

# BPNI / IBFAN Asia Annual Report 2015



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**REPORT WRITING AND PRODUCTION**

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**BPNI's Ethical Policy:** BPNI does not accept funds or any support from the companies manufacturing baby foods, feeding bottles or infant feeding related equipments. BPNI does not associate with organisation having conflicts of interest.

# BPNI / IBFAN Asia Annual Report 2015

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# Contents

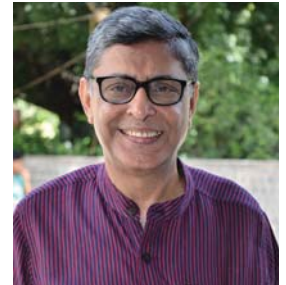
Abbreviations	3
Central Coordinator's Note	4
About BPNI /IBFAN Asia	5
Introduction	7
Projects	8
Action Areas and Activities	
1. Tracking progress in policy and programmes and strengthening accountability	11
2. Building capacity at all levels	14
3. Addressing especially challenging environments/situations, including gender	19
4. Strengthening policy and legislative frameworks	21
5. Social mobilisation, information and communications	25
6. Strengthening the consortium and rejuvenating the breastfeeding movement	29
Partnerships/collaborations and donors	33
Audited account statement	34

# Abbreviations

AACI	Alliance Against Conflict of Interests
BPNI	Breastfeeding Promotion Network of India
CCNFSDU	Codex Committee on Nutrition and Food for Special Dietary Uses
CEFEMINA	Centro feminista de información y acción
CRC	Committee on the Rights of the Child
GIFA	Geneva Infant Feeding Association
IBFAN	International Baby Food Action Network
ICDC	International Code Documentation Centre
ICDS	Integrated Child Development Services
IYCF	Infant and Young Child Feeding
MLT	Middle Level Trainer
NHM	National Health Mission
NIPCCD	National Institute of Public Cooperation and Child Development
Norad	The Norwegian Agency for Development Cooperation
NRHM	National Rural Health Mission
Sida	The Swedish International Development Cooperation Agency
WABA	World Alliance for Breastfeeding Action
WBCi	World Breastfeeding Costing Initiative
WBTi	World Breastfeeding Trends Initiative
WBW	World Breastfeeding Week
WHA	World Health Assembly
WHO	World Health Organisation

## Central Coordinator's Note

The 2015 report of IBFAN Asia and BPNI provides exciting results and accomplishment of both Sida and NORAD projects. At the same time it presents challenges to the organisation. We know that this is the last year of NORAD support and Sida project will be closing in 2017.



The report has outlined activities in all the six areas according to the plans and demonstrates capability as well as capacity of the Regional Coordinating Office (RCO) of IBFAN Asia to lead the effort. Commitment of the groups to get it implemented; not only in Asia but also all over the world is so truly visible as they came back with flying colours to submit their reports.

Progress made in the WBTi is worth mentioning, this being our flagship programme. Joining of 17 new countries and several countries taking on re-assessment process is something to be very proud of for the regional coordinating office (RCO) not only because it worked hard but also did their job quite effectively. Linking the WBTi with the CRC reports as well as human rights issues has been our ongoing work and once again success was achieved in several countries.

Similarly on the other areas of work e.g. capacity building for skills in infant and young child feeding counseling, it does stand out. Two new countries from Asia (Indonesia and Maldives) introduced this programme.

The report on the environment and climate change "Carbon footprints due to milk formula" is a special action, which has been widely communicated and would lead to next level of understanding on CO2 emissions from infant formula.

The working groups on Codex and Code have also been quite efficient in their work. On the conflicts of interest issues, IBFAN Asia is proud to have organised an international conference in London in collaboration with our counterparts in Europe. This workshop helped the participants from several regions of the world to be on the same page and lead awareness efforts in their regions.

With these key highlights I wish to congratulate everyone working in the RCO to make the one year 2015 project a success. At the same time I would like to thank our sub-region representatives Kim, Innes and JP, representing East Asia, Southeast Asia, South Asia respectively, who have been instrumental in getting the project successfully implemented in the respective countries.

With this we now move to 2016, another exciting year ahead of us!

**Dr Arun Gupta**  
Central Coordinator, BPNI  
Regional Coordinator, IBFAN Asia

## About BPNI /IBFAN Asia

The Breastfeeding Promotion Network of India (BPNI) was founded on 3rd December, 1991 at Wardha, Maharashtra. BPNI is a registered, independent, non-profit, national organization that works towards protecting, promoting and supporting breastfeeding and appropriate complementary feeding of infants & young children. BPNI is registered as a society under the Societies Registration Act XXI of 1860 with registration number S-23144. As a policy, BPNI does not accept funds of any kind from the companies manufacturing baby food, feeding bottles etc. and from organizations /industries having any conflict of interest.

It serves the Regional Coordinating Office of International Baby Food Action Network (IBFAN) for Asia, which is a network of groups working to promote optimal infant and young child nutrition in over 25 countries. It also serves as South Asia focal point for World Alliance for Breastfeeding Action (WABA) and facilitates activities of WABA in 8 South Asian countries. IBFAN is a Right Livelihood Laureate 1998 Popularly Known as Alternative Nobel Prize.

### BPNI/IBFAN Asia Governance

#### IBFAN ASIA-POLICY COUNCIL

2014-2017

##### Regional Coordinator

Dr. Arun Gupta, *India*

##### Sub-regional Representation

Ms. Ma. Ines Fernandez, *Philippines* (Southeast Asia)

Ms. Kim Jaiok, *Republic of Korea* (East Asia)

Dr. JP Dadhich, *India* (South Asia)

##### Members

Dr. Mohamed Saeed, *Maldives*

Ms Siti Norjinah Moin, *Malaysia*

Dr. Chwang Leh Chii, *Taiwan*

#### BPNI-CENTRAL COORDINATION COMMITTEE

2015-2018

##### Chief Coordinator

Dr. K.P. Kushwaha, *Gorakhpur, Uttar Pradesh*

##### Central Coordinator

Dr. Arun Gupta, *New Delhi*

##### Finance Coordinator

Dr Pawan Garg, *New Delhi*

##### Members

Dr. J.Kumutha, *Tamil Nadu*

Dr. Sunita Katyayan, *Jharkhand*

Dr. Dinesh Khosla, *Haryana*

Dr. K. Kesavulu, *Hindupur, Andhra Pradesh*

Dr. Dr. Kaisar Ahmed, *Jammu & Kashmir*

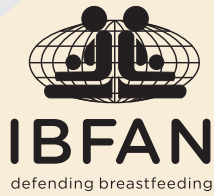


**IBFAN**  
defending breastfeeding



**bpni**

putting child nutrition  
at the forefront  
of social change



## BPNI/IBFAN ASIA STAFF 2015

### Leadership Team

Dr Arun Gupta

Dr JP Dadhich

Dr Shoba Suri

### Research & Communication Team

Dr Neelima Thakur

Ms Nupur Bidla

Ms. Veena Rawat

### IT team

Ms Beena Bhatt

Mr Satya Prakash Madheshiya

### Training /Capacity Building Team

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Ms Prerna Bhardwaj

Ms Vibharika Chandola

### Administration and Accounts

Mr LR Gupta

Mr Amit Dahiya

Mohd Kashif Khan

### Support Staff

Mr Vijay Pal

Mr Suresh Kumar

Mr Ashok Kumar

Mr Vinay Kumar



# Introduction

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This annual report includes activities undertaken by Breastfeeding Promotion Network of India (BPNI)/ International Baby Food Action Network (IBFAN) Asia during the period January 2015 to December 2015. The report highlights our efforts to strengthen policies and programmes on breastfeeding and infant and young child feeding in India, Asia and globally. It incorporates activities done to achieve outcomes for the two projects, one funded by Sida titled 'Protecting, Promoting and Supporting Breastfeeding Through Human Rights and Gender Equality'; and other funded by Norad titled 'Enhancing Breastfeeding Rates Contributes to Women's

Rights, Health, and a Sustainable Environment'.

Main areas of work remain advocacy, assessment of IYCF policies and programmes in countries using WBTi tool, capacity building, implementation of the International Code for Marketing of the Breastmilk Substitutes, social mobilization, research and information sharing and communication. In the report we are providing a brief of the projects followed by the report of the year. More information about some of these activities is available on the website of BPNI [www.bpni.org](http://www.bpni.org).

# Projects

## I) Project titled 'Protecting, Promoting and Supporting Breastfeeding Through Human Rights and Gender Equality'

*Funded by: Sida*



This project is being implemented by a consortium composed of three International Baby Food Action Network (IBFAN) Regional Offices of Africa, Asia, and Europe and the World Alliance for Breastfeeding Action (WABA). This is a four-year programme (2014-2017) that works towards accelerating the achievement of the Millennium Development Goals, 4 and 5 in particular. The overall objective of this project is to accelerate the momentum for action in infant and young child feeding and contributes to positioning of the protection, promotion and support of breastfeeding as key interventions on the international development agenda to achieve children and women's rights to survival, health, adequate food and nutrition. The World Alliance for Breastfeeding Action (WABA) acts as the focal point to coordinate the project. Three IBFAN regional offices and WABA have thus come together under this consortium and are working on a coordinated work-plan with seven programme areas which include;

1. Tracking progress in policy and programmes and strengthening accountability
2. Building IYCF capacity at all levels
3. Addressing especially challenging environments/ situations: including gender inequalities
4. Strengthening policy and legislative frameworks
5. Social mobilisation and information communications
6. Strengthening the consortia and rejuvenating the breastfeeding movement
7. Project cycle management and governance

Consolidated goal, outputs and activities for all seven programme areas have been identified by the consortium partners and put in separate Log Frames. The progress is periodically reviewed collectively. Each year a consolidated report of activities is submitted to the donor as well.

## II) Project Title "Global Breastfeeding Initiative for Child Survival" with programme title "Enhancing Breastfeeding Rates Contributes to Women's Rights, Health, and a Sustainable Environment"

*Funded by: Norad*



Ten partners of the global Breastfeeding Initiative for Child Survival (gBICS), including IBFAN regional offices, IBFAN technical offices and World Alliance for Breastfeeding Action (WABA) have implemented the three-year (2013 - 2015) NORAD supported project. IBFAN Regional Coordinating Office for LAC region at CEFEMINA, Costa Rica was the global coordinating office for the project.

