



The Guide Book

# The State Breastfeeding Trends Initiative (SBTi)

*Galvanising action at State level and making a national data repository on policy and programmes related to breastfeeding & infant and young child feeding.*

September 2019: Version 1



**SBTi Secretariat**

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## **Introduction**

The guidebook provides information about the State Breastfeeding Trends Initiative (SBTi). Various components with a background, purpose and details of the process to be followed at State level are also included. The BPNI has developed the SBTi fulfilling its objectives of its strategic plan 2017-2022.

## **About BPNI and IBFAN**

The Breastfeeding Promotion Network of India (BPNI) is a 28 years old registered, independent, non-profit, national organisation that works towards protecting, promoting and supporting breastfeeding and appropriate complementary feeding of infants and young children. BPNI works through policy analysis, advocacy, social mobilization, information sharing, education, research, training and monitoring the company compliance with the IMS Act. BPNI is the Regional Coordinating Office for International Baby Food Action Network (IBFAN), South Asia. BPNI also serves as the global secretariat for World Breastfeeding Trends Initiative (WBTi) programme, that analyses policy & programmes and galvanises action at country level. The BPNI now launches the State Breastfeeding Trends Initiative (SBTi) in India to develop a national repository through sub-national actions. The BPNI is part of International Baby Food Action Network (IBFAN) that was founded in 1979. *IBFAN is the 1998 Right Livelihood Award Laureate.*

BPNI acts as a regional coordinating office of International Baby Food Action Network (IBFAN) South Asia. IBFAN aims to promote the health and well being of infants and young children and their mothers through protection, promotion and support of optimal breastfeeding & infant and young child feeding practices. IBFAN works towards universal and full implementation of '*International Code of Marketing of Breastmilk Substitutes*', subsequent relevant World Health Assembly (WHA) resolutions and the '*Global Strategy for Infant and Young Child Feeding*'

## **The History and Making of SBTi**

Launched in 2004, the World Breastfeeding Trends Initiative (WBTi) assists countries to assess the status of and benchmark the progress in implementation of the *Global Strategy for Infant and Young Child Feeding* in a standard way. It is based on the WHO's tool for national assessment of policy and programmes on infant and young child feeding. The WBTi assists countries to measure strengths and weaknesses on the ten parameters of policy and programmes that protect, promote and support optimal infant and young child feeding (IYCF) practices. The WBTi also maintains a Global Data Repository of these policies and programmes. The unique web-tool helps in colour-coding and scoring each indicator. The WBTi process stimulates local action, bringing people together and encourages collaboration and networking amongst key organisations such as government departments, UN, health professionals, academics, civil society and other players (without conflicts of Interest). It assists in consensus building. Through use of the WBTi tool, countries work towards producing a "report card" and "report" that can be used to mobilise action at local level by defining the gaps and recommendations for change. The WBTi encourages re-assessments every 3-5 years. The Global Secretariat at BPNI manages the WBTi and its repository.

*Using the experience, lessons and methodology of WBTi, BPNI has launched the SBTi programme in India to create repository of sub-national policy and programmes and galvanise action to bridge the gaps in Indian States.*

## **Vision & Mission Statement**

The SBT*i* envisages that all States of India create an enabling environment for women to be successful in breastfeeding their babies optimally at home, health facilities or at work places. The SBT*i* aspires to be a trusted leader to motivate policy makers and programme managers in the States to use the data repository of information on breastfeeding and IYCF policies and programmes. It will serve as a knowledge platform for programme managers, researchers, policy makers and breastfeeding advocates across the States. The **SBT*i*'s mission** is to reach all States of India to facilitate assessment and tracking of Breastfeeding and IYCF policies and programmes through identifying local leaders and leadership teams, mobilising local partnerships without conflicts of interest and building a data repository for advocacy.

## **BPNI's Ethical Policy**

The SBT*i* works on the ethical funding policy of BPNI. It does not seek or accept funds, donation, grants or sponsorship from manufacturers or distributors and the front organisations of breastmilk substitutes, complementary foods, infant and young child feeding related products like breast pumps, or from any organization that has conflicts of interest.

