

Strategy 9. Addressing the Marketing of Infant Formula

Definition

Monitoring how infant formula is marketed to ensure that potential negative effects on breastfeeding are minimized can help reduce barriers to breastfeeding for women who choose to do so. The negative association between the marketing of breast-milk substitutes and breastfeeding rates was the basis of the World Health Organization's *International Code of Marketing of Breast-milk Substitutes* (the Code).⁸⁵

Developed with infant formula manufacturers, the Code is a set of guidelines that apply to the marketing of breast-milk substitutes. It reaffirms the role that key entities—such as governments, health care systems, health care workers, and manufacturers and distributors of breast-milk substitutes—play in making sure infant formula is marketed in ways that minimize its negative effects on breastfeeding.

Rationale

The Code was developed with manufacturers of infant formula. It provides guidelines for the marketing and distribution of breastfeeding substitutes and limits direct marketing to pregnant women and new mothers. Until the late 1980s, infant formula was not marketed directly to consumers in the United States.⁸⁶ Instead, marketing efforts focused on the relationship between health care professionals and parents in making decisions about infant feeding. However, there has been a movement toward the use of direct-to-consumer marketing in recent years.^{86,87}


Evidence suggests that the effect of the marketing practices used to promote breastfeeding substitutes is of particular concern because of its disproportionately negative effect on mothers in the United States who are known to be at high risk for early termination of breastfeeding. These groups include WIC participants, first-time mothers, and women who are less educated, nonwhite, or ill during the postpartum period.^{23,88}

Evidence of Effectiveness

One common way that infant formula is marketed is by giving women gift bags with free formula samples when they are discharged from

the hospital. In 2006, the U.S. Government Accountability Office reviewed 11 studies to determine the effect of distributing discharge bags with formula samples on breastfeeding.⁸⁸ Seven of the 11 studies found lower breastfeeding rates among women who receive discharge bags with formula samples than among women who did not receive bags with formula samples. More recently, the results of a study in Oregon found that receiving a commercial hospital discharge bag was associated with shorter duration of exclusive breastfeeding.²⁴





In addition, the results of a randomized controlled trial of 547 women found that educational materials on breastfeeding produced by manufacturers of infant formula and distributed to pregnant women who intended to breastfeed had a substantially negative effect on the exclusivity and duration of breastfeeding.⁸⁹

Key Considerations

- The Code individually addresses the roles of health care systems, health workers, and people who manufacture, market, and distribute breast-milk substitutes. It also covers issues of labeling and quality, and it monitors compliance with the guidelines.
- In addition to the guidelines in the Code, many doctors belong to professional organizations that also provide standards on similar issues. For example, in 2010, the Council of Medical Specialty Societies (CMSS), which represents 32 leading medical professional societies, including the AAP, adopted its own *Code for Interactions with Companies*. This code, which was revised in 2011, provides guidance for appropriate interactions with for-profit companies in the health care sector to ensure that interactions benefit patients and lead to improved care.

The CMSS code ensures that interactions with companies, such as manufacturers of breast-milk substitutes, meet high ethical standards. These standards may include disclosing any company sponsorship or support to CMSS members and the public and not accepting company sponsorship of items or programs unless they are aligned with the CMSS's strategic plan and mission.⁹⁰

International Code of Marketing of Breast-milk Substitutes

The Code* includes the following guidelines:

- No advertising of breast-milk substitutes directly to the public.
- No free samples to mothers.
- No promotion of products in health care facilities.
- No commercial product representatives to advise mothers.
- No gifts or personal samples to health workers.
- No words or pictures idealizing artificial feeding, including pictures of infants on the products.

The Code states that

- Information to health workers should be scientific and factual.
- All information on artificial feeding, including product labels, should explain the benefits of breastfeeding and the costs and hazards associated with artificial feeding.
- Unsuitable products, such as condensed milk, should not be promoted for babies.
- All products should be of high quality and take into account the climatic and storage conditions of the country where they will be used.

* The Code is currently voluntary in the United States.



Action Steps

1. Establish guidelines for how public health clinics and facilities can display and distribute materials that do not deter breastfeeding initiation, duration, and exclusivity.
2. Provide educational materials that do not deter breastfeeding initiation, duration, and exclusivity to the offices of pediatricians, family practitioners, obstetrician-gynecologists, and nurse-midwives and to public health clinics and facilities.
3. Work with local associations of health care professionals such as pediatricians, family practitioners, obstetrician-gynecologists, and nurse-midwives to encourage the use of informational or educational materials that do not deter breastfeeding initiation, duration, and exclusivity.

Program Examples

Six Steps to Achieve Breastfeeding Goals for WIC Clinics

The National WIC Association developed the Six Steps to Achieve Breastfeeding Goals for WIC Clinics to increase breastfeeding and support mothers in WIC Programs who breastfeed. Step 2 is to “Provide an appropriate breastfeeding-friendly environment.” The first objective of this step is to “meet the *International Code of Marketing of Breast-milk Substitutes*.”

National Alliance for Breastfeeding Advocacy: Research, Education, and Legal Branch (NABA REAL)

NABA REAL is the nonprofit organization that monitors compliance with the Code in the United States. NABA REAL trains volunteers to monitor compliance and publishes and distributes information about the Code.

New Mexico Breastfeeding Task Force Honor Roll Project

The task force set up the Honor Roll project to identify and recognize hospitals in New Mexico that have eliminated the use of marketing materials from companies that make infant formula. Identified hospitals receive an award, and a list of awardees is posted on the task force’s Web site.





Resources

Infant Formula Q&A

U.S. Food and Drug Administration

Answers to consumer questions about infant formula.

<http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm048694.htm>

INFACT (Infant Feeding Action Coalition) Canada

INFACT is a national, nongovernmental organization that works to protect infant and maternal well-being through the promotion and support of breastfeeding and optimal infant feeding practices.

<http://www.infactcanada.ca>

National Alliance for Breastfeeding Advocacy: Research, Education, and Legal Branch (NABA REAL)

This nonprofit organization monitors compliance with the Code in the United States.

<http://www.naba-breastfeeding.org/nabareal.htm>

International Code of Marketing of Breast-milk Substitutes

World Health Organization

Online link to this publication.

<http://www.who.int/nutrition/publications/infantfeeding/9241541601/en>

New Mexico Breastfeeding Task Force

Information about the task force's Honor Roll project, which recognizes hospitals in New Mexico that have eliminated the use of marketing materials from companies that make infant formula.

http://www.breastfeedingnewmexico.org/Hospital_Awards.html

Marketing Breastfeeding—Reversing Corporate Influence on Infant Feeding Practices

This journal article describes the strategic approach taken by the New York City Department of Health and Mental Hygiene and its partners to change hospital practices and educate health care providers and the public on the benefits of breast milk.

<http://www.ncbi.nlm.nih.gov/pubmed/18463985>

Six Steps to Achieve Breastfeeding Goals for WIC Clinics

National WIC Association

Six steps that WIC clinics can take to increase exclusive breastfeeding, initiation, and duration among program participants.

http://learning.mihealth.org/Mediasite/WICCoordinator_02102011_Resources/SixSteps toