in training family health counsellors who can spread this simple message," Gupta said. "There has also been no follow-up on pledges that working mothers from poor families would receive Rs 500 a month to make up for loss of income when they choose to stay home and breastfeed

months. This has been proposed, but we've seen no implementation yet," Gupta said.

The proportion of babies exclusively breastfed dropped from about 70 per cent during the first month to about 27 per cent during the sixth month, according to the report released by the Breastfeeding Promotion Feeding Network of India.

One key goal of India's national rural health mission, launched about three years ago, is to improve infant and maternal health across vast areas. It has been criticised for denying service to health workers and health care providers. "We are not investing in training family health counsellors who can spread this simple message," Gupta said. "There has also been no follow-up on pledges that working mothers from poor families would receive Rs 500 a month to make up for loss of income when they choose to stay home and breastfeed

To save the child's life

A sustained nationwide campaign is crucial to dispel socio-cultural inhibitions and create awareness about breast feeding.

ALEX GEORGE

The recently released India Report of the World Breast Feeding Trends Initiative (WBFTI) 2008, highlighting the role of breast feeding in ensuring child health and reducing infant and child mortality, India has an infant mortality rate of 55 per 1000 live births (SNIS 2008) which accounts for 72 per cent of the country's under-five mortality rate. Breast feeding is the most important intervention



Medium duration of breastfeeding (which includes exclusive breast feeding in the first six months) and exclusive breastfeeding with other complementary foods is a key to saving the child's life. Exclusive breastfeeding, which is considered as a modern method of feeding, is difficult to maintain in the home. It is difficult to maintain the bottle-feeding and the 'topping up' of breast milk. Babies should be fed soft and mashed food at least 2-3 times a day. Between 1997-98 and 2007-08, supplementary feeding rates in India have improved from 25 per cent to 56 per cent. On the one hand it leaves a long way to go on the other hand it is equally important to enhance the quality of complementary food and cleanliness in providing it. The WBFTI report also calls for support to local women's groups to reach out to populations to prepare food. In addition to such support counselling should

India fails infant health again

Civil Society News
New Delhi

It seems India just can't save its little babies, as babies under five die and die alone. Around 27 million die every year, but 1.7 million one year and 1.08 million

the State of Infant Feeding, December by Mani Shankar for Panchayati Raj, initiated by the World Breastfeeding Trends Initiative (WBFTI) and the Public Health

South Asian countries

sites, breaks to breastfeed are needed. This is considered a labour issue when it is a child and maternal rights issue," said Dr Vandana Prasad of Public Health Resource Network in her presentation.

The report also addressed two controversial concerns: breastfeeding for HIV affected women and infant feeding during a natural calamity or disaster. It rooted for counselling and support to HIV affected women in whichever method of feeding they chose. For calamities, it was felt that it was important for babies and mothers to be together and for breastfeeding to be encouraged rather than take recourse to artificial baby foods which are dumped in plentiful supply.

An important suggestion made by Aiyar was to involve Panchayati Raj institutions in saving babies. He pointed out that India now has 3.2

million elected representatives at village level. Of these 1.2 million are women, possibly the largest such force in the world.

"Rural men have given this space to women. Nearly five million contest the election. There is also the opposition who contest. Are we using this vibrant society?" asked the minister.

He conceded that responsibility for infant health can't be left to the bureaucracy. It has to be placed in people's hands. The minister

Women representatives can spread the message of child health. Schemes for babies can be monitored by elected representatives and the gram sabha.

स्तनपान को लेकर गंभीर नहीं हैं भारतीय

सुषमा वर्मा नई दिल्ली

स्तनपान को लेकर गंभीर नहीं हैं भारतीय। भारत में स्तनपान को प्रोत्साहित करने के लिए सरकार द्वारा चलाए गए कार्यक्रमों के बावजूद भी स्तनपान का प्रतिशत घट रहा है। इसके कारण बच्चों में मलेरिया, डेंगू, टाइफाइड, कोलेरा और अन्य बीमारियों का खतरा बढ़ रहा है।

India ranks low on breastfeeding index

New Delhi: A global report on breastfeeding trends has slammed the Indian government for not doing enough to promote breastfeeding and claimed it to be the major cause for the country's high child malnutrition rate. The India Report 2008 released here on Tuesday gave India 69 out of 150 marks, a gain of one mark since 2005. Only 24.5 per cent of women breastfed their babies within one hour of birth in India, while over 90 per cent do so in western countries like Norway. India is ranked sixth among eight South Asian nations.

स्तनपान न कराने से शिशुओं को खतरा

सुषमा वर्मा नई दिल्ली

शिशुओं और बच्चों के स्तनपान व पूरक आहार के बारे में दिशा-निर्देशों का समुचित पालन नहीं होने के कारण उनका स्वास्थ्य खतरे में है। कुपोषण से अनेक बीमारियों के खतरा बढ़ रहा है।



बाल कुपोषण: अहम है महिलाओं का पोषण

बाल कुपोषण को आमतौर पर बड़े बच्चों की एक समस्या माना जाता है और इसके समाधान के लिए सामान्यतः तीन साल से अधिक उम्र के बच्चों को लक्षित किया जाता है। भारत सरकार ने हाल ही में तीन साल से कम उम्र के बच्चों के बारे में सोचना शुरू किया है।

जब इन तीन साल से कम उम्र के बच्चों को पोषण नहीं मिलता है तो यह बच्चों को भ्रष्टाचार और जीवन के आधार की समस्या होती है। लेकिन, यथार्थता यह है कि जीवन के पहले तीन साल में बाल कुपोषण की समस्या शुरू होती है।

जीवन के पहले छह महीने के दौरान बच्चे को मातृदूध का प्रतिशत 16 से बढ़कर 30 होना चाहिए।

पहले दो साल के दौरान मातृदूध का प्रतिशत 24.5 से बढ़कर 46.9 होना चाहिए।



हैंद पर से नृति न हो रही हो तो बच्चा बुरा रहे। इसलिए माताओं को बाल कुपोषण को रोकने के लिए बच्चे को जल्द से जल्द पोषण देना चाहिए। बच्चे को पोषण देने के लिए माताओं को पोषण देना चाहिए। बच्चे को पोषण देने के लिए माताओं को पोषण देना चाहिए।

Aiyar for nutrition as separate dept

Poor breastfeeding puts infant health at risk

ANIL THAKUR
Feature: Neena Bhowmik

FROM DELHI, DECEMBER 10: With India facing poverty on the front of breastfeeding, the most effective intervention to prevent child mortality in the first two years of birth, infant health continues to be at high risk in the country. The 2008 India Report-a result of World Breastfeeding Trends Initiative

and lacks the will to invest in this sector. There is no concrete policy or budget line for this activity in India. The situation is worsening in the wake of rise in food prices and the contaminated milk scandal impacting thousands of lives. India's rates for optimal breastfeeding practices continue to be dismal, shows the report which rates India at a poor 69 on a scale of

According to National Family Health Survey (NFHS) 3, only 24 per cent of newborns start breastfeeding within the first hour of birth-a practice considered essential for child's survival. Only 46 per cent of infants less than six months of age are exclusively breastfed

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infants less than six months of age are exclusively breastfed

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Objective 2: To launch the international web campaign and build global public opinion to support women and mothers.

Scientific evidence points out that there is a strong need to focus on early initiation of breastfeeding and exclusive breastfeeding for the first six months to improve child survival and quality of life. Women, to succeed in breastfeeding, need ongoing support of health care sector, community, and work place employers. However, there is gross lack of understanding or will to create these support systems for women.

Support systems need to include care of the woman during her life cycle, special care and attention during pregnancy, at birth, during the period of lactation at the level of the family, the community and the health care system, especially in terms of accessibility of skilled counselling. In addition to these systems, working women need support from employers and the state for affordable and accessible child care support such as crèches at worksite, from legal system that ensure maternity entitlements. And finally, equally important is support in the implementation of the international code to protect women from aggressive marketing tactics of the baby food industry.

The ONE MILLION CAMPAIGN, aimed at collecting initially one million signatures, was launched across the globe on 9th February 2009. The Campaign works at two levels – at the international level to strengthen international pressure to create such support systems, and at the national level to create a surge of public demand for such action. The Campaign aims to take the issues related with breastfeeding beyond policy makers, institutions, and networks and alliances of institutions, into people’s homes. It enables each person to articulate his/her support, because “my daughter, wife, aunt, mother, grandmother, granddaughter, etc. deserves this”, thus turning the personal into the political.

The campaign is a logical step after the national groups have conducted their assessments so that it can focus on key gaps and call for action to bridge these towards strengthening Infant and Young Child Feeding policy and programmes

The main instrument of raising people’s voices are petitions, which are to be signed by representatives of a wide category of professionals, service providers, managers, activists, civil society groups and individuals in their various capacities, leading to the creation of new networks, enlarging existing ones and taking the concern to areas where it does currently exist.

Alliances and networks like WABA, People’s Health Assembly and Women’s Groups and Networks are key partners in spreading the campaign with their core partners and in their constituencies especially of women, health providers and youth through their websites, their newsletters and their grassroots work. Where national coordination for follow-up advocacy with national governments and policy makers is needed in the case of national petitions, national IBFAN groups will take on this activity, resulting in the strengthening of the breastfeeding movement, as well as the role and position of the groups that take on leadership roles.

