

ADVOCACY GUIDANCE AND TOOLS

2. STRENGTHENING REGULATIONS ON BREASTMILK SUBSTITUTES MARKETING

The scientific evidence is clear: Breastfeeding gives children the best start in life.¹ Yet, only 41 per cent of children younger than 6 months of age worldwide are exclusively breastfed.² The International Code of Marketing of Breastmilk Substitutes and relevant World Health Assembly (WHA) resolutions (the Code) were adopted to regulate the unethical marketing of products promoted as replacements to breastmilk, feeding bottles, and teats. Breastmilk substitutes (BMS) include infant formula, follow-up formula, and growing up milks for infants and children up to 36 months of age.



Led by UNICEF and WHO, the Global Breastfeeding Collective (the Collective) is a partnership of more than 20 international organizations with the goal of increasing investment and policy change to support breastfeeding worldwide, which requires advocacy at the global, national, and sub-national levels.

Developed by the Collective, this document is one of seven briefs that provide guidance and resources to stakeholders on how to advocate for adoption of these policy actions with government ministries, health care workers and managers, employers, donors, and other key decision-makers.

**GLOBAL BREASTFEEDING
COLLECTIVE**



THE PROBLEM

Unethical marketing of breastmilk substitutes, bottles and teats can reduce breastfeeding rates, putting the health of children and mothers at risk and resulting in unnecessary costs for families and countries.

Misinformation about breastfeeding, together with the widespread promotion of BMS, can cause confusion among health workers, mothers, and families about feeding infants and young children. Studies have found that mothers who receive free formula samples when discharged from the hospital are less likely to breastfeed as recommended.³ A 2011 study in the Philippines found that 59 per cent of mothers of young children recalled having seen an advertisement for infant formula, primarily via television, and that formula use was high among this group compared with those who did not recall seeing an infant formula advertisement.⁴

The global formula milk market is projected to grow from US\$ 53.31 billion in 2015 to about US\$ 76 billion by 2019, making it one of the fastest growing industries in the food and beverage sector. As of 2018, 136 countries have implemented legal measures related to the Code, yet only 35 countries have enacted all the Code provisions into national legislation.

THE SOLUTION

Strong and well-enforced national legislation can reduce the unethical marketing of breastmilk substitutes, bottles and teats and ensure support for breastfeeding.

Adopting the full provisions of the Code into national legislation allows countries to regulate the marketing of BMS and is one method to ensure that mothers and families receive unbiased information about the healthiest way to feed their infants and young children.

The Code includes important measures for health facilities and personnel, including a mandate to decline gifts from formula companies and to not

promote BMS, bottles and teats. Health providers must understand these responsibilities and should be equipped with the knowledge and skills to support recommended breastfeeding practices, including minimizing harm among children who require BMS for medical reasons or when a mother may choose not to breastfeed.⁵

Even where the Code has been adopted in legislation, enforcement is often weak, and violations frequently occur. Routine monitoring of the Code and its implementation, undertaken by designated actors within functional enforcement systems, has been demonstrated to decrease national Code violations.³

TOOLS AND RESOURCES TO SUPPORT ADVOCACY FOR NATIONAL ADOPTION AND IMPLEMENTATION OF THE CODE

On protecting informed choice and optimal breastfeeding practices by adopting the full provisions of the Code into national legislation:

[Advocacy Brief: Breastfeeding and the International Code of Marketing of Breastmilk Substitutes](#)

This brief provides an overview of the Code and its role in protecting babies and parents.

[Marketing of Breast-milk Substitutes: National Implementation of the International Code, Status Report 2018](#)

This report provides the breakdown of how financial investments impact nutrition and breastfeeding.

[International Code Toolkit](#)

This set of tools highlights the importance of restricting the promotion of breastmilk substitutes through strong policy.

[IBFAN-ICDC “Breaking the Rules, Stretching Rules” Report 2017](#)

This report provides a compilation of marketing practices that violate the Code.

On monitoring and enforcement tools and protocols that can ensure strong implementation of the Code:

[WHO Netcode Toolkit](#)

This set of resources provides detailed guidance on the development of a monitoring framework, protocols, and training materials for monitoring of the Code and relevant WHA resolutions, as well as the formulation, monitoring, and enforcement of national Code legislation.

On improving knowledge about the Code:

[Frequently Asked Questions on the Code](#)

This user-friendly guide provides easy to understand questions about the provisions of the Code and helps understand its importance, how it applies in special circumstances, and how to implement it.

[Introductory Online Course on the Code](#)

This interactive course teaches public health professionals and clinicians about the Code and its specific provisions using videos, supplementary reading, and module tests. Users can receive a certificate of completion.

Additional tools for creating an advocacy strategy:

[UNICEF Advocacy Toolkit: A guide to influencing decisions that improve children's lives](#)

This toolkit provides practical tools for country leaders for building and carrying out an advocacy strategy.

[Alive & Thrive Guide for Public Health Advocacy: Tools and Lessons Learned from Successful IYCF Advocacy in Southeast Asia](#)

This guide can be used to develop a nutrition advocacy strategy through a four-step process for policy change.

[Global Breastfeeding Scorecard](#)

This tool reviews national progress in implementing key breastfeeding interventions to encourage countries to support breastfeeding.

CONCLUSION

Governments, political leaders, and health care providers all have a role to play in improving health outcomes by strengthening, monitoring, and enforcing national Code legislation. Strong regulations on the marketing of BMS ensure that parents can make informed decisions about how to feed their children so that children receive the full benefits of breastfeeding.

SOURCES

- ¹ Rollins N.C., et al., *The Lancet Breastfeeding Series* “Why invest, and what it will take to improve breastfeeding practices in less than a generation,” 2016.
- ² UNICEF. (2016). Infant and young child feeding: Global Database.
- ³ Piwoz, Ellen G., and Sandra L. Huffman, “The Impact of Marketing of Breast-milk Substitutes on WHO-recommended Breastfeeding Practices,” *Food and Nutrition Bulletin*, vol. 36, no. 4, 2015. <http://fnb.sagepub.com/content/36/4/373.full.pdf+html> Accessed February 2017.
- ⁴ Sobel HL, Iellamo A, Raya RR, Padilla AA, Olive JM, Nyunt US. (2011). Is unimpeded marketing for breast milk substitutes responsible for the decline in breastfeeding in the Philippines? An exploratory survey and focus group analysis. *Soc Sci Med* 73(10):1445-1448.
- ⁵ World Health Organization, UNICEF, “Acceptable medical reasons for use of breast-milk substitutes,” 2009, http://whqlibdoc.who.int/hq/2009/WHO_FCH_CAH_09.01_eng.pdf Accessed January, 2019.

FOR MORE INFORMATION PLEASE VISIT:

www.k4health.org/toolkits/breastfeeding-advocacy-toolkit to view the **Breastfeeding Advocacy Toolkit**

and www.unicef.org/breastfeeding for more information about the **Global Breastfeeding Collective**

Global Breastfeeding Collective Partners: 1000 Days | Academy of Breastfeeding Medicine | Action Against Hunger | Alive and Thrive | Bill and Melinda Gates Foundation | CARE | Carolina Global Breastfeeding Institute | Center for Women’s Health and Wellness | Centers for Disease Control and Prevention | Concern Worldwide | Helen Keller International | International Baby Food Action Network | International Lactation Consultant Association | La Leche League International | New Partnership for Africa’s Development | Nutrition International | PATH | Save the Children | UNICEF | United States Agency for International Development | WHO | World Alliance for Breastfeeding Action | World Bank | World Vision International

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