

Annex 2: Relevant World Health Assembly resolutions (summary)

Year	Number	Resolutions
1981	WHA 34.22	• Stresses that adoption and adherence to the Code is a minimum requirement. Member States are urged to implement the Code into national legislation, regulations and other suitable measures.
1982	WHA35.26	• Recognises that commercial promotion of breastmilk substitutes contributes to an increase in artificial feeding and calls for renewed attention to implement and monitor the Code at national and international levels.
1984	WHA37.30	• Requests that the Director General work with Member States to implement and monitor the Code and to examine the promotion and use of foods unsuitable for infant and young child feeding.
1986	WHA39.28	• Urges Member States to ensure that the small amounts of breastmilk substitutes needed for a minority of infants are made available through normal procurement channels and not through free or subsidised supplies. • Directs attention of Member States to the following: 1. Any food or drink given before complementary feeding is nutritionally required may interfere with breastfeeding and therefore should neither be promoted nor encouraged for use by infants during this period; 2. The practice of providing infants with follow up milks is "not necessary".
1988	WHA41.11	• Requests the Director General to provide legal and technical assistance to Member States in drafting or implementing the Code into national measures.
1990	WHA43.3	• Highlights the WHO/UNICEF statement on "protection, promoting and supporting breastfeeding: the special role of maternity services" which led to the Baby-Friendly Hospital Initiative in 1992. • Urges Member States to ensure that the principles and aim of the Code are given full expression in national health and nutrition policy and action.
1994	WHA47.5	• Reiterates earlier calls in 1986, 1990 and 1992 to end "free or low cost supplies" and extends the ban to all parts of the health care system. • Provides guidelines on donation of breastmilk substitutes in emergencies.
1996	WHA49.15	• Calls on Member States to ensure that: 1. complementary foods are not marketed for or used to undermine exclusive and sustained breastfeeding; 2. financial support to health professionals does not create conflicts of interests; 3. Code monitoring is carried out in an independent, transparent manner free from commercial interest.
2001	WHA 54.2	• Sets global recommendation of "6 months" exclusive breastfeeding, with safe and appropriate complementary foods and continued breastfeeding for up to two years or beyond.
2002	WHA55.25	• Endorses the Global Strategy on Infant and Young Child Feeding which confines the baby food manufacturers and distributors' role to: 1. ensuring quality of their products; 2. complying with the Code and subsequent WHA resolutions, as well as national measures. • Recognises the role of optimal infant feeding to reduce the risk of obesity. • Alerts that micronutrient interventions should not undermine exclusive breastfeeding.
2005	WHA58.32	• Asks Member States to: 1. ensure that nutrition and health claims for breastmilk substitutes are not permitted unless national/regional legislation allows; 2. be aware of the risks of intrinsic contamination of powdered infant formulas and to ensure this information be conveyed through label warnings; 3. ensure that financial support and other incentives for programmes and health professionals working in infant and young child health do not create conflicts of interest.
2006	WHA59.11	• Member States to make sure the response to the HIV pandemic does not include non-Code compliant donations of breastmilk substitutes or the promotion thereof.
2006	WHA59.21	• Commemorates the 25th anniversary of the adoption of the Code; welcomes the 2005 Innocenti Declaration and asks WHO to mobilise technical support for Code implementation and monitoring.
2008	WHA61.20	• Urges Member States to: 1. scale up efforts to monitor and enforce national measures and to avoid conflicts of interest; 2. investigate the safe use of donor milk through human milk banks for vulnerable infants, mindful of national laws, cultural and religious beliefs.
2010	WHA63.23	• Urges Member States to: 1. strengthen implementation of the Code and resolutions, the Global Strategy on Infant and Young Child Feeding, the Baby-Friendly Hospital Initiative, the Operational Guidance for Emergency Relief Staff; 2. end all forms of inappropriate promotion of foods for infants and young children and that nutrition and health claims should not be permitted on these foods. • Urges corporations to comply fully with responsibilities under the Code and resolutions.
2012	WHA65.6	• Urges Member States to put into practice the comprehensive implementation plan on maternal, infant and young child nutrition, including: 1. developing or strengthening legislative, regulatory or other measures to control the marketing of breastmilk substitutes; 2. establishing adequate mechanisms to safeguard against potential conflicts of interest in nutrition action. • Requests the Director General to: 1. provide clarification and guidance on the inappropriate promotion of foods for infants and young children as mentioned in WHA63.23; 2. develop processes and tools to safeguard against possible conflicts of interest in policy development and implementation of nutrition programmes.
2014	WHA67(9)	This decision which has the same normative weight as a resolution focused on indicators to monitor the Maternal, Infant and Young Child Nutrition (MIYCN) Plan which includes increasing the rate of exclusive breastfeeding to at least 50% by 2025 as a global target. The indicator for regulation of marketing is the number of countries with legislation or regulations fully implementing the Code and Resolutions.
2016	WHA69.9	This Resolution welcomes the WHO Guidance on ending the inappropriate promotion of foods for infants and young children. It calls upon 1. Member States to take all necessary measures to implement the Guidance 2. Manufacturers and distributors of foods for infants and young children to adhere to the Guidance. The Guidance clarified that follow-up milks and growing up milks are covered by the Code and should be treated as such when implementing the International Code of Marketing of Breastmilk Substitutes and relevant resolutions. The Guidance also recommends that there should be no cross-promotion to promote breastmilk substitutes via the promotion of foods for infants and young children.
2018	WHA71.9	This Resolution urges Member States to: 1. reinvigorate the Baby-friendly Hospital Initiative and the full integration of the revised 10 Steps to Successful Breastfeeding which incorporates Code compliance in Step 1; 2. take all necessary measures to implement recommendations to end the inappropriate promotion of foods for infants and young children.