### **Merits of SBT*i***

***The SBT*i* is Participatory:*** It seeks to involve all concerned partners, while avoiding conflicts of interest, working on infant and young child feeding, including governments, international agencies, academia and CSOs/NGOs. It is highly participatory and engaging. The local people collect information, analyse the findings, locate gaps, and take action based on the results. In the process, the participants develop networking skills, investigative techniques, planning skills, analysis, monitoring and reporting methods.

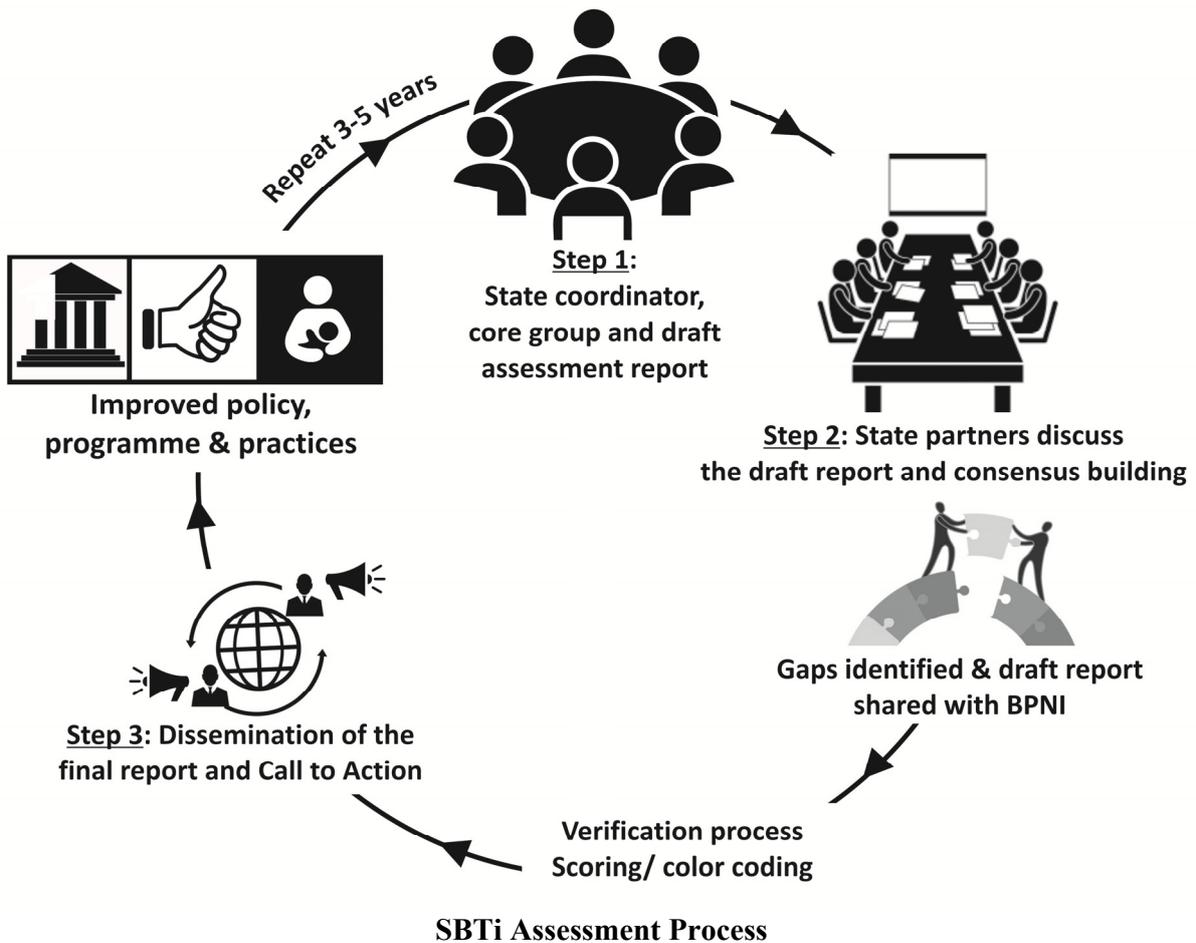
***The SBT*i* is Action-oriented:*** It aims to stimulate action. Having more information is not helpful unless there are strategies in place for translating the information into tools for change and for taking action to improve the situation. Other than bringing people together and building consensus, SBT*i* would lead to creating a “State report” and “State report card”. These would be used to document gaps and a call to action for change. State advocacy is the key to generate action.

