



**Breastfeeding
Promotion Network of India**
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To,
Dr. Mansukh Mandaviya,
Hon'ble Union Minister,
Ministry of Health and Family Welfare,
Government of India, New Delhi.

Subject: Improving Early Breastfeeding Rates in Health Facilities of India (Both Public and Private)

Hon'ble Minister Dr. Mandaviya Ji,

Greetings from BPNI!

The Breastfeeding Promotion Network of India (BPNI) is a 30 year old independent, non-profit, national organisation dedicated to the protection, promotion, and support of breastfeeding and appropriate complementary feeding of infants and young children. In 1995, GOI notified BPNI in the to monitor the compliance of Infant Milk Substitutes Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, and Amendment Act 2003(IMS Act) in the country to monitor compliance with the IMS Act.

BPNI keeps a check on the baby food industry uses manipulative promotional tactics to undermine breastfeeding in hospital. In particular through sponsorships, etc. BPNI reports to MOHFW on a regular basis. BPNI is also a MOHFW GOI is a technical partner in the MAA Programme of MOHFW GOI, which aims at promoting breastfeeding in health facilities.

The MOHFW-Government of India, WHO and UNICEF recommend i) initiation of breastfeeding within one hour of birth, ii) exclusive breastfeeding (only breastfeeding, nothing else) for the first six months of life and iii) continued breastfeeding till 2 years of age or beyond along with appropriate complementary feeding after six months of age. These recommendations help both the mother and the baby in achieving optimal health, development, and survival.

An international study on the cost of not breastfeeding estimates that inadequate breastfeeding in India results in 100,000 preventable child deaths (mainly due to diarrhoea and pneumonia), 34.7 million cases of diarrhoea, 2.4 million cases of pneumonia, and 40,382 cases of obesity in India.

The health impact on mothers is more than 7000 cases of breast cancer, 1700 of ovarian cancer and 87,000 have type-2 diabetes. India is estimated to spend about INR 727.18 crore on health care due to resultant illness.

Optimal feeding practises have the potential to simultaneously reduce the risk of under-nutrition and overweight, obesity or diet-related non-communicable diseases (NCDs), which include type 2 diabetes, cardiovascular disease and cancers.

We would like to draw your attention to the fact that, according to NFHS-5, in India, while 88.6 percent of births take place during the day, places in the health facility. Only 41.8% of

As a policy, BPNI does not accept funds of any kind from the companies manufacturing baby foods, feeding bottles etc. and from organization/industry having conflict of interest.

mothers are able to begin breastfeeding within an hour of birth. In addition, the government of India's programmes to promote breastfeeding in hospitals do not apply to private sector where about 40% births take place. Given the health benefits of breastfeeding for both the short and long term, it calls for an immediate intervention at your end.

The World Health Organization and UNICEF are working together to improve the situation of early breastfeeding. BPNI recommends implementing "Ten Steps to Successful Breastfeeding" in hospitals with maternity units. In 2016, the Ministry of Health and Family Welfare, Government of India, launched the Mothers Absolute Affection (MAA) programme and National Guidelines on lactation management centres (2017) to revitalise efforts towards the support of breastfeeding practises through the health system.

The Breastfeeding Promotion Network of India (BPNI) has developed the "Breastfeeding Friendly Hospital Initiative (BFHI)" in partnership with MOHFW and WHO India. This programme is currently being run by the Breastfeeding Promotion Network of India (BPNI) and the Association of Healthcare Providers, India AHPI) and supported by several health professional organisations.

BPNI requests that you consider the following suggestions as policy health interventions:

1. Fix a target in 5 years to match the % of institutional births with the early breastfeeding rates within an hour of birth.
2. Notify two health services as mandatory to 'educate pregnant women to make decisions about feeding their babies' and 'supporting them at the time of birth'.
3. The MOHFW officially communicates with private-sector hospitals that provide maternity services for accreditation as breastfeeding friendly to follow the Ten Steps to successful breastfeeding.

BPNI would be happy to assist in any manner in this regard.

With regards,

Yours sincerely,



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