

GLOBAL BREASTFEEDING SCORECARD, 2022

PROTECTING BREASTFEEDING THROUGH FURTHER INVESTMENTS AND POLICY ACTIONS

NOTES ON METHODOLOGY

INDICATOR	COLOR CODES	DATA SOURCE	COMMENTS
Donor Funding (USD) Per Live Birth	<p><i>Green:</i> At least \$5 in donor funding per birth</p> <p><i>Yellow:</i> \$2-5 in funding per birth</p> <p><i>Orange:</i> \$1-2 in funding per birth</p> <p><i>Red:</i> <\$1 in funding per birth</p>	<p>Tracking aid for the WHA nutrition targets (2022).¹</p> <p>UN Population Division Data Portal ²</p>	<p>This indicator was calculated by dividing the amount of donor funding earmarked for exclusive breastfeeding by the number of live births in a country. All numbers are in 2015 USD.</p> <p>The numbers of births for 2022 were retrieved from UN portal.</p>
Legal Status of the Code	<p><i>Green:</i> Substantially aligned with the Code: countries have enacted legislation or adopted regulations, decrees or other legally binding measures encompassing a significant set of provisions of the Code (score of 75 - 100)</p> <p><i>Yellow:</i> Moderately aligned with the Code: countries have enacted legislation or adopted regulations, decrees or other legally binding measures encompassing a majority of provisions of the Code (score of 50 - < 75)</p> <p><i>Orange:</i> Some provisions of the Code included: countries have enacted legislation or adopted regulations, decrees or other legally binding measures covering less than half of the provisions of the Code (score of < 50)</p> <p><i>Red:</i> No legal measures: countries have taken no action or have implemented the Code only through voluntary</p>	<p>Marketing of Breast-Milk Substitutes: National Implementation of the International Code: Status Report 2022³</p>	

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		agreements or other non-legal measures (includes countries that have drafted legislation but not enacted it).		
Monitoring of the Code	<i>Green:</i>	Government is responsible and monitoring is continuously performed.	2021 UNICEF's NutriDash Internal Database ⁴	
	<i>Yellow:</i>	Government is responsible for monitoring and some monitoring occurred in 2021.		
	<i>Orange:</i>	Government was responsible for monitoring but no monitoring occurred in 2021.		
	<i>Red:</i>	Government is not responsible for monitoring.		
Standards on Maternity Leave	<i>Green:</i>	Meets recommended provisions of Recommendation R191 (at least 18 weeks of maternity leave, 100% of previous earnings paid for by a social programme)	Care at work: Investing in care leave and services for a more gender equal world of work (2022). ⁵	<p>This indicator was calculated based on three aspects of C183 and R191: length of maternity leave, amount of previous earnings paid during leave, and source of funding.</p> <ul style="list-style-type: none"> • All updates were made based on the 2022 ILO report⁵ (Table B.5), using footnotes to clarify coverage of paid leave. • Duration in days and months as stated in the national legislation were converted into weeks, based on a seven-day week and a 30-day month. Where legislation was in terms of "working days," conversion was based on a five-day week. • Parental leave was counted as maternity leave unless it was explicitly mandated to be taken by the father. • Paid leave prior to delivery was excluded from the length of paid maternity leave. • Where legislation specified a payment of 100% of salary up to a ceiling, payment was noted as "Meets 183" and not as "the R191 standards" since the application of the ceiling would prevent many mothers from receiving 100% of salary
	<i>Yellow:</i>	Meets basic provisions of Convention C183 (at least 14 weeks of maternity leave, at least 66.7% of previous earnings paid for by a social programme regardless of a ceiling)		
	<i>Orange:</i>	Meets leave length requirement of Convention C183 (14 weeks) but not all other indicators OR data unclear (this includes countries with variable amounts paid)		
	<i>Red:</i>	Doesn't meet leave length requirement of Convention C183		