The first petition, developed after the scandal of melamine poisoning of infants in China, is addressed to world leaders, and demands stricter implementation of the International Code, better provision of maternity entitlements including baby friendly work places, and creation of national action plans with defined budgets for protecting promoting and supporting breastfeeding. The petition will be handed to national representatives at the World Health Assembly in May 2009.

Achievement of results 100% .

Activities and Results

2.1. Development of the web portal

RCO's IT Coordinator and other staff examined various web portals for their design suitability and efficacy including the services of a web-site designer group, the coordinators of AVAAZ.org and IBFAN regional coordinators and partner organisations to develop a web-portal for ONE MILLION CAMPAIGN. The portal was widely tested at each stage of development, and suggestions were incorporated to make it extremely user-friendly prior to the launch. Several challenges, such as making the text available to as many people as possible, in a variety of languages, were effectively met.

The text of the portal was developed, field tested several times with several sectors of the population, particularly with young people (potential parents and inveterate net users) for the simplicity of its message, its presentation and for its ability to draw the attention of Internet surfers. Advice was sought from people in media, in advertising and from regional coordinators and partners and their suggestions were incorporated.

The text was translated by IBFAN Regional Coordinator (LAC) into Spanish, Regional Coordinator (Francophone Africa) into French, and volunteers such as Camilla Conti and others into Italian, German and Arabic. The Arabic translation has yet to be put up on the website. Translation tools were incorporated into pages that have not yet been translated.

9363 people already joined us.

English | Spanish | German | Italian | French | Arabic

HOME CAMPAIGN RESOURCES DONATE MEDIA PEOPLE'S VOICES ABOUT US

ONE MILLION CAMPAIGN
ONE MILLION PEOPLE RAISE THEIR VOICES for
ONE ACTION -TO SUPPORT WOMEN TO BREASTFEED

About 10 million of the world's children die every year before they reach their fifth birthday. That is, over 27,000 per day, or over 1100 per hour. Of these, over a third - more than 450 - are less than a month old. Growing evidence tells us that good breastfeeding practices can save thousands of these babies.

Unfortunately, not even half the women of the world can carry out adequate breastfeeding. 135 Million babies are born every year. Only 64 million women can initiate timely breastfeeding. Only 48 million women can practise exclusive breastfeeding for six months.

ONE MILLION CAMPAIGN Support Women to Breastfeed gives you the chance to make your voice heard to support women to

ACT TODAY !

Join the
ONE MILLION CAMPAIGN

Click here to sign the petition

Tell a Friend
Click Here

Donate
Support our Work

Upload

2.2. Developing Publicity Material

RCO also developed, after designing and field-testing, a brochure, posters, book mark and stickers for ONE MILLION CAMPAIGN. This material and a folder to contain them, were distributed to IBFAN regional offices, partners, and others in the network, which agreed to launch the campaign, for free distribution at the launch. In this the RCO has been supported not just by the IBFAN network and partners but also by media persons such as the staff of the news channels of CNEB and NDTV in Delhi, and advertising agencies, who also gave comments on the text of the campaign material. (Annex-5)



2.3. Global Launch of the ONE MILLION CAMPAIGNS – February 9, 2009

The ONE MILLION CAMPAIGN was launched in India and 30 other countries, including Korea, Mongolia, Philippines and UK, on 9th February 2009. The ONE MILLION CAMPAIGN: Support Women to Breastfeed brings together people from all over the world to take action ranging from signing petitions demanding support for women to breastfeed on the website www.onemillioncampaign.org, to individual actions such as pledging to support at least one woman for breastfeeding.

International Launch in India

The Chief Guest, Shri Mani Shankar Aiyar, the Minister for Panchayati Raj (community institutions), extended his commitment to the issue. He offered to involve the Panchayat Raj Institutions in the entire process of motivating women and educating concerned stakeholders to facilitate women to adopt consistent breastfeeding practices. “Today when we talk about the importance of breastfeeding for infant survival, we are backed by solid scientific evidence to prove its necessity and efficacy. Today there are about 28 lakh (2.8 million) persons elected to Panchayats, and over 10 lakh (1 million) of them are women. They can be the best promoters, going from door to door with the message of the importance of optimal breastfeeding,” he stated. Shri Aiyer then launched the Campaign by signing the petition to world leaders.



Shri Mani Shankar Aiyar, the Minister for Panchayati Raj (community institutions) signing the petition

The audience, which was addressed by women construction workers, trade union leaders, media persons, members of the Disaster Management Committee and leading paediatricians, consisted of civil society groups, media groups, women’s groups, child health groups, medical and nursing personnel, and citizens. Speaking about the challenges faced by the poor and socially marginalized women in doing consistent breastfeeding, Dr. Arun Gupta, Regional Coordinator IBFAN Asia and National Coordinator BPNI stressed on the multi-sectoral and multiple levels of support women need to carry out optimal breastfeeding practices – from skilled counselling to proactive health systems to effective implementation of maternity entitlements, mother and child friendly communities and workplaces and quick and efficient implementation of the International Code for Marketing of Breastmilk Substitutes – the IMS Act in India.

His Excellency, Mr. Lars-Olof Lindgren, Ambassador of Sweden, who presided over the launch, informed of the support given to women to breastfeed in his country. Sweden, which ranks third in the world in the gender gap index, has very high breastfeeding rates. “This has become possible”, said the Ambassador, “because Sweden has taken steps to make it possible”. He noted

that the support given to women has to be multi-sectoral –maternity benefits that allow them to stay with the baby, health sector support to deal with any problems related to breastfeeding, child health and health of the woman, and most important, creating a societal value system where breastfeeding and breastfeeding women are highly valued.



His Excellency, Mr. Lars-Olof Lindgren, Ambassador of Sweden at the launch of One Million Campaign

Indian States launch

Many states in India did a simultaneous launch of the campaign and received excellent response from media. The states included Ludhiana in Punjab, Andhra Pradesh, Gorakhpur in Uttar Pradesh and Gwalior in Madhya Pradesh, where medical and nursing professionals, government representatives and media persons gathered in large numbers and signed the petition.

Launch in UK

The launch was organised by Baby Milk Action, IBFAN's face in UK, also which coordinates the Nestle Boycott. Mike Brady, Campaigns and Networking Coordinator at Baby Milk Action, which is promoting the campaign to its members and supporters, said: "It is very appropriate that this campaign is launched today in India as this is a country which has been at the forefront of tackling aggressive marketing of breastmilk substitutes and has seen the benefit, but breastfeeding rates remain too low and infant mortality rates too high. Mothers everywhere deserve our support. Here in the UK, 9 out of 10 mothers who stopped breastfeeding before their child was 6 weeks old said they wanted to breastfeed for longer."

Launch in Mongolia

ONE MILLION CAMPAIGN was launched at the first maternity hospital in capital city of Mongolia. More than 40 health professionals and representatives of mothers attended. Vice-Minister Dr. J.Tsolmon gave a speech and visited to the maternity wards, meeting with mothers and discussing about breastfeeding. All the participants signed the petition.

Launch in Korea

Consumers Korea's launch ceremony was attended by around 16 high level representatives from 10 civil and medical associations, 2 representatives of local government, representatives of Ministry of Health Welfare and Family Affairs (MHWFA), UNICEF Korea, academicians and several people from the mass media. Civil organisations represented included the Korean Breastfeeding Promotion Network, among others.

In addition, the MFWFA has agreed to support the ONE MILLION CAMPAIGN. Ms. Chun, Haihee, the Minister, signed the petition.

Launch in Philippines

Over 17,000 people have already signed the petition in Manila on paper when the campaign was launched there.

One Million Campaign Launch in Different Places



City's yummy mummies lag behind in breastfeeding: study

EXPLAINS WHY SERVICE
EXPLANATION: TERM: ONLY
 BREASTFEEDING habits among the women in the district are poor, a study conducted by the National Family Health Survey (NFHS-III) has revealed. The study also points out that the women in the district are not aware of the benefits of breastfeeding for the first six months. According to the study, the women in the district are not aware of the benefits of breastfeeding for the first six months. The study also points out that the women in the district are not aware of the benefits of breastfeeding for the first six months.



The representatives at the launch of 'One Million Campaign' to promote breastfeeding.

show delay or lack of care, due to household chores, the urban women have their own set of problems. The working women are more likely to be employed in the informal sector, which is not as secure as the formal sector. The study also points out that the women in the district are not aware of the benefits of breastfeeding for the first six months.

Both the aspects of breastfeeding — initiation within the first hour of the birth and exclusive breastfeeding for the first six months — are highly important, adds Dr. Gaitik, who is also the coordinator of IFNS in the district and a national trainer for infant and young child feeding. Malnutrition of breastfeeding lacks among women for various reasons including family traditions, he says. The low level of breastfeeding habits are evident from the fact that the state has the third lowest figures, after Uttar Pradesh and Bihar, when it comes to initiation of breastfeeding habits among women.

