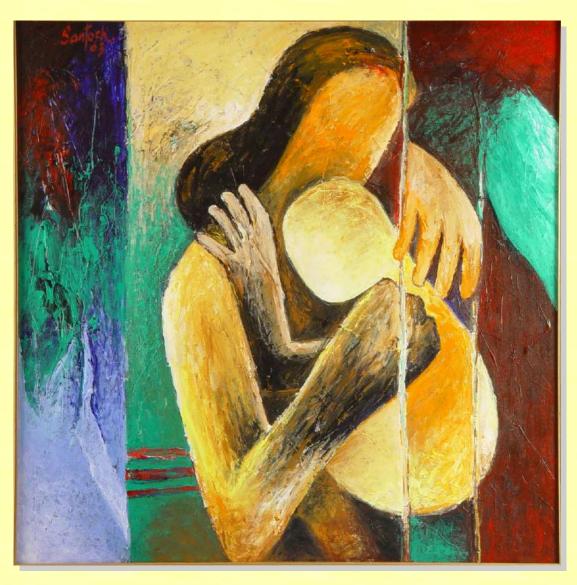
PROTECTING BREASTFEDING

Three Decades of Action and Struggle to Safeguard the Interests of Mothers and Babies





PROTECTING BREASTFEDING

Three Decades of Action and Struggle to Safeguard the Interests of Mothers and Babies



Breastfeeding Promotion Network of India (BPNI)

BP-33, Pitampura, Delhi-110034 Tel: +91-11-42683059

Email: bpni@bpni.org, Website: www.bpni.org

Published by

 $Breast feeding \, Promotion \, Network \, of \, India \, (BPNI)$

BP-33, Pitampura, Delhi-110034

Tel:+91-11-42683059 Email:bpni@bpni.org Website:www.bpni.org

Cover painting by: Santosh, 2003

Painting on page 10 by: Tirthankar Biswas, 2003

ACKNOWLEDGEMENT

PNI gratefully acknowledges the support and contribution of all its partners and supporters, who have helped BPNI in its work to protect, promote and support breastfeeding and infant and young child feeding over these 30 years. We owe a great share of our success to the constant support from various sectors of Government of India, the Planning Commission/now Niti Ayog, Ministry of Women and Child Development, Ministry of Health and Family Welfare, Ministry of Information and Broadcasting, Ministry of Labour and Employment and several State Governments for putting breastfeeding and infant and young child feeding at the centre of their policies and programmes related to child survival and health and maternity entitlements. Most significantly for the enactment of Infant Milk Substitutes, Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992 and Amendment Act 2003(IMS Act) with the sole objective of protection and promotion of breastfeeding in order to improve the state of children's health and nutrition, combat malnutrition and save children from deaths.

We are profoundly indebted to UNICEF India and Dutch Ministry of Cooperation and Development (DGIS) for supporting us during the initial years.

Then onwards the Norwegian Agency for Development Cooperation (Norad) & Swedish Development Cooperation Agency (Sida) have been a strong pillar of support. Contribution of the World Bank through the SAFANSI Trust Fund in later years is much appreciated. We are also thankful to other significant donors including USAID, Marcia Brady Tucker Foundation, and WHO SEARO, OXFAM,

Government of Luxembourg, HCL Foundation and some anonymous angel donors; their timely assistance was very valuable for the organisation and the work we were doing. We would like to thank our national and international partner organizations for standing by us for breastfeeding advocacy and keeping the breastfeeding movement alive in the country. We sincerely appreciate and express our gratitude to our very dear friend, guide, mentor and colleague Dr. R.K. Anand, who has been a source of inspiration for us throughout since our founding. He was one of the co-founders of BPNI with Dr. N.B. Kumta and Late Dr. Tarsem Jindal. We truly value their inputs.

BPNI has grown to more than 3800 members and all the members have provided much needed support during these years. Million thanks to them all. We extend heartfelt thanks to those who worked in BPNI office at different stages, and contributed their best to our success. At this time of celebration, we miss dear Yogender who was the first staff to join BPNI. Yogender, just 38 years old and the keeper of BPNI's memory for 13 years, met with a fatal road accident in January 2010. We also want to remember and acknowledge the contribution of Late Dr Tarsem Jindal, Founder and Former Treasurer, Late Dr. lagdish C. Sobti, Consultant, Late Mr. L.R. Gupta, Senior Account Officer and Late Ms. Radha Holla Bhar, Member of the Leadership team. Finally, we take this opportunity to thank our families for their unconditional support rendered throughout our work.

Team BPNI

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PREFACE

ndia was considered a "breastfeeding nation". In 1991, when I reminded the government officer who worked for child health to include breastfeeding indicators in the national surveys and define exclusive breastfeeding; I can recall he said to me "You are making a mountain out of the mole hill, get out of the room".

In the 70s and 80s, India was witnessing a decline of breastfeeding with increasing urbanization and industrialization. During those days "Bottlefeeding" culture had become widely prevalent in urban area and was invading the rural population as well. According to a comparative study during 70s -80s, over a decade, the prevalence of breastfeeding mothers at six months of age fell from 89% to 69%, and use of milk supplements within first month of life increased from nil to 25% in the illiterate group, and from 7% to 58% in the educated group of mothers. This was an eye opener perhaps for those who thought breastfeeding is working well in the country. India did not have a civil society or professional front for breastfeeding advocacy in the country.

Commercial influence of infant formula industry on healthcare professionals was more than visible, it had an impact on the attitude of doctors who were generally un-supportive to breastfeeding or would tend to ignore it because of their own lack of skills and proper information. Bottle- feeding was not considered a health hazard. Formula milk would creep in through health facilities more or less as a routine. And when it came from a doctor, no one objected, rather it got a 'health tag' with it. Baby food industry's campaigns targeted women worldwide and undermined their confidence, offering like, 'if you don't have enough milk, we have safe alternatives'. It was pervasive. With this background in 1979, the WHO and UNICEF, recognized that marketing of baby foods undermines breastfeeding and is harmful to infant health. This led to adoption of International

Code of Marketing of Breast-milk Substitutes by the World Health Assembly in 1981.

In the 80's few of us including Dr. Raj Anand, Dr. GP Mathur and Dr. Mira Shiva pursued for enactment of the legislation in India to protect breastfeeding. The momentum picked up later for an organized front. Led by Dr R.K. Anand, of ACASH in 1989 first lactation management training was organized in India followed by another batch in 1990. Then in 1991 a training of trainers was organised on the final day, the 3rd December. As a recommendation, Breastfeeding Promotion Network of India (BPNI) was born. Many participants became BPNI's founders and co founders. Four pediatricians met in 1992 to set the ball rolling. Dr R.K Anand, Dr. N.B. Kumta, Late Dr. Tarsem Jindal and myself. Tarsem, we miss as he left for his heavenly abode in 2020. Obviously, we were concerned about dwindling breastfeeding rates in India especially under the aggressive promotion of commercial baby foods.

Being born out of a lactation managementtraining workshop in 1991, the BPNI began its initial work to strengthen skilled support to women within



1991 workshop on lactation management in Wardha, Maharashtra

the healthcare system. It trained thousands of health workers all over the country to enable mothers to be successful in breastfeeding. It continued to monitor what baby food companies do and alert the concerned people about it. BPNI also led development of national alliances of several organisations that would demand for services and policy support from the government. Working with every sector and profession (See Table-I), BPNI believes that comprehensive efforts of all of them resulted in the arrest of declining breastfeeding. Breastfeeding began to rise though slowly by 2015.

The Government of India launched the Baby Friendly Hospital initiative (BFHI) in 1993 with 16 organisations including BPNI as partners. It did not last long. BPNI was very much an Integral part of this work till 1998 as it trained hundreds of health workers to be involved in almost all States. Unfortunately, the program fell off. It took many years of advocacy by BPNI that in 2016 the Government of India re-launched this program in the name of Mothers Absolute Affection (MAA) program and asked BPNI to be its technical partner.²

The founders of BPNI began demanding a law to ban the promotion of breastmilk substitutes. In 1983 a media story covered how cleverly Nestle and other companies worked out their strategies to undermine breastfeeding. This story was updated in 2014.3 The organisation achieved the first milestone in the form of legislation the Infant Milk Substitutes Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, that banned promotion of breastmilk substitutes, complimentary foods and feeding bottles. The Government of India in 1994 and 1995 recognised the efforts and notified ACASH and BPNI to be part of the monitoring mechanism and enabled them to launch a complaint in the court of law if the companies did not comply with this law.4

BPNI published several reports year after year that exposed the behaviour of baby food companies allegedly violating the law. This led to an amendment of the law. Indian Parliament in 2004 ended all kinds of promotion of commercial baby foods meant for consumption of children up to the age 2, considering the importance of continuing breastfeeding for 2 years and beyond.

I challenged the world's most powerful food company Nestle in the court in 1994 as I was authorized by ACASH, Mumbai. This was a cognizable offence and the court took cognizance in 1995.

Nestle at this point decided to file a petition in the High Court to challenge the validity of the law saying that they were confused between two legislations. ⁵

Legal process took many years to frame charges on Nestle. More than 8 judges changed during this period, but I did not give up. Nestle tried everything to get the case quashed in the High court, district courts but could not get any injunction even as the High court ordered the case to continue in trial court. The evidence that was deposited in the court went missing and declared stolen. Court enquiry could not find it. But I continued to pursue the secondary evidence. Fight continued with more than 100 visits to courts till 2012 when the Court framed charges on Nestle.⁶ And the time came to begin a trial. Nestle challenged it in the High Court who let them off because of technical issues rather than the letter and spirit of the law and discounting the fight by civil society groups. When we took the matter to Supreme Court, with special leave petition, it did not act on this, as the Government of India was not present on the day of hearing. Meanwhile, the High court ruled in favour of Nestle. The trial never happened.

There was another moment in the history of this fight when in 2005 the Food Processing Ministry of Government of India proposed to repeal this law. BPNI was on the streets alongwith 26 organisations for about 4 months to fight against the repeal of the IMS Act⁷. This alliance of 26 organisations met high-level political leaders who



Saving the IMS Act - a crucial meeting in 2005

Move to repeal IMS Act flayed

Condemining the move to repeal the Indian Milk Substitutes (IMS) Act, several take place as scheduled, NGOs and health organisations today said it take place as scheduled, NGOs and health organisations today said it mee Food Safety and Stanwould open the floodgates to the MNCs to aggressively market formula milk and baby products, to the More to the meeting of the total conditions of infants in the country.

motion Network of id, "The IMS Act is legal vestige left om selling formula milk as superior product to eastmilk which actually is to healthiest food for in-

NEW DEEH (UNIT) President A.P.I. Abdul ademning the move to Kalam to ensure that the repeal of the Act does not

Explaining the ramifica-ions of repealing the Act, Or Mira Shiva of Voluntary

food now requires increased hygiene like boiling of bottles and ensuring qual-ity of water used which can-

children, Ms Razia Abba of India Alliance for Chi of India Alliance for Child Rights (IACR) who also

Is Govt planning to bypass maa ka dudh? IMS ACT SET TO BE REPEALED

finally agreed to drop this idea. The National Human Rights Commission was approached too, and it helped.8

This is an ongoing fight as the market grows as an answer to every problem. Media has been highlighting it regularly.9

Every year BPNI takes note of what the baby food industry is doing and reports to the governments; e.g. baby food industry sponsoring the health workers meetings or any other area of infringing the existing law.10

Further, BPNI keeps a watch on what the front organisations of these companies are doing. The government of India hardly takes any action though, except writing some letters to the State government or another department. An independent monitoring group constituted by BPNI to monitor the baby food industry continues its work.11

BPNI has been taking up the issue directly with health professional organisations to keep away from baby food companies. BPNI has been able to meet with success in stopping many of the conferences that were sponsored by the baby food companies. This page provides all the information on action, reports, governments action and the Nestle case as well. 12

BPNI went around the country to enroll thousands of volunteers belonging to different health careers like doctors and nurses and activists and lawyers to develop a network, for putting pressure on both the governments and other professional

organisations. It led to a sustainable network that would challenge the existing paradigm of bad marketing of the food industry not just for young babies but also for older kids and adults. BPNI convened the development of public interest groups like Nutrition Advocacy in Public Interest (NAPi)¹³ and Alliance Against Conflict of Interest (AACI)¹⁴. AACI's work succeeded in having a private members Bill "The prevention and Management of Conflicts of Interest" in the Parliament¹⁵, but it lapsed. These two alliances are well recognised to challenge conflict of interest in the policy development area as well as challenged celebrities like cricket players and film stars on why they endorsed high sugar and ultra processed foods products inherently harmful to the health of humans. The media takes these two alliances seriously as well.16

BPNI and NAPi have begun a new work in past 3 years, looking at the dangers of ultraprocessed food products, its marketing and labeling. BPNI is currently enlightening people about what is harmful food and developed a popular document "The Unseen Dangers of Ultra-processed Foods" that has been translated into 13 languages and being disseminated across the country. 17 Media has shown heightened interest in this issue and provided more space than expected. 18,19

BPNI continues to achieve success in this area. AACI has also been challenging Conflicts of Interest situations and led to awareness on this issue. Conflicts of Interest is now a very common reference and question asked by the media when

such situations arise.

BPNI has been involved in the broader political advocacy around Right to Food where it succeeded in networking with the "Right to Food and health organisations" in India and pushing for the maternity protection in the country. The National Food Security Act 2013 includes exclusive breastfeeding for the first 6 months to be promoted and that all women will be provided at least 6000 Indian rupees as cash assistance for wage compensation. Of course, BPNI has also contributed to the revised Maternity Benefits Act revision in 2017, which grants six months leave for all the formal workers, in shops, establishment and mines and several other private sectors.

BPNI conceptualized the World Breastfeeding Trends Initiative (WBTi), and won international laurels and published paper in peer reviewed journals²⁰. The WBTi tools and programmes were used by several regions of the world and 98 countries to report on its policy and program.²¹ The WHO and UNICEF recognised the value of WBT*i* and recommended every country to make a WBTi assessment at least once in five years.²² For India, BPNI has published policy report every three years since 2005²³ that highlighted gaps in policy and programmes, and used it for advocacy.

I have been working with BPNI since 1991, and one of the biggest strengths lies in it's ethical standards and its funding policy. BPNI does not receive and even refuses money from commercial sources or from organizations/foundations where there is a conflict of interest.

BPNI keeps it's eyes and ears open. I hope BPNI remains unstoppable and keep its courage stronger in years to come and continue to stand out for its values and ethics.

BPNI turns 30, this year, kudos to all its network and people behind its day to day work.

Dr. Arun Gupta

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THE ECONOMIC TIMES Industry English Edition | 02 December, 2021, 12:11 PM IST | E-Paper

Experts urge Amitabh Bachchan to dissociate himself from 'Horlicks'

SK Consumer spokesperson said in a statement on Wednesday: "Horlicks has been a trusted household name for over 100 years and s been synonymous with nutrition



NEW DELHI: GSK Consumer Healthcare's Horlicks milk food drink, which last week announced its association with actor Amitabh Bachchan to endorse the brand ahead of its stake sale, has landed in the midst of controversy.

A national-level advocacy group called Nutrition Advocacy in Public Interest, has written an open letter to Bachchan asking him to withdraw the endorsement, on grounds that "Horlicks is a high-sugar product" and its claims of making children healthier are not scientifically backed. The letter, which includes comments from doctors, says: "Horlicks is a high sugar product, as 100 gram of a popularly advertised pack of Horlicks Delight contains 78 gram of carbohydrates of which 32 grams is sucrose sugar". It adds that the consumption of the product is "harmful

for children as it may contribute to childhood obesity and non-communicable disease in later life."

ET Prime Special Offer

Flat 20% Off



'Amitabh Bachchan supporting nutrition campaign, not any brand'

Earlier this week, a national level Advocacy group Nutrition Advocacy in Public Interest had written an open letter to actor Amitabh Bachchan asking him to withdraw the endorsement.



Actor Amitabh Bachchan is endorsing a nutrition campaign, pro bono.(Rajesh Kashyap)

INTRODUCTION

his report is a walk-through memory lane of BPNI's contribution in the field of breastfeeding, infant and young child feeding, public health policies and programmes in the interest of women and children of the country; both nationally and internationally. This report covers all the

aspect of BPNI's toil over 30 years from interventions; various target groups, approaches to real impact. It also showcases key-year wise work list in these 30 years, challenges & way forward, credentials gained and last 3 year's financial statements.

The thought a so

<u>About BPNI</u>

he Breastfeeding Promotion Network of India (BPNI) was founded on 3rd December, 1991 at Wardha, Maharashtra. BPNI is a registered, independent, nonprofit, national organization; working towards protecting, promoting and supporting breastfeeding and appropriate complementary feeding of infants & young children. BPNI acts on the targets of Innocenti Declarations, Convention on the Rights of the Child (CRC), International Code of Marketing of Breastmilk Substitutes, and the Global Strategy for Infant and Young Child Feeding (WHO 2002).

BPNI's core areas of work include policy advocacy to educate policy makers and managers, training of health workers, capacity building of State governments for implementing the policy, social mobilization during World Breastfeeding Week (WBW) each year and monitoring compliance with the "Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992 and Amendment Act 2003 (IMS Act).

BPNI is notified in the Gazette of India as a child welfare NGO to initiate action under section 21(1) of the IMS Act for officially monitoring and implementing IMS Act since 1995.

Over the years BPNI has played the role of a watchdog organization and exposed several big baby food brands on how they undermined the IMS Act.

BPNI coordinates and facilitates the education and training of grassroots personnel in the health and nutrition sector and private hospitals through skilled counseling as a sustainable support to mother-baby dyads. Our training alliances include the National Health Mission (NHM) and Integrated Child Development Scheme (ICDS). BPNI training courses are self-sustained.

BPNI works in close liaison with the

Government of India and is recognized for its technical expertise and credible standing on the issues & concerns of child health and nutrition. BPNI's contribution in earlier five years plans documents and restructuring of ICDS mission document for Government of India are golden feathers in its cap. BPNI holds major contribution in the development of the National Guidelines on Infant and young Child Feeding (2004 and 2006) and Operational Guidelines for Enhancing Optimal Infant and Young Child Feeding Practices (2013). Latest among these are guidelines for 'MAA' programme wherein BPNI provided crucial inputs. BPNI is the technical partner to country's very first nationwide programme "MAA-Mother's Absolute Affection" for breastfeeding promotion launched by the Ministry of Health& Family Welfare, Government of India on 5th August 2016.

Other than the government, BPNI has been working in partnership with development partners like WHO, UNICEF, World Bank, Norwegian and Swedish Governments.

BPNI's Vision and Mission Statement Vision

BPNI is viewed as the last word in protecting breastfeeding from commercial influence as well as recognized as a global leader in providing impetus to the breastfeeding movement through innovative and sustainable approaches.

Mission

BPNI seeks to work towards optimal nutrition of women and children, especially on enhancing breastfeeding rates in the country through countering commercial influence, capacity building of health and nutrition care providers, advocacy for maternity entitlements and other national policies.

Ethical Policy

BPNI does not accept funds or any support from the companies manufacturing baby foods, feeding bottles or infant feeding related equipment.BPNI does not associate with organizations having conflicts of Interest.

Legal Status

- BPNI is registered as a society under the Societies Registration Act XXI of 1860, S-23144
- BPNI is registered under Foreign Exchange Regulation Act (FCRA) (FCRA No. 231650680)
- Donations to BPNI are eligible for tax exemption under section 80G(5) (vi) of the IT Act, 1961

International Status

BPNI is a part of a global network, the International Baby Food Action Network (IBFAN). IBFAN is a Right Livelihood Laureate, the award received in 1998, which is popularly known as the Alternative Nobel Prize. BPNI has served as the Regional Coordinating office for IBFAN South Asia from

1998-2021 to protect, promote and support optimal infant and young child nutrition. IBFAN is in official relationship with WHO since 2013. IBFAN follows a strict ethical funding policy https://www.ibfan.org/ourfunding-policy/.

Affiliations / Memberships of technical committees nationally/internationally

- Member, National Infant and Young Child Feeding Coordination Committee
- Member, National Infant and Young Child Feeding Steering Committee, Government of India
- Technical Partner, MAA Programme, Ministry of Health and Family Welfare, Government of India
- Member, National Shadow Committee on Codex Committee on Nutrition and Food for Special Dietary Uses
- Dr Arun Gupta, Central Coordinator of BPNI, is a member of the WHO's Global Development Group to develop the guidelines for complimentary feeding of 6-24 months children. The work began in Dec 2019, is in progress.



