

ASIA-PACIFIC

Code Violations

A survey of the state of the International Code of Marketing of Breastmilk Substitutes and subsequent WHA Resolutions

OVERVIEW

Although 24 of the 30 countries in the Asia-Pacific* region have taken some form of action to give effect to the International Code, not many have adopted the Code in its entirety. Even fewer countries have taken on board subsequent WHA resolutions which clarify the Code and keep it up-to-date with marketing trends and scientific knowledge.

Limp national measures are treated with impunity in many countries due to lack of enforcement, ignorance of consumers or careless disregard by health professionals used to working hand-in-glove with industry.

These factors, coupled with the increasing purchasing power of an expanding but largely uninformed middle class, high population growth and burgeoning new markets make the Asia-Pacific region the geographical target of choice for baby food companies.

As the region garners almost 37% of the global retail market, baby food companies see it as an area of high growth potential and aggressively compete with each other for what one company calls its "stomach share". Commercial aggression manifests itself in promotional practices which violate the Code and national measures and undermine breastfeeding. Code violations are widespread as the pictures inside show. The little social marketing to promote breastfeeding that is being carried out in this region is no match for the relentless promotion that is taking place.

WHO reports that in most developing countries in the region less than 50% of infants under six months are exclusively breastfed. In Thailand, the rate of exclusive breastfeeding is less than 10%. In the Philippines, the median duration of exclusive breastfeeding is estimated to be 24 days.

THE INTERNATIONAL CODE

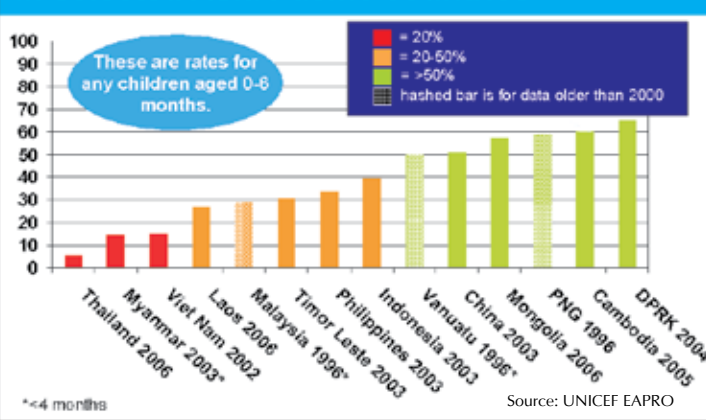
The intent of the Code is to protect babies, mothers and health professionals from inappropriate promotion of breastmilk substitutes, feeding bottles and teats. It seeks to eliminate man-made obstacles to breastfeeding which result from direct and indirect promotion of these products.

The Code applies to all products marketed as partial or total replacement for breastmilk, such as infant formula, follow-up formula, special formula, cereals, juices, vegetable mixes and baby teas. It also applies to feeding bottles and teats.

The Code:

- Bans all advertising and promotion of products to the general public.
- Bans samples and gifts to mothers and health workers.
- Requires information materials to advocate for breastfeeding, to warn against bottle feeding and NOT contain pictures of babies or text that idealise the use of breastmilk substitutes.
- Bans the use of the health care system to promote breastmilk substitutes.
- Bans free or low-cost supplies of breastmilk substitutes.
- Allows health professionals to receive samples but only for research purposes.
- Demands that product information be factual and scientific.
- Bans sales incentives for breastmilk substitutes and contact with mothers.
- Requires that labels inform fully about the correct use of infant formula and the risks of misuse.
- Requires labels to NOT discourage breastfeeding.

Exclusive Breastfeeding Rates (<6 months) in selected Asia Pacific countries



"... adequate breastfeeding and complementary feeding could prevent more than twice as many deaths of children under age five as any other intervention ...

*An important policy intervention is enforcing the **International Code on the Marketing of Breastmilk Substitutes**, which prevents inappropriate promotion and marketing of commercial infant formula products."*

– 2006 World Bank Report



Flags indicate countries covered in this report. Code violations were either obtained from participants at the Asia-Pacific Code Training Course held in Penang, November 2007 or from the *Breaking the Rules, Stretching the Rules 2007* report published by IBFAN-ICDC. This report is neither comprehensive nor representative of the state of Code compliance in any country but it highlights the latest marketing trends.