Aiyar launches breast feeding campaign

BY OUR CORRESPONDENT
 NEW DELHI

Feb. 9: More than 10 lakh women panchayat leaders will create awareness among rural womenfolk on the benefits of breast feeding, panchayat raj minister Mani Shankar Aiyar said on Monday. While kickstarting the "One Million Campaign" to promote breast feeding initiated by International Baby Food Action Network (IBFAN), the Union minister described the rising percentage of infant deaths and malnutrition among rural areas as "shameful".

will train women panchayat leaders on the ill-effects of "formula food" which has been gaining popularity due to aggressive marketing tactics of these companies. The only institution which has high levels of penetration in rural areas is panchayat and gram sabha. So who better than women panchayat leaders to take these messages to the people," he said. Dr. Arun Gupta who is spearheading the campaign said superstitions, myths, tradition, lack of family and societal support prevented women from breast feeding their new-borns resulting in

high infant mortality. Women working in construction sites too narrated their experience with working and breast feeding and narrated the hurdles they faced from their employers in fondling their new-borns at work. The campaign had the medical diaspora calling upon politicians and policy makers to implement the labour laws protecting interests of working pregnant women in the organised sector and formulate new laws for those women working in the unorganised sector. The campaign aims at reaching out to hospitals, doctors and healthcare workers.

2.4. Impact

Extending the outreach of the Campaign using social networking sites

The ONE MILLION CAMPAIGN has moved beyond the web-portal. RCO, IBFAN partners such as Baby Milk Action, and volunteers attracted by the web-portal from countries such as Australia and US have used social networking sites such as Facebook, MySpace and Orkut to create groups, causes and send mail to attract attention to the ONE MILLION CAMPAIGN and get people to sign the petition. The posters designed by the RCO and put up on the web-portal have already been downloaded by other groups and individual bloggers and put up on their sites. RCO has designed banners and buttons that other websites can use to promote the campaign.

Offline signatures

Given that several people in Asia, Africa and Latin America do not have access to Internet, RCO has initiated an offline signature campaign to reach the message for raising voice to support women to breastfeed to every community. RCO has designed a letterhead for the campaign, and hard copies of the petition printed on this sheet are being used to collect signatures. Philippines has already collected 17,000 signatures. As mentioned earlier, the Korean Minister for Health, Welfare and Family Affairs, also signed a hard copy of the petition. These signatures will be incorporated into the portal by the RCO.

Reaching out to students

Young women and men, who are potential parents, need to raise their voice to demand support for women to breastfeed to make the campaign effective. To this end, RCO has designed a set of posters which are appealing to the young and developed a letter to college principals/administrators, explaining the need for the campaign and asking them to put up the posters on their notice boards prominently.

Reaching out to celebrities

Recognizing that celebrities are role models and icons for millions of youngsters, who are the potential parents of tomorrow, RCO has designed a letter to request celebrities to endorse the campaign.

Close cooperation between media and the RCO

The India launch saw a new collaborations and cooperation with media. The New-Delhi based Centre for Advocacy Research, a media organisation, worked closely with the RCO to develop contacts with the press, identify celebrities who could be associated with the campaign, and develop presentation material for it.

India's leading Hindi News channel – Complete News and Entertainment Broadcast (CNEB) – has been the RCO's media partner. The channel designed 30 sec spots to beam throughout the day of the launch, and covered the launch ceremony in its broadcast. It has also taken up the issue of low breastfeeding rates in the country as an important program issue to be highlighted regularly. It has also agreed to participate fully in an India-specific campaign to improve breastfeeding rates as well as support to breastfeeding women. A live telecast on the ONE MILLION CAMPAIGN was done on the channel on 13th February 2009 in which RCO representative gave a detailed explanation of the issues involved in supporting women to breastfeed.

Close interaction between the government and IBFAN

The presence of the government at the launches at various countries shows clearly how the ONE MILLION CAMPAIGN has strengthened IBFAN's voice with policy makers. In Mongolia and Korea, the government has become an important stakeholder in the ONE MILLION CAMPAIGN. In India, the Minister of Panchayati Raj (local institutions of self-governance) has reiterated his commitment to take action before the elections to promote breastfeeding. He has placed the entire team of women Panchayat leaders, with access to every home in every village, numbering more than a million, as potential raisers of awareness on optimal infant and young child feeding. The Breastfeeding Promotion Network of India, which hosts RCO in Delhi, is now in the process of negotiating with the bureaucrats in the Ministry on how to take advantage of the Minister's offer.

The final Launch Report is pending, waiting for reports from all countries that participated in the launch to arrive.

2.5. Leverage: The ONE MILLION CAMPAIGN- Support Women to Breastfeed www.onemillioncampaign.org have given an opportunity for local action everywhere.

Objective 3: Facilitating and supporting programmes for increasing health workers skills (using the “3 in 1” training programme).

The need for developing specialist counsellors on infant and young child feeding counselling including HIV and infant feeding and lay counsellors trained in breastfeeding counselling has not only been spelt out by UNICEF and WHO, but has also been highlighted by the World Breastfeeding Trends Initiative national assessments and at the South Asia Breastfeeding Partners Forum 5 held in Bhutan in 2008. BPNI, the national host of IBFAN Asia RCO, in partnership with UNICEF and governments of Indian states has developed a unique world-class training programme with its reach right up to family level. This is the “Infant and young child feeding counselling, A training Course, the 3 in 1 course (integrated course for breastfeeding, complementary feeding and infant feeding and HIV counselling). This 7-day course is a combined version of 3 courses on the subject provided by WHO and UNICEF.

The programme has also developed a 3 -day course on breastfeeding and complementary feeding for family level workers.

Achievement 100%

Activities and Results

3.1. Support to a training cell to facilitate the ‘3 in 1’ to organise and facilitate training.

A training cell has been formed at Gorakhpur (Gorakhpur Medical College) headed by Dr. K.P. Kushwaha. The Cell provides support for regional and International training.

3.2. The training cell at Gorakhpur has supported by organizing trainers, personnel and material

- Training of trainers carried out in March, April, June and November, resulting in the creation of 23 national trainers.
 - The training at Haryana was organised by BPNI coordinator, Haryana in collaboration with the Government of Haryana



- Training of Trainers for ICDS in Rajasthan organised by BPNI coordinator in Rajasthan, to train trainers for the Integrated Child Development Scheme in the state; the ICDS is one of

the largest public sector child health, nutrition and development schemes in the world, and community education in IYCF is one of the tasks of its frontline workers.

- Almost 200 middle level trainers have been prepared through 6 courses held in **Ranchi, Hindupur, Ludhiana, Rohtak, and Patiala**



- Training IYCF counselling specialists for State Dept. of Women and Child Development in Andhra Pradesh. The BPNI coordinator in Andhra Pradesh is working closely with the state WCD Dept. to train IYCF specialists using the one-week module developed by IBFAN Asia. The training cell provides support for this.
- In addition, the training cell has supported six training courses held at **Rohtak, Tamil Nadu, Delhi, Lucknow, Hindupur, and Gwalior** to prepare 156 IYCF specialist counsellors.

3.3. Training Trainers in Punjab.

The Punjab Government has approached the RCO for training of trainers in the state. The training will be organised and coordinated by the training cell at Gorakhpur.

3.4. Support for training in Nepal

RCO has supported a training programme for IYCF counsellors in Nepal financially.

3.5. Setting up Specialist Google group

RCO has set up a Google group for IYCF specialists who have undergone the IBFAN Asia training to increase communication amongst them. This group provides members with special and effective means of knowing who is available when for organizing training schedules and keeps them up to date with the latest advances in IYCF as well as training methodologies.

3.6. Updating training material

The training cell of the RCO continuously revises and updates the training material based on feedback from trainings organised, latest scientific developments and research findings.

3.7. Translating training material

RCO and its training cell have successfully translated the training material into two Indian languages – Punjabi and Telugu. The process is being initiated for other languages as and when requests come in.

3.8. Supporting the evaluation of an intervention project to enhance exclusive breastfeeding.

RCO supported an independent evaluation of the project initiated by Medical School in UP in Lalitpur District. It has been a successful exercise and revealed several positive gains of the work done. The report has been effectively used for advocacy. (**Annex-6**)

3.9. Impact

RCO's focus and advocacy for skilled counselling in IYCF over the past years is now paying dividends internationally and nationally, especially in India, where states are fairly autonomous in deciding the training priorities for their frontline workers. As scientific evidence increases about the importance of breastfeeding to child survival with health, the findings of the National Family Health Survey – 3 (2006) have highlighted the dismal performance of states in this context, thus making skilled counselling a priority issue for many of them. RCO's and BPNI's continuous advocacy for training is now vindicated, and several states are now coming up with requests for training of their front line workers as well as of trainers. Requests are also coming from other countries, like e.g. Yemen is already developing a programme to conduct this training and IBFAN Asia trainers will lead it.

Objective 4: Strengthening HIV and Breastfeeding working group in Asia

Infant feeding in HIV positive women requires an enhanced attention to implement international guidelines in the Asian countries. IBFAN Asia is attempting to highlight the importance of the issue and to contribute in strengthening technical inputs on the subject.