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				<p>but they are likely to receive more than 66.7% (R183, article 6.5).</p> <ul style="list-style-type: none"> Where a lower percentage was specified up to a ceiling, noted as "Meets 183" if it is above 66.7%.
Standards on workplace accommodations	<p><i>Green:</i> Legislation mandates provisions of both paid breaks and facilities for nursing</p> <p><i>Yellow:</i> Legislation mandates only provisions of paid breaks</p> <p><i>Orange:</i> Legislation mandates only provisions for facilities for nursing</p> <p><i>Red:</i> There is no legal measure to mandate paid nursing breaks nor facilities for nursing</p>	Legislation mandates provisions of both paid breaks and facilities for nursing	Care at work: Investing in care leave and services for a more gender equal world of work (2022). ⁵	<p>This indicator was calculated based on two aspects of C183 and R191: Provision of paid nursing breaks and nursing facilities,</p> <ul style="list-style-type: none"> Where the legislation specifies the number of workers/female workers, provision of facilities was noted as "Meets 191."
% of Births in Baby Friendly Hospitals and Maternities	<p><i>Green:</i> $\geq 50\%$ of births in hospitals and maternities designated as "Baby-friendly"</p> <p><i>Yellow:</i> 20-50% of births in hospitals and maternities designated as "Baby-friendly"</p> <p><i>Orange:</i> 0.1-20% of births in hospitals and maternities designated as "Baby-friendly"</p> <p><i>Red:</i> No births in hospitals and maternities designated as "Baby-friendly"</p>	<p>$\geq 50\%$ of births in hospitals and maternities designated as "Baby-friendly"</p> <p>20-50% of births in hospitals and maternities designated as "Baby-friendly"</p> <p>0.1-20% of births in hospitals and maternities designated as "Baby-friendly"</p> <p>No births in hospitals and maternities designated as "Baby-friendly"</p>	National Implementation of the Baby-Friendly Hospital Initiative 2017 ⁶	
% of Births Observed on Breastfeeding at Birth	<p><i>Green:</i> $\geq 75\%$ of recent live births observed on breastfeeding at birth</p> <p><i>Yellow:</i> 50-75% of recent live births observed on breastfeeding at birth</p> <p><i>Orange:</i> 25-50% of recent live births observed on breastfeeding at birth</p> <p><i>Red:</i> $< 25\%$ of recent live births observed on breastfeeding at birth</p>	<p>$\geq 75\%$ of recent live births observed on breastfeeding at birth</p> <p>50-75% of recent live births observed on breastfeeding at birth</p> <p>25-50% of recent live births observed on breastfeeding at birth</p> <p>$< 25\%$ of recent live births observed on breastfeeding at birth</p>	The DHS Program: USAID. ⁷	

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<p>% of Caregivers Counselling on IYCF</p>	<p><i>Green:</i></p> <p><i>Yellow:</i></p> <p><i>Orange:</i></p> <p><i>Red:</i></p>	<p>≥75% of caregivers of children aged 0-23 months received IYCF counselling in health facilities</p> <p>50-75% of caregivers of children aged 0-23 months received IYCF counselling in health facilities</p> <p>25-50% of caregivers of children aged 0-23 months received IYCF counselling in health facilities</p> <p><25% of caregivers of children aged 0-23 months received IYCF counselling in health facilities</p>	<p>2021 UNICEF's NutriDash Internal Database⁴</p>	
<p>Inclusion of IYCF Support in Pre-Service Curricula</p>	<p><i>Green:</i></p> <p><i>Yellow:</i></p> <p><i>Orange:</i></p> <p><i>Red:</i></p>	<p>IYCF counselling and support are included comprehensively in pre-service curricula for both medical doctors and nurses or other health professionals.</p> <p>IYCF counselling and support are included comprehensively in pre-service curricula only for nurses or other health professionals.</p> <p>IYCF counselling and support are included comprehensively in pre-service curricula only for medical doctors.</p> <p>IYCF counselling and support are not included comprehensively in pre-service curricula for any health professionals.</p>	<p>2021 UNICEF's NutriDash Internal Database⁴</p>	
<p>% of Districts Implementing Community Breastfeeding Programs</p>	<p><i>Green:</i></p> <p><i>Yellow:</i></p> <p><i>Orange:</i></p> <p><i>Red:</i></p>	<p>≥ 75% of districts implement community breastfeeding programmes</p> <p>50-75% of districts implement community breastfeeding programmes</p> <p>25-50% of districts implement community breastfeeding programmes</p> <p>≤25% of districts implement community breastfeeding programmes</p>	<p>2021 UNICEF's NutriDash Internal Database⁴</p>	<p>Where 2020 data were missing, the most recent report from NutriDash 2014-2020 was used.</p>

