

## ***80<sup>th</sup> Session of the Committee on the Rights of the Child***

### **RECOMMENDATIONS RELATED TO BREASTFEEDING**

From January 14 to February 1, 2019, the [Committee on the Rights of the Child](#) (CRC Committee) held its 80<sup>th</sup> Session in Geneva.

The CRC Committee reviewed the implementation of the [Convention on the Rights of the Child](#) in 6 countries: Bahrain, Belgium, Guinea, Italy, Japan, Syrian Arab Republic. IBFAN submitted 3 alternative report on the situation of infant and young child feeding in [Bahrain](#), [Belgium](#) and [Italy](#). Furthermore, 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 [Concluding Observations](#), the CRC Committee referred specifically to breastfeeding for five out of six countries under review. Breastfeeding was mentioned in the concluding observations to all countries with the exception of the Syrian Arab Republic. As a general recommendation on IYCF rates, the CRC Committee recommended Belgium, Italy and Japan to invest in measures to improve the ***exclusive breastfeeding rates at six months***.

#### **Breastfeeding Protection, Promotion and Support**

In the context of breastfeeding protection, the Committee recommended three States to fully implement the ***International Code of Marketing of Breastmilk Substitutes***: Bahrain, Guinea and Japan.

Additionally, Guinea and Bahrain received the recommendation to apply 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 ([A/HRC/27/31](#)). 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 Breastmilk Substitutes. Furthermore, the CRC Committee addressed the relation between ***children's rights and the business sector*** in its Concluding Observations to Guinea and Belgium. Nevertheless, the recommendation to Guinea

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was mainly focused on the negative impacts that the mining sector has on child rights. Belgium, on the other hand, was recommended to establish and implement regulations to ensure that the business sector complies with international and national human rights standards.

**Maternity protection** was highlighted in the recommendations to Bahrain, Japan and Belgium. Bahrain and Japan were advised to improve flexible work arrangements for women. Belgium and Japan were recommended to ratify ILO Convention 183 on Maternity Protection.

Concerning breastfeeding promotion, Bahrain received the recommendation to increase public awareness on breastfeeding, while Japan should also establish campaigns to provide appropriate support to mothers through counseling.

Finally, concerning breastfeeding support, the **Baby-Friendly Hospital Initiative** was mentioned in the concluding observations to Bahrain, Belgium and Japan, which were recommended to improve implementation of the initiative.

### Other relevant recommendations

Syria and Guinea received recommendations concerning the reduction of **child mortality rates**. In the case of Syria, it was emphasized that the State should particularly take measures against stunting, while Guinea was encouraged to continue investing in measures to decrease child mortality, focusing on preventable deaths. Guinea was also recommended to continue its efforts to reduce **maternal mortality**.

**HIV/AIDS** was addressed in the recommendations to Japan and Bahrain. The former was encouraged to improve access to quality, age appropriate HIV/AIDS services, while the latter should take measures aimed at reducing mother-to-child transmission.

The recommendation to improve **data collection** on all areas of the Convention was made to the 6 countries under review. Data should be disaggregated by age, sex, disability, geographic location, and socioeconomic background. Belgium was specifically recommended to systematically **collect data on breastfeeding** in accordance with WHO definitions and indicators. All countries were also recommended to **allocate adequate resources** for children's rights realization.

All countries reviewed received a recommendation about the need for an **independent monitoring mechanism** for children's rights.



International Baby Food Action Network

Geneva Infant Feeding Association



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Strengthened ***cooperation with civil society*** in implementing the Convention on the Rights of the Child was recommended to Japan, Bahrain, Syria and Italy.

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 all the six countries under review.

