

## How the IMS Act has helped India

The IMS Act was enacted in 1993, which prohibited promotion of infant milk substitutes and feeding bottles but allowed promotion of the infant foods (complementary foods). Such promotion included advertisements in medical facilities, electronic and print media, medical journals as well as displays of information material in hospitals and cross-promotion of other products for which promotion is prohibited. In 2003, the IMS Act was amended by the parliament wherein promotion of infant foods was also prohibited. So now, all food products meant for children below 2 years comes under the purview of the IMS Act. Between 2005-06 and 2015-16, India has made significant gains in increasing the breastfeeding rates; with a 26% increase in the early initiation of breastfeeding and a 32% increase in the exclusive breastfeeding. Also, during this period, India witnessed a 22% decrease in stunting i.e. chronic malnutrition (Please see the table below). On the other hand, this has resulted in a very slow increase in the sale of infant and young child formula and infant foods which is causing difficulties for the formula manufacturers who can see a possible market in front of their eyes (25 million births every year!) for their products. An effective law in India has helped in keeping consumption volume of the formula (0-36 months) to 0.4 kg per infant/child in 2013 as compared to other emerging economies like China (without a strong law for regulating marketing of Baby foods), where it is 15.2 kg per infant/child. Between 2008-13, the 5-year growth rate for formula sale in India is 16.2% while in China it is 106.0%.<sup>1</sup>

**Table: Comparative data on stunting and breastfeeding practices in 15 states for which NFHS – 4 data is presently available:**

S. No.	Stunting (Height for age below -2SD) (%)	Initiation of Breastfeeding within 1 hour (%)		Exclusive Breastfeeding [0-6 months] (%)			
		NFHS 3 (2005-06) <sup>2</sup>	NFHS 4 (2015-16) <sup>3</sup>	NFHS 3	NFHS 4	NFHS 3	NFHS 4
1	Andhra Pradesh	42.7	31.4	22.4	40.1	62.7	70.2
2	Bihar	55.6	48.3	3.7	34.9	27.9	53.5
3	Goa	25.6	20.1	59.4	73.3	17.7	60.9
4	Haryana	45.7	34.0	22.1	42.4	16.9	50.3
5	Karnataka	43.7	36.2	35.7	56.4	58.0	54.2
6	Madhya Pradesh	50.0	42.0	14.9	34.5	21.6	58.2
7	Meghalaya	55.1	43.8	57.8	60.6	26.3	35.8
8	Sikkim	38.3	29.6	42.9	66.5	37.2	54.6
9	Tamil Nadu	30.9	27.1	55.2	54.7	34.1	48.3
10	Telangana		28.1		37.1		67.3
11	Tripura	35.7	24.3	33.1	44.4	36.1	70.7
12	Uttarakhand	44.4	33.5	32.9	27.8	31.2	51.0
13	West Bengal	44.6	32.5	23.5	47.5	58.6	52.3
14	Manipur	35.6	28.9	57.2	65.4	62.1	73.8
15	Maharashtra	46.3	34.4	51.8	57.5	53.0	56.6
	<b>Average</b>	<b>42.4</b>	<b>32.9</b>	<b>36.6</b>	<b>49.5</b>	<b>38.8</b>	<b>57.2</b>
	<b>% Change</b>	<b>22.4</b>		<b>26.0</b>		<b>32.1</b>	

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<sup>1</sup>Baker P, Smith J, Salmon L, Friel S, Kent G, Iellamo A, Dadhich JP, Renfrew MJ. Global trends and patterns of commercial milk-based formula sales: is an unprecedented infant and young child feeding transition underway? Public Health Nutr. 2016 May 23:1-11.

<sup>2</sup> [http://rchiips.org/nfhs/nfhs3\\_national\\_report.shtml](http://rchiips.org/nfhs/nfhs3_national_report.shtml)

<sup>3</sup> [http://rchiips.org/nfhs/factsheet\\_NFHS-4.shtml](http://rchiips.org/nfhs/factsheet_NFHS-4.shtml)