***The SBT*i* is Local and Simple Research:*** It aims to stimulate research, investigation, ask questions, and find out why optimal breastfeeding does or does not occur. Local people do the investigation, not done by the external researchers. Simple research targets secondary data in a State/District. When people identify their gaps, discuss about them, and find solutions to bridge them, it stimulates action for change.

***The SBT*i* is a Unique Data Repository:*** the SBT*i* aims to create a dynamic web resource for information on policies and programmes that support women to practice optimal breastfeeding and infant and young child feeding practices. SBT*i* would track this information at the State level, which can be quickly retrieved whenever needed from the portal.

## Objectives of SBTi

1. To provide critical information to governments, needed to bridge gaps in policy and programmes in order to increase rates of breastfeeding and infant and young child feeding practices
2. To make use of SBTi tools to galvanise action at State level.
3. To maintain a national data repository of information on policies in programmes related to breastfeeding and IYCF.



## **The Components of SBTi**

### ***It has 4 components***

1. A process of State assessment of policy and programmes.
2. A process for generating State report on the gaps.
3. A web- based tool for colour coding and objective scoring of indicators, as well as a national data bank on policy & programmes. (To be developed)
4. An awareness plan to share the findings of State assessment and launch a ‘Call to Action’ in the States.

### **1. A process of State assessment of policy and programmes.**

Key objective of the State assessment is to document the gaps in ‘Ten’ policy and programmes that are required to support women in breastfeeding their babies. It involves initiating an assessment through a *core group* of State experts and partners to work together. They identify gaps in existing policies and programmes, build consensus around the gaps and develop a set of recommendations for action to bridge the gaps. **The SBTi encourages re-assessment every 3-5 years.**

*Sources of Information to identify gaps: For each information used in the assessment, possible sources include websites, official documents, RTI information, interviews with key officials and national/State surveys for practice indicators. The data used is secondary but must represent the whole State. Every information provided must have a source.*

### ***Indicators of Assessment***

The SBTi assessment focuses on a wide range of indicators, which provide an impartial view of key factors that help and act as a barrier to breastfeeding. It has 10 indicators. Each of the 10 parameters have specific significance related to policy/programmes, including how women are supported by the national/State policy, by the health care system both during delivery and in the community, by labour policies for maternity protection, by legal protection from commercial sector, by encouraging babies to breastfeed under disaster management policies, by policies of HIV department and monitoring of all of these. Each indicator has a subset of questions to be answered. The SBTi TOOL provides detailed questions to be answered.

All the Indicators will be scored out of a maximum of 10, means total score of a State will be out of a maximum of 100. This score will be used to provide colour- coding and objective scoring of the State on policy and programmes.

And there are 3 indicators of practice early, exclusive and complementary feeding are the same as the Government of India report card measures. These three indicators will be used to provide IF Score of the State.