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

Session 80 –January 2019	Country		IBFAN report	Summary of recommendations on IYCF
	1	Bahrain  (4 <sup>th</sup> to 6 <sup>th</sup> periodic report)	yes	<p><i>Indirect – Allocation of resources (§9): the Committee recommends that the State party utilize a child-rights approach to the State budget, including by: (a) Specifying clear allocations to children in the relevant sectors and agencies, with priority to the areas of health, [...] Data collection (§10): (a) Ensure that the data and indicators cover all areas of the Convention, including on health, education and child protection, and 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; Dissemination, awareness-raising and training (§12): (a) Strengthen its awareness-raising programmes, including campaigns, on the Convention and its Optional Protocols [...]; (b) Strengthen its efforts to provide continuous capacity-building and training for professional groups working with and for children, including [...] health personnel[...] Cooperation with civil society (§13): (a) Ensure the autonomy and independence of civil society organizations and human rights defenders in promoting children's rights and in exercising their right to freedom of expression and opinion, without being subjected to harassment or arbitrary detention, including by expeditiously adopting the draft Law on Civil Society as previously recommended by the Committee (CRC/C/BHR/CO/2-3, para. 27); [...] (c) Systematically engage civil society organizations working in the field of children's rights in the planning, implementation, monitoring and evaluation of policies, plans and programmes relating to the Convention and the promotion of children's rights. Children's rights and the business sector (§14): [...] establish and implement regulations to ensure that the business sector, including multinational corporations domiciled in the State party, complies with international and national human rights, labour, environment and other standards in relation to children's rights. In particular, it recommends that the State party establish a clear regulatory framework for the industries operating in the State party to ensure that their activities do not negatively affect children's rights. Health and health services (§37): [...] (b) Intensify measures to combat obesity and raise awareness about healthy nutrition among parents, children and the general public; promote healthy eating habits, particularly among young children and adolescents; and <b>develop regulations regarding the marketing of unhealthy food that have a negative effect on children's health</b>; (c) Strengthen measures to [...] eliminate preventable infant mortality, including by applying the Office of the United Nations High Commissioner for Human Rights 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 (A/HRC/27/31); (d) Develop and implement a national programme on providing treatment for mothers affected by HIV to prevent mother-to-child transmission and ensuring early diagnosis and early initiation of treatment of children.</i></p> <p><b>Direct – Health and health services (§37): (e) Strengthen its efforts in favour of breastfeeding, including by</b></p>

			<p>taking measures to enforce Decision No. 7 of 2018 regulating the use, sale and marketing of breast-milk substitutes, in line with the International Code of Marketing of Breast-milk Substitutes; fully implementing the Child-Friendly Hospital Initiative; encouraging flexible working arrangements; and raising awareness, including through the media, of the importance of breastfeeding among families and the general public.</p> <p><a href="#">Link to the full Concluding Observations</a></p>
2	Belgium (5 <sup>th</sup> and 6 <sup>th</sup> periodic report)	yes	<p><i>Indirect – Allocation of resources (§10): (a) Utilize a child-rights approach in the elaboration of the State budget, by implementing a tracking system for the allocation and the use of resources for children throughout the budget. [...] Data collection (§11): (a) Improve its centralised data collection system, including by reviewing the national indicators on the rights of the child that should cover all areas of the Convention and be disaggregated by age, sex, ethnic and national origin, urban or rural area, geographic location, disability, migration and socioeconomic status, in order to facilitate analysis on the situation of all children; (b) Ensure that the data and indicators are shared among the ministries concerned and used for the formulation, monitoring and evaluation of laws, policies and programmes for the effective implementation of the Convention and its Optional Protocols. Independent monitoring (§12): Establish an independent human rights body at the federal level in compliance with the Paris Principles and ensure coordination between this institution and the ombudspersons. Dissemination, awareness-raising and training (§13): (a) Strengthening training of relevant stakeholders, including teachers, law-enforcement officials, judges, lawyers, health-care professionals and social workers, and children; (b) Integrating interdisciplinary children’s rights education into curricula at all levels of education. Children’s rights and the business sector (§14): (a) Establish and implement regulations to ensure that the business sector complies with international and national human rights, labour, environment and other standards, particularly with regard to children’s rights; (b) Establish a clear regulatory framework for the industries operating in the State party to ensure that their activities do not negatively affect human rights or endanger environmental and other standards, especially those relating to children’s rights. Family Environment (§27): increase the capacity, flexibility and quality of childcare services, while ensuring their accessibility to all children, including by increasing subsidized care and improving training of the relevant staff, especially in the French Community.</i></p> <p><b>Direct – Breastfeeding (§31):</b> take measures to improve the practice of exclusive breastfeeding during the first 6 months of age, systematically collect data in accordance with WHO definitions and indicators, ratify ILO Convention No. 183 and increase the number of hospitals implementing the Child Friendly Hospital Initiative.</p> <p><a href="#">Link to the full Concluding Observations</a></p>

