

2. Exploiting medical prestige

In the 1950s, Nestlé employed 'milk nurses' to promote their infant formula. In the 1980s Nestlé expressed regret for this practice and publically promised to keep to the Code but they have returned to similar practices. For example, in China in 2005, Nestlé positioned doctors in 'Nutrition Corners' in supermarkets to promote products to pregnant and breastfeeding women. Using qualified health professionals is one of the sneakiest methods of promotion because people believe and respect their advice.

The Code prohibits company personnel from contacting pregnant women, mothers or their families, whether directly or indirectly.

3. Confusing the consumer

When the Code was adopted in 1981, the companies invented follow-on milks to evade marketing restrictions. They claimed that follow-on milks are not breastmilk substitutes. But any product which replaces breastmilk is a substitute. Follow-on milks are promoted for babies over six months, undermining knowledge and confidence in continued breastfeeding. Brand names, tin designs and labels of follow-on milks echo those of infant formula. TV and magazines advertise company internet sites and telephone numbers. A recent UK survey found that 60 percent of parents mistook follow-on milk adverts as promotion of infant formula.



The Code prohibits all promotion for any product that replaces breastmilk 'whether suitable or not'.

4. Pushing bottles and teats

Bottles and teats undermine breastfeeding. If used in the early days and weeks, they prevent the baby attaching well at the breast and cause problems which can lead to breastfeeding failure. Avent and other companies claim their products mimic breastfeeding with phrases such as 'natural shape' or 'mimics a mom'. Another marketing tactic is to present the idea of an inevitable move from breast to bottle: 'from breast to teat through Chicco'. Millions of healthy children have never used a feeding bottle in their lives. After six months, babies need continued breastfeeding, nutritious solid foods and safe water drunk from a clean cup.



The Code prohibits promotion of bottles and teats.

5. Gifts for health professionals

This marketing tool is often invisible to the general public, so they may be unaware that health advice can be biased by company interests. Health professionals may be so used to the culture of gifts and financial sponsorship from companies, they take it for granted. Research shows that it influences their professional decisions. The Code prohibits gifts. In 2003 India introduced a law prohibiting any financial support or gifts to health professionals from baby food companies.

Endorsement by association, manipulation by assistance.

Derrick Jelliffe, Professor of Paediatrics describing the link between health professionals and companies

Lack of knowledge, inadequate health professional training and neglect /disrespect of women's rights contribute to poor infant feeding practices. The harmful effects of product promotion make it worse. Companies invest millions in promotion because it is effective. Every time a health professional is persuaded to recommend a product, company profits rise. Every time a mother is convinced she must use a commercial product, the risk rises of her baby getting ill. The Code is designed to stop such persuasive promotion.

SOME KEY POINTS OF WHA RESOLUTIONS ON INFANT AND YOUNG CHILD FEEDING 1984-2005

During the past 25 years, 11 other infant feeding resolutions have been adopted by the WHA to clarify and strengthen the Code and to address new challenges. They include the following points:

- ❖ Follow-on milks are not necessary.
- ❖ No free or subsidised supplies of breastmilk substitutes in any part of the health care system
- ❖ Governments should ensure that financial support and other incentives for professionals working in infant and young child health do not create conflicts of interest.
- ❖ Governments should ensure truly independent monitoring of the Code and subsequent resolutions.
- ❖ Six months is the optimal period of exclusive breastfeeding.
- ❖ Research on HIV and infant feeding should be independent.
- ❖ Complementary foods must not be marketed in ways that undermine exclusive and sustained breastfeeding.
- ❖ Renewed commitment through the Global Strategy.
- ❖ Provide information on product labels about the possible intrinsic contamination of powdered infant formula.
- ❖ Regulate nutrition and health claims.