# THE COMMITTEE ON THE RIGHTS OF THE CHILD Session 74 / January-February 2017

# REPORT ON THE SITUATION OF INFANT AND YOUNG CHILD FEEDING IN GEORGIA





defending breastfeeding

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Data retrieved from: WBTi report – IBFAN Georgia (2015)

## SHORT REPORT

#### The following <u>obstacles/problems</u> have been identified:

- The median duration of breastfeeding was 12 months in 2010, and there are no data available on bottle feeding. The rate of complementary feeding at 6-8 months was only 34.8% in 2009, as a result of a general early introduction of complementary feeding.
- There is no National Breastfeeding Committee since 2006 and no national coordinator; the implementation of the Baby-Friendly Hospital Initiative and Infant and Young Child Feeding policy is carried out by IBFAN Georgian Group and relies on international funding, but there is weak coordination and support from the government.
- The BFHI is not adequately implemented and only 22% of Georgian hospitals are accredited as Baby-Friendly.
- Maternity protection: paid maternity is limited to 4 months; there are no obligations for employers, especially in the informal sector, to secure breastfeeding; women working in the informal/unorganized and agriculture sector are accorded some protective measures, but they cannot benefit from the same protection as women working in the formal sector; information about maternity protection is not available to workers and employers. As of end 2015, a new Labor Code was going to be adopted but there is no information available on the progress of its adoption.
- The International Code of Marketing of Breastmilk Substitutes has been entirely integrated in the national legislation but there is no effective monitoring system and no sanctions for Code violators.
- Infant Feeding and HIV: not all health staff receives adequate training on HIV and infant feeding in emergency; the current monitoring and evaluation system is not sufficient.

### Our recommendations include:

- Improve data collection on infant and young child feeding, especially referring to the main WHO/UNICEF breastfeeding indicators. Ensure the data are collected regularly and systematically.
- Re-establish a National Breastfeeding Committee and national coordinator. Strengthen the cooperation between the Ministry of Labour, Health and Social Affairs and the local actors who have a role in the implementation of the BFHI and IYCF policy.
- Set up a BFHI programme, in order to increase the number of Baby-Friendly facilities. Create a monitoring system for reassessment of accredited facilities.
- Extend the paid maternity leave to 6 months; provide all concerned parties with adequate information on their rights linked to maternity and breastfeeding on the workplace.

- Increase the monitoring of Code violations and implement a system of sanctions for the violators. Integrate the law provisions on the Code in health staff training.
- Establish and strengthen the monitoring and evaluation on infant feeding in contexts of emergency, including training all health staff on IYCF and HIV in such contexts.