Support Breastfeeding for a Healthier Planet

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Technical Director, BPNI
Co-Chair, IBFAN Global Council

TNAI Webinar on
Supporting Breastfeeding for Healthier Planet
6th August, 2020
A breastfeeding mother contributes to the planetary health!

Breastfeeding is a prime example of the deep connections between human health and nature’s ecosystems

https://worldbreastfeedingweek.org/
A Breastfeeding mother contributes to the health of her baby her own health!

**RESULTS OF INADEQUATE BREASTFEEDING: INDIA (ANNUALLY)**

**Preventable Child Deaths**

- **100,000**
- **Cases of Diarrhoea**: 34,791,524
- **Cases of Pneumonia**: 2,470,429
- **Cases of Obesity**: 40,382
- **Cases of Breast Cancer**: 7,976
- **Cases of Ovarian Cancer**: 1,748
- **Cases of Type II Diabetes**: 87,855

**Health Care Costs**

- **₹ 727.18 crores**

**Household Costs of Formula Feeding**

- **₹ 253,933.77 crores**

*Extrapolated from the tool, ‘The Cost of Not Breastfeeding Tool’ (1 US$ = INR 68.5672 as on 16 July 2019)*

Breastmilk is more than nutrition!

<table>
<thead>
<tr>
<th>Antimicrobial factors</th>
<th>Secretory IgA, IgM, IgG, Oligosaccharides, Lysozyme, Leucocytes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cytokines &amp; anti-inflammatory factors</td>
<td>Interleukins, Prostaglandins, TNF</td>
</tr>
</tbody>
</table>

Mother gets infection

Produces antibodies

Secrets antibodies in breastmilk

Breastfeeding imparts long-term neuro-developmental benefits to children

- Adds up to 3 IQ points across all income levels
- Improved academic performance
  - Increased long-term earnings
  - Increased productivity

Cognitive losses associated with not breastfeeding impact earning potential, and amount to global loss of $302 billion (India INR 4300 Cr) annually

*Lancet Series on Breastfeeding, 2016*
Formula feeding is detrimental to the health of the planet

Breastmilk substitutes leave an ecological footprint, as they -

- Need energy and water for production
- Materials for packaging
- Fuel for transport distribution
- Water, fuel, and cleaning agents for daily preparation and use
- Generate waste requiring disposal

BMS are Ultra-processed products

<table>
<thead>
<tr>
<th>Nutrients</th>
<th>Standard Proportion</th>
<th>Ingredients</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Red-Std IF</td>
<td>high fructose corn syrup</td>
</tr>
<tr>
<td></td>
<td>Black - FUF</td>
<td>cane sugar</td>
</tr>
<tr>
<td>Carbohydrates</td>
<td>60 - 67%</td>
<td>lactose</td>
</tr>
<tr>
<td></td>
<td></td>
<td>milk powder</td>
</tr>
<tr>
<td></td>
<td></td>
<td>whey protein concentrate</td>
</tr>
<tr>
<td>Proteins</td>
<td>13 - 15%</td>
<td>vegetable oil:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Palm oil</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Soybean oil</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sunflower oil</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Peanut oil</td>
</tr>
<tr>
<td>Fats</td>
<td>17 – 27 %</td>
<td>Various chemicals</td>
</tr>
<tr>
<td>Others</td>
<td>&lt; 1%</td>
<td></td>
</tr>
</tbody>
</table>
### Average GHG Emissions (kg CO2 eq) per kg of different category of Milk Formula

<table>
<thead>
<tr>
<th>Category</th>
<th>GHG Emissions (kg CO2 eq per kg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard Milk Formula/ Special Milk Formula</td>
<td>3.95</td>
</tr>
<tr>
<td>FU Milk Formula/ Toddler’s Milk Formula</td>
<td>4.04</td>
</tr>
</tbody>
</table>
### How significant is GHG generated by BMS

<table>
<thead>
<tr>
<th>Food Item (1 kg)</th>
<th>GHG emissions in Kg CO2 eq</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BMS (Only production)</strong></td>
<td><strong>Standard infant formula – 3.95</strong></td>
</tr>
<tr>
<td><strong>FUF/GUM formula – 4.05</strong></td>
<td></td>
</tr>
<tr>
<td>Milk</td>
<td>1.1</td>
</tr>
<tr>
<td>Chicken</td>
<td>4.7</td>
</tr>
<tr>
<td>Fish</td>
<td>3.1</td>
</tr>
<tr>
<td>Egg</td>
<td>3.0</td>
</tr>
<tr>
<td>Milk</td>
<td>1.0</td>
</tr>
<tr>
<td>Bean</td>
<td>0.86</td>
</tr>
<tr>
<td>Rice</td>
<td>1.2</td>
</tr>
<tr>
<td>Wheat</td>
<td>0.58</td>
</tr>
<tr>
<td>Potato</td>
<td>0.19</td>
</tr>
<tr>
<td>Apple</td>
<td>0.28</td>
</tr>
</tbody>
</table>

