

# CODE WATCH

## 25 YEARS OF PROTECTING BREASTFEEDING



### WORLD BREASTFEEDING WEEK 1-7 AUGUST

- Improving breastfeeding practices could reduce infant and young child illness and death more than any other health strategy.
- The continued unethical marketing of breastmilk substitutes undermines breastfeeding.
- In 2006 we can celebrate success. Over 60 countries have legislated all or many provisions of the International Code of Marketing of Breastmilk Substitutes (the Code) which regulates this kind of marketing.
- But there is still much to do. Global companies invest millions in the promotion of infant feeding products.
- We can raise awareness of the Code in our communities and create imaginative tactics to assist authorities to keep the commitments they made at the World Health Assemblies.
- Together we can make a difference and save thousands of infant lives.

SPONSORSHIP: WABA does not accept sponsorship of any kind from companies producing breastmilk substitutes, related equipment and complementary foods. WABA encourages all participants of World Breastfeeding Week to respect and follow this ethical stance.

# 2006

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The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations concerned with the protection, promotion and support of breastfeeding worldwide based on the Innocenti Declaration, the Ten Links for Nurturing the Future and the WHO/UNICEF Global Strategy for Infant and Young Child Feeding. Its core partners are International Baby Food Action Network (IBFAN), La Leche League International (LLL), International Lactation Consultant Association (ILCA), Wellstart International, Academy of Breastfeeding Medicine (ABM) and LINKAGES. WABA is in consultative status with UNICEF and an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC).

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WORLD ALLIANCE FOR  
BREASTFEEDING ACTION

# CODE WATCH

25 YEARS OF PROTECTING BREASTFEEDING



25 years ago, the International Code of Marketing of Breastmilk Substitute (the Code) was adopted by the World Health Assembly (WHA). The Code set out simple, basic rules to regulate harmful marketing practices.

- no advertising of breastmilk substitutes, feeding bottles and teats;
- no free samples to mothers;
- no promotion in healthcare facilities, including no free or low-cost formula;
- no company personnel to contact mothers;
- no gifts or personal samples to health workers. Health workers should never pass samples on to mothers;
- no pictures of infants or words idealising artificial feeding, on the labels of the products;
- information to health workers should be scientific and factual;
- information on artificial feeding, including that on labels, should explain the benefits and superiority of breastfeeding and the dangers associated with artificial feeding.

## Breastfeeding: the priority for public health

Improving breastfeeding practices saves lives,<sup>1</sup> especially in poor communities. It can also transform health in wealthier regions where costly medical services treat the ill-effects of artificial feeding.<sup>2</sup> Every country is committed to fulfilling the 2002 WHO/UNICEF Global Strategy for Infant and Young Child Feeding which declares that the implementation of the Code is a key to infant and young child health. Despite the challenges of political and social upheaval, the HIV pandemic and natural and man-made disasters, more women are exclusively breastfeeding in the first six months.<sup>3</sup> But even where breastfeeding is part of the culture, practices can be less than ideal and where artificial feeding is usual, they can be appalling. Delaying and restricting breastfeeds and giving other products before six months are still common practices which increase the risk of infection, allergy, long-term disease and death. Ignorance, inadequate health professional training and neglect of women's rights contribute to these problems. None however can compare with the harmful effects of product promotion. The millions spent on marketing directly compete with breast feeding.

## Artificial feeding is a high risk activity

The Code protects artificially fed infants through product quality and scientific information. It is now known that powdered infant formula (PIF) can contain disease-causing bacteria which have damaged and killed babies<sup>4</sup>. The United States Federal Drug Administration (FDA) has banned PIF in all newborn nurseries. Soya formulas carry risks and several governments, including New Zealand and the UK strongly discourage their

use. Yet these products are promoted without warnings on their labels.<sup>5</sup>

## The Code is the cornerstone of protection

Leaders in public health have spoken out against this aggressive promotion for decades. This stance was formalised 25 years ago when the WHA adopted the Code as the minimum basis for regulation of harmful marketing practices. Every WHO Member State has committed itself to the Code, and the 11 subsequent WHA Resolutions, but pressure from powerful companies can impede implementation.

## Some examples of Code violations

- Company materials and websites disguise promotion as infant feeding information. They minimise the risks of not breastfeeding and make claims such as that fatty acids in formula will make a baby more intelligent.
- Companies give large quantities of brochures, containing misleading information, to health professionals who often pass them to mothers.
- Follow-on formulas are marketed as essential for babies' health, convincing women to give up breastfeeding early. WHA has declared follow-on formulas to be unnecessary.
- Huge financial incentives are paid to health facilities to distribute discharge packs containing infant formula samples to new mothers.

## A lot has been achieved

In 1990 only nine governments had the Code in law. By 2005, over 60 countries had legislation enforcing all or many provisions. Research shows that where the Code is law the community is better protected from product promotion than where the Code is merely voluntary. When there is no regulation at all there is a commercial free-for-all, mothers lose confidence and breastfeeding declines.<sup>6</sup> Much success is due to the commitment of groups and individuals dedicated to Code implementation. Community groups such as the International Baby Food Action Network (IBFAN) have pioneered Code-monitoring, documentation, training and support to those responsible for achieving national regulation.

## What you can do right now

- Inform yourself about Code implementation in your country. The 'State of the Code' charts are available from IBFAN. You can view their website at [www.ibfan.org](http://www.ibfan.org). You can also request UNICEF or WHO (country, regional or head office) for advice on Code action.
- Assess local Code violations or compliance through a rapid monitoring exercise. Visit supermarkets and pharmacies. Check magazines and other print media, the web, TV and radio. If possible, look at your local health facilities whether state or private.
- Contact your national breastfeeding coordinator or whoever is responsible for infant feeding policy. Offer them evidence of Code violations you found and suggest that a working group could form a plan of action for Code implementation.

## WBW Coordinating and Distributing Centres

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