

Geneva Infant Feeding Association



78th Session of the Committee on the Rights of the Child

RECOMMENDATIONS RELATED TO BREASTFEEDING

From May 14 to June 1, 2018, the <u>Committee on the Rights of the Child</u> (CRC Committee) held its 78th Session in Geneva.

The CRC Committee reviewed the implementation of the <u>Convention on the Rights of</u> <u>the Child</u> in 5 countries: Angola, Argentina, Lesotho, Montenegro and Norway. IBFAN submitted alternative reports on the situation of infant and young child feeding in <u>Argentina</u> and <u>Lesotho</u>. Direct advocacy during the session allowed the Committee members to address relevant questions on the status of IYCF policies to the other countries under review.

Recommendations related to Breastfeeding

In its <u>Concluding Observations</u>, the CRC Committee referred specifically to breastfeeding for 4 out of the 5 countries under review: Angola, Argentina, Lesotho and Montenegro. The low rates of exclusive breastfeeding under 6 months were highlighted as a reason for concern in the concluding observations to Angola, Lesotho and Montenegro.

Breastfeeding Protection, Promotion and Support

A particular accent was given during this session to the implementation of the *International Code of Marketing of Breastmilk Substitutes,* which was recommended to almost all the countries under review: Angola, Argentina, Lesotho and Montenegro. On the contrary, only one country, Angola, received the recommendation to take into account the *OHCHR Technical Guidance* on the application of a human rights-based approach to the implementation of policies and programmes to reduce and eliminate preventable mortality and morbidity of children under 5 years of age (<u>A/HRC/27/31</u>). The Technical Guidance makes direct reference to breastfeeding protection and support, and calls for the implementation and monitoring of the International Code of Marketing of Breast-milk Substitutes. Furthermore, the CRC Committee addressed the relation between *children's rights and the business sector* in its Concluding Observations to Angola and Argentina, affirming the need to assess the impact of the business sector activity on children's



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rights and to establish a legally binding framework in order to hold businesses accountable whenever they negatively affect children's rights.

Being another pillar of breastfeeding protection, the need to extend the duration of *maternity leave* was specifically mentioned in the concluding observations to Angola.

The CRC Committee recommended an increased and more effective *promotion of breastfeeding* to Angola, Argentina, Lesotho and Montenegro. Additionally, Lesotho and Montenegro received the recommendation to strengthen the *Baby-Friendly Hospital Initiative* in the country.

Other relevant recommendations

Ensuring or strengthening *training of health professionals* involved in maternal and newborn care was urged to Angola, Argentina and Lesotho.

The recommendation to improve *data collection* on all areas of the Convention was made to the 5 countries under review. Data should be disaggregated by age, sex, disability, geographic location, and socioeconomic background. 4 out of 5 countries were also recommended to *allocate adequate resources* for children's rights realization: Angola, Lesotho, Montenegro and Norway.

Maternal and child mortality rates were highlighted as a matter of concern for 3 countries: Angola, Argentina and Lesotho. *Malnutrition and food insecurity* were also addressed in the recommendations to Argentina and Lesotho.

3 out of 5 countries received a recommendation about the need for an *independent monitoring mechanism* for children's rights: Angola, Argentina and Lesotho.

Strengthened *cooperation with civil society* in implementing the Convention on the Rights of the Child was recommended to 2 countries: Angola and Montenegro. Similarly, Norway was recommended to consult systematically with the civil society for what concerns follow-up and implementation of the recommendations of the CRC Committee.

Finally, increased *dissemination, awareness-raising and training* on the Convention on the Rights of the Child and on the relevant children's rights were recommended to 4 out of the 5 countries under review.



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CRC Committee's Concluding Observations on Infant and Young Child Feeding

2018	Country		IBFAN report	Summary of recommendations on IYCF
Session 78 – May	1	Angola (5 th to 7 th periodic report)	no	<u>Indirect – Allocation of resources (§9):</u> (b) Conduct a comprehensive assessment of the budget needs of children and allocate adequate budgetary resources, in accordance with article 4 of the Convention, for the implementation of children's rights and, in particular, increase the budget allocated to the health, education and social sectors, including considering cash plus and other social protection schemes, and address disparities on the basis of indicators related to children's rights; (c) Utilize a child-rights approach in planning the State budget, by implementing a tracking system for the allocation and use of resources for children throughout the budget[]. <u>Data collection (§10)</u> : (a) Create an integrated data collection and management system covering all areas of the Convention and disaggregated by age, sex, type of disability, geographic location, ethnic and national origin and socioeconomic background[]; (b) Ensure that the data and indicators are shared among the ministries concerned and used for the formulation, monitoring and evaluation of policies, programmes and projects for the effective implementation of the Convention at national, provincial and municipal levels; <u>Independent monitoring (§11)</u> : (a) Intensify its efforts to disseminate the Convention, including through awareness-raising and training (§12): (a) Intensify its efforts to disseminate the Convention, including through awareness-raising programmes, to parents, the wider public and children in a child friendly manner, and to legislators and judges to ensure the application of the Convention in the legislative and judicial processes; (b) Strengthen its training programmes for all professionals working with and for children, including by swiftly adopting the daft policy for teacher training and implementing a child rights based, and a train-the-trainer approach; <u>Cooperation with the civil society</u> , including children's organizations, in the planning, implementation, monitoring and evaluation of policies, plans and programmes rela





