

GALVANISING ACTION TO INCREASE BREASTFEEDING RATES WORLDWIDE

PROPOSAL SUMMARY

According to World Health Organization and United Nations Children's Fund, optimal breastfeeding¹ is a life saving public health intervention for infants and young children. Despite the evidence that breastfeeding could save lives of more than 820,000 children and 20,000 women, in addition it can save about 300 billion dollars globally each year by averting the healthcare costs of not breastfeeding and achieving potential gains in earning capacity in later life. Optimal feeding, especially exclusive breastfeeding and appropriate complementary feeding have been proven as effective interventions, that have the potential to simultaneously reduce the risk or burden of both under-nutrition (including wasting, stunting and micronutrient deficiency or insufficiency) and overweight, obesity or diet-related NCDs (including type 2 diabetes, cardiovascular disease and some cancers)². Inadequate attention been paid to policy and programmes, which support women to be successful in breastfeeding, is the root cause of low breastfeeding rates. The situation is alarming as globally, 44% of women begin breastfeeding within the first hour after the infant's birth. Only 40% women practice exclusive breastfeeding for the first six months. This means that about 83 million out of the approximately 136 million babies born each year are not exclusively breastfed. Only 74% continue breastfeeding for one year and 45% for two years.

This document summarizes International Baby Food Action Network (IBFAN)'s 5- year project proposal for estimating the root cause in 165 countries to help improve breastfeeding situation. This project has been developed for requesting grants from diverse donors. The full proposal, which includes citation of information sources, is available at <http://worldbreastfeedingtrends.org/about/>. It is a follow up action to the global policy framework especially the *Global Strategy for Infants and Young Child Feeding* and the World Health Assembly (WHA) resolution having set a global target to increase exclusive breastfeeding rate to 50% by 2025.

The project is designed to help strengthen policy and programmes that support women to be successful in breastfeeding and thereby enhance optimal breastfeeding practices. The project is built on IBFAN's extensive body of work in 91 countries through its flagship programme, the World Breastfeeding Trends Initiative (WBTi), which has demonstrated positive impact.

The project will be implemented by IBFAN, a 38 years old global network, of organizations and individuals having extensive experience of working on infant and young child feeding policy, capacity building and campaigns in more than 160 countries.

COLLABORATION AND PARTNERSHIPS: IBFAN will implement the project in partnership with UNICEF and WHO led Global Breastfeeding Collective (GBC) that has been formed to help achieve the WHA

¹ . Optimal Breastfeeding includes early initiation of breastfeeding within 1 hour of birth; exclusive breastfeeding for the first 6 months of life; and introduction of nutritionally adequate and safe complementary (solid) foods at 6 months together with continued breastfeeding up to 2 years of age or beyond.

² WHO 2016. The double burden of malnutrition- Policy Brief <http://apps.who.int/iris/bitstream/10665/255413/1/WHO-NMH-NHD-17.3-eng.pdf?ua=1>

targets on exclusive breastfeeding. (See <http://www.who.int/nutrition/topics/global-breastfeeding-collective/en/>). GBC is a partnership of 20 international agencies/networks and IBFAN is also a member and contributes on specific issues related to implementing the *International Code of Marketing of Breastmilk Substitutes* and the WBTi. UNICEF and WHO are the leading actors in terms of global policy, and WBTi has a distinct role to play in providing a systematic link between the global agencies and national and community-level agencies. UNICEF and WHO will support the project at the regional and country level. At the country level, collaboration with local people from multiple sectors without conflict of interests is formed that helps in achieving the outputs.

The project is specifically designed to galvanise action in 165 countries with following goals and objectives.

The primary **GOAL** of this project is to help achieve 2025 World Health Assembly target of increasing the rate of exclusive breastfeeding in the first 6 months to at least 50%, and the Global Breastfeeding Collective’s targets of improving early initiation of breastfeeding to 70%, exclusive breastfeeding to 60%, and continued breastfeeding to 80% at 1 year and 60% at 2 years by 2030.

The **SPECIFIC OBJECTIVES** are:

1. To ensure 165 countries assess and report gaps in policy and programmes over 5 years.
2. To organise national, regional and global advocacy activities to increase governments’ ownership and garner support for bridging the gaps.
3. To periodically supervise, monitor, manage, and evaluate the project and report.

The project’s **STRATEGY**: After having joint planning with UNICEF and WHO, IBFAN network will galvanise action at the country level through mobilisation and capacity building of the local country networks using the World Breastfeeding Trends Initiative (WBTi). Firstly, a country coordinator will be appointed who will organize a core group. The core group typically has 4-6 like-minded local persons/organisations and is led by the country coordinator. This group organises assessment and reporting on the status of implementation of the *Global Strategy for Infant and Young Child Feeding*. The core group would use the findings and analyse gaps in policy and programmes to develop the advocacy tools, country report and report cards. These are used to urge their governments for taking action to bridge the gaps and thus lead to change/improve policy, programme and practices. Countries already experienced in WBTi will be encouraged to repeat assessments within 3-5 years, which brings in sustainability. Additionally, 74 new countries will be mobilized to join WBTi over five years, as 91 of the 165 countries are already part of the WBTi process. (Fig. 1 explains the WBTi process).