ACTION AND WORK

hirty years of promotion, protection and support of breastfeeding by BPNI has led to an exceptional momentum for breastfeeding in the country. Breastfeeding is now on the national agenda in India. Policy makers recognize the effectiveness of breastfeeding as a preventive public health intervention that can substantially reduce under 5-year child morbidity and mortality. BPNI is

not just an organization but a movement of affirmative efforts made since 1991 to amend and harmonize child health policies and programmes in the country. This section will showcase BPNI/IBFAN South Asia's work from 1991 to 2021 providing information on projects, activities and key publications each year. (See Annex-1)



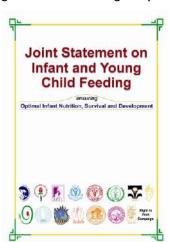
Counsellors in action

EFFECTIVENESS OF BPNI'S ADVOCACY EFFORTS

PNI since its inception in 1991, has focussed its efforts both nationally and internationally. These efforts include advocacy for change, skill training of health workers and monitoring of the Infant Milk Substitutes Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, and Amendment Act 2003. The factors that contribute to the success and change are many including alliance building, motivated individuals, social mobilization, the role of government, the international partners, and ability to challenge market forces. The impact that we see today is a result of this movement and perseverance. Overall effectiveness of BPNI work and campaign can be visualised in the Table-I. This is a framework that we have used every five years to check the possible changes happening around us. Summary of activities at different levels and how it led to the real change is depicted in the Table-1.

Effect of national advocacy

BPNI supports and has been working over the years in close liaison with national programmes of the Ministry of Health and Family Welfare (MOHFW) and the Ministry of Women and Child Development, (MoWCD), Government of India and State governments. Among many of its partners, 16



organizations have played a key role in effecting change at national level. For example, in 2006 the Prime Minister gave us a hearing, which later resulted in approval of a scheme for women in the informal sector to receive some wage compensation.

Another example of a joint advocacy success is saving the IMS Act when it was about to be repealed in 2005. With tremendous pressure from various groups in India, and under the influence of global advocacy, the IMS Act was removed from the list of 'to be repealed Acts'.

Vigilance is the strength of BPNI while companies continue to violate the provisions of the Act. Members of a voluntary independent network from across the country share if they notice any violations. BPNI recently published a report titled "Under Attack" that compiled such violations between the years 2019-2021. The report was widely circulated and covered by the media. BPNI continues to report the violations to the government of India, who has taken note.

Advocacy with the Indian Academy of Pediatrics led to a general body resolution, that IAP shall not receive money from industry related to infant formula/infant foods. Indian Medical Association (IMA) also asked all its branches not to accept funds from the infant formula industry. In the year 2010 Government of India sent out a guideline to implement the IMS Act in letter and spirit to all states and all professional bodies. Similar letters were sent again in 2020.

BPNI has trained a large number of health workers who, in collaboration with UNICEF, GOI continue to train others or counsel mothers. Strong advocates of breastfeeding in their area of influence are in place. Networking continued through social media and electronically during the pandemic. In August 2016 Honourable Health Minister Sh. Jagat Pradesh Nadda, Ministry of Health and Family Welfare, Government of India launched "MAA-Mothers' Absolute Affection" a nationwide breastfeeding promotion programme. BPNI is the official technical partner for the implementation of the programme. MoHFW has adopted BPNI's 4-day training programme for capacity building of field

INDIAN MEDICAL ASSOCIATION

No IMA/F.7(121)/3484.

August 1, 1995

To

The Hony, Secretaries

All State Terr. and Local Branches of IMA

Ref.

The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992 and

The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Rules, 1993.

Subject: Sponsorship of seminars, advertisements in IMA Branch News Bulletins, any aid or assistance from a manufacturer and distributor of Infant Milk Substitutes and Infant Foods:

Dear Sir.

Some of the branches of the Indian Medical Association may not be aware that sponsorships of seminars or assistance from a manufacturer and distributor of Infant Milk Substitutes and Infant Foods are contrary to the provisions of the above-mentioned Act and that any person who is a party to such violation, risks criminal prosecution and severe penalties including even imprisonment. We have verified all aspects of the issue and have confirmed through written opinions from leading lawyers that such sponsorships by manufacturers and others in the trade constitute criminal offences under the Act. Normally companies and even Nestle India Limited, Dalima and Glazorhave no reason to sponsor seminars/quizzes etc. for doctors except to promote their products through them.

IMA and the Indian Academy of Pediatrics have taken cognisance of such attempts by Infant Food manufacturers and others covered by the above-mentioned Act to circumvent its provisions and have decided not to accept any aid, assistance or sponsorships in whatsoever guise from the said industry.

You are, therefore, requested not to accept any sponsorships of seminars by and any aid or assistance from the manufacturers of Infant Milk Substitutes and Infant Foods which may violate the provisions of the Act.

In case any clarifications or details regarding the scope of the Act are required, the same will be furnished to you.

Thanking you and with kind regards;

Yours sincerely

Dr. Jagdish C. Sobti

IMA News

5

August & September, 1995



Indian Academy of Pediatrics

Kailas Darshan, Kennedy Bridge, Mumbai-400007.

MINUTES OF THE MEETING OF THE ANNUAL GENERAL BODY MEETING HELD ON 6TH JANUARY 1997 AT 3.00 P.M. AT B. J. MEDICAL COLLEGE, AHMEDABAD

Agenda Item No. 8 - Any other business of which 15 days notice has been given to the General Secretary in writing:

The following resolution was moved by Dr. Arun T. Phatak:

'The I. A. P. shall not accept the sponsorship in any form from any industry connected directly or indirectly with the products covered by the Infant Milk Substitutes, Feeding Bottles and Infant Food (Regulation of Production and Distribution) Act 1992".

Many members participated in discussion on the above mentioned resolution. The discussion was for and against the resolution and become difficult to know the consensus. The members wishing to express their view were given chance to do so and after much debated and heated discussion the President put the resolution to vote. One hundred and forty two members voted for the resolution and 76 members voted against the resolution. The President declared that the resolution stand adopted.

The following resolution moved by Dr. R. D. Poldar with respect to conduction of 5th International Congress of Tropical Pediatrics to be held in Jaipur in 1999 by Indian Academy of Pediatrics was passed unanimously:

workers under "MAA" program. Launch of "MAA" program is one of BPNI's greatest milestones.

Another strength is policy analysis in collaboration with several partners in India. In August 2019, during the World Breastfeeding Week BPNI technically assisted the Ministry of Health and Family Welfare, Government of India in developing report cards on the State of Breastfeeding in the 28 States & 3 Union Territories. In 2020, BPNI launched the State Breastfeeding Trends Initiative (SBTi) a statelevel adaption of its global flagship programme and tool World Breastfeeding Trends Initiative (WBTi). SBTi tool aimed to assess the strengths and weaknesses based on 10 indicators of policy and programmes and 3 practice indicators on breastfeeding and IYCF and document gaps. BPNI has accomplished SBTi reports of Tamil Nadu and Maharashtra along with a strong state level Core Group.





In the year 2020-2021 in the COVID-19 pandemic BPNI adapted to the new normal of working from home and adopting the online webinar and meeting culture and has conducted 13 technical webinars for information sharing, launching new initiatives, advocacy and awareness generation among health workers and pregnant and lactating mothers. BPNI has also participated in 14 other webinars organised by its partners and concerned agencies in the sector giving their technical expertise. BPNI also published an article on 'Breastfeeding & Covid -19' in Journal of Neonatology in September 2021. BPNI also developed 10 infographics to spread awareness digitally and an information sheet (in partnership with TNAI) on COVID-19 and Breastfeeding, which were widely disseminated, circulated and appreciated.

In the last five years observing the

unprecedented marketing of high sugar and salt packaged food products to children and its contribution to increasing Non-Communicable Diseases (NCDs) burden; BPNI has initiated work to call out strong market forces pushing these products. Strategies to implement this work include media and policy advocacy to influence FSSAI and Ministry of Health, PMO, and Media. BPNI in partnership with NAPi in this short span has created quite a stir for mandatory and strong front of pack warning labels in India to curb NCDs burden. The government is in the process of developing a regulation for FOPL in India and is considering our suggestions.

Effects of International Advocacy

The baby food campaign has been a long-established international campaign with significant direction given by the International Baby Food Action Network (IBFAN) established in 1979 and has expanded over the years into a global network of public interest groups and individuals in 166 countries. In 1998 IBFAN received the Right Livelihood Award (RLA) commonly known as the "Alternative Nobel Prize" in Stockholm, Sweden. BPNI has been active not only in India but also in South Asia since 2009; BPNI has taken up global programmes like World Breastfeeding Trends Initiative (WBTi). Now WBTi stands strong with 98 countries reporting on policies and programmes in their countries on a uniform tool developed by BPNI and supported by the global network. WBTi website maintained by BPNI is a global repository of free access data on breastfeeding policy and programmes from 98 countries. The Global Breastfeeding Collective, a joint initiative of Unicef and World Health Organisation (WHO) recognises WBTi as one of the seven key asks for investing in breastfeeding globally.

The World Alliance for Breastfeeding Action (WABA) founded in 1992, spearheaded campaigning and social mobilization all around the world through one of its major tools, the World Breastfeeding Week (WBW) celebrated each year from I August - 7 August. BPNI has been on the forefront of coordinating a massive movement in the country during the WBW for the last 30 years. Individuals and organisations from across the states participate.

Table I: Summary of activities at different levels and Real Change

| Target Group | Agenda | Intervention/Actions | | | Real |
|--|---|--|--|--|--|
| Target Group | Setting | Int | ervention/Action | ons | Change |
| Pregnant and lactating women/families | Merits of breastfeeding for both mother and the child, risks of formula feeding, skilled counselling during pregnancy, and assistance with skilled support at time of birth in a health facility. | Positioning media Stories. | Highlighting deficiencies or gaps in the policy and services of the Government and private sector hospitals caterning to maternity services. | Writing to media to eliminate misinformation. Writing to government to improve programmes. Sharing key scientific information with all partners. | Ever since India started measuring Breastfeeding indicators in 1992 there has been a gradual rise in the breastfeeding rates. Compared from NFHS-4 to NFHS-5 exclusive breastfeeding rate during 0-6 months has increased from 54.9% to 63.7% respectively, which is an encouraging trend. However early breastfeeding during first hour of birth and adequate diet during 6 to 24 months remains a concern. (See Figure on page 23) |
| Health Professionals | Skilled training on breastfeeding, lactation management and infant and young child feeding (IYCF) counselling, awareness and implementation of the IMS Act. | National and state level advocacy with Ministry of Health and Family Welfare and Ministry of Women and Child Development and related agencies. | Developing and updation of the training for pre service and in service curriculum. | Organising training programmes to create National Trainers, Middle Level Trainers and IYCF Skilled Counsellors. | Increased capacity of BPNI through training programme, hundreds of trainers available. Demand for BPNI's courses increased. Health professionals increasingly becoming aware of IMS Act. Since its inception BPNI has built the capacity of more than 4000 Health Workers. |
| Health Professional Associations | IMS Act compliance Social mobilization during World Breastfeeding Week | Communications and follow up Sensitization Advocacy meetings | Developing Media Briefs. | Organising awareness sessions on IMS Act and preparation of communication materials. | In 1997 Indian Academy of Pediatrics (IAP) passed a resolution for its member to refuse funding from baby food industry. In 1996, Indian Medical Association issued a notification to all its branches. Trained Nurses Association of India (TNAI) IAP, FOGSI observe WBW. In 2020-21 IAP-NNF enforced the implementation of IMS Act in their associations by a formal letter to their members. FOGSI and IAP issued a joint statement on zero separation of babies in |

| Target Group | Agenda Setting | Intervention/Actions | | | Real Change |
|---|---|---|---|---|---|
| | | | | | 2020. IAP on being alerted reached out to its members to stay away from direct or indirect sponsorships by the baby food companies. |
| Baby Feeding Industry e.g. those manufacturing infant milk substitutes, feeding bottles, infant foods(products under the scope of IMS Act) | Non compliance with the provisions of IMS Act continues, sponsoring health workers meetings, free distribution, misleading information etc. | Monitoring the compliance with the IMS Act 1992/2003 on regular basis and reporting to appropriate authorities. | Media Briefs | Legally Scrutinising and exposing baby food brands that violate IMS Act. | Restricted the sales of baby milk formula in the country. It is 20 times lower than in China which has a weak law. Monitoring Reports are continued to be published and exposed in media. E-marketing websites got cautious on giving discounts with baby food. |
| Employers: Government and Private sector | Increased maternity leave for all women in the interest of her and child's health and wellbeing | Advocating for proper implementation and amendments in the Maternity Benefit Act of 1961 | Networking with Right to Food campaign, womens groups, Demanding budgetary provision for maternity entitlements for women working in unorganized sector | | BPNI's vigilant actions has led to cancellation of several sponsored events in different parts of India. Government of India amended the MBA Act of 1961 with 26 weeks maternity leave for the organized sector in 2017. The MBA Act extends to whole of India to all mines, plantations, shops, establishments and factories either in organized or unorganized sector in which 10 or more persons are or were employed on any day of the preceding 12 months whether contractual or consultant position. Any women who has worked in the establishment for more than 80 days is entitled to the maternity benefit. Govt. of India provides cash assistance of INR 5000 to women with first born child. National Food Security Act (NFSA) Act provides Rs. 6000 cash |

| Target Group | Agenda Setting | Intervention/Actions | | | Real Change |
|---|--|--|--|--|--|
| | | | | | benefit to all women as maternity entitlement during 0-6 months as wage compensation. Private companies announcing flexible measures and benefits beyond MBA Act provisions. |
| Planning Commission/ Niti Aayog | Bridging gaps in the 10th, 11th and 12th five year plans on IYCF, need for optimal nutrition in development planning, provision of skilled services support. | Advocating for breastfeeding as a public health intervention for child survival | Demanding dedicated budget lines for breastfeeding support | | Inclusion of breastfeeding in 10th, 11th and 12th five year plans for women and children's nutrition and rights. Poshan Abhiyaan Launched emphasis on breastfeeding through communication. Niti Ayog's National Nutrition Strategy, 2017 acknowledges the technical expertise of BPNI and included the Conflict-of-Interest clause for ensuring that representation on policy, technical advisory groups and various management committees at different levels is free from conflict of interest. |
| Ministry of Health and Family Welfare | Achieving MDG & SDGs for hunger, poverty, climate change and child survival; preventing infant morbidity and mortality | Advocating with NRHM/NHM officials for capacity building in IYCF skilled counseling and BFHI hospitals | Advocating for IMS Act compliance for protecting breastfeeding from commercial influence | Providing technical assistance and support | Inclusion of breastfeeding practice indicators in statistics in demographic surveys i.e NFHS 1,2,3(1991,1999 and 2005) Launch of BFHI in 1993 and revival in 2016 as MAA Programme. BPNI is the official technical partner for the implementation of "MAA" programme. 4 day training programme suggested for field workers under "MAA" program based on BPNI's training programe NHM defines a small budget for each district WHO-MoHFW commissioned BPNI for developing updated tools for reviving |

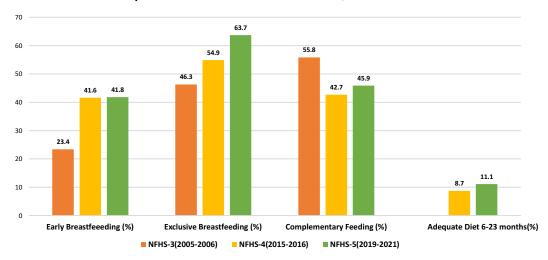
| Target Group | Agenda Setting | Int | ervention/Action | ons | Real Change |
|--|--|---|--|---|--|
| | | | | | Breastfeeding Friendly Hospital Initiative in India. MoHFW has validated the tools developed by BPNI in 2019. |
| Ministry of Women and Child Development | National Breastfeeding Committee, breastfeeding policy & programme, budget lines on breastfeeding, skilled training for ICDS workers and IMS Act monitoring, re- activation of the coordination, saving the IMS Act from being repealed. | Advocacy with Centre and State Governments | Sensitization workshops of government officials | | Development of National Guidelines on Infant and Young Child Feeding (2004 and 2006). Codex India positioned stronger on breastfeeding and infant feeding. National Breastfeeding Committee revised as "National Steering Committee and "National Coordination Committee" meeting happened during the years 2015-2017-2018. In 1996-2003 MWCD played a key role in the passing of the of IMS Amendment Act. And in 2005 IMS Act was saved from being repealed. |
| Ministry of Information and Broadcasting | Baby food industry breaking the provisions under IMS Act by promoting infant milk substitutes, foods and related equipments through electronic media | Media sensitization | Advocating workshops with government officials, media and others concerned | Political advocacy | Amendment of Cable TV Networks (Regulations) Act in 2000, to ban advertisements of infant milk substitutes and foods on the cable TV service by Ministry of I& B. The Act is being implemented and complements the IMS Act in breastfeeding promotion. |
| Civil Society Movements/ Partners | Agenda setting for inclusion of IYCF and specially breastfeeding under Right to Food Campaign, People's Health Movement for children under 6, saving the IMS Act . | Providing technical assistance to campaigns on IYCF and Breastfeeding | Mobilizing of civil society groups on issues of conflicts of interest in nutrition policy and programmes | Building political discourse through articles and publications, and meeting political leaders from all parties to explain what is required | Inception of Alliance Against Conflict of Interest (AACI)with network partners in 2011. Lead by the Right To Food Campaign, The National Food Security Act (NFSA) was adopted. Its Section 4B recognizes that exclusive breastfeeding should be promoted as a food security |

| Target Group | Agenda Setting | Intervention/Actions | | | Real Change |
|---------------------------------------|--|---|---|---|--|
| | | | | | intervention for children of 0-6months. Mobilized I 6 network partners to issue a joint statement on IYCF in 2006. IMS Act saved from being repealed with support from 26 civil society partners. Path breaking publications in Economic Political Weekly, Scroll, and Sunday Guardian Civil society partners joined hands together to develop an advocacy tool using WBTi which also led to the government becoming a partner to the assessment. So far 5 assessments have been completed (2005, 2008, 2012 and 2015, 2018). Nutrition Advocacy in Public Interest (NAPi) a think tank to advocate nutrition policy in public interest was founded in 2017 and it continues to play a key role in policy analysis and advice to the concerned government departments and others. NAPi has gained popularity among Media and other relevant Partners in Nutrition Advocacy. The momentum is gaining with a strong network of more than a hundred public health and nutrition advocates. |
| Academics and Research in India | Positioning Breastfeeding as the key public health intervention contributing to reduction in infant mortality and morbidity, reducing carbon foot print, contributing to | Field studies to assess the impact of breastfeeding / IYCF counseling interventions | Conducting secondary research and analysis for government advocacy | Commissioning investigative surveys, studies and analysis on baby food industry's compliance to provisions of IMS Act | Evidence showcase that support is required at birth. Publications in renowned scientific journals like Indian journal of Pediatrics, Midwifery, PLOS One, Health Policy Planning, Women and Health, Indian Pediatrics and Indian Journal of |

| Target Group | Agenda Setting | Int | ervention/Acti | ons | Real Change |
|-------------------------|--|--|---|------------------------------|--|
| | economy and reduced NCD burden | | | | Medical Ethics. Themes covered include: Benefits of Breastfeeding Commercial Influence of Baby Food Industry Working women, paid leave and breastfeeding Investment in breastfeeding interventions Tracking breastfeeding trends globally Breastfeeding and Climate Change Conflicts of Interest in public policy and programmes for nutrition Breastfeeding and maternal child health Skilled breastfeeding counseling and its impact and more Breastfeeding and Covid 19 in 2021, Journal of Neonatology. |
| International Bodies | International recommendation and guidelines on IYCF and Maternity protection | Advocacy through position statements, recommendations and analysis | Participate and give technical inputs at the World Health Assembly every year | | World Health Assembly resolutions strengthen Infant and Young Child Feeding Nutrition (IYCN) and pledge to increase exclusive breastfeeding rates by 50% by 2025. ILO recommendations (2000) on maternity protection. New definition of exclusive breastfeeding came in 2001. Global Strategy for Infant and Young Child Feeding came in (2002) UN Secretary General's Global Strategy for Women's and Children's Health focus on enhancing the number of exclusively breastfed infants to 21.9 million by 2015. |
| National Media | Merits of breastfeeding, normalizing | Media Sensitization meetings and | Media advocacy | Organizing press conferences | Breastfeeding merits mainstreamed in media. Elimination of |

| Target Group | Agenda Setting | Int | tervention/Acti | ons | Real Change |
|-------------------------------------|--|--|---|--|---|
| | breastfeeding, targeting the baby food companies for inappropriate promotion and media trials of baby food companies based on IMS Act | workshops | | | misinformation from mass media. NAPi raised awareness on Conflict of Interest nationwide and advocacy on Ultra processed food. Facebook account has 3000+ followers Twitter account has 576 followers. |
| Policy and Programme Advocacy | Investment in breastfeeding policy and programmes, robust budgeted IYCF implementation plans and breastfeeding friendly policy and programme development nationally and internationally. | Development of the tool for assessment of policy and programmes and launch in world wide (World Breastfeeding Trends Initiatives) Identification and capacity building of country core groups | Policy and programme analysis, identification of gaps, building consensus on findings and developing recommendations for the country Unique global repository of polies and programmes on IYCF created | Launch of the policy and programme assessment report with key policy makers and using it as an advocacy tool for investment on breastfeeding | As per the WBTi Evaluation Report, 2020 98 countries have completed the WBTi assessment till date. Based on the WBTi Evaluation Report, 2020 that has responses from 51 country coordinators, indicated that more than two thirds of the countries that reported on the WBTi assessment received commitments from the government. It is likely that advocacy efforts using WBTi reports that identified gaps, led to commitments/actions by the governments to improve the services and quality of data. |

Comparison of IYCF Indicators from NFHS-3, NFHS-4 & NFHS-5



Media Coverage

Despite ban, marketing of hazardous breast-milk substitutes stays rampant

Only strong rules will curb graft in public policy



Are our babies falling through the gaps?

