

Prioritise Breastfeeding: Create Sustainable Support Systems



Photo credit:
MAA Programme, MoHFW

The Breastfeeding Promotion Network of India (BPNI) announces the theme and slogan for World Breastfeeding Week (WBW) 2025 **“Prioritise Breastfeeding: Create Sustainable Support Systems”**.

This WBW, the spotlight is back on enabling environment for women to succeed and be protected for breastfeeding. Based on the preliminary findings of a recent assessment of policy and programmes on breastfeeding and Infant and young child feeding, the WBW 2025 action folder is prioritising breastfeeding support in the maternity hospitals where women come to give birth. The focus is also placed on protecting breastfeeding mothers from the baby food companies. BPNI invites governments, health systems both public and private, civil society organisations and individuals to join us in prioritising breastfeeding support and protection mechanisms. While there are other areas also needing attention, to be highlighted in the upcoming report “Spotlight on Breastfeeding & Infant and Young Child Feeding”, BPNI is focusing on these two during this World Breastfeeding Week 2025.



Photo credit: WHO

Objectives of WBW 2025

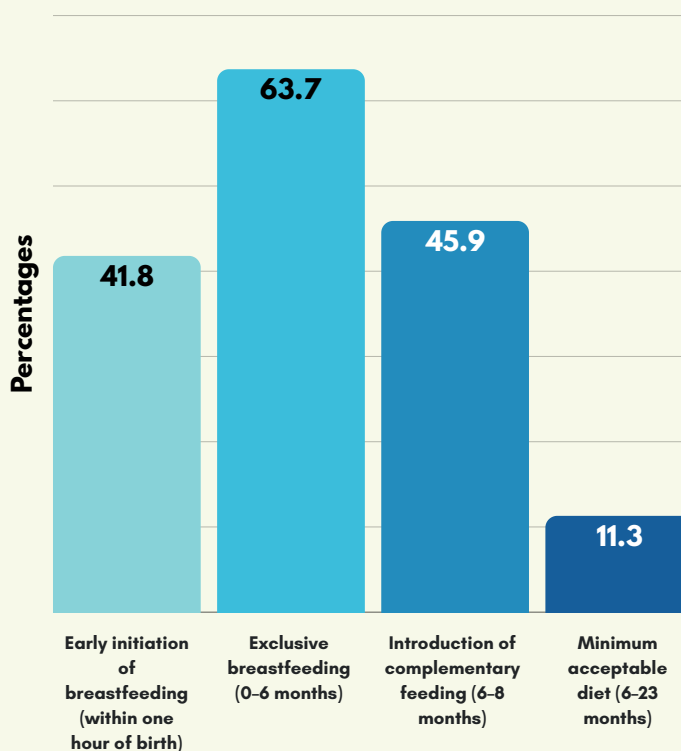
- Inform people and policy makers about key gaps in breastfeeding support and protection in the hospitals.
- Advocate for specific changes required.
- Galvanise actions in the States of India to call for change.

WHY BREASTFEEDING SUPPORT IN HOSPITALS?

According to the World Health Organization (WHO), breastfeeding is one of the most effective ways to ensure child health and survival. It contains antibodies which help protect against many common childhood illnesses like diarrhea and pneumonia. Breastfed children perform better on intelligence tests, are less likely to be overweight or obese and less prone to diabetes later in life. Women who breastfeed also have a reduced risk of breast and ovarian cancers. Inappropriate marketing of breast-milk substitutes continues to undermine efforts to improve breastfeeding rates and duration worldwide[1]. Suboptimal breastfeeding, especially non-exclusive breastfeeding and inadequate complementary feeding, contributes significantly to childhood stunting, wasting, and overweight^[2].

Despite the benefits, India's infant and young child feeding practices are suboptimal as shown in Fig. 1. According to the NFHS-5 (2021), 88.6% of women give birth in hospitals, but only 41.6% are able to start breastfeeding within an hour of birth (Fig. 2). There are variations among all the Indian States but need to bridge the gap between institutional births and early breastfeeding rates is underlined. (Fig 3)

Fig. 1: Key IYCF Indicators from NFHS-5



The Exclusive Breastfeeding rate under 6 months is 63.7%, complimentary feeding rate is 45% and minimal acceptable diet 11.3% is too low.

