

“My country legislation in the field of  
children health care”

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# INFANT AND YOUNG CHILD FEEDING

- Ministry of human resource development department of women and child development (food and nutrition board) government of india 2004.
- The national nutrition policy adopted by the government of india under the aegis of the department of women and child development in 1993 and the adoption of the global strategy on infant and young child feeding by 55<sup>th</sup> world health assembly in may 2002.

# Goals

- Intensify nutrition and health education to improve infant and child feeding and caring practices.
- Enhance Early Initiation of Breastfeeding (colostrum feeding) from the current level of 15.8 per cent to 50 per cent.
- Enhance the Exclusive Breastfeeding rate for the first six months from the current rate of 55.2 per cent (for 0-3 months) to 80 per cent.
- Enhance the Complementary Feeding rate at six months from the current level of 33.5 per cent to 75 per cent.

# Principles

- To advocate the cause of infant and young child nutrition and its improvement through optimal feeding practices nationwide.
- To disseminate widely the correct norms of breastfeeding and complementary feeding from policy making level to the public at large in different parts of the country in regional languages.
- To help plan efforts for raising awareness and increasing commitment of the concerned sectors of the Government, national organizations and professional groups for achieving optimal feeding practices for infants and young children.
- To achieve the national goals for Infant and Young Child Feeding practices set by the Planning Commission for the Tenth Five Year Plan so as to achieve reduction in malnutrition levels in children.

# CONTENT

- Central and State Governments, national and international organizations and other concerned parties share responsibility for improving the feeding of infants and young children so as to bring down the prevalence of malnutrition in children, and for mobilizing required resources - human, financial and organizational.
- The primary obligation of Governments is to child feeding (IYCF) at the highest policy making level and integrate IYCF concerns existing policies and programmes.

# CONTENT

The Departments of Women and Development, and Health and Family Welfare have a special responsibility to contribute to optimal infant and young child nutrition.

National Guidelines on Infant and Young Child Feeding should form an integral part of nation-wide Integrated Child development Services (ICDS) and the Reproductive and Child Health (RCH) Programme. These need to be effectively operation analyzed through the programme managers and field functionaries of these on going programmes.

# CONTENT

□ In this context, due attention needs to be given to the monitoring of the implementation of the Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992 and its subsequent amendment.

# Practical realization

- A total 33 documents were retrieved from the governments of India, Maharashtra and Unified Andhra Pradesh.
- Thirty relevant policy documents, plan of actions and guidelines were included in the analyses; three policy documents that were related to nutrition and had no reference to IYCF were excluded.
- There was clear support for IYCF in the Twelfth Five Year Plan [2012–2017] by the Planning Commission Government of India [2012].



# Practical realization

Figure 5: Benefits of breastfeeding – an example from a training slide<sup>1</sup>

## Benefits of breastfeeding

### FOR THE BABY:

- Improved growth and nutrition status
- Less likely to die
- Increased bonding
- Lower risk of chronic diseases (diabetes, heart disease, asthma, some cancers)
- Less diarrhoea and respiratory infections
- Lower risk of overweight/obesity
- Less ear infections, GI disorders, skin conditions and SIDS
- Improved cognitive and motor development