The gBICS was a programme aimed at contributing to the achievement of sustainable development - beyond the Millennium Development Goals- by scaling up breastfeeding and infant and young child interventions and transforming policies into practice which contributes to efforts aimed at addressing climate change and gender inequality in the framework of human rights.

The agreed common impact of the gBICS was to contribute to "Scaling up of breastfeeding and infant and young child interventions to reduce child mortality and undernutrition, and to improve child growth and development as well as maternal health, through the protection, promotion and support of optimal infant feeding practices (early initiation and exclusive breastfeeding for six months followed by safe and adequate complementary feeding with continued breastfeeding for 2 years or beyond)".

The programme areas are:

- Comprehensive national policies and programmes to implement the Global Strategy for Infant and Young Child Feeding
- Monitoring and evaluation of national policies and programmes
- Implementation, monitoring and reporting on the International Code of Marketing of Breastmilk Substitutes and relevant WHA resolutions

- Health and safety standards of the Codex Alimentarius Commission - risks of artificial feeding and food safety and food security
- Corporate accountability and safeguarding public interest - democratisation of global public health and nutrition
- Conflicts of Interests, sponsorship and Public-Private (for-profit) Partnerships
- Right to health and adequate food of women and children worldwide
- Labour rights and maternity protection in all economic sectors
- Protection of the environment protecting, promoting and supporting breastfeeding as environmentally friendly, to counterbalance to the negative environmental impact of formula feeding
- Building of knowledge and skills on breastfeeding protection, promotion and support in Health and Nutrition care systems
- Information, communication and social mobilization on IYCF among the general public
- Optimal policies and practices for infant feeding and protection of sexual and reproductive rights, particularly in difficult circumstances such as HIV context or during emergencies
- Strengthening of capacities for planning, coordination, partner liaison and fundraising

The three-year programme has ended successfully in December 2015 achieving all its objectives.

# Action Areas & Activities



# 1. Tracking progress in policy and programmes and strengthening accountability

The World Breastfeeding Trends Initiative (WBTi) developed by the International Baby Food Action Network (IBFAN), assesses, monitors and tracks the implementation of the Global Strategy for Infant and Young Child Feeding. WBTi so far has been introduced in 106 countries out of which 75 countries have completed the assessment. 17 new countries accomplished the assessment in 2015. WBTi documents status of the policies and programmes on infant and young child feeding at national level. The World Breastfeeding Trends Initiative (WBTi) is a flagship programme of IBFAN Asia/BPNI. WBTi assessment process at country level includes identifying a country coordinator, forming a core group of experts to do the research for filling up the questionnaire for indicators, consensus building among the partners, finding gaps in the policies and programmes on IYCF, developing recommendations for bridging the gaps and developing country report cards and reports. WBTi provides sustainable methods, like, country groups get involved in learning about analysis of policy and programmes after every few years and likely to keep reminding the governments for bringing some change in the policy or programmes when gaps are detected. Such skills stay back in the countries. Continuation would help to re-assess to study trends, which makes the State more aware of the gaps to be addressed.

## 1.1 Introduction of WBTi in new countries

In May 2015, eleven European countries were trained on WBTi and WBCi in collaboration with IBFAN-GIFA at Geneva. There were 15 participants from 11 countries namely, Armenia, Ukraine, Turkey, Georgia, Bosnia & Herzegovina, Portugal, Croatia, UK, Belgium, Italy and

Switzerland. Two participants were from IBFAN Africa and one from ICDC office in Penang, Malaysia also attended the training workshop as observers. Each participating country developed its action plan with a time line to complete the country assessment in 2015-16, which was presented during the concluding session of the training workshop. Full report of the workshop is available at:

<http://worldbreastfeedingtrends.org/uploads/WBTi-europe-HG-Final-reportJuly2015.pdf>



WBTi & WBCi training in Europe

## 1.2 Accomplishing assessment/re-assessment

In 2015, a total of 17 new countries accomplished the assessment of policies and programmes on Infant and Young Child Feeding (IYCF). Nine countries of European region have done the assessment and submitted the reports to IBFAN Asia office in 2015. Reports of following 7 European countries have been finalised and uploaded on the WBTi web-portal.

*Armenia, Ukraine, Turkey, Georgia, Bosnia, Portugal and Croatia*

Reports of two countries, UK and Belgium were under the verification process.

Three countries from LAC (Cuba, Panama & Paraguay), four countries from South East Asia (Palau, Brunei, Singapore & Malaysia), two countries from Africa (Tanzania & Sierra Leone) and one country from the Arab world (Bahrain) completed their first WBTi assessment in 2015.

153 partner organisations came together in these 17 countries to develop the country reports.

**Reassessment studies of trends**

Fifteen countries from LAC, South Asia, South East Asia, East Asia, Arab World and Africa region did the reassessment in 2015, which includes Afghanistan, Bangladesh, Ecuador, El Salvador, Guatemala, India, Indonesia, Maldives, Mexico, Philippines, Peru, Taiwan, Thailand, Uruguay and Vietnam.

Except Ecuador, Maldives and Uruguay, all other countries have reported an increase in the scores for policies and programmes. 203 partner organisations

came together in these 15 countries to develop the country reports.

**1.3 Call to Action**

Countries utilise the WBTi reports for developing a Call to Action for bridging the gaps and utilize it for advocacy with the governments to improve the policies and programmes on IYCF. 19 countries, namely, Dominican Republic, Costa Rica, Venezuela, Honduras, Peru, Brazil, Afghanistan, Bangladesh, India, South Korea, Taiwan, Palau, Armenia, Croatia, Portugal, Philippines, Malaysia, Indonesia, and Vietnam developed Call to Action.

In South Korea, the Korean Breastfeeding Network called upon government to take measures to address the WHO Code violation by breastmilk substitutes companies and urged hospitals to enhance support and promotion of breastfeeding.

In Afghanistan, breastfeeding partners including Government, UN agencies and other came together to discuss WBTi assessment finding and developed



Call to Action meetings in Various Countries

recommendations for a call to action.

In India, a call to action document was developed based on the gaps in the WBTi assessment, shared with the partners and submitted to the Government agencies.

In Philippines, several activities including the WBTi Report Call to Action cum WBTi Watch was organized as a campaign for asking for 6 months paid maternity leave and institutionalizing IYCF with mothers as the key center for implementing actions.

In Malaysia, BIB and partners developed a call to action urging the Government to strengthen the provisions for the maternity protection.

In Vietnam, Institute for Community Health and Development LIGHT and Cooperate with Center for Public Health Community Development (CEPHAD) along with other partners came together to organize a workshop to discuss the WBTi assessment findings and developed recommendations for Government to strengthen the policies on IYCF. Participants expressed their commitment to support the practice of breastfeeding by putting their fingerprint on fabric. Call to Action documents and reports of various countries are available on their country page on the WBTi website. [Http://www.worldbreastfeedingtrends.org/countrypage/uploads/VN/05-01-16-03-42-39-VN-vietnam-call-to-action.pdf](http://www.worldbreastfeedingtrends.org/countrypage/uploads/VN/05-01-16-03-42-39-VN-vietnam-call-to-action.pdf)

#### 1.4 CRC alternative country reports

IBFAN participates in the meetings of the CRC committee and submit an alternative child right report of countries being reviewed each year. This year, two countries from Asia, Bangladesh and Timor-Leste presented country reports in CRC meeting. IBFAN Asia assisted IBFAN-GIFA in preparing the CRC alternative country report for these countries with a special emphasis to include WBTi assessment findings in the reports.

(See: [http://ibfan.org/CRC/IBFAN%20Report\\_CRC-2015\\_BANGLADESH-FINAL.pdf](http://ibfan.org/CRC/IBFAN%20Report_CRC-2015_BANGLADESH-FINAL.pdf); [http://ibfan.org/CRC/IBFAN%20report\\_CRC-2015\\_TIMOR-LESTE\\_FINAL.pdf](http://ibfan.org/CRC/IBFAN%20report_CRC-2015_TIMOR-LESTE_FINAL.pdf))

#### 1.5 Training on Human Rights

IBFAN Asia in collaboration with IBFAN-GIFA organised a one day training workshop for the participants of the One Asia Breastfeeding Partners' Forum 11 in Putrajaya, Malaysia (November 2015). The session aimed at

strengthening the knowledge of Asian national, sub regional and regional partners with regard to human rights in order to ensure their broad and systematic participation in the different human rights processes in which IBFAN is engaged (especially the alternative reporting to the CRC, CESC and CEDAW and the process of elaboration of a new treaty on transnational corporations and human rights). Thirty-nine participants from 19 countries were trained, as well as representatives from IBFAN ICDC, IBFAN Regional Coordinating Office for Asia (BPNI) and Baby Milk Action/IBFAN UK. A PPT on Human Rights for inclusion in BPNI/IBFAN Asia trainings has been prepared.

#### Analysis

There has been a good progress as regard to the training on WBTi and country assessment of policy and programmes. WBTi has been introduced to many new countries, some of which have already started the process to undertake the assessment. The IBFAN Asia RCO has assimilated new and revised WBTi tool and process with more staff members trained in-house to be the trainer. A new tool complementing the WBTi process, WBCi has been developed and disseminated through launch meetings and trainings. Thus, a country has a complete set of processes at her disposal, namely, WBTi to assess implementation of the Global Strategy for IYCF, find gaps and prepare a national action plan for bridging the gaps and using WBCi to develop a financial plan. WBTi has demonstrated that engaging with a variety of partners- Governments, civil society, media, representatives of the United Nations (UN) and other development agencies--is important to raise awareness of IYCF issues, bring the debate center stage, identify specific actions for policy and program reform/strengthening; active dissemination of technical and analytical work which is critical in translating it into program and policy action; and to bring about systemic change, longer and sustained engagement with governments and other partners sustained advocacy by all development partners and civil society organizations is required. This year, capacity building of 39 participants from 19 countries and representatives of IBFAN regional and technical offices was done on human rights issues. One of the objectives of this activity was to facilitate the process of developing child rights alternative country reports.