*By the term "Asia-Pacific", the publishers of this report mean the 27 Member States in the Western Pacific Region as well as Indonesia, Thailand and Timor-Leste.

LOOK WHAT THEY'RE DOING !

Monitoring Code Compliance in Asia-Pacific

STATE OF THE CODE IN THE ASIA-PACIFIC REGION

Law: Palau, Phillipines

Many provisions law: Cambodia, China, Indonesia, Lao PDR, Mongolia, Papua New Guinea, Vietnam

Policy or voluntary measure: Australia, Cook Islands, Malaysia, New Zealand, Thailand (suspended), Tonga

Some provisions voluntary or guidelines: Brunei Darussalam, Japan, Kiribati, Korea (Rep.), Marshall Islands, Samoa, Singapore, Solomon Islands, Vanuatu

Measure drafted awaiting final approval: Fiji, Micronesia, Timor Leste

No information: Nauru, Nieu, Tuvalu

The summary is based on the most recent information made available to IBFAN-ICDC as at Dec 2007 and is not indicative of the level of effectiveness of national measures. Aspects of the Code concerned with quality and labelling of breastmilk substitutes which are covered by Food Laws, Food Standards and other measures are not taken into consideration.

PROMOTION TO THE PUBLIC

- Article 5.1 of the Code prohibits advertising and all other forms of promotion of products under the scope of the Code.
- Article 5.2 and 5.4 of the Code prohibit companies from giving samples and gifts to mothers.
- Article 5.5 of the Code prohibits marketing personnel from seeking direct or indirect contact with pregnant women or mothers.

The International Code and national measures based on it are aimed at protecting parents from commercial influence so that they can make informed decisions about infant and young child feeding. No measures, poor ones or unenforced laws mean that pregnant women and mothers in the Asia-Pacific continue to be the targets of company promotion.

Promotion abounds which banks on the natural desire of parents to provide well for their children and to see their children grow up intelligent and talented. Claims imply that without the company's latest innovated products, the child will be missing out or will not succeed. Advertisements couch products in idealising terms and surround them with such tantalising images that any parent could be forgiven for believing that the product is the best for their baby. The fact that the fancy added ingredients occur naturally in breastmilk is completely obscured.

Feeding bottles and teats also come under the scope of the Code. Ads pay lip-service to the importance of breastfeeding but in fact undermine it by normalising bottle feeding and claiming that their products are similar to the mother's breast or nipple.

Industry Interference

Laws in this region have been subjected to intense industry lobbying to dilute them down.

Policy makers are rarely armed with sufficient ammunition to counter the persuasive arguments advanced by companies on why certain marketing practices should be allowed.

After industry interference, strong national provisions were altered or struck down. Such compromises to enhance positive business climate does not protect breastfeeding.



Going for Gold - Wyeth ad in Malaysia tells parents, "Love is your greatest gift. So treasure her like Gold." No products shown but the link to the S-26 Gold range of infant formula is unmistakable.

In your face and on the back of a bus—Abbott uses child prodigy pianist and UNICEF ambassador Lang Lang to push Gain Advance 2 follow-on formula in Hong Kong.

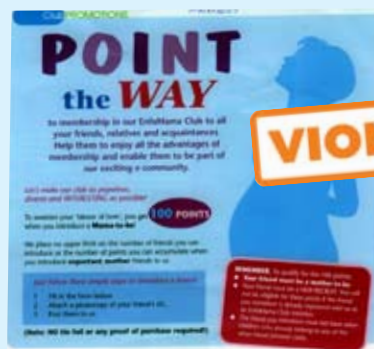


Suck on this -- Two ads in the Singaporean Motherhood magazine. One assures mothers "Of course breastfeeding is best for your baby. That's why we designed our bottle to be as close to nature as possible." The ad also offers a special two-bottle pack promotion.