In 2016, total sale of BMS in India was 26,900 tonnes with a projected sale of 30,700 tonnes in 2021 (a cumulative increase of 14%)
Equivalent activities for total GHG emission due to milk formula in India (107,490 tonnes)

<table>
<thead>
<tr>
<th>Equivalent to annual Greenhouse Gas emissions from</th>
<th>24 Crore Miles driven by an average passenger vehicle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenhouse Gas emission avoided by</td>
<td>3.7 Million Incandescent lamps switched over to LEDs</td>
</tr>
<tr>
<td>Carbon sequestered by any one of these</td>
<td>1.6 Million tree seedlings grown for 10 years</td>
</tr>
<tr>
<td></td>
<td>127,348 acres of U.S. forests in one year</td>
</tr>
</tbody>
</table>

https://www.epa.gov/energy/greenhouse-gas-equivalencies-calculator
Are we doing enough to support breastfeeding and restrict use of BMS to improve planetary health?
Environmental impact of Breastmilk Substitutes can be curtailed by efforts for reducing their consumption and enhancing breastfeeding rates through good support systems for mothers and families.
Policy/Guidelines/Programme Initiatives

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

Guidelines for Enhancing Optimal Infant and Young Child Feeding Practices

ICDS Mission

National Guidelines on Infant and Young Child Feeding

Home Based Care for Young Child (HBYC)

Putting child nutrition at the forefront of social change
Initiation of breastfeeding

(NFHS - 4, 2015-16)

- Institutional deliveries: 79%
- Initiation of BF within 1 hour: 41.6%
- Initiation of BF within 1 day: 81.4%
Breastfeeding practices in India – critical issues

(NFHS - 4, 2015-16)

Exclusive Breastfeeding falls rapidly!

Not Brestfeeding | Ex. BF | Plain water | Other milk

<table>
<thead>
<tr>
<th>Months</th>
<th>Not Brestfeeding</th>
<th>Ex. BF</th>
<th>Plain water</th>
<th>Other milk</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;2</td>
<td>72.5</td>
<td>58.4</td>
<td>41.5</td>
<td>10</td>
</tr>
<tr>
<td>2-3</td>
<td>9.6</td>
<td>17.2</td>
<td>23.9</td>
<td>4.9</td>
</tr>
<tr>
<td>4-5</td>
<td>5.9</td>
<td>10.6</td>
<td>14</td>
<td>14</td>
</tr>
</tbody>
</table>

Putting child nutrition at the forefront of social change
## Policies and Programmes on IYCF

<table>
<thead>
<tr>
<th>Programme</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Policy, Programme and Coordination</td>
<td>1.5</td>
</tr>
<tr>
<td>Baby Friendly Hospital Initiative</td>
<td>0</td>
</tr>
<tr>
<td>Implementation of the International Code</td>
<td>8.5</td>
</tr>
<tr>
<td>Maternity Protection</td>
<td>6</td>
</tr>
<tr>
<td>Health and Nutrition Care System</td>
<td>5</td>
</tr>
<tr>
<td>Mother Support and Community Outreach</td>
<td>6</td>
</tr>
<tr>
<td>Information Support</td>
<td>5</td>
</tr>
<tr>
<td>Infant Feeding and HIV</td>
<td>6</td>
</tr>
<tr>
<td>Infant Feeding during Emergencies</td>
<td>0</td>
</tr>
<tr>
<td>Monitoring and Evaluation</td>
<td>7</td>
</tr>
</tbody>
</table>
Challenges at health facilities

- Lack of dedicated space or human resources for breastfeeding/lactation counselling
- Heavy Workload
- Health staff lacks the required competence in lactation management

A pediatrician said, “…time is the most important factor and if there is a dedicated counsellor, it makes it a bit easy for the doctor, as after seeing 100 patients in the OPD and after taking rounds of 50 beds, it is impossible to do counselling” (during interview for the study)
What more can be done?
What can policy makers/programme managers do at National and State level?