## 2. Building capacity at all levels



One to one or group counselling is important to increase breastfeeding rates. Complementary feeding could also be improved through nutrition counselling, although additional measures may be necessary in food insecure settings. Mothers need support to initiate breastfeeding within one hour, and to practice exclusive breastfeeding during the first six months. The support includes providing correct information and education about breastfeeding, answering questions and queries about breastfeeding difficulties, prevention of breast conditions like sore nipples and mastitis as well as tackling these if they do arise. Skilled and adequately trained health and nutrition care providers are needed in the community as well as in health care facilities. Capacity building of these care providers is essential to ensure access to appropriate counselling support to mothers. BPNI/IBFAN Asia conducts training for National Trainers (Master Trainers), Middle Level Trainer (MLTs) and Counselling Specialists using the training package titled “BPNI/IBFAN Asia Infant and Young Child Feeding

Counselling: A Training Course (An Integrated course on Breastfeeding, Complementary feeding, Infant feeding & HIV and Growth Monitoring)-The 4 in 1 Course”. (See details of this course at: <http://bpni.org/Training/4-in-1-brochure.pdf>)

### 2.1. Updating of the “4 in 1” training programme

Over the years, BPNI training cell has been regularly undertaking strengthening of the content and updating of the training programme based on new scientific content. A major review of the training programme happened in 2013-14, which was supported by the World Bank. On the basis of this review, revision of various training manuals was completely in 2015 under the supervision of Dr. MMA Faridi (Co-coordinator of BPNI training cell) and BPNI training team. The updated manuals were used in two National trainer's trainings. Based on the feedback of the course director for these trainings, some more revisions were done in the training manuals. Together with this, translation of the training



manuals for MLT trainings was undertaken in Hindi.

## 2.2. Training Workshops

Using the '4 in 1' training' programme, several trainings were held, including National (Master) Trainers' training course, Training of Counselling Specialists, Middle Level Trainers and Frontline Workers trainings.

### 2.2.1. Training of the National (Master) Trainers using 4 in 1' training programme

#### National Trainers training in Jammu and Kashmir, India:

IYCF state resource centre Postgraduate Department Of Paediatrics, National Health Mission, J&K and Breastfeeding Promotion Network of India jointly organized a training course to develop National Trainers in IYCF counselling and IYCF Counselling Specialists for the state of Jammu & Kashmir. In the first part of the training (6 days), 3 faculty members in the medical college and 3 senior pediatricians were trained as trainers. In the second part of the training (7 days), 23 medical officers, general doctors, and IYCF counsellors were trained as Counselling Specialists. The competency evaluation of participants using Clinical Competency Assessment Questionnaire revealed that all 23 participants were able to recognize and help mothers

with breast conditions like sore nipples, and helping mothers with engorgement. All participants were able to mention feeding options in HIV positive mothers and were able to counsel and support mothers in safe breastfeeding options. All were able to learn taking feeding-history, growth monitoring and expression of breastmilk. All participants were able to counsel mothers in breastfeeding, complementary feeding, HIV and growth monitoring. A detailed report of the training is available at: <http://www.bpni.org/Training/IYCF-J&K-REPORT.pdf>

The team of newly trained National trainers along with the existing national trainers in the state are planning to conduct further trainings of counselling specialists and MLT training in the state.

**National Trainers Training in Indonesia:** Asosiasi Ibu Menyusui Indonesia (AIMI), Indonesia and BPNI / IBFAN Asia organised a '4 in 1' training programme on 7th to 20th September 2015 in which 5 National Trainers (master trainers) who were senior functionaries of AIMI and 19 counselling specialists who were paediatricians, general doctors, dentist, midwives, psychologist, IYCF counsellors and architect, were trained. This training course was organized in Indonesia keeping in mind that



IYCF training in progress (Jammu & Kashmir)



IYCF training in Indonesia

the National trainers thus developed will lead training courses in Indonesia independently and counseling specialists will provide counseling services in hospitals in their respective places. The participant manual for the counseling specialist training was translated into Bahasa. A detailed report of the training is available at: <http://www.bpni.org/Training/INDONESIA-IYCF-Report.pdf> The evaluation of participant using the clinical competency assessment questionnaire revealed that all 19 participants for the counseling specialist course were able to recognize and help mothers with various breastfeeding problems.

### 2.2.2. Training of the Middle Level Trainer (MLTs)

BPNI conducted four training workshops of 7 days each for training of Middle Level Trainers in collaboration with various government and other agencies to develop 84 trainers for training of Frontline Workers of government child health and nutrition programmes as details given below:

- Health Protection Agency, Government of Republic of

Maldives and UNICEF Maldives on 26th Oct to 2nd Nov 2015 in Male (Link: <http://www.bpni.org/Training/maldives-report-2015.pdf>)

- National Health Mission, Government of Bihar on 31st Aug to 6th Sep 2015 in Patna ([http://www.bpni.org/Training/Patna\\_Training\\_31aug-6sep2015.pdf](http://www.bpni.org/Training/Patna_Training_31aug-6sep2015.pdf));
- National Health Mission, Government of Himachal Pradesh on 16th to 22nd Nov., 2015 in Shimla ([http://www.bpni.org/Training/Brief-rprt\\_MLT\\_16-22Nov2015\\_H.P.pdf](http://www.bpni.org/Training/Brief-rprt_MLT_16-22Nov2015_H.P.pdf));
- Department of Women & Child Development, Government of Uttarakhand on 12th to 18th Oct. 2015 in Dehradun (<http://www.bpni.org/Training/Dehradun-Training-oct2015.pdf>)

These trainers further trained 819 frontline workers in 2015. Resource material for trainings of frontline workers in all the states was provided by BPNI.



IYCF training in progress

### 2.2.3 Training of the IYCF Counselling Specialists

BPNI conducted a total of 8 Counselling Specialists training workshops (7 days each) in collaboration with various government and other agencies to develop 191 medical officers, nursing and nutrition experts as Counselling Specialists. Details of these workshops are as follows:

- In Patna with National Health Mission (NHM), Government of Bihar and UNICEF on 9th to 15th Feb 2015.  
(See report: [http://www.bpni.org/Training/Patna\\_9-15feb\\_Specialists\\_Trng\\_Rprt\\_2015.pdf](http://www.bpni.org/Training/Patna_9-15feb_Specialists_Trng_Rprt_2015.pdf))
- In Patna with National Health Mission (NHM), Government of Bihar and UNICEF on 23rd Feb to 1st March, 2015.  
(See report: [http://www.bpni.org/Training/Patna\\_counseling\\_Specialists\\_Trng\\_Rprt\\_23feb-1march.pdf](http://www.bpni.org/Training/Patna_counseling_Specialists_Trng_Rprt_23feb-1march.pdf))
- In Patna with National Health Mission (NHM), Government of Bihar and UNICEF on 16th to 22nd March.  
(See report: <http://www.bpni.org/Training/Patna%20-16-22-March%202015.pdf>)
- In Puducherry with Mother Theresa Post-graduate & Research Institute of Health Sciences, Government of Puducherry on 13th to 19th Oct. 2015  
(See report: <http://www.bpni.org/Training/Puducherry-training-report13-9oct2015.pdf>)
- In Shimla with State Health Institute of Family Welfare and National Health Mission (NHM), Government of Himachal Pradesh on 30th March to 5th April 2015  
(See report: [http://www.bpni.org/Training/Counselling-Specialist\\_Rprt\\_HP\\_2015.pdf](http://www.bpni.org/Training/Counselling-Specialist_Rprt_HP_2015.pdf))
- In Delhi with University College of Medical Sciences

and GTB Hospital, New Delhi on 27th April to 3rd May, 2015

(See report: [http://www.bpni.org/Training/report-IYCF\\_Counselling-spclst27thapril-3rdmay.pdf](http://www.bpni.org/Training/report-IYCF_Counselling-spclst27thapril-3rdmay.pdf))

- In Delhi with University College of Medical Sciences and GTB Hospital, New Delhi on 17th to 23rd August, 2015  
(See report: <http://www.bpni.org/Training/report-IYCF-Counselling-spclst17th-23rd-August.pdf>)
- One counselling Specialist training was conducted as a component of the National Trainer's training in Srinagar, Jammu and Kashmir (details given above).

### 2.3 Activities of BPNI training team

The training team in BPNI secretariat/IBFAN Asia RCO coordinates all the activities related with trainings including advocacy with government agencies, developing proposals for trainings, periodic review of the progress on the submitted proposals, developing memorandum of understanding (MOUs), arrangements for the scheduled trainings, developing reports of the trainings, revision of the training material etc.

### Analysis

The cascade-training programme developed by BPNI/IBFAN Asia gained further strength when it was further updated this year. BPNI/IBFAN Asia is using the programme for capacity building in Asian countries including India. This year, training workshops using '4 in 1' training programme were conducted in Indonesia and Maldives. The training programme was also effectively used with various government agencies in India to train trainers, counselling specialists and community level counsellors.

# 3. Addressing especially Challenging Environments/ Situations, including gender

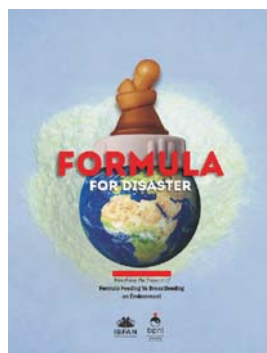
BPNI/IBFAN Asia works on challenging situations for breastfeeding like Infant feeding and climate change and infant feeding and HIV with awareness generation, capacity building, and networking. IBFAN Asia RCO coordinates the IBFAN Asia Working Group on Environment and Climate Change and Infant feeding with 11 members from Singapore, Philippines, India, France, Malta, South Korea, Palau and Switzerland. IBFAN Asia RCO also coordinates IBFAN Asia Working Group on Infant Feeding and HIV, which has 15 members from Afghanistan, Bangladesh, India, Maldives, Mongolia, Nepal, Philippines, South Korea and Vietnam. Group members share information, publications etc. on the subject regularly.

In both these challenging areas, following activities were accomplished in 2015:

### 3.1 Development and dissemination of a technical document titled 'Formula for Disaster'

BPNI/IBFAN Asia developed, published and disseminated a technical document on weighing impact of formula feeding Vs. breastfeeding on environment, titled "Formula for Disaster". The booklet puts breastfeeding as an environment friendly feeding option while highlighting how using infant formula adds to increasing Greenhouse Gas (GHG) emissions as well as its contribution to toxic chemical, garbage and waste load.

- The document has been widely shared electronically through email groups, Facebook



and Twitter. Printed copies of the document have been shared with the governments during climate change discussions in the WHO Executive Board meeting in January 2015. In the LAC region the document was shared with environment groups. It has ignited discussion among the researchers and environmentalists.

- The document has been translated into Italian and French languages. The Italian version of the document was presented to the Pope Francis in Vatican, Rome on the International Day of the Earth, Mother Earth Day.
- The document has also been uploaded on the Right Livelihood Award website and website of WABA.
- 1000 copies of his document has been printed and disseminated to policy makers and partners including IBFAN regional offices, UNICEF offices, WHO offices, WABA, World Bank and various ministries in the governments.
- Editor of the Down to Earth magazine (an initiative of Friends of The Earth Netherlands), Merel van Goor - den Held wrote an article based on 'Formula for Disaster' titled 'Tiny Feet Large Footprint' (<https://downtoearthmagazine.nl/kleine-voetjes-grote-voetafdruk/>). The article was also published in the La Leche League International magazine 'Breastfeeding today' (<http://breastfeedingtoday-llli.org/tiny-feet-large-footprint/>).
- Dr. Aileen Robertson, PhD, Public Health Nutritionist, Global Nutrition and Health, Metropolitan University College Copenhagen suggested to Gro Ingunn (From Norway) to use her influence within the High Level Panel of Experts on Food Security and Nutrition HLPE (UN Committee on World Food Security) to take up the issue about breastfeeding in HLPE and referred to for Disaster.

### 3.2 Research report on Carbon Footprints of Milk Formula feeding in selected countries of the Asia-Pacific region



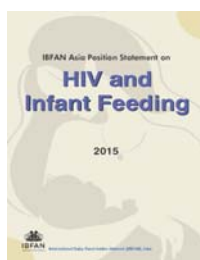
BPNI/IBFAN Asia completed a research study on estimation of the carbon footprints due to milk formula in 6 selected countries of the Asia-Pacific region. The research was done in collaboration with researchers from Australia, Malaysia and Philippines. The research revealed that milk formula are a significant source of

Green House Gas emission which may be mitigated by enhancing breastfeeding rates and regulating sale of milk formula. Results of the research were shared with the participants of 11<sup>th</sup> One Asia Breastfeeding Partners' Forum held in Putrajaya, Malaysia in November, 2015. The report is available at: <http://ibfan.org/docs/Carbon-Footprints-Due-to-Milk-Formula.pdf> The report has been shared through the emails to partners. It will be printed in 2016 and shared with the policy makers, UN agencies and partners. A journal paper based on the results of the study will also be prepared.

### 3.3 IBFAN Asia's revised and updated position statement on HIV & Infant Feeding 2015

IBFAN Asia developed "Position Statement on HIV and Infant Feeding" in the year 2001 and revised it in 2008 and 2012 based on the scientific evidences available at that time including guidelines of WHO and other key international documents. Since the last revision in 2012, a significant amount of new research evidence and programmatic experience on infant feeding in HIV positive women has emerged, leading to a major shift in policies and programmes on infant feeding. This has prompted IBFAN Asia to revise the statement with incorporation of new research findings, protocols, and guidelines available. The statement was widely disseminated to the policy makers, programmes managers and partners.

The statement is available at: <http://ibfan.org/ips/IBFAN-Asia-Position-Statement-on-HIV-and-Infant-Feeding-2015.pdf>



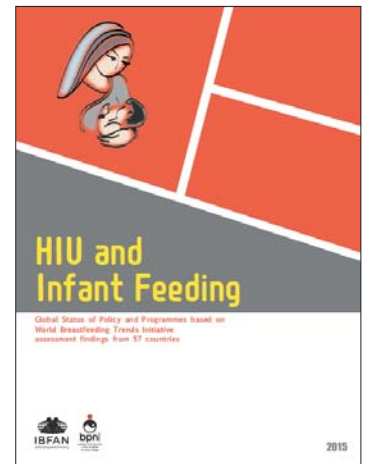
### 3.4 Report on the status of HIV & Infant Feeding based on the World Breastfeeding Trends Initiative assessments

Evidence based advocacy in the field of Infant feeding and HIV is a major area of work for IBFAN Asia. In this pursuit, a report based on the World Breastfeeding Trends Initiative (WBTi) was developed in collaboration with the consultant from IBFA-GIFA, final draft of which

was available in 2015. The Report identified the strengths and gaps in policies and programmes on HIV and infant feeding in 57 countries around the world. The report looked into various aspects of policies and programmes on HIV and infant feeding like policy giving effect to the International Code of Marketing of BMS; training of health staff and community workers; availability of Voluntary and Confidential Counselling and Testing (VCCT); Infant feeding counselling being in line with current international recommendations; Efforts being made to counter misinformation on HIV and infant feeding; availability of on-going monitoring to determine the effects of interventions; and inclusion of provision on how to provide support for HIV positive mothers in the Baby-friendly Hospital Initiative etc.

#### Analysis

IBFAN Asia/BPNI made significant progress in providing updated information and enhancing awareness on issues like HIV and Infant feeding and carbon footprint due to infant formula. New reports and documents on these subjects were developed and disseminated and research on carbon footprints due to infant formula accomplished.



# 4. Strengthening Policy and Legislative Frameworks

## 4.1 IBFAN Asia Working Group on the International Code at AIMI, Indonesia

There has been a growing realisation that strengthening the network with decentralisation of work will help in better implementation of programmes. International Baby Food Action Network (IBFAN) Asia developed a functional unit in sub-region, AIMI Indonesia to strengthen the work on Code and progress has been seen in the form of capacity building/sensitization of country groups on Code and its implementation and information sharing. AIMI shared the progress of work being undertaken by it with the participants of the 11<sup>th</sup> One Asia Breastfeeding Partners' Forum in Putrajaya, Malaysia in November, 2015. AIMI, planned and prepared for the capacity building training on International Code of Marketing of Breastmilk Substitute, scheduled in January 2016, in partnership with International Code Documentation Centre (ICDC) and Gerakan Kesehatan Ibu dan Anak (GKIA), a coalition of civil society organizations in Indonesia.

## 4.2 Implementation of the national legislation to protect breastfeeding in India

BPNI is an authorized agency by Government of India to monitor the Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992 and Amendment Act 2003 (IMS Act) and initiate legal action against the violators of the law. BPNI undertook following activities in 2015 for monitoring and implementation of the Act.

### 4.2.1 Monitoring the violation of the IMS Act and taking appropriate action

A team of fulltime, trained experts in BPNI office monitors the implementation of the IMS Act on a continuous basis through analysing labels of baby food products, E-marketing websites, reviewing

magazines and scientific journals to keep track of advertisements by baby food companies and keeping a watch on the possible violations happening through health systems. The team also undertakes action on information received from its' members and others on possible violations of the IMS Act. After the analysis of a perceived violation of the IMS Act, appropriate action, including legal action is taken. Following monitoring activities were undertaken by BPNI during the last one-year.

### *Information sheets on promotional activities by formula companies*

- a. A review of the E-marketing websites led to detection of several instances of promotional activities prohibited in the IMS Act, which were analysed and compiled in the form of an information sheet, published and disseminated. Please see: <http://bpni.org/IMS-ACT/BTL-7-24022016-low-res.pdf>
- b. BPNI published one more information sheet highlighting examples of violations of the IMS Act like organising a quiz for nurses by Nestle in JLN Medical College, AMU, Aligarh; displaying promotional material by Nestle in the GB Pant Hospital, Port Blair, Andaman and Nicobar; providing free samples of infant milk substitute NUSOBEE by Nutricia in GB Pant hospital, Port Blair, Andaman & Nicobar Island and a number of promotional activities by baby food and feeding bottle manufacturers on the E-marketing websites. Please see: <http://bpni.org/IMS-ACT/BTL-6.pdf>

### *Action on promotional activities of formula companies and feeding bottle manufacturers*

- a. A violation of the IMS Act by an E-marketing site was analysed by the legal advisor of BPNI and a complaint has been filed in the court of law in Delhi. The case is being pursued by BPNI for which

- several hearings have already happened.
- b. BPNI detected promotion of feeding bottles through advertisements and financial incentives on several E-marketing websites. BPNI sent a letter in May, 2015 to Secretary, Ministry of Women and Child Development, Government of India to take necessary action against these e-marketing companies <http://www.bpni.org/IMS-ACT/letter-to-Sh-Vinay-Sheel-Oberoi-12May2015.pdf>. BPNI also sent a letter to the officials of these companies including Snapdeal, Flipkart, Junglee, Amazon etc. asking them to withdraw advertisements of all kind of feeding bottle & stop providing rebate on the same.
  - c. BPNI received information about the violation of the IMS Act in the Indira Gandhi Medical College, Shimla, where advertisement by Nestle was displayed in the library of the college. A letter was sent to the Principal of the college and the Ministry of Health, Government of Himachal Pradesh to take necessary action.
  - d. BPNI received information about the violation of the IMS Act in Guru Gobind Singh Hospital, Government of Delhi where printed advertising material on infant foods was distributed by Nestle. A letter was sent to the Minister of Health, Government of Delhi to take appropriate legal action and pursued it with the officials of the ministry who are investigating it <http://www.bpni.org/IMS-ACT/Letter-to-Health-Minister-Shri-Satyender-Jain2015.pdf>.
  - e. BPNI came across an information about baby food manufacturer Nestle organizing a symposium titled “emerging trends in infant nutrition: expert input meet for sharing best practices at institutional level” in May 2015 at Pune for medical and health professionals. BPNI wrote to the ethics committee of the Medical Council of India to take appropriate action against the medical practitioners participating in the symposium in violation of the IMS Act. BPNI also wrote to the Secretary, Ministry of Health & Family Welfare and the Secretary, Ministry of Women and Child Development, Government of India to initiate action against Nestle for violating the Act.
  - f. In April 2015, BPNI received information about a

proposed quiz for nurses being organized by Nestle in the JLN Medical College, AMU, Aligarh. BPNI wrote to the Secretary, Ministry of Health and Family Welfare, Government of India; the Secretary, Ministry of Women and Child Development, Government of India to initiate action against Nestle; and the Secretary General, Trained Nurses Association of India (TNAI) to motivate its members to avoid participating in the quiz programme. BPNI also wrote to Principal and Chief Medical Superintendent, JLN Medical College, Aligarh, AMU requesting to withdraw participation in the programme. Another letter was written to the President, Indian Nursing Council requesting him to issue instruction to the nursing personnel not to violate IMS Act by attending quiz programme being organized by Nestle Nutrition Institute, a front organization of Nestle. BPNI released a press note (See: [http://bpni.org/Press\\_Releases/Press-Brief-NNI-Nurses-11april2015.pdf](http://bpni.org/Press_Releases/Press-Brief-NNI-Nurses-11april2015.pdf)) in collaboration with TNAI based on which many media reports appeared. See:

