



Asia Pacific Conference on Breastfeeding and National Convention of BPNI

30 November – 3 December 2003, Delhi, India

Major Recommendations

The Asia Pacific Conference on Breastfeeding, held in New Delhi, India, from 30 November to 3 December, 2003, brought together over 500 participants from 38 countries and from nearly every state of India, representing mothers, governments, public interest groups, professional bodies, United Nations agencies and other international organizations. The objective was to find ways to protect, promote and support optimal infant and young child feeding; especially early and exclusive breastfeeding for the first six months, continued breastfeeding for up to two years or beyond, along with appropriate complementary feeding starting after six months. On December 3 at this conference the 'Delhi Declaration on Infant and Young Child Feeding' was adopted by the participants, who pledged to initiate, accelerate and support the actions on IYCF. Following recommendations emerged from the conference in several different areas of action.

I. POLICY & PLANNING

1. Countries/States should develop their specific plans of action on infant and young child feeding (IYCF) based on the *Global Strategy for Infant and Young Child Feeding* and *Framework of Priority Action on HIV and Infant Feeding* ensuring that the recommendations of the *Convention on the Rights of the Child* are built into the action plans.
2. Adequate budgets for implementation of the plans should be provided.
3. IYCF must be strongly anchored within the broad development agendas of national and state/provincial governments in all relevant programmes.
4. Organise national and state/provincial partners meeting for their inputs, partnership and ownership of the IYCF plan of action.
5. Review, update periodically and disseminate IYCF guidelines based on action research which should include special circumstances such as HIV and emergencies.

II. TRAINING & CAPACITY DEVELOPMENT

6. Ensure availability of standard training curricula on IYCF with local adaptation for all categories of managerial, medical, para-medical and other service providers of national programmes as well as professional bodies.
7. Incorporate IYCF training in all relevant pre-service education and national training programmes.
8. Ensure IYCF counseling training of community workers, counsellors, paramedical and medical personnel.

III. COMMUNICATION FOR BEHAVIOUR CHANGE

9. To build an enabling environment to support mothers and families, develop a communication strategy based on an assessment of local and existing feeding and caring practices with the aim of promoting positive behaviour as per the IYCF guidelines.
10. The contents of the messages should be standardized but made appropriately sensitive to local traditions, practices and needs. These messages should be disseminated using all relevant media.
11. Interpersonal communication through mother/community support groups should receive due emphasis.
12. Communication should ensure gender sensitive interventions for women, families, employees and communities.

IV. CODE IMPLEMENTATION & MONITORING

13. Enact/update national legislation as a follow up to the *International Code on Marketing of Breastmilk Substitutes* (The Code) and subsequent and relevant World Health Assembly resolutions.
14. Ensure that the provisions or contents of the Code or national legislation are widely disseminated among all stakeholders at all levels, nationally and locally in a user-friendly manner.

15. Monitor and organize campaigns to raise awareness about irresponsible marketing practices of infant feeding industry.
16. Establish a mechanism for monitoring the Code/national legislation; and appoint watch-dog agencies with adequate powers and sufficient budget provision for appropriate action against violations of the Code/national legislations.

V. MATERNITY PROTECTION

17. Institutionalize maternity protection legislation, especially for women working in the unorganized sector.
18. Put legislation in place for adequate maternity leave, so as to ensure exclusive breastfeeding for first six months.

VI. HEALTH CARE SUPPORT (REVITALIZE BFHI)

19. Revitalize baby friendly hospital initiative (BFHI) considering its demand. Publicize BFHI in health care institutions in private and public sector, among professional bodies and the general population.
20. Link health care system to “baby friendly communities” with the help of trained counsellors and family/community support groups available at household level/family level.
21. Establish ‘baby friendly care’ as a societal norm, providing standards at different levels for quality assurance.

VII. ADVOCACY & NETWORKING

22. Facilitate NGOs to work with trade unions, governments and their allies to raise awareness regarding correct practices for IYCF, especially among women employees in their respective organizations.
23. Sensitize policy makers at local, national and regional level on IYCF policies, actions and legislations, for proactive support to infant feeding and effective programme implementation.
24. Join in campaign for ‘toxic free environment’ (meaning that *human bodies are free from chemical that are residues caused by environmental contaminants*) through linking with environment and other groups.

VIII. RESEARCH

25. Undertake operational research including cost-benefit and cost-effectiveness analysis on IYCF practices for evidence based advocacy and programme implementation.
26. Include a research component in all IYCF plans and programmes ensuring no ‘conflict of interest’ and application of the Code/national legislation.

IX. MONITORING & EVALUATION

27. Establish/strengthen the programme indicators related to IYCF, keeping ‘exclusive breastfeeding for the first six months’ as a critical proxy indicator in the routine reporting system on child health, nutrition and development programmes.
28. Regularly review data on IYCF practices at all levels and provide constant feedback to stakeholders for appropriate action.

X. SPONSORSHIP

29. Partners implementing IYCF policy and planning should respect the World Health Assembly resolutions and refuse donations or sponsorship in any form or in any situation whatsoever (including emergencies), from manufacturers/dealers/ suppliers of infant formula/infant foods and related products.
30. Efforts should be made to establish mechanisms of transparency in operations to avoid any harm to the IYCF programmes and policies. The declaration of interest by all partners should be made a standard/normal practice.

Final Draft



The Asia Pacific Conference on Breastfeeding and National Convention of BPNI was organised by the Breastfeeding Promotion Network of India (BPNI), International Baby Food Action Network (IBFAN) Asia Pacific and Government of India in cooperation with UNICEF, Swedish International Development Cooperation Agency (Sida), Netherlands Ministry of Development Cooperation (DGIS) and World Alliance for Breastfeeding Action (WABA).