

# Bandar Seri Begawan Declaration on Maternal, Infant and Young Child Nutrition (MIYCN)

*29<sup>th</sup> October 2014*



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The 10<sup>th</sup> One Asia Breastfeeding Partners Forum (here in after called Forum 10) was held in Brunei Darussalam from 27-30<sup>th</sup> October 2014, and brought together over 200 participants from 21 countries and areas of Asia and Oceania region. The participants represented governments, civil society, professionals and other organizations from Afghanistan, Bangladesh, Bhutan, Brunei Darussalam, People's Republic of China, Hong Kong SAR, Chinese Taipei, India, Indonesia, Republic of Korea, Lao PDR, Nepal, Malaysia, Myanmar, Maldives, Philippines, Republic of Palau, Singapore, Sri Lanka, Thailand, and Vietnam.

The theme of the Forum was “Complementary Feeding of Infants and Young Children - Give Moms Access to Appropriate Food, No Child will Go Hungry”. Ministry of Health, Brunei Darussalam and International Baby Food Action Network (IBFAN) Asia jointly hosted it.

The Forum 10 participants, having discussed the gaps in policies and programmes on MIYCN in particular on complementary feeding;

- Recalling the global commitments enshrined in the Convention on the Rights of the Child (CRC); the Convention Against All Forms of Discrimination Against Women (CEDAW), Millennium Development Goals especially 1,4 and 5 on poverty reduction, child survival and maternal health; International Code of Marketing of Breastmilk Substitutes and subsequent relevant World Health Assembly resolutions; SAARC Model Code for the Protection of Breastfeeding and Young Child Nutrition 1996; Global Strategy for Infant and Young Child Feeding 2002; Maternity Protection Convention 2000; Innocenti Declarations of 1990 and 2005; Call for action and Declarations adopted at the One Asia Breastfeeding Partner's Forums held in Dhaka, Kathmandu, Kabul, New Delhi, Thimphu, Colombo, Jakarta, Ulaanbaatar, Luang Prabang from 2004 to 2013; and Delhi Declaration on Infant and young child feeding adopted at the World Conference on Breastfeeding 2012;
- Recalling the 63th World Health Assembly, which took place in May 2010, Member States adopted resolution WHA 63.14 on marketing of food and non-alcoholic beverages to children. Research has shown that food advertising to children is extensive and other forms of marketing of food to children are widespread across the world and a significant amount of this marketing is for foods with a high content of fat sugar or salt and that television advertising influences children's food preferences, purchase requests and consumption patterns. Set of recommendations on marketing of food and non-alcoholic beverages to children was endorsed by Member States to develop appropriate multi-sectoral approaches to deal with the marketing of food to children;
- Deeply concerned about the double burden of malnutrition which continues to be a serious problem in Asia and Oceania region;

- Deeply concerned of the lack of food security and access to drinking water and its over commercialization that displaced community empowerment;
- Deeply concerned of the marketing exploitation of malnutrition by food and beverages industries; cross branding of baby foods and food for children by companies and changing concept of healthy feeding from freshly cooked, home-based foods to pre-processed and packaged foods; Deeply concerned of the growing profit-driven marketing of processed foods for children and mothers, causing serious problems that undermine both breastfeeding and complementary feeding practices, particularly on the promotion of breastmilk substitutes as well as commercial food products for pregnant and lactating mothers;
- Recognising that most of the member countries do not have clear policy and plan of action on disasters and emergencies management in relation to MIYCN preparedness and response; where it exists, there is little attention paid to women and children, as well as Infant and Young Child Feeding (IYCF) guidelines. In this situation, the key issues are unnecessary donation of breastmilk substitutes and infant foods; distribution of processed and therapeutic foods; rampant violation of the International Code of Marketing of Breastmilk Substitutes; and lack of guideline, regulation and enforcement in this situation;
- Recognising that good complementary feeding based on indigenous foods is the sustainable way forward; strongly reaffirmed that breastfeeding is life saving measure, and is the best investment for long term, holistic human health and development; gaps exists in both policy and programmes as reported in the World Breastfeeding Trends Initiative (WBTi) reports; the importance of World Breastfeeding Trends Initiative (WBTi) in benchmarking the status of policy and programmes on IYCF by the countries; and benefits of new tools like World Breastfeeding Costing Initiative in developing action plans and budgeting them;
- Deeply concerned about the presence of commercial conflicts of interest at every level of development, implementation and regulation of nutrition policy and food standards; processed food are unhealthy and contain high level of salt, sugar, fat and harmful chemicals that are linked to NCDs and environmental degradation; and ready to use therapeutic foods containing high amount of fat which may have long term adverse effects and also replacing freshly cooked and home-based indigenous foods;
- Recognising the evidence from many countries, severe malnutrition in children can be prevented and treated by establishing good community facilities such as crèches and providing good caring environment and cooked food to children;
- Recognising that loopholes exist in the current guidelines on complementary feeding for breastfed children and often used as entry points by commercial vested interests groups to push commercial products as complementary foods; and strong evidence is required from high impact research in complementary feeding.

Agree that good complementary feeding after six months along with continued breastfeeding up to 24 months and beyond must be a political commitment, and call upon all concerned the following actions:

1. Develop clear implementation guidelines for complementary feeding for children from six months and beyond using freshly cooked, home-based indigenous foods.
2. Adopt the International Code of Marketing for Breastmilk Substitutes and relevant World Health Assembly resolutions on Infant and Young Child Nutrition by 2015 and consequently to enact legislations or strengthen existing national legislations.
3. Regulate marketing and advertising of all kinds of commercial foods for mothers and children.
4. Develop plans of action on emergency preparedness and response especially to help women and children considering they are the most vulnerable groups; supporting them with breastfeeding and appropriate as well as adequate complementary feeding including breastfeeding counselling services; and avoiding unnecessary push of infant formula and other therapeutic food products during disasters.
5. Undertake World Breastfeeding Trends initiative (WBTi) and World Breastfeeding Costing Initiative (WBCi) processes on an urgent basis to benchmark the progress and implement the Global Strategy for Infant and Young Child Feeding in its entirety.
6. All countries in Asia and Oceania should set up community-based projects or programmes to prevent malnutrition through the use of freshly cooked, home-based indigenous foods, as well as use of locally produced foods for treating malnutrition.
7. Countries facing malnutrition among women and children should take all efforts to provide appropriate food-based solutions, and stop the widespread use of commercial multiple or single micronutrient supplements.
8. Countries should establish a system of monitoring and evaluation for MIYCN implementation to track programme management and impact as well as strengthen IYCF initiatives by mainstreaming it into health care systems.
9. Policy development and regulatory mechanisms at all levels of food and nutrition policy must be free from conflict of interest.
10. Institutionalize health care worker training on breastfeeding and infant and young child feeding counselling skills at all levels in the community particularly focusing on locally grown indigenous complementary foods.

We the Forum 10 participants adopt this Declaration on **29th October 2014**.



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