- <http://timesofindia.indiatimes.com/india/Nestle-sponsors-quiz-for-medical-staff-violates-law/articleshow/46952493.cms>
- <http://southasia.oneworld.net/news/nestle-trying-to-influence-nurses-in-india-bpni#.Vu5q5sefTos>
- <http://www.kerala.com/news/show-71310-nestle-sponsors-quiz-for-medical-staff,-violates-law>

The quiz programme was finally withdrawn.

#### **4.2.2 Working with the Government of India and state governments**

**Advocacy:** BPNI regularly advocates with the authorities for effective implementation of the IMS Act at various platforms including the National IYCF Steering Committee meeting. BPNI disseminated online monitoring system developed by International Centre for Code Monitoring (IBFAN-ICDC) to its contacts including the Ministry of Health and Family Welfare, Government of India.

#### **Report to Government of India on the monitoring of**



**the compliance with the IMS Act:** Just like previous years, BPNI submitted a report of all the activities related with the implementation of the IMS Act to the nodal ministry, Ministry of Women and Child Development, Government of India. The report included activities like monitoring the violations of the IMS Act; development and dissemination of resource material on IMS Act; organising advocacy meetings; training on the IMS Act; pursuing the legal proceedings in a case against an E-marketing portal and submission of relevant information to the Ministry of Women and Child Development, Government of India periodically about the violations of the IMS Act. See the full report at: <http://bpni.org/IMS-ACT/IMS-act-action-taken-report2015.pdf>

**Sensitization workshops on IMS Act:** BPNI organised and/or participated in the sensitisation programme on IMS Act as follows:

- a. For health professionals to enhance awareness on provision of the IMS Act in collaboration with Civil Surgeon's office, Palwal, Haryana in May 2015
- b. For health professionals to enhance awareness on provision of the IMS Act at Bengaluru, Karnataka on 20<sup>th</sup> March, 2015 in collaboration with the Departments of Health and Family Welfare and Department of Women and Child Development, Government of Karnataka; Karnataka Legal Cell Authority; Indian Academy of Paediatrics; National Neonatology Forum; Indian Medical Association and Federation of Gynaecological Society of India.



**Sensitisation workshop on IMS Act held at Karnataka In March 2015**

### 4.3 Contribution for the Codex Alimentarius activities

IBFAN Asia contributes to Codex work globally as well as at country level. Following are some specific activities accomplished in 2015. IBFAN Asia is a member of IBFAN global Codex group and participates actively throughout the year in formulating IBFAN positions for various subjects being discussed in Codex committees and contribution to the report of the global group. IBFAN Asia coordinates a working group on Codex Alimentarius which helps countries in the region to strengthen the Codex process.

#### 4.3.1 IBFAN Asia Working Group on Codex Alimentarius

IBFAN Asia RCO coordinates IBFAN Asia Working Group on Codex Alimentarius, with members from Afghanistan, Bangladesh, Maldives, Mongolia, Nepal, Lao PDR and Sri Lanka. Information about Codex activities like registration for participation in the global meetings, registration for eWG on various ongoing proposals, and application for the Codex Trust Funds as well as relevant documents on the ongoing work are shared with the group members. IBFAN Asia RCO supports working group members to establish an effective mechanism at the country level. *Afghanistan* has started the process to establish national committee on CCNFSDU and have conducted meetings of leadership teams between Ministry of Public Health and Agriculture for establishment of National Codex committee. Two technical teams have been assigned to develop Terms of Reference and membership criteria, and a plan to train all Codex members. *Bangladesh* is contributing to the eWG on various proposals in CCNFSDU. Efforts are on to facilitate Codex work in Mongolia, Maldives and Sri Lanka. Country delegates are also supported to attend international meetings of Codex committee.

#### 4.3.2 Participation and contribution in the Global Codex Committee meetings

In the 37<sup>th</sup> session of Codex Committee on Nutrition and Food for Special Dietary Use (CCNFSDU) at Bad Soden, Germany, IBFAN Asia participated with the global delegation of IBFAN and assisted in developing the IBFAN briefing paper on agenda items like RUTF and Follow-up Formula and also made the

presentation on RUTF in a side event. Advocacy meetings were held with the delegation of India, Nepal and Bangladesh.

IBFAN Asia represented IBFAN global Codex group in the 9th session of Codex Committee on Contamination in Foods (CCCF9) held in March 2015 in New Delhi, India. Important interventions were made during the proceedings on relevant agenda items with verbal comments and submission of CRD. IBFAN interventions were included in the report of the meeting. See: [http://www.fao.org/fao-who-codexalimentarius/download/report/923/REP15\\_CFe.pdf](http://www.fao.org/fao-who-codexalimentarius/download/report/923/REP15_CFe.pdf)

#### 4.3.3 Contribution to Codex work in India

BPNI, as a member of CCNFSU national shadow committee, contributed in shaping up Government of India's position for key e-Working groups on agenda items namely, Follow-up Formula, Ready to Use Therapeutic Food (RUTF), Bio-fortification and Nutrient Reference Value (NRV) for children etc.

#### 4.4 Action on Conflicts of Interest (COI)

Tracking and reporting Conflicts of interest (COI) in policies and programmes in health and nutrition is a major area of work for BPNI/IBFAN Asia. This year, apart from identifying and reporting COI situations, a global capacity building workshop was also organized. More details are given below:

##### 4.4.1 Sensitisation, Information sharing and Advocacy

IBFAN Asia, through the Alliance Against the Conflicts of Interest (AACI) works on the issue of conflict of interest and brings them to the notice of the parties involved, the government and media. Regular updates are published with latest information and media happenings on COI to sensitize people. (See: <http://www.aaci-india.org>)

##### 4.4.2 Capacity building on COI

IBFAN Asia in collaboration with IBFAN-GIFA, Geneva and Baby Milk Action (BMA), Cambridge organized "Global capacity building workshop & symposium Conflicts of interest and the infant and young child feeding arena - An assessment from a corporate accountability perspective" in December, 2015 at

London. The basic objective of the workshop was to sensitize the IBFAN network on COI to bring them a common understanding and orient them to be able to take it forward and disseminate the knowledge. Key tools were developed and key elements of a COI 'toolkit' were identified to further teach/share/make aware about COI with the network. (See details at: <http://www.aaci-india.org/doc/Concept-Note-and-agenda.pdf>)



COI Workshop in London, UK

#### Analysis

There is progress in the awareness generation, sensitization, and capacity building efforts on the International Code in the region. There has been strengthened communication and understanding on the Codex issues among the countries participating in the IBFAN Asia Working Group on Codex. Countries have been able to take a better position on statements and also give inputs and viewpoints in various agenda items on behalf of the country. IBFAN Asia has been helping country groups like Afghanistan for better inputs in the country standards of the Codex for protecting maternal and infant and young child health. Similarly, sensitization and information sharing on conflict of interest has also been enhanced in the network and region.

# 5. Social Mobilisation, and Information Communications

BPNI/IBFAN Asia works consistently on social mobilisation, networking and advocacy through observing the world breastfeeding Week; developing and sharing documents; and providing information through various websites and social media. Some of the activities undertaken this year are mentioned below:

## 5.1 Global and regional contribution in World Breastfeeding Week (WBW) activities

BPNI Coordinates World Breastfeeding Week activities in South Asian countries as part of WABA regional focal point and share the action folder and other information received from WABA with the country contacts in 8 countries of South Asia. In Afghanistan, Ministry of Public Health organized a seminar on the theme of the week in collaboration with IBFAN Asia/BPNI, UNICEF, WHO, Save the Children, Agha Khan Health System and public Nutrition Department

/MoPH Afghanistan. Minister of Public Health, inaugurated the seminar and emphasised on the maternity protection and having a friendly working environment for working mothers. With the support of IBFAN, IEC materials including 15000 posters, 150000 brochures, 25 billboards and 300 times Radio spots were developed and disseminated. WBW action folder prepared by WABA was disseminated by BPNI/IBFAN Asia in other Asian countries. It was translated in local language and activities organized during the WBW 2015 by Philippines, Indonesia, Singapore, Palau Islands, Vietnam, Republic of Korea, Taiwan and Mongolia. The reports have been uploaded on the IBFAN Asia website <http://www.ibfanasia.org/network.html>.

Arugaan, Philippines is regional focal point of WBW for 11 countries & Korean Breastfeeding Network, south Korea is regional focal point for 5 countries of East Asia.





