

## What are the Challenges ?

### Free trade or fair trade

- Free trade should not prevent a country from adopting national laws regulating the marketing of artificial infant feeding products that undermine breastfeeding.
- Trade agreements should not be used by governments as an excuse not to develop and enforce national infant feeding policies, covering exclusive breastfeeding, indigenous complementary foods, genetically modified food ingredients, labelling of infant foods and food safety standards.

### Privatisation of public health and nutrition care services

- Worldwide, public funds for health care are being cut, diminishing their capacity to provide high quality services, especially to mothers and children.
- Governments are curtailing their accountability for ensuring health care.
- Corporations may use UN's halo indiscriminately, detract attention from unethical businesses, and/or put themselves in a policy making role through inappropriate partnerships with UN agencies, particularly through the UN Global Compact.
- Public health programmes and initiatives that promote breastfeeding such as the Baby-Friendly Hospital Initiative are no longer receiving adequate support.
- The disparities between the rich, who can afford private care, and the poor are increasing. This affects women and children in poorer areas particularly.



## Trade Agreements

International trade agreements, like those administered under the World Trade Organisation (WTO) are sometimes viewed as an obstacle to the ability of nations to set their own health policies to protect consumers, including babies. For instance, representatives of Health and Welfare Canada advised that the International Code of Marketing of Breastmilk Substitutes was "... superseded by the North American Free Trade Agreement (NAFTA) with the USA." The Code was perceived to be a "...restriction on the rights of formula manufacturers to compete freely in the marketplace."

Such views, however are unfounded. According to the International Code Documentation Centre, the International Code and national legislation to implement it do not impinge on WTO and regional trade agreements, like NAFTA. Trade agreements aim to provide a level playing field for all manufacturers of "like products", therefore eliminating trade barriers. They do allow countries to adopt technical regulations in conformity with relevant international standards (such as the Code), notably to protect the health of consumers.

Two important facts must be considered in countering arguments such as those used in Canada:

- Breastmilk is not a "like product" comparable to infant formula and other baby foods.
- Governments may put aside trade commitments in order to protect the health of consumers.

## Inappropriate Marketing

*Every day some 3,000 to 4,000 infants die because they are denied access to adequate breastmilk.*

The late James Grant, Executive Director of UNICEF

Since the International Code of Marketing of Breastmilk Substitutes was approved 22 years ago, much progress has been made but many manufacturers continue their aggressive promotion of artificial feeding products. Breastmilk substitutes are promoted as equivalent in nutritional value to mother's milk and labels boast products that are "easier to digest", "endorsed by nutrition experts", and "closer than ever to breastmilk." Free samples are given to pregnant women and new mothers at medical clinics and product information and coupons are routinely mailed to new mothers.

Such practices have particularly devastating effects in developing countries where, in some cases, formula companies routinely provide free baby milk to maternity hospitals to shorten the duration of breastfeeding. This has a devastating impact on the health of babies and their families in a number of ways:

- When newborn babies are given bottles, nipple confusion can result, making them less able to suckle at the breast and thus increasing breastfeeding failure. The baby is then dependent on artificial milk.
- When the mother and baby leave hospital, the milk is no longer free. At home parents are forced to buy more milk, which can cost 50% or more of the family income. As a consequence, baby milks are often over-diluted to make them last longer, contributing to increased malnutrition.
- The expense of baby milks affects all members of the family, impoverishing those already poor and increasing the risk of malnutrition for all family members.