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Most Recent WBTi Breastfeeding Program Assessment	<i>Green:</i> <i>Yellow:</i> <i>Orange:</i> <i>Red:</i>	Assessment conducted since 2017 Last assessment conducted between 2012 and 2016 Last assessment conducted before 2012 No assessment conducted	World Breastfeeding Trends Initiative ⁸	
Most Recent Exclusive BF Report	<i>Green:</i> <i>Yellow:</i> <i>Orange:</i> <i>Red:</i>	Data collected since 2017 Data last collected between 2012 and 2016 Data last collected before 2012 No data collected	UNICEF Infant and Young Child Feeding Database ⁹	
IYCF Support in Emergencies	<i>Green:</i> <i>Yellow:</i> <i>Orange:</i> <i>Red:</i>	Country has a programme and policy for IYCF in emergencies with government funding. Country has a programme for IYCF in emergencies with government funding but no policy. Country has a programme for IYCF in emergencies but no government funding. Country does not have a programme for IYCF in emergencies.	2021 UNICEF's NutriDash Internal Database ⁶	<ul style="list-style-type: none"> • This indicator does not indicate whether the policies are in line with the Operational Guidance on Infant and Young Child Feeding in Emergencies. • A policy may include strategies or action plans.
% of Newborns Breastfed within an Hour of Birth	<i>Green:</i> <i>Yellow:</i> <i>Orange:</i> <i>Red:</i>	≥ 70% of infants initiate breastfeeding within the first hour 50-70% of infants initiate breastfeeding within the first hour 30-50% of infants initiate breastfeeding within the first hour <30% of infants initiate breastfeeding within the first hour	UNICEF Infant and Young Child Feeding Database ⁹	Most recent estimate used.
% of Infants <6 months Breastfed Exclusively	<i>Green:</i> <i>Yellow:</i>	≥ 70% of infants are exclusively breastfed for six months	UNICEF Infant and Young Child Feeding Database ⁹	Most recent estimate used.

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		50-70% of infants are exclusively breastfed for six months		
	<i>Orange:</i>	30-50% of infants are exclusively breastfed for six months		
	<i>Red:</i>	<30% of infants are exclusively breastfed for six months		
% Breastfed at One Year of Age	<i>Green:</i>	≥ 80% of infants continue breastfeeding until one year of age	UNICEF Infant and Young Child Feeding Database ⁹	Most recent estimate used.
	<i>Yellow:</i>	60%-80% of infants continue breastfeeding until one year of age		
	<i>Orange:</i>	40-60% of infants continue breastfeeding until one year of age		
	<i>Red:</i>	<40% of infants continue breastfeeding until one year of age		
% Breastfed at 2 Years of Age	<i>Green:</i>	≥ 60% of infants continue breastfeeding until two years of age	UNICEF Infant and Young Child Feeding Database ⁹	Most recent estimate used.
	<i>Yellow:</i>	40-60% of infants continue breastfeeding until two years of age		
	<i>Orange:</i>	20-40% of infants continue breastfeeding until two years of age		
	<i>Red:</i>	<20% of infants continue breastfeeding until two years of age		

NOTES ON TARGET SETTING

The Global Breastfeeding Scorecard was first published in 2017. At that time, the Global Breastfeeding Collective committed to advocating for countries to achieve the highest level of performance on each of policy/programme indicators (i.e. those highlighted above in green). Targets were established to increase the number of countries reaching this level of performance by the year 2030. The Collective aimed to set targets that would be ambitious but also realistic over a 13 year period. As a rule of thumb, the targets were set to roughly double the number of countries meeting the “green” standard. More modest targets were agreed upon for indicators that already had a high number of countries meeting the standard (for example, half of countries already reported that most districts had community IYCF programmes, so it would be impossible to double the number of countries). On the other hand, for indicators that had a very low number of countries meeting the “green” standard, more than doubling was considered to be realistic (for example, only 6% of countries were receiving donor funding of at least \$5 per birth for breastfeeding support, so the target was set at 25% of countries).

In 2020, WHO/UNICEF/IBFAN changed the methodology for classifying legislation on the Code of Marketing of Breast-milk Substitutes and redefined categories based on “substantial alignment” with the Code rather than “Full implementation”. While this change did reduce the number of countries in green (from 21% in 2017 to 13%), it was decided not to revise the 2030 target. New indicators were added to the Scorecard in 2022. A similar logic was applied as above to set 2030 targets for these new indicators. The targets for the original indicators were not changed.

