NEW Guidance on the Inappropriate Promotion of Foods for Infants and Young Children: From Words to Practice

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Optimal Infant and Young Child Feeding (IYCF) Practices

Exclusive breastfeeding  Nutritionally adequate and safe complementary foods  Continued breastfeeding

% of children who are:

<table>
<thead>
<tr>
<th>Exclusively breastfed (&lt;6 months)</th>
<th>Introduced to solid, semi-solid, soft foods (6 – 8 months)</th>
<th>Still breastfeeding at age 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>39</td>
<td>66</td>
<td>49</td>
</tr>
</tbody>
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1WHO. 2003. Global Strategy for Infant and Young Child Feeding
2UNICEF. State of the world’s children 2016.
WHAT IS OPTIMAL INFANT AND YOUNG CHILD FEEDING?

- Exclusive Breastfeeding
- Complementary Feeding
- Provisioning & Foraging

Special Transitional Foods

Breast Milk

Family Foods

Daily intake

Child age
1. The International Code of Marketing of Breast-milk Substitutes (*the Code*)
   - Ensuring the appropriate marketing of breast-milk substitutes, teats and feeding bottles.

2. Subsequent relevant World Health Assembly (WHA) resolutions:
   - Same status as *the Code*
   - Clarify or strengthen *the Code*
   - NOW also provides guidance on the appropriate marketing of complementary foods.
The Code did not until 2016 EXPLICITLY address:

- **Follow-up Formulas (FUFs):** 6 - 12 months
- **Growing-up Milks (GUMS):** 12 - 36 months
- **Commercial complementary foods** unless promoted for use under 6 months.

1. The FUFs and GUMs market expanded after the Code.
2. Commercial complementary foods should not interfere with breastfeeding.
3. Manufacturers misleadingly argue that FUFs and GUMs are ‘complementary foods.’
THE REALITY

• Poor complementary feeding practices are a public health concern\(^1\).

• **Commercially produced complementary foods are an option for families who can afford them and have the knowledge and facilities to prepare and feed them safely**\(^2\).

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1. UNICEF State of the Worlds Children 2015
The Reality

Need to ensure that their marketing **DOES NOT**: 

- Increase the risk of early cessation of exclusive breastfeeding.
- Displace breastfeeding after six months of age.
Foods suitable for complementary feeding period

Appropriate nutritional quality

Provide additional energy and nutrients to complement breastmilk / diet

Lacking

Insufficient quantities

Fill the nutritional gap

Sustainable public & market-based approach
WHA RESOLUTION 34.22
Adopts ‘International Code of Marketing of Breast-milk Substitutes’ towards protecting breastfeeding and ensuring the appropriate marketing of breast-milk substitutes, teats and feeding bottles.

WHA RESOLUTION 63.23
Urges member states to end inappropriate promotion of foods for IYC and to ensure that nutrition and health claims not be permitted for foods for IYC, except where specifically provided for, in relevant Codex standards OR national legislation.

WHA RESOLUTION 65.6
Requests the Director General to provide clarification and guidance on the inappropriate promotion of foods for IYC cited in resolution WHA 63.23, taking into consideration the ongoing work of the Codex Alimentarius Commission.
ARCH 1 - Helen Keller International funded by Bill and Melinda Gates Foundation – 3 years.

Generate evidence on the **inappropriate promotion of foods for infants and young children** with focus on commercial complementary foods.

Cambodia, Nepal, Senegal and Tanzania with government and other partners.

- Health system study on exposure of 2,400 mothers to promotion.
- Labeling study of commercial complementary foods (n=200) and BMS (n=184).
- Point of sale study of retail outlets: 30 shops/country.
- Media monitoring study in Cambodia and Senegal.
Between 34-70% of commercial complementary food companies also produced BMS.

41-78% of these companies cross-promoted these products.

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>Cambodia</th>
<th>Nepal</th>
<th>Senegal</th>
<th>Tanzania</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cross-promotion</td>
<td>41%</td>
<td>75%</td>
<td>78%</td>
<td>42%</td>
</tr>
<tr>
<td>Direct reference to BMS</td>
<td>8%</td>
<td>0%</td>
<td>15%</td>
<td>0%</td>
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</tbody>
</table>
THE EVIDENCE – CROSS PROMOTION

Infant formula and commercial complementary foods
THE EVIDENCE – CROSS PROMOTION

Infant formula / Follow-up formula / Growing-up milks

http://archnutrition.org/resource/policy-brief-protecting-breastfeeding-24-months-beyond/
THE EVIDENCE – INAPPROPRIATE LABELS

Percent of commercial complementary food labels with no recommended age of introduction or a recommended age of less than six months

- Phnom Penh (n=112): 30% No age recommended, 9% Age <6 months
- Kathmandu (n=14): 0% No age recommended, 13% Age <6 months
- Dakar (n=36): 4% No age recommended, 20% Age <6 months
- Dar es Salaam (n=22): 19% No age recommended, 12% Age <6 months
THE EVIDENCE – INAPPROPRIATE LABELS

Pereira et al. 2016
THE EVIDENCE – PROMOTION TO MOTHERS

Percent of Mothers who Reported Promotions for BMS and Commercial Complementary Foods

- Phnom Penh: 86% (n=294)
  - Any promotion for BMS (including FUFs and GUMs): 29%
  - Any promotion for commercial complementary foods: 20%
- Kathmandu: 28% (n=309)
  - Any promotion for BMS (including FUFs and GUMs): 28%
  - Any promotion for commercial complementary foods: 20%
- Dakar: 41% (n=293)
  - Any promotion for BMS (including FUFs and GUMs): 37%
- Dar es Salaam: 12% (n=305)
  - Any promotion for BMS (including FUFs and GUMs): 1%

Zehner, 2016
10 peer reviewed articles

Key findings:
- Many breastmilk substitutes (BMS) found, especially follow-up formula (FUFs) and growing up milks (GUMs).
- Cross-promotion normal practice.
- Many inappropriate labeling practices observed.
- Promotion via multiple channels.
WHO - SCIENTIFIC AND TECHNICAL ADVISORY GROUP (STAG)
Releases report of its first meeting and ‘Technical Paper on
Definition of Inappropriate Promotion of foods for infants and
young children’.