	3	Guinea  (3 <sup>rd</sup> to 6 <sup>th</sup> periodic report)	no	<p><i>Indirect – Allocation of resources (§ 10): (a) Increase substantially the budget allocations in the areas of health and education; (b) Establish a budgeting process, which includes a child rights perspective and specifies clear allocations to children in the relevant sectors and agencies, including to the Ministry of Social Action and the Promotion of Women and Children [...] <u>Data collection (§11):</u> (a) Create an integrated and comprehensive data-collection and management system, covering all areas of the Convention and its Optional Protocols, with data disaggregated by age, sex, type of disability, geographic location, socioeconomic background and national and ethnic origin; (b) Ensure that data and indicators are shared among relevant ministries [...]. <u>Independent monitoring (§12):</u> Ensure full compliance of the National Independent Human Rights Institution set up under Organic Law No. L/008/CNT/2011 with the principles relating to the status of national institutions for the promotion and protection of human rights (the Paris Principles) and that its mechanism to receive complaints from children is known to the public, in particular children, through awareness-raising activities and to provide it with the necessary human, technical and financial resources. <u>Dissemination, training and awareness-raising (§13):</u> continue strengthening its efforts to raise awareness and to systematically provide training to all relevant professionals working with and for children, including law enforcement authorities, on the provisions of the Convention and its Optional Protocols[...]. <u>Children's rights and the business sector (§15):</u> (a) Establish, implement and monitor regulations to ensure that the mining sector complies with international and national human rights, labour, environmental, health and other standards, particularly with regard to children's rights, and apply appropriate sanctions and provide remedies for any violations found; [...] <u>Health and health services (§34):</u> (a) Ensure sufficient budgetary allocations to health services and establish clear budget lines for children's health; (b) Continue to invest in measures to decrease maternal mortality and preventable deaths of newborns and children under 5 years of age, particularly avoidable deaths related to malaria, acute respiratory illness, neonatal infections, diarrhoea, inadequate prenatal care, the lack of professional assistance during childbirth, low immunization coverage and the prevalence of malnutrition, and apply 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 (A/HRC/27/31); [...] (d) Strengthen the measures taken to decrease the disparity in access to health services, to drinking water and adequate sanitation between urban and rural areas, particularly access to ante- and postnatal care, emergency obstetric care and skilled birth attendants in rural areas and to ensure access to health care for children who are survivors of Ebola; [...] <u>Adolescent health (§35):</u> (c) Increase programmes aimed at supporting young mothers and children infected with HIV/AIDS to ensure that they receive the needed health care free of charge, including the provision of antiretroviral drugs, adopt a national strategy to combat HIV/AIDS and develop awareness-raising programmes and to combat stigmatization;</i></p> <p><b><u>Direct – Health and health services (§34):</u> (c) Promote, protect and support breastfeeding and fully implement the International Code of Marketing of Breast-milk Substitutes, including by adopting legislation to regulate the marketing of breast-milk substitutes;</b></p>
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4	Italy (5 <sup>th</sup> and 6 <sup>th</sup> periodic report)	yes	<p><i>Indirect – Allocation of resources (§8): [...] (b) Allocate adequate human, financial and technical resources at all levels of government for the implementation of all policies, plans, programmes and legislative measures directed at children, in particular, children in disadvantaged and marginalised communities; (c) 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; [...] (f) Define budgetary lines for all children, with special attention to those in disadvantaged or vulnerable situations that may require affirmative social measures, and make sure that those budgetary lines are protected even in situations of economic crisis, natural disasters or other emergencies; <u>Data collection (§9):</u> continue to improve its data collection system, in particular the Informative System of Social Services, including by continuously extending its dataset, to cover all areas of the Convention, and disaggregate data by age, sex, disability, geographic location, ethnic and national origin and socioeconomic background in order to facilitate analysis on the situation of all children, particularly those in situations of vulnerability. <u>Independent Monitoring (§10):</u> (a) Provide full independence and autonomy to the Italian Authority for Children and Adolescents; (b) Increase the human, technical and financial resources of the Authority; (c) Establish a national human rights institution in compliance with the Paris Principles. <u>Dissemination, awareness-raising and training (§11):</u> (a) Intensify its efforts to disseminate information on the Convention and its Optional Protocols, including through awareness-raising programmes, to parents, the wider public and children in a child-friendly manner, to faith-based organizations, and to legislators and judges to ensure their application in the legislative and judicial processes; (b) Strengthen its training programmes for all professionals working with and for children, including by implementing a child rights-based and train-the-trainer approach. <u>Civil society (§12):</u> guarantee the rights and freedom of action of civil society and ensure that the rescue of migrants is not considered a crime.</i></p> <p><b><u>Direct – Health and health services (§28):</u> (b) Take measures to improve the practice of exclusive breastfeeding for the first 6 months of age of children through awareness-raising measures.</b></p>	<a href="#">Link to the full Concluding Observations</a>

