

THE CONVENTION ON THE RIGHTS OF THE CHILD
Session 59 (Pre-Sessional Working Group)

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**REPORT ON THE SITUATION OF
INFANT AND YOUNG CHILD FEEDING
IN THE COOK ISLANDS**



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Prepared by:

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Data sourced from:

ICDC, *State of the Code by Country*, 2011.

UNICEF, *State of the World Children*, 2010.

1) General points concerning reporting to the CRC

The Cook Islands are being reviewed by the CRC Committee for the 1st time.

Besides having ratified the CRC, the Cook Islands have ratified CEDAW (2006) but they are not a State party of the CDESCR.

2) General situation concerning breastfeeding in Cook Island

General data

Neonatal mortality rate (per 1000 live births)	8 (2009)
Infant mortality rates (per 1000 live births)	13 (2009)
Under 5 mortality rate (per 1000 live births)	15 (2009)
Rank	118
% of children under 5 suffering from underweight (moderate and severe)	10 % (2005-2009)
Maternal mortality ratio (per 100'000 live births) reported	6 (2005-2009)
Delivery care coverage : Skilled attendant at birth	98 %

Breastfeeding data¹

- Initiation to breastfeeding: no indication
- Exclusive breastfeeding at 6 months: **19% (1998)**
- Complementary feeding at 9 months: no indication
- Continued breastfeeding at 24 months: no indication
- Mean duration of breastfeeding: no indication

The only information on exclusive breastfeeding at 6 months of age is too old. However it shows that the rate is very low.

Clearly there is a problem regarding data collection on health and infant and young child nutrition. It would be important that while improving this situation data on breastfeeding be included.

¹ Raratonga Infant Feeding Survey 1999, South Pacific Commission Report. Data reported in http://www.childinfo.org/breastfeeding_itycf.php

3) Government efforts to encourage breastfeeding

Unfortunately we have close to no information regarding the health system and in particular the protection, promotion and support of breastfeeding in the Cook Islands.

Specific information concerning the International Code of Marketing of Breastmilk Substitutes:

The International Code Documentation Centre has collected information regarding the protection of breastfeeding related to the marketing of breast-milk substitutes in the Cook Islands. Unfortunately there is no law but only a voluntary agreement which contains a few protective provisions.

The Committee may want to suggest that a law be drafted that contains at least the main provisions of the International Code and the subsequent relevant WHA resolutions.

Monitoring of these laws:

We have no monitoring regarding the monitoring of the agreement.

4) Baby Friendly Hospital Initiative (BFHI)

In 2002 UNICEF declared that **NO** hospitals or maternity clinics were baby friendly in the Cook Islands. This may have changed since then but we have no data to suggest this. This is a deplorable situation and should be examined closely to see what the reasons are.

The Committee may want to point to this as still another indicator of serious lack of information and therefore probably of care, protection and support in many fields of health in the Cook Islands.

5) Maternity protection for working women

The ILO has no information about maternity protection legislation.

7) Obstacles and recommendations

The following obstacles/problems have been identified:

- The first and main problem we have encountered is lack of data and of general information concerning the country and its health and nutrition situation, let alone what refers to children, and beyond that, to breastfeeding.

- Baby-friendly hospitals do not exist according to the last data, even though the country is small and it may be easy to implement such initiative.

Our recommendations include:

- Set up a **data collection system** that includes all fields of health and nutrition, including information related to breastfeeding
- Improve the situation of the **marketing of breastmilk substitutes** by first monitoring the situation regarding breastfeeding protection and designing a law (and implementation regulation) that covers all points of the International Code and subsequent relevant WHA resolutions.
- Design and implement a comprehensive **infant and young child feeding policy**, that follows closely the WHO recommendations on exclusive breastfeeding and continued breastfeeding, sets up a BF Committee, and monitors progress.
- Develop a **Baby-friendly hospital initiative**.
- Provide information regarding maternity protection legislation and efforts made to assist parents in their work/family responsibilities (including the development of crèches).