Achievement 100%

Activities and Results

4.1. Continuous, functioning working group on HIV and breastfeeding coordinated by the regional office and setting up of Google group

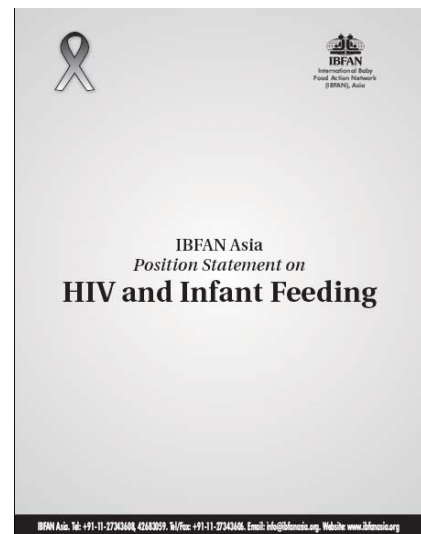
The IBFAN Asia working group on HIV and Infant feeding continued to work this year also. The group has expanded to 19 members from different countries of the region and some international experts from other regions. The group interacts on a Google group titled IF HIV IBFAN ASIA GROUP with a URL - <http://groups.google.co.in/group/ifhivibfanasiagroup>. Working group members were regularly sent important documents and research studies electronically. RCO also communicate with international organizations like WHO and WABA about the technical issues on the subject. The RCO also act as a resource centre for providing documents on the subject to researchers and policy makers.

4.2. Documents developed

RCO has held discussions and has been instrumental in developing the updated version of “the IBFAN Asia position statement on HIV and infant feeding” based on recent research evidence including WHO HIV and Infant Feeding Technical Consultation., The position statement was released by the health minister of Royal government of Bhutan during the 5th South Asia Breastfeeding Partners’ Forum. RCO has also developed another policy document titled “ Call to Drop Mixed Feeding” and has coordinated the process of writing, reviewing and editing of both the documents. (Annex-7,8)



H.E. Lyonpo Zangley Dukpa, Hon'ble Minister of Health releasing the “IBFAN Asia Position Statement on HIV and Infant Feeding”



4.3. Dissemination of policy documents prepared by IBFAN Asia

RCO has been disseminating policy documents prepared by IBFAN Asia to the policy makers, professional organizations, UN agencies, Government agencies and breastfeeding groups in the region.

4.4. Technical advice to organisation

Through the reporting period, networking with government agencies like National AIDS Control Organization in India has been conducted on a regular basis.

4.5 Impact

The impact of RCO's work has been felt at various levels and reflected in following activities;

- **Inclusion of HIV in the 6th South Asia Breastfeeding Partners' Forum/One Asia Breastfeeding Forum:** The sharing of the IBFAN Position Paper on Infant Feeding and HIV and the Call to Drop Mixed Feeding highlighted the importance of breastfeeding during HIV, and the points that need to be taken care of. This importance has been reflected in the agenda of the 6th South Asia Breastfeeding Partner's Forum/ 'One Asia Breastfeeding Forum' to be held in Sri Lanka in 2009, which includes these issues.
- **The national AIDS control organization of government of India has taken note of the importance of the issue and has constituted a technical expert group for HIV and infant feeding policy, RCO has been duly represented in this group. A consultative meeting of the group has already been held.**

Objective 5: Increasing effectiveness of IBFAN in strengthening the breastfeeding movement and inputs at regional and international level

BPNI, the host of IBFAN Asia, has been functioning as the regional coordinating office for South Asia since 1998 and of Asia since 2002. Its responsibilities include strengthening the regional network and coordination of all actions in relation to planning and implementation, review and evaluation. Technical assistance on child health and survival, HIV and breastfeeding and other related issues are its major work to support partners. Networking and building capacities for national groups and governments is another. IBFAN Asia hosts a website and web portal for the WBTi. Another website portal on 'World Breastfeeding Movement: ONE MILLION CAMPAIGN' was added during the plan 2009-2013.

For its effective functioning IBFAN Asia has a support secretariat, with responsibility to assist the regional coordinator on programme, review, planning and donor reporting and documentation. Fundraising is one of the core responsibilities of the Asia RCO.

It's new work includes development and maintenance of the web-based software to manage the World Breastfeeding Trends Initiative to track the progress of implementation of the global strategy for infant and young child feeding worldwide, launch of [worldbreastfeedingmovement.org/ONE MILLION CAMPAIGN-](http://worldbreastfeedingmovement.org/ONE_MILLION_CAMPAIGN-) Support Women to Breastfeed www.onemillioncampaign.org and to generate public opinion for support to women on breastfeeding. For this campaign a woman IT professional has been working full time to develop the campaign apart from part time consultants from outside, and a full time woman campaign coordinator works on the design, development and dissemination of the campaign.

The RCO has a resource centre that publishes a newsletter to share information and update its contacts (more than 600). RCO is also responsible for contributing to the regional and the global agenda on child health and nutrition and participates in regional and international meetings to advocate for implementation of the global strategy for infant and young child feeding as well as other issues related to Code. It also coordinates the participation of sub-regional representatives in international policy guidance meetings of IBFAN every alternate year. Regular communication through SKYPE or using other channels, answering emails enquiries, writing regional and national advocacy articles, and meetings with parliamentarians and ministers, policy managers and other high profile individuals are among ongoing works that the regional coordinator does for enhancing support to breastfeeding programmes. RCO coordinates to develop a yearly regional plan through a consultative process, which also helps to internally monitor and evaluate. Asia also plans to have an independent evaluation in 2011/2012. As BPNI, the host of the RCO is also the regional focal point of WABA, there is close cooperation and synergy created between the three networks.

In addition to the above tasks, the RCO has been playing an important role in advocacy to protect infant and young child feeding through prevention of conflict of interest at the international, regional and national level, including both governments and civil society groups. This advocacy has included several issues which impact optimal infant and young child feeding, such as national policies related to the Integrated Child Development Scheme in India, development of National

Child Health Policy in India, public private partnerships in health and nutrition in India and internationally, changes in standards related to infant and young child feeding at Codex Alimentarius Commission, the role of international agencies such as Global Alliance for Improved Nutrition and UNICEF, WHO, FAO, etc. in protecting, promoting and supporting breastfeeding, and so on.

Achievement more than 100%

Activities and Results

5.1. Regional operational plan was developed for 2008

RCO coordinated with IBFANers in the Asia region to develop a regional plan for 2008. This plan has subsequently been executed.

5.2. Resource centre strengthened, regional newsletters, technical updates developed and disseminated.

The Resource centre has been bringing out technical updates and newsletters and disseminating them to policy makers, IBFAN and BPNI networks and partners like WABA. Civil society groups in India have also been receiving this material.

5.3. Websites are updated regularly.

The RCO has the charge of maintenance of several websites.

5.4. IBFAN ASIA and BPNI websites. The IBFAN ASIA and BPNI websites are updated on a regular basis. As new websites/portals are added, they also are updated regularly.

WBTi website improved and made more users friendly, and updated.

The WBTi web portal has been further developed and will now be reflecting the new assessments findings being conducted in 51 countries. As the results come in, they are verified and are being put up on the portal, which generates maps and graphs for easy comparisons with past data and/or with other country/regional data. This ongoing daily task is being executed successfully.

ONE MILLION CAMPAIGN Support Women to Breastfeed portal developed and made operational.

The ONE MILLION CAMPAIGN Support Women to Breastfeed PORTAL, called www.onemillioncampaign.org, was developed over the year with inputs from regional offices, partners and organisations skilled in web petitions such as AVAAZ.org. The portal was designed with the help of external website development specialists to make it user friendly, and includes features such as “sign the petition” online, “tell a friend” to increase the number of supporters of the World Breastfeeding Movement, an automatic database creation, automatic replies to those who sign the petition, counters that inform viewers how many people have signed the petition, translation tools for languages in which pages have not yet been translated, facilities where people can upload their news/experience/information about breastfeeding, resources for media, RSS

feeder, etc. The text was developed with considerable coordination with IBFAN groups and partners, to generate interest in the reader. The text is now available into 5 languages which have been given separate pages in the website; it has further been translated into more languages, which will shortly be put up on the portal. The portal also has the facility to generate data not just on how many have signed, but how many have responded through “tell a friend”, how many are from which regions, identify the hours when most signing is done, and so on. This data will assist in developing further petitions and campaigns to make them even more effective.



<http://www.bpni.org>



<http://www.ibfanasia.org>

5.5. State of India’s Breastfeeding Report published in 2009

The India assessment of WBTi has been published and disseminated. The reports from other countries are arriving. A template has been prepared for making the report and the report card, so that countries can utilise these for their report. The entire exercise of assessment and reassessment after three years will be compiled into the State of the World Breastfeeding Report to be published in 2011/12. (<http://worldbreastfeedingtrends.org/report/WBTi-India-Assessment-Report-2008.pdf>)

5.6. International and national advocacy to protect, promote and support breastfeeding

National advocacy

- Meetings with Planning Commission and Prime Minister’s Office to including breastfeeding support, protection and promotion.
- Regional Coordinator and the other staff representing RCO met with members of Planning Commission including the Dy. Chairman, Sh. Montek Singh Ahluwalia to press for inclusion of protection, promotion and support of breastfeeding in the 11th plan. To this end the Regional Coordinator also met with the Prime Minister and liaised with the Prime Minister’s Office (PMO).

5.7. Meetings with Civil Society Organisations

- RCO representative met with the National Coordination Committee in January and June 2007 to impress upon the NCC the need to exert pressure on the government to protect, promote and support breastfeeding and take up issues related to conflict of interest that would undermine breastfeeding.