	5	Japan (4 <sup>th</sup> and 5 <sup>th</sup> periodic report)	no	<p><i>Indirect – Allocation of resources (§10): [...] (b) Using budget classification systems that allow expenditures related to the rights of the child to be reported, tracked and analysed; (c) Ensuring that the fluctuation or reduction in budget allocations for the delivery of services does not reduce the existing level of enjoyment of children’s rights; (d) Allocating adequate resources for implementing the Outline for the Promotion of Development and Support for Children and Young People. <u>Data collection (§11):</u> the Committee recommends that the State party improve its data collection system in all areas of the Convention, particularly in the area of [...] early childhood care and development, disaggregated by age, sex, disability, geographic location, ethnic origin and socioeconomic background, and use the data for policy design and programming. <u>Independent monitoring (§12):</u> (a) Expediently establish an independent mechanism for monitoring human rights, including a specific mechanism for monitoring children’s rights that is able to receive, investigate and address complaints by children in a child-sensitive manner; (b) Ensure the independence of such a monitoring mechanism, including with regards to its funding, mandate and immunities, so as to ensure full compliance with the principles relating to the status of national institutions for the promotion and protection of human rights (the Paris Principles). <u>Dissemination, awareness-raising and training (§13):</u> (a) Broaden the dissemination of information on the Convention, particularly among children, parents and to legislators and judges to ensure the application of the Convention in the legislative and judicial processes; (b) Periodically conduct specific training sessions on the Convention and its Optional Protocols for all persons working for and with children[...]. <u>Cooperation with civil society organizations (§14):</u> strengthen its cooperation with civil society and involve its organisations systematically throughout all stages of the implementation of the Convention. <u>Children’s rights and the business sector (§14):</u> (a) When developing the National Action Plan on Business and Human Rights, ensure that children’s rights are integrated and that companies are required 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 an impact; (b) Adopt and implement regulations to hold the business sector accountable for complying with international standards that are relevant to children’s rights, including on labour and the environment; <u>Health and health services (§33):</u> (a) Analyse the root causes of the high rate of low-weight births and introduce evidence-based measures to effectively improve the birth-weight, nutritional status of infants, children and mothers, including through the Healthy Parents and Children 21 (Second Stage) campaign; <u>Reproductive and mental health (§34):</u> (b) Improve access to quality, age-appropriate HIV/AIDS services, and education in schools; improve access to and coverage of antiretroviral therapy and prophylaxis for HIV-infected pregnant girls and provide adequate support to AIDS Clinical Centers (ACC) and its 14 regional core hospitals;</i></p> <p><b>Direct – Health and health services (§33):</b> (b) Take all measures necessary to promote exclusive breastfeeding for at least six months, including by encouraging flexible working arrangements and longer maternity leave, consider ratifying ILO Convention 183 on Maternity Protection, fully implement the <i>International Code of Marketing of Breast-milk Substitutes</i> and undertake comprehensive campaigns to provide appropriate support to mothers through counselling structures in hospitals, clinics and the</p>
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				<p>community and implement the <b>Baby-friendly Hospital Initiative</b> throughout the country.</p> <p><a href="#">Link to the full Concluding Observations</a></p>
6	Syrian Arab Republic	no	<p><i>Indirect – Allocation of resources (§11): (a) Conduct a comprehensive assessment of the budget needs of children, and allocate adequate budgetary resources for the implementation of children’s rights in all governorates, and make sure that those budgetary lines are protected even in situations such as the ongoing armed conflict; (b) Utilize a child-rights-based approach in the elaboration of the State budget, by implementing a tracking system for the allocation and the use of resources for children. <u>Data collection</u> (§12) (a) Ensure that the collection of data be disaggregated by age, sex, disability, geographic location, ethnic origin and nationality, to facilitate analysis on the situation of all children, in particular in the light of the ongoing armed conflict; (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 <u>Independent monitoring</u> (§13): establish an independent mechanism for monitoring children’s rights[...]. <u>Dissemination, awareness-raising and training</u> (§14): strengthen its measures to raise awareness of the rights enshrined in the Convention and its Optional Protocols, and to train the judiciary, the police, the army and other law enforcement professionals, as well as school, health and social workers, on the rights of the child. <u>Cooperation with civil society</u> (§15): (a) Systematically involve non-governmental and children’s organizations, in the planning, implementation, monitoring and evaluation of policies, plans and programmes related to children’s rights; (b) Ensure that reported instances of intimidation, harassment, physical attacks and arbitrary arrest of human rights defenders or civil society activists working on children’s rights are promptly and independently investigated, and those responsible for such abuses are held accountable. <u>Health and health services</u> (§37): [...] (b) Increase the budgetary allocations to health, giving due priority to health infrastructure and restoration of services; and scale up its efforts for the reconstruction, rehabilitation and equipment of health facilities for children; (c) Strengthen its efforts to ensure access to health services to all children without discrimination, paying attention to areas again under State control and those under the control of non-State armed groups, and refrain from removing health items and medicine from convoys to besieged areas; [...] (e) Take the measures necessary to combat child malnutrition, particularly stunting.</i></p> <p><b>Direct: None</b></p> <p><a href="#">Link to the full Concluding Observations</a></p>	