

**Regulations and criteria concerning Paragraph 1 ,  
Article 1 of the law on the promotion of  
breast-feeding and supporting mothers during  
lactation**

Regulations regarding the import of authorized kinds and quantities  
of infant formula and supplementary food.

**A-Infant formula**

**1- authorized kinds**

The import of the authorized kinds is determined by the  
Undersecretary for Treatment and Pharmaceutical Affairs through  
consultation with the National Committee on the Promotion of  
Breast - Feeding . Then the importing firms are notified.

**2- Needed quantity**

Based on the studies made to determine the number of children to  
be born every year and to be breast- fed and by taking into  
consideration the objectives set in the five- year plan to promote  
breast- feeding which has been stipulated in the Socio - Economic  
Development Plan the needed amount for the following year is  
determined by the Undersecretary for Public Health with the  
coordination of the Undersecretary for Treatment and Pharmaceutical  
Affairs.

**B. Supplementary food**

**1- Authorized kinds**

The authorized kinds are determined by the Undersecretary for  
Treatment and Pharmaceutical Affairs through consultation with the  
National Committee on Promotion of Breast - Feeding. With respect  
to the sufficient domestic production there is no need for  
supplementary - food to be imported.

**Principles and Criteria concerning Paragraph 2, Article 1 of the law on promotion of breast - feeding and supporting mothers during Lactation.**

Medical urgencies and marketing procedures is as follows:

**A- Medical urgencies**

Prescription is done in Health Houses, Rural and Urban Health Centres in the following cases:

- 1- In case of multiple - gestation; if any problem is observed in children's growth rate.
- 2- Infant's growth chart is not desirable ( despite training the mother how to let the baby suck and drain the breast frequently, to have sufficient rest, to have a balanced diet, to have psychological support of the family and to make sure the infant is not sick ) that is; if after taking its weight twice in a week , no change in infant's growth chart is observed.
- 3- Mother's chronic and incurable diseases ( such as; kidney, heart, liver diseases and mania which is diagnosed and confirmed by the physician).
- 4- In cases when mother has to take medicines regularly such as Antimetabolite Drugs, Bromocriptine, Lithium, Phenindione, Phon Cyclidine ( PCP), Ergotamine ( with the dosage to treat migraine) or cocaine and heroin addicts.
- 5- Parents' separation in which father has to take care of the infant.
- 6- Mother's death.

**B- Needed quantity of the infant formula:**

When , due to the above cases, feeding the infant with infant formula becomes inevitable, the following considerations should be taken into account:

1- In the very rare cases when the baby is completely deprived of the mother's milk the needed amounts would be as follows:

age ( in month)	number of cans per month	total
up to 6	8	48
7 & 8	6	12
9 - 12	3	12
total		72

2- If prescribed as supplementary to mother's milk the amounts would be:

age ( in month)	number of cans per month	total
up to 6	1-4	24
7 & 8	1-3	6
9 - 12	1- 2	6
total		38

In the meantime, mothers should be instructed to :

1- In order to avoid infection, feed the infant with a cup or spoon instead of feeding with bottle or rubber teat.

2- While preparing the milk they should take into account proper thickness, amount and hygienic principles. They should be warned against the dangers of feeding the infant with either too thick or too thin milk.

3- In case of multiple gestation, they should first breast- feed the babies then start feeding with infant formula.

4- They should be aware of the infant's periodical weight taking and its growth chart registration in order to make sure of the sufficiency of nutrition.



**C- supply procedures****1- In Health Houses and Rural Health Centres:**

- Based on medical urgencies and after the diagnosis and confirmation made by the Rural Health Centres, mothers are provided with Infant formula ( as main or supplementary food for the infants).

**2- In Urban Health Centres:**

- Infant formula coupon is delivered in the Centres where the physician has taken a training course on the promotion of breast - feeding.

- Determining the infant's need for Infant formula and issuance of the coupon is rested on the centre's physician.

- The coupons signed and stamped by the Centre's physician would be valid.

- Pharmacies are obliged to deliver the prescribed amount of the Infant formula on the set prices.

**D- Regulations concerning the import of milk powder:**

1- Infant formula importers are bound to deliver it to the pharmacies either directly or through the distributing firms with respect to the allowance table formulated by the Ministry of Health and Medical Education.

2- Pharmacies are bound to deliver the amount of the prescribed infant formula at the set prices in return for the valid coupons issued by the Centres.

3- In order to control the supply of infant formula, importing and distributing firms must submit their valid documents to the Ministry of Health and Medical Education containing sufficient information on the amount of the infant formula imported, distributed and consumed.

**Criteria and Principles concerning Article 2 of the law on the promotion of breast- feeding and supporting mothers during the breast- feeding**

Principles and criteria concerning the publication of any booklets, books, publications, pamphlets, brochures, Posters, tracts, films, slides and etc..... is as follows:

A- Taking the above into account the following issues should be emphasized on:

- The advantages of breast - feeding .
- Disadvantages of artificial feeding .
- Prohibiting the ads on artificial feeding
- Prohibiting the matching of infant formula or baby supplementary food to breast - feeding
- Discouraging bottle - feeding and rubber - teat .
- Prohibiting the ads on infant formula and bottle feeding, either directly or indirectly.
- Prohibiting the offering of sample products along with the publications to mothers and health personnel.