Fig. 2: Current Status of Early Breastfeeding compared to Institutional births in India Based on NFHS-5 (2021)



HOW TO PRIORITISE ?

Each State of India there is need to act decisively and quickly . See the Fig. 3, wherein most state show the deficit and in as many 18 States, early breastfeeding rates actually went down from NFHS-4 to NFHS-5. This may be seen as an alert . Solution lies in fixing the health system with needed changes in routines and programmes that sustain.

Let's Turn Our Hospitals to be Breastfeeding Friendly

The Government of India has launched the MAA programme based on WHO's Ten Steps to Successful Breastfeeding. One of major gap is that MAA programme does not reach out to private sector, where more than 40% births do take place. There is, thus, a need to strategies for reaching out to them.

Although the "Ten Steps to Successful Breastfeeding" provide a clear framework, their implementation across Indian hospitals remains inconsistent and fragmented. Unnecessary use of infant formula has been reported often.

Most hospital do not have a breastfeeding policy, breastfeeding practices in hospitals are not monitored and implementation of the IMS Act is weak.

Public hospital initiatives like LaQshya or NQAS do not consistently include all the Ten Steps and related breastfeeding indicators. These initiatives are not universal.

Additionally, training on breastfeeding support for healthcare providers is inadequate to address Ten Steps.

BPNI's has developed an innovative programme that can bring these changes. It is titled as "Breastfeeding Friendly Accreditation"

BPNI's breastfeeding friendly hospital accreditation could be utilised for making structural changes such as monitoring and support mechanism for breastfeeding during hospital stay.



The initiative works in two steps:

- **Self -assessment by the hospital**
- **External assessment by independent authorised assessors**

Based on the report and keys used, if the hospital fall in Grade 1, it receives accreditation certificate for 3 years.

Those who get Grade 2-5 receive ongoing technical support for a period of one year to bring them to Grade- 1.

Resources

BPNI tools are freely available for hospitals to make use short of or in preparation of accreditation. Free resources are available here [Let's Turn Our Hospitals to be "Breastfeeding Friendly" - BPNI](#)

- The model breastfeeding policy for hospitals
- Antenatal preparation programme
- Tool for monitoring breastfeeding data in the maternity hospitals
- 18 indicators to monitor programmes
- Awareness of the IMS Act - a PPT
- Template-Follow-up support after discharge for mothers
- Template -Constitution of the Hospital Breastfeeding Committee

This way hospital support to mothers and babies can be enhanced and early breastfeeding rates can be increased both in public and private hospitals