- Regional Coordinator also attended the Jan Swasthya Abhiyan (People’s Health Movement, India) Convention held in Bhopal in March, to appraise the movement of the status of breastfeeding in India and the challenges that impact breastfeeding rates.
- Meeting with Planning Commission and Prime Minister’s Office to promote IYCF in the Integrated Child Development Scheme.
- The Regional Coordinator and one staff representing RCO were inducted into the Working Group for Children Under Six, a working group jointly representing the Right to Food Campaign and Jan Swasthya Abhiyan (People’s Health Movement, India). Together with representatives of civil society organisations, who were members of the Working Group, they met several times with the Planning Commission and liaised with PMO to include IYCF in national plan of action.

5.8. Bringing out publication

At the request of the Dy. Chairman of the Planning Commission, the Working Group brought out a paper Strategies for Children Under Six: A framework for the 11th Plan. This was printed and circulated widely, and an edited version appeared in the Economic and Political Weekly. The paper states a common understanding based on field experiences and academic research. It builds on four complementary interventions: (1) ‘Universalisation with quality’ of the Integrated Child Development Services (ICDS); (2) crèches and day-care facilities; (3) maternity entitlements; and (4) support for “infant and young child feeding” (IYCF), particularly breastfeeding. **(Annex-9)**

5.9. Protest against Conflict of Interest

As part of the action to raise awareness about conflict of interest in the context of breastfeeding and IYCF, the Working Group organised a silent protest at a meeting of Global Alliance for Improved Nutrition (GAIN) that was promoting relations with industry including baby food manufacturers in contravention of the IMS Act. More than 20 civil society organisations participated in the protest, and Regional Coordinator answered the questions raised by the invitees to the meeting regarding the need and objectives of the protest as well as about conflict of interest.



5.9. Bal Adhikar Sammelan (Child Right’s Convention) and Public rally

On 2nd September 2008, over a thousand people, representing grassroots organisations, state chapters of networks such as Jan Swasthya Abhiyan (Peoples’ Health Movement-India), Right to Food Campaign, Breastfeeding Promotion Network of India, FORCES, Human Rights Law Network, National Federation of Indian Women, Anganwadi Workers Unions, etc., from 15 states including Tamil Nadu, Orissa, Bihar, Rajasthan, Uttar Pradesh, Uttarakhand, Madhya Pradesh, Delhi, Punjab, Haryana, Chattisgarh, Andhra Pradesh and Gujarat, gathered and held a rally in Delhi ,the capital of India to press long standing demands for better services for their children in

the context of the 'new' 11th five year plan of Government of India . The rally and the public meeting, organised by the Jan Swasthya Abhiyan and the Right to Food Campaign through the joint Working Group for Children under Six was a reaction to the government's failure to comply with the orders of the Supreme Court of India for universalizing ICDS with quality.

At the 'Bal Adhikar Sammelan' (Child Rights Meeting) held in the lawns of V.P. House, Anganwadi workers (village level workers) Panchayat representatives (the local self government), Accredited Social health activists (ASHAs) and grassroots workers, spoke, through songs, slogans and stories of their anger and despair of the state of their children, and the state of the anganwadis that were meant to support the critical age group of children under six.. Anganwadi workers, mothers, NGO activists all came up to the stage to say why they wanted good Anganwadis, children should get cooked food, and how education benefits children, how women became empowered when they became part of the CSO work. Women spoke of the need for safe crèche facilities where they could leave their children when they went to work. The tangible achievements of anganwadis in Tamil Nadu were also highlighted to show that where political will exists, much could be done within the system to improve care for children under six.



The Regional Coordinator described how commercial interests were trying to interfere with policy making, and attempting to replace hot cooked meals at Anganwadis with packaged food, a direction contravention of the Supreme Court orders. He also described how commercial interests were trying to interfere with policy making, and attempting to replace hot cooked meals at Anganwadis with packaged food, a direction contravention of the Supreme Court orders.

After the meeting people dispersed in groups to reassemble at Jantar Mantar for the rally. The rallyists laid out the huge lengths of cloth that carried over a thousand signatures, on the road. The lengths were subsequently handed over to the Prime Minister along with the demands, which were read out in English and Hindi, and endorsed by the people. A small group of five persons, representing various states, was allowed into the PM's office to present the Charter of Demands and the Statement by the working group on 'Public Private Partnerships in the area of Infant and Young Child Feeding and Nutrition'. (Annex-10,11)

The demands included ‘universalisation with quality’ of the ICDS, crèches and day care facilities, maternity entitlements, support for “infant and young child feeding” (IYCF), particularly breastfeeding.

5.10. Advocacy with Prime Minister for hot cooked meals

The Sammelan and Rally were followed by a letter to the Prime Minister, drafted by the Regional Coordinator and endorsed by more than 20 representatives of civil society organisation and the Commissioner of the Supreme Court Commission for Food Rights. The letter urged the Prime Minister to check any move to introduce centrally produced packaged foods in the ICDS system. **(Annex-12)**

5.11. Advocacy with UNICEF to prevent conflict of interest

The Working Group, including the Regional Coordinator, met with UNICEF representatives several times to raise the issue of conflict of interests and to devise a strategy to prevent it from impacting IYCF.

5.12. Advocacy with young Parliamentarians

The Regional Coordinator met with young parliamentarians several times to impress upon them the need to raise awareness for support, protection and promotion of breastfeeding. He made presentations to them to explain the issues. **(Annex-13)**

5.13. Meetings with National Commission for Protection of Child Rights

The Regional Coordinator met with Dr. Shantha Sinha, the Chairperson of NCPCR to inform her of the status of breastfeeding in India, the challenges that impact breastfeeding and need to strictly implement the IMS Act. RCO is advocating that the NCPCR take on the task of implementation.

5.14. Advocacy with women’s and child care groups

As part of the ONE MILLION CAMPAIGN, the RCO has networked with women’s groups and child care groups to include demand for support for breastfeeding in national programmes such as ICDS and National Rural Employment Guarantee Scheme, and to expand the provisions related to child care in the National Rural Employment Guarantee Act to cover support to women to breastfeed and practice optimal IYCF.

5.15. Involvement in preparing alternate CRC Report for India

The RCO has networked extensively in the preparation of the alternate CRC report for India, and has given huge inputs related to IYCF. **(Annex-14)**

5.16. Legal interventions

As part of the Right to Food Campaign, BPNI, which hosts IBFAN, filed a petition, drafted by the RCO, at the Supreme Court as part of the ongoing Public Interest Litigation on right to food. The petition demands that the government develop an action plan for IYCF, and create a separate budget head for protection, promotion and support of breastfeeding.

5.17. Advocacy with Policy Makers at the Health and the Panchayati Raj Ministry

The Regional Coordinator and other staff of RCO have been consistently meeting with officials from the two ministries to impress upon them the need for supporting optimal IYCF, especially breastfeeding practices. Several papers were developed at the request of the ministries. The Regional Coordinator's interventions at the Ministry of Health and Family Welfare in the context of the Child Health Policy have led to an increased role of IYCF in policy, as well as to an examination of the conflict of interest issue.

The current Minister for Panchayati Raj, Sh. Mani Shankar Aiyer, is taking keen interest in breastfeeding, and BPNI, the hosts to RCO, are working closely with the ministry officials to devise ways in which the BPNI network and the Panchayati Raj Institutions can be made to work together to improve awareness on early and exclusive breastfeeding and optimal complementary feeding practices in the villages of India.

5.18. World Breastfeeding Week (WBW) 2008 celebration in India

BPNI the host of RCO has been the leading agency in India since 1992 for initiating work on WBW. This year also it raised a local voice through mobilizing hundreds of groups who took out local rallies and called for action through submissions of petitions. As many as 85 reports have reached office.



5.19. International advocacy

January: Meeting with the evaluation team of Sida in Stockholm

The Regional Coordinator met with the evaluation team of Sida in Stockholm to provide inputs and discuss about future funding opportunities with Sida.

February: Meeting with the PM of Norway

- As part of the visit of the PM of Norway to India, RCO worked with NIPI and, through its host BPNI organised a Health Camp in a village in Rajasthan; PM of Norway visited the BPNI booth and held discussions on breastfeeding and its role in child survival. (**Annex-15**)



Mr. Jens Stoltenberg, Prime Minister of Norway visit BPNI booth



Ms. Trude Måseide - Head of Communications Prime Minister's office and Ms. Hilde Singsaas - State Secretary (Deputy Minister) Norwegian Prime Minister's Office visit BPNI booth

- South East Asia Regional Scientific Meeting of Epidemiology at Bangladesh .The Regional Coordinator gave the Key note address at the meeting, highlighting the role of universalised optimal IYCF in preventing infant and young child deaths and malnutrition.

June: WBTi orientation and training workshops

The Regional Coordinator and another staff Dr JP Dadhich conducted orientation in Geneva in June and prepared LAC, Africa to launch the WBTi.

August: RCO conducted training for 11 countries of Asia and South East Asia in Bangkok. As some of the participants were from governments, they were appraised of the need to assess the status of breastfeeding in their countries and how to go about identifying gaps in implementing the Global Strategy and prioritizing action to bridge the gaps. They were also introduced to issues related to conflict of interest and the need for strict implementation of the International Code for marketing of breastmilk substitutes.

September: Similar trainings were held in Latin America (Costa Rica), and Africa, where once again several participants were from the governments of the countries participating.