The fifth WEIT India report hays bare major gaps in almost all parameters of policy and services supporting women to feed their babies. Prime Ministercould change the game with a scheme that has the potential to prevent 99000 child deaths due to diarrhoes and pneumonia, and save the Indian economy US\$14 billion each year.





Will new FSSAI rules undercut baby food law

Ostensibly to deal with three very rare medical conditions in infants, FSSAI has decided to

Seema Magaration
getimesponsioner

One special infinite floor

One special infinite fl

India is staring at a public health crisis due to ultra-processed food

One, fix the cut-offs. The World Health Organization (WHO), with extensive global organization (wHO).

Reduce consumption of ultra-processed food products by children

Indian O-3-year olds consume 29,836 tonnes of powdered milk formulas. These products are harmful.



inherently har you eat UPFs. leads to obesity

in the elderly p India is sitti non-communi believe the find National Nut revealed that 5 On 21 May, Priday, the global communities celebrated the 'World Breastfeeding Protection Day,' the flay when the World Health Assembly adopted the 'International Oode of Marketing for Breastnill's Substitutes' in 1981, exactly 40 years back, On this day, the world officially recognized that marketing of breastnills abbittutes is harmful to health of mothers and children. Even tutes is harmful to health of mothers and children. Even as four decades have passed, the global sales of baby milks for infants and young chil-dren are growing and are about US \$70 billion annu ally companies spend about 10% of sales on marketing their products to promote and sustain sales aroswith

than the entire budget of the World Meath Organization. According to reports, Indian infant and young children upon 3 years of age, consume about 2 #8.86 tonnes of powdered milk formula (treat) whose estimated at 8x 35,660 million retail value on 2020 pricely. Follow on formula and growing up formula consumed by the 6-month to 3-year-olds is roughly 2/3 and the standard milk formula for 0-6 months is about 1/3. The consumption has increased from 22/00 tonnes in 2010 and is likely to increase to 31,400 tennes to 31,400 tennes to 2024.

pend on the medically indi-cated need of the babies. But pend on the medically indi-tacted med of the babies. But more often than not it is be-cause of unethical or illegal activities of the food corpo-nations indulging in agree-sive marketin opportuni-ties. Both under and over-mutrities opportuni-ties, Both under and over-mutrities opportuni-ties. Both under and over-mutrities opportuni-ties, Both under and over-mutrities opportuni-ties. The individual of the individual with "Individual processing itself can also be harmful." Pre-example, certain food additives can dispute our out-

oaly I in 2 pewternet. Hitte is able to begin breastfeed-ing within an hour of birth. During 0-0 months, again 2 out of 5 babies are receiving mixed feeding. These situ-ations spur intake of pow-dered formula or liquid ari-mal milk. Inclustry pitches powdered milk formula as the answer to enhanced nutrition and convenience for mothers and tends to get aspirational among societies.

REDUCE CONSUMPTION OF POWDERED BABY MILKS

MILKS
By the nature of production,
such foods fall under the
category of ultra processed
foods (UPFs) and consump-tion of UPFs is associated

with our hormonal system."
When people cat UPFs, they
tend to set more as those ran
addictive due to taste enhancers.
Yet another inherent risk
of the use of powdered infant formula(PIF) is serious

fant formula (PIF) is serious illness and even death due to infection with Cronobacter sakazakii and other microor-ganisms with censumption of recountituted powdered infant formula. In several infant formula. In several
outbreak investigations,
Cronsbarterhaabeen found
in powdered infant formula
that had been contaminated
infasfaciory, Newborns are
more vulnerable and the
World Health Organization

MONTABERIUE words Health Cryanization has developed guidelines HOW TO REDUCE for use of powdered infant for compliasant easils for an extrems degree of caution for the health workows for the safety and health of the newborns.

ways, including GHG emis-sions. In a study estimating GHG emissions from such products for infants and young children, authors calculated for production and processing of individ-ual ingredients from cradle to factory gate. They used annual retail sales data for 2012-2012 from Decomposi-2012-2017 from Euromoni-2012-2017 from Euromoni-tor International for six pur-posively selected countries Australia, South Korea, Chi-na. Malaysia, India, Philip-pines. "Results showed up emissions for milk formulo

Such instances go unnoticed in India without any investigation.

UPFs are also harmful to the environment in so many food comonates use many food comments use foo

tactics, most common be-ing reaching through health professionals because new purents are extremely vul-nerable and sensitive to the Supply and Distribution) Act 1992, and Amendment

Supply and Distribution)
Act 1902, and Amendment
Act 2003 is meant to controit marketing under the
tage 2, however, it needs to be
implemented and enforced
effectively. Therefore, meet
ings of haby bod company
representatives with health
professionals need to end.
Secondly, and unfortunately, women den't get full
support or care needed to
succeed in breastfeeding
within the health facilities
where they give birth. The
National Family Health
Survey 5 (datafrom 22 states
and UTb) shewer that Caesarvan sections have rapidly
increased over past 5 years
varying from 2.5% in Nagaland to 60% in Telangana.
It is much more likely that
breastfeeding is delawed in

CS deliveries and milk for-mulas are used. In a study on the impact of Caesarean acction on rarly breastfeed-ing, it was concluded. "We found that when controlling for socio-demographic and labor and delivery charac-teristics, planned C-section is associated with early breastfeeding cossation. An-ficing on the control of the con-tribution of the conbreastfeeding cossation. An-ticipatory guidance around breastfeeding could be pro-vided to women considering a planned C-section..." The World Health Organization prescribes acceptable medi-cal mesons for use of breast-mill substitutes. It does not include C-section. There is a mill substitutes. It does not include C-section. There is a distinct possibility to reduce consumption of UPFs if we seted positively and assisted women delivering by CS. Monitoring the use of milk formulas in hospitals is a way forward. As put up by a moster, could we also introduce a step to record consent duce a step to record consent of the mother, or her hus-band before the formula is to be used? Last trimester of pregnancy could be the criti-cal time period to interven

early breastfeedingane to-skin contact at birth The POSHAN Abh of the Government da's flegship progra to improve nutritions comes for children, nant wemen and lac mothers needed to re about its strategies bolistic and lave mu holistic and lays emp on the issues raised as ommendations. Giv scientific reasons ab in for the policymake public health profess to work towards minis

To conclude, consun of UPFs by young chi is harmful, slowly in-ing, and there are w-check it. It requires bo-will and a plan that lo will and a plan that lo foodsystem during th 3 years and minimis risks of non-commu-ble disease in adult it young children have in deciding about their and depend on paren tion must be taken to municate this fact. Dr. Arun Gupta is Contr-ordinator RFNL and Dis-

Media Coverage

Government of India to urgently consider application of mandatory warning labels on ultra-processed food

New Delhi: 27 August 2021-Top doctors including paediatricians and public health experts gathered today to discuss the urgent need for adoption of frontof-pack warning labels on all unhealthy food products if India is to safeguard people's lives from the looming crisis of non communicable diseases. Citing recent research that overconsumption of ultra processed foods(UPF) and beverages lead to overweight and obesity - key risk factors for cancer, cardiovascular disease, non alcoholic fatty organisations called upon the Government of India to urgently consider application of mandatory warning labels on ultra-processed foods and food products high in sugar/ salt or saturated fat.

The webinar was chaired by Dr. Suneela Garg, President , Indian Association of Preventive and Social Medicine (IAPSM) and she most effective at improving said 'Right-to-health is a fundamental right of every human being & youths health is Nations wealth ."

Experts from Pediatric and Adolescent Nutrition of Nutrition Advocacy in liver and various other deadly Society (PAN) - IAP Nutrition Public Interest (NAPi), a

dilute the warning labels guidelines as there is vested interest.

Presenting evidence from around the world, Neha Khandpur, an expert and faculty of public health from University of Sao Paulo, Brazil's Centre for Nutrition said, "Warning labels have consistently been shown to be consumer understanding, at influencing their purchase decisions and at supporting healthy food choices.

Dr Arun Gupta, convenor

k working said "This ı time in emendous

rise in sales of ultra processe food (UPF) products bot in the category of food an beverages.

Ms Pushpa Girimai Consumer Rights Columnia Safet Consumer and Advocate pointed out that the Consumer Protectio Act of 2019 gave consumer the right to be protecte from unsafe and unhealth food through clear an labe unambiguous information and appropriat warning in a manner that i easily comprehended by al including those who canno

read or understand the labe

But far more important, th Supreme Court, in Centr for Public Interest Litigatio Union of India, ha

Experts for adopting front-of-pack labels on all processed foods

If India is to safeguard its peo Iples lives, particularly chil-dren, from the looming crisis of deadly non communicable diseases (NCDs), it needs to diseases (NCDs), it needs to urgently and mandatorily adopt front-of-pack warning labels (FOPL) on all ultra processed foods (UPF), health

labels (FOPL) on all ultra processed foods (UPF), health experts said here on Friday. They have reasons. According to Bornomontor estimates, the sale of UPF has increased from 24g per capita in 2005 to 6kg in 2019 and is expected to grow to 8kg in 2024. Similarly, beverages have gone up from less than 2 Litres in 2005 to about 8 Litres in 2015 to about 8 Litres in 2014 to about 8 Litres in 2014 to All 10 Litres in 2014 to All 10

FOPL can allow shift in the food consumption pattern'

wasteful nutrients such as suga to tackle the rising burden o obesity and NCDs," sais Dr.Suneela Garg, President Indian Association of Preventive and Social Medicin (IAPSM), at the webinar. Presenting evidence fron around the world, Neh, Khandpur, faculty of publihealth from University of Sapaulo, Brazil's Centre fo Nutrition informed, 'Warning labels have consistently best shown to be most effective a improving consumer under snown to be most effective a improving consumer under standing, at influencing their purchase decisions and at supporting healthy food choices. They also are most likely is encourage product reformulation. Warning labels are this tongest nutrient-based labe that India should conside implementing."

खाद्य पैकेटों पर चेतावनी अनिवार्य करने की मांग

नर्ड दिल्ली विशेष संवाददाता

देश के शीर्ष डॉक्टरों और लोक स्वास्थ्य विशेषज्ञों ने खाद्य सामग्री के पैकेटों पर स्वास्थ्य संबंधी चेतावनी को अनिवार्य बनाने की मांग की है।

इंडियन एसोसिएशन ऑफ प्रिवेंटिव एंड सोशल मेडिसिन (आईएपीएसएम) की अध्यक्ष डॉ. सनीला गर्ग ने कहा कि स्वास्थ्य का अधिकार प्रत्येक व्यक्ति का मौलिक अधिकार है और युवा पीढ़ी का स्वास्थ्य राष्ट्र की संपत्ति है। इसलिए जरूरी है कि राज्य और केंद्र सरकारें ज्यादा चीनी, नमक या वसा वाले हानिकारक खाहा उत्पादों और पेय पदार्थों

यह बात उन्होंने बीपीएनआई की ओर से इस विषय पर आयोजित वेबिनार में शक्रवार को कही।

साओ पाउलो ब्राजील के विश्वविद्यालय के सेंटर फॉर न्यूट्रिशन में पब्लिक हेल्थ की अध्यापक और विशेषज्ञ नेहा खंडपुर ने साक्ष्यों को पेश करते हुए कहा कि उपभोक्ता को जागरुक करने और उनके निर्णय को प्रभावित करने में ऐसी चेतावनी सबसे प्रभावी पाई गई है। न्यूट्रिशन एडवोकेसी इन पब्लिक इंटरेस्ट (एनएपीआई) के संयोजक डॉ. अरुण गुप्ता ने कहा कि बीमार करने वाले खाद्य उत्पादों के उपयोग में तेजी से बहोतरी हुई है। लिहाजा

PACKAGED FOOD

Experts demand rollout of strict front packaging norms at the earliest

CORRESPONDENT

DELHI: In view of the ing threat of non-comable diseases among n due to intake on high t of salt, fat and sugar s in packaged foods, the as well as experts have he Food Safety Standard ity of India (FSSAI) to nent package levelling at earliest.

at earliest.

ng scientific researches,
perts have stated that
ve intake of salt, fat and ontents in packaged food ts is becoming a major

and liver diseases.
Consumer rights activist and columnist Pushpa Girimaji said,
"To protect the interest of citizens, food items with high salt, sugar and fat should be introduced with colour coding or any other easily understandable warning labels."

any other easily understandable warning labels."
While addressing a webi-nar, Dr Sunila Garg, who heads Indian Association of Preventive and Social Medicine (IAPSM), said. "Everyone has the right to have a better health and health of younger generation is the wealth of the nation. So, it is a

must for state and central governments to put warning labels on top of the front of packaging of food products."

Experts from the Pediatric and Adolescent Nutrition Society and Epidemiology Foundation of India have said that the food industry wants to delay the system of such warnings for its own benefit and they the industry is trying to enauer that the rules are not strict.

Citting research findings, Neha Khandpour, professor of bublic health at the Centre less are to be made mandative, view of the coming decades, India will also out the obesity-prone countries like Britain and America. The rules are to be made mandative, with the coming decades, India will also out the obesity-prone countries like Britain and America. The rules are to be made mandative, with the coming decades, India will also out the obesity-prone countries like Britain and America. The rules are to be made mandative, with the coming decades, India will also out the obesity-prone countries like Britain and America. The rules are to be made mandative, with the confined control of the confined contr

Doctors, health experts call for strong warning labels on unhealthy food products

They emphasised that marketing of packaged food items are a health hazard for children under five years and adolescents as they are the most vulnerable group to NCDs because of unhealthy food products consumption.

Public health experts call for urgent action against unhealthy food products

OUR CORRESPONDENT

PATNA/NEW DELHE Top docters including paedianicians and public health experts gathered today to discuss the urgent need for adoption of gathered today to discuss the urgent need for adoption of front-of-park warming labels on all unhealthy food prod-cute if lastia to casbguard people's lives from the loom-ing crisis of non-communica-tion of ultra-procussed foods/UFP, and heverages lead to overweight and obesi-ty levy risk factors for cancer, cardiovascelar disease, non-alcohole fatty leve and vuri-ous other deedly diseases; BPM, Martican Advoscey in Public Interest (NAF) http://www.napindia.iu/ cently diseases; Nutrition Advocacy in Interest (NAP) www.napiindia.in/ and I public health organi-called upon

Geocramont of India to surportly consider application of mandatory warning labels on ultra-processed foods and food produces high in sugars/solt or saturated fat. The webhinar was chaired by Dr. Suneela Garg Provident Indian Association of Proventies and Social scale light-to-beath is a fundamental right of every human being 8 youths health is Attacked to the second of the seco



(PAN) -IAP Nutrition Chapter and Epidemiology Foundation of India (EFI) pointed out that dustry wants to lute the warning lines as there is est. They empha-arketing of packhazard for children under 5 years and adolescents as they

According to Euromonitor estimates, the sale of UPF has increased from 2 kg per capi-ta in 2005, to 6kg in 2019 and is expected to grow to 8kg in is expected to grow to 8kg in 2024. Similarly, baverages have gone up from less than 2 L in 2005 to about 8 L in 2014

of Natrition Advocacy in Public Interest (NAP), a national think lank working on nutrition policy, said. This is happening at a time in India showing a tremendous rise in sales of ultra-processed food (UFF) products both in the category of food and heverages. If wo don't put a heval to this rise now, India will join the club of hostic periodic and interest control to the charles of the control of the charles of the control of the charles of the control of the charles industry is meant for making profits for their shareholders and will not comply unless our food and beverage regu-lators make it mandators.

profits for their shareholders and will not comply unless our food and beverage regu-lators make it mandatory.

Ms. Pushpa Carimaji, Consumer Rights Columnist and Consumer Safety Advocate pointed out that the Consumer Protection Act of 2019 gave consumers

the right to be predected from unsafe and unhealthy food through clear and unambiguous label informa-tion and apprepriate warn-ing its a manner that it easily comprehended by ell, includ-ing those who cannot read or understand the label But for more important, the Supreme Court, in centre for Public Interest Litigation Vs. Dien of finite bad interest.

Supreme Court, in Gentre for Public Interest Litigation Vs. Linion of India, bad inter-preted the right to safe food as part of the right to like guaranteed under Article 21 of the Constitution, read with Article 47. Directive Principles of State Policy hat casts a day on the state to raise the level of nutrition and improve public health.' So, in order to setface these rights fully and pro-text dilberaforussumer inter-ests, the State or incre specific

my's leading researcher nutrition summed up to have strong and mandate warning label based on t WHO thresholds of nutric Willo thresholds ... profile modelling because 50% of the children's popu-lation is suffering from car-catabolic risk factors ar per the CNNS, 2016-18 sur-vey due to unhealthy pack-

ically, the FSSAI, should introduce a front of label entour coding or such other easily comprehersible warn-ing labels on foods high in sodium, sugar and saturated fat, she said. S advocated

CHALLENGES AND WAY FORWARD

30 years of BPNI

The BPNI completes 30 years on 3rd December 2021. BPNI was founded at a time when breastfeeding rates were declining. Reasons included, commercial baby food manufacturers aggressively marketed their harmful baby food products through mass media, more women joining work outside their homes, inadequate support to women at work and lack of support in the health care system led to increasing adoption of alternate feeding.

BPNI, born in 1991, created a platform for anyone to join this movement but kept a clear ethical policy of funding and association to avoid any conflicts of interest. Over the years BPNI's work focused on protection, promotion and support of breastfeeding considering that these three pillars are critical to improve breastfeeding rates in the country. BPNI began with a narrow objective of protection of breastfeeding from the commercial baby food market forces and insisted for legal framework to achieve this objective.

Later it expanded into advocacy for maternity protection and BFHI, skill training of health workers, examining policy support to women, malnutrition, and nutrition policy development. New work that BPNI began during the last five years is to check the marketing of unhealthy food products for older children and adults, is now taking shape. This was important to examine and monitor the eco-system that creates dependency on the highly processed foods. Looking at the analytical framework of change (Table-I). BPNI can claim part of the credits towards contribution to substantial gains made at the national policy and programme level. At 30 years, BPNI is proudly moving forward with the younger generation taking the lead to steer this work. Challenges are many though. A World Bank study on Baby Friendly Hospital Initiative (BFHI) (2019) confirmed my assertions. "Despite the known

benefits the challenges include: (a) lack of ownership and funding of BFHI, (b) inadequate human resources, (c) overburdened health facilities, (d) weak monitoring and evaluation mechanisms, (e) inability to involve private hospitals, (f) ineffective implementation of the International Code of Marketing of Breastmilk Substitutes (the Code), and (g) lack of proper mechanisms to provide technical support and leadership. At the hospital level, separation of babies from mothers especially in cesarean section births, more so in the private sector; inadequately trained health staff; unnecessary use of infant formula due to commercial influence of baby food industry on health facilities; and inadequate counseling and support to mothers during antenatal and postnatal periods were some additional barriers to success of BFHI implementation."

CHALLENGES

I. Baby food industry is far more aggressive Since 1995, the BPNI was mandated to monitor the compliance of the baby food industry with the Infant Milk Substitutes Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, and Amendment Act 2003 (IMS Act). BPNI notes that baby food industry is far more aggressive in promoting its products illegally in order to dominate the market often in disregard of peoples ' rights. Baby food businesses are finding new ways to influence policy makers and consumers. Baby food corporations set up a non-governmental organization to partner with FSSAI to lead a project called "Diet For Life" obviously to influence the regulatory policies e.g. seeking exemption from IMS Act to their products. FSSAI did propose this exemption to IMS Act for some products and BPNI had to fight it back. The food companies misused the pandemic as a big opportunity and distributed free milk formulas and sponsored meetings of doctors all

over India. Pervasive marketing also came into light in late 2021 when one of the whistle blowers exposed a company for giving away cash incentives of INR 10,000-15,000 to doctors. Creating mommy bloggers to promote products on YouTube, offering discounts on the E-marketing portals are other means and a major threat to breastfeeding.

