

World Breastfeeding Trends Initiative (WBTi)

Tracking, Assessing and Monitoring
Infant and Young Child Feeding Practices, Policies and Programmes Worldwide

123/150



BANGLADESH REPORT CARD 2015

The State of Policy and Programmes on Infant and Young Child Feeding (IYCF)
in Bangladesh



বাংলাদেশ ব্রেস্টফিডিং ফাউন্ডেশন

Total Score (Indicator 1-15): 123/150

1. The level of achievement of infant feeding practices is taken in 'percentage' except median duration, which is an absolute number of months.
2. For indicators 1 to 10, there is a sub set of questions leading to key achievement, indicating how a country is doing in a particular area. Each indicator has a maximum of 10.
3. In the case of indicators 11 to 15 on practices, key to rating is used from the WHO's "Infant and Young Child Feeding: A tool for assessing national practices, policies and programmes". Scoring and colour-rating are provided according to IBFAN Asia Guidelines for WBTi. Each indicator is scored out of maximum of 10.
4. IBFAN Asia Guidelines for WBTi for rating individual indicators 1 to 15 are as: 0 - 3 is rated Red, 4 - 6 is rated Yellow, 7 - 9 is rated Blue and more than 9 is rated Green.
5. Total score of all indicators 1 to 15 is calculated out of 150.

Key Gaps

1. There is no regular and systematic monitoring system for BMS Act 2013
2. Awareness of the law is not adequately addressed for professional groups, policy planners, law enforcement agency and general public
3. Insufficient service on IYCF & Maternal Nutrition in Health Centres
4. Lack of Skill training programmes for health staff
5. Maternity Protection law & facilities not in private sector
6. Insufficient Breastfeeding & IYCF counseling support in community
7. Inadequate Campaign & Communication to parents on need of timely introduction of appropriate complementary feeding
8. Less awareness by the community members and health workers on 6 month exclusive breastfeeding
9. Insufficient Resources for implementation of the IYCF policy

Key Recommendations

1. BMS Act should be implemented and monitoring should be regular
2. Ensure appropriate resource allocation and utilization for BMS Act
3. Need to ensure effective advocacy and awareness building on IYCF through all (mass, electronic and print) media
4. IYCF-programs need to be well implemented by Health Systems workers
5. Paternity leave need to be considered for law in public & private sectors
6. Strengthening of the IYCF campaign involving social media on IYCF, legal action on advertisement on BMS and baby food, complementary food
7. Maternity benefit Law Should be implemented and monitored
8. National Nutrition surveillance system need to include details of key IYCF indicators
9. Refresher's course on IYCF for community health workers should be conducted on regular basis
10. Adequate fund allocation should be done

Country Assessment Bangladesh

Process of Assessment

To conduct the World Breastfeeding Trend initiative (WBTi) assessment in Bangladesh, one representative from Bangladesh Breastfeeding Foundation received three days training on WBTi-IYCF assessment from IBFAN Asia at Delhi in the year 2008. After the training a meeting was organized in Dhaka where this issue was discussed with key stakeholders and further action resulted in preparing a report in 2008. A repeat assessment was conducted in 2012 to study trends.

For the present, National consultation meeting on World Breast Feeding Trends initiative (WBTi)-2015 was held on Thursday 02 April, 2015 in the Conference room of Institute of Public Health, Mohakhali, Dhaka, Bangladesh. The event was graced by the Chief Guest Prof. Dr. Abul Kalam Azad, Additional Director General, Director General of Health Services. Prof. Mohammad Shahidullah, President, Bangladesh Pediatric Association, and Dr. Asheque Ahmed Shahid Reza, Acting Director, Primary Health Care (PHC), MNCH & AH as Special guests. The event was chaired by Dr. Md. Alamgir Ahmed, Director, Institute of Public Health Nutrition (IPHN) & Line Director, National Nutrition Services (NNS). Dr. S. K. Roy, Chairperson, Bangladesh Breastfeeding Foundation (BBF) gave the background information of the World Breastfeeding Trends Initiative (WBTi) and gave a presentation on the WBTi out line, what is World Breastfeeding Trends Initiative (WBTi), Objectives, How it works, Assessment process, Indicator part-1, Part-2 and its outcome and told the participants that International Breastfeeding Action Network (IBFAN) initiated WBTi assessment which acts as a continuous monitoring system of IYCF activities. He led the assessment process at national level and coordinated a core group to conduct the national assessment. The core group consisted of representatives of civil society organizations, governments, professional organizations, medical colleges, UNICEF, WHO and other concerned organizations and individuals. There were three groups for the assessment. Dr. S.K Roy introduced the tool and the process to the three groups. Each member of the core group was assigned with a specific task to study the given indicators.

