Breastfeeding reduces risk of gastro-enteritis, respiratory infections, allergies, diabetes, obesity...

A survey of the state of the International Code of Marketing of Breastmilk Substitutes and subsequent WHA Resolutions

**The International Code**

The International Code* aims to promote safe and adequate nutrition for infants, by protecting breastfeeding and ensuring appropriate marketing of breastmilk substitutes. The Code applies to all products marketed as partial or total replacement for breastmilk, such as infant formula, follow-up formula, special formula and cereals, juices, vegetable mixes and baby teas promoted for use before 6 months of age. It also applies to feeding bottles and teats.

**The Code:**
- Bans all advertising and promotion of products to the general public.
- Bans samples and gifts to mothers.
- Requires information materials to advocate for breastfeeding, to warn of the risks of artificial feeding and NOT contain pictures of babies or text that idealise the use of breastmilk substitutes.
- Bans the use of the health care system to promote breastmilk substitutes.
- Bans free or low-cost supplies of breastmilk substitutes.
- Allows health professionals to receive samples but only for research purposes and bans gifts.
- Demands that product information be factual and scientific.
- Bans sales incentives for breastmilk substitutes and contact with mothers.
- Requires that labels inform fully about the correct use of infant formula and the risks of misuse.
- Requires labels to NOT discourage breastfeeding.

Monitoring was carried out from September 2003 to September 2004 by the UK IBFAN group, Baby Milk Action, and a team of trained monitors. Concerned members of the public have also reported violations via the site of the Baby Feeding Law Group, the ad hoc grouping of UK health worker bodies campaigning for UK regulations to be brought into line with the Code. All submissions have been checked before inclusion.

Breastfeeding rates in the United Kingdom are low. 90% of mothers who stop breastfeeding by 6 weeks say they wanted to breastfeed for longer. Support for breastfeeding in the health care system is sometimes lacking and mother-support groups struggle for resources, creating a vacuum which is eagerly filled by baby food companies which present breastfeeding as problematic and artificial feeding as the solution when problems arise. Increasingly baby food companies are training health workers on infant nutrition and even running ante-natal and post-natal classes. Perhaps it should not be a surprise, therefore, that a Department of Health survey published in May 2004 found that “Over a third (34%) of women believe that modern infant formula milks are very similar or the same as breast milk.” (Source: Myths stop women giving babies the best start in life.)

The United Nations Committee on the Rights of the Child has expressed concern at the low breastfeeding rates in the UK and has called on the Government to implement the Code. The Government’s modest target to increase breastfeeding initiation rates is hampered by company promotion, which violates the Code, but is permitted by UK law. Monitoring has found a surprising amount of illegal promotion as well as Code violations.

**Evidence of Code violations**

**Promotion to the public**

Advertising of breastmilk substitutes is widespread in all media. Though it is not always clear from the advertisements, they generally refer to follow-on milks rather than infant formula. However, Wyeth/SMA was successfully prosecuted in July 2003 for a ‘cynical and deliberate breach’ of UK law for advertising infant formula. Similar advertisements by the other main manufacturers were cited in the court case, but no legal action has, as yet, been taken against these.

New ingredients are being added to formulas with little scientific evidence of benefits. Health claims are made suggesting the added substances will function in the same way as similar substances found in breastmilk. Claims are made for increased intelligence and lower risk of infection, for example.

Major supermarket chains have been found to promote breastmilk substitutes with discounts, two-for-one type offers and extra ‘reward points’ schemes, as well as a wide array of shelf talkers.

"It’s great to know your bottle-fed baby is getting the best start in life" Wyeth claims in this advertisement in a parenting magazine. In July 2003 Wyeth was successfully prosecuted by Trading Standards officers for a "cynical and deliberate breach of the regulations". Sainsbury’s supermarket promotes Cow&Gate infant formula with a “clearance price” (right). ASDA directs customers to company “carelines” for “Feeding and Weaning Advice” (left). Boots offers “3 for 2” on follow-on milk (right).

NUMICO claims "prebiotics support natural defences" in a widespread campaign promoting its Cow&Gate brand of formulas, including shelf-talkers (right), posters and money off leaflets in shopping centres and leisure facilities (left) and a website (above).

Farley’s promises mothers its formula will “improve your baby’s immune system.” NUMICO claims the Long-Chain Polyunsaturated (LCP) fatty acids in its formula will be “nourishing baby’s body and mind”
Trading Standards officers, responsible for enforcing the narrow UK Law, have taken action to stop illegal promotion of infant formula, but have no power to stop violations involving other breastmilk substitutes, complementary foods promoted for use before 6 months of age or feeding bottles and teats. Advertising of feeding bottles and teats is extremely aggressive, with no mention of the advantages of breastfeeding. Advertisements suggest bottle-feeding is equivalent to breastfeeding and even the best start in life.