- Bridge the gaps in the policies and programmes noted in the India's WBTi assessment report (2018); especially for enhancing the standards of care in the hospitals, both public and private.
- Launch a campaign to generate mass awareness about the environmental impact of BMS and environmental sustainability of breastfeeding among people and health workers.
The TEN STEPS to Successful Breastfeeding

1. **HOSPITAL POLICIES**
   - Hospitals should support and promote breastfeeding by...
   - Implementing policies that promote breastfeeding.
   - Providing clear information on breastfeeding policies.
   - Encouraging breastfeeding support services.

2. **STAFF COMPETENCY**
   - Hospitals should ensure that all staff...
   - All staff should be trained in breastfeeding.
   - Providing ongoing support and education.

3. **ANTENATAL CARE**
   - Hospitals should support mothers to breastfeed by...
   - Discussing breastfeeding during prenatal visits.
   - Providing prenatal classes and counseling.

4. **CARE RIGHT AFTER BIRTH**
   - Hospitals should support mothers to breastfeed by...
   - Encouraging immediate skin-to-skin contact.
   - Assisting with latch and breastfeeding.

5. **SUPPORT MOTHERS WITH BREASTFEEDING**
   - Hospitals should support mothers to breastfeed by...
   - Providing ongoing support and encouragement.
   - Addressing common breastfeeding challenges.

6. **SUPPLEMENTING**
   - Hospitals should support mothers to breastfeed by...
   - Guiding mothers on the benefits of breastfeeding.
   - Providing supplemental feeding if necessary.

7. **ROOMING-IN**
   - Hospitals should support mothers to breastfeed by...
   - Encouraging mothers to room-in with their babies.
   - Providing support for breastfeeding in the hospital.

8. **RESPONSIVE FEEDING**
   - Hospitals should support mothers to breastfeed by...
   - Responding to infant hunger and thirst.
   - Adapting feeding practices for infants.

9. **BOTTLES, TEATS AND PACIFIERS**
   - Hospitals should support mothers to breastfeed by...
   - Providing guidance on bottle-feeding.
   - Encouraging parents to use bottles as needed.

10. **DISCHARGE**
    - Hospitals should support mothers to breastfeed by...
    - Preparing mothers for discharge.
    - Providing postnatal support and follow-up.

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bpni

World Health Organization

unicef

IBFAN

putting child nutrition at the forefront of social change
Restricting Breastmilk Substitutes sales!

Per infant/child consumption (kg) in 2013*
- China – 15.2 Kg
- India – 0.4 Kg

Increase in consumption over 6 years (2011-16)
- China – 38%
- India – 14%

Source: Euromonitor International India Passport report of Baby Foods 2016

What can civil society, and breastfeeding advocates do?

- Find out about the policies and programmes on IYCF in the states by writing to different departments dealing with health and nutrition.
- Raise awareness about inadequate policies and programme and breastfeeding practices in their area through media and social media.
- Keep a watch on the direct and indirect promotional activities of the baby food and feeding bottle manufacturers like organising seminars, media campaigns, free distribution of baby foods, contacting mothers through social media etc. Report and resist.
What can civil society, and breastfeeding advocates do?

- Check the hospitals with maternity services for breastfeeding friendly practices like:
  - early initiation of breastfeeding,
  - avoiding separation of baby and mother,
  - not giving prelacteal feeds,
  - practicing exclusive breastfeeding and
  - using infant formula only if there is medical indication as suggested by WHO.

- Approach Members of Parliament/ Legislative Assembly for breastfeeding friendly policies and support.
What can hospitals, doctors and nurses do?

- Ensure that their hospital practices Ten Steps to successful breastfeeding. (You can use the Tool developed by BPNI-WHO India-Government of India to check).
- They can minimise use of powdered infant formula for indications as prescribed by WHO.
- Support women with face to face counselling on breastfeeding during pregnancy, at birth and later till the mother and baby are discharged and come back on follow-up visits.
What can parents do?

