

## EB 154 Agenda Item 20 MIYCN. Excerpts from MS interventions relating to Q2, Digital Marketing

**1Canada** We also welcome the report on the uphill battle against the digital marketing of breast milk substitutes. Collective voices and actions are required to limit and regulate those that encourage healthcare workers to recommend breastmilk substitutes for infants and young children when it is not appropriate. Canada thanks to WHO for the publication of the guidance on regulatory measures aimed at restricting digital marketing of breastmilk substitutes. We will be exploring more on this matter and encourage other fellow member states to do the same where possible in order to reduce the negative effects of breast milk substitutes on infants and young children.

**2Lesotho (47)** - There's need for better global collaboration to help country-level implementation of effective policies to control the marketing of unhealthy foods, including the digital marketing of breastmilk substitutes and processed complementary foods.

- In this regard, we recall that the Seventy-fifth Assembly in 2022 adopted Decision EB150/7 and requested the Director-General to develop guidance on regulatory measures aimed at restricting the digital marketing of breast-milk substitutes, and to report on this to the Seventy-seventh Health Assembly in 2024.

- The African Region compliments the Secretariat for the key achievement of publishing the "*Guidance on regulatory measures aimed at restricting digital marketing of breast milk substitutes*" and calls for informal discussions by Member States on their implementation

**3 Togo** And Togo supports the statement delivered by Lesotho on behalf of the 47 member states of the African region

**4 FRANCE** The next edition of the nutrition for growth summit N4G organized at the start of the year 2025 by France will be an important step to accelerate efforts and the mobilization members in order to meet those targets. France supports the International Code of marketing of breastmilk substitutes, and welcomes the new guidance designed to extend its scope to digital tools. France is committed to adopting measures to regulate the marketing of breast milk substitutes. The fourth edition of the National Nutrition health program also provides for actions so to support women before during and a during breastfeeding.

**5Brazil:** After more than 40 years since the creation of the international code on breast milk substitutes, it has been observed that the code has not been appropriately implemented. Therefore, Brazil believes that addressing this issue is crucial to guarantee that public health interests prevail. Brazil urges member states to strengthen the regulation of digital marketing for breast milk substitutes by adopting effective measures to safeguard the health and healthy development of children. This includes promoting adherence to the International market of breastmilk substitutes in contributing to the achievement of global goals for Maternal and Child Nutrition. In this regard, Brazil intends to propose a resolution on the regulation of digital marketing of breastmilk Substitutes Together, let us work towards a future where every child has the opportunity to thrive in growth in a healthy environment

**6 Japan** Regarding the guidance on digital marketing of breast milk substitutes, we commend that the WHO on their hard work for its development. It is our understanding that this guidance has been issued to address problems caused by the rapid advancement of digitalization, unique to our modern society which was not envisioned when the code was first developed the 1974. We would like to emphasize that since the impact of marketing of breast milk substitutes to breastfeeding varies in each country, consideration must be always given to National contexts as regulations get introduced based on this guidance, as stated in its scope, we request the WHO and the international community to utilize this guidance to ensure that approaches to digital marketing are tailored to each country and that unique application is not enforced. Active Communication between the Secretary and the member states is needed to evaluate and identify challenges in implementation.

**7 Slovenia** welcomes the suggestion to convene technical consultations with member states and civil society on the promotion and implementation of the guidance to look at evaluation as it has been set to share with practice

**8 Peru** With the digital marketing of breast milk substitutes, we need to invite leaders influencers who could be a positive influence to adopt healthy practices to look after infants and promote breastfeeding and make it be extended to healthy eating more generally. Finally, PERU wishes to support initiatives like the one that just mentioned by Slovenia to generate the space for dialogue on implementation of WHO guidelines and strengthen solid and applicable regulations to control the marketing of breast milk substitutes and other foods for infants and small children, including over the internet. Thank you.

**9Timor Leste:** We also welcome to guidance on regulatory measures aimed at restricting digital marketing of resumes submitted, we hope that guidelines will be enacted soon for further mitigating negative undermining influence of commercial milk formula.