## THE SBTi 10 INDICATORS OF POLICY AND PROGRAMMES

### IYCF Policies and Programmes

- Indicator 1: State Policy, Governance and Funding
- Indicator 2: Ten Steps to Successful Breastfeeding/ MAA Programme Implementation (BFHI)
- Indicator 3: Implementing the Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, and Amendment Act 2003 (IMS Act)
- Indicator 4: Maternity Protection
- Indicator 5: Health and Nutrition Care Systems
- Indicator 6: Counselling services for the pregnant and breastfeeding mothers
- Indicator 7: Accurate and Unbiased Information Support
- Indicator 8: Infant Feeding and HIV
- Indicator 9: Infant and Young Child Feeding during Emergencies
- Indicator 10: Monitoring and Evaluation

### Indicators of IYCF Practices

- Indicator 11: Timely Initiation of Breastfeeding within one hour of birth
- Indicator 12: Exclusive Breastfeeding for the first six months
- Indicator 13: Complementary Feeding-Introduction of solid, semi-solid or soft foods

### **2. A process for generating State report on the gaps.**

Having information in hand the *core group* helps facilitate debates and discussions around the findings with a larger audience for developing recommendations to bridge the gaps. A draft report emerges which is shared with the SBTi National secretariat at BPNI for verification of accuracy and quality. After having it finalised, the core group assists in advocacy for improving infant and young child policies and allocation of funds. The SBTi report and report cards are *used as tools for the advocacy*.

### **3. A web- based tool for colour- coding and objective scoring of indicators, as well as a national data bank on policy & programmes.**

The SBTi will have a web-tool to manage and develop a repository.

After having finalised the report, data on all indicators would be fed into the web-tool that generates scoring for each individual indicator or all indicators together. The toolkit objectively quantifies the data to provide a colour coding i.e. 'Red', Yellow, Blue and Green based on ascending order of performance. The web-tool stores information on policy and programmes, accessible to everyone. It serves as a unique national data bank of policies and programmes on breastfeeding and infant and young child feeding.

#### **4. An awareness plan to share the findings of State assessment and launch a 'Call to Action' in the States.**

Once the process of SBTi is complete, the core group prepares for the launch of final report of assessment findings along with a 'Call to action' to the respective governments and others concerned.

*Tracking trends: The State Breastfeeding Trends Initiative (SBTi) can be used to track trends by re-assessments. It helps to study various indicators, assess the progress and impact of any particular intervention.*

#### **The Steps of SBTi**

Following steps describe how the SBTi assessment is accomplished

##### ***Step 1: Assessment***

- 1.1 Identifying a key person as 'State coordinator'.
- 1.2 Identifying a core group of 4-5 persons, which may include representatives from the government, domain experts UNICEF, WHO, NGOs and other professional organizations, but avoiding conflicts of interest.
- 1.3 Meeting of the core group to discuss and plan for the assessment.
- 1.4 Facilitation of assessment as per the guide book.
- 1.5 Fixing responsibilities, who will do what on all indicators.
- 1.6 Collection of information and sharing within the core group.
- 1.7 Finalizing the draft report identifying gaps and recommendations.

##### ***Step 2: Local Discussion & Consensus***

- 2.1. Presenting the draft report to a wider audience for review, comments and consensus.
- 2.2. Incorporating comments or suggestions into the report.
- 2.3. Sharing the draft report with BPNI for review and verification.
- 2.4. Finalization of the report by the core group

##### ***Step 3: Reporting & Call to Action***

- 1.1. A State/Distt. report and report card is developed.
- 1.2. A call to action is organised locally to share findings with the governments who are potential users and other partners like donors, researchers, academia, CSOs working on women and children's issues and MCH advocacy groups.
- 1.3. Reports and report cards are made public through media.

*Use of State report/report cards: Governments to consider action, donors to prioritise funding, advocacy groups to showcase how well the country is doing in order to pinpoint improvements, researchers for setting up their research agendas and media for communication and help in advocacy.*

### **Essentials to be in the SBTi repository**

1. Use of SBTi tools of BPNI.
2. A diverse core group without conflicts of interest.
3. Verification and quality check at BPNI the SBTi national secretariat
4. Approval of the State core group for uploading the report on SBTi portal.
5. When there is subjectivity, or otherwise difference in interpretation; decisions are made through consensus in the core group
6. All Questions need answers as they are based on what is required, not what is not answerable or feasible.
7. If data is not available to answer any questions it is taken as NO, which is equal to “0”(Zero).

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