The 2nd expert committee meeting was held on 27 April, 2015 at IPHN, they shared the key findings and suggested how to do the WBTi reassessment process. They discussed about the data source and which source is acceptable for this reassessment. It was decided that only national level survey/data should be used and acceptable.

After that the 3rd meeting was held on 07 July, 2015 in the IPHN conference room for data finalization. Three core group leaders presented their draft document on different indicators and received comments and suggestion on 1-15 indicators. The core group members shared their findings, gaps through brainstorming to frame recommendations for action plans and suggested to make final report. Data on IYCF practices were used from the BDHS 2014 report which are national and owned by the MOHFW. Information on policy and programmes was gathered using relevant documentation. All information provided have authentic source.

Partner Organizations :

- 1.Ministry of Health and Family Welfare (MOHFW)
- 2.Ministry of Women and Children Affairs (MOWCA)
- 3.Director General of Health Services (DGHS)
- 4.Director General of Family Planning (DGFP)
- 5.Institute of Public Health (IPH)
- 6.Institute of Public Health Nutrition, (National Nutrition Service) (IPHN, NNS)
- 7.United Nations Children's Fund (UNICEF)
- 8.World Health Organization (WHO)
- 9.World Food Programme (WFP)
- 10.United States Agency For International Development (USAID)
- 11.United Nations Development Programme (UNDP)
- 12.Food & Agriculture Organization (FAO)
- 13.Bangladesh Medical Association (BMA)
- 14.Bangladesh Pediatrics Association (BPA)
- 15.Nutrition Society of Bangladesh (NSB)
- 16.Obstetrics and Gynecological Society of Bangladesh(OGSB)
- 17.Plan International Bangladesh
- 18.Concern World Wide Bangladesh (CONCERN)
- 19.Maternal and Child Health Training Institute (MCHTI)
- 20.International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR, B)
- 21.Bangladesh institute of Research and Rehabilitation in Diabetes Endocrine and Metabolic (BIRDEM)
- 22.Centre for Women and Child Health (CWCH)
- 23.Dhaka Medical Collage and Hospital (DMCH)
- 24.Shaheed Suhrawardy Medical College (ShSMC)
- 25.Institute of Child and Mother Health (ICMH)
- 26.Bangladesh University of Health Sciences (BUHS)
- 27.Care Bangladesh
- 28.Max Foundation Bangladesh
- 29.Micronutrient Initiative (MI)
- 30.Thengamara Mohila Sabuj Sangha (TMSS)
- 31.Save the Children
- 32.BRAC
- 33.Eminence Associate (Eminence)
- 34.Bangladesh Bureau of Statistic (BBS)
- 35.BAMANEH
- 36.Swanirvar Bangladesh
- 37.Population Council
- 38.Nari Maitree
- 39.Dhaka Ahsania Mission
- 40.Rupasi Bangla TV (USA), Dhaka office
- 41.Bangladesh Breastfeeding Foundation (BBF)

Convention on the Right of the Child (CRC)

CRC Commitment

The Convention on the Right of the Child (CRC) Committee considered the 5th periodic report of Bangladesh from September 14 to October 2, 2015 on 70th session. The Committee reviewed the progress of the implementation of the Convention on the Rights of the Child in Bangladesh. IBFAN submitted an alternative reports on the situation of infant and young child feeding in Bangladesh.

Recommendations of the CRC Committee 2015

In the concluding observations, Bangladesh did not receive direct recommendation on breastfeeding, but was urged to implement the Technical Guidance on child mortality which refers directly to breastfeeding and calls specifically for implementation and monitoring of the International Code of Marketing of Breastmilk Substitutes. Recommendation of the CRC Committee substantially increase budget allocations to all social sectors, in particular, education, health and child protection, including earmarked resources for children in disadvantaged or vulnerable situations who may require affirmative social measures; allocate sufficient financial and human resources to health services in all regions and upazilas to eliminate regional disparities in the provision of health services; develop and implement policies to improve health infrastructures, and intensify training programmes for all health professionals; promote the measures in place to prevent mother-to-child transmission of HIV/AIDS and develop a road-map to ensure the implementation of effective preventive measures.

