Opportunities for National implementation of the International Code of Marketing of Breast-milk Substitutes

Audrey Morris

PAHO Regional Advisor – Food and Nutrition



Content

- Why protect breastfeeding
- Overview of the Code
- Marketing of Breast-milk Substitutes
- Status of Implementation of the Code
- WHO and commitments from the Global Congress.

WHY PROTECT BREASTFEEDING

Why protect breastfeeding?



- Universal practice of optimal breastfeeding could prevent 823,000 deaths a year in children under 5 and 20,000 deaths a year in women due to breast cancer
- Decreases the risk of mothers developing breast cancer, ovarian cancer, type 2 diabetes, and heart disease.
- Short-term protective effect on children: reduces the risk of disease and death from diarrhea, respiratory infections, otitis media, and sudden infant death syndrome



Why protect breastfeeding

- Breastfeeding over longer periods contributes to cognitive development (average intelligence quotient 2.6 points higher)
- Long-term protective effect on children, such as reduction of dental malocclusion, overweight/obesity, and diabetes mellitus.





OVERVIEW OF THE CODE

The International Code of Marketing of Breast-Milk Substitutes

International Code of Marketing of Breast-milk Substitutes

> International Code of Marketing of Breastmilk Substitutes relevant WHA resolutions

- A set of recommendations to regulate the marketing (promotion and sale) of breastmilk substitutes, feeding bottles and teats.
- Adopted by the World Health Assembly (WHA) in 1981.
- A minimum requirement to protect breastfeeding
- Since 1982, the WHA has since adopted at least 16 resolutions to clarify the Code and keep it up-to-date with marketing trends and scientific knowledge.
- The Code and these subsequent resolutions are regarded as one package — "The Code".



Article 1 – Aim of the Code

 To contribute to the provision of safe and adequate nutrition for infants, by the protection and promotion of breastfeeding, and by ensuring the proper use of breastmilk substitutes, when these are necessary, on the basis of adequate information and through appropriate marketing and distribution

Who is the Code Directed at?

- Governments
- Manufacturers and distributors of products within the scope of the Code
- UN agencies
- Non-governmental organizations (NGOS)
- Professional groups
- Institutions
- Health workers and health systems
- Media



Article 2. Scope of the Code

The Code applies to the marketing, and practices related to following products:

- breastmilk substitutes, including infant formula;
- other milk products, foods and beverages, including bottlefed complementary foods, when marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breastmilk;
- feeding bottles and teats.



Summary of the main points of the Code

• • •

- 1. No advertising or promotion of any breast-milk substitutes (including any product marketed to fully or partially replace breast milk), feeding bottles or teats.
- 2. No free samples, free or low-cost supplies (including donations).
- 3. No promotion of products in or through health-care facilities.
- 4. No contact between marketing personnel and mothers (including health workers paid by a company to advise or teach).
- 5. No gifts or personal samples to mothers and their families, or health workers.



Summary of the main points of the Code

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- 6. Labels should be in an appropriate language and have no words or pictures idealizing artificial feeding.
- 7. Only scientific and factual information to be given to health workers.
- 8. Governments should ensure that objective and consistent information is provided on infant and young child feeding.
- 9. All information on artificial feeding, including labels, should explain the benefits of breastfeeding and warn of the costs and hazards associated with artificial feeding.
- 10.Health-care workers and health systems should comply with the Code (and all subsequent WHA resolutions on infant feeding) independently of any government action to implement it.

