



सत्यमेव जयते

Ministry of Health and Family Welfare
Government of India



राष्ट्रीय स्वास्थ्य मिशन



Programme for Promotion of Breastfeeding

OPERATIONAL GUIDELINES – 2016





Programme for Promotion of Breastfeeding







भारत सरकार
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
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Preface

Under the National Health Mission (NHM), a 'Life Cycle Approach' has been adopted for breaking the intergenerational cycle of undernutrition as the events leading to undernutrition often predate the birth of the child such as maternal undernutrition, adolescent pregnancy, less spacing between births and high birth order result in birth of low birth weight babies. But at the same time, delayed initiation of breastfeeding and inappropriate feeding practices in the new-born period and first year of life exacerbate undernutrition in infants and children. The 1,000 days between a woman's pregnancy and her child's second birthday offer a unique window of opportunity to shape healthier and more prosperous future. The right nutrition and care during this 1,000 day window can have a profound impact on a child's ability to grow, learn, and rise out of poverty.

Infant and Young Child Feeding (IYCF) is a set of well-known, common and scientific recommendations for appropriate feeding of newborn and children under two years. It is a known fact that onset of undernutrition among Indian children occurs at the age of six months and undernutrition levels attain peak at 24 months of age. There is overwhelming evidence about contribution of IYCF in furthering our cause of saving under five deaths to a rate of 19%.

A, nationwide programme named - 'MAA' (Mothers' Absolute Affection) to be implemented across States/UTs, starting from August 2016 provides an opportunity to improve rates of breastfeeding and appropriate child feeding practices in the country. This operational guideline details the components of the programme, its implementation modalities and also the financial guidelines. Health facilities must aim for high rates of early initiation of breastfeeding through capacity building of nurses and supportive supervision. Under the 'MAA' Programme, ASHA has been incentivized for reaching to pregnant and lactating mothers of all under two age children for advocating ideal IYCF practices in the community. Trained ANMs at all sub-centres and health personnel at all delivery points is also pertinent towards providing skilled support to mothers referred with issues.

I urge all States/UTs to accord high priority to implement this Programme.

C.K. Mishra





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Foreword

Breastfeeding within an hour of birth could prevent 20% of newborn deaths. Babies who are exclusively breastfed for the first six months of age are 11 times less likely to die from diarrhoea and 15 times less likely to die from pneumonia, which are two leading causes of death in children under-five years of age. Much remains to be done to make exclusive breastfeeding during the first six months of life the norm for infant feeding and achieve high coverages.

The trend of breastfeeding has shown an upward trend over the years. However, still there is a long way ahead. In India, as per recent survey, only 44.6% mothers initiate breastfeeding within one hour of birth in spite of the fact that about 78.7% deliver in institutions. Further 64.9% babies are exclusively breastfed during first six months and 50.5% initiate complementary feeding at 6 months. There is a need to improve these rates to provide impetus to child survival efforts.

To improve the breastfeeding and child feeding practices in the country, it has been decided to implement a nationwide programme named - 'MAA' (Mothers' Absolute Affection) across States/UTs, starting from August 2016. It involves a comprehensive set of activities on protection, promotion and support of breastfeeding and child feeding at community and facility levels. Dedicated funding is being allocated for this programme. A range of resource materials have been developed after series of expert deliberations at National level in terms of training modules and IEC materials (Print/AV). The training materials include 1 day sensitization module, 4 day training module for frontline workers and trainer's guide. There are detailed components of monitoring and provision of awards to the facilities which are able to demonstrate improved rates of breastfeeding during the 'MAA' Programme.

I am confident that successful implementation of 'MAA' (Mothers' Absolute Affection) Programme would lead to improved rates of breastfeeding and appropriate child feeding in the country.

Vandana Gurnani





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Acknowledgement

Under the National Health Mission of the Ministry of Health and Family Welfare, Government of India, improving breastfeeding practices for quality survival of newborns is one of the important interventions. In order to strengthen this, a yearlong 'MAA' (Mothers' Absolute Affection) Programme has been launched all over the country from August 2016. The operational guidelines for guidance to the States and UTs on 'MAA Programme' for promotion of breastfeeding through health system have been developed through expert consultation with various stakeholders.

The contribution of Dr. Gayatri Singh, Ms. Rachna Sharma from UNICEF and Dr. Arun Gupta, Dr. J.P. Dadhich, Dr. Shoba Suri from Breastfeeding Promotion Network of India (BPNI) is acknowledged. Dr. M.M.A. Faridi, University College of Medical Sciences, Dr. Satinder Aneja, Lady Hardinge Medical College, Dr. Praveen Kumar, LHMC are the key technical resource persons for this programme. The continuous and dedicated efforts of Dr. Sila Deb, Deputy Commissioner - Child Health and Dr. Ruchika Arora, Consultant, Child Health Division are also acknowledged in finalizing the operational guidelines.