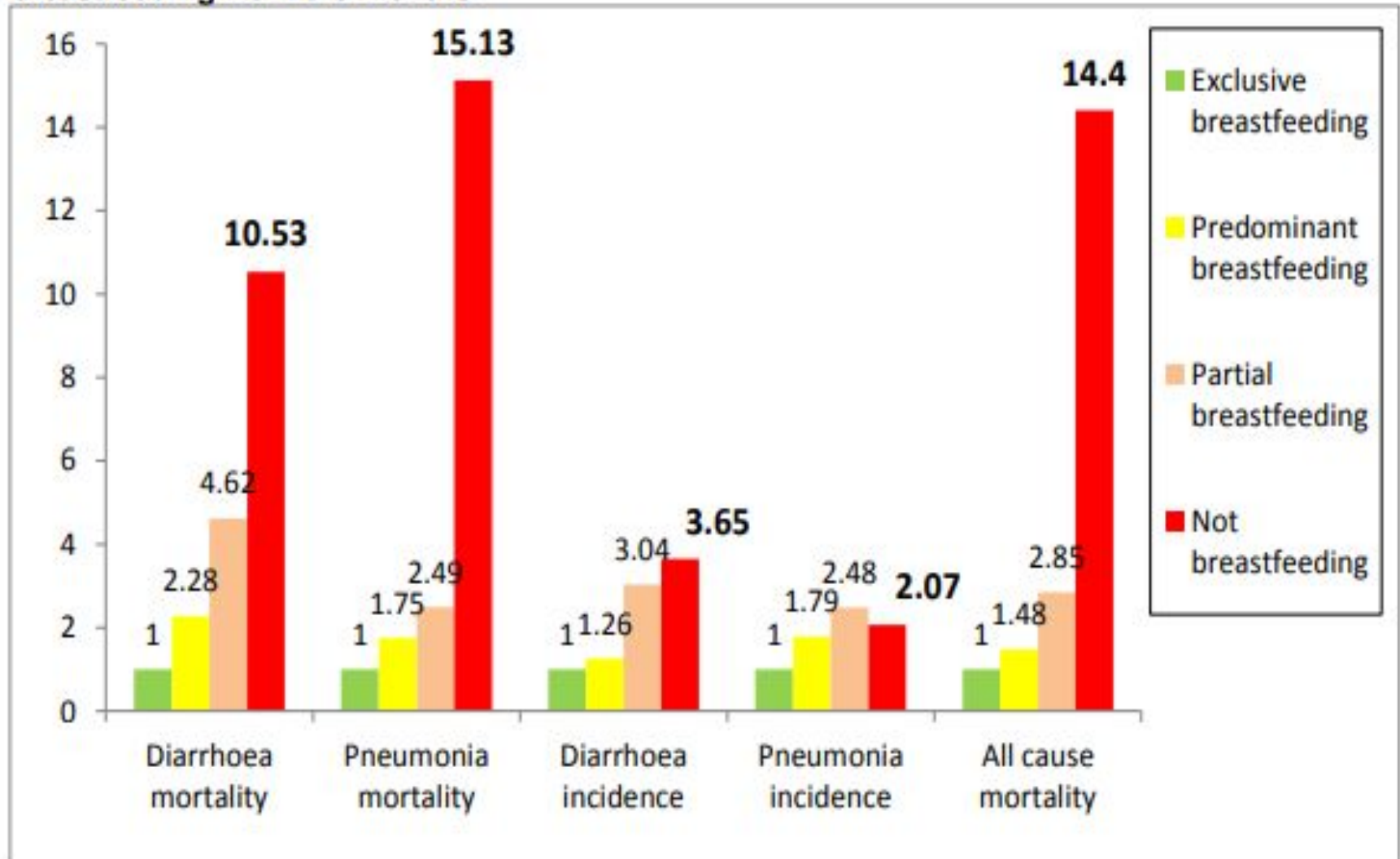


### FOR THE MOTHER:

- Mother less likely to become pregnant in early months
- Lower risk of maternal cancers (ovarian and breast cancer)
- Faster maternal recovery and weight loss post partum
- Less post-partum depression

# Practical realization

Figure 2: Relative risk of not breastfeeding for infections and mortality compared to exclusive breastfeeding from 0-5 months



# Practical realization

Figure 6: Risks of artificial feeding – an example from a training slide

## Risks of artificial feeding

### FOR THE BABY:

- More likely to die
- Poorer growth and nutrition status
- More diarrhoea and respiratory infections
- Increased ear infections, GI disorders, skin conditions and SIDS
- Interferes with bonding



- Increased risk of chronic diseases (diabetes, heart disease, asthma, some cancers)
- Overweight/obesity
- Lower scores on intelligence tests
- Slower maternal recovery and less weight loss post partum

### FOR THE MOTHER:

- Mother may become pregnant sooner in early months
- Increased risk of maternal cancers (ovarian and breast cancer)
- More post-partum depression

# SIGNIFICANCE

- The Indian government has made significant advances in policy and guidelines in child health and nutrition such as promulgating the National Food Security Act, assurance of maternity protection and food security for children, and restructuring ICDS, which now has more comprehensive provisions related to IYCF.
- The objectives of the National Guidelines on IYCF are to bring about improvement in optimal feeding practices for infants and young children and raise awareness for achieving optimal feeding practices.