ACTION IDEAS

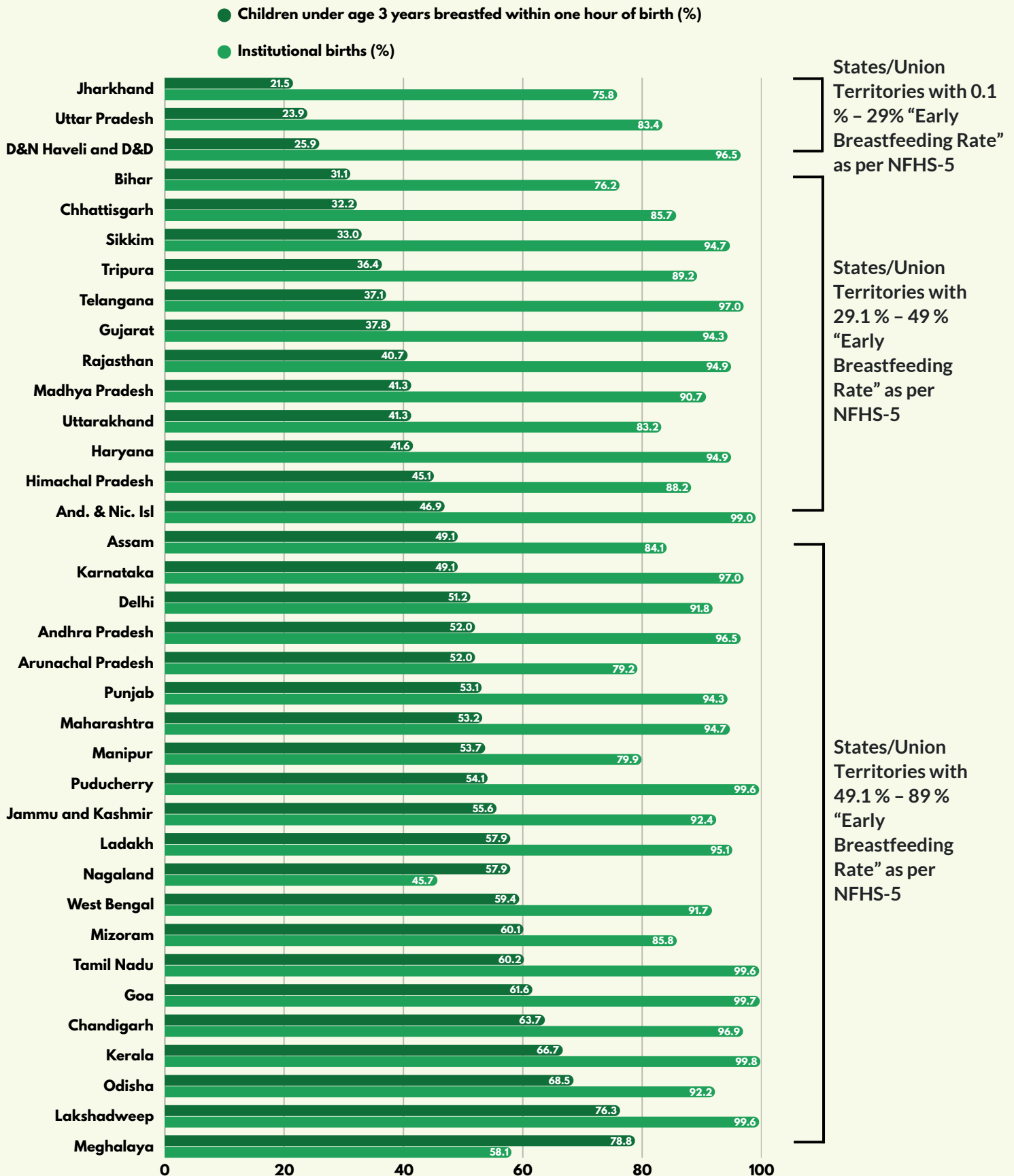
for civil society

- Check from a neighboring hospital if they have a breastfeeding policy and monitor breastfeeding data
- Share resources with the hospitals to be Breastfeeding Friendly
- Link the hospitals with BPNI team and register their interest through this link <https://www.bpni.org/breastfeeding-friendly/>
- Offer orientation via online platform

for Governments

- Strengthen implementation of MAA programme/Ten Steps
- Issue advisory to private hospitals

Fig. 3: State-wise Data on Early Breastfeeding and Institutional Deliveries Based on NFHS-5 (2021)



This data illustrates the gap that needs to be closed within the healthcare system.

Now let's move to the next priority...

protecting mothers and children from commercial influence of powdered infant milk substitutes or foods companies.

PROTECTING MOTHERS

In May 2025, the World Health Assembly (WHA) adopted a resolution to regulate the digital marketing of breastmilk substitutes. This resolution aims at regulating the digital marketing of breastmilk substitutes, having recognised their increasing influence on the online platforms. The WHO provides technical guidance on regulatory measures aimed at restricting digital marketing.

India is committed to World Health Assembly decisions. India enacted the *Infant Milk Substitutes Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, and Amendment Act 2003 (IMS Act)* that bans any kind of promotion of infant milk substitutes and infant foods by any means. This means it includes digital marketing as well. As there is increasing digital marketing in India, it would be in the best interest of the health of the mothers and children to enforce the law effectively.

