



**International Special Dietary Foods Industries**

**FLOOR STATEMENT AT THE 64<sup>TH</sup> WORLD HEALTH ASSEMBLY ON  
AGENDA ITEM 13.13. PREVENTION AND CONTROL OF NON-COMMUNICABLE DISEASES  
MATERNAL, INFANT AND YOUNG CHILD NUTRITION: IMPLEMENTATION PLAN**

May 20, 2011

Chair, Distinguished Delegates,

The International Special Dietary Foods Industries (ISDI) and its members commend the World Health Organization (WHO) for its efforts to reduce maternal, infant and young child malnutrition, including its development of a comprehensive Implementation Plan.

ISDI members participated in the WHO consultative process and commented on the framework of the Implementation Plan. We wish to emphasize that our members support exclusive breastfeeding for six months, continued breastfeeding thereafter, and timely, safe and appropriate complementary feeding.

Our focus is on 2 key points: first, the active engagement by stakeholders, especially those in official relations with WHO, like ISDI, is critical to the overall success of the Implementation Plan. Second, as reported by the Secretariat, existing efforts “*do not comprehensively address all the nutrition challenges*”. In this context, the plan provides an opportunity for countries to address the challenges of inappropriate complementary feeding.

With respect to the need for stakeholder engagement, we echo the Secretariat’s Report stating that collaboration between partners will be crucial for successful implementation of the Plan, including the need to promote the involvement of the private sector along with the UN and other stakeholders. Our industry is well positioned to:

- A. Contribute expertise in development of new products that deliver nutrient rich foods for infants and young children;
- B. Provide expertise in deploying products to reach those who need them according to national and international guidelines;
- C. Provide educational support for families on appropriate complementary feeding and practices.

Nutrition and health outcomes for infants and young children can be achieved by incorporating evidence-based policies on complementary feeding in the implementation plan.

- A. Data from countries shows that even where breastfeeding rates have been improved, stunting and wasting at 2-years remains a challenge;

ISDI Secretariat  
50, rue de l'Association  
1000 Brussels, BELGIUM



Tel : + 32 2 209 11 43  
Fax: + 32 2 219 73 42  
E-mail: [secretariat@isdi.org](mailto:secretariat@isdi.org)

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- B. After 6 months of age, children are at increased risk of malnutrition, because of sub-optimal feeding practices and inadequacies in the composition of complementary foods;
- C. According to the supporting documents of a WHO report, locally available foods do not always meet the complete nutritional needs of infants and young children.

We strongly recommend that the following interventions be considered:

- Nutrition counseling for all women during pregnancy and lactation including for those who cannot breastfeed,
- Counseling on safe and nutritionally-adequate complementary foods,
- Counseling for timely introduction of complementary foods, and
- Education on safe preparation, use and storage of complementary foods.

Our members have valuable expertise in infant and young child nutrition. We look forward to playing a contributing role in addressing some of these challenges and to achieving improved health and wellbeing for infants and young children.

Thank you Chair.