Countries are obligated to implement the Code



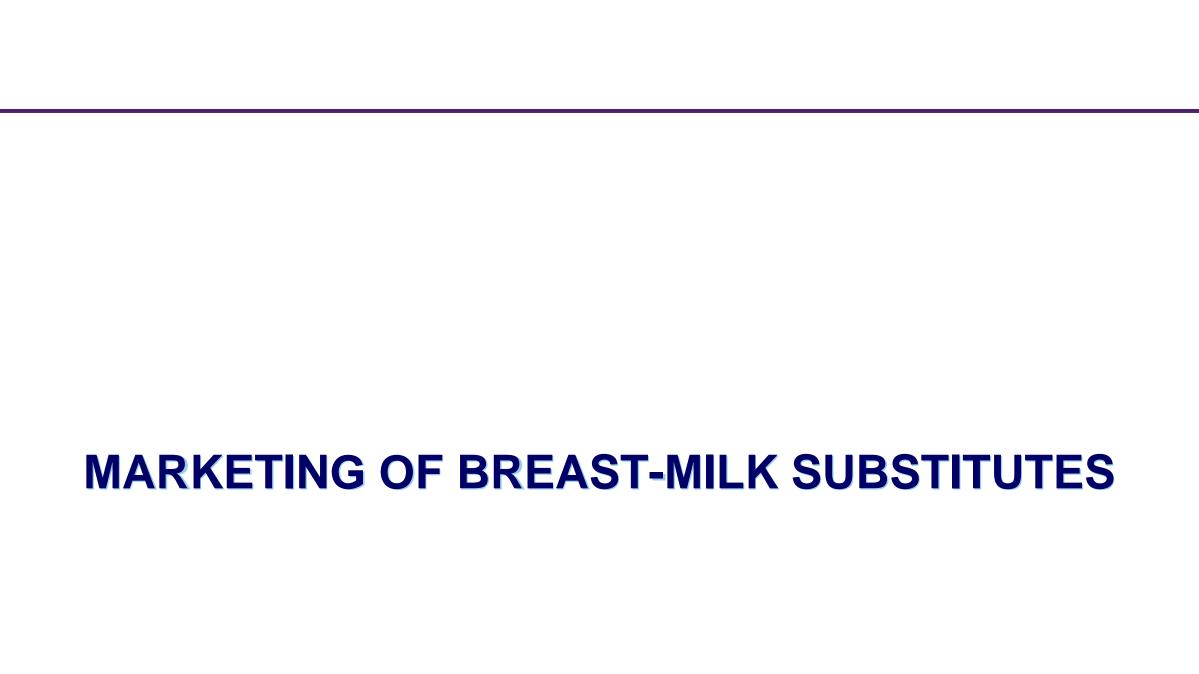
Rapporteurs on the Right to Food, Right to Health, the Working Group on Discrimination against Women in law and in practice, and the Committee on the Rights of the Child in support of increased efforts to promote, support and protect breast-feeding

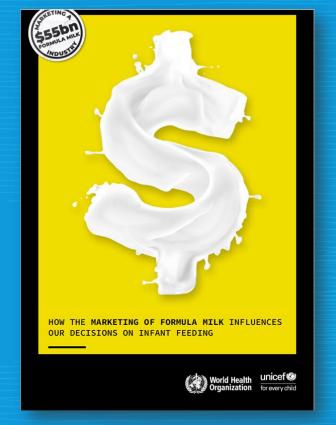
17 November 2016

"We call upon States to adopt comprehensive and enforceable normative measures to protect babies and mothers from such practices, and fully align with the recommendations contained in the International Code and the aforementioned new WHO Guidance".

https://www.ohchr.org/en/statements/2016/11/joint-statement-un-special-rapporteurs-right-food-right-health-working-group?LangID=E&NewsID=20871

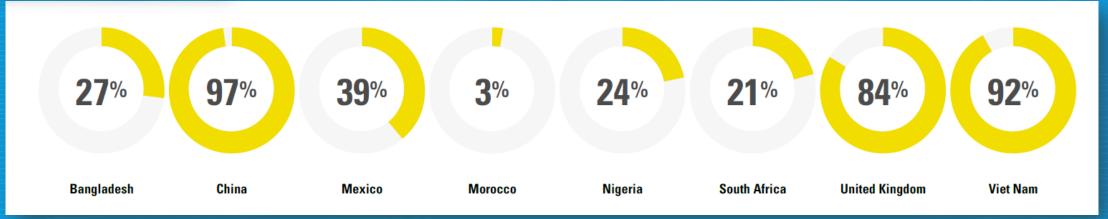
"Adopting such measures must be recognized as part of States' core obligations under the Convention on the Rights of the Child and other relevant UN human rights instruments ..."