### 5.2 World Breastfeeding Week (WBW) activities in India

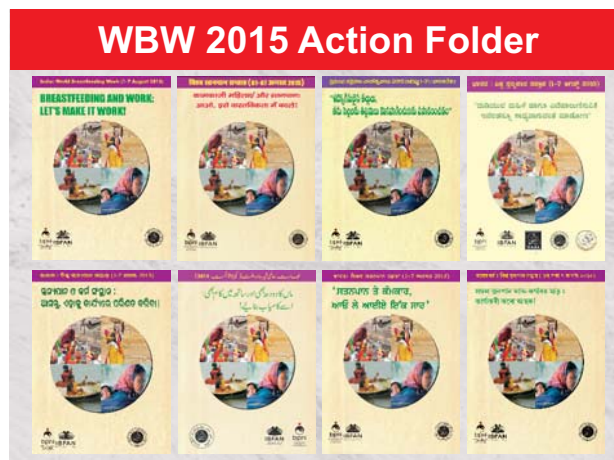
In India, the action folder prepared by WABA was adapted according to local situation, printed and disseminated all across the country. From English, it was translated in 7 Indian languages namely Hindi, Telugu, Kannada, Assamese, Odiya, Punjabi and Urdu. A master PPT on the theme of the week was also developed and disseminated. BPNI held the WBW 2015 contest like each year and conferred best activity award to organizations for observing the week in innovative ways. BPNI received a total of 116 reports from various organizations from different parts of the country. An expert assessment committee verified the reports and selected 20 winners. Details are available at <http://bpni.org/WBW/2015/WBW-2015-result.pdf> etc.

### 5.3 Information sharing through electronic media

For effective sharing of information BPNI/IBFAN Asia RCO maintains several organizational and programme websites and updates them periodically with documents, reports and publications from time to time. These websites are Breastfeeding Promotion Network of India (BPNI), International Baby Food Action Network (IBFAN) global website, International Baby Food Action Network (IBFAN) ASIA website, World Breastfeeding Trends Initiative (WBTi), World Breastfeeding Costing Initiative (WBCi), and Alliance Against Conflict of Interest (AACI). During Feb - Dec 2015, all websites experienced good traffic with excellent number of visits and hits. For more information about the use of these websites, see the table below.

BPNI/IBFAN Asia team also maintains and regularly updates many social media pages like:

- BPNI Facebook page  
(<https://www.facebook.com/bpni.org>),
- IBFAN Asia Facebook page  
(<https://www.facebook.com/ibfan.asia?fref=ts>),
- Babies Need Mom Made Not Man Made campaign page on Facebook  
(<https://www.facebook.com/pages/Babies-Need-Mom-Made-Not-Man-Made/301758009914509>)
- The World Breastfeeding Trends Initiative (WBTi) Facebook group



(<https://www.facebook.com/groups/1484426381863086>)

- BPNI YouTube Channel  
(<https://www.youtube.com/user/bpniindia>).

BPNI/IBFAN Asia also maintains several google groups to share information like Ocean, One Asia, WBTi coordinators, BPNI IYCF counseling Specialists, MLT trainers, National trainers CCC, policy council, BPNI members, state level advocacy, AACI and SAR. BPNI/IBFAN Asia publishes some regular publications like the Newswire etc. throughout the year.

**Table: Visits and hits on various websites maintained by BPNI/IBFAN Asia**

<b>www.ibfan.org</b>	
<b>Total Visits</b>	<b>Total Hits</b>
<b>160,756</b>	<b>3,540,990</b>
<b>www.bpni.org</b>	
<b>Total Visits</b>	<b>Total Hits</b>
<b>143,709</b>	<b>2,111,417</b>
<b>www.ibfanasia.org</b>	
<b>Total Visits</b>	<b>Total Hits</b>
<b>42,845</b>	<b>398,134</b>
<b>www.worldbreastfeedingtrends.org</b>	
<b>Total Visits</b>	<b>Total Hits</b>
<b>56,370</b>	<b>1,011,722</b>
<b>www.aaci-india.org</b>	
<b>Total Visits</b>	<b>Total Hits</b>
<b>17,099</b>	<b>72,420</b>
<b>www.worldbreastfeedingcosting.org</b>	
<b>Total Visits</b>	<b>Total Hits</b>
<b>3,477</b>	<b>110,537</b>

### 5.4 Publications

**The Newswire** -IBFAN Asia News-wire is an electronic resource- lead, which gives the most reliable and updated information on issues related to feeding of babies. It contains case studies, success stories, events, impact stories, scientific alert etc. Two New-wire documents were published during 2015 which may be accessed at: <http://bpni.org/ibfan-asia-newswire-series-10-january-february-2015> ;<http://bpni.org/ibfan-asia-newswire-series-11-march-april-2015>

An **information sheet** on the public health importance of optimal IYCF was developed and disseminated electronically (<http://www.bpni.org/docs/Public-Health-Importance-of-Optimal-IYCF-IS-072015.pdf> )

### Analysis

The year saw a plethora of action on social mobilization and information sharing and communication. World Breastfeeding Week was successfully observed in India and other countries of Asia, technical and information documents were developed and shared, and social media was increasingly used for information sharing. Continuous updating and maintenance of global IBFAN website along with all other websites remained a focused area of work.



**Public Health Importance of Optimal Infant and Young Child Feeding Practices (IYCF)**

Optimal infant and young child feeding practices (IYCF) are effective public health interventions to enhance child survival, nutrition and development. Optimal IYCF practices include early initiation of breastfeeding and exclusive breastfeeding for the first six months of life, and beyond six months, timely and age-appropriate (in terms of quality and quantity) complementary feeding of children, with continued breastfeeding up to two years of age. Following is the available evidence showing public health relevance of optimal IYCF.

**Reduction in child morbidity and mortality**

- An epidemiological evidence of a causal association between early breastfeeding and infection specific mortality in the newborn infants has shown 2.8 fold increase in infection specific maternal mortality with late initiation of breastfeeding (later than day 1).
- WHO has estimated that under-nutrition contributes significantly (15% of total deaths) to mortality due to major infectious diseases like diarrhoea, pneumonia and neonatal infections in children less than five years of age. Contribution of under-nutrition to deaths due to diarrhoeal diseases is 73%, and about 50% for other infections like pneumonia, measles and severe neonatal infections.<sup>1</sup>
- A review of evidence published in the Lancet (2013) reveals that in infants below six months of age, not breastfeeding increases relative risk of all cause mortality to 2.6 times, diarrhoea mortality to 10.58 times and pneumonia mortality to 15.13 times. In children 6-23 months of age, premature weaning from breastfeeding increases relative risk of all-cause mortality to 3.68 times, diarrhoea mortality to 2.10 times and pneumonia mortality to 3.52 times.<sup>2</sup>
- A systematic review has concluded that breastfeeding is a key intervention to protect against incidence, prevalence, hospitalisation, and mortality due to anaemia in children younger than five years of age.<sup>3</sup>
- Similarly for diarrhoea, a review (Lamberti LM, 2011) has concluded that exclusive breastfeeding among infants 0-5 months and any breastfeeding among infants and children 6-23 months offers protection against its incidence, prevalence, hospitalisation and mortality.<sup>4</sup>
- A global ecological risk assessment study has found that acute infections, including otitis media, Haemophilus influenzae meningitis and urinary tract infections are less common and less severe in breastfed infants.<sup>5</sup>
- Even in the USA, where double breast infection is relatively uncommon, there were 23% to 24% fewer deaths among children who were breastfed than among those who were predominantly formula-fed.<sup>6</sup>
- In the 16 million survey of 15,000 infants, six months of exclusive breastfeeding was associated with a 53% decrease in hospital admissions for diarrhoea and 27% decrease in respiratory tract infections each month, partial breastfeeding was associated with 33% and 25% decreases respectively.<sup>7</sup> (Quajery MA, Kelly Y, Sacker A, 2006).
- The US Surgeon General's report cites increased risk of severe lower respiratory infections, and leukaemia in formula-fed infants, with risks of hospitalisation for the former being 252% higher than in those who are exclusively breastfed for at least four months. Never-breastfed infants also have a 56% higher risk of mortality from Sudden Infant Death Syndrome.<sup>8</sup>

**Long-term impact on adult health and NCDs**

- Breastfeeding provides protection against adulthood diseases. WHO, in its updated 2013 version on long term impact of breastfeeding concludes that breastfeeding has a significant impact on non-communicable diseases, particularly obesity and diabetes. It has also shown a small protective effect against systolic blood pressure.<sup>9</sup>
- The global report on NCDs envisages expenditure of trillions of dollars in the coming two to three decades to reduce the burden of NCDs. If this is believed to be true, then an investment to increase optimal breastfeeding in one cohort of births has the potential of significantly reducing NCDs in one generation.

# 6. Strengthening the Consortium and rejuvenating the Breastfeeding Movement



ONE ASIA BREASTFEEDING PARTNERS FORUM

## 6.1 Advocacy at national level

One of the main activities of BPNI is to advocate with relevant authorities to protect, promote and support breastfeeding and infant and young child feeding. BPNI performs this task through contributing in the proceedings of various committees as a member as well as by meeting the policy makers as and when need arises. Following are few examples of effective advocacy efforts by BPNI.

### 6.1.1 Advocacy for policy development

BPNI central coordinator is a member of the expert group drafting the National Nutrition Mission document for India. BPNI is also a member of the Niti Aayog chaired expert group drafting India's nutrition strategy. At state level, BPNI Central Coordination

Committee met the mission director, National Health Mission and the Principle Secretary, Social Justice and empowerment, Government of Himachal Pradesh to apprise them about the relevance of breastfeeding in tackling high child morbidity and mortality. This resulted in BPNI's engagement with both the departments to have collaborative capacity building interventions in the state. BPNI is a member of India's National Steering Committee of IYCF and participated in its first meeting in September 2015 in which important decisions about Maternity benefits, developing information booklets for mothers, IEC campaign, implementation of the IMS Act, provision of IYCF Counsellor in hospitals, measures for supporting breastfeeding in public places etc were taken.