**10 Malaysia.** This will be very beneficial to member states with regards to the question regarding the purview of the prohibition of digital marketing of the breastmilk substitutes. Malaysia is of the opinion that the enforcement of the guidance needs to be strengthened in a way that it can be implemented by Member States. With regards to this concern, it should be factored in and discussed in a subsequent consultative process. Thank you Madam Chair.

**11Slovakia** We encourage WHO and member states to implement guidelines and their audits concerning the promotion of other than exclusive breastfeeding options, which should be proposed only by capable health professionals such as midwives, lactation advisors and physicians based on the clinical guidelines, diagnostic proof of the condition that is an indication for the option to use other types of foods subsidy and they should recommend formula which is least impactful on the health of the child based on the evidence that is needed to be continuously collected. We would welcome more work on code and addressing the international context against disinformation and preventive communication. Thank you.

**12Maldives:** We acknowledge the decline in childhood stunting in the efforts of member states in updating legal measures to give effect to the International Code of marketing of breast milk substitute. We also recognize the importance of developing guidance on regulating the digital marketing of breastmilk substitute as decided by the Health Assembly in 2022. Digital Marketing of products targeting other age groups also needs to be addressed....Maldives acknowledges WHO has initiatives addressing commercial determinants of health, which is very important for us, as a heavy import dependent country. Maldives are just prioritizing the development of a comprehensive transition plan which should reflect the regulatory measures aimed at restricting digital marketing of breast milk substitutes and other products that hamper the health of children and mothers.

**13China:** Regulating of digital marketing of breastmilk substitutes We must promote exchange and communication among members States where the focus on implementation is enhanced WHO has an active role in the system ...4<sup>th</sup> developing nations and improving maternal nutrition globally. In recent years, China has continually refined its policies and service systems

**14Ethiopia:** As has been highlighted, digital marketing could reserve reverse the gains that the region has been making in promoting and protecting breastfeeding with negative consequences on infant and child mortality, under nutrition and over nutrition. Thus, Ethiopia welcomes the development of the guideline on regulating the digital marketing of breastmilk substitutes, and supports further discussion

**15 BANGLADESH:** <https://apps.who.int/gb/statements/EB154/PDF/Bangladesh-20.pdf>  
Bangladesh underscores the need of enforcement of regulatory measures on digital marketing of breast-milk substitute. Bangladesh does not support promotion of breastmilk substitutes as a natural choice of nutrition for the children. Application of regulatory measures on digital marketing will be exigent for ensuring quality of breastmilk substitute. Hence, we suggest the following: 3.1 Only if a lactating mother is not able to breastfeed her child at an optimum level, substitutes may be explored as per the advice of a Physician; 3.2 WHO may promote research initiatives to study the negative impact of breastmilk substitute; 3.3 Bangladesh joins others to initiate a consultation among the Member States on regulatory measures on digital marketing of breastmilk substitutes. 4. Bangladesh supports Brazil's intention of a resolution for ascertaining standard in digital marketing of breastmilk substitute and promoting breastfeeding. I thank you, Chair.

**16 Switzerland.** <https://apps.who.int/gb/statements/EB154/PDF/Switzerland-20.pdf> Switzerland would like to thank the Secretariat for the publication of the “Guidance on regulatory measures aimed at restricting digital marketing of breast-milk substitutes”. Switzerland fully supports breastfeeding as clearly illustrated in the Swiss recommendations on [Nutrition during pregnancy and the breastfeeding period](#) as well as those on [Nutrition for infants and young children](#). Furthermore, Switzerland would like to note that the Swiss legislation clearly prohibits the advertising of infant formula based on **Art. 41 paragraph 3** of the Federal Ordinance on Foodstuffs and Utility Articles (*Ordonnance sur les denrées alimentaires et les objets usuels (ODAIUOs)*) Indeed, this provision specifically includes the prohibition of digital marketing and in this respect, it does fulfill some of the objectives the “Guidance on regulatory measures aimed at restricting digital marketing of breast-milk substitutes.”