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Contents

| | | |
|-----------|--|-----------|
| A. | ABOUT THE ‘MAA’ (MOTHERS’ ABSOLUTE AFFECTION) | 1 |
| | Programme for breastfeeding promotion through health systems | 1 |
| B. | COMPONENTS OF THE ‘MAA’ (Mothers’ Absolute Affection) PROGRAMME | 3 |
| | B1: ENABLING ENVIRONMENT & DEMAND GENERATION | 4 |
| | B2: COMMUNITY LEVEL ACTIVITIES | 6 |
| | B3: CAPACITY BUILDING OF HEALTH CARE PROVIDERS | 8 |
| | B4: AWARDS | 10 |
| C. | PROGRAMME IMPLEMENTATION | 11 |
| D. | MONITORING & EVALUATION | 12 |
| E. | COSTING OF ‘MAA’ (Mothers’ Absolute Affection) Programme | 12 |
| | Annexure I | 13 |
| | Interpersonal communication – Messages by accredited social health activists (ASHAs) during mothers’ meetings and community dialogue | 13 |
| | Annexure II | 15 |
| | Roles of various health care workers w.r.t. breastfeeding and IYCF at health facilities | 15 |



Country wide intensified breastfeeding promotion campaign targeting:

- All States & Union Territories (UTs)
- Around 3.9 crore pregnant & lactating mothers
- 8.8 lakh ASHAs
- 1.5 lakhs Sub-centres
- 17,000 Birthing Facilities/Delivery Points



ABOUT THE 'MAA' (MOTHERS' ABSOLUTE AFFECTION) Programme for breastfeeding promotion through health systems

Introduction & Rationale

Breastfeeding is an important child survival intervention. Breastfeeding within an hour of birth could prevent 20% of newborn deaths. Infants who are not breastfed are 15 times more likely to die from pneumonia and 11 times more likely to die from diarrhoea than children who are exclusively breastfed, which are two leading causes of death in children under-five years of age. In India, only 44.6% of mothers initiate breastfeeding within one hour of birth despite the fact that about 78.7% of mothers deliver in institutions (RSOC, 2014). Further 64.9% of babies are exclusively breastfed during the first six months and only 50.5% of babies between 6-8 months are given complementary foods (RSOC, 2014).

Given the overwhelming evidence available on the impact of breastfeeding on reduction of neonatal mortality and infant mortality, it is imperative that efforts are intensified to improve optimal breastfeeding practices (early initiation of breastfeeding within one hour, exclusive breastfeeding for the first six months, and continued breastfeeding for at least two years). Promotion, protection and support of breastfeeding is an important activity of the health systems and the present programme attempts to intensify efforts to promote optimal infant and young child feeding practices, with a focus on breastfeeding.



About the Programme

An intensified programme is proposed to be launched in the month of August 2016, in an attempt to bring undiluted focus on promotion of breastfeeding, in addition to ongoing efforts through the health systems. This will be called: 'MAA' (Mothers' Absolute Affection) Programme. The Programme would be launched at the national level on 5th August 2016. States and UTs may launch the MAA Programme during the month of August 2016, after its national level launch.



Goals & Objectives of the Programme

The goal of the 'MAA' Programme is to revitalize efforts towards promotion, protection and support of breastfeeding practices through health systems to achieve higher breastfeeding rates.