The ad on the right promotes bottle feeding by fathers with the slogan "When you need a choice, Gerber makes it easier for you."

GETTING MOTHERS HOOKED

Mothers' Clubs are used as a means to build customer databases. Once mothers have given their address and baby's age, they are subject to targeted mailings with promotions for age-specific products.



In Malaysia, The *Mama to Mama* magazine calls on members to recruit their pregnant friends in exchange for 100 points, which can then be redeemed for gifts.



New ways to promote sales...



...Pulling heartstrings...

In Indonesia, a heartwrenching advertisement in Nova Tabloid runs a campaign seeking support for Sari Husada's 'fight against malnutrition. The NUMICO-owned company pledges a donation of 50 Rupiah (US\$0.006) for every Sari Husada product purchased including SGM and Vitalac formulas. The campaign slogan "Satukan Hati" translates "Join hearts to feed the nation's children, because they are our children too".



...and pulling crowds

In the Philippines, Wyeth runs a series of public events to woo mothers. Although banners promote Bonakid growing-up milk, most attendees are mothers with babies between 6-15 months. Toddlers are given Bonakid samples while young babies are fed pre-mixed infant formula at the event. Mothers get gift packs and are told they can exchange empty Bonna containers for prizes.

VIOLATION



A big display in a supermarket in Bandung, Indonesia promotes Creme Nutricia, a cereal product marketed for babies below six months. Attending sales promoters identify customers for data-collection.

PROMOTION IN SHOPS

- Article 5.1 of the Code prohibits advertising and all other forms of promotion of products under the scope of the Code.
- Articles 5.2 and 5.4 of the Code prohibit companies from giving samples and gifts to mothers. Shops are favoured points of contacts with parents. Sales promotion in shops includes special displays, discounts, shelf talkers, gift offers, tied sales and free samples. In some countries, company reps are stationed in supermarkets or visit health centres where they distribute promotional materials and product samples directly to mothers and or advise them on infant feeding and care and recommend specific company products. Promotion in shops is rife in countries where national measures do not cover promotion at the retail level. The situation is compounded when supermarket chains enter the fray and compete with the big names with their own store brands.

VIOLATION



Although the sales promoter wears a France Bébé 3 t-shirt, the merchandise she is promoting in a Cambodian supermarket includes France Bébé 1 infant formula and France Bébé 2 follow-on formula.



In Australia and New Zealand, infant and follow-on formulas are occasionally sold at reduced prices.

VIOLATION



In violation of the national law in the Philippines, Nestlé cereal products were put on special sale in supermarkets and became the subject of a cease and desist order.



In supermarkets in China, products are often put on special displays with offers of gifts for every purchase. Leaflet inset contains a Wyeth promotion for its Gold range of products which proclaims "your golden baby shall be the future gold medalist star!" Although no packshot was shown for S-26 Gold infant formula, the product is represented by the figure "1" and the slogan "closer to breastmilk".

PROMOTION IN HEALTH CARE FACILITIES AND TO HEALTH WORKERS

- WHA Resolution 47.5 (1994) urges an end to free or subsidised donations of products to all parts of the health care system.
- Article 7.4 allows samples to health workers only for research purposes. Health workers may not pass on samples.

Health care facilities are hot-beds for company promotion. This is where companies find the largest number of health professionals, pregnant women and mothers with young babies. Unless there are hospital policies in place which ban promotion, companies are continuing with a long standing practice whereby their marketing reps visit doctors, nurses and midwives in maternities and paediatric wards bearing gifts in the form of items such as diaries, calendars, wall charts, display items and basic medical equipment. These gifts normally sport corporate or product names and logos which are promotional even without the benefit that medical endorsement confers through their display in health facilities.

Companies are magnanimous with health workers as they are aware of the value of generating goodwill among health workers. Some reps are taught to conduct a “needs analysis” of health workers so that they are able to offer exactly what health workers desire.



This leaflet found in a doctor's office in China promotes telephone orders and free home deliveries and can be exchanged for a free gift.



