



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

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Findings & Recommendations

Findings from the 10 indicators of policy and programmes present a sketch of the support that women receive to practice optimal infant feeding of their infants.

Indicators 1-10

No.	Indicators 1 to 5 Description	Score out of 10	Color Code
1	State Policy, Governance and Funding	7.5	Blue
2	Ten steps to successful breastfeeding/ MAA Programme Implementation (BFHI)	4.5	Yellow
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)	3	Red
4	Maternity Protection	7.5	Blue
5	Health and Nutrition care Systems	7.5	Blue



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Indicators 1 – 10 (continued)

No.	Indicators 6 – 10 Description	Score out of 10	Color Code
6	Counseling services for the pregnant and breastfeeding mothers	7	Blue
7	Accurate and Unbiased Information Support	8	Blue
8	Infant feeding and HIV	7	Blue
9	Infant Feeding during Emergencies	2	Red
10	Monitoring and Evaluation	10	Green

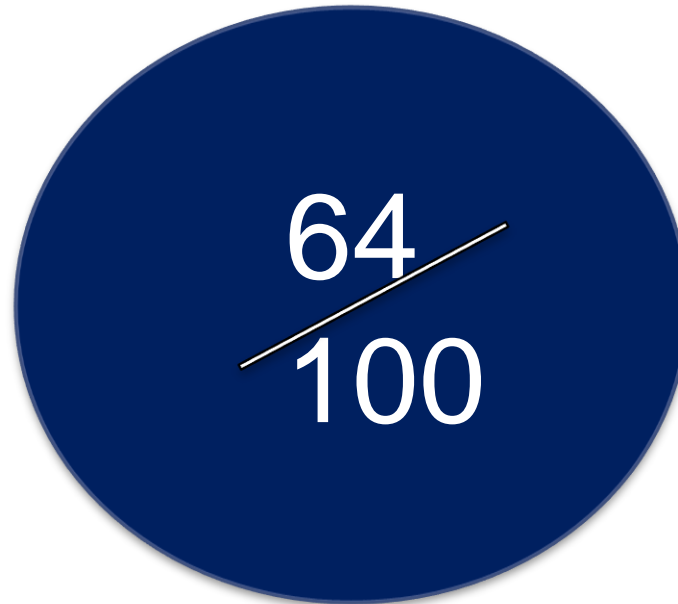


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Tamil Nadu Report Card 2020

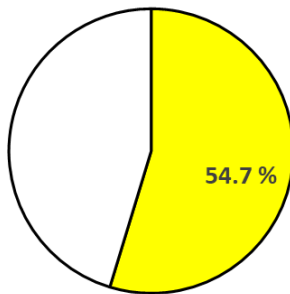
Total score based on the assessment of
policies and programmes



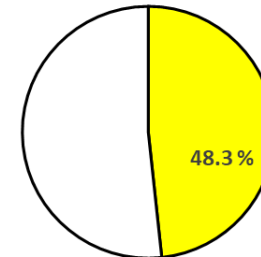
Infant and young child feeding practices

Practice Indicators 11-13 (Source NFHS-4)

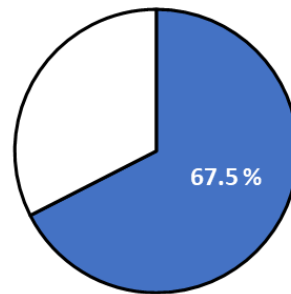
Indicator 11 : Initiation of Breastfeeding (within 1 hour)



Indicator 12 : Exclusive Breastfeeding for the first six months



Indicator 13 : Complementary Feeding (6-8) months



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Infant Feeding Practice Score

Tamil Nadu scores 5.7/10 and is ranked 10th among 28 States and 3 Union Territories based on NFHS 4 data and Breastfeeding Report Card released by MOHFW Government of India 2019.

Analysis of the findings

Based on the analysis of available information on policy and programmes, we present here a summary of the key achievements and gaps for each indicator. Blue shows key achievement and black text shows gaps.

Key Achievements and Gaps of Indicators 1 and 2

No.	Indicator Description	Achievement & Gap
1	State Policy, Governance and Funding	<ul style="list-style-type: none"> • State has adopted a good policy on IYCF and has a plan. • District Plans do not reflect State Action Plan on IYCF • Funding is inadequate for specific activities for IYCF
2	Ten Steps to successful breastfeeding/MAA Programme Implementation (BFHI)	<ul style="list-style-type: none"> • MAA programme is being implemented, hospitals have begun well. • Monitoring the MAA programme and BFHI is weak • Assessment and re-assessment of maternity facilities as per guidelines and tools developed is weak.



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Key Achievements and Gaps of Indicators 3 and 4

No.	Indicator Description	Achievement & Gap
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)	<ul style="list-style-type: none"> • TN has begun to implement in February through an order to appoint authorised officers. • Weak implementation of the IMS Act • In Feb 2020 the state government notified & authorised designated Food and Safety Officers in each district to take cognizance of violations. They are not trained on the IMS Act.
4	Maternity Protection	<ul style="list-style-type: none"> • Most women are covered by maternity entitlements, and PMMVY. • Implementing creche facilities at the work site and redressal of non-compliance of maternity benefits are weak • Not enough support available to women working in small establishments and in the informal sector.



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Key Achievements and Gaps of Indicators 5 and 6

No.	Indicator Description	Achievement & Gap
5	Health and Nutrition Care Systems Support	<ul style="list-style-type: none"> • Few steps are being implemented well such as curriculum, training and child birth procedures.. • However, Only 13 out of 25 content/skills included in health service providers curriculum on IYCF • IYCF information is inadequately covered in the In-service training programmes
6	Counselling Services for the Pregnant and Breastfeeding Mothers	<ul style="list-style-type: none"> • Majority receive counselling during pregnancy and support at birth and later • > 50% of the community based health workers in government sector are trained in IYCF counselling while there is a lack of the same in private sector hospitals • Counselling services at private sector hospitals require attention and care.