In September Regional coordinator was invited to speak in the international seminar on nutrition by Norway, organised by the Department of Health, Norway and Norad. He was able to make significant contribution in this important landmark event of Norway, for enhancing support to nutrition particularly for breastfeeding. **(Annex-16)** It led to summary findings with following highlights

There is ample and convincing evidence on the interrelationship between food intake, nutritional status, health, disease and development in infants and children

2. Combating and preventing stunting and undernutrition in infants require both immediate action as well as long-term sustained action, on country level and on an international level

October: South Asia Breastfeeding Partners Forum 5

RCO supported the South Asia Breastfeeding Partner’s Forum 5 hosted by Ministry of Health Royal Government of Bhutan in October, and once again focused on the need for planned and budgeted action to implement the Global Strategy and raised issues related to conflict of interest.

IBFAN Policy Meeting

November: Regional coordinator carried out orientation in Egypt for Arab World groups on WBTi.

- a. The Regional Coordinator took part in November: in the IBFAN’s policy meeting held at Egypt; and the orientation of the Arab world groups on World Breastfeeding Trends Initiative (WBTi) was conducted at the same time.
- b. The 40th Session of the Codex Committee on Food Hygiene (CCFH) Dr. J.P. Dadhich, representing RCO, attended this meeting as part of the IBFAN delegation, at Guatemala, from December 1st to 5th, 2008. The meeting discussed a variety of issues related with the food hygiene. The process highlighted the following factors:

- a. The decisions are taken on the basis of interventions by some countries that come prepared with certain objectives others remain either silent or give some off hand comments.
- b. Developing countries, where most of the child malnutrition, morbidity and mortality is taking place are either conspicuous by their absence or do not put forward their case more emphatically.
- c. Governments from the South Asia were missing altogether and others were taking decisions, which will certainly impact them since they house most of the malnutrition and mortality.
- d. The CC while taking decisions does not address the issue of COI as evident from presence of industry in the official delegations of many influential countries.
- e. There was a stark contrast in the whole debate reflected in the denial to include standards for ES and at the same time asking the care givers to become more responsible to maintain the hygiene while preparing the formula (to avoid ES infection).
- f. The role of the observer organizations seems to be only marginal in the whole process (in spite of their spirited fight) as writ of the member countries is final.
- g. In the whole discussion, the onus of safely feeding the child remained on the consumer. Industry's responsibility to provide a safe product was overlooked.
- h. There is a vital need to strengthen advocacy at national level. Governments need to be more proactive in safe guarding the interest of the children and preventing conflict of interest.

5.20. Improved coordination and communication within the region

The RCO has focused on improving coordination and communication in not just the South Asian region, but also in the Asian and Southeast Asian regions as well. This has been done through setting up of Google groups so that all members can communicate with one another easily. The group has helped members to share experiences and learn from one another.

5.21. Media workshops

RCO has consistently educated media on the importance of breastfeeding. A media workshop was held at Barog, Himachal Pradesh, in May 2008, bringing together media representatives from several national and regional papers to discuss and understand various issues related to optimal IYCF and the challenges to optimal breastfeeding. The workshop resulted in raised awareness and coverage of issues related to IYCF.

RCO has also been working with individual journalists of weeklies and fortnightlies, as well as TV news channels and internet-based news services to raise consciousness about IYCF and in particular, issues of conflict of interest related especially to complementary feeding and malnutrition.

5.21. Assisting WABA in developing position statement on PPPs and on complementary feeding

5.22. Impact

The impact of RCO's work has been felt at both the national and the international level.

Impact at national level

Civil Society organizations: As part of the Right to food Campaign, the coordinating committee of the Jan Swasthya Abhiyan, and now the Working Group for Children Under Six, RCO has been able to carry civil society with it on issues of breastfeeding, IYCF and conflict of interest. In this context, several petitions and position statements were developed on these issues, and were endorsed by leading civil society members including the Commissioner of the Supreme Court commission on food rights. These petitions and position statements have been submitted to the policy makers and the Prime Minister.

RCO's activity with women's groups in the context of NREGA and child care groups in the context of the alternate report on CRC for India has strengthened the network as well as reinforced the importance of supporting women to breastfeed.

Policy Makers

- ❖ Repeated interventions and advocacy have resulted in the formation of the Prime Minister's National Nutrition Council, of which the Regional Coordinator of IBFAN Asia is a key member. (**Annex-17**)
- ❖ The RCO has been successful in interacting with policy makers in the Ministry of Health and Family Welfare and the Ministry of Panchayati Raj. In the case of the latter ministry, the Minister himself has shown keen interest in the issue, and is keen to work with the host organisation BPNI to take knowledge of optimal breastfeeding practices to every home in villages through Panchayati Raj institutions. The Ministry of Health has included support for optimal IYCF practices in its draft Child Health Policy as a result of these interventions.
- ❖ The interventions and persistent advocacy by RCO at the Planning Commission are reflected in the importance given to breastfeeding in the 11th Plan document. The document clearly mentions the need for early initiation of breastfeeding, exclusive breastfeeding for six months, continued breastfeeding thereafter for at least two years along with introduction of adequate and appropriate complementary foods, the role of breastfeeding in preventing vitamin A deficiency in infants, the need for adequate training of field staff in IYCF counselling and support for timely initiation of breastfeeding, the need for maternal benefits and crèches at worksites to assist women carry out optimal breastfeeding practices.
- ❖ RCO's interventions and dissemination of information on Infant Feeding and HIV have resulted in the drafting of new norms at the national level by NACO.

Media

The media has been extremely responsive to the efforts of RCO in spreading awareness of breastfeeding. The release of the India report of the WBTi assessment was covered in detail by

several leading national and regional dailies.

The media has also played a significant role in raising awareness of the people on the ONE MILLION CAMPAIGN.

International

- RCO has made several interventions at the national level, through discussion and communication with IBFAN members globally. These include interventions at the World Health Assembly, at the SCN and at Codex meetings. Impact on donor governments like NORAD is also significant towards positioning nutrition in the development agenda.
- RCO has also been instrumental in developing the IBFAN position paper on Infant Feeding and HIV.
- The WABA position papers, which were drafted with huge inputs by the Regional Coordinator, have informed UN Agencies, particularly WHO and UNICEF about the need to stress continued breastfeeding from 6 months to 24 months and more, as well on PPPs in health and nutrition.
- The involvement of several governments in Asia and Africa in the WBTi training programmes and then in the assessments has raised the awareness of the importance of breastfeeding in these countries.
- The ONE MILLION CAMPAIGN has served to bring several child care and breastfeeding networks closer to IBFAN Asia. The campaign has become the instrument for taking breastfeeding issues to the common person through the use of web-based petitions, and several individuals are now adding their voices to the demand that women be supported to breastfeed.

Objective 6: To stimulate people's action in code implementation and monitoring of Global Strategy for Infant and Young Child Feeding at national level

The batch of countries to participate in the WBTi in 2008-2009 include Philippines, Malaysia, Vietnam, Laos, Indonesia, and Thailand. The launch of the ONE MILLION CAMPAIGN is expected to take the message of supporting women to breastfeed to policy makers, employers and employees. IBFAN Southeast Asia representative has been involved in ongoing advocacy and support at national level in these countries.

Achievement 100%

Activities and Results

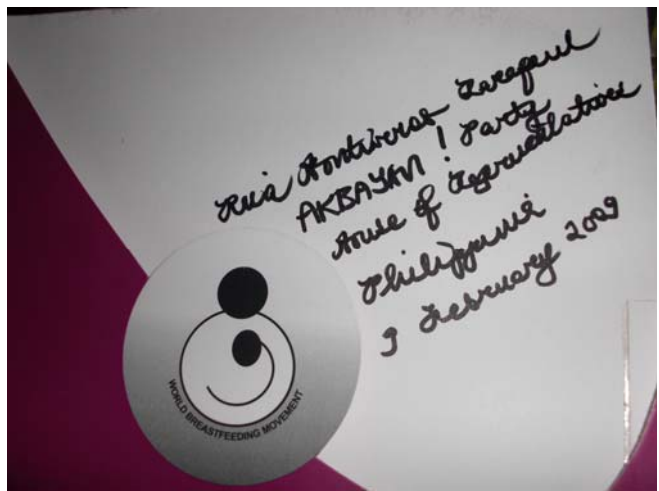
6.1. Training

Six countries from South East Asia and five from East Asia participated in the training at Bangkok for WBTi assessment. The South East Asian countries, which formed the first batch who received such training were Indonesia, Lao PDR, Malaysia, Philippines, Thailand and Vietnam. Several of the countries had government representation. Workshop led to detailed understanding of indicators and their sources. The IBFAN coordinator for the region coordinated the national assessments and is helping RCO with verifying the data sent by the country coordinators of the exercise.

The training on conflict of interest was combined with the Training on WBTi. A presentation was made to showcase current trends of having PPPs and new way of working of philanthrocapitalism through the example of GAIN and its relationship with UNICEF, renowned Nobel Laureates, and Infant formula companies like Danone. The presentation and various documents that were shared evoked a huge response and alerted the group about how poor countries are being pressurized to introduce market products for infant and young child feeding.