2. Stagnant early breastfeeding rates in spite of increasing institutional births

The NFHS-5 Data revealed that 89% women delivered in hospitals and only 41.8% were able to begin breastfeeding within an hour of birth. This is a big challenge to match these percentages and demonstrates clearly the lack of support in the health systems during pregnancy and at birth. Rapidly increasing births by C-section is a challenging environment given that health workers around the mother are not supportive because of lack of skills. Inadequate human resources at the health system pose a challenge too. At the same time exclusive breastfeeding rate during 0-6 months has increased from 55% to 63.7%, which is an encouraging trend. But only45.9% children received timely complementary feeds at 6-8 months and only 11.1% received adequate diverse diet during 6-23 months. This is also a challenge to the whole Nation to find a solution.

3. Professional associations of pediatricians continue to be 'misinformed'

Baby food industry continues to spread misinformation among the health professional bodies that it is not a violation of the IMS Act if supported by their medical division or an educational institute floated by them. This is a big challenge as the pediatricians and neonatologists continue to be part of industry activities and give the same reasons. This is in spite of the fact that Government of India had interpreted in 2010 and in 2020 that front organisations of the baby food companies are a part of the industry, therefore any engagement with them be avoided.

4. Government's failure to initiate investigations and prosecution

BPNI continues to file complaints with the

Government of India. The government recognizes them but Government is yet to order a legal investigation, as violation IMS Act is a cognizable offence. This encourages food industry to go more aggressive.

5. Poor support to women during pregnancy or at birth

Making an informed choice about feeding their babies is crucial for the mother in the antenatal period, because that's the best time to take the feeding decision. Evidence shows women are not prepared for breastfeeding during pregnancy.

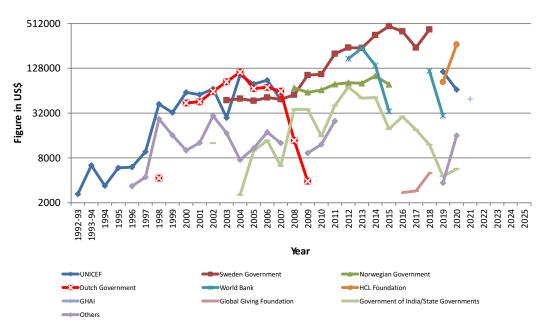
Obstetricians do confess about it. The eco-system of support to women is weak even after birth wherein very few hospitals end up supporting initiation of breastfeeding within an hour of birth and skin-to-skin contact. Support is lacking for exclusive breastfeeding during first six months as well. The robust eco-system includes availability of a caring, supportive and skilled health worker in the hospitals and labour laws supporting women at work, formal or informal.

6. Increasing marketing of unhealthy food products

BPNI has taken note during last 5 years increased marketing and promotion of unhealthy food products targeted at children and adolescents. Examples are milk formulas for all kinds of ages and pregnant women, and ultra-processed foods (UPFs) containing excessive amounts of sugar, salt or bad fats. Their advertisements usually create an environment of dependency of such processed and packaged foods. These UPFs are harmful as increased consumption is associated with non- communicable diseases like obesity, diabetes, heart disease and cancers.

7. Uncertainty of funding of BPNI

This is a challenge given the changing priorities of donors from where BPNI is comfortable in receiving funds. It makes the projects/programmes unsustainable. (See Figure on Next Page)



Flow of funds from different donors (1992-2021)

WAY FORWARD

Improving breastfeeding rates: It requires a plan of action that goes to address both the government and private sector, civil society, professional associations and the community. Here are some thoughts on the way forward.

A. Government: Government of India can initiate and document a plan of action with earmarked funds. As a priority Government of India could formalize a mechanism to effectively enforcement of the IMS Act. Most of infringements of the law happen in health system, therefore, by changing the Rules of Business and making MOH responsible for its implementation is logical. It is also stated in the Statement of Objects and Reasons (SOR) of the IMS Act. The MOHFW may commission annual monitoring reports from the states. To improve breastfeeding indicators within the public sector, the Government could strengthen the support services at the level of health facility making it mandatory to support women during pregnancy at the time of birth. The Government of India can take the advantage of its own guidelines to set up lactation management centers and appoint lactation counsellors in each maternity hospital. It may cost about INR 5 Lacs per annum per hospital. For the community level action the Government of India

could strengthen infant and young child feeding services at block level, this may cost about INR One Crore per district. Research in India has shown that breastfeeding rates can be substantially improved both at health facility and community level. All these activities require a fund, which may be earmarked for this particular purpose. Last but not the least, Government of India should shift the focus of communication from advantages of breastfeeding to the services it offers. Another important action is to ensure that women in informal sector also get the much-required 6-month maternity leave guaranteed by the Maternity Protection Act 2017.

B. Private sector: Role of private sector is exactly the same as in public sector. More specifically at the health facility level private sector can ensure that they provide the well- defined services under the MAA programme, regularly monitor the programme and data, assist moms during pregnancy and after birth including those given birth by C-section. Private hospitals should respect the IMS Act in letter and spirit and report any violations to the District Health Authority.

C. Professional associations: All professional organisations can play a crucial role in protection, promotion and support of breastfeeding. They could

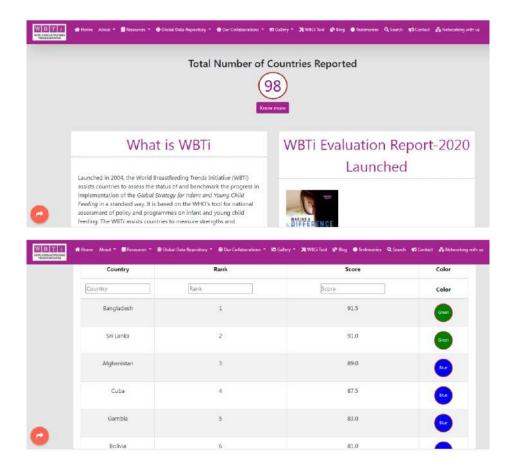
prioritize the enforcement of the IMS Act. They should refrain from taking any kind of support from baby food/feeding bottle industry directly or indirectly.

D. Human rights groups and women's organisations: Women individually or in the organisations and the right to health and food groups should continue to demand for services and support to women at work and in the hospital where they deliver. Demand for a conducive infrastructure such as creches at work places must be raised. Awareness for supporting mothers to breastfeed anywhere anytime is important too.

E. BPNI: Continued monitoring of the IMS Act and advocacy with Government of India for effective enforcement is the way forward for BPNI as it is mandated to do so. Continued monitoring of marketing of unhealthy food products and advocacy for warning labels on the packaged foods, demand for a legal framework to end marketing of unhealthy foods. BPNI should continue to reach out to

pregnant women with its new work "iDECIDE-About Feeding My Baby" (https://idecide.org.in/). It should also promote "Breastfeeding Friendly Hospital" initiative to private hospitals and offer accreditation (https://www.bfhi-india.in/). Both these new products are self sustainable. BPNI could continue to strengthen alliances with the civil society and professional organisations without compromising on the Conflicts of Interest. BPNI should also continue to be involved in policy analysis and research to demonstrate increasing breastfeeding rates.

F. International advocacy: While BPNI has been able to introduce the World Breastfeeding Trends Initiative (WBTi) in more than 140 countries, 98 of them have completed and reported on their policy and programmes. These are also ranked by the WBTi. It is high time to scale up WBTi work. Countries that have already done it should repeat assessments every 3-5 years. Based on the findings advocacy effort and plans in each country could be developed.



SUMMARY OF YEAR WISE PROGRAMME/PROJECTS/PUBLICATIONS

Programme & Projects /Advocacy

- Launch of World Breastfeeding Protection Day May 21, 2021. Theme: Compelling
- Launch of WBW 2021 theme: Protecting Breastfeeding-Where Lies the Responsibility?
- Enforcement of the IMS Act in India
- Launch of "iDECIDE-About Feeding My Baby"-A Boon for Pregnant Women/Husbands to Make an Informed Decision on Feeding their Babies
- Initiated a new project "Protecting peoples health through strong warning labels up front on the pre-packaged food products"
- BPNI team organised 5 webinars in 2021
- BPNI introduced Monthly Lecture Series
- Introduced BFHI, a new initiative for private sector with the authorized Assessors
- Conducted a 4 days online training of Europe region on WBTi in July 2021 with 31 participants.
- Organized and conducted IYCF counseling training, the '4 in 1' course, in Puducherry. A total of 46 participants were trained.

Publications

- SPOTLIGHT ON INFANT FEEDING IN Maharashtra 2021- Tracking policies and programmes in support of women and children to adopt optimal feeding practices: from conception to 2 years or beyond
- Under Attack: A Report of the monitoring the compliance with the IMS Act.

Articles

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- Perspective: When the cure might become the malady: the layering of multiple interventions with mandatory micronutrient fortification of foods in India. The American Journal of Clinical Nutrition, Volume 114, Issue 4, October 2021, Pages 12611266, https://doi.org/10.1093/ajcn/nqab245

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- World Breastfeeding Week 2021: How Can COVID-19 Positive Lactating Mothers Exercise Care And Caution While Nursing Their Babies?, NDTV.Com, Barkha Mathur | Sonia Bhaskar |August 3, 2021 https://swachhindia.ndtv.com/world-breastfeeding-week-2021-how-can-covid-19-positive-lactating-mothers-exercise-care-and-caution-while-nursing-
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- Experts for adopting front-of-pack labels on all processed foods. Monday, 30 August 2021 | PNS | New Delhi
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- Cover story 6th Sep 2021. Rajasthan Patrika -Khas Mulakat | Facebook (10 K Views). https://www.facebook.com/rajasthanpatrika/videos/1 100703057129280
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- Health activists' bat for banning advertisements of processed foods high in sugar, salt and fat, Shobita Dhar, 16 Nov 2021 https://www.news9live.com/health/celebrityendorsements-of-unhealthy-food-products-shouldstop-say-health-experts-133785

Programme & Projects /Advocacy

- Launch of WBW 2020 theme: Support
 Breastfeeding for a healthier planet- Covid-19
 is an opportunity to strengthen action on
 breastfeeding
- Continued implementation the project on "BPNI-UNICEF partnership for sustained advocacy and accelerating implementation of MAA programme in 4 states" funded by UNICEF India
- Continued implementation the project on "Strengthening Breastfeeding and Infant and Young Child Feeding (IYCF) Counselling Services and Practices in Gautam Budh Nagar, Lucknow and Chennai districts" funded by HCL Foundation
- Launch of the "Stanpan Suraksha" A Mobile Application (On Zoom)
- BPNI team organized 7 webinars during COVID times on topic "Launch of WBTi Evaluation Report 2020", "Covid-19 and Breastfeeding", "What you need to know about Ultra-Processed Foods (UPFs)? The science, policy responses and politics in global context", "Counselling Women on Breastfeeding and Infant and Young Child Feeding: How, When and by Whom", "Enhancing Access to Skilled Lactation Counselling Support & Protecting Mothers from Commercial Baby Food Marketing: The Digital Way", Launch of the "Stanpan Suraksha" A Mobile Application, "Effective Implementation of the IMS Act" and "Launch of the Report on Spotlight on Infant Feeding in Tamil Nadu 2020".

Publications

- Making A Difference- An Evaluation Report of the World Breastfeeding Trends Initiative (WBTi)
- SPOTLIGHT ON INFANT FEEDING IN TAMIL NADU 2020- Tracking policies and programmes in support of women and children to adopt optimal feeding practices: from conception to 2 years or beyond
- Information Sheet on COVID-19 & Breastfeeding in Hindi and English
- Ten Info graphics on COVID-19 & Breastfeeding in Hindi and English
- The Unseen Dangers of Ultra-Processed Food in 14 Indian languages
- Policy Brief: How, When and How Often: Counselling of Women as a 'health service' to Improve Breastfeeding and Infant and Young Child Feeding Practices
- Elements of 'MAA' Programme, the 'Ten Steps' and the Current Status/Gaps
- Guidelines to provide counselling of women to improve breastfeeding and infant and young child feeding practices as a standard of care.
- COVID-19 and Breastfeeding Information update.

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 https://www.sundayguardianlive.com/news/two-big-ideas-poshan-abhiyaan
- Global firms Abbott, Danone under Modi govt lens again for breaking law to promote baby food. Himani Chandna. 16 August, 2020 https://theprint.in/health/global-firms-abbott-danone-under-modi-govt-lens-again-for-breaking-law-to-promote-baby-food/482997/
- National Nutrition Week: What Is NOVA
 Classification of Food And How It Can Help In Making An Informed Choice? Aastha Ahuja, Sonia Bhaskar, September 4, 2020
 https://swachhindia.ndtv.com/national-nutrition-week-what-is-nova-classification-of-food-and-how-it-can-help-in-making-an-informed-choice-49345/
- 34 per cent births in Tamil Nadu by C-section; breastfeeding not supported

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Publications

- The New Indian Express, 24th December 2020 https://www.newindianexpress.com/states/tamil-nadu/2020/dec/24/34-per-centbirths-in-tamil-nadu-by-c-section-breastfeeding-not-supported-2240384.htm
- Early Initiation Of Breastfeeding Declines In 12 States And Union Territories, Reveals NFHS-5 Report. Aastha Ahuja and Sonia Bhaskar |NDTV.Com. December 30, 2020 https://swachhindia.ndtv.com/early-initiation-of-breastfeeding-declines-in-12-states-and-union-territories-reveals-nfhs-5-report-54717/

Programme & Projects /Advocacy

- Launch of WBW 2019 theme: Empower parents, enable breastfeeding: Now and for the future!
- Continued implementation the project
 "Addressing critical failures of Infant and Young Child Nutrition (IYCN) in South Asia:
 Diminishing coverage of Baby Friendly Hospital Initiative (BFHI)" funded by World Bank till 2019
- Implementing the project on "BPNI-UNICEF partnership for sustained advocacy and accelerating implementation of MAA programme in 4 states" funded by UNICEF India
- Implementing the project on "Strengthening Health Facility Accreditation for Mother's Absolute Affection (MAA) programme to protect, promote and support breastfeeding" funded by WHO India
- Implementing the project on "Strengthening Breastfeeding and Infant and Young Child Feeding (IYCF) Counselling Services and Practices in Gautam Budh Nagar, Lucknow and Chennai districts" funded by HCL Foundation.
- Organized and conducted IYCF counseling training, the '4 in I' course, in Delhi, Rajasthan, Chhattisgarh and Puducherry. A total of I7 National trainers, 24 middle level trainers and I68 counselling specialists were trained.
- Participated in 3rd World Breastfeeding Conference (3rd WBC) and the First World Complementary Feeding Conference (1st WCFC) from 11th 15thNovember 2019, Rio De Janeiro, Brazil

Publications

- What Constitutes a Violation of the IMS Act?
- Breastfeeding & Infant and Young Child Feeding Practices-Report Card: India, States & UTs. August 2019.

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- The World Breastfeeding Trends Initiative: Implementation of the Global Strategy for Infant and Young Child Feeding in 84 countries. Gupta A, Suri S, Dadhich JP, Trejos M, Nalubanga B. J. Public Health Policy. 2019; 40(1):35-65. https://link.springer.com/article/10.1057/s41271-018-0153-9
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 Current Global Costing Methodologies".
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- Lactating mothers need support from family, doctors. RanuJoardar, Sunday Guardian, August 10, 2019
 - Https://www.sundayguardianlive.com/news/lactating-mothers-need-support-family-doctors
- Nestlé Under Scanner: BPNI Alleges Violation In Trial On Feeding Patterns Of Premature Babies, The Logical Indian, Shraddha Goled, 5 Aug 2019 https://thelogicalindian.com/storyfeed/awareness/nestle-ims-act-preterm-babies/

- Launch of WBW 2018 theme: Breastfeeding Foundation of Life-Breastfeeding nourishment for life
- Continued implementation of project "Protecting and Supporting Breastfeeding through Human Rights and Gender Equality" funded by SIDA till 2018.
- Implementing the project "Addressing critical failures of Infant and Young Child Nutrition (IYCN) in South Asia: Diminishing coverage of Baby Friendly Hospital Initiative (BFHI)" funded by World Bank till 2019
- Organized and conducted IYCF counseling training, the '4 in I' course, in Delhi, Himachal Pradesh, Bihar and Puducherry. A total of I4 National trainers, I6 middle level trainers and 85 counselling specialists were trained.
- Organised and Conducted Training of Trainers held at Colombo, Sri Lanka and China
- BPNI, as a member of the Coordination Committee of the GBAI/GBC on behalf of IBFAN
- BPNI co-coordinated a workshop on mitigating Conflicts of Interest in Nutrition Governance during the "Conference on critical public health consequences of the double burden of malnutrition and the changing food environment in South and Southeast Asia" in New Delhi, India in March 2018

Publications

Report on the Monitoring of the Code in 11
 Countries of Asia-Inappropriate marketing of baby foods and feeding bottles.

Articles

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- Ultra-processed foodsis enough being done to reduce their consumption? World Nutrition. 2018
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- Launch of WBW 2017 theme: Sustaining Breastfeeding: Building Alliances without Conflicts of Interest
- Continued implementation of project "Protecting and Supporting Breastfeeding through Human Rights and Gender Equality" funded by SIDA till 2017.
- Organized and conducted IYCF counseling training, the '4 in I' course, in Andhra Pradesh, Bihar, Puducherry, Telangana, Tripura, Uttar Pradesh, Uttarakhand, West Bengal and New Delhi. A total of 130 middle level trainers and 122 counselling specialists were trained.
- Contributing actively in organising and conducting the National Workshop on MAA which was organised by the Ministry of Health and Family Welfare on 11-12 January, 2017 in New Delhi

Publications

Articles

Technical Article

- Infant Malnutrition: Breastfeeding. In: Quah, S.R. and Cockerham, W.C. (Eds.) Gupta A, Dadhich JP, Suri S (2017). The International Encyclopedia of Public Health, 2nd edition. vol. 4, pp. 207215. Oxford: Academic Press. See Abstract at: https://www.sciencedirect.com/science/article/pii/B9780128036785002277?via%3Dihub
- Is it prudent to recommend RUTF in India based on the results of this trial? Dadhich JP. http://gh.bmj.com/content/1/4/e000144.eletters#reis-itprudent-to-recommend-rutf-inindiabasedontheresults-of-this-trial

Media Article

- The nine months of pregnancy is the right time to start thinking about how to feed a baby. https://scroll.in/pulse/836742/the-nine-months-ofpregnancy-is-the-right-time-to-start-thinking-abouthow-to-feed-a-baby
- Sunday Guardian April 22, 2017:-India looks to Modi for justice to the undernourished child. https://www.sundayguardianlive.com/opinion/9170-india-looks-modi-justice-undernourished-child
- 'Do more to prevent conflict of interest'.
 https://www.sundayguardianlive.com/opinion/9376-do-more-prevent-conflict-interest
- No, India is not a 'breastfeeding nation'. But it badly needs to be one.scroll.in January 19, 2017. https://scroll.in/pulse/826768/no-india-is-not-abreastfeeding-nation-but-it-badly-needs-to-be-one

- Launch of WBW 2016 theme "Breastfeeding A Key to Sustainable Development"
- Continued implementation of project "Protecting and Supporting Breastfeeding through Human Rights and Gender Equality" funded by SIDA till 2017.
- Launch of "MAA-Mothers' Absolute Affection" a nationwide breastfeeding programme by Ministry of Health and Family Welfare, BPNI is the official technical partner of the programme.
- Participated in the first meeting of the national coordination on IYCF, Government of India
- AACI presented on conflicts of interest in the appointment of advisors/consultants/experts in Govt. Establishments for Standing Committee on Personnel, Public Grievances, Law and Justice at the Parliament of India.
- Organized and conducted IYCF counseling training, the '4 in I' course, in Jharkhand, Karnataka, Bihar, Puducherry and New Delhi. A total of 11 National trainers, 242 middle level trainers and 115 counselling specialists were trained.
- Co-organizing World Breastfeeding Conference (11-14 Dec'16), Johannesburg, South Africa with department of health Republic of South Africa; GIFA and ICDC.
- Entered in to a partnership with International Lactation Consultant association (ILCA) and also participated in the Global Partners Meeting, Chicago, liinois, USA.
- Participated in several meetings of shadow codex committee on nutrition and food for special dietary use.
- Translation of Parents guide book successfully completed in 7 regional languages and available for sale online.
- Organised an international training Course on Monitoring the International Code of Marketing of Breastmilk Substitutes with IBFAN Asian and ICDC- IBFAN

Publications

- Report on carbon footprint due to milk formula;
 A study from selected countries of the asia-pacific region)
- HIV and Infant Feeding-Global Status of Policy and Programmes based on World Breastfeeding Trends Initiative assessment findings from 57 countries
- E- Marketing Companies Making Profits At The Cost Of Infant Lives Breaking the Law series 7
- Information sheet about violation of IMS Act
- Has Your Nation Done Enough to Bridge the Gaps?- 82 country report on status and progress of implementation of the Global Strategy for Infant and Young Child Feeding 2008-2016

Articles

- Baker P, Smith J, Salmon L, Friel S, Kent G, Iellamo A, Dadhich JP, Renfrew MJ. Global trends and patterns of commercial milk-based formula sales: is an unprecedented infant and young child feeding transition underway? Public health nutrition. 2016 May 23:1-1.
- Thakur N, Chhabra P, Dadhich JP, Gupta A, Chandola V.To assess the prevalence and factors determining timely initiation of breastfeeding among the mothers in resettlement colony in Delhi. Indian Journal of Child Health. 2016 May 25;3(2):147-53.