**17Jamaica.** The system will be electronic and will include WHO indicators on infant and young child feeding, dietary practices and nutritional status. Sufficient human and financial resources will be needed and we applaud the WHO for the progress made with respect to Action #4 and encourage the use of other strategies in achieving the SDG target by 2030. One such strategy could be increasing the uptake of the guidance on regulatory measures aimed at restricting digital marketing of breastmilk substitutes is the formation of and/ or strengthening of Regional networks.

### The rest not really welcoming

**18 Argentina:** Furthermore, we have the International Code on the Marketing of Breastmilk substitutes, which is part of our law and we've taken many measures relating to it. Let me say something about digital marketing and the regulation of it. We have said in this forum, that any rules on this should be balanced so that these products can be on the market but in a regulated way. In those cases where breastfeeding naturally cannot be carried out, they are important. Like some of the members including the United States, we are a little concerned about the way things are going. We are particularly worried that the scope of any rules might go beyond what was decided in decision 75.22 And that might make it difficult to implement, as well as raise queries about its consistency and harmony within regulations and norms in WHO Th

**19 AUSTRALIA** Thank you very much to Australia thanks to the Secretariat for its report and we acknowledge that increased action is required from member states if we're to reach the global nutrition targets for improving maternal infant and child Young Child Nutrition. We will welcome efforts by the Secretary to work with Member states to include the most current data sources to support monitoring of progress by 2025. And we encourage efforts to ensure awareness of the policy briefs around the targets. We heard some colleagues intend to propose a new Resolution and thanks very much to Brazil for being very gracious about inviting feedback. That wasn't clear to me when a resolution would be proposed. We recall the agreement by the Executive board at its most recent meeting in May 2023, the decision ... to demonstrate our commitment to better governance practices in the lead up to governing body meetings to propose WHO resolutions by November of the previous year. Thanks.

**20 Namibia:** Chair we are concerned about the lack of robust food standard regulation and consumer protection, particularly for children and adolescents and the limited

**21 USA** United States firmly supports efforts to provide optimal nutrition for infants and efforts to promote exclusive breastfeeding. **We acknowledge regulatory measures aimed at restricting the inappropriate digital marketing of breastmilk substitutes are one of several tools available that may help countries improve breastfeeding rates and maternal and child health**

**NSA SCF** It is vital that we protect against the circumvention of existing code laws, aggressive marketing, and the misuse and distortion of information to influence infant feeding decisions. We call it member states to implement and incorporate the guidance into their existing code laws and to accelerate progress

### NSA World Cancer Research Fund International:

1 Thank you Madam Chair. Distinguished Delegates **World Cancer Research Fund** international with support from **NCD Alliance** and **world obesity Federation** strongly urges member states to protect, promote and support breastfeeding with the national legislation in line with the International Code of marketing breast milk

substitutes, and WHO's guidance on regulatory measures aimed at restricting digital marketing of breast milk substitutes. Breastfeeding is a powerful and contact double duty policy that protects women against breast cancer and children against weight gain overweight and obesity. mothers and babies alongside their communities and health care providers must be protected from pernicious Industry Marketing Strategies, introducing monitoring mechanisms to ensure implementation of the Code is vital

**NSA IBFAN** Thank you Madam Chair. WHO should be proud of the materials on marketing produced under Dr. Tedros' tenure. The Guidance on digital marketing is a key part of that package and will help governments lower healthcare costs and save lives. Digital marketing is now out of control with companies paying influencers and using algorithms and deceptive schemes to target pregnant and lactating women and convince them that their expensive, risky environmental, environmentally wasteful products are essential for children's health. The guidance doesn't prevent any person buying products that they need. But it could help stop predatory marketing at source. We know from our Codex and other experience that a WHO resolution is very important and would help Member States strengthen their laws without fear of trade challenges. Misleading digital marketing will only get worse if the Guidance sits on the shelf ignored. Thank you.

**The Scaling Up Nutrition Movement** welcomes WHO's Guidance on regulatory measures to restrict digital marketing of breastmilk substitutes and calls on countries to incorporate this guidance into their existing Code Laws