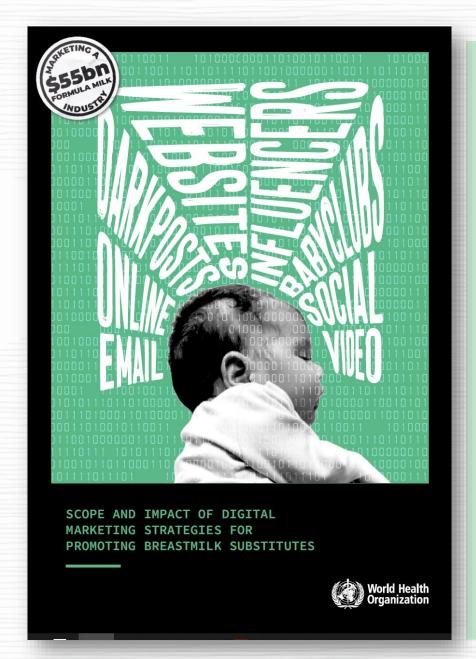
Formula Milk Marketing is pervasive, personalized and Powerful

51% of 8,528 pregnant and postnatal women reported seeing or hearing formula milk marketing in the preceding year.









- Digital marketing is becoming the dominant form of marketing in many countries.
- 2. Digital marketing increases BMS sales and occurs across multiple online channels and social media platforms in every country.
- Buying of direct access to pregnant women and mothers from social media platforms and influencers.
- 4. Use of strategies that are unrecognizable as advertising, e.g., online baby-clubs, advisory services, social media influencers, and user-generated content.
- 5. Posting of content on social media approx. 90 times per day, reaching 3 times as many people as informational posts about breastfeeding.
- 6. Evasion of scrutiny from enforcement agencies, requiring new approaches to regulation and enforcement of Code implementation.



What should Governments do?

Article 11.1 of the International Code

"Governments should take action to give effect to the principles and aim of the Code, as appropriate to their social and legislative framework, including the adoption of national legislation, regulations or other suitable measures."

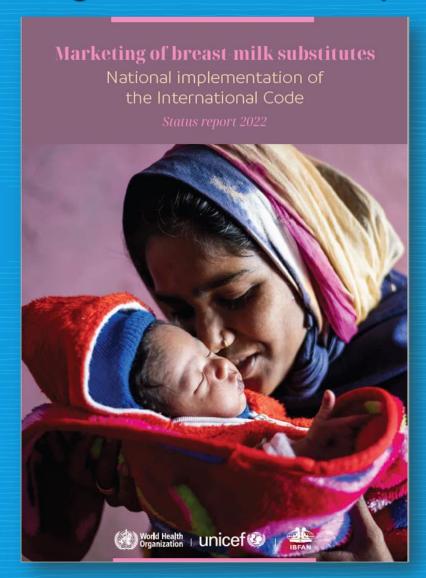
 The Code is not a template or model for national legislation. It contains the principles and objectives that should be achieved through detailed national regulations.

 Protection and promotion of breastfeeding cannot be fully achieved through voluntary measures

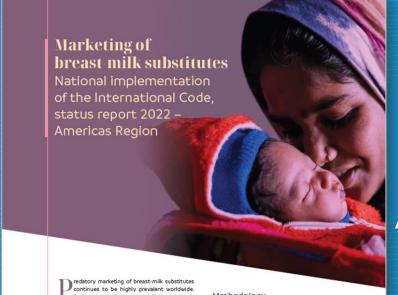


STATUS OF IMPLEMENTATION OF THE CODE

Reporting on National Implementation of the International Code



Global Report



Americas Region Report

Predatory marketing of breast-milk substitutes continues to be highly prevalent worldwide. As documented in a recent multi-country study on the reach and influence of marketing on infant feeding conducted by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEP), marketing of breast-milk substitutes diminishes the perceived value of breast-feeding and undermines women's confidence in their ability to breastfeed Marketing plays on expectations and anxieties around feeding and positions formula milk as a better alternative to breast milk.