For breastfeeding rates, targets were set at the global level for 2030. For exclusive breastfeeding among infants <6 months old, a target of 60% was established to extend the timeframe from the World Health Assembly 2025 target of 50%. However, in 2018, UNICEF and WHO published an analysis of progress towards achieving the nutrition targets.¹⁰ Based on evidence of improving exclusive breastfeeding rates in many countries improving, it was determined that a goal of 70% by 2030 could be achieved and this new target was noted by the 2018 WHA to align with the timeline of the Sustainable Development Goals. The Collective adjusted its target accordingly. A comparable target for early initiation of breastfeeding was set. Global rates of continued breastfeeding at one and two years of age were higher to begin with and were considered more difficult to change, so more modest improvements were expected on these two indicators.

INDICATOR	BASELINE (YEAR)	2030 TARGET
% of countries with at least \$5 per birth in donor funding for achieving the ExBF target	6% (2017)	25%
% of countries with legislation substantially aligned with the Code	21% (2017)	40%
% of countries with monitoring mechanism for the Code	25% (2022)	50%
% of countries meeting ILO standards on length, level of payment, and source of benefits of maternity leave	12% (2017)	25%
% of countries meeting ILO standards on provision of nursing break and facilities	20% (2022)	40%
% of countries with more than 50% of births in Baby-friendly facilities	14% (2017)	40%
% of countries with at least 75% of births observed on breastfeeding at birth	15% (2022)	40%
% of countries with at least 75% of caregivers of children below 2 years of age counselled on IYCF	28% (2022)	60%
% of countries with IYCF support included in pre-service curricula	17% (2022)	40%
% of countries with at least 75% of districts implementing community-based nutrition, health or other programmes with IYCF counselling	50% (2017)	80%
% of countries having assessed their overall breastfeeding support programme in the past 5 years	40% (2017)	75%
% of countries with reported exclusive breastfeeding rates in the past 5 years	40% (2017)	75%
% of countries with programme, policy, and funding for IYCF in emergencies	23% (2022)	50%

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% of babies breastfed within an hour of birth	44% (2017)	70%
% of babies exclusively breastfed for the first 6 months	40% (2017)	70%
% of children still breastfed at 1 year of age	74% (2017)	80%
% of children still breastfed at 2 years of age	45% (2017)	60%

REFERENCES:

1. R4D. (2022). *Tracking aid for the WHA nutrition targets: Progress toward the global nutrition goals between 2015-2020*. Washington DC: Results for Development (<https://r4d.org/resources/tracking-aid-wha-nutrition-targets-global-spending-roadmap-better-data/>).
2. United Nations Population Division Data Portal. Retrieved September 16th, from <https://population.un.org/dataportal/home>.
3. WHO, UNICEF, & IBFAN. (2022). *Marketing of Breast-Milk Substitutes: National Implementation of the International Code: Status Report 2022*. Geneva: World Health Organization (<https://www.who.int/publications/i/item/9789240048799>).
4. 2021 UNICEF's NutriDash Internal Database, Retrieved October 13th, 2022 from <http://www.unicef.org/>
5. ILO. (2022). *Care at work: Investing in care leave and services for a more gender equal world of work*. Geneva: International Labour Organization (https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_838653.pdf).
6. WHO. (2017). *National Implementation of the Baby-Friendly Hospital Initiative 2017*. Geneva: World Health Organization (<https://www.who.int/publications/i/item/9789241512381>).
7. USAID (2022). The Demographic and Health Surveys. Retrieved September 13th from <https://dhsprogram.com/>
8. World Breastfeeding Trends Initiative. (2022). Retrieved October 10th, 2022 from <http://worldbreastfeedingtrends.org/>
9. UNICEF. (2022). Infant and young child feeding: Global Database. Retrieved October 21st 2022 from <https://data.unicef.org/topic/nutrition/infant-and-young-child-feeding>
10. UNICEF, WHO. (2018). The extension of the 2025 Maternal, Infant and Young Child nutrition targets to 2030. <https://data.unicef.org/resources/who-unicef-discussion-paper-nutrition-targets/>