6.2. "ONE MILLION CAMPAIGN"

RCO introduced the ONE MILLION CAMPAIGN (www.onemillioncampaign.org), a new and innovative web based campaign seeking support to women to breastfeed. The Campaign seeks to bring youth on board by using the web as a major vehicle for signing petitions demanding support for women in order to make them successful in breastfeeding. However the campaign attempts to reach people who cannot access the web, as shown by the experience of Philippines. The ONE MILLION CAMPAIGN was launched successfully in the Philippines where the IBFAN Coordinator for the region succeeded in getting 17,000 signatures on hard copies of the petition. These signatures will be entered into the web portal so that the counter can include them in the total figures projected.



6.3. Impact

- ❖ The WBTi assessment has had an impact on the development of national policies as the local coordinators of the assessment have mostly been government persons who attended the training. As the assessment highlights the gaps, these will be bridged in national policy.
- ❖ The impact of the ONE MILLION CAMPAIGN has been huge. Within a few days of the launch of the campaign, 17,000 persons had signed the petition. Of these, 7,101 signatures represented the Philippine islands. The signing of the petition was led by a lady Congresswoman who has filed several bills to enable women to breastfeed in workplaces and protect breastfeeding from being undermined by insidious marketing and advertising of baby milks. Thus the Campaign is succeeding in ensuring that the message of demanding support to women to breastfeed and strict implementation of the International Code is reaching homes of people.

Objective 7: To strengthen implementation of the Code and the Global Strategy for Infant and Young Child Feeding in East Asia

In 2008, IBFAN EA launched various activities for strengthening the implementation of the Code and the Global Strategy on IYCF. For this activities, East Asia facilitated conducting the national assessment of the implementation of the Global Strategy for Infant and Young Child Feeding in Bangkok. The EA Representative visited Japan for strengthening EA Network. Each country in the region launched capacity building activities. However, youth awareness workshops to build their capacity on IYCF have been postponed to 2009.

Achievement 100%

Activities and Results

7.1. Facilitating the conducting the national assessment of the implementation of the Global Strategy for IYCF.

Six countries. Korea, Mongolia, China, China HK, China, Taiwan, Japan participated survey on World Breastfeeding Trends Initiative (WBTi). from July - December 2008. They attended the WBTi training programme in Bangkok earlier in August, and then conducted the assessment in their own countries. The results have been sent to RCO for verification and entry.

7.2. Strengthening EA Network and Capacity Building activities.

Several activities took place under this head.

- i. Visit to Japan. EA Rep. – Ms. Jaiok Kim and Dr. Song Vokyung visited Japan for strengthening EA Network on 3rd and 4th October. They also conducted skill training for conducting IBFAN’s WBTi questionnaire.
- ii. Capacity building by Consumers Korea. Consumers Korea launched capacity building activities on IYCF.
- iii. Korea Breastfeeding Promotion Network established. Consumers Korea initiated the establishment of Korean Breastfeeding Promotion Network (KBPN) in Korea for the first time in Breastfeeding activity history. On 1 August 2008, at the Press center 19F, Seoul, Korea, 8 organisations signed establishment of Korean Breastfeeding Promotion Network (KBPN). These organisations are The Academy of Breastfeeding Medicine Korea, Korean Society of Obstetrics and Gynecology, Korean Association of Pediatric Practical, Korean Society of Neonatology, Korean Medical Association, Korean Society of Perinatology, Breastfeeding Committee of Consumers Korea and Young Child Broadcasting. The National Assembly and Ministry of Health and Welfare support the KBPN.
- iv. Seminar on WBW theme “ Mother Support : going for the Gold.” This seminar was held at the Press Centre, Seoul on 1st August 2008, and was attended by almost 150 people. The Special Guest lecturer was Susan Siew from WABA, and the Special Guest was from the National Assembly.
- v. Translating and printing the 2008 WBW Materials “ Mother Support: going for the Gold.”

The material related to the World Breastfeeding Week was translated into Korean, printed and distributed.

- vi. Participation in WBTi. Consumers Korea participated IBFAN World Breastfeeding Trend initiative (WBTi) in both training and in assessment.

7.3. 2nd Training in International Code.

This training on the International Code of Marketing Breast milk Substitutes for HCPs was organised on October 19, 2008, by the Academy of Breastfeeding Medicine, Korea, and Consumers Korea. Among the presenters were Yoon Bo Yung, Lee Mi-Ra and Chung Yoo Mi, all pediatricians.

7.4 . Impact

The activities of IBFAN EA have resulted in a close relationship between the network and governments. Several governments participated in the training for conducting WBTi assessments and have actually conducted the assessment. This has given them a good picture of the gaps in implementing the Global Strategy and finding ways to bridge them.

Mongolia and Korean governments took the ONE MILLION CAMPAIGN as their own, and have participated fully in its launch, thus ensuring that the campaign reaches the lowest level of administration.



Summary statement on use of funds compared to budget

Total budget proposal for the year 2008 was **EURO 221,600** as per the 5 year strategic plan.

Out of this NORAD provided approximately 31.59% totaling EURO 70,004 for the year 2008. SIDA provided SEK 1,000000 (SEK One million per year) from July 2008 to June 2013 for each year. For half year of 2008 (July-Dec. 2008) SEK 500,000 were received, which is approximately equivalent of EURO 54,475. We had some balance left from the earlier project for five year (from July 2003 –June 2008) equivalent of EURO 39,739. We also had a budget of EURO 17,300 receivable from DGIS being Phase out Grants for project No. 6509 (for five years 2004-2007) in this way the total budget for the year 2008 became EURO 181,504 to implement our work plan. Accordingly the work plan was revised and implemented. Section on financial report provides the detail.

Deviation from annual plans

Not much except that one event was postponed because of local reasons. Asia newsletter could not be published in time because of lack of time with the key people.. This will be delayed publication in first quarter of the 2009. Formal launch function of the ONE MILLION CAMPAIGN- Support Women to Breastfeed www.onemillioncampaign.org was possible only in February 2009. This happened because of non-availability of charismatic persons for this purpose, which was later secured.

Assessment of the effectiveness of the programme

Ideally such an assessment should have been made by the outsiders, but based on what country coordinators , regional representatives have been writing to us after launch of the WBTi and ONE MILLION CAMPAIGN- Support Women to Breastfeed , one can safely make a blanket statement that our programme has been hugely successful . A paragraph on Impact is written with each objective to help get a quick understanding of the type of and extent of success. Nothing succeeds like success, someone said it well.

Assessment of risks and problems

Programme of the year 2008 went smooth as planned after the development of operational plan based on resources. Apart from the fact that official launch of one of the event had to be postponed in India, everything happened as planned. Specifically, there is some delay in carrying out national assessments under objective 1 because of several local reasons ranging from availability of government support or partnership with other civil society groups. Understanding of the WBTi has also been an issue at some places where government sometimes refused to part with information or civil society groups did not use the exact methods and tools.

Lessons Learnt

These are more in terms of organizing and executing the work plan.

- ❖ Involvement of charismatic political leaders or those who have some social inclination is found to be a useful strategy to draw attention to the issues both by people and media.
- ❖ Involvement of governments is possible and crucial to over all work to make the programme work for people. At more than half the places groups could involve governments in their work directly.
- ❖ Persistence advocacy with recent evidence generated by Lancet series on nutrition works.
- ❖ Engaging with and involving civil society is highly effective. This has been clearly demonstrated in the case of the fight against PPPs in India, where RCO together with civil society groups made their voices heard and the Government of India took preliminary action.
- ❖ On programme front many countries have reported consideration of strengthening their programmes to deal with breastfeeding and infant feeding.
- ❖ Difficulty was encountered in handling the web. There were delays in executing because of lack of understanding and clarity at our end.
- ❖ There is a need to peg a campaign to a recent incident that is well known internationally. This time we found a Campaign peg, SANLU incident, which is useful to work on to raise public awareness and also support to design of the of the campaign by communication experts and global campaign also helped in positioning the one million campaign very positively.
- ❖ We have found that the ONE MILLION CAMPAIGN- Support Women to Breastfeed www.onemillioncampaign.org is understood as web based and we worked around to develop the methods to reach out to those without access to the net by getting them to sign the hard copy of the petition. This has resulted in thousands of additional signatories to petition and more are possible. One important lesson learnt through this exercise is that we may not be able to reach them with future campaigns/petitions. However, hard copies of petitions have the potential of generating firstly numerous signatures, and secondly, cementing our relationships with various networks and organisations working at the grassroots, and thus taking the message to the people's home.

Challenges and Opportunities

Even as the challenges were met innovatively in 2008, they provided opportunities for widening the base of advocacy. The new challenges that will be faced by RCO in the coming years, and the opportunities that are created include

- ❖ encouraging wider participation of governments in carrying out national assessments of the Global Strategy as part of the World Breastfeeding Trends initiative.
- ❖ encouraging wider and more effective participation of partner groups such as the Global Partners of WABA and IBFAN in the WBTi assessments in countries where no assessment has yet been carried out, and in spreading the ONE MILLION CAMPAIGN further, including getting signatures on hard copies of the petition.
- ❖ Increased advocacy with policy makers as well as civil society for strengthening infant and young child nutrition, when global recession may result in governments cutting expenditure in the social sectors which include health and nutrition and in the face of political instability, especially in the South Asian region, where India is facing elections, and several other countries are facing political crisis and civil war situations.
- ❖ Increased action including advocacy with civil society and decision makers at the national and international level including with UN bodies and Codex, on issues related to conflict of interest in infant and young child feeding, infant feeding and HIV, and infant feeding in disaster situations.
- ❖ Advocacy to scale up nationally models that have shown positive results in reducing infant mortality and malnutrition and thereby have the potential to meet MDG 4 by documenting such models and widely disseminating the documentation to policy makers, parliamentarians, and civil society organisations.