In China, Nestlé posters conjure the image of warmth and love in a Shanxi hospital. Images of Caucasian parents cleverly play on Chinese infatuation with foreign products.



Health workers in the Philippines receive gifts inscribed with logos and colours of infant formula labels and slogans such as “Brain building block, healthy digestive system; DHA+ Prebio 1” and “with Bifidus” to publicise components found in Nestlé's Nestogen infant and follow-on formulas (inset)



Wyeth and Friesland are also in the running with their gift bags to Filipino health workers. The gift bag by Friesland claims that the DHA in Friso products “supports the building blocks of the brain”.

SAMPLES & SUPPLIES

Another practice of major concern is the widespread dependency on samples and supplies. Samples given to health workers trickle down to mothers who are tempted to try the products on their babies prompting early cessation of breastfeeding. Sometimes samples discourage mothers from initiating breastfeeding altogether. When given in large quantities, samples are known as ‘supplies’ and they proliferate in non baby-friendly hospitals. Companies and hospitals have evolved a practice whereby brands are rotated sequentially to babies as they are born.



Supplies of different brands of infant formula available in many private hospitals in Malaysia. Tags are provided to identify babies with the formula they are fed on.



Health workers provide mothers in Indonesia with samples of Nan H.A. and Lactogen 1 (left). Some hospitals are given discounts for SGM 1 and Vitalac 1 but many are given free supplies and samples upon request.



Samples. Free now, pay later. On request, companies in Australia send doctors loads of infant formula samples without enquiring whether the samples are for the purpose of professional evaluation or research as required by the national measure and the Code.

Each problem...



a solution?

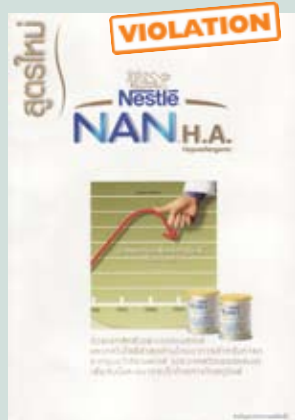
The 'reference guide' promises that "Novalac formulas can help reduce crying and increase sleep, leaving infants content and parents more relaxed." Aside from the usual tiny 'breast is best' statement, nowhere does the Novalac material state or imply that breastfeeding is the natural way of feeding a baby and the best solution to "feeding problems".



Scientific information to doctors become ads in professional journals in Malaysia – one promotes DHA in Lactogen 1 for optimal brain growth and the other uses boxing gloves to emphasise how NAN 2 helps infants develop and maintain good immunity.



Breastfeeding is best, yes, but this Chinese Lactogen leaflet warns parents that babies in cities suffer from micronutrient deficiency and claims that Lactogen has the optimal combination for good nutrition.



In this Thai brochure, Nestlé raises the alarm that the incidence of allergies has dramatically increased. Although breastfeeding prevents allergies, the obvious message is that Nan H.A. offers a state-of-the-art nutrient system and is the preventive measure all parents should take.

MISLEADING INFORMATION

- Article 4.2 requires all information material to advocate for breastfeeding and not contain pictures or text which idealises the use of breastmilk substitutes.
- For health professionals, Article 7.2 of the Code allows only product information that is factual and scientific.
- WHA resolution 58.32 (2005) prohibits nutrition and health claims unless specifically provided for in national legislation.

Information and educational materials must contain specified details and warnings. No images or text that idealises the use of breastmilk substitutes are allowed.

All too often, companies present inaccurate and biased information that tends to discourage breastfeeding. They tend to capitalise on mothers' fears of illnesses by putting a medical spin on infant feeding which offers solutions for normal infant behaviour such as regurgitation or colic. Even "growing" and "hungry" babies are identified as problematic when sustained breastfeeding is the solution.

Companies have long promoted the benefits of their products in their information materials to the medical profession but there is a tremendous surge in nutrition and health claims. These materials are never limited to scientific and factual matters and are mostly unsubstantiated by independent scientific evidence. Often they are provided in bulk and mothers also end up receiving them through health workers or in pharmacies. They are aimed at persuading parents to purchase products at an exorbitant price based on suggested enhanced nutrition and health benefits. Although health and nutrition claims are now prohibited by WHA resolution 58.32 [2005] unless allowed by national legislation, the practice continues unabated.