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Key Achievements and Gaps of Indicators 7 and 8

No.	Indicator Description	Achievement & Gap
7	Accurate and Unbiased Information Support	<ul style="list-style-type: none"> • Tamil Nadu has done well on this front. • There is evidence of some IEC programmes on infant feeding being done with commercial influence violating the IMS Act • Dangers of artificial feeding not spelled out in the MCP card • MCP card not universally used
8	Infant Feeding and HIV	<ul style="list-style-type: none"> • TN has a comprehensive policy • The IMS Act provisions have not been integrated in the state HIV and IYCF policy. • Follow up research on HIV and Infant Feeding is missing



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Key Achievements and Gaps of Indicators 9 and 10

No.	Indicator Description	Achievement & Gap
9	Infant Feeding during Emergencies	<ul style="list-style-type: none"> • Some measures are in place to protect mothers and babies during disasters. • However, inadequate preparedness for safer infant feeding and breastfeeding support during disaster/emergency situations • IMS Act provisions not incorporated in Disaster Management policy • No funds allocated to IYCF in disaster/emergency situations
10	Monitoring and Evaluation	TN has done excellent in this indicator.



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You would note that in most indicators TN shows an “average performance”, only one is excellent in Green, while there are one in Yellow and two in Red needing greater attention.



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Recommendations

Recommendations were drawn up after a detailed analysis of all the gaps.

We present here 5 Broad Recommendations with key activities to be undertaken within each of them to bridge the gaps

Recommendations

1. Strengthen State policy, funding, monitoring and evaluation
2. Remove disparities in information and services on IYCF to ensure uniformity in basic standards for required services across public and private sectors
3. Strengthen action to protect breastfeeding knowledge and skills
4. Strengthen implementation of BFHI/MAA programme and LaQshya standards
5. Strengthen disaster management plans to support mothers, children and families



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1. Strengthen State policy, funding, monitoring and evaluation

- Set up a specific committee in the state that is intersectoral in nature to organise, coordinate and monitor IYCF practices, implementation of the IMS Act, HIV and AIDS (Care and Protection) Act 2017 and the Maternity Benefit Rules 2017 Government of Tamil Nadu.
- Establish a state resource centre to facilitate capacity building and monitoring of IYCF practices.
- Establish district level plans along with specific funding for each intervention in each indicator
- Ensure documented records of antenatal counselling and decision on feeding the baby, timing of initiation of breastfeeding and skin-to-skin contact practice, breastfeeding skill support for the mother and any use of infant formula during hospital stay in both public and private sector.



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S B T i
STATE BREASTFEEDING
TRENDS INITIATIVE

1. Strengthen State policy, funding, monitoring and evaluation

continued

- Enable the capture of data from public and private sectors through the CAS to provide readily accessible child health information to the districts in real time.
- Generate periodical reports on specific data captured through CAS to enable assessment of trends and provide specific information for course correction when and where necessary.
- Fix the targets of three practice indicators 11-13 for the year 2025.
- Enable Social Audit of IYCF practices.

2. Remove disparities in information and services on IYCF to ensure uniformity in basic standards for required services across public and private sectors

- Make it mandatory across public and private sectors for every pregnant woman to receive and use the MCP Card/Booklet.
- Maintain a digital record at the facility for each registered RCH id with information on each visit and service offered.

3. Strengthen action to protect breastfeeding knowledge and skills

- Incorporate IYCF education including practical skills and the IMS Act 1992 with Amendment 2003 in all pre service curricula of medical, paramedical, health workers and nutrition courses.
- IYCF/MAA training and orientation to IMS Act should be compulsory for all health and nutrition staff working in any health facility (public and private) providing mother and child health care services.
- Include knowledge on IYCF, the IMS Act and Right to Food in the school (starting from pre-school) and college education curricula.

4. Strengthen implementation of BFHI/MAA programme and LaQshya standards

- Practice of Ten Steps to Successful Breastfeeding in BFHI/MAA programme, and LaQshya standards should be one of the stipulations to be fulfilled for licensing under the Tamil Nadu Clinical Establishment Act and NABH.
- Establish monitoring cell/committees in all maternity facilities for continuous support and supervision of adoption of all the BFHI Ten steps.

5. Strengthen implementation of BFHI/MAA programme and LaQshya standards

- Regular assessment of hospitals should be carried out to check the quality of MAA programme implementation as per the tools and guidelines of WHO/BPNI and GOI. Re-assessment should be done every 3-5 years and all this should be part of the plan and funding secured.
- Assign a health worker trained in lactation to ensure that all mothers are able to breastfeed within an hour and have skin to skin contact.

Strengthen disaster management plans to support mothers, children and families

- Designate and train the authorized officers at district level to create awareness and monitor strict implementation of the IMS Act.
- Integrate IYCF and IMS Act provisions in the state and district disaster management plans.
- Health department should take the lead in developing the disaster management plan and train at least 30-40 health workers in each district on lactation management and ensure they are on duty to help mothers on IYCF during disasters.

Together we can achieve....

Tamil Nadu has been a front runner in women and child health and nutrition programmes.

Implementing all 5 recommendations will surely help the state not only to improve in all the indicators but will show marked improvement in the 3 Infant Feeding Practice indicators of Early Initiation, Exclusive Breastfeeding and Complementary Feeding



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Thank you