67TH WHA DECISION
Noted the work carried out and requested the Director-General
to complete the work for consideration by Member States at the
Sixty-ninth World Health Assembly in 2016.

WHA 69.9
Resolution adopted by consensus welcoming the WHO
‘Guidance on ending the inappropriate promotion of foods for
infants and young children’.
Provides 7 recommendations pertaining to the marketing of foods for children (6 – 36 months).

Aims to:

- Promote, protect and support breastfeeding;
- Prevent obesity and NCDs;
- Promote healthy diets;
- Ensure that caregivers receive clear and accurate information on feeding.
1. Applies to all commercially produced foods that are marketed as being suitable for infants and young children.

2. Applies to the promotion of foods for infants and young children that occurs through government programs, non-profit organizations, and private enterprises.

3. Is not applicable to vitamin and mineral food supplements and home-fortification products (micronutrient powders / small-quantity lipid-based nutrient supplements).

4. Supports emphasis on use of suitable, nutrient-rich, home-prepared, and locally available foods that are prepared and fed safely.
Guidance based on:

- WHO ‘Guiding Principles for Feeding Non-breastfed children 6 – 24 months’.

Supports emphasis on the use of suitable, nutrient-rich, home-prepared, and locally available foods that are prepared and fed safely.
Products that function as breast-milk substitutes should not be promoted.

- BMS = Any milks (or products that could be used to replace milk, such as fortified soy milk) in either liquid or powdered form, that are specifically marketed for feeding infants and young children up to the age of 3 years (including follow-up formula and growing-up milks).

- The Code covers all BMS.
RECOMMENDATION 3

- Must meet all the relevant national, regional and global standards for composition, safety, quality.
- **Nutrient levels** should be in line with national dietary guidelines.
- **Nutrient profile models** should be developed/used to guide decisions on appropriate foods for promotion.
- **Codex** should be updated in line with WHO’s guidelines – focus on avoiding the addition of free sugars and salt.
RECOMMENDATION 4

Messages should support optimal IYCF and include:

- Importance of continued breastfeeding for up to 2 years or beyond.
- Importance of not introducing complementary feeding before 6 months of age.
- Appropriate age of introduction of the food (not <6 months).
- Be easily understood / visible and legible.
RECOMMENDATION 4

Messages should not:

- Include images, text or other representation that might suggest use for <6 months (including milestones/stages).
- Undermine or discourage breastfeeding.
- Make a comparison to breast-milk.
- Suggest it is nearly equivalent or superior to breast-milk.
- Recommend or promote bottle feeding.
- Convey endorsement unless specifically approved by regulatory authorities.
We learned from the best

so we could give you and baby our best
RECOMMENDATION 5

No cross-promotion to promote breast-milk substitutes

Indirectly

Packaging Design
RECOMMENDATION 6

- Companies should avoid creating **conflicts of interest** in health facilities or throughout health systems.
- Health workers/systems etc. should **not allow conflict of interest** to rise.
  - Free products
  - Education to parents
  - Gifts / Incentives
  - Health facilities hosting events
  - Sponsorship of meetings.

Recommended and developed by: Dr. Bob Sears. Renowned pediatrician and co-author of The Baby book.
RECOMMENDATION 6

• ANY donations to the health care system, including health workers and professional associations, from companies marketing BMS and foods for infants and young children represent a conflict of interest and should not be allowed.

• Emphasises that sponsorship of meetings of health professionals and scientific meetings by companies selling BMS and foods for infants and young children should not be allowed.
RECOMMENDATION 7

The WHO set of recommendations on the marketing of foods and non-alcoholic beverages to children should be fully implemented.
CONSUMPTION OF COMMERCIAL SNACK FOODS BY YOUNG CHILDREN THE PRIOR DAY

Pries et al. 2016
A mother has the right to make an **informed decision** on how she will feed her baby:

- Based on the **facts** and
- **Free from commercial influence.**

A mother who chooses to use commercially processed foods must be informed on how to **prepare and use the product safely/appropriately.**

Manufacturers should be **held to account** against an accepted standard.
IS LEGISLATION ENOUGH?

• One piece of the puzzle.
• Levels of Code violations are similar in a country with (Burkina Faso) and without (Togo) legislation¹.
• To ensure compliance, legislation must be accompanied by effective:
  – Information
  – Training
  – Monitoring systems.

THE CRITICAL PATHWAY
THE Stakeholders

- Appropriate Promotion of Foods for IYC
- Government
- Manufacturers / Distributors and Retailers
- Health Professionals and Facilities
- Media
- NGO’s Civil Society, Academia, Individuals
- Individuals
RESOURCES

- To access the WHO Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children

- To read articles on research conducted by the HKI Assessment and Research on Child Feeding (ARCH) project in the Maternal and Child Nutrition journal, that informed the guidance:
“Alone we can do so little; together we can do so much”
Helen Keller