- Launch of WBW 2015 theme "Breastfeeding and Work: Let's Make it Work"; its observation led to social mobilization of 116 organizations and individuals across India.
- Continued implementation of project
 "Protecting and Supporting Breastfeeding through Human Rights and Gender Equality" funded by SIDA till 2017.
- Continued implementation of project "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.
- WBTi introduced in 106 countries, 75 countries completed their assessment, out of which 17 were new countries.
- 19 WBTi countries developed call to action.
- Submitted an alternative report of countries including findings from WBTi assessment to CRC.
- Organized One Asia Partners Forum I I in Malaysia in November. Also organized training on human rights in collaboration with IBFAN GIFA.
- Updated the "4 in 1" training programme on IYCF counseling.
- Organized National Trainer's training in Jammu & Kashmir, India and Indonesia.
- Trained 84 MLTs in Himanchal Pradesh, Uttarakhand, Bihar and Maldives under NHM and DoWCD. These MLTs further trained 819 frontline workers.
- Trained 191 medical officers, nursing and nutrition experts as counseling specialists in 8 state level workshops.
- Coordinated the IBFAN Asia Working Group on Environment and Climate Coordination of the Change and infant feeding with 11 members from Singapore, Philippines, India, France, Malta, South Korea, Palau and Switzerland.
- Released a research report on "Carbon Footprints of Milk Formula feeding in selected countries of the Asia-Pacific region" done in collaboration with researchers from Australia, Malaysia and Philippines.
- Organized state level IMS Act sensitization workshop in Haryana and Karnataka.
- As a member of CCNFSDU national shadow committee, contributed in shaping up Government of India's position for key e-

Publications

- "Arrested Development" India's 4th WBTi Assessment Report.
- Research report titled "Carbon Footprints of Milk Formula feeding in selected countries of the Asia-Pacific region".
- Electronic publication of IBFAN Asia Newswire Series 10 and 11.
- Electronic publication of an information sheet on public health importance of optimal IYCF practices.

Articles

- 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.
- "Infant and young child feeding practices among urbanized population of Delhi" published in Scientific Journal on Indian Journal of Preventive & Social Medicine (IJPSH), Volume 46 (3-4) July-Dec 2015.

Programme & Projects / Advocacy

Working groups on- Follow-up Formula, Ready to Use Therapeutic Food (RUTF), Biofortification and Nutrient Reference Value (NRV) for children etc.

- Organized a "Global capacity building workshop & symposium on Conflicts of interest and the infant and young child feeding arena - An assessment from a corporate accountability perspective" in December, 2015 at London in collaboration with IBFAN-GIFA, Geneva and Baby Milk Action (BMA), Cambridge.
- Completed India's 4th WBTi assessment in collaboration with PHRN and NIPCCD.

- Launch of WBW 2014 with the theme "Breastfeeding: A winning goal for life". South Asian countries also participated in the observation of WBW.
- Implementing the project on "Protecting, Promoting and Supporting Breastfeeding through Human Rights and Gender Equality as part of a consortium composed of IBFAN Asia, Europe and the World Alliance for Breastfeeding Action (WABA) funded by SIDA till 2017.
- Executed the project on Enhancing Breastfeeding Rates Contributes to Women's Rights, Health and a Sustainable Environment, funded by NORAD under Global Breastfeeding Initiative for Child Survival till 2015.
- Implementing the project on Strengthening Infant and Young Child Feeding Policies and Programmes in South Asia Region under The South Asia Food and Nutrition Security Initiative (SAFANSI) implemented by the World Bank and funded by DFID and AusAid.
- Review and revision of WBTi assessment tool and inclusion of WBCi.
- Introduced WBTi in 20 new countries of Asia, Arab World and Oceania region.
- Launched WBCi at the World Health Assembly (WHA) in Geneva, Peru, Maldives, Nepal, Bangladesh, Arab World, Oman, Philippines, Australia, Oceania and Palau.
- Reviewed and Updated "4 in 1"training programme on IYCF counseling
- Trained 398 Middle Level Trainers in 20 training workshops with NHM Bihar, Haryana, NIPCCD and NCF. These MLTs further trained 2128 frontline workers of NHM Haryana and 1740 frontline workers of health and nutrition care programme of Government of Bihar.
- Organised and conducted an International 'National Trainers' training with participants from Nepal and Afghanistan.
- Initiated work on Climate Change and Infant Feeding.
- Organized One Asia Partners' Forum 10 held at Brunie Darussalam.
- Exposed big baby food giants through a press conference on "Say no to big food companies in public nutrition policy and programmes" in partnership with Alliance Against Conflict of Interest (AACI) India Resource Centre, Working group for children under six of

Publications

- Book on Complementary Feeding titled "Best Feeding" documenting 100 recipes from 20 Asian countries.
- Electronic publication of IBFAN Asia Newswire Series 3 to 9.
- Electronic publication of research briefs series I-3 on various aspects of breastfeeding practice at the community level.
- A report of Middle Level Trainers training on IYCF counseling for 10 districts of Haryana.
- An information booklet titled "Formula for Disaster"-Weighing the impact of formula feeding Vs breastfeeding.

Articles

- ! Theory and social practice of agency in combining breastfeeding and employment: A qualitative study among health workers in New Delhi, India. OmerSalim A, Suri S, Dadhich JP, Faridi MM, Olsson P.Women Birth. 2014 Dec;27(4):298-306.
- ! Manipulation by Association Is the Private Sector Undermining Nutrition? Arun Gupta, JP Dadhich, Navdeep Singh Khaira, Radha Holla. Economic & Political weekly July 26, 2014, vol XLIX no 30, page 18-21.
- ! Effect of peer counselling by mother support groups on infant and young child feeding practices: the Lalitpur experience. Kushwaha KP, Sankar J. PLoS One. 2014 Nov 4;9(11):e109181. doi: 10.1371/journal.pone.0109181. ECollection 2014.

Programme & Projects /Advocacy

People's Health Movement and Right to Food campaign in New Delhi.

- Contributed in the Codex Alimentations process as a member of IBFAN Global Codex team and as a member of Government of India's Shadow Committee on CCNFSDU.
- Organized a national consultation on the legislative bill on prevention and management of conflicts of interest in New Delhi.
- Contributed in the National Nutrition Mission (NHM) MoWCD by providing inputs on policy document on IYCF.
- Participated at the International Conference on Nutrition Civil Society Organization (ICN CSO) Forum in November in Rome.
- Submitted the Annual Report on IMS Act monitoring to Government of India .
- Organized IMS Act sensitization workshops in 4 states i.e Odisha, Jharkhand, Uttar Pradesh and Assam with state governments.
- Organized a Regional Training Course on implementing the International Code of Marketing of Breastmilk Substitutes, Jakarta in October 2014.
- Organized a Gender training workshop with IMCH University, Sweden in New Delhi.

- Launch of WBW with theme "Breastfeeding Support Close to Mothers" 2013.
- Organized a roundtable Discussion on Unpacking the 12th Five Year Plan in April with members of Planning Commission of India and senior officials from Ministry of Women and Child Development, Government of India.
- Contributed in "Rapid Survey of Children" by Ministry of Women and Child Development.
- Organized regional workshop with NIPCCD on infant and young child feeding in ICDS for nutrition surveillance in March.
- Contributed in an International Film 'Tigers', made on Baby Food issues directed by Danis Tanovik staring Emraan Hashmi.
- Contributed in the Codex Alimentations process as a member of IBFAN Global Codex team and as a member of Government of India's Shadow Committee on CCNFSDU.
- Organized National workshop for capacity building of state representatives on breastfeeding, infant and young child feeding and child survival in 6 states of India namely Andhra Pradesh, Assam, Punjab, Karnataka, Uttar Pradesh and Jammu & Kashmir.
- Contributed in the second Lancet series on maternal and child malnutrition.
- Organized policy dialogue on "Scaling Up Breastfeeding and IYCF Interventions: What will it Cost?" as part of World Breastfeeding Costing Initiative (WBCi).
- Organized review workshop for WBTi in New Delhi
- Launched the World Breastfeeding Costing Initiative (WBCi) paper with Dr. Montek Singh Ahluwalia, Dy. Chairman, Planning Commission of India.
- Participated at the World Health Assembly (WHA) and organized a side event with Human Rights Council in Geneva in May.
- Initiated coordination in Afghanistan, Bangladesh, India and Nepal under the SAFANSI Project with World Bank.
- Contributed in Right To Food Movement advocacy and met Mr. Oliver de Schutter, UN Rapporteur for Right to Food.
- Contributed in Thailand's 4th National Breastfeeding Conference.
- Organized the One Asia Breastfeeding Partner's Forum at Luang Prabang.
- Trained 6 master trainers and 25 counseling

Publications

- "Are our babies falling through the gaps?" The state of policies and programme implementation of the Global Strategy of Infant and Young Child Feeding in 51 Countries.
- BPNI Bulletin No.35 on Skilled Counseling on IYCF- An effective intervention to promote optimal infant feeding".
- BPNI Bulletin No.36 on "Dark Clouds and a Silver Lining".
- IBFAN Asia position statement on HIV and Infant Feeding.
- Article on "Does Formula Feeding contributes to childhood obesity?" in Centre for Science and Environment.
- Infant Health, Nutrition and Survival Report Cards of 13 states in India.
- Marketing Offenders-Examples of inappropriate baby food promotion from around the world.

Articles

- Ready to use therapeutic food is not the solution to malnutrition in World Nutrition, April 2012.
- Tackling Conflict of Interest and Misconduct in Biomedical Research in Indian Paediatrics 2012.
- The status of policy and programme on Infant and Young Child Feeding in 40 countries in Health Policy and Planning 2012.
- Commodifying Malnutrition in Infochange India's 2012 issue on Malnutrition.

Programme & Projects /Advocacy

specialists in International Training of Trainers on IYCF Counseling in New Delhi.

- Built state level capacity on IYCF counseling in Punjab, Tamil Nadu, Karnataka, Delhi, Haryana and Bihar.
- Organized a press conference exposing the big baby food giants like Nestle, Hienz and Abbott on violating the IMS Act.

- Launch of WBW 2012 Theme "Understanding the past, Planning for the Future".
- Organized the first World Breastfeeding Conference in New Delhi.
- Initiated a new project for strengthening Infant and Young Child Feeding (IYCF) capacity in South Asian Region as a part of South Asia Food and Nutrition Security Initiative.
- Completed World Breastfeeding Trends Initiative (WBTi)-India Assessment 2012.
- Organized a workshop with South Asia Regions of Infant and Young Child Feeding with World Bank's Support.
- Participated at the World Health Assembly in Geneva
- Organized a Dialogue on Policy and Programmes Gaps in Breastfeeding in the 12th Five year plan.
- Conducted capacity building workshops on IYCF counseling in Andhra Pradesh, New Delhi, Punjab and Rajasthan.
- BPNI's advocacy led to Nestlé's products being seized by the Department of Health, Haryana under the IMS Act.
- Government of India issues communication to apprise state on IMS Act.
- Indian Academy of Pediatrics (IAP) boycotted scientific conference organized by Nestle Nutrition Institute.
- Contributed in Thailand's 4th National Breastfeeding Conference.
- Organized the One Asia Breastfeeding Partner's Forum at Luang Prabang.
- Trained 6 master trainers and 25 counseling

Publications

- "Are our babies falling through the gaps?" The state of policies and programme implementation of the Global Strategy of Infant and Young Child Feeding in 51 Countries.
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- Ready to use therapeutic food is not the solution to malnutrition in World Nutrition, April 2012.
- Tackling Conflict of Interest and Misconduct in Biomedical Research in Indian Paediatrics 2012.
- The status of policy and programme on Infant and Young Child Feeding in 40 countries in Health Policy and Planning 2012.
- Commodifying Malnutrition in Infochange India's 2012 issue on Malnutrition.

- Launch of WBW'll theme: "Talk to me! Breastfeeding a 3D Experience".
- Initiated a new project in selected districts of Bihar and Uttar Pradesh supported by Plan India.
- Initiated a new project in Partnership Driven Cooperation with IMCH Sweden, supported by Swedish International Development Cooperation Agency (Sida).
- Organized & conducted IYCF Counseling Specialists Training in Delhi, Andhra Pradesh and Gwalior. 96 IYCF Counseling specialist trained.
- Middle Level Trainers trained in UP & Bihar.
- Conducted baseline survey in select districts of Uttar Pradesh and Bihar
- Organized One Asia Breastfeeding Partners Forum-8 in Mongolia
- Provided inputs in the 12th Five year Plan of the Planning Commission, Government of India.
- Organized "National Consultation to Develop a Plan of Action Resource- Requirements for Enhancing Rates of Breastfeeding & Infant and Young Child Feeding
- Organized a national function on "20 years of BPNI"
- Organized a strategic planning meeting of the IBFAN network.

- An article "Enhancing Optimal Infant Feeding Practices in India" published in India Health Beat (The World Bank)
- An article "The first priority for Children (Short communication: breastfeeding)" published in World Nutrition.
- BPNI Bulletin No. 33 and 34.
- Published report on "Training course on IYCF in 8 districts of Punjab"
- Published report on "National Consultation to -Develop a Plan of Action"
- Resource Requirements for Enhancing Rates of Breastfeeding & Infant and Young Child Feeding in the 12th five year Plan.

- Launch of WBW'10 theme: "Breastfeeding Just 10 Steps! The Baby Friendly Way!!
- Conducted MLTs and Counseling specialist training in Punjab, Delhi, Hindupur and Gwalior.
 610 MLTs and 75 counseling specialists trained.
- Organized One Asia Breastfeeding Partners Forum-7 in Jakarta, Indonesia
- The Prime Ministers Council on India's Nutrition Challenges has been set up and Dr. Arun Gupta, Central Coordinator BPNI has been nominated a member
- Secretaries of the Ministry of Health and Ministry of Women and Child Development write jointly to the state administrations to implement the IMS Act more effectively
- BPNI organized a conference to release the report of findings of the project on Baby Friendly Community Health Initiative at Lalitpur
- BPNI became is a member of the three working groups for the protection, promotion and support of breastfeeding in the NBC
- Prime Ministers Council on India's Nutrition
 Challenges informed on the need for enhancing
 breastfeeding rates and how to do it
- BPNI spearheaded the formation of the Alliance Against Conflict of Interest (AACI) to initiate a movement on this issue.

- Review article "Breastfeeding and complementary feeding as a public health intervention for child survival in India" In Indian Pediatrics Dr. Arun Gupta, Dr. JP Dadhich and Dr. MMA Faridi
- Published the report of findings of the project on Baby Friendly Community Health Initiative at Lalitpur.

- Launch of WBW'09 theme: "Breastfeeding A Vital Emergency Response"
- Launched One Million Campaign globally an international web campaign to build global opinion to support women and mothers (includes developing, designing, hosting and maintaining website)
- Conducted Training of 107 Middle Level
 Trainers and more than 2000 frontline workers in 2 districts of Punjab, 200 Middle Level
 Trainers in Andhra Pradesh and Haryana
- Conducted Training of Trainers on IYCF in Yemen and Bhutan by BPNI course director
- Organized Global Conference on "Meeting Nutritional Challenges with Sustainability and Equity" that resulted in a Peoples Charter
- Conducted workshop on IMS Act in Haryana
- Organized One Asia Breastfeeding Partners Forum-6 in Colombo, Sri Lanka
- Release India report of World Breastfeeding Trends Initiatives (WBTi)
- Participated in 7th Asia Pacific United Nations Prevention of Mother-to-Child Transmission (PMTCT) held in Chennai
- Participated, discussed and commented on Codex Proposal of Government of India.
- Participate in the 2nd International Disaster Management Congress (NIDM) held in New Dollai
- BPNI provide inputs to Member Health, Planning Commission, GOI on maternity entitlements.
- Participate and delivered a lecture in the Workshop on National Consensus on Management of SAM children at New Delhi.

- Book "Recipes for Complementary feeding for Children"
- Peoples Charter for Food and Nutrition Security
- Report of Global Conference on Meeting Nutritional Challenges with Sustainability and Equity
- BPNI '3 in I' training programme released
- An article "Mainstreaming early and exclusive breastfeeding for improving child survival" written by National Coordinator BPNI published in Indian Pediatrics

Programme & Projects /Advocacy

- Launch of WBW'08 theme: "Mother Support: Going for the Gold"
- Launched WBTi India Report and Report Card
- WBTi assessment in India done
- Organized South Asia Breastfeeding Partners Forum-5 at Thimphu, Bhutan in collaboration with the MOH, Royal Government of Bhutan
- Position statement on HIV and infant feeding and a document "call to drop mixed feeding" released
- Organized the evaluation of a district level project in Lalitpur
- Setting up BPNI's IYCF Counseling Specialist Google Group
- Translation of 3 day training material in Punjabi and Telugu done
- Protested against Conflict of Interest Silent protest meeting of GAIN, New Delhi
- BPNI booth at Health camp in Rajasthan was visited by Prime Minister of Norway
- Media workshop on infant nutrition and survival conducted.

Publications

- WBTi India Report and Report Card
- BPNI Bulletin (Number 31 & 32)
- Initiation of Breastfeeding within one hour (Information Sheet-16)
- Exclusive Breastfeeding (0-6 months) (Information Sheet-17)
- Complementary Feeding (6-9 months) (Information Sheet-18)
- Find out more IMR per 1000 live births (Information Sheet-19)
- ORS Given to Children with Diarrhoea (Information Sheet-20)
- Under 3 years who are underweight (information Sheet-21)
- Report Card of children 12-23 months fully immunized (Information Sheet-23)
- Report card of children 12-23 months given
 Vitamin A (Information Sheet-24)
- Infant Survival and Development State Report Cards (Information Sheet-25)
- A consensus call to national child health programs "Drop mixed-feeding" (Information Sheet-26)
- The State of Infant Nutrition, Health & Survival (Information Sheet-27)

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Programme & Projects /Advocacy

- Launch of WBW'07 theme: "Breastfeeding: the 1st Hour Save ONE million babies!"
- Study "Status of IYCF Uttarakhand" conducted by BPNI in 13 districts
- Organized a National workshop on strengthening pre-service curriculum of IYCF
- Conducted a National Consultation on developing a National Plan of Action on IYCF
- Organized 2nd International Training on IYCF Counseling to train the trainers of various countries
- Strengthening of Pre-service Medical Education on IYCF in Punjab and Gujarat

- Study report IYCF Uttarakhand- 2006
- BPNI Bulletin (Number 29-30)
- Series-4 Nestle provokes formula feeding in baby care books.

Programme & Projects /Advocacy

- Launch of WBW'06 theme: The IMS Act: Making it Known to People
- Meeting held with Planning Commission in Delhi
- Regional workshop on "Promoting Child Survival, Nutrition and Health by Achieving Optimal IYCF Practices" organised in Delhi.
- Regional Consultation meet on Nutrition conducted at Chandigarh.
- Organized & conducted 1st International Training course on IYCF counseling at GTB Hospital, Delhi
- South Asia Breastfeeding Partner's Forum-3 held at Kabul.
- WBTi report cards released.

