

Background Paper

Regional Consultation of Key Stakeholders' on Enhancing the rates of Optimal Infant and Young Child Feeding (IYCF) with major thrust on capacity development

Midterm Assessment of the 11th five -year plan has observed that the key issue to tackle under nutrition among children is early and exclusive breastfeeding. It observed, *“The single-most important factor that could reduce malnutrition and mortality is, perhaps, early and exclusive breast-feeding, which has not received sufficient attention since there is no budget attached to it and no physical monitoring indicators for it. This aspect needs urgent attention....”*

To give thrust to breastfeeding and infant and young child feeding in coming years, a meeting was held with Secretary WCD. In the meeting Secretary WCD expressed to lend support and requested to work out details of the 4 regional consultations of Key stakeholders' on Enhancing the rates of Optimal Infant and Young Child Feeding (IYCF) with major thrust on capacity development to be held in the last quarter of 2011 and National Consultation to set the agenda of IYCF during first quarter of 2012. Also it was suggested that the regional consultations to be held at the Regional Centres of NIPCCD situated in Bangalore, Guwahati, Lucknow, Delhi and Indore.

The Secretary official letter no. D.O.No.4/3/2011/ND/I&E dated 2nd August 2011 from Secretary, WCD to all Chief Secretary, to initiate discussion by constituting a special State Group to mainstream IYCF skill training and capacity development. Also as major thrust on capacity development on infant and young child feeding will be required; identification of training curriculum needs to be undertaken.

Status of IYCF in India

In India, 26-27 million babies are born each year, about 2 million under 5s die every year and more than 60 million under 5s are underweight. According to National Family Health Survey (NFHS) 3, the early initiation of breastfeeding is only 24.5%, exclusive breastfeeding for six months is only 46.3% and introduction of complementary feeding along with continued breastfeeding in 6-9 months age is only 55.8 % (NFHS 3). Evidence presented in the various Lancet series on child survival 2003, neonatal survival 2005, and maternal and child undernutrition 2008, clearly show that exclusive breastfeeding for the first six months saves more lives than any other intervention while enhancing nutritional status. Evidence is also there that counseling and education can enhance rates of exclusive breastfeeding for the first six months significantly. However, over the past 2 decades exclusive breastfeeding for the first six months has not shown any rise. Opportunity of action includes recommendation of the Prime Ministers' Council on India's Nutrition Challenges in 200 districts to focus on Nutrition for children under three years.

The major factors responsible for poor feeding are lack of maternity entitlements for women, inadequate skilled capacity of care providers to counsel women and their family members on optimal feeding practices and the most critical being the commercial influence of baby food industry. A recent assessment of IYCF policy and programmes in India have revealed that coordination of IYCF, budgeting, limited scope of maternity protection and inadequate access to skilled counseling as key areas that need policy attention.

There have been examples of several states who are involved in the IYCF activity relating to building skills of health workers on infant and young child feeding but they have found difficulty in achieving the results because lack of adequate funds. At the same time there has been examples where some states have made specific allocation of budgets like in Punjab for training of trainers and all frontline workers in 8 districts (2010), it cost them around Rupees 1.39 Crore to build capacity in 8 districts under NRHM.

With this background and view that action/intervention is required at several levels, the regional consultation of key stakeholders is being organized in partnership with BPNI.

International Maternal and Child Health, Uppasala University, Sweden and Breastfeeding Promotion Network of India has come together to work on a partner driven cooperation project in India. The purpose of this project is to use evidence-based advocacy (policy advice) to expand the provision of full maternity entitlements/benefits to all women (in the selected States) and to provide women with accurate, unbiased information through skilled counseling and support.

The proposed regional consultation is being organized in partnership with BPNI to achieve following objectives:

1. To share the experience of imparting IYCF skills to workers enhanced skills and motivation of field functionaries for UP & Punjab
2. To discuss in depth how this was achieved with convergence, capacity building and addressing additional manpower for existing system
3. To share current policy environment and its implementation: IGMSY scheme in 52 districts.
4. To discuss and plan how to achieve high rates of optimal IYCF practices at health facility/family level and convergence with health sector
5. To sensitize key stakeholders of states on importance of achieving optimal IYCF
6. To prepare a set of recommendations for a plan of action, its coordination, capacity building of the states/districts, skill training of workers, budgetary requirements, and requirements of human resources.