The IMS Act defines

(a) "advertisement" includes any notice, circular, label, wrapper or any other document or visible representation or announcement made by means of any light, sound, smoke or gas or by means of electronic transmission or by audio or visual transmission;

As per Section 3

No person shall--

(a) advertise, or take part in the publication of any advertisement, for the distribution, sale or supply of infant milk substitutes, feeding bottles or infant foods; or

(c) take part in the promotion of infant milk substitutes, feeding bottles or infant foods.

But, according to the Indian *Baby Food Law Offenders Report 2022-23* by BPNI violations of the IMS Act are growing across India. The report documents breaches of key provisions: Section 3, which prohibits advertising or promoting infant milk substitutes and feeding bottles; Section 4, which bans inducements such as gifts, discounts, or samples to mothers or their

families; and Section 9, which restricts sponsorship of health workers or their events by baby food companies. Violations are increasingly taking place through aggressive digital marketing, including social media influencers, mother influencers with their babies, online discount campaigns, and misleading promotions on e-commerce platforms.

A particularly concerning trend is the sponsorship of doctors and medical conferences, often disguised as educational support. These actions undermine medical ethics, create conflicts of interest, and influence infant feeding decisions and directly violate the IMS Act. Despite the IMS Act's clear restrictions, monitoring and enforcement remain weak, especially in digital and health sector spaces. The rampant occurrence of such practices calls for stringent enforcement.

ACTION IDEAS

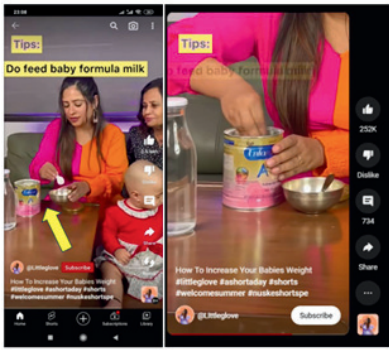
For civil societies

- While using any social media if you find any advertisement of baby foods for children under the age two years please record and report to state government and BPNI.
- Approach your state health authorities to take action.

For Governments

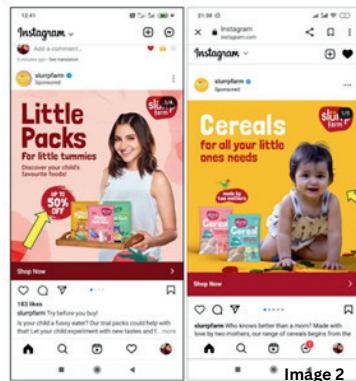
- Train hospital staff with specific modules that address IMS Act.
- Establish state-level monitoring systems for IMS Act enforcement by notifying Civil Surgeons as "authorised officers"

Recent Examples of Violation through Digital Marketing



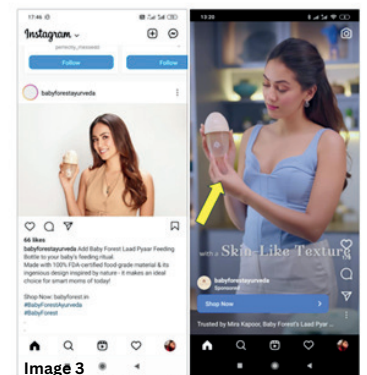
Accessed on 10/04/2023 at 8:43 am and 18/05/2023 at 3:12 pm
Link: <https://www.youtube.com/shorts/TnMf12xrdM> and <https://www.youtube.com/@Litleglove>

Image 1



Accessed on (R) 10/02/2023 at 12:41 pm and (L) 16/05/2023 at 21:38 pm

Image 2



Accessed on (R) 10/02/2023 at 5:46 pm and (L) 26/01/2023 at 1:20 pm

Image 3

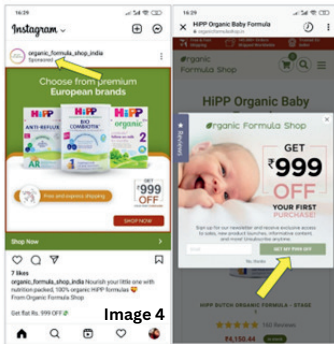
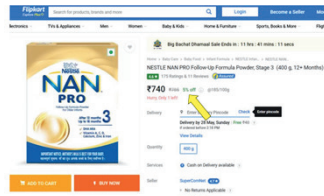


Image 4



Accessed on 15/05/2023 on www.flipkart.com Link: <https://www.flipkart.com/nestle-nan-pro-follow-up-formula-powder-stage-3/p/itm64367a930ea92>

Image 5

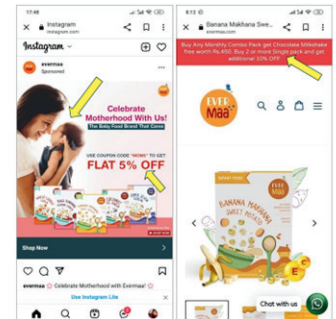


Image 6

Image 1: A mother influencer on YouTube channel @Litleglove (11.2M followers) promoted Enfamil A (8+ months), violating Sections 3(c) and 8(3) of the IMS Act, which bar non-health workers from endorsing or demonstrating infant milk substitute use.

Image 2: Slurrp Farm ran Instagram ads featuring Anushka Sharma and an infant, offering discounts on infant food products—violating Sections 3(a), 3(c), and 4(c) of the IMS Act, which prohibit advertising, promotion using celebrities or infants, and inducements to boost sales.

Image 3: Baby Forest Ayurveda advertised infant feeding bottles on Instagram featuring Meera Kapoor, violating Sections 3(a) and 3(c) of the IMS Act, which prohibit advertising and celebrity promotion of infant feeding products.

Image 4: Organic Formula Shop India's HiPP infant milk substitute Platform: Instagram Violation: Advertisement and discount offered on the products violating section 3 (a) and 4 (c) of the IMS Act that prohibits advertisement of infant milk substitutes and infant food and any kind of inducement to increase the salability of the product.

Image 5: Nestlé NAN PRO (Stage 3) was listed on Flipkart with a discount offer, violating Section 4(c) of the IMS Act, which prohibits inducements to promote the sale of infant milk substitutes.

Image 6: HiPP Infant Milk Substitute by Organic Formula Shop India was promoted on Instagram with advertisements and discount offers, violating Section 3(a) and Section 4(c) of the IMS Act, which prohibit advertising and inducements to increase the sale of infant milk substitutes.

Useful resources

- 1.WHO. https://www.who.int/health-topics/breastfeeding#tab=tab_1
- 2.WHO. (2017). Global Nutrition Targets 2025: Policy brief series. <https://www.who.int/publications/i/item/WHO-NMH-NHD-14-2>
- 3.WHO. (2022). Scope and impact of digital marketing strategies for promoting breastmilk substitutes <https://www.who.int/publications/i/item/9789240046085>
- 4.International Institute for Population Sciences (IIPS) & ICF. (2021). National Family Health Survey (NFHS-5), 2019–21: India. Mumbai: IIPS. <https://dhsprogam.com/pubs/pdf/FR375/FR375.pdf>
- 5.World Health Organization (WHO), & United Nations Children's Fund (UNICEF). (2018). Implementation guidance: Protecting, promoting and supporting breastfeeding in facilities providing maternity and newborn services – The revised Baby-friendly Hospital Initiative. Geneva: WHO. <https://www.who.int/publications/i/item/9789241513807>
- 6.World Health Organization (WHO). (2017). Protecting, promoting and supporting breastfeeding in facilities providing maternity and newborn services: Guideline. Geneva: WHO. <https://www.who.int/publications/i/item/9789241550086>
- 7.The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act. (1992, Amended 2003). Government of India. https://www.indiacode.nic.in/handle/123456789/1958?view_type=browse



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ABOUT BPNI

The Breastfeeding Promotion Network of India (BPNI) is a 33 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 serves as the global secretariat for World Breastfeeding Trends Initiative (WBTI) programme, that analyses policy & programmes and galvanises action at country level in different regions of the world. BPNI is part of the International Baby Food Action Network (IBFAN)

BPNI's ETHICAL POLICY

BPNI does not accept funds or any support from the companies manufacturing baby foods, feeding bottles or infant feeding related equipments. BPNI does not associate with organizations having conflicts of Interest. BPNI request everyone to follow this ethical stance while celebrating World Breastfeeding Week.

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