B- Ads should exclusively aim at promoting breast- feeding and should at no way suggest either directly or indirectly the consumption of the infant formula or supplementary food.

C- All publications should be approved by the National Committee on the Promotion of Breast- Feeding.

Cabinet Ministers approved the plan of action for the Article 10 of the law on promotion of breast - feeding and supporting mothers during Lactation, ratified in 1374(1995), in their meeting dated 21.9.1375(December 21, 1996), which had been proposed by the MOH & ME Under 4007 dated 31.4.1375 ( July 22, 1996).

The Plan of Action for the law on promotion of breast - feeding and supporting lactating mothers:

Article 1: Legal and real persons are exclusively allowed to import infant formula ( dried milk) and supplementary food if they comply with the standards set by the MOH & ME.

Article 2: All governmental and non-governmental organizations are to follow the standards set by the MOH & ME regarding the Paragraphs (1) & (2) Articles (1) & (2) of the law on promotion of breast - feeding and supporting lactating mothers, which will be referred to as law from now on.

Article 3: The fourth month maternity leave is only issued either by the approval of the pediatrician or Rural and Urban Health Centre's Physician with respect to the infant's ID- card to make sure he/she has not received any infant formula, unless otherwise have been decided in order to grant longer maternity leave.

Article 4: Hourly maternity leave will be issued to lactating mother up to her infant's 20 month of age only by the certification of the Health Centre confirming that the infant is breast - fed.

Note: Women under labor law are subject to their own regulations.

Article 5: Mothers under this by - law must be assigned to their previous job after the termination of their maternity leave and lactating period. Their transferal is not permissible in this period.

Article 6: Mothers under this by-law are allowed to take at most one hour leave during the daily work hours. They can take this hourly leave in three turns based on the infant's need.



Note 1: Ministries, government institutions and organizations subject to this law are required to establish proper work-hour accommodation for the lactating mothers with respect to their number.

Note 2: Regulations regarding the establishment of nurseries and kindergartens in the workshops which are governed by the labor law, will be dealt with under the Article (78) of the labor law and the by-law action of the establishment of nurseries and kindergartens.

Article 7: Power and duties of Policy Making and Supervision Committee (PMSC) on the promotion of breast-feeding is as follows:

- 1- To continue the policy of promotion of breast-feeding
- 2- To determine and notify the concerned authorities how to estimate the needed quantity and supervise the import and marketing of the infant formula and supplementary food.
- 3- To determine the procedures and supervise correct distribution of the milk powder in the Health and Treatment Network System of the country and notify the concerned authorities.
- 4- To monitor training, propagation and research to be carried out well.
- 5- To investigate the violations made and report them to the concerned authorities.
- 6- To verify the studies made on mother milk and supplementary food.
- 7- To monitor the provincial committees' activities on promotion of breast-feeding and supporting lactating mothers.

Note 1: In order to accomplish its own tasks well the committee mentioned in this article can form its own executive groups.

Note 2: The committee will prepare the instructions how to hold and direct the meetings and have them approved by the Minister of the MOH & ME.

Article 8: PMSC's decisions should come into force after the approval

of the Minister of the MOH & ME.

Article 9: The Undersecretary for public Health of the MOH & ME who is also the head of the PMSC is required to hold the meetings regularly.

Article 10: The Minister of the MOH & ME can form committees on the promotion of breast-feeding and supporting lactating mothers in the provinces where he feels needed, comprising of the following people:

- 1- Deputy Chancellor for Health Affairs of the university of medical sciences and health care of the province.
- 2- Deputy Chancellor for Treatment and Pharmaceutical Affairs of the university of medical sciences and health care of the province .
- 3- Head of the Medical Association of the province .
- 4- Two people from the provincial committee on the promotion of breast - feeding.
- 5- A gyniocologist.
- 6- A nutritionist.
- 7- A midwife.
- 8- A nurse.

The people mentioned in this article are appointed by the chancellor of the university. But provincial committees render honorary services.

Article 11: Power and functions of the provincial committees on promotion of breast - feeding and supporting lactating mothers is as follows:

- 1- Supervision over the estimated need of the province for infant formula and its distribution.
- 2- supervision over proper execution of the training,propagation, publication and research programs.



3- Reporting their activities to the PMSCS.

4- Carrying out the tasks assigned by the PMSCS

Article 12: Deputy Chancellor for Health of the university of medical sciences and health care of the province is the head of the committee on breast - feeding and supporting lactating mothers. He is required to hold the sessions regularly.

Article 13: The decisions made in provincial PMSCS are enforceable only after being approved by the Minister of the MOH & ME.

Article 14: Universities of medical sciences and members of PMSCS stipulated in this law will supervise the proper execution of the law and by - law in the producing and distributing institutions. In case of any infringement the subject will be brought up in the provincial committee which if being confirmed is referred to the competent authorities for the violator to be prosecuted.