



# Dark Clouds and a Silver Lining!!

**B**reastfeeding is normal nutrition for infants and young children, and breastmilk is all a baby needs for the first six months. After six months till 2 years or beyond, to meet the growing nutritional requirements, the baby needs additional foods varying in consistency, texture, calorie value, and in diversity depending on age. This recommendation is settled globally and nationally.

While breastfeeding confers a great protective environment for infants especially from three major killers, newborn infections, diarrhea, and pneumonia, it also serves as major boost to child development as much of brain develops during first two years of life. Currently from among 26 million babies that are born in India, 20 million are not able to follow optimal practices. According to National Family Health Survey (NFHS-3), rate of exclusive breastfeeding is 46.3%, initiation of breastfeeding within one hour of birth is 24.5% and introduction of complementary feeding is 55.8% The District Level Household and Facility Survey (DLHS-3), however, shows little improvement in the initiation of breastfeeding within one hour, averaging about 40% from 534

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**Nestle has filed a revision petition in the High Court of Delhi challenging the order of the trial court framing charges on Nestle for violation of the IMS Act.**

Next hearing is on 23rd January 2013

districts.

Out of about 1.8 million child deaths in India each year, two-thirds of deaths could be related to inappropriate infant feeding practices. According to WHO, suboptimal breastfeeding is responsible for 45% neonatal infection deaths, 18% of deaths due to pneumonia and 30% of deaths due to diarrhea in children under five.

It seems absolutely justified and logical to make serious attempts to enhance breastfeeding and optimal infant and young child feeding practices in India. Traditionally, women in India have been breastfeeding babies for centuries and it has been a part of our culture but with modernization, breastfeeding practices gradually declined. We saw a decline in early 1970's, which continued in later years. It seems that sharp decline has stopped. It is also discouraging to see few States showing second decline after 2005.

There are several reasons for poor practices, and serious attempts have to be made to tackle them. Aggressive promotion of baby foods by commercial interests is a major one; other important

### Contents

- Editorial 1
- IMS Act Saved from Being Repealed! 3
- Affirmative Steps by Professionals Organisation 4
- Better Late Than Never!! 5
- Government of India: Takes Action! 10
- Haryana Taking Action 11
- Key Challenges 13
- Nestle Sponsor a Secret Meeting: Conspiracy by Nestle Unearthed!! 14



## The Statement of Objectives and Reasons

“.....Promotion of infant milk substitutes and related products like feeding bottles and teats do constitute a health hazard. Promotion of infant milk substitutes and related products has been more extensive and pervasive than the dissemination of information concerning the advantages of mother's milk and breastfeeding and contributes to decline in breastfeeding. In the absence of strong interventions designed to protect, promote and support breastfeeding, this decline can assume dangerous proportions subjecting millions of infants to greater risks of infections, malnutrition and death.....”

**Late Sh. Arjun Singh**

**Minister of Human Resource,**

**In 1992, while introducing the IMS Act in the Parliament**

reasons are lack of support to women at family and work places as well as inadequate skilled health care support.

In this Bulletin we are dealing with aggressive promotion of baby foods by the industry.

Increased availability of infant milk substitutes in the market and their aggressive promotion has been pervasive and detrimental to health of children. The link of inappropriate feeding practices and infant malnutrition has clearly been recognized. Advertisements, free samples, gifts to health workers, sponsorships, direct contacts with the mothers etc. are some of the tactics used by baby food industry, which undermine breastfeeding. Such a promotion led to a belief that bottle-feeding is as good as breastfeeding and is modern. Pervasive promotion techniques undermined women's confidence in breastfeeding particularly in making them perceive that they don't have enough milk for their babies. This is a major reason for failure of women to optimally feed their babies today. The fact that transfer of breastmilk from mother to infant is under hormonal control and influenced negatively if a mother thinks she does not have enough

milk, or she is under pain or doubts; it requires special skills for health workers to build her confidence. It is a critical for successful breastfeeding and baby food industry did a clever campaign, starting 4-5 decades back, to instill a doubts in the minds of lactating mothers that focused on 'not enough milk'.

The World Health Assembly (WHA) dealt with this situation and adopted the *International Code for Marketing of Breastmilk Substitutes* in 1981 with an aim to protect infant health by controlling marketing practices of manufacturers of breastmilk substitutes. In 1992, India followed up with '*Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992*'. However, baby food manufacturers adopted new strategies to defeat the newly enacted law. Obviously it meant promotion of their products by whatever means. Use of health claims and incentives to health professionals by sponsoring their conferences/ seminars etc. were some of the more noticeable ones. Companies continued to promote their cereal based products in media. Finding this to be defeating the spirit of IMS Act, Government of India moved an Amendment to the Act in 2003 and

strengthened it further by prohibiting any promotion by any person for the foods of babies up to two years of age. It also banned any benefits to health workers or their associations. In the year 2000, Government of India took another historic step by amending the *Cable Television Networks (Regulation) Amendment Act* to include ban on advertisements of infant milk substitutes, infant foods

and feeding bottles through the TV and Cable network.

But it did not stop companies. Nestle, being the largest company spearheaded to continue to conduct/ organise meetings for health professionals by hiding behind a foundation established by them only. The Ministry of Health and Family Welfare and Ministry of Women and Child Development were constrained to write letters to States and Union territories, and a letter to all professional associations to alert them of the tactics used by companies and called for effectively implementing the IMS Act. Some State governments also initiated action against violations. This is very welcome!

At the same time, ACASH had filed a complaint in Delhi against Nestle for allegedly violating the IMS Act, in 1994. After several years of arguments and delays in procedures, Nestle has been finally charged by the trial Court in Delhi and is now facing the criminal trial. Nestle, however, filed a writ petition in 1995 challenging the validity of the IMS Act in the High Court.

**Arun Gupta**  
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