Promotional materials for Nestlé's NAN and Namyang's Star formulas passing off as information.

This Vietnamese brochure claims that Enfalac A+ strengthens the immunity of infants and newborns and young children 0-12 months.



Insinuating equivalent mother-baby bonding through bottle feeding in this Heinz poster in Australia.



In China, promotional materials by Heinz are imprinted with the logo of the Chinese Child Nutrition and Health Research Centre bearing the slogan "Brand of first choice". Such product endorsement is incompatible with the Code, as health workers and by extension, the institutions they work for, are required to encourage breastfeeding. Heinz distributes to Chinese hospitals this nutritional guide for children 0-2 years entitled "A good start". The guide wrongly claims that breastmilk does not meet the nutritional requirements of babies from four months.

The Code prohibits financial and material inducements to promote products. Furthermore, WHA resolution 58.32 (2005) warns against conflicts of interest where incentives are given for programmes and professionals working in infant and young child health.

LABELLING

- Article 9 of the Code requires labels to NOT discourage breastfeeding and inform about the correct use of the product, the risk of misuse and abide by a number of other points.
- WHA resolution 54.2 (2001) advises exclusive breastfeeding for six months which means that the recommended age for use of complementary foods cannot be under six months.
- WHA resolution 58.32 (2005) prohibits nutrition and health claims, except where specifically provided for in national legislation.

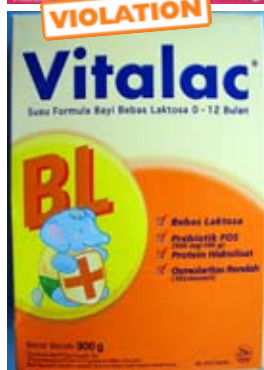
The Code forbids the use of pictures of infants or other pictures or text idealising the use of infant formula. Baby faces have disappeared from most labels across the region but cuddly stuffed animals, toys, cartoon characters and stylised drawings which create warm and fuzzy feelings are firmly in place. These images are cleverly turned into promotional icons which are instantly recognisable by the public as products of specific companies even where product names are not mentioned.

Although health and nutrition claims on labels are no longer allowed except where specifically provided for in national legislation, such claims are unabashed being used on labels to promote products in countries where they can get away with it. Apart from being largely unproven by independent scientific research, such claims idealise products and should be prohibited.

Although many countries in this region have adopted the global recommendation



Indonesia:
The label of Sari Husada's SGM 1 has been revamped from its original plain pink label to one displaying a drawing of a baby pram in the sun. A statement advises that the product should be used when breastmilk is not sufficient to satisfy baby's needs.



The claims on the label include "DHA to assist in baby's brain development"; "LA (linoleic acid) as the precursor for AA, which is important for brain development" and "Prebiotic FOS to assist digestion and reduce the risk of constipation."

Similar claims are also made on the label of Vitalac BL.



In Cambodia, the label of Dulac shows a toy dolphin as a graduate, implying higher intelligence as a result of fatty acids added to the formula.



The back of the label claims "new innovative formula supporting brain development."

The Dupro label promotes 'DHA-maxi-Q' which also shows a mortar board pointing to greater academic achievements by babies fed on this product.



In Malaysia and Thailand, wise and cute 'humanised' owls sell milk for babies. Large cutouts of the owls decorate the walls of private hospitals.



...while in China, the fat mother and baby bird logo found on NAN and Lactogen appears on breastfeeding posters in hospitals.



In the Philippines, the labels of Bonna infant formula and Bonamil Milk Supplement (follow-on formula) claim to have five nucleotides which "help promote physical growth, increase resistance to infection and enhance brain development".

Also in the Philippines, the label of Nestlé's Nestogen 1 infant formula claims that it has DHA and more calcium which function as "brain building blocks" and "bone builders". The pack also advertises Nestlé cereal and encourages early weaning with the statement "You may start giving your baby new improved Nestlé Baby Cereal, the complete first solid food" without mention of a specific age recommendation.