### 6.1.2 Advocacy for enhancing the maternity leave in India

India provides 12 weeks of maternity leave through the Maternity Benefits Act 1961 to women working in the organized sector. Breastfeeding Promotion Network of India has been doing advocacy at various platforms to increase the leave to 9 months. Recently, Ministry of Women and Child Development, Government of India (the nodal ministry for infant and young child feeding), has proposed to the Ministry of Labor (who administers the Maternity Benefits Act) to increase the maternity leave from existing 3 months to 8 months for the government employees and for 26 weeks for the private sector employees. In 2015, BPNI worked actively to advocate an increase in the maternity leave with following activity:

- This year's WBW theme was Breastfeeding and Work Let's Make it Work! BPNI developed a local adaptation of the action folder provided by WABA and shared it with the senior officials of Ministry of Health (MOH), Ministry of Women and Child Development (MWCD), and Planning Commission (NITI Ayog) of Government of India as well as their counterparts in the states.
- India's fourth WBTi assessment happened this year and one of the recommendation in the WBTi report was to amend the Maternity Benefit Act (MBA) 1961 to increase the maternity leave to 9 months to all women.
- The Additional Secretary of MWCD, Government of India, released the report. In her speech, she informed about the proposal of the ministry to increase the maternity leave to 8 months. She assured that deliberations, which will come out of the workshop and we both ministries, would ensure we take it forward.
- In the same meeting (release of WBTi report), official from the office of Chief Labour Commissioner also informed about the ongoing process of revision of the MBA.
- The WBTi report and its' release was widely covered by the print, online and electronic media (See: <http://bpni.org/arrested-development-wbti-4th-assessment-of-india-s-policy-and-programmes-on-IYCF>).
- India's national TV channel Doordarshan News

aired a special report on the status of breastfeeding in India, which was based on WBTi report. Dr. Arun Gupta was interviewed in it and he emphasized on appropriate maternity leave. See at: <https://youtu.be/Sg0necpCq14?t=8>

- Based on the WBTi report, a Call to Action was developed in which a call was given to the Government of India to implement uniform maternity protection and policies for all working women both in organized and unorganised sector.
- The WBTi report and the Call to Action was sent to the Prime Minister's office; Health Minister, Government of India; Minister of Women and Child Development, Government of India; ministry of Labour and employment and other ministries of Government of India.
- The Call to Action was presented to the Chairman of the National Steering Committee on Infant and Young Child Feeding (Secretary MWCD, Govt. of India) during the meeting.
- Crèches constitute an important component of maternity entitlements. Ministry of Women and Child Development, Government of India is working on a policy to establish community crèches, which could be availed by all working women. BPNI is a part of the group, which is working with the Government of India to develop guidelines for Crèches.
- BPNI as an active civil society member of an advocacy group called the **Alliance for Right to Early Childhood Development**, met the Secretary, Ministry of Labour, Government of India demanding amendments in the National Maternity Benefit Act 1961. The Secretary asked the Alliance to submit ideas on how to reach the women working in the unorganised sector as well as to provide clause-by-clause recommendations on National Maternity Benefit Act with simple implementations mechanisms.

### 6.2 Advocacy at regional and global level

IBFAN Asia actively advocates for protection, promotion and support of breastfeeding and infant and young child feeding at regional and global level. This is done through networking, meetings, regional Forum, developing and disseminating technical/scientific documents, conducting research



etc. Some of such activities happened during 2015 for which information is given below.

### 6.2.1 One Asia Breastfeeding Partners' Forum- 11

Since 2004, IBFAN Asia hold an annual Forum of the partners in a new country of the region each year. In 2015, IBFAN Asia in collaboration with Breastfeeding Information Bureau (BIB) Malaysia with the technical support of Ministry of Health and Ministry of Family and Community Development Government of Malaysia, organised the One Asia Breastfeeding Partners' Forum 11 at Putrajaya, Malaysia on 2-5 November, 2015. The Forum brought together over 150 participants from 21 countries of Asia.

The participants represented governments, civil society, professionals, breastfeeding organisations, health providers, peoples organisations and movements, international NGOs and individuals from Bangladesh, Bhutan, Brunei Darussalam, Cambodia, People's Republic of China, Hong Kong SAR, Chinese Taipei, India, Indonesia, Republic of Korea, Lao PDR, Nepal, Malaysia, Maldives, Mongolia, Myanmar, Pakistan, Philippines, Sri Lanka, Thailand, and Vietnam, UK and Switzerland.

Theme of the Forum was "Maternity Protection for all women at work". A 57 country report on status of maternity protection titled, "Labour Lost" was released at the Forum. . See more information at: [http://ibfanasia.org/OABPF-11\\_Malaysia.html](http://ibfanasia.org/OABPF-11_Malaysia.html)

The Forum helped in deliberating issues relevant to IBFAN core work, forging new synergy among the participants and planning for the coming year. A plethora of subjects like Women's work - the crux of trade ,maternity protection, Climate change and infant and young child feeding - Carbon Footprints due to formula feeding, **The Trans-Pacific Partnership and Maternal Health**, Baby Friendly Hospital Initiative, Conflict of Interest in nutritional programmes, Implementation of the International Code of Marketing of BMS, Processed foods vs real foods: Babies Need Mom-Made not Man- Made, Ready to Use Therapeutic Foods (RUTF) for Severe Acute Malnutrition (SAM) - What science says? Etc. Participants developed a '[Putrajaya Call to Action](#)' urging all concerned to strengthen the policies and

programmes on IYCF.

### 6.2.2 Participation in/ organising meetings:

IBFAN Asia participated in the annual meeting of the Global Network for Right to Food and Nutrition in Kathmandu, Nepal on 20-22 July, 2015. Participants agreed on a [Statement/Declaration](#) urging for strengthening right to food and nutrition all across the world.

The Annual meeting of the IBFAN Asia Policy Council was held on 1st November 2015 in Putrajaya, Malaysia in which issues related with donor projects being implemented, future plannings and budgets etc. were discussed.

Meetings of the Central Coordination Committee of BPNI were held on 4-6 September 2015 in Shimla, Himachal Pradesh and 4-6 December, 2015 in Delhi.

## 6.3 Research activities

As a part of effective and evidence-based advocacy, BPNI/IBFAN Asia undertook community research projects and also published scientific articles as the information given below.

- IBFAN Asia completed a quantitative research titled "A community based study to explore determinants of feeding practices in a resettlement colony of east Delhi" with the collaboration of Department of Community Medicine, University College of Medical Sciences and Guru TegBahadur Hospital, Delhi. Based on the study, a paper entitled "*A study of determinants of infant feeding practices in a resettlement colony of Delhi*" was sent for publication in the journal "Annals of Medical and Health Sciences".
- Another research entitled "The Impact of skilled counselling and support on exclusive breastfeeding" is going on with the collaboration of Department of Paediatrics, Jawaharlal Nehru Medical College, Aligarh Muslim University in Aligarh. The study is scheduled for completion in September 2016.
- BPNI/IBFAN Asia staff were invited by prestigious scientific journals like Public Health Nutrition; ICAN: Infant, Child, & Adolescent Nutrition; Indian Pediatrics and Indian Council of Medical Research for peer-reviewing of scientific articles.
- BPNI/IBFAN Asia staff contributed as co-authors in

two articles published in the indexed journals:

- Holla-Bhar R, Iellamo A, Gupta A, Smith JP, Dadhich JP. Investing in breastfeeding - the world breastfeeding costing initiative. *Int Breastfeed J* 2015 Feb 23; 10:8.
- Omer-Salim A, Suri S, Dadhich JP, Faridi MM, Olsson P. Negotiating the tensions of having to attach and detach concurrently': a qualitative study on combining breastfeeding and employment in public education and health sectors in New Delhi, India. *Midwifery* 2015 Apr; 31(4): 473-81.
- Arun Gupta, Radha Holla, Shoba Suri. Conflict of interest in public health: should there be a law to prevent it? *Ind J Med Ethics* 2015 Jul-Sept;12(3):172-7.
- Gupta A, Dadhich JP, and Suri S. Infant Malnutrition/Breastfeeding. Reference Module in Biomedical Sciences. Elsevier, 4-May-15.
- Arun Gupta, Shoba Suri. Providing Food Security, Tackling Undernutrition. Chapter in *Human Development in the Global South. Emerging perspectives in the era of post-millennium development goals*. Eds Tanuka Endow, Sumit Mazumfar, Mitu Sengupta, Institute for Human Development. Pp 165

#### **6.4 Coordination of IBFAN-WABA consortium project supported by Sida and the gBICS project supported by NORAD**

IBFAN Asia RCO coordinated the projects supported by Sida and NORAD which included developing annual work-plan, contribution in the development of annual financial plan, developing coordinated work-plan, revising Logical Frameworks, communication with the focal points at WABA and CEFEMINA, coordination of technical services, developing contracts and getting them signed, communication with implementing partners like IBFAN GIFA, development and submission of the report to WABA etc., contribution in annual reporting to Sida and NORAD etc.

#### **6.5 Membership in international, regional and national committees; decision making bodies**

IBFAN Asia/ BPNI is recognised as a credible voice on the issue of breastfeeding and infant and young child

feeding and continued to contribute in various governmental/non-governmental committees etc as information provided below.

- Member, Prime Minister's Council for India's Nutrition Challenges
- Member, National Infant and Young Child Feeding Coordination Committee
- Member, National Infant and Young Child Feeding Steering Committee
- Member, UNICEF Breastfeeding Advocacy Initiative
- Member, National Shadow Committee on Codex Committee on Nutrition and Food for Special Dietary Uses
- Member of Working Group on Children's Right to Food, India
- Member of the National Coordination Committee of Jan Swasthya Abhiyan (Indian component of Public Health Movement)
- Representing IBFAN in the Global Network for Right to Food and Nutrition
- Member, Institutional Review Board, National Institute of Public Cooperation & Child Development (NIPCCD)

#### **Analysis**

Advocacy efforts continued leading to better policies and guidelines on IYCF. BPNI leadership teams members are recognized as experts on various issues related to IYCF and invited by Government & other agencies for expert contributions. BPNI/IBFAN Asia continues to coordinate the planning, execution and reporting of project activities. Networking with the partners in the region and beyond continued this year also through meetings, conferences, sharing of information etc. BPNI/IBFAN Asia continues action to strengthen the breastfeeding movement among the network by regular communication and planning exercises along with the policy council members-the think tank working towards improving the work at the sub-region/country level and regular annual meeting. The RCO also coordinates with the country coordinators on the WBTi assessment or reassessment process, any training or updating required.