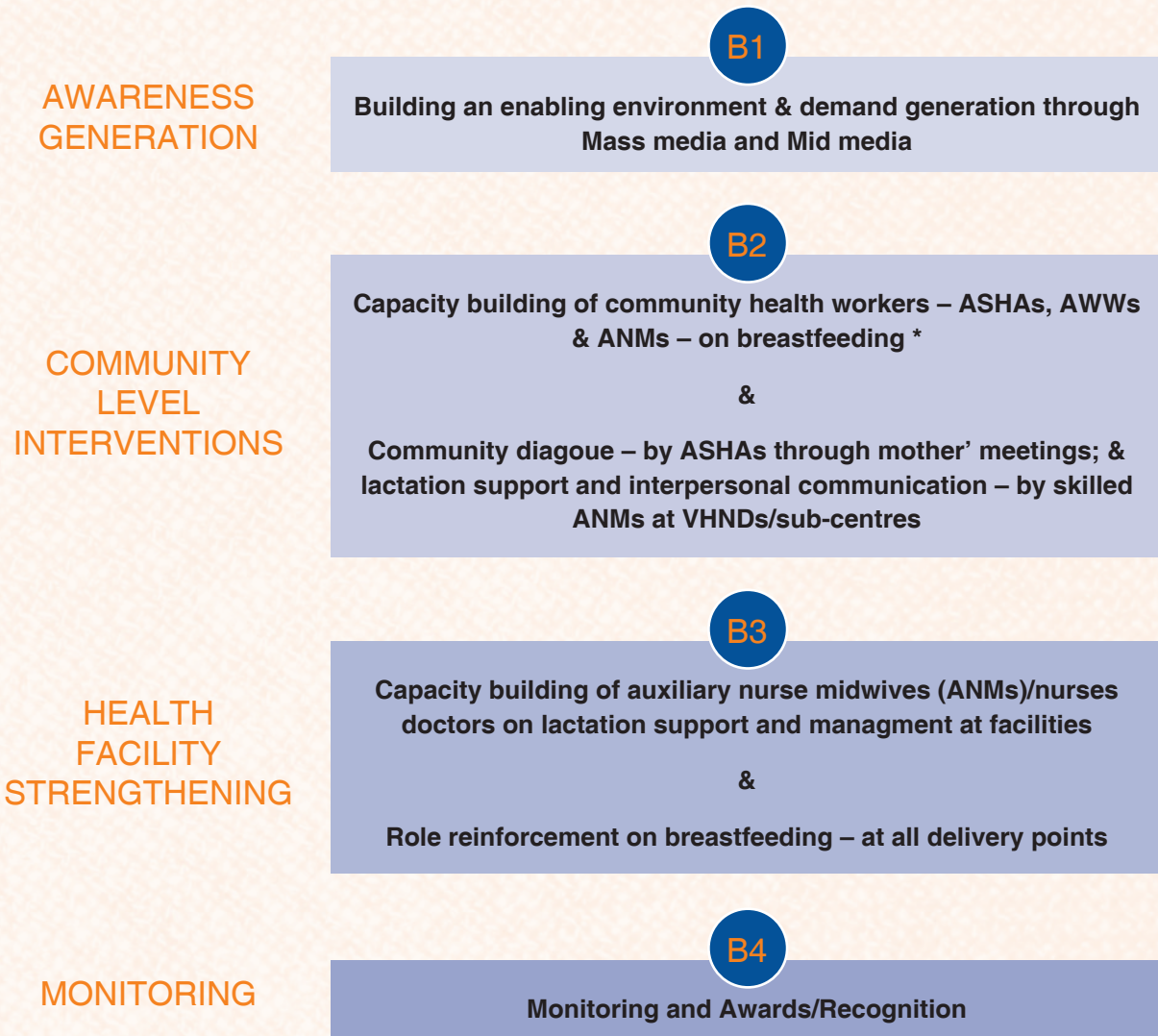
The following are the objectives of the Programme in order to achieve the above mentioned goal:

- a) Build an enabling environment for breastfeeding through awareness generation activities, targeting pregnant and lactating mothers, family members and society in order to promote optimal breastfeeding practices. Breastfeeding to be positioned as an important intervention for child survival and development.
- b) Reinforce lactation support services at public health facilities through trained healthcare providers and through skilled community health workers.
- c) To incentivize and recognize those health facilities that show high rates of breastfeeding along with processes in place for lactation management.



B. COMPONENTS OF THE 'MAA' (Mothers' Absolute Affection) PROGRAMME

The Programme will be implemented at three levels: Macro-level through mass media; meso-level in health facilities and micro-level at communities. An overview of the components of the Programme is as below:



* Anganwadi workers (AWWs) should be supporting accredited social health activists/auxiliary nurse midwives (ASHAs/ANMs) for breastfeeding.



B1. ENABLING ENVIRONMENT & DEMAND GENERATION through mass media, mid media and community

Demand generation activities complemented with counselling and skilled lactation support and management services are important for improving breastfeeding practices. Therefore, capacity building of community and facility level workers is an important component of the Programme.

To achieve maximum penetration of messages on breastfeeding and build an enabling environment for the programme, awareness generation and advocacy activities will be undertaken using multiple platforms – audio visual (AV), print and electronic – through appropriate mass media, mid media and interpersonal communication at National, State, District and Sub-district levels. Whereas, National and State level activities would largely focus on mass media and, mid media: community engagement activities would be undertaken at district and sub-district levels.

A awareness generation activities will encompass the core benefits of breastfeeding, i.e. reduced incidence of diarrhoea and pneumonia and reduced risk of hospitalization and related mortality; increase in IQ and a points; decrease in risk of non-communicable diseases in later life, etc. To make the Programme more effective in achieving its goal, certain priority areas for communication have been identified such as: early initiation of breastfeeding and 'no' to prelacteals and water; myth of not enough milk; emotional and overall support to the lactating mothers; advocacy with gatekeepers such as mother in laws/husbands and other family members to support breastfeeding; information on where to go in case of difficulty in breastfeeding; breastfeeding in case of working mothers; and ill effects of infant milk substitutes.