In June 2006, the Dept. of Health issued a new set of implementing rules and regulations which ban health and nutrition claims. This provision has since been upheld as valid by the Supreme Court in Oct. 2007 and claims should no longer appear on labels and other company materials.

regarding exclusive breastfeeding for six months, complementary foods are still being labelled as suitable from four months. Cute baby images are frequently seen on the packing and labelling of these products.



In Australia, cute baby images on some products. Perhaps most disturbing of all is the label for Heinz Organic which recommends the product "for all ages" written brightly on its side, followed by smaller letters, the vague recommendation: "six months and above".

Damage control !

"There is certainly no scientific evidence that demonstrates IQ improvement with drinking a certain milk. What is known is that IQ is mainly influenced by genetics, the right stimulation of the child in his or her upbringing and proper nutrition."

Pedro N. Dy-Liacco, Director
Communications and Marketing Services Director
Nestlé Philippines

(source: Business World, May 4-5, 2007)

Editorial note: While the Supreme Court case was pending, Nestlé which was not involved in the case carried out 'intelligent' pre-emptive damage control by disputing its very own promotional message which talks about brain development, ergo, IQ improvement.

EXPANDING THE MARKET

Milks for pregnant and lactating mothers and growing-up milks (GUMs) for toddlers are foreign to the indigenous cultures of local communities but clever promotion has created an unprecedented and unnatural demand for these products in Asia-Pacific.

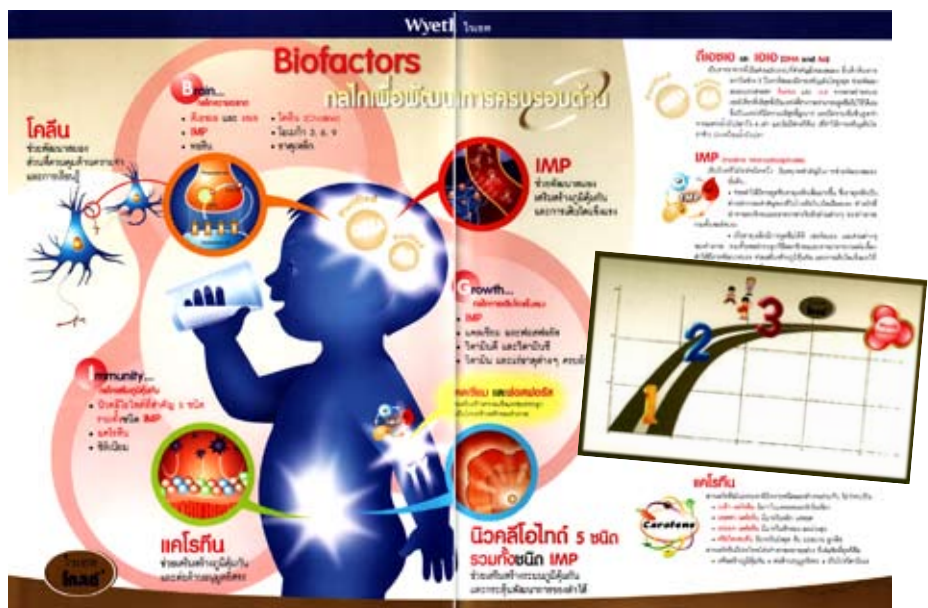
Although unnecessary, the mistaken belief that milks for pregnant and lactating women are necessary for women to breastfeed successfully may become entrenched.



An advertisement in the Mama to Mama magazine shows the entire Enfa range of formulas accompanied by packshots except for the infant and follow-up formulas which are represented by numbers 1 and 2. This way Mead Johnson can claim to abide by the letter of the Malaysian Code which covers the 1 and 2 formulas.