This brief summarizes data for the Americas region' based on the global Code status report 2022." The report presents the national legal status of the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly (WHA) resolutions ("the Code"), including the extent to which its provisions have been incorporated in national legal

Methodology

WHO, UNICEF and International Baby Foods Action Network (IBFAN) routinely collect information on legal measures adopted by countries to implement the Code. The legal measures are analysed on scope and content by using a standardized checklist of Code provisions. A scoring algorithm is then applied to classify countries' legislation into categories. The algorithm assigns points values for each Code provision, with a maximum total of 100 points for measures that reflect all provisions in the Code. Countries with legal measures that scored 75 or greater are considered to be "substantially aligned with the Code* those with scores of 50 - < 75 are considered to be "moderately aligned with the Code", and those with of the Code included". This algorithm facilitates a systematic and objective classification of countries and their legal measures

- For this report, the Americas region includes all countries that are part of the WHO Americas region or Pan-American Health Organization or UNICEFLatin America and Calibbean region.
- UNILEF LETN AFMERS and Cancousen region.

 Marketing of breast-milk substitutes: national implementation of the International Code | Status report 2022, Geneva World Health Organization 2023 https://doi.org/10.1009/scatus-00.1009/sc







https://iris.who.int/handle/10665/354221

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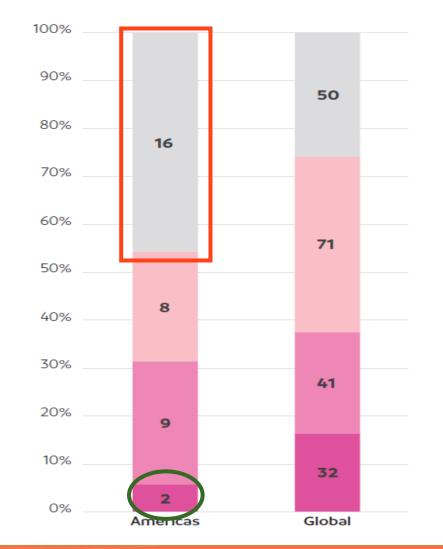


Challenges faced by countries (Code Report 2022)

- Absence of high-level political will
- Industry interference
- Poor accountability
- Lack of monitoring and enforcement mechanisms
- Limited understanding of the Code
- Insufficient human and financial resources



FINDINGS: Legal status of the Code as enacted in countries, Americas region (N=35) and Global (N=194)



- No legal measures
- Some provisions of the Code included
- Moderately aligned with the Code
- Substantially aligned with the Code



FINDINGS:
Legal status of the Code, by country –
Americas
Region, 2022





Legal status of the Code as enacted in countries of the Americas

Substantially Aligned with the Code (2)	Moderately Aligned with the Code (9)	Some Provisions of the Code Included (8)
Brazil (2018) Panama (2012)	Bolivia (2006) Colombia (1992) Costa Rica (1995) Dominican Republic (1996) El Salvador (2013) Guatemala (1987) Mexico (2012) Peru (2006) Venezuela (2007)	Argentina (2018) Chile (2015) Ecuador (1999) Honduras (2013) Nicaragua (1999) Paraguay (1999) Trinidad & Tobago (1985) Uruguay (2017)