- Find out if the maternity facilities for delivery of baby have lactation support available or not. Choose a facility where this support is available.
- Mother can communicate to the doctors about her decision to practice skin to skin contact and not use formula for your baby.
BPNI’s interventions

- For all mothers: IYCF Counselling Specialist training (7 days)
- For breastfeeding mothers: Stanpan Suraksha APP (on 7th August)
- For Pregnant Women: Digital Portal (Coming soon)
IYCF Counselling & Lactation management
The ‘4 in 1’ Training Course

Infant and Young Child Feeding Counselling &
Lactation Management:
The 4 in 1 Training Course
(An integrated course on Breastfeeding & Lactation Management, Complementary Feeding, Infant Feeding & HIV and Growth Monitoring counselling)

Trainer’s Guide

Breastfeeding, Lactation Management & Infant and Young Child Feeding Counselling: The 4 in 1 course
(An integrated course on Breastfeeding & Lactation Management, Complementary Feeding, Infant Feeding & HIV and Growth Monitoring)

A BPNI’s Certificate Course
2020-2030
## Training on 10 steps to Successful Breastfeeding

**A Lactation Management Course**

**Trainer’s Guide**

<table>
<thead>
<tr>
<th>Session</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Why Breastfeeding?</td>
</tr>
<tr>
<td>2</td>
<td>Production and Intake of Breastmilk</td>
</tr>
<tr>
<td>3</td>
<td>Assessing a Breastfeed</td>
</tr>
<tr>
<td>4</td>
<td>Observing a Breastfeed</td>
</tr>
<tr>
<td>5</td>
<td>Listening and Learning</td>
</tr>
<tr>
<td>6</td>
<td>Ten Steps to Successful Breastfeeding</td>
</tr>
<tr>
<td>7</td>
<td>Clinical Practice 1</td>
</tr>
<tr>
<td></td>
<td>Listening and learning</td>
</tr>
<tr>
<td></td>
<td>Assessing a breastfeed</td>
</tr>
<tr>
<td>8</td>
<td>Positioning a Baby at the Breast</td>
</tr>
<tr>
<td>9</td>
<td>Building Confidence, Giving Support and Checking Understanding</td>
</tr>
<tr>
<td>10</td>
<td>Clinical Practice 2</td>
</tr>
<tr>
<td></td>
<td>Building confidence and giving support</td>
</tr>
<tr>
<td></td>
<td>Positioning a baby at the breast</td>
</tr>
<tr>
<td>11</td>
<td>Breast Conditions</td>
</tr>
<tr>
<td>12</td>
<td>Refusal to Breastfeed and Crying</td>
</tr>
<tr>
<td>13</td>
<td>Overview of Infant Feeding and HIV</td>
</tr>
<tr>
<td>14</td>
<td>Safe Artificial Feeding</td>
</tr>
<tr>
<td>15</td>
<td>Expressing Breastmilk</td>
</tr>
<tr>
<td>16</td>
<td>“Not Enough Milk”</td>
</tr>
<tr>
<td>17</td>
<td>Increasing Breastmilk and Relactation</td>
</tr>
<tr>
<td>18</td>
<td>Breastfeeding History – taking</td>
</tr>
<tr>
<td>19</td>
<td>Breastfeeding Low birth weight (LBW) and Sick Babies</td>
</tr>
<tr>
<td>20</td>
<td>Clinical Practice 3</td>
</tr>
<tr>
<td></td>
<td>Positioning and taking a breastfeeding history</td>
</tr>
<tr>
<td>21</td>
<td>Sustaining Breastfeeding</td>
</tr>
<tr>
<td>22</td>
<td>Nutrition of Lactating Mothers and their Health and Fertility</td>
</tr>
<tr>
<td>23</td>
<td>Regulating Marketing of Breastmilk Substitutes</td>
</tr>
<tr>
<td>24</td>
<td>Infant Feeding in Special Situations</td>
</tr>
</tbody>
</table>
For breastfeeding mothers: Stanpan Suraksha APP

Report Promotion of baby Foods/Feeding Bottles

- Find a Counselor
- Engage
- Success Stories
- Donate
- Profile
- What's New
- Volunteer
- Campaign
- Settings

https://www.bpni.org/webinar-on-launch-of-stanpan-surakhsha-mobile-app/
Report Promotion of Baby Foods/Feeding Bottles

List of prohibited promotions

BPNI 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.

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.
For Pregnant Women: A Digital Portal

- To provide breastfeeding counseling services to pregnant women to be fully informed for successful in breastfeeding their babies.
- To facilitate an enabling environment for women to ensure early breastfeeding within an hour of birth, skin-to-skin contact, and reduce the consumption of infant formula at the time of birth.
Carry Home Message

- Environmental impact of BMS use is significant
- Environmental impact of the BMS can be curtailed by efforts that can reduce their consumption and enhance breastfeeding rates through good support systems for mothers and families.

Let us join hands to achieve it.
What we all can do?

Watch the film 'Tigers' on the Zee5 web portal to know predatory promotional behaviour of the baby food companies

https://www.youtube.com/watch?v=dJxsiUvccuM
Thanks!

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