



**Breastfeeding
Promotion Network of India**
Registered Under Societies Registration Act
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BPN/2024/80

September 16, 2024

**To,
Shri Narendra Modi
Hon'ble Prime Minister of India
Prime Minister's Office
South Block, Raisina Hill
New Delhi - 110011**

Subject: Request to Amend Rules of Business to Transfer Implementation of the IMS Act to the Ministry of Health and Family Welfare

Respected Sir,

Greetings from BPNI!

On behalf of the Breastfeeding Promotion Network of India (BPNI), I seek your attention on an urgent administrative matter affecting the implementation of the Infant Milk Substitutes, Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992 and Amendment Act 2003(IMS) Act. BPNI, child welfare NGO, has been officially monitoring this Act since 1995 as per the Gazette Notification to initiate action under section 21(1) of the IMS Act, which safeguards infant nutrition by regulating the promotion of infant milk substitutes.

Currently, the Ministry of Women and Child Development (WCD) oversees the Act's implementation, despite its provisions primarily falling within the healthcare domain. The Ministry of Health and Family Welfare (MOHFW), which has the necessary expertise and oversight of healthcare services, often states that the Act's enforcement is not within its purview, while the Ministry of WCD lacks the direct influence over health system actors who play a pivotal role in this law's enforcement.

The IMS Act is deeply rooted in public health goals, particularly concerning infant and young child feeding practices. In the statement of objects and reasons (SOR), it is clearly stated that "...*The provisions relating to the labelling and quality control of infant milk substitute feeding bottles and infant foods are proposed to be implemented through the concerned Departments in the State Government and Union Territory administrations under the overall control of Ministry of Health and Family Welfare...*" (Annexure1). In fact, almost all the operational sections of the IMS Act fall under the influence of MoHFW (Annexure 2). Even the authorised officers under its rules must be either a medical officer in charge of health administration of a local area or a medical graduate with food inspection training. (Annexure 3)

Placing its implementation under the WCD Ministry creates an administrative disconnect from the healthcare infrastructure crucial for its enforcement. This misalignment has led to enforcement challenges, weakening coordination, unattended violations and possibly impacting infant health outcomes, breastfeeding rates, and ultimately, national child nutrition goals.

We propose amending the Rules of Business to transfer the responsibility of the IMS Act's implementation to the Ministry of Health and Family Welfare (MOHFW), which is better equipped to practically enforce the IMS Act. This change will strengthen the law's enforcement and better align with national child nutrition goals.

As a policy, BPNI does not accept funds of any kind from the companies manufacturing baby foods, feeding bottles etc. and from organization/industry having conflict of interest.



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We believe that this administrative correction will ease the implementation of the IMS Act, directly contributing to the protection, promotion, and support of breastfeeding in India.

We kindly request your immediate attention to this matter, which is critical for safeguarding the health of our nation's youngest citizens.

Thank you for considering this request. We look forward to your support in making this vital change and seek an appointment to make a presentation in this matter.

Yours sincerely,

Dr. Nupur Bidla, PhD
National Coordinator, BPNI

Encl: a/a

Annexure 1: Statement of Objects and reasons (SOR), IMS Act

Annexure 2: Table 1- Operative Section Analysis of the IMS Act

Annexure 3: IMS Act, the Rules 1993 authorise medical officer