# Partnerships/Collaborations and Donors

BPNI/IBFAN Asia acknowledges the support and contribution of all partners (National and International) who have helped and extended support to BPNI/IBFAN Asia in its endeavors to protect, promote and support breastfeeding.

## International Partners

- Swedish Development Cooperation Agency (Sida) and Norwegian Agency for Development Cooperation (NORAD), are primary funding agencies for our work.
- Ministry of Health, Government of Malaysia hosted the One Asia Breastfeeding Partners Forum-10.
- IBFAN-GIFA hosted the training on WBTi for European region and conducted a training on Human Rights
- Health Protection Agency, Government of Republic of Maldives
- UNICEF, Maldives
- Baby Milk Action (BMA), UK
- World Alliance for Breastfeeding Action (WABA)

## National Partners

- Ministry of Women and Child Development, Government of India
- Ministry of Health and Family Welfare, Government of India
- IYCF state resource centre Postgraduate Department Of Paediatrics, National Health Mission, J&K
- National Health Mission (NHM), Government of Bihar
- Mother Theresa Post-graduate & Research Institute of Health Sciences, Government of Puducherry
- National Health Mission (NHM), Government of Himachal Pradesh
- National Institute of Public Cooperation and Child Development (NIPCCD)
- UNICEF, Bihar state
- University College of Medical Sciences and Guru Teg Bahadur Hospital, New Delhi
- Department of Women and Child Development, Government of Uttarakhand
- Trained Nurses Association of India
- Aligarh Muslim University

# Audited Account Statement as on 31.3.2015

Breastfeeding Promotion Network of India  
BP-33, Pitam Pura, Delhi - 110034

Balance Sheet as on 31 March 2015

Source of Funds (Liabilities)		Amount Rs.
<b>Membership Fees</b>	1,880,718.00	
CORPUS ACCOUNT	159,498.15	2,040,216.15
Fixed Assets Fund	1,122,654.53	1,122,654.53
<b>Current Liabilities</b>		
Sundry Creditors	383,754.00	
Expenses Payable	187,079.00	
Grant in advance	11,382,524.05	
TDS payable	99,207.00	12,052,564.05
<b>Surplus/Deficit</b>		
Surplus for the Current Year	537,736.20	
Less Deficit for last years	198,642.35	339,093.85
		<b>15,554,528.58</b>
<b>Application of Funds (Assets)</b>		
<b>Fixed Assets</b>		
(As per annexure "A")		549,296.20
<b>Current Assets</b>		
<b>Cash &amp; Bank Balances</b>		
Cash in Hand	3,315.98	10,392,976.83
Canara Bank (Corpus) a/c 84677	21,732.00	
Canara Bank (FCRA) a/c 84701	8,988,206.97	
Canara Bank a/c 17392	95,509.91	
Canara Bank a/c 26370	798,760.43	
ICICI Bank a/c 015401012949	485,451.54	
<b>Deposits</b>		
Sundry Deposit	132,000.00	132,000.00
<b>TDS Receivable</b>	201,723.00	201,723.00
<b>Advances</b>		
Accounts Receivable	2,375,835.00	
Advances	1,871,317.55	
Prepaid Expenses	31,380.00	4,278,532.55
		<b>15,554,528.58</b>

As per our Report of Even Date Attached  
For BHARGAVA ASSOCIATES  
Chartered Accountants

(CA N.P. Singh),  
Partner  
Partner Membership No. 84209  
Firm Registration No. 000582N

Date: 29/09/2015  
Place: Delhi

For Breastfeeding Promotion Network of India

Dr Pawan Garg  
Treasurer

Dr. Arun Gupta  
Central Coordinator


BREASTFEEDING PROMOTION  
NETWORK OF INDIA  
BP-33, Pitam Pura, Delhi-110 034

**Breastfeeding Promotion Network of India**  
BP-33, Pitam Pura, Delhi - 110034

**Income & Expenditure Account for the year ended 1st April-14 to 31 March 2015**


<u>Income</u>	Amount
Grant Received	
IBFAN Asia Project	17,366,711.72
IBFAN Oceania Operational Plan	824,872.00
SAFANSI Project: Strengthen IYCF Capacity in SAR	13,762,989.79
Certificate Course 2014 Puducherry	330,000.00
IYCF Specialists Training Gaya	177,049.00
IYCF Specialists Training Manipal	260,000.00
NMCH 2015-IYCF CS Patna	558,546.00
MLT 2014 NMCH, Patna	1,324,092.00
NCF Capacity Building Trainers	1,224,783.00
Supervision FLW Training SIHFW	55,000.00
Training of MLT Haryana	263,399.00
Other Sundry Grant	301,116.00
Publications Receipts	2,038,847.00
Donation(Through Global Giving Foundation)	956,214.22
Bank interest received	103,562.00
Interest on FDR(Bank)	11,043.25
Misc. Income	14,191.00
Short - Excess W/Off	52.80
<b>Total</b>	<b>39,572,468.78</b>

As per our Report of Even Date Attached  
For BHARGAVA ASSOCIATES  
Chartered Accountants

  
H.P Singh,  
Partner  
Partner Membership No. 84209  
Firm Registration No. 000582N

Date : 29/09/2015  
Place: Delhi

For Breastfeeding Promotion Network of India

  
Dr. Pawan Garg  
Treasurer

  
Dr. Arun Gupta  
Central Coordinator

BREASTFEEDING PROMOTION  
NETWORK OF INDIA  
BP-33, Pitam Pura , Delhi-110 034

**Breastfeeding Promotion Network of India**  
BP-33, Pitam Pura, Delhi - 110034  
**Income & Expenditure Account for the year ended 1st April 2014 to 31 March 2015**

<u>Expenditure</u>	Amount
IBFAN Asia Project	17,366,343.26
IBFAN Oceania Operational Plan	824,872.00
SAFANSI Project: Strengthen IYCF Capacity in SAR	13,762,989.79
Certificate Course 2014 Puducherry	266,181.00
IYCF Specialists Training Gaya	177,699.00
IYCF Specialists Training Manipal	225,039.00
NMCH 2015-IYCF CS Patna	558,546.00
MLT 2014 NMCH, Patna	1,324,092.00
NCF Capacity Building Trainers	1,224,783.00
Supervision FLW Training SIHFW	40,640.00
Training of MLT Haryana	263,399.00
<u>Other Sundry Grant</u>	
Coordinating and Monitoring Global website	301,116.00
Printing and Publications	1,112,685.50
BPNI Core Activity Expenses	64,287.00
Advocacy Expenses	50,394.30
Audit fee	33,000.00
Bank Charges	61,414.00
Books and Subscription Charges	19,070.00
BPNI Admn. Costs	656,735.00
BPNI Core expenses	178,635.90
Depreciation	172,182.64
General Expenses	2,796.80
Interest on TDS	1,800.00
Meeting Expenses	1,681.00
Office repair and Maintenance	67,277.72
Office Utilities	1,075.00
Postage & Courier	42,898.00
Printing & Stationery	42,914.00
Staffs welfare expenses	51,078.00
Write offs	4,240.00
Telephone & communication expenses	15,356.04
Travelling & Conveyance	65,173.63
Vehicle Runing and Maintenance Charges	54,338.00
	<b>39,034,732.58</b>
Excess of Income over Expenditures	537,736.20
<b>Total</b>	<b>39,572,468.78</b>

As per our Report of Even Date Attached

For BHARGAVA ASSOCIATES

Chartered Accountants



Partner Membership No. 84209

Firm Registration No. 000582N

29/09/2015

Date :

Place: Delhi

For Breastfeeding Promotion Network of India

*Pawan Garg*  
Dr. Pawan Garg  
Treasurer

*Arun Gupta*  
Dr. Arun Gupta  
Central Coordinator

**BREASTFEEDING PROMOTION  
NETWORK OF INDIA**  
BP-33, Pitam Pura , Delhi-110 034

**BREASTFEEDING PROMOTION NETWORK OF INDIA  
BP-33 PITAMPURA, DELHI-110088**

FIXED ASSETS AS ON 31.03.2015

S.NO	Particulars	Depreciati on Rate	ADDITIONS				Depreciati on for the year	Loss on sale of assets	Closing Balance as on 31.03.2015
			Opening WDW as on 31.03.2014	Before 30.09.2014	After 01.10.2014	Sold/ Discarded			
1	Computer	60%	122,237.50		118,687.00	0.00	240,924.50	108,948.60	131,975.90
2	Cooler	15%	1,467.27	10,700.00			12,167.27	1,825.09	10,342.18
3	Cycle	15%	3,361.75		3,644.00	0.00	7,005.75	777.56	6,228.19
4	Furniture	10%	110,484.02				110,484.02	11,048.40	99,435.62
5	Office Equipment	15%	63,778.53			9,089.00	63,778.53	9,566.78	45,122.75
6	Electrical Motor	15%	543.93				543.93	81.59	462.34
7	Electrical Fans	15%	808.84				808.84	121.33	687.51
8	Invertor	15%	9,285.07	193,624.00		9,285.00	193,624.07	29,043.60	164,580.47
9	Room Heater	15%	2,346.87				2,346.87	352.03	1,994.84
10	Water Cooler	15%	1,688.75				1,688.75	253.31	1,435.44
11	Gyser (Electric)	15%	830.31				830.31	124.55	705.76
12	Air Conditioner	15%		37,500.00			37,500.00	5,625.00	31,875.00
13	Honda Activa Scooty	15%			58,864.00		58,864.00	4,414.80	54,449.20
14	Tata Sumo	15%		1.00			1.00		1.00
			316,832.85	241,824.00	122,331.00	18,374.00	730,567.85	172,182.64	0 549,296.20

As per our Report of the date attached  
For BHARGAVA ASSOCIATES  
Chartered Accountants

(CA) P. Singh,  
Partner  
Partner Membership No. 84209  
Firm Registration No. 000582N

Date:  
Place: Delhi

29/09/2015

For Breastfeeding Promotion Network of India

Dr Pawan Garg  
Treasurer

Dr Arun Gupta  
Central Coordinator

**BREASTFEEDING PROMOTION  
NETWORK OF INDIA  
BP-33, Pitam Pura , Delhi-110 034**

<http://www.bpni.org>



<http://ibfanasia.org/>