No Legal Status of the Code

Antigua & Barbuda Guyana Canada

Bahamas Jamaica Cuba

Barbados Suriname United States

Belize

Dominica

Grenada

Haiti

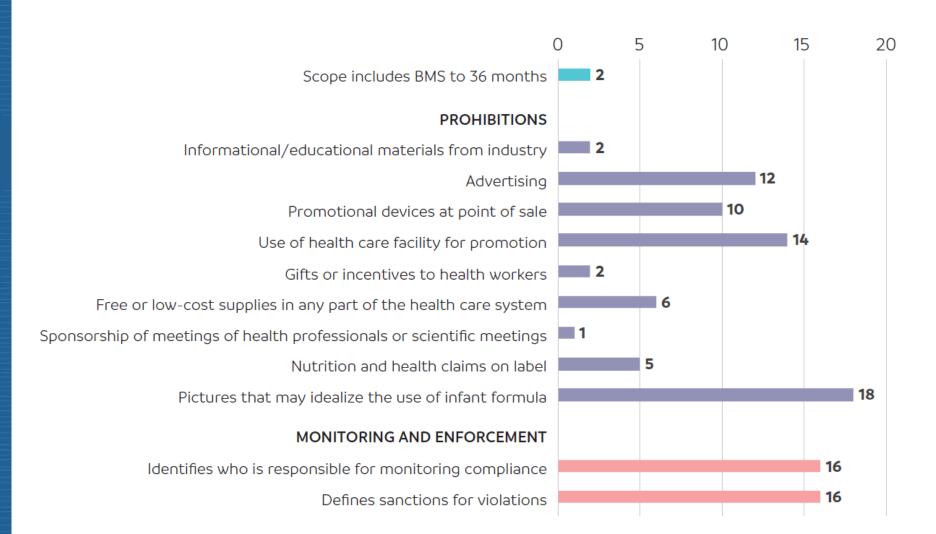
St Kitts & Nevis

St Lucia

St Vincent & the Grenadines



Countries with Key Code Provisions (Americas Region)





Conclusions of Code Report 2022

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- Many countries fighting back against promotion of breast-milk substitutes using unethical marketing practices...
- A majority of countries in the Americas region have legislation prohibiting at least some forms of promotion.
- Significant gaps in national legislation.
- Lack of provisions to prevent conflicts of interest.



What is needed? (Code Report 2022)

- High-level political will
- Constraints on industry lobbying
- Accountability measures
- Monitoring and enforcement mechanisms
- Education on the Code
- Investment in human and financial resources





Code Congress

– Geneva, June
2023



UNICEF and WHO'S Support to governments for a successful implementation of the Code

- Advocacy and awareness raising
- Policy development and legal frameworks
- Capacity building
- Enforcement and penalties
- Monitoring and compliance
- Fostering collaboration and partnerships
- Facilitating knowledge sharing and exchange



Policy Development and Legal frameworks

- Conducting policy assessments
- Providing template policies/guidelines
- Facilitating consultations with key stakeholders to ensure comprehensive and evidence-based policy development
- Assistance in drafting comprehensive and effective laws, regulations, guidelines that reflect the principles and provisions of the Code



PAHO's Technical Assistance to Countries

- Formation of networks
- Mapping of legislation in Caribbean countries
- Preparation of a manual to assist countries in national legislation of the Code
- Assist countries in preparation of national Code laws

- Assist countries in review of national Code laws to identify gaps and strengthen legislation
- Continued advocacy
- Continue support for monitoring of Code implementation in each country
- Webinars and meetings
- Training workshops



NETCODE TOOLKIT

MONITORING THE MARKETING OF BREAST-MILK SUBSTITUTES: PROTOCOL FOR ONGOING MONITORING SYSTEMS

Other WHO Resources

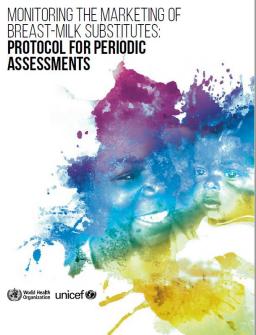
INTERNATIONAL TRADE AGREEMENTS AND IMPLEMENTATION OF THE INTERNATIONAL CODE OF MARKETING OF BREAST-MILK SUBSTITUTES

Frequently Asked Questions

WHO/UNICEF Information Brief

2017 Update

NETCODE TOOLKIT





The International Code of Marketing of **Breast-milk Substitutes:**

Frequently asked questions on the roles and responsibilities of health workers





THE INTERNATIONAL **CODE OF MARKETING** OF BREAST-MILK **SUBSTITUTES**

Frequently Asked Questions