Publications

- BPNI Year Planner 2006
- BPNI Bulletin (Number 28)
- World Breastfeeding Week 2006 (Announcement)
- Creating a District Level Model for Effectively Scaling Up/Universalizing BPNI HQ
- Series-3 Breaking the law and undermining Breastfeeding
- Mother to Child Transmission of HIV-Some facts (Hindi & English) (Information Sheet-13)
- Violation of IMS Act is if any Infant Food company (English & Hindi) (Information Sheet-14)

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Programme & Projects /Advocacy

- Launch of WBW'05 theme: Breastfeeding and Family Foods: Loving & Healthy
- Uttaranchal Project on IYCF
- Haryana Project training in IYCF
- Workshop to disseminate findings of the project "Training of Counselors of VCTC under PPTC of HIV Infection"
- National Breastfeeding Committee (NBC) meeting held at Delhi
- CARK Region- wide conference on Prevention of HIV infection in Infants at Kazakhstan.
- 7th Ministerial Consultation on Children conducted at Cambodia
- Participated in World Health Assembly at Geneva
- State DWCD meeting of ministers & Secretaries at Parliament House Annexe
- Regional Consultation meet on Nutrition at Bhubneshwar
- National workshop on Rapid Assessment of the Status of GSIYCF
- WABA- GBPM-4 meeting at Penang
- Meeting of the National Committee on Infant & Young Child Feeding (IYCF) conducted in Delhi
- South Asia Breastfeeding Partners Forum-2 held at Nepal

- BPNI Year Planner 2005
- BPNI Bulletin (Number-27)
- Series-I Breaking the law
- Series-2 Nestle Breaks the law
- Breastfeeding and Brain Development (Cognitive Development) (Information Sheet-9)
- World Breastfeeding Trends Initiative (WBTi)
 Report on "Assessment of Status of IYCF"Achievements and Gaps 2005
- Compilation of the documents on IYCF

- Launch of WBW'04 theme: Exclusive Breastfeeding: the Gold Standard
- Release of the report of Revitalizing Breastfeeding: a report on Asia Pacific Conference on Breastfeeding & National Convention of BPNI
- Shri Jairam Ramesh, launched "Status report of 49 districts on on Infant and Young Child Feeding"
- The National Guidelines on Infant and Young Child Feeding report was released on 6th August during World Breast Feeding Week
- HIV & Infant Feeding Field Trips & Planning meeting at Zambia
- APCON follow up meeting of Infant Feeding Experts- recommendations for key actions at Mussoorie
- 31st Standing Committee on Nutrition (SCN) meeting at New York
- Orientation of BPNI National Trainers in Infant Feeding & HIV Counselor's at GTB Hospital, Delhi
- World Health Assembly at WHO Geneva
- Release of 2nd edition of the book- "The Law to protect, promote & Support Breastfeeding"
- IBFAN Coordinating Council (IBCoCo) meeting held at Costa Rica
- IBFAN 25th Anniversary at Costa Rica
- Attended WABA 3rd Global breastfeeding Partner's Meeting (GBPM)
- South Asia Breastfeeding Partners Forum-I at Bangladesh
- Workshop on ICDS held at Mussoorie
- Preparatory Committee meeting for the 7th East Asia & Pacific Ministerial Consultation on Children held at Bangkok
- National Coordination Committee of JSA
- Training of Trainers (TOT) on Breastfeeding & Complementary Feeding Rajasthan, Bhopal
- Media workshop on infant nutrition and survival.

- BPNI year planner
- U-5 child deaths (%) saved with preventive interventions (Information Sheet-3)
- Where Under-5 children die? (Information Sheet-4)
- How many Under-5 children Die in India alone? (Information Sheet-5)
- How 9.7 million U-5 children die in 42 countries (Information sheet-6)
- Questions and answers sheet on exclusive breastfeeding and complementary feeding of infant and young children (Information Sheet-7)
- Achieving High Rate of exclusive breastfeeding -Technical Information (Series-6)
- BPNI Annual Report- 1st April 2003 to 31st March 2004
- Infant and Young Child Feeding Update-7 "Protecting Breastfeeding from Commercial Influence"
- Reference of interventions to improve initiation and duration of breastfeeding (Information Sheet-8)
- BPNI Bulletin (Number 24-26)

Programme & Projects /Advocacy

- Launch of WBW'03 theme: Breastfeeding in a Globalised World for Peace and Justice
- Organised Asia Pacific Conference on Breastfeeding, 38 countries took part
- Organised "Infant Feeding & HIV- A regional colloquium for the Asia pacific, Delhi, 29 countries took part
- Regional Workshop on Infant & Young Child Feeding in Bihar
- Breastfeeding & Complementary Feeding- A training Course at GTB Hospital, Delhi
- Assessment of Policy in Vietnam
- Regional Workshop on ICDS.

Publications

- BPNI year planner
- Working method for State/ District Branch
- BPNI Bulletin (Number 21-23)
- A report on "How Industry Undermine Breastfeeding"
- Protecting Mothers and Children-A Law to protect, promote and support Breastfeeding (Information Sheet-2)
- Delhi Declaration on Infant and Young Child Feeding-a call for urgent action for child survival was formulated in the 2003 Convention.

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Programme & Projects /Advocacy

- Launch of WBW'02 theme: Breastfeeding: Healthy Mothers and Healthy Babies
- Project: Strengthening Breastfeeding Activities at Grassroots level
- Launch of qualitative & quantitative study on Breastfeeding
- Capacity Building Grants (9 groups received seed grants)
- Training of Trainers in Breastfeeding and Complementary Feeding Counseling (5 teams trained India, Philippines, Bangladesh, Maldives, Sri Lanka)
- Logical Framework Approach (LFA) Training (6 countries including India benefited)
- IBFAN South Asia Council (IBSAC) Meeting
- WHO Executive Board Meeting, Geneva
- UN General assembly Special session (UNGASS) at New York
- WABA Global Forum at Arusha, Tanzania
- Intervention with community workers on IYCF
- 4 Regional seminars on IMS Act
- World Health assembly (WHA) at Geneva
- Mother Support and Maternity Protection at Kuala Lumpur

- Summary Guidelines on Infant and Young Child Feeding available in 31 state specific languages
- The Science of Infant Feeding
- Breastfeeding and Complementary Feeding: A Guide for the Parents
- Unethical Marketing of Infant Foods
- The IMS Act: Salient Features
- Core Training Package for the Community Workers.
- BPNI Bulletin Number 20.

- Launch of WBW' 01 theme: Breastfeeding in the Information Age
- Project with CARE-India
- Launch of the project Protection of Breastfeeding in India - UNICEF/ NATCOM Luxembourg
- Participation in WHO meeting on training at Indonesia
- Advocacy for ILO campaign with NHRC
- Meeting on Maternity Benefits for Working Women - 25th May 2001
- Meeting on Infant Feeding Issues Challenges for Research - 26th May 2001
- National Partners Meeting 20-22 November 2001
- Members enrolled: 1485
- State Coordinator: 26
- City Coordinators: 250
- State Chapters: 9
- City Chapters: 7

- A flyer and a catalogue were developed
- What is BPNI
- Position statement on HIV and infant feeding
- BPNI's recommended feeding practices for infant and young children
- Bulletin (Number 18 & 19)
- Breastfeeding and Food security
- Guidelines for breastfeeding and complementary feeding (Information Sheet-I)
- World Breastfeeding Week Kit
- BFHI brochure
- Infant and Young Child Feeding Update-5 "Breast Problems"
- Plan of Action to support infant feeding in South Asia
- State to support infant feeding in South Asia
- Health futures: challenges for the 3rd millennium
 A report
- Book: Breastfeeding and Complementary Feeding
 - Guidelines for doctors
- Book: Breastfeeding and Complementary Feeding
 Guidelines for nurses
- Book: Breastfeeding and Complementary Feeding
 Guidelines for nutritional professionals
- Infant and Young Child Feeding Update- 6
 "Nutrition of the young child during first two
 years"
- Resource Centre Flyer

Programme & Projects /Advocacy

- Launch of WBW'00 theme: Breastfeeding It's your right.
- Launch of Website: http://www.bpni.org
- Launch of Resource Centre on Infant Nutrition.
- New South Asia project is funded by DGIS.
- World Health Organization Executive Board Meeting at Geneva.
- Codex training course at Bangkok. (IBFAN/CI)
- Codex Committee on Food Labeling (CCFL)-Ottawa
- ILO Convention at Geneva
- Strategic Planning on Infant and Young Child Feeding meeting of experts at Delhi
- National Breastfeeding Committee meeting
- Sensitization of MP's on Infant Feeding Issues (GOI/UNICEF/BPNI)
- Training of Trainers: Breastfeeding & Complementary Feeding: A Counseling course (BPNI/UNICEF) at Gorakhpur, UP
- BPNI /IBFAN Regional Training Seminar for South Asia
- Members enrolled: I 207
- State Coordinator: 26
- City Coordinators: 250
- State Chapters: 7
- City Chapters: 2

Publications

- WBW action folder in Hindi & English.
- Breastfeeding & Complementary Feeding -Guidelines for pediatricians
- Breastfeeding & Complementary Feeding -Guidelines for nurses
- Breastfeeding & Complementary Feeding -Guidelines for nutrition professionals
- Breastfeeding & Complementary Feeding -Guidelines for primary care doctor
- BPNI Bulletin (Number 16 & 17).
- WBW calendar
- Poster adapted from Swedish poster "Closeness and Warmth"
- Infant and Young Child Feeding Update 2 "Complementary Feeding"
- Infant and Young Child Feeding Update 3 "Problems in initiating breastfeeding"
- Infant and Young Child Feeding Update 4 "Not enough milk"
- Advocacy kit for Politicians
- A report "Under Attack" on the compliance with the IMS Act
- Resource centre: Brochure and catalogue

9 9

Programme & Projects /Advocacy

- Launch of WBW'99 theme: Breastfeeding: Education for Life.
- Project Information for Action: BPNI-GOI-UNICEF
- Research Study- UNICEF Study on Newborn Care and Infant feeding Practices in 13 States (600 Hospitals)
- WABA/BPNI: Planning workshop for World Breastfeeding Week for South Asian Countries held at New Delhi, India
- Members enrolled: I 131
- State Coordinators: 22
- City Coordinators: 195
- Consultation on revision of curriculum of grassroot Anganwadi workers (GOI/DWCD)

- WBW action folder in English
- WBW calendar
- Position statement on HIV and Infant Feeding
- Fact Sheet: Breastfeeding & Intelligence
- Infant and Young Child Feeding Update I "Exclusive Breastfeeding-the first 6 months"
- A report on the workshop Child Nutrition and Media.
- A report on Training of Trainers: Breastfeeding Counseling and Complementary Feeding.
- Paper "Breastfeeding & Medical Education" in special FOGSI issue
- Paper "Cup feeding: an Alternative to Bottle Feeding in a Neonatal Intensive Care Unit" in Journal of Tropical Pediatrics
- A report on Training of Leaders in Monitoring The IMS Act
- BPNI Bulletin (Number 15)

Programme & Projects / Advocacy

- Launch of WBW'98 theme: Breastfeeding: The Best Investment
- Public seminar held at 10 hospitals in Delhi
- Research Rapid Survey (Infant Feeding Practices)
- A workshop "Child Nutrition and Media" (GOI/UNICEF/BPNI)
- Training of Trainers: Breastfeeding Counseling & Complementary Feeding (BPNI/WHO/UNICEF)
- HLMT course at Gorakhpur, UP
- Training of Leaders in Monitoring: The IMS Act -A Training Course (BPNI/IBFAN/OXFAM)
- Members enrolled: 947
- State Coordinators: 18
- City Coordinators: 135
- National Task Force on amendments to the IMS Act reports to Government of India

Publications

- WBW action folder in English
- WBW poster
- Fact sheet 9: Right to Information, Mother and Children
- Paper published in National Medical Journal on Economic Value of Breastfeeding in India 1998
- A report "Under Attack" on monitoring the compliance of IMS Act
- A report "Commercial Infant Food-Analysis of Promotion"
- BPNI Bulletin (Number 12 14)

9 9

Programme & Projects /Advocacy

- Launch of WBW'97 theme: Breastfeeding: Nature's Way
- Project: Information & Social Mobilization
- Memorandum submitted to the President of India for support to enhance maternity leave
- Training course to increase capacity of BPNI coordinators on monitoring the IMS Act, Delhi
- HLMT courses in Assam, Punjab & Andhra Pradesh.
- Members enrolled: 753
- National Breastfeeding Committee constituted with IMA, BPNI and ACASH as members.

Publications

- WBW action folder in English
- WBW poster
- BPNI 'Souvenir'
- Book titled "The Law to Protect and Promote Breastfeeding"
- A video "Maa Ka Pyar Sishu Ahaar" (in Hindi & English)
- BPNI Bulletin (Number 8-11)
- Fact sheet 8: Breastfeeding Nature's Way
- A report: "Code Compliance: The Indian Scene"

9 9

Programme & Projects /Advocacy

- Launch of WBW '96 theme: Breastfeeding: A Community Responsibility
- National Task force BFHI: Review meeting
- Members enrolled: 579
- HLMT course at Puri, and Guwahati
- Mobilised opinion at national IAP AGM, a resolution passed at AGM to refuse infant formula industry money for IAP activities.

Publications

- WBW action folder in English
- Posters The Magic Only A Mother Can Do (Hindi & English)
- BPNI Bulletin (Number 7)

56

Programme & Projects /Advocacy

- Launch of WBW '95 theme: Breastfeeding: Empowering Women
- Breastfeeding: Empowering Women, A National Workshop
- Members enrolled: 413
- IAP National Meeting
- Developed a Home Study Course in lactation management for IMA.
- Participation at trainers course for senior health professionals in Sri Lanka.
- BPNI invited to be a member of the Task Force on IMS Act to look into its Amendments.
- WABA Forum in Thailand. BPNI awarded one of the 12 for "strong regional advocacy"

Publications

- WBW action folder in English
- BPNI So-far (1991-1995) A Report
- Assessing & Changing Practice Form (BFHI)
- BPNI Bulletin (Number 5 & 6)
- Fact sheet 6: "Breastfeeding: "A women's issue"
- Fact sheet 7: "Working mothers and Breastfeeding".

9 9

Programme & Projects /Advocacy

- Launch of WBW'94 theme: Protect Infant Health Making the Act Work
- Organised a National Workshop "IMS Act: Making it Work"
- National consultation on the IMS Act organized by NIPCCD.
- Members enrolled: 25 I
- National Task Force on BFHI established- BPNI is made a member
- Participation at Indira Gandhi National Open University (IGNOU) committee on MCH curriculum development
- Seminars in ten hospitals
- Analysis of the alleged violations of IMS Act
- Filed a complaint against Nestle in the Court of Delhi.

Publications

- WBW action folder in English
- A report on National Workshop: Infant Feeding Act (Making it Work)
- HLMT Course: Guidelines for trainers.
- Fact sheet 5: on "Not Enough Milk"
- BPNI Bulletin (Number 4)
- Paper on Infant Feeding and Law published in IMA Journal.

9 9

Programme & Projects /Advocacy

- Launch of WBW '93 theme: Mother-Friendly Workplace Initiative
- Community Seminars.
- Members enrolled: 136
- Participation in the meeting "Infant feeding & Law" by National Commission for Women
- HLMT Course (4th) at Shantiniketan, West Bengal
- IMS Act got enacted and came into force.

- Poster on "Not enough milk"
- WBW action folders in English
- Fact sheet 3: What scientific research says about breastfeeding?
- Fact sheet 4: Economics of breastfeeding
- Stickers: "I support breastfeeding"
- BPNI Bulletin (Number 2 & 3)
- Published a paper on Economics of Breastfeeding in Economic and Political Weekly.

Programme & Projects /Advocacy

- Launched the first World Breastfeeding Week (WBW) on the theme "Baby Friendly Hospital Initiative (BFHI)"
- BPNI registered as a Society under the Societies Registration Act XXI of 1860, at Delhi (S-23144, July 1992).
- Study: "Infant Feeding Practices among patients of doctors" in collaboration with Indian Medical Association (IMA).
- Training Courses: Three Human Lactation Management Training (HLMT) courses, in Karnal, Gorakhpur (North India) and Karamsad (Gujarat)
- Five zonal coordinators appointed
- Members enrolled: 55
- Participation and exhibition at annual conference of Indian Academy of Pediatrics
- "Breastfed" Baby Show at Delhi.
- National Consultation on World Breastfeeding Week theme.

Publications

- Breastfeeding and Infant feeding: Guide for the parents (in Hindi and English).
- Booklet: Exclusive breastfeeding: For the Baby You Love. (in English)
- Fact sheet I: Infant Feeding Practices
- Fact sheet 2: Baby Food Code.
- HLMT course brochure
- Launch of BPNI Bulletin (Number I)
- Published a paper in Indian Journal of Pediatrics: Infant feeding Practices Among Patients of Pediatricians and general Practitioners

9 9

Programme & Projects /Advocacy

- The birth of BPNI, 3rd December 1991.
- BPNI born as a recommendation of the workshop on "Recent Advances in Human Lactation and Breastfeeding Management at Wardha, India" organized by ACASH/FOGSI/IAP on 21 Nov. to 3 Dec. 1991.

Publications

 BPNI born as a recommendation of the workshop on "Recent Advances in Human Lactation and Breastfeeding Management at Wardha, India" organized by ACASH/FOGSI/IAP at Wardha, on 21 Nov. to 3 Dec. 1991.

DONORS AND PARTNERSHIPS

DONORS (UPTO 2020)





THE WORLD BANK



Australian Government AusAID

















NATIONAL PARTNERS











































International Netwroks



BPNI INITIATIVES

Alliance Against Conflict of Interest (AACI)

http://www.aaci-india.org/

NAPi

Nutrition Advocacy in Public Interest - India http://www.napiindia.in/



https://idecide.org.in/



https://bfhi-india.in/



www.worldbreastfeedingtrends.org



BPNI TEAM

CENTRAL COORDINATION COMMITTEE OF BPNI (2018-2021)



Dr. K.P. Kushwaha, Chief Coordinator

He is the Chief Coordinator of the BPNI Central Coordinating Committee (2018-2021). He is the pioneer in developing training programs of BPNI on IYCF. He is the chief of the training task force of BPNI.



Dr. Arun Gupta, Central Coordinator

He is a pediatrician, a Fellow of Indian Academy of Pediatrics who chose to give up his lucrative private practice and founded the 'Breastfeeding Promotion Network of India' (BPNI) in 1991. He focuses on policy analysis regarding support to breastfeeding women, child nutrition and conflicts of interest. He writes nationally and internationally. He is the creator of IBFAN's World Breastfeeding Trends Initiative (WBTi). He is the convener of the "Alliance Against Conflict of Interest" (AACI) and "Nutrition Advocacy in Public Interest" (NAPi) in India for policy level inputs.



Dr. Pawan Garg, Treasurer

He is a pediatrician and activist in Breastfeeding Protection, Promotion and Support. He works for palliative care for bedridden and cancer patients with CAN SUPPORT. He is the treasurer of BPNI since 2018.



Dr. J. Kumutha, CCC Member

She is the Member of the BPNI Central Coordinating Committee (2018-2021 Expert Advisor Child Health, NHM-Tamil Nadu, Prof & HOD, Neonatology, Saveetha Medical College



Dr. C.B. Das Gupta, CCC Member

He is a dedicated IAPian with a Professional Experience of more than 40 years. He was one of the founder persons in the formation of IAP Hadoti Branch and IAP House at Kota. He is the pioneer person in Rajasthan for Breastfeeding Promotion and Care of Thalassemics for the last 30 years. He was awarded FIAP2014. He was awarded by Govt Raj 2005 & 2009 for excellent work in Child Health.



Dr. K. Kesavulu, CCC Member

Dr. Kesavulu is the retired Civil Surgeon, Senior Pediatrician, District Hospital, Hindupur, Andhra Pradesh. He is the CCC member of BPNI, also the founder member of BPNI. He is the national trainer for IYCF counseling and organized several IYCF counseling training courses



Dr. Ashok Kumar Datta, CCC Member

He served in the IAF for 7 years as Medical Officer and Sr Medical Officer (S.M.O.)Served in S.B.I. as S.M.O. for 27 years. Associated with BPNI since 1992 Personal family physician to late Mrs. Sushma Swaraj since 1983.



Dr. Omesh Khurana, CCC Member

He is HOD Pediatrics CCM Medical College Durg, Chhattisgarh, Winner of Bharat Ratna Atal Bihari Vajpayee Excellence award / Prof JN Pohowalla Gold medal; BPNI awards for WBW activities; UNICEF trainer on Kangaroo mother care, NHM trainer for MAA. He is also a CCC member of BPNI and national trainer for IYCF counseling courses

BPNI Staff



Nupur Bidla, National Coordinator

Nupur Bidla holds a Master's Degree in Social Work with specialization in Health and Development from Tata Institute of Social Sciences, Mumbai. She is a PhD Scholar at Department for Social Work, Jamia Millia Islamia, Delhi and is doing her thesis on the practice of breastfeeding in public spaces . She has more than a decade of experience in the field of policy, media advocacy, health, and development, training and development communication. She is also a Guest Faculty at the Mass Communication and Research Centre(MCRC), Jamia Millia Islamia, Central University, Delhi. Her work profile involves handling policy and media advocacy campaigns, networking, fundraising, publications, IMS Act monitoring and local & global work on IYCF. She is working in BPNI since 2011.



Yashika, Programme Officer

Yashika is working as the Program Officer. She holds a Master's degree in Foods and Nutrition and Diploma in dietetics and Public Health nutrition from Lady Irwin College, New Delhi. She is a public health professional and over last three years she has been supporting various projects related to Fortification, Community Mobilization, Program Implementation, Nutrition and research (Qualitative and Quantitative). She is working in BPNI since 2019.



