

The International Code of Marketing of Breastmilk Substitutes

PROHIBITS

- ☐ Free samples to mothers
- ☐ Advertising to the public
- ☐ Promotion in health care facilities
- ☐ Gifts or samples to health workers
- □ Words and pictures that idealise bottle feeding
- ☐ Advice to mothers by company sales staff

Guatemala leads the way

Studies in Guatemala showed a rapidly declining breastfeeding rate. Without control over the use, promotion and marketing of breastmilk substitutes, parents and health workers were exposed to advertising campaigns that undermined the effectiveness of any breastfeeding promotion.

In 1982, the Guatemalan National Commission for the Promotion of Breastfeeding (CONAPLAM) and the Health Ministry's legal department developed a proposal for a Law for the Marketing of Breastmilk Substitutes, based on the International Code. The Law was adopted in 1983 and enforced in 1986. Guatemala became the first Latin American country to regulate the promotion of breastmilk substitutes and other supplementary foods for infants. A full-time professional in the Ministry of Health was given responsibility for enforcing the Law.

Together with other measures to protect, promote and support breastfeeding, the Law has led to a near doubling of the breastfeeding rate in urban areas.

Many other countries have also taken steps to put the provisions of the Code into practice. In particular, Brazil, Burkina Faso, Mexico, India, Kenya, Nepal, Nigeria, Peru, and the Philippines have introduced the whole Code as national legislation. Many of these countries have also taken other substantive steps to discourage bottle feeding, as have Bangladesh, Guinea-Bissau, Honduras, New Zealand, Norway, Papua New Guinea, Paraguay, Swaziland, Sweden, Trinidad and Tobago, and the United Kingdom. In another 30 countries, some of the Code's provisions have been incorporated into legislation.

The International Code is only a tool. It will not do anything to improve infant health unless it is put into practice. Although it is up to governments to introduce the legislation that gives effect to the Code, parents, health workers, the media, women's organisations, development agencies, public interest groups, and business can all play a major role in encouraging the adoption of that legislation and in ensuring that the practices suggested in the Code are adopted.

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Re-creating a breastfeeding culture

Infant food companies have argued that bottle feeding is more convenient or even necessary for women who work outside the home. Women should realise that it is not inconvenient to breastfeed, if they have enough support. In many countries, businesses are discovering the social and economic benefits for their companies if they provide working mothers with time and space to breastfeed. Why not encourage business leaders to talk publicly about the convenience of breastfeeding?

The baby food industry has used celebrities to promote bottle feeding and prominent health workers to endorse its products, so as to seduce parents into believing that bottle feeding is modern, healthy and glamorous. Nowadays, many health workers and celebrities are convinced that breastfeeding is the modern, high-status, healthy way to feed babies. Organise events and get them to speak out for breastfeeding.