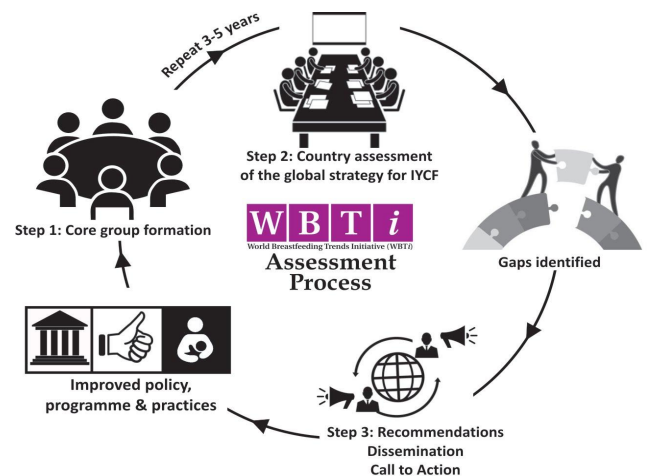


Fig. 1: WBTi Assessment Process

Regional and thematic policy briefs will be developed for global, regional and national advocacy. Global advocacy will include submissions to the United Nations Committee on the Rights of the Child, and presentations will be made at World Health Assembly, GBC, World Breastfeeding Conference 3, and other related global events. Ongoing monitoring, supervision, management and review of the project will be carried out IBFAN.

The project's **KEY OUTPUTS** will be

1. Approximately 165 country reports on implementation of the Global strategy.
2. A 'Call to Action' event in each participating country.
3. Approximately 60 reports submitted to key human rights committees in the United Nations.
4. Global WBTi report presented at the World Breastfeeding Conference- 3 at Rio de Janeiro, Brazil in 2019.
5. Global report is shared at a GBC meeting in 2022.
6. Regional and thematic policy briefs shared with all concerned.
7. A report on trends of breastfeeding/IYCF policy & programmes, based on repeat assessment of WBTi is shared in 2022.
8. Regular newswire updates on the progress of the project.
9. An external evaluation report in 2022.
10. An efficient system of coordination and management is practiced.

EXPECTED OUTCOMES:

1. Key objectives of GBC are met.
2. Several sector partners collaborate to build national consensus & momentum at country level.
3. CRC Committees make recommendations to country governments.
4. Media highlights the issue.
5. Governments and other development partners commit resources.
6. Countries initiate action to bridge the gaps in policy and programmes.
7. Improved rates of breastfeeding.
8. Strengthened capacity at regional and national level for future actions.
9. IBFAN supports the governments for implementing actions.

TARGET GROUPS: Policy makers, government officials from different sectors, UN agencies, media, civil society, health professionals, public health professionals, labour unions, and others concerned.

IMPLEMENTING PARTNERS: The consortium of 11 regional and global programme offices of IBFAN will act as implementing partners. IBFAN works according to its seven principles based on human rights and gender equity. The Breastfeeding Promotion Network of India (BPNI) will do overall coordination and serve as WBTi/Global Secretariat. BPNI has demonstrated capacity to administer and manage such projects both technically and financially. (www.bpni.org).

EVALUATION: The project will have a built in mechanism of periodic monitoring and internal evaluation. The WBTi/global secretariat will be responsible for internal evaluation and facilitate external evaluation at the end of project by a team of independent experts.

BUDGET: Five-year project funding request to different donors is \$ 3,443,749. Yearly and objective wise budget can be viewed below. Detailed budgets in the full proposal.

OBJECTIVES	Budget Year Wise (US\$)					Total (5 year) US\$
	2018	2019	2020	2021	2022	
To ensure 165 countries assess and report gaps in policy and programmes over 5 years.	296,344	271,015	308,376	285,845	231,360	1,392,940
To organise national, regional and global advocacy activities to increase governments' ownership and garner support for bridging the gaps.	167,790	216,840	236,790	171,490	246,840	1,039,750
To periodically supervise, monitor, manage, and evaluate the project and report.	141,589	155,173	163,110	171,759	215,440	847,071
Total	605,723	643,028	708,276	629,094	693,640	3,279,761
Contingency (5%)	30,286	32,151	35,414	31,455	34,682	163,988
Grand Total	636,009	675,179	743,690	660,549	728,322	3,443,749

The project offers a unique opportunity to advance the agenda of the World Health Assembly and Global Breastfeeding Collective led by UNICEF and WHO. Galvanising action does require resources both human and financial.

Submitted By:



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On Behalf of Consortium of IBFAN's regional and global programme offices



In collaboration with



WHO and UNICEF (The Global Breastfeeding Collective)