			remedies for violations [] (d) Require companies to undertake assessments, consultations and full public disclosure of the environmental, health-related and human rights impacts of their business activities and their plans to address such impacts; (e) Examine and adapt its legislative framework to ensure legal accountability of companies and their subsidiaries operating in or managed from the State party's territory; (f) Establish monitoring mechanisms for the investigation and redress of children's rights violations. <u>Health and health services (§28)</u> : (b) Effectively implement existing programmes aimed at reducing child mortality and morbidity rates, including by improving the skills of midwives and adopting quality standards for maternal and new-born care; [](f) Take into account the OHCHR technical guidance on the application of a human rights-based approach to the implementation of policies and programmes to reduce and eliminate preventable mortality and morbidity of children under five years of age; (h) Allocate the necessary financial, human and technical resources to the child health sector. Direct – Nutrition (§33): (d) Step up its efforts to promote exclusive and continued breastfeeding by providing access to materials and promote exclusive breastfeeding of infants for the first six months of their lives, with the aim of reducing mortality among newborns and children aged under five years, and adjust the duration of maternity leave to at least 14 weeks; (e) Limit the use of milk substitutes, and implement the International Code of Marketing of Breast-milk Substitutes. Link to the full Concluding Observations
2	Argentina (5 th and 6 th periodic report)	yes	Indirect – Allocation of resources (§10): (a) Allocate adequate human, financial and technical resources, at all levels of government, for the implementation of all policies, plans, programmes and legislative measures directed to children, and establish appropriate mechanisms and inclusive processes through which civil society, the public and children can participate in all stages of the budget process, including formulation, implementation and evaluation. <u>Data collection (§11):</u> (b) Expand the capacity for collecting disaggregated data on children in all areas of the Convention at different territorial levels[]; (c) Ensure that the data and indicators are shared among relevant ministries and are used for the formulation, monitoring and evaluation of policies, programmes and projects for the effective implementation of the Convention. <u>Independent monitoring (§12)</u> : take the necessary measures to ensure that the Bicameral Commission expedite the appointment of a National Ombudsperson for Children and Adolescents, with adequate allocation of human, technical and financial resources. <u>Children's rights and the business sector (§13)</u> : (a) Establish a legally binding framework for domestic and foreign businesses, ensuring that they are accountable and that their activities do not negatively affect human rights or contravene environmental and other standards, especially those relating to children's rights, including foreign operations; (b) Require all companies to undertake child-rights due diligence, in particular to carry out periodic child-rights impact assessments,





			consultations and full public disclosure of the environmental, health-related and human rights impact of their business activities and their plans to address such impact. <u>Health and health services (§30)</u> : (a) Undertake a comprehensive review of the national healthcare system to address the disparities in health services, particularly mother and child health services []. (b) Take urgent steps to address the persistently high rates of maternal and neonatal mortality; (c) Ensure availability of and equitable access to quality primary and specialised health care for children in all provinces []; (d) Increase the number of paediatricians and ensure that all medical specialists providing health services to children acquire additional specialized skills and expertise and receive further training on child and adolescent care. Direct – Nutrition (§33): (a) Take steps to urgently address cases of malnutrition in affected provinces, and systematically collect data on food security and nutrition for children, including those relevant to breastfeeding, overweight and obesity, in order to identify the root causes of child food insecurity and malnutrition; (b) Regularly monitor and assess the effectiveness of policies and programmes on child food security and nutrition; (c) Ensure that all the provisions of the International Code of Marketing of Breast-milk Substitutes are integrated into national laws to appropriately regulate the promotion of breast-milk substitutes and strengthen the promotion of exclusive breastfeeding for at least six months
3	Lesotho (2 nd periodic report)	yes	<u>Indirect – Allocation of resources (§ 11):</u> (a) Increase allocated budgetary resources specifically for children to the maximum extent possible in accordance with article 4 of the Convention; (b) Strengthen efforts to improve the efficiency of resource usage and timeliness of resource distribution in all sectors, particularly in health and education; (c) Taking note of target 16.5 of the Sustainable Development Goals to substantially reduce corruption and bribery in all their forms, take immediate measures to combat corruption and strengthen institutional capacities to effectively detect, investigate and prosecute corruption. <u>Data collection (§13):</u> [] ensure that data on children is disaggregated by age, sex, ethnic origin, national origin, geographic location and socioeconomic status for all areas covered by the Convention. <u>Independent monitoring (§14):</u> establish the Human Rights Commission (HRC) by involving the civil society organisations in this process in line with the Paris Principles and provide for the appointment of a commissioner within the Human Rights Commission who has expertise in and is specifically responsible for children's rights. <u>Dissemination, training and awareness-raising (§15)</u> : (a) Provide systematic training to parents and all professionals working with and for children; (b) Strengthen community awareness programmes, including campaigns, and efforts in order to ensure that provisions and principles of the Convention are widely