Veena Rawat, Programme Officer

Veena Rawat works as the Program Officer. She is been with BPNI since 2010 and manages the office and secretarial work, international and national postage, BPNI life members and links' database, websites, social media, reception, official email accounts, filing & maintenance of records.



Amit Dahiya, Senior Program Officer

Amit is an expert in desktop publishing, logistic & operation management with more than 23 years of experience. His work involves designing & printing publications and handling logistic management for IYCF training, national workshops & conferences and administrative, accounts, budget planning.



Dr. Rita Gupta, Programme Coordinator iDECIDE (Volunteer)

She is a MBBS doctor, General Physician, Founder member and National Trainer of BPNI. At present, she works as the Program Coordinator for iDECIDE project.



Piyush Yadav (Intern)

Piyush Yadav Piyush is an intern with BPNI. He is a Mechanical Engineer recently graduated from Delhi Technological University.





Vinay Kumar



Vijay Pal



Suresh Kumar

CREDENTIALS

BPNI's Society Registration Certificate

| CERTIFICATE OF I | REGISTRATION |
|---|--|
| SOCIETIES REGISTRATI | ON ACT XXI OF 1860 |
| No. S - 23144 of 1992. | |
| I hereby certify that Breast. Network y India" | feeding bromotion |
| has been registered under the SOCIETIES | REGISTRATION ACT OF 1860. |
| GIVEN UNDER MY HAND AT DELHI on | this 17# day of |
| July | , one thousand nine hundred and |
| ninety two. | |
| | |
| | Xannor |
| Registration Fee of Rs, 50/- received. | CO TO |
| ns, 50/- received. | Registrar of Societies Delhi Administration |
| 100 | Delhi |
| Seal Registrar of Societies | |
| Delhi | |
| | |
| | |
| | |

BPNI's IMS Act Gazette Notification

रीजस्ट्री सं. डी. एल.-33004/95

REGD. NO. D.L.-33004/95



असाधारण EXTRAORDINARY

भाग II सण्ड 3-उप-सण्ड (i) PART II—Section 3—Sub-section (i) प्राधिकार से प्रकाशित PUBLISHED BY AUTHORITY

No. 318]

सं. 318] नई दिल्ली, सोमबार, जुलाई 24, 1995/श्रावण 2, 1917 NEW DELHI, MONDAY, JULY 24, 1995/SRAVANA 2, 1917

> मानव संसाधन विकास मंत्रालय (महिला ग्रौर बाल विकास विभाग)

> > प्रधिस्चना का कार्यका करणाम् अंतर वर्गाक

नई दिल्ली, 24 जुलाई, 1995

सा.का.नि. 562(अ).--केन्द्रीय सरकार, शिशु दुग्ध ग्रन्कत्व पोषण बोबल ग्रीर िशश खाद्य (उत्पादन प्रदाय ग्रीर बितरण विनियमन) ग्रिधिनियम, 1992 (1992 का 41) की धारा 21 की उपधारा (1) के खण्ड (ग) द्वारा प्रदत्त मक्तियों का प्रयोग करते हए, उन्त धारा के ब्रधीन लिखित रूप में शिकायत करने के लिए बाल कल्याण ग्रौर विकास तथा बाल पोषाहार में लगे निम्नलिखित स्वैष्टिक संगठन को प्राधिकृत करती है, ग्रश्नात्:--

ब्रैस्टफीडिंग प्रमोशन नैटबर्क आँफ इंडिया (बी पी एन आई) बी पी-33, पीतमपुरा, दिल्ली-34

1763 GI/95 (1)

और उक्त प्रयोजन के लिए भारत सरकार के मानव संसाधन विकास मंत्रालय (महिला और बाल विकास विभाग) की अधिसूचना सं. सा. का. नि. 540(अ), तारीख 27 जून, 1994 में निम्निजिखित संशोधन करती है, अर्थातु:--

उत्तत ग्रधिसूचना में, कम सं. 3 और उससे संबंधित प्रविष्टि के पण्चात् निम्नलिखित कम संख्यांक और प्रविष्टि जोडी जाएगी, ग्रयांत :--

"4. ब्रैस्टफीडिंग प्रमोशन नैटवर्क ग्रॉफ इंडिया (बी पी एन ग्राई) बी पी-33 पीतमपुरा, दिल्ली-34।"

> [फा. सं. 12-9/94 एन टी] बी. सैन, संयुक्त सचिव

MINISTRY OF HUMAN RESOURCE DEVELOPMENT

(Department of Women and Child Development)
NOTIFICATION

New Delhi, the 24th July, 1995

G.S.R. 562(E).—In exercise of the powers conferred by clause (c) of Sub-Section (1) of Section 21 of the Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992 (41 of 1992), the Central Government hereby authorises the following voluntary organisation engaged in the field of child welfare and development and child nutrition to make a complaint in writing under the said section, namely:—

Breastfeeding Promotion Network of India (BPNI), BP-33, Pitampura, Delhi-34.

and for the said purpose makes the following amendment in the notification (the Government of India in the Ministry of Human Resource Development (Department of Women and Child Development) G.S.R. 540(E), dated the 27th June, 1994, namely:—

In the said notification, after serial No. 3 and the entry relating thereto, the following serial number and entry shall be added, namely:—

"4. Breastfeeding Promotion Network of India (BPNI), BP-33, Pitampura, Delhi-34."

[F. No. 12-9|94-NT]

B. SEN, Jt. Secy.

Printed by the Manager, Govt. of India Press, Ring Read, Maya Puri, New Delhi-110064 and Published by the Controller of Publications, Delhi-110054, 1995

BPNI's FCRA Certificate

No. 0300005492016
Government of India
Ministry of Home Affairs
Foreigners Division
(FCRA Wing)

NDCC-II Building, Jai Singh Road, New Delhi-110001

Dated: 07-08-2016

To, The Chief Functionary, Breastfeeding Promotion Network Of India BP-33 Pitampura, Delhi, Delhi, Delhi, 110034

Subject: Renewal of Registration under Foreign Contribution (Regulation) Act,

Sir/Madam

With reference to your application dated **05-02-2016** seeking renewal of registration under the Foreign Contribution (Regulation) Act, 2010, I am directed to convey the approval of competent authority for renewal of registration of your Association in terms of the provisions contained in Section 16 of Foreign Contribution (Regulation) Act, 2010 read with Rule 12 of Foreign Contribution (Regulation) Rules, 2011 as amended from time to time, as follows:-

Registration Number 231650680

Nature: Educational, Social

- The association shall receive foreign contribution only in its designated/exclusive bank account 0390101084701 in Canara Bank, Nehru Place
 - , **Delhi**, **Delhi**, **110019** as mentioned in its application for online application for grant of renewal of registration.
- 3. In terms of section 18 of the Foreign Contribution (Regulation) Act, 2010 read with Rules 17 of the Foreign Contribution (Regulation) Rules, 2011, as amended from time to time, you are advised to furnish intimations online within the prescribed time to the Central Government of the amounts of each foreign contribution received by you, the source and the manner in which the foreign contribution was utilised, as per the provisions of the Act and the Rules. An association is required to furnish the return even when the particulars are 'NIL'. The FC-4 form is required to be submitted online on this Ministry's website https://fcraonline.nic. The Bank Account mentioned in your application should be used for receiving foreign contribution and no other amount should be credited to this account. The Association should immediately intimate online, within 15 days, in Form FC-6 to this Ministry regarding any change in the name of the Association, aims and objects, its address and Bank/Bank Account.
- 4. The association cannot bring out any publication (registered under PRB Act, 1867) or act as correspondent, columnist, editor, printer or publisher of a registered newspaper or engage in the production or broadcast of audio news or audio visual news or current affairs programmes through electronic mode or any other electronic form or any other mode of mass communication at a later stage thereby attracting provisions of the Section 3(1) (g) and (h) of the FC(R) Act, 2010. In addition to this, the association is forbidden from getting involved in any activity of political nature.
- 5. You are requested to note the provisions of Section 7 of FC(R) Act, 2010 and Rule 24 of FC(R) Rules, 2011 and ensure that before any funds are passed on to any person/association in India that the recipient is (i) eligible to accept foreign contribution under the Act, i.e., recipient association is registered under the Act, or has obtained Prior Permission of the Government under Section 11 of the Act, and (ii) the person/association is not prohibited under the Act.

- Physical inspection of the activities done by the Association may be carried out at any time by this Ministry.
- 7. You are requested to familiarize yourself with the provisions of Foreign Contribution (Regulation) Act, 2010 and Foreign Contribution (Regulation) Rules, 2011, as amended from time to time, available at this Ministry's website https://fcraonline.nic.in/ to ensure strict compliance of the Act/ Rules. Failure to comply with any of the provisions of said Act/ Rules will make you liable for action under the relevant provisions of the Foreign Contribution (Regulation) Act, 2010.
- 8. This renewed certificate is valid for a period of five years with effect from 01-11-2016.
- The email containing the renewed registration certificate may be sent immediately to the Bank mentioned above.
- 10. The renewal of registration is subject to compliance of the provisions of Foreign Contribution (Regulation) Act, 2010/ Foreign Contribution (Regulation) Rules, 2011, as amended from time to time, by the association and also to the final outcome of enquiry/ case, if any, pending against the association.
- 11. This is a digitally signed certificate to be validated digitally using the signature panel using Adobe Acrobat Reader (Ver 5.0 or above). The digital intimation is authenticated by a digital signature obtained from a certifying authority under the Information Technology Act 2000.
- 12. Banks are requested to verify online the validity of the certificate using fcraonline.nic.in.

Yours faithfully

Digitally signed by IPSITA SAHA PAUL Date: 2016.08.07 01:02:45 IST Reason: Online FCRA Services Location: Ministry of Home Affairs, New Dahi

Ipsita S Paul Under Secretary Tel. 01123438245

BPNI's 80G Certificate



Office of the Commissioner of Income Tax (E), 26th Floor, Tower-E2, Pratyaksha Kar Bhawan Dr. S.P.Mukherjee Civic Centre, J.L.Nehru Marg, Delhi

NQ.CIT (E) | 2016-17/

DEL - BE27083 - 15092016 7506

Dated

15/09/2016

NAME &. ADDRESS:

BREASTFEEDING PROMOTION NETWORK OF INDIA

BP-33, PITAMPURA NEW DELHI 110034

Legal Status

Society

PAN NO

GIR NO

B-640

Sub:-ORDER UNDER SECTION 80G (5)(vi) OF THE INCOME TAX ACT, 1961

On verification of the facts stated before me/hearing before me, I have come to the conclusion that this organization satisfies the conditions u/s 80G of the Income Tax act, 1961. The institution/Fund is granted approval subject to the following conditions:-

- The Donee institution shall forfeit this benefit provided under the law, if any of the conditions stated herein are not complied with/abused/whittled down or in any way violated.
- This exemption is valid for the period from A.Y.2017-18 onwards till it is rescinded and subject to the following conditions

Conditions:

- You shall maintain your accounts regularly and also get them audited to comply with sec. 80G (5)(iv) read with section 12A(1)(b) and 12A(1)(c) and submit the same before the accessing officer by the due date as per section 139(1) of the Income tax Act 1961.
- Every receipt issued to donor shall bear the number and date of this order and shall state the date up to which this certificate is valid. A.Y.2017-18 onwards till it is rescinded.
- (iii) No change in the deed of the trust/association shall be affected without the due procedure of Law and its intimation shall be given immediately to this office.
- The approval to the institution/fund shall apply to the donations received only if the fund/institution, established in India for charitable purpose, fulfills the conditions as laid down in section 80G5(i), (ii), (iii), (iv), (v) & (5B) of the Income Tax Act 1961.
- This office and the assessing officer shall also be informed about the managing trustees or Manager of your Trust/Society/Non Profit Company and the places where the activities of the Trust/Institution are undertaken/likely to be undertaken to satisfy the claimed objects.
- You shall file the return of income of your fund/institution as per section 139(1)/(4A)/(4C) of the Income Tax Act,
- No cess or fee or any other consideration shall be received in violation of section 2(15) of the Income Tax Act, 1961.

Copy to:

1 The applicant as above

2. The Assessing Officer

(RAMESHWAR SINGH)

Commissioner of Income Tax (Exemptions)

ACIT

Commissioner of Income Tax (E)
Room No. 2602, 26th Floor,
Block-E-2, Fratyaksh Kar Bhaway
Civic Centre, J.L. Nehru Margy latin
New Delhi-110002

For Commissioner of Income Tax (Exemptions) DELHI

Assit. Commissioner of Income Tax CIT (Exemption) (Hgrs.) New Delhi-110002

AUDITED ACCOUNT STATEMENTS

Financial Year 2019-20

| Breastfeeding Promotion Network of India BP-33, Pitam Pura, Delhi - 110034 Balance Sheet as on 31 March 2020 | | | |
|--|-------------------------------|------------------|--|
| | | | |
| Membership Fees | 19,94,718 | | |
| Corpus Account | 1,59,498 | | |
| Corpus against donation receipt(80G) | 15,14,050 | 36,68,266 | |
| Surplus/Deficit | | | |
| Deficit Opening Balance | (14,68,166) | | |
| Less Net Loss for the current Year | 9,77,165 | (4,91,001) | |
| Fixed Assets Fund | 12,96,665 | 12,96,665 | |
| C | | | |
| Current Liabilities | 2722 | | |
| Sundry Creditors (As per annexure "B") Grapt in Advance (As per annexure "B") | 24,848 | | |
| Grant in Advance (As per annexure "B") TDS Payable | 45,57,889 | 46 70 000 | |
| | 88,255_ | 46,70,992 | |
| | | 91,44,922 | |
| Application of Funds (Assets) Fixed Assets | - | 73,722 | |
| (As per annexure "A") | | 3,64,400 | |
| Current Assets | | | |
| Cash & Bank Balances | | | |
| Cash in Hand | 7,443 | | |
| Canara Bank (Corpus) a/c 84677 | 4,39,672 | | |
| Canara Bank (FCRA) a/c 84701 | 14,87,227 | | |
| Canara Bank a/c 17392 | 43,36,184 | | |
| Canara Bank a/c 26370 | 1,52,370 | | |
| ICICI Bank a/c 015401012949 | 3,22,136 | | |
| Yes Bank-0654946000000263 | 1,55,632 | 69,00,663 | |
| Deposits FDR with Banks | | | |
| DR WIII Daliks | | 14,15,425 | |
| TDS Receivable | | 1,24,994 | |
| Sundary Debtors (As per annexure "B") | 31,920 | 31,920 | |
| Advances | | | |
| Accounts Receivable (As per annexure "B") | 1,18,731 | | |
| Advances | 9,306 | | |
| Prepaid Expenses | 74,578 | | |
| GST credit input Advance to Creditors (As per annexure "B") | 8,980 | 2.00.55 | |
| Seminora (rio per uniterative to) | 95,924 | 3,07,520 | |
| | | 91,44,922 | |
| As per our Report of Even Date Attached | | | |
| or BHARGAVA ASSOCIATES | | | |
| Chartered Accountants | For Breastfeeding Promotion N | letwork of India | |
| Firm Registration No. 000582N | 1 | | |
| CA Yashwant Kumar Gupta) | - Karaga Bu | mom | |
| Partner Pared Account | Dr Pawan Garg Dr. Art | ın Gupta ~ | |
| Partner Membership No. 505467 JDIN | | Coordinator | |
| Date: 07/01/2024 | | | |
| ate; | BREASTERED | ING PROMOTION | |
| lace: Delhi | | K OF INDIA | |

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

Income & Expenditure Account for the year ended 1st April 2019 to 31 March 2020

| Income | Amount |
|--|-------------|
| Grant Received | |
| HCL Uday Project - GB Nagar, Lucknow and Chennai | 49,97,243 |
| UNICEF-BPNI PCA 2019-20 | 69,16,237 |
| World Bank- Addressing Critical Failures of IYCN in South Asia | 36,04,831 |
| World Health Organization project (SHA for MAA Programme) | 9,76,762 |
| IYCF Training Course (Delhi) 2019-20 | 6,77,966 |
| IYCF Training Course- (Pondicherry) 2019-20 | 10,03,050 |
| Publications Receipts | 62,575 |
| Donation | 79,166 |
| Bank interest | 1,73,538 |
| Bank Interest on FDR | 84,959 |
| Misc. Income | 1 |
| | 1,85,76,328 |
| Excess Expenses over Income | (9,77,165) |
| Total | 1,75,99,163 |

As per our Report of Even Date Attached For BHARGAVA ASSOCIATES

Chartered Accountants

Firm Registration No. 000582N AS

(CA Yashwant Kumar Gupta) Partner

Partner Membership No. 505467 UDIN

Date: 07/01/2021 Place: Delhi

Dr. Pawan Garg

Treasurer

Dr. Arun Gupta Central Coordinator

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

For Breastfeeding Promotion Network of India

Breastfeeding Promotion Network of India BP-33, Pitam Pura, Delhi - 110034 Income & Expenditure Account for the year ended 1st April 2019 to 31 March 2020

| Expenditiure | Amount |
|--|-------------|
| HCL Uday Project - GB Nagar, Lucknow and Chennai | 49,97,243 |
| UNICEF-BPNI PCA 2019-20 | 69,16,237 |
| World Bank- Addressing Critical Failures of IYCN in South Asia | 25,97,284 |
| World Health Organization-2018 project (SHA for MAA Programme) | 9,76,762 |
| IYCF Training Course (Delhi) 2019-20 | 6,01,002 |
| IYCF Training Course- (Pondicherry) 2019-20 | 8,70,986 |
| Printing and Publications | 1,68,467 |
| Bank Charges | 4,485 |
| BPNI Administration Costs | 1,82,500 |
| Cleaning and Pest Control | 5,926 |
| Audit Fees | 15,000 |
| Depreciation | 68,190 |
| Office repair and Maintenance | 14,036 |
| Postage & Courier | 9,363 |
| Printing & Stationery | 9,814 |
| Staff welfare expenses | 24,264 |
| Electricity | 14,123 |
| Travelling & Conveyance | 8,673 |
| Website Maintenance and Server | 63,047 |
| Vehicle Runing and Maintenance | 18,259 |
| Round Off | 1 |
| Interest on GST | 1,100 |
| Income tax for earlier year | 17,998 |
| Subscription | 12,610 |
| Telephone & Communication | 615 |
| Water & Sewerage | 1,178 |
| Total | 1,75,99,163 |

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

Firm Registration No. 000582N

(CA Yashwant Kumar Gupta

Partner

Partner Membership No. 505467 UDIN

Date: \$7/61/2021 Place: Delhi

For Breastfeeding Promotion Network of India

Dr. Pawan Garg Treasurer

Dr. Arun Gupta Central Coordinator

BREASTFEEDING PROMOTION NETWORK OF INDIA BP-33 PITAMPURA, DELHI-110034

FIXED ASSETS AS ON 31.03.2020

| FIXED ASSETS AS ON 31.03.2020 | | | | | | | | | | |
|-------------------------------|----------------------|---------------------------------|---------------------|--------------------|--------------------|----------|---------------------------------|--|--|--|
| Particulars | Depreciation Rate | Opening WDW as on 01.04.2019 | Before 30.9.2019 | After 1.10.2019 | Sold/ Discarded | TOTAL | Depreciation as on 31.3,2020 | Closing Balance as on 31.03,2020 | | |
| | | | | | | | | | | |
| Computer | 40% | 6,351 | | | | 6,351 | 2,540 | 3,810 | | |
| Cooler | 15% | 5,399 | | | | 5,399 | 810 | 4,589 | | |
| Cycle | 15% | 1,496 | | | | 1,496 | 224 | 1,272 | | |
| Furniture | 10% | 67,451 | | | | 67,451 | 6,745 | 60,706 | | |
| Office Equipment | 15% | 23,554 | | | | 23,554 | 3,533 | 20,021 | | |
| Electrical Fans | 15% | 960 | | | | 960 | 144 | 816 | | |
| Invertor | 15% | 42,562 | | | | 42,562 | 6,384 | 36,178 | | |
| Room Heater | 15% | 1,041 | | | | 1,041 | 156 | 885 | | |
| Water Cooler | 15% | 749 | | | | 749 | 112 | 637 | | |
| Air Conditioner | 15% | 13,171 | | | | 13,171 | 1,976 | 11,195 | | |
| Honda Activa Scoty | 15% | 28,423 | | | | 28,423 | 4,263 | 24,159 | | |
| Printer | 40% | 1,037 | | | | 1,037 | 415 | 622 | | |
| Maruti Eco | 15% | 2,11,730 | | | | 2,11,730 | 31,760 | 1,79,971 | | |
| 2020-0012 Computer | 40% | 12,266 | | | | 12,266 | 4,906 | 7,360 | | |
| 2020-0012 Printer | 40% | 7,043 | | | | 7,043 | 2,817 | 4,226 | | |
| Kent R.O(Water Purifier) | 15% | 9,356 | | | | 9,356 | 1,403 | 7,953 | | |
| | | 4,32,590 | 0 | 0 | 0 | 4,32,590 | 68,190 | 3,64,400 | | |