IBFAN Asia

BP-33, Pitampura, DELHI-110 034 (India)

Summary of Financial Report of use of funds compared to budgeted vis a vis Actual utilization

Project: Global Breastfeeding Initiative for Child Survival in 2008 – NORAD Funding & funding by SIDA for the period 2008-2013

Originally the total budget proposal for the year 2008 was EURO 221,600

Out of this NORAD approved approximately 31.59% totaling EURO 70,004 for the year 2008 only. SIDA approved the proposal for 5 year commencing July 2008 to June 2013 @ SEK 1,000000 (SEK One million) per year. For half year of 2008 (July-Dec. 2008) SEK 500,000 were received which is equivalent of EURO 54,467 . We had some balance left from the earlier project for five year (from July 2003 –June 2008) equivalent of approximately EURO 40,000. We also had a budget of EURO 17,300 receivable from DGIS being Phase out Grant for earlier project No. 6509 (for five years 2004-2007) In this way the total budget for the project for the year 2008 became EURO 181,504 . Accordingly the work plan was revised as below:

IBFAN Asia Budget for the year Jan-Dec. 2008			
	Activity	Original proposal €	Revised work plan
1	To organize assessments of the GS for IYCF using and expanding WBTi to other regions	72,300	49,200
2	To launch the international web campaign and build public opinion to support women and mothers	23,000	16,500
3	Building national capacity for increasing health workers skills (using the “3 in 1” training programs	17,500	16,000
4	Strengthening the HIV and breastfeeding working group in Asia	8,400	7,500
5	Increasing effectiveness of the IBFAN in strengthening the breastfeeding movement and inputs at regional and international level	58,200	60,800
6	To stimulate national actions for Code Monitoring and monitoring of the GSIYCF at national level in SEA	21,600	12,000
7	Strengthening implementation of the Code and the GS for IYCF in EA	20,600	12,000
8	Global Breastfeeding Initiative for Child Survival CODEX Alimentarius Programme		7,504
	TOTAL	221,600	181,504

IBFAN Asia Budget for the year Jan-Dec. 2008					
Budgeted v/s Actual receipts					
	Donor	Budget €	Actual receipt €	Variance	Remarks
1	NORAD	70,004	67,495	2,509	Short received due to exchange rate fluctuations
2	SIDA	94,200	94,854	-654	Due to exchange reate
3	DGIS	17,300	13,561	3,739	Being last installment received in Feb. 2009, will be accounted in the Operational Plan of 2009
	TOTAL	181,504	175,291	5,594	

IBFAN Asia Budget for the year Jan-Dec. 2008				
	Activity	Work plan €	Actual utilization	Remarks
1	To organize assessments of the GS for IYCF using and expanding WBTi to other regions	49,200	47,971	All activities accomplished
2	To launch the international web campaign and build public opinion to support women and mothers	16,500	12,465	Due to non-availability of a celebrity the launching of web campaign was a bit delayed. The activity –“The One Million Campaign” was launched on 9 th February 2009 by Hon’ble Cabinet Minister, Govt of India . The remaining budget was utilized then.
3	Building national capacity for increasing health workers skills (using the “3 in 1” training programs	16,000	15,013	All planned activities accomplished.
4	Strengthening the HIV and breastfeeding working group in Asia	7,500	7,575	All planned activities accomplished
5	Increasing effectiveness of the IBFAN in strengthening the breastfeeding movement and inputs at regional and international level	60,800	62,977	Some activities, which were not planned, were also accomplished. Like: Protest against GAIN; Public rally on Child Right’s Convention; Celebration of WBW-2008; Organization of Health Camp on the visit of PM of Norway; Organizing Media Workshop etc.
6	To stimulate national actions for Code Monitoring and monitoring of the GSIYCF at national level in SEA	12,000	7,639	Some activities are still in progress
7	Strengthening implementation of the Code and the GS for IYCF in EA	12,000	9,566	One activity of “ Organize youth awareness workshops to build their capacity on IYCF issues” has been postponed for 2009 to take it in a big way.
8	Global Breastfeeding Initiative for Child Survival CODEX Alimentarius Programme	7,504	7,456	All activities accomplished.
	TOTAL	181,504	170,662	

BHARGAVA ASSOCIATES

Chartered Accountants

3rd FLOOR, 4/9, ASAF ALI ROAD,
NEW DELHI 110002

Phone 011-65161592 Fax 011-23273259

CERTIFICATE

We have audited the attached Expenditure Statement and Sources of Finance thereof of IBFAN ASIA, having its office at BP-33, Pitam Pura Delhi 110088 for the period 1st January, 2008 to 31st December, 2008. The said statement was drawn up on the responsibility of the financial manager. We are responsible for issuing an auditor's report on the said statement. While preparing this report we have relied on the reports/statements of the overseas members of the IBFAN-Asia's Network as under:-

Overseas Net Work Member	Amount	Particulars of Report Relied upon by us
IBFAN Asia - South East Asia Region	US \$ 1017	Un-audited Statement of Expenses
IBFAN Asia East Asia Region	US \$ 5500	Un-audited Statement of Expenses

Our audit was carried out in accordance with generally accepted audit guidelines. According to these guidelines, an audit should be planned and implemented in such a way as to make it reasonably certain that the financial statement contains no substantive errors. An audit includes an examination based on sample observations of information supporting the amounts and the explanatory notes in the financial statement. It also evaluates the principles of financial reporting used in drawing up the financial statement and any significant estimates made by the financial manager, and assesses the overall impression made by the financial statement. We believe that our audit forms an adequate basis for our opinion.

In our view, the said statement presents a true and fair picture of the expenses incurred during the period 1st January, 2008 to 31st December, 2008 in accordance with generally accepted financial reporting principles. The obligations imposed by the grant decision have also been met.

For BHARGAVA ASSOCIATES,
Chartered Accountants,



Place : NEW DELHI

Date : 27th March, 2009

IBFAN ASIA

Strategic Plan IBFAN Asia 2008-2012

INCOME & EXPENSES STATEMENT FOR THE PERIOD 1st JAN TO 31st DEC 2008

A.	EXPENSES	Budget			Explanatory Note
		Euro	Euro	US \$	
Activity					
1	To organize assessments of the global strategy for IYCF using and expanding WBti to other regions	49,200	47,971	64,006	Amount utilized for conducting training w/s for WBti for Asia, Africa & Latin America. Facilitate assessment of GS implementation in SA, organizing SA Partners Forum-5 at Bhutan.
2	To launch the international web campaign and build public opinion to support women and mothers	16,500	12,465	16,632	Amount utilized for hiring web space, IT professional staff & dev of web portal
3	Building national capacity for increasing health workers skills	16,000	15,013	20,031	Amount utilized to support training cell to facilitate trainings, imparting training on IYCF Counseling Specialist; support for IYCF training in Nepal; support the evaluation of an intervention project to enhance ex: B-F in Lalipur (India)
4	Strengthening the HIV and breastfeeding working group in Asia	7,500	7,575	10,107	Amount utilized for functioning W/G on HIV and B-F and development & dissemination of documents
5	Increasing effectiveness of the IBFAN in strengthening the breastfeeding movement and inputs at regional and international level	60,800	62,977	84,028	Amount utilized for strengthening resource centre, regional coordination, RCO support secretariat, advocacy, media w/s, WBW celebration, protest against conflict of interest, public rally on child rights, organizing health camp on the visit of PM of Norway etc.
6	To stimulate national actions for Code Monitoring of the GSIYCF at national level in SEA	12,000	7,639	10,272	Amount utilized for facilitating national assessment in 6 countries of SEA using WBti & strengthening of sub region
7	Strengthening implementation of the Code and the global strategy for infant and young child feeding in East Asia	12,000	9,566	13,195	Amount utilized for facilitating national assessment in 5 countries of EA using WBti, organizing B-F awareness & education programmes etc.
8	Global Breastfeeding Initiative for child survival CODEX Alimentarius programme	7,504	7,456	9,948	Amount remitted for gBICS CODEX Alimentarius programmes to INFACT & participation in the 40th Session of CCFH at Guatemala.
TOTAL (A)		181,504	170,662	228,219	
B INCOME		DONORS			
			Euro	US \$	
			€ @ 61.91	\$ @ 46.40	
1	DGIS (Phase out grant -Core Funding 2004-2007 Project No. 6509)		13,561	18,094	
2	Sida (Global Proposal for Coordinated Action to Achieve MDGs 4 & 5)		94,854	126,560	
3	NORAD (gBICS in 2008)		67,495	90,056	
4	Bank interest		708	945	
TOTAL (B)			176,618	235,654	
C Balance Available			5,956	7,436	

IBFAN ASIA
BP-33, PITAMPURA
DELHI-110 034 (INDIA)



Dr. ARUN GUPTA
Regional Coordinator
IBFAN Asia

[Handwritten Signature]