BUILDING BRAND LOYALTY

The same mistaken belief is also widespread that toddlers require growing-up milks to thrive when adequate breastfeeding and complementary feeding would suffice. What is more worrisome is the way manufacturers and distributors selling formula and complementary food products benefit from the promotion of milk-for-mothers and GUMs of the same range because they share the same brand name and logo. Although these products do not come under the scope of the Code, manufacturers and distributors cash in on this promotion to build brand loyalty for products under the scope of the Code. It will not be remiss for governments in the Asia-Pacific region to introduce provisions in their Code measures to prevent the use of brand names of these products to create an association with formula products. Such measures would avoid the indirect promotion of formula products.



This graphic Wyeth brochure from Thailand not only expounds the virtues of DHA, AA, IMP, choline and nucleotides for brain, immunity and growth in its GUM but promotes formula 1 and formula 2 as well.



In Australia, company information materials are used to instill brand recognition among customers. For example, Heinz's giraffe mascot, the product logo of Heinz's Nurture infant formula and toddler milk, is found on all promotional materials for mothers and for health professionals.



Sticking to tots–The same promotional slogan – “Malaysia’s No. 1 Soy Formula” is used for Isomil IQ and Isomil IQ Plus so once parents are sold on the infant formula, they will progress to the follow-up and then toddler milk (GUM) of the same brand. The ad claims that the products support growth, bone and immune development. Not very scientific but this ad is passed off as information to the medical profession.



THE WAY FORWARD IN THE ASIA-PACIFIC REGION

Code implementation alone cannot improve falling breastfeeding rates or the nutritional status of children. For that to happen, an integrated cross-sectional approach to improve infant and young child feeding practices is needed.

The International Code, however, can and must prepare the ground for such an approach to be effective. The Code can level an uneven playing field and remove much of the competition to breastfeeding posed by baby food companies. WHO notes that no breastmilk substitute, not even the most sophisticated and nutritionally balanced formula, can offer the numerous unique health advantages that breastmilk provides for babies. The evidence base for the premises justifying Code implementation has steadily grown stronger. Thousands of scientific articles in the form of randomized control trials, effectiveness studies, case-control studies, and population-based assessments have demonstrated the life-saving benefits of breastfeeding, even in the most affluent environments, not to mention the measurable risks of not breastfeeding.

72% of countries in the Asia-Pacific region have taken some form of action to implement the Code. Some actions are better than others and there is room for improvement in all countries. Many countries are reviewing their national measures with a view to strengthening them. This course of action is to be lauded but it should not prevent steps from being taken to implement, monitor and enforce the measures that are in place, whether strong or weak. Sanctions, or warnings, must be meted out for violations, where possible.

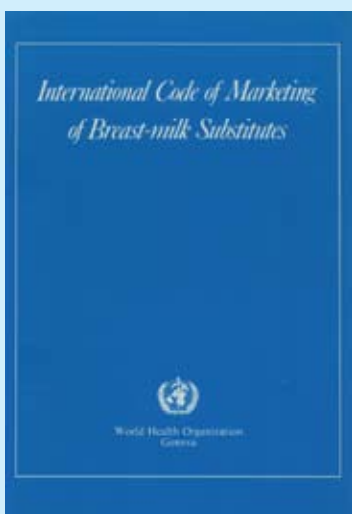
Businesses must know that governments mean “business” when it comes to protection of breastfeeding. Experience elsewhere shows that where national measures are enforced, companies behave better. There is no reason why this should not happen in the Asia-Pacific Region.

“Independently of any other measures taken for implementation of this Code, manufacturers and distributors of products within the scope of this Code should regard themselves as responsible for monitoring their marketing practices according to the principles and aim of this Code, and for taking steps to ensure that their conduct at every level conforms to them.”

–Article 11.3, The International Code of Marketing of Breastmilk Substitutes

“Those who suggest that direct advertising has no negative effect on breastfeeding should be asked to demonstrate that such advertising fails to influence a mother’s decision about how to feed her infant”

— Document WHA 47/1994/Rec/Annex 1 on Health Implications of Direct Advertising of Infant Formula, paras 133-139.



This pamphlet is part of a series of IBFAN publications which highlight marketing practices and Code violations in selected countries around the world. The benchmark standards are the International Code of Marketing of Breastmilk Substitutes and subsequent World Health Assembly Resolutions.

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