			recognised and understood in local languages and make sure that children, parents, communities and religious leaders play a key role in such initiatives; (c) Engage with community and parents in discussion on children's rights, in particular on issues such as gender, child marriage and child labour. <u>Health and health services (§44)</u> : (a) Take measures, such as rolling out the specific programme for the management of childhood illnesses, to reduce infant, under five and child mortality due to preventable causes such as high rates of malnutrition, food insecurity and rickets, acute respiratory illness, fever and diarrhoea;[] (c) Strengthen its efforts to improve access to basic health- care services for all children, particularly in rural areas, scale up capacity building for health workers for children and pregnant women and provide more resources to the mobile clinics so that they are more frequently available and reach a wider population. <u>Direct – Health and health services (§44)</u> : (f) Continue encouraging breast-feeding activities including by rolling out the baby-friendly hospitals throughout the State and fully implement the International Code of Marketing of Breast-milk Substitutes. Link to the full Concluding Observations
4	Montenegro (2 nd and 3 rd periodic report)	no	Indirect – Allocation of resources (§11): (b) Guarantee sufficient budget allocations in all areas, in particular related to health, education and child protection, and define budgetary lines for children in disadvantaged or vulnerable situations, including Roma, Ashkali and Egyptian children and children with disabilities; <u>Data collection (§13)</u> : (b) Regularly collect and analyse data covering all areas of the Convention and its Optional Protocols disaggregated by age, sex, disability, geographic location, ethnic or national origin and socioeconomic background, in order to facilitate the analysis of the situation of all children, particularly those in situations of vulnerability and especially in the areas of child abuse, sexual exploitation, the sale of children and of children in street situations; (c) Ensure that the data and indicators are shared among the relevant ministries and Government institutions and used for the formulation, monitoring and evaluation of policies, programmes and projects for the effective implementation of the Convention. <u>Dissemination, awareness-raising about children's rights to professional groups working with and for children, including parliamentarians, judges, lawyers, health personnel, teachers, school administrators, academics, social workers and media professionals, as required; (b) Strengthen community awareness programmes, including campaigns, to ensure that the provisions and principles of the Convention and its Optional Protocols are widely recognised and understood in local languages and ensure that children, parents, communities and religious leaders play a key role in such initiatives; <u>Cooperation with civil society (§18)</u>: (a) Expeditiously adopt the draft law on the</u>





			status of non-governmental organizations and ensure that it guarantees the autonomy and independence of civil society organizations in promoting children's rights; (b) Strengthen its collaboration with civil society, including non-governmental and children's organizations, in the planning, implementation, monitoring and evaluation of policies, plans and programmes related to the Convention and in the promotion of children's rights; (c) Provide civil society organizations with the support necessary to implement their activities in all areas related to the promotion and protection of the rights of children. Direct – Health and health services (§29): (b) Raise awareness about the importance of breastfeeding and vaccinations and improve immunization rates; (c) Fully implement the International Code of Marketing of Breast-milk Substitutes and the baby-friendly hospital initiative throughout the country. Link to the full Concluding Observations
5	Norway (5 th and 6 th periodic report)	no	Indirect – Allocation of resources (§6): (a) Conduct a comprehensive assessment of the budget needs for children, with a particular emphasis on children in vulnerable and marginalized situations; (b) Allocate adequate budgetary resources, in accordance with article 4 of the Convention; (c) Significantly strengthen efforts to ensure that each municipality is allocated the necessary funds to fulfil its obligations with regards to implementing children's rights; (d) Allocate earmarked funds to local authorities instead of block grants so as to ensure that funds intended for the implementation of child rights are adequately used for their intended purpose; <u>Data collection (§9)</u> : The Committee, while welcoming the availability of disaggregated data on a significant number of issues, encourages the State party to increase its efforts to ensure that the data-collection system covers the collection of disaggregated data for all areas of the Convention; <u>Dissemination, awareness-raising and training (§10)</u> : (a) Teachings on the Convention be a part of the school curricula at all levels; (b) The State party continue and strengthen systematic dissemination and training of all professional groups working for and with children, including personnel of childcare institutions, health personnel, social workers and law enforcement officials; (c) Awareness of children's rights is raised in the policy making bodies and the administration of municipalities. Link to the full Concluding Observations