For Breastfeeding Promotion Network of India

CA CA COUNTING

Dr Pawan Garg Treasurer

Dr. Arun Gupta Central Coordinator

Financial Year 2018-19

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

Balance Sheet as on 31 March 2019

| Source of Funds (Liabilities) | | Amount Rs |
|--------------------------------------|---------------|---------------|
| Membership Fees | 19 78 718 00 | 32.40.766.1 |
| CORPUS ACCOUNT | 1.59.498.15 | 32,40,700.1 |
| Corpus against donation receipt(80G) | 11.02.550.00 | |
| Fixed Assets Fund | 12,96,664.53 | 12,96,664.5 |
| Current Liabilities | | |
| Sundry Creditors | 1,17,280.00 | |
| Expenses Payable | 79,114.97 | |
| Grant in advance | 31.83,617.24 | |
| TDS payable | 49,328.00 | 34,29,340.2 |
| Surplus/Deficit | | 34,23,340.2 |
| Deficit Opening Balance | -3,39,127.07 | |
| Less Net Loss for the current Year | -11,29,039.11 | -14,68,166.18 |
| | | 64,98,604.71 |
| Application of Funds (Assets) | | |
| Fixed Assets | | |
| As per annexure "A") | | 4,32,590.24 |
| Current Assets | | |
| Cash & Bank Balances | | |
| Cash in Hand | 17,295.48 | 52,83,927.07 |
| Canara Bank (Corpus) a/c 84677 | 83,506.00 | |
| Canara Bank (FCRA) a/c 84701 | 29.47,989.36 | |
| Canara Bank a/c 17392 | 5,83,040.19 | |
| Canara Bank a/c 26370 | 7,60,864.04 | |
| CICI Bank a/c 015401012949 | 2,03,278.72 | |
| es Bank-0654946000000263 | 6.87.953.28 | |
| Deposits | | |
| Short Term Deposit | 5,34,714.39 | 5,34,714.39 |
| TDS Receivable | 1,38,744.00 | 1,38,744.00 |
| Advances | | |
| accounts Receivable | 46,153.57 | |
| dvances | 33,014.44 | |
| Prepaid Expenses | 29,461.00 | 1,08,629.01 |
| | | |

64,98,604.71

s per our Report of Even Date Attached

or BHARGAVA ASSOCIATES

hartered Accountants irm Registration No. 0005820

CA Sameer Ahmed),

artner

artner Membership No. 542605

DIN AAT 19542605 AAAABH\$876

ered Accou

ate: 21/10/2019 lace: 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 - 110034

Income & Expenditure Account for the year ended 1st April-2018 to 31 March 2019

| Income | Amount |
|---|----------------|
| Grant Received | |
| IBFAN Asia Project | 2,13,95,949.38 |
| UNICEF-BPNI PCA 2019-20 | 45,658.00 |
| World Bank- Addressing Critical Failures of IYCN in South Asia | 37,46,011,38 |
| World Health Organization-2018 project (SHA for MAA Programme) | 2.21.626.37 |
| IYCF Middle Level Trainers training Course (NHM, Chhattisgarh) 2019 | 2,70,689.00 |
| IYCF National Trainers Training (NHM & UNICEF, Bihar) 2018 | 2,06,085.00 |
| IYCF Training Course (Delhi) 2018 | 3.76,272.00 |
| IYCF Training Course- (Pondycherry) 2018 | 3,76,272.00 |
| Publications Receipts | 2,35,865.00 |
| Donation | 4,19,638.61 |
| Bank interest | 1,33,819.00 |
| Bank Interest on FDR | 1,71,037.06 |
| Misc. Income | 24.88 |
| | 2,75,98,947.68 |
| Excess Expenses over Income | 11,29,039.11 |
| Total | 2,87,27,986.79 |

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

VA ASSO

Firm Registration No. 000582N

(CA Sameer Ahmed) Partner

Partner Membership No. 542605 UDIN 19542605 AARA BH 1876

Date: 21/10/2019 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 - 110034 Income & Expenditure Account for the year ended 1st April 2018 to 31 March 2019

| Expenditiure | Amount |
|---|----------------|
| IBFAN Asia Project | 2.13.97.362 40 |
| UNICEF-BPNI PCA 2019-20 | 45,658.00 |
| World Bank- Addressing Critical Failures of IYCN in South Asia | 37,46,011.38 |
| World Health Organization-2018 project (SHA for MAA Programme) | 2,21,626.37 |
| IYCF Middle Level Trainers training Course (NHM, Chhattisgarh) 2019 | 2,70,689 20 |
| IYCF National Trainers Training (NHM & UNICEF, Bihar) 2018 | 2,06,085.00 |
| IYCF Training Course (Delhi) 2018 | 3,14,612.06 |
| IYCF Training Course- (Pondycherry) 2018 | 2,73,348.00 |
| Printing and Publications | 1.39.691.00 |
| BPNI Core Activity Expenses | 1.99.832.11 |
| Campaign for Awareness | 15.20.194.29 |
| Bank Charges | 3.835.03 |
| BPNI Administration Costs | 1.41.064.00 |
| Cleaning and Pest Control | 563.00 |
| Depreciation | 85.017.37 |
| Office repair and Maintenance | 39.010.07 |
| Postage & Courier | 8,659.00 |
| Printing & Stationery | 730.22 |
| Staff welfare expenses | 1,975.00 |
| Electricity | 3,368 00 |
| Travelling & Conveyance | 9.535.00 |
| Website Maintenance and Server | 55,199.00 |
| Writen Off | 24.527.08 |
| Vehicle Runing and Maintenance | 9.229.00 |
| General Expenses | 3.000.00 |
| Sundary Expenses | 5.00 |
| Round Off | 12.69 |
| Interest on TDS | 1.758.00 |
| Interest on GST | 140.00 |
| Subscription | 4.146.00 |
| Telephone & Communication | 43.52 |
| Water & Sewerage | 1,060.00 |
| Total | 2,87,27,986.79 |

As per our Report of Even Date Attached For BHARGAVA ASSOCIATES

Chartered Accountants

Firm Registration No. 000582N

(CA Sameer Ahmed)

Partner

Partner Membership No. 542605

UDIN 19542605 AMAA BH 1876

Date: 21/10/2019 Place: Delhi

For Breastfeeding Promotion Network of India

Dr. Pawan Garg Treasurer

Dr. Arun Gupta **Central Coordinator**

BREASTFEEDING PROMOTION NETWORK OF INDIA BP-33 PITAMPURA, DELHI-110034

FIXED ASSETS AS ON 31 03 2019

| Particulars | Depreciation Rate | Opening WDW as on 01.04.2018 | Before 30.9.2018 | After 1.10.2018 | Sold/ Discarded | TOTAL | Depreciation as on 31.3.19 | Closing Balance as on 31.03.2019 |
|--------------------------|----------------------|---------------------------------|---------------------|--------------------|--------------------|--------------------------|----------------------------|---|
| Computer | 40% | 10,584.69 | | | | 10.584.69 | 4,233.87 | 6,350.81 |
| Cooler | 15% | 6,351.39 | | | | 6,351.39 | 952.71 | 5,398.68 |
| Cycle | 15% | 1,760.35 | | | | 1,760.35 | 264.05 | 1,496.30 |
| Furniture | 10% | 74.945.57 | | | | 74,945.57 | 7,494.56 | 67,451.01 |
| Office Equipment | 15% | 27,711.02 | | | | 27,711.02 | 4,156.65 | 23,554.37 |
| Electrical Fans | 15% | 1,129.68 | | | | 1,129.68 | 169.45 | 960.22 |
| Invertor | 15% | 50,072.98 | | | | 50,072.98 | 7,510.95 | 42,562.03 |
| Room Heater | 15% | 1,225.08 | | | | 1,225.08 | 183.76 | 1.041.32 |
| Water Cooler | 15% | 881.54 | | | | 881.54 | 132.23 | 749.30 |
| Air Conditioner | 15% | 15,495.23 | | | | 15,495.23 | 2,324.29 | 13,170.95 |
| Honda Activa Scoty | 15% | 33,438.61 | | | | 33,438.61 | 5,015.79 | 28,422 82 |
| Printer | 40% | 1,728.00 | | | | 1,728.00 | 691.20 | 1,036.80 |
| Maruti Eco | 15% | 2,49,094.63 | | | | 2,49.094.63 | 37,364 19 | 2,11,730.43 |
| 2020-0012 Computer | 40% | 20.443.20 | | | | 20,443.20 | 8,177.28 | 12,265.92 |
| 2020-0012 Printer | 40% | 11,738.16 | | | | 11,738,16 | 4,695.26 | 7,042.90 |
| Kent R.O(Water Purifier) | 15% | 11.007.50 5,17,607.62 | 0.00 | 0.00 | 0.00 | 11,007.50 5,17,607.62 | 1,651.13 85,017.38 | 9,356.38 4,32,590.25 |

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As per Our Report of even date attached
For BHARGAVA ASSOCIATES
Chartered Accountants
Firm Registration No. 000582N

(CA Sameer Ahmed)

Partner Membership No. 542605
UDIN 19502607 PARA BH 1876

Date: 21/10/2019 Place: Delhi

For Breastfeeding Promotion Network of India

Dr Pawan Garg

Treasurer

Dr. Arun Gupta Central Coordinator

Financial Year 2017-18

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

Balance Sheet as on 31 March 2018

| Source of Funds (Liabilities) | | Amount Rs |
|---------------------------------------|--------------------------------|---------------|
| Membership Fees | 19,64,718.00 | 29,00,216.1 |
| CORPUS ACCOUNT | 1,59,498.15 | |
| Corpus against donation receipt(80G) | 7,76,000.00 | |
| Fixed Assets Fund | 12,96,664.53 | 12,96,664.5 |
| Current Liabilities | | |
| Sundry Creditors | 66,034.00 | |
| Expenses Payable | 8,16,158.00 | |
| Grant in advance | 2,21,57,930.33 | |
| TDS payable | 56,712.40 | 2,30,96,834.7 |
| Surplus/Deficit | | |
| Surplus Balance from 2015-16 | 17,543.52 | |
| Less Net Loss for the current Year | <u>-3,56,670.59</u> | -3,39,127.0 |
| | | 2,69,54,588.3 |
| Application of Funds (Assets) | | |
| Fixed Assets | | |
| (As per annexure "A") | | 5,17,607.6 |
| Current Assets | | |
| Cash & Bank Balances | | |
| Cash in Hand | 2,067.48 | 27,02,381.46 |
| Canara Bank (Corpus) a/c 84677 | 4,18,918.00 | |
| Canara Bank (FCRA) a/c 84701 | 15,49,213.57 | |
| Canara Bank a/c 17392 | 1,86,509.01 | |
| Canara Bank a/c 26370 | 2,11,172.68 | |
| ICICI Bank a/c 015401012949 | 3,34,500.72 | |
| Deposits | | |
| Short Term Deposit | 1,06,21,469.51 | 1,06,21,469.5 |
| TDS Receivable | 1,13,521.00 | 1,13,521.00 |
| TDO RECEIVABLE | | |
| S. AS | | |
| Advances | 12,13,540.12 | |
| Advances Accounts Receivable Advances | 12,13,540.12 1,17,69,895.64 | |

As per our Report of Even Date Attached For BHARGAVA ASSOCIATES Chartered Accountants Firm Registration No. 000582N

(CA Vijay Aggarwal),

Partner

Partner Membership No. 093387

Date: 29 - 9 - 1 \$
Place: Delhi

Dr Pawan Garg

an Garg Dr. Arun Gupta

For Breastfeeding Promotion Network of India

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

2,69,54,588.34

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

Income & Expenditure Account for the year ended 1st April-2017 to 31 March 2018

| Income | Amount |
|---|----------------|
| Grant Received | |
| IBFAN Asia Project | 1,91,59,839.71 |
| IYCF Training Course (Anantapur, Andhra Pradesh) 2017 | 1,34,555.00 |
| Global Giving Foundation (Project Donation) | 3,35,805.71 |
| IYCF National Trainers Training (NHM, Haryana) 2017 | 1,62,664.00 |
| IYCF Training Course (Hyderabad, Telangana) 2017 | 3,60,000.00 |
| IYCF Training Course-I (Pondycherry) 2017 | 3,74,988.00 |
| IYCF Training Course-II (Pondycherry 2017) | 3,51,000.00 |
| IYCF National Trainers Training (NHM, Shimla, HP) 2018 | 1,59,729.12 |
| IYCF National Trainers Training (NHM, Tripura) 2017 | 1,83,816.00 |
| IYCF Training Course (Delhi) 2017 | 3,60,000.00 |
| IYCF Middle Level Training (NHM, West Bengal) 2017 | 1,82,679.00 |
| IYCF Middle Level Training (NHM, Uttarakhand) 2018 | 1,37,945.00 |
| IYCF Middle Level Training & Front Line Worker (UPTSU) 2017-18 | 4.10,974.00 |
| World Bank- Addressing Critical Failures of IYCN in South Asia (2018) | 1,56,497.48 |
| Publications Receipts | 3,30,755.00 |
| Donation | 29,720.00 |
| Bank interest | 76,670.95 |
| Bank Interest on FDR | 7,884.50 |
| Interest Received on refund of Income Tax | 986.00 |
| Misc. Income | 15,844.00 |
| | 2,29,32,353.47 |
| Excess Expenses over Income | 3,56,670.59 |
| Total | 2,32,89,024.06 |
| (P (T (T (T (T (T (T (T (T (T | |

As per our Report of Even Date Attached For BHARGAVA ASSOCIATES Chartered Accountants Firm Registration No. 000582N

Dr. Pawan Garg Treasurer

Dr. Arun Gupta

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

For Breastfeeding Promotion Network of India

Date: 24-9-18 Place: Delhi

(CA Vijay Aggarwal), Partner

Partner Membership No. 093387

Breastfeeding Promotion Network of India BP-33, Pitam Pura, Delhi - 110034 Income & Expenditure Account for the year ended 1st April 2017 to 31 March 2018

| Expenditiure | Amount |
|---|----------------|
| IBFAN Asia Project | 1,91,59,839.71 |
| IYCF Training Course (Anantapur, Andhra Pradesh) 2017 | 1,34,555.00 |
| Global Giving Foundation (Project Donation) | 3,35,805.71 |
| IYCF National Trainers Training (NHM, Haryana) 2017 | 1,62,664.50 |
| IYCF Training Course (Hyderabad, Telangana) 2017 | 2,94,380.00 |
| IYCF Training Course-I (Pondycherry) 2017 | 3,33,853.00 |
| IYCF Training Course-II (Pondycherry 2017) | 3,48,608.00 |
| IYCF National Trainers Training (NHM, Shimla, HP) 2018 | 1,59,729.12 |
| IYCF National Trainers Training (NHM, Tripura) 2017 | 1,83,816.00 |
| IYCF Training Course (Delhi) 2017 | 3.43.088.00 |
| IYCF Middle Level Training (NHM, West Bengal) 2017 | 1.82.679.00 |
| IYCF Middle Level Training (NHM, Uttarakhand) 2018 | 1,37,945.40 |
| IYCF Middle Level Training & Front Line Worker (UPTSU) 2017-18 | 4,10,974.00 |
| World Bank- Addressing Critical Failures of IYCN in South Asia (2018) | 1,56,497.48 |
| | |
| Printing and Publications | 3,35,418.90 |
| BPNI Core Activity Expenses | 1,617.00 |
| Audit fee | 25,000.00 |
| Bank Charges | 1,730.00 |
| BPNI Administration Costs | 4,12,968.00 |
| Cleaning and Pest Control | 5,376.00 |
| Depreciation | 1,08,254.93 |
| Office repair and Maintenance | 23,419.00 |
| Postage & Courier | 12,273.00 |
| Printing & Stationery | 3,725.00 |
| Staff welfare expenses | 29,749.00 |
| Electricity | 32,065.00 |
| Travelling & Conveyance | 8,926.00 |
| Software Renewal/Maintenance | 2,376.00 |
| Writen Off | (88,126.86) |
| Vehicle Runing and Maintenance | 22,154.00 |
| General Expenses | 2,096.00 |
| Round Off | (1.14) |
| Interest on TDS | 663.00 |
| Subscription | 2,147.00 |
| Telephone & Communication | 1,683.31 |
| Water & Sewerage | 1,076.00 |
| Total | 2,32,89,024.06 |

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

(CA Vijay Aggarwal),

Partner
Partner Membership No. 093387

Firm Registration No. 000582N

Date: 24-9-1& Place: Delhi

For Breastfeeding Promotion Network of India

Dr. Pawan Garg Dr. Arun Gupta
Treasurer Central Coordinator
BREASTFEEDING PROMOTION
NETWORK OF INDIA
BP-33, Pitam Pura , Delhi-110 034

BREASTFEEDING PROMOTION NETWORK OF INDIA BP-33 PITAMPURA, DELHI-110034

FIXED ASSETS AS ON 31.03.2018

| | | | | | FIX | ED ASSETS A | S ON 31.03.2018 | | | | | | |
|--------------------------|-----------------------|---------------------------------------|---------------------|-----------------|--------------------|--------------------------|-------------------------------|-----------|------------------------|---------------------|------|----------------|---|
| Particulars | Depreciati on Rate | Opening WDW as on 01.04.2017 | Before 30.9.2017 | After 1.10.2017 | Sold/ Discarded | TOTAL | Depreciation as on 31.3.18 | n as on | Depreciatio n as on | Net Depreciation | | Sale of assets | Closing Balance as on 31.03.2018 |
| Computer | 40% | 21,116.14 | | | 3,475.00 | 17,641.14 | 7,056.46 | 3,611.97 | | 3,444.49 | | | 10,584.69 |
| Cooler | 15% | 7,472.22 | | | | 7,472.22 | 1,120.83 | | | 1,120.83 | | | 6,351.39 |
| Cycle | 15% | 2,071.00 | | | | 2,071.00 | 310.65 | | | 310.65 | | | 1,760.35 |
| Furniture | 10% | 93,772.85 | | | 10,500.00 | 83,272.85 | 8,327.29 | 273.00 | | 8,054.29 | | | 74,945.57 |
| Ofice Equipment | 15% | 32,601.20 | | | | 32,601.20 | 4,890.18 | 0.01 | | 4,890.17 | | | 27,711.02 |
| Electrical Fans | 15% | 1,794.03 | | | 465.00 | 1,329.03 | 199 35 | 35.43 | | 163.92 | | | 1,129.68 |
| Invertor | 15% | 1,18,909.39 | | | 60,000.00 | 58,909.39 | 8,836.41 | | -8,999.99 | 17,836.40 | | | 50,072.98 |
| Room Heater | 15% | 1,441.27 | | | | 1,441.27 | 216.19 | | | 216.19 | | | 1,225.08 |
| Water Cooler | 15% | 1,037.10 | | | | 1,037.10 | 155.57 | | | 155.57 | | | 881.54 |
| Air Conditioner | 15% | 23,029.69 | | | 4,800.00 | 18,229.69 | 2,734.45 | | -720.00 | 3,454.45 | | | 15,495.23 |
| Honda Activa Scoty | 15% | 39,339.55 | | | | 39,339 55 | 5,900.93 | 2,658.08 | | 3,242.85 | | | 33,438.61 |
| Printer | 40% | 2,880.00 | | | | 2,880.00 | 1,152.00 | 1,296.00 | | -144.00 | | | 1,728.00 |
| Maruti Eco | 15% | 2,93,052.50 | | | | 2,93,05250 | 43,957.88 | 14,652.62 | | 29,305.26 | | | 2,49,094.63 |
| 2020-0012 Computer | 40% | 34,072.00 | | | | 34,072.00 | 13,628.80 | 10,399.20 | | 3,229.60 | | | 20,443.20 |
| 2020-0012 Printer | 40% | 19,563.60 | | | | 19,563.60 | 7,825.44 | 10,726.80 | | -2,901.35 | | | 11,738.16 |
| Kent R.O(Water Purifier) | 15% | 12,950.00 7,05,102.55 | 0.00 | 0.00 | 79,240.00 | 12.950.00 6.25.862.55 | 1,942.50 | | | 892.50 73,271.81 | 0.00 | 0.00 | 11,007.50 5,17,607.62 |

As per Our Report of even date attached For SHARGAVA ASSOCIATES Chartered Accountants Firm Registration No. 000582N

(CA Vijay Aggarwal), Partner Partner Membership No. 093387

Date: 24-9-18 Place: Delhi

For Breastfeeding Promotion Network of India

Dr Pawan Garg Treasurer

P-33, Pitam Pura , Delhi-110 034



Breastfeeding Promotion Network of India (BPNI)

BP-33, Pitampura, Delhi-110034 Tel: +91-11-42683059

Email: bpni@bpni.org, Website: www.bpni.org