Global Commitments on Infant and Young Child Feeding

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| <p>1. Global Strategy for Infant and Young Child Feeding 2002: World Health Assembly (WHA) and UNICEF adopted the Global Strategy, which sets five additional targets: national policy on infant and young child feeding, community outreach, information support, infant feeding in difficult circumstances and monitoring and evaluation.</p> <p>http://www.who.int/child-adolescent--health/New_Publications/NUTRITION/gs_ycf.pdf</p> <p>2. Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding 1990:</p> <p>http://www.unicef.org/programme/breastfeeding/innocenti.htm</p> | <p>3. World Health Assembly Resolutions: call upon Member States to implement policies and programmes to improve infant nutrition. The recent resolution adopted on May 27, 2006 calls on Member States to implement Global Strategy for Infant and Young Child Feeding and multilateral and bilateral donor arrangements and international financial institutions to direct financial resources for Member States to carry out these efforts. Resolutions 49.15, 58.32, 61.20 call upon member states to avoid conflicts of interests in programmes of child health.</p> <p>http://www.who.int/gb/ebwha/pdf_files/WHA58/WHA58_32-en.pdf</p> <p>http://www.who.int/gb/ebwha/pdf_files/A61/A61_R20-en.pdf</p> | <p>4. WHO HIV and Infant Feeding Technical Consultation Consensus Statement, Geneva, October 25-27, 2006:</p> <p>http://www.who.int/hiv/mediacentre/Infantfeedingconsensusstatement.pdf</p> <p>5. Millennium Development Goals:</p> <p>www.un.org/millenniumgoals/</p> <p>6. Innocenti Declaration 2005 on Infant and Young Child Feeding:</p> <p>www.unicef.org/nutrition/index_breastfeeding.htm</p> <p>7. Maternity Protection Convention:</p> <p>http://www.ilo.org/</p> |
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Policies and Programmes (Indicator 1-10)

Score Out of 10

1. National Policy, Programme and Coordination

Concerns national policy, plan of action, funding and coordination issues.

9.5

2. Baby Friendly Hospital Initiative

Concerns percentage BFHI hospitals, training, standard monitoring, assessment and reassessment systems.

8

3. Implementation of the International Code of Marketing of Breastmilk Substitutes

Concerns implementation of the Code as law, monitored and enforced.

9

4. Maternity Protection

Concerns paid maternity leave, paid breastfeeding breaks, national legislation encouraging work site accommodation for breastfeeding and/or childcare and ratification of ILO MPC No 183.

5.5

5. Health and Nutrition Care Systems

Concerns health provider schools and pre-service education programmes, standards and guidelines for mother-friendly childbirth procedures, in-service training programmes.

9

6. Mother Support and Community Outreach-

Community-based support for the pregnant and breastfeeding mother Concerns skilled counseling services on infant and young child feeding, and its access to all women.(During pregnancy and after birth)

9

7. Information Support

Concerns national IEC strategy for improving infant and young child feeding, actively implemented at local levels.

10

8. Infant and Young Child Feeding and HIV

Concerns policy and programmes to address infant feeding and HIV issue and on-going monitoring of the effects of interventions on infant feeding practices and health outcomes for mothers and infants.

9

9. Infant and Young Child Feeding during Emergencies

Concerns policy and programme on infant and young child feeding in emergencies and material on IYCF in emergencies integrated into pre-service and in-service training for emergency management.

10

10. Mechanisms of Monitoring and Evaluation System

Concerns monitoring, management and information system (MIS) as part of the planning and management process.

7

Practices (Indicator 11-15)

57%

Indicator 11:
Early Initiation of Breastfeeding (Score: 9/10)

14%

Indicator 14:
Bottle-feeding (Score: 6/10)

30 Months

Indicator 13: Median Duration of breastfeeding (score : 10/10)

55%

Indicator 12:
Exclusive Breastfeeding for the first 6 months (Score: 9/10)

23%

Indicator 15:
Complementary Feeding (Score: 3/10)

For detailed report please contact



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WBTi Coordinating Office



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The World Breastfeeding Trends Initiative (WBTi) is IBFAN Asia's flagship programme. WBTi is being implemented as an integral part of two projects "Global Breastfeeding Initiative for Child Survival" (GBiCS), in partnership with the Norwegian Agency for Development Cooperation (Norad) and Global Proposal for Coordinated Action of IBFAN and WABA: Protecting, Promoting and Supporting Breastfeeding through Human Rights and Gender Equality" in partnership with Swedish International Development Agency (Sida).