Promotion in the health care system

Many mothers receive gift packs in hospital or soon afterwards, which often contain free samples of complementary foods and breastmilk substitutes (follow-on milks) or vouchers for these. Signing on to mailing lists promoted in the packs brings promotional materials on infant formulas. Leaflets for mothers are sometimes found in clinic waiting rooms. Materials frequently promote breastmilk substitutes and the company brand name for its entire range of breastmilk substitutes (e.g. Wyeth’s SMA brand. NUMICO’s Nutricia, Milupa and Cow&Gate brands. Hipp and Farley’s use the company name as a brand name). Companies offer branded gifts to health workers, such as growth charts, diary covers and tape measures.

Wyeth, NUMICO and Farley’s offer training on infant nutrition to health workers. What is not included is as telling as what is contained in company training days. Companies are reluctant to highlight the risks of artificial feeding and contamination of formula with Enterobacter Sakazakii.

Material for health workers should be limited to scientific and factual information, yet company materials are largely made up of promotional images and text. References that are given rarely support the headline claims made by the companies.

Nestlé is attempting to break into the UK breastmilk substitute market, beginning with “specialist” Nan HA formula. Its “hypo-allergenic” claim for the formula is misleading and cannot be used in the United States following legal action after infants fed on it suffered anaphylactic shock. The display above was in a public area at a training event organised by an allergy charity.

Monitoring Code Compliance in the UK
Contact with mothers

Companies ignore the explicit ban on direct and indirect contact with pregnant women and mothers of infants and young children. They run telephone ‘carelines’ and websites which compete with those of the National Health Service and mother support groups. These are promoted in leaflets, in parenting magazines, in direct mail to mothers and on the labels of products.

Wyeth and NUMICO have been reported offering classes to mothers in health facilities. NUMICO runs infant feeding promotions in pharmacies. Companies sometimes argue that infant formula is not included in presentations, but the ban on contact makes no distinction as to the reason for the contact. Mothers have a right to receive independent advice from health workers.

Labelling

Companies use the same brand name for a range of products. Infant formula, labelled for use from birth, and one or more ‘follow-on’ formulas labelled for use with older infants. Follow-on formulas did not exist at the time the Code was adopted and have been described by the World Health Assembly as ‘not necessary’. Companies widely advertise follow-on formulas in the UK, which serves to promote the infant formula with the same brand name and generally idealises artificial feeding. A survey on the National Childbirth Trust website found that 36% of 7,729 respondents believed they had seen an infant formula advertisement in the preceding 4 weeks. They had most likely seen an advertisement for a follow-on formula with the same brand name.

What can be done?

Under Article 11.3 of the Code companies are required to ensure their practices at every level comply with the Code’s provisions independently of government measures. Independent monitoring and exposure is essential to hold the companies to account. To empower the enforcement authorities (Trading Standards, Ofcom, the Advertising Standards Authority) to take action when the Code is violated, the UK Government needs to implement the Code and Resolutions into legislation in the UK. To bring legislation fully into line with the Code it may be necessary to amend EU Directive 91/321/EEC, from which the law derives. This is being revised in 2004, presenting a perfect opportunity for the Government to champion infant health and the right of mothers to independent information.

◆ Government policy, including National Health Service guidelines. This could include prohibiting materials on infant care and ‘carelines’ being produced or sponsored by companies with an interest in infant feeding.
◆ New legislation. Implementing the Code’s provisions for feeding bottles and teats, including a ban on promotion.
◆ Revised legislation. Amending the Infant Formula and Follow-on Formula Regulations 1995 to prohibit promotion of breastmilk substitutes, including complementary foods promoted for use before 6 months of age. To bring legislation fully into line with the Code it may be necessary to amend EU Directive 91/321/EEC, from which the law derives. This is being revised in 2004, presenting a perfect opportunity for the Government to champion infant health and the right of mothers to independent information.

This pamphlet is a part of a series of IBFAN pamphlets which highlight Code violations in selected countries around the world. The benchmark standards are the International Code of Marketing of Breastmilk Substitutes and subsequent relevant World Health Assembly Resolutions. This summary has arisen from a national monitoring project being conducted by the UK IBFAN group, Baby Milk Action, on behalf of the Baby Feeding Law Group.

The Baby Feeding Law Group works for the implementation of the Code and Resolutions into legislation in the UK. Member Organisations: Association of Breastfeeding Mothers, Association for Improvements in the Maternity Services, Association of Radical Midwives, Baby Milk Action (secretariat), Breastfeeding Network, Food Commission, Community Practitioners and Health Visitors Association, Lactation Consultants of Great Britain, La Leche League (GB), Maternity Alliance, Midwives Information and Resource Service, National Childbirth Trust, Royal College of Midwives, Royal College of Nursing, Royal College of Paediatrics and Child Health, UNICEF UK Baby Friendly Initiative.

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Related websites: www.ibfan.org www.babymilkaction.org www.babyfeedinglawgroup.org.uk

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