“...evidence...demonstrates clear inconsistencies between national recommendations on infant and young child feeding and some commercial baby foods and drinks in terms of the types of products available, their ingredient and nutrition composition and product labelling and marketing.” ..... “There is concern that the growth of the commercial baby finger food market (volume sales increased by nearly 11% in 2017-2018), and the way products are labelled and marketed is encouraging snacking, by suggesting to parents that these products form an expected and appropriate part of an infant’s diet, when many are biscuits or savoury snacks and others are similar nutritionally to confectionery.” ..... “The evidence shows that commercial practices are not consistently supporting achievement of a healthy diet”

Thank you for the opportunity to respond to these draft guidelines. We fully endorse the comments made by the First Steps Nutrition e. Despite its narrow focus, we welcome Public Health England’s bold proposals to reduce the sugar and salt content of commercially available baby food marketed in the UK. We hope our additional comments will be considered in the interests of UK child health and globally.

Baby Milk Action is the UK member of the International Baby Food Action Network, and has worked for many decades, alongside WHO and UNICEF, to improve UK and EU legislation, reminding governments of their obligations to protect breastfeeding and child health from commercial exploitation.1 As the PHE report and consultation shows, harmful marketing, driven by the US$ multi-billion baby food industry, 2 is constantly evolving and remains a critical factor in the misleading of health workers and parents and the undermining of government attempts to protect child health in particular, breastfeeding and bio-diverse and appropriate foods for young children.3

We warmly welcome PHE’s proposals as an important step towards the UK Government’s attempts to better protect the health of infants and young children. However, if the proposals are to have any effect, they must be backed up with regulations on composition, marketing and labelling that are independently monitored and enforced. The UK must also defend its recommendations in international fora such as Codex and the World Health Assembly.

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1 Baby Milk Action’s work has centred on the implementation of International Code of Marketing of Breastmilk Substitutes and the subsequent relevant WHA resolutions (The Code). The Code is a regulation sui generis (in a class by itself), therefore “unique”) that Member States have an obligation to implement and enforce and commercial companies to comply with as an element of the international human rights law


3 WHO UNICEF IBFAN Global Code Report 2020
Baby Milk Action answers to specific questions

1. Do you agree with the draft proposed commercial baby food and drink guidelines (Table 1 and Table 2)? Do you consider the guidelines to be broadly achievable? Do you have any alternative proposals?

1.1 Harmonise timelines with marketing and labelling legislation. There is ample time for the proposals on composition to be achieved – not just by 2023, but by 2021. However, we agree with the FSNT that the timelines for any composition changes should harmonise with urgently needed changes in marketing and labelling legislation – which will be carried out separately by the DHSC. If the timelines are not harmonised, manufacturers and distributors will use frequent reformulation to idealise the product and mislead parents about the risks of the product as a whole.

1.2 As mentioned in Footnote 1 overleaf, the UK has obligations to bring its laws and guidelines in line with the Resolutions of the World Health Assembly. This means that no food or drink product should be marketed for infants under 6 months of age, nor should any such products targeting infants or young children carry health or nutrition claims. WHA Resolution 63.23 (1.4) urged Member States “to end inappropriate promotion of food for infants and young children, and to ensure that nutrition and health claims shall not be permitted for foods for infants and young children, except where specifically provided for in relevant Codex Alimentarius standards or national legislation.

1.3 Enforcement: Baby Milk Action has had 40 years of experience with various regulatory bodies and monitoring. If this proposal is to have any credibility and effect (and not be used merely for promotion) it should be backed by a government-controlled regulation. It would be unwise to rely on self-regulation. The government must bear in mind that global corporations that manufacturer and market baby foods have enormous power and will invariably seek to undermine any attempts to curb manufacturing and marketing strategies that increase their profits. The application and enforcement of the guidelines MUST be independent and free from any commercial influence or financing and any fines or sanctions for contraventions must be meaningful and effective.

2. Do you agree with the draft proposed commercial baby food and drink product categorisation (Table 3)? Are there any other types of products which you would expect to be included?

2.1 The Scope is too narrow. It must include Formula-like drinks and Ultra Processed foods targeting infants and young children. There is global public health consensus that these products are not only ‘not necessary’ but carry risks to child health. They are invariably cross branded with infant formula – a misleading marketing strategy that risks child health and that Member States are struggling to eliminate. We strongly agree with Point 6 of the FSNT response that recommends “that any sweetened milk or milk alternative marketed for children over 1 year of age is included in the scope for these guidelines regardless of whether they claim to be an unnecessary growing up or toddler ‘formula type’ - milk.

‘Cross Promotion’ or ‘brand stretching’ is a well-known, deceptive marketing technique used to expand the sale of products such as alcohol, tobacco, soft drinks and baby formulas, whose marketing is restricted because of public health concerns. Cross Promotion where products copy the branding and appearance of infant formulas is especially harmful because it increases the risk of young infants being fed with entirely inappropriate products. The baby food industry’s refusal to stop this practice has wreaked havoc on child health, undermining breastfeeding and child health, fuelling the obesity epidemic and adding to the environmental burden. In one

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4 Exporting countries put trade before the health of the planet and children www.babymilkaction.org/archives/23295
5 The corporations pushing these products are complicit in the climate emergency – through deforestation, mono-cropping, land and sea grabbing, and the promotion of a host of risky technologies. The greenhouse gases and water usage caused by the production and distribution of formulas is growing. Calls to curb infant formula’s carbon footprint, December 4, 2019, Australian National University https://www.bpni.org/report/Carbon-
third of the world’s countries breastfeeding is a lifeline and the majority of children are breastfed in the 2nd year of life.

2.2 The scope must include Ultra-Processed Foods. There needs to be a specific acknowledgement of the risks of globally traded foods intended for infants and young children, many of which – because of the need for long shelf life – are ultra-processed products. UPFs are harmful, not just to health but to the environment. They invariably contain non-food ingredients to stabilize, emulsify, thicken and regulate acidity. Ultra-processing requires perishable ingredients to be removed along with many essential micronutrients. UPFs are often so highly processed that they no longer resemble their plant or animal sources. Many problematic ingredients are permitted by Codex Alimentarius, not on the basis of independent and convincing evidence, but on political consensus and claims of “history of safe use.” When micronutrients are added (to be more accurate - restored) they invariably carry promotional fortification claims that mask the risks of the whole product. Many contain palm oil derived from deforestation (a practice that the UK government claims to oppose. Many are sold in single-use non-biodegradable plastic contribute to Greenhouse Gas Emissions and add to the environmental burden. Promotional ‘claims’ have no place in relation to ultra-processed products, especially if they are HSSF or intended for consumption by infants and young children. Bio-diverse, minimally processed foods or for that matter breastfeeding, that are rarely marketed commercially so will not be able to compete.

2.3 We agree with the FSNT that the guidelines must provide clear criteria to assist regulators in determining how commercial foods and drinks are categorised. Manufacturers and marketers are skilled at blurring such categories.

3. Are there any technical or other challenges associated with achieving the draft proposed commercial baby food and drink guidelines?

3.1 In relation to the Identification of products it must be remembered that manufacturers have developed many strategies to hide the risks of their products. They can and do run circles round consumers (parents, health workers …) with new names and ingredients that few understand. If the UK government is serious about encouraging healthier eating, biodiversity and environmental degradation it must look wider than merely presence of ‘nutrients.

3.2 We agree with FSNT that that manufacturers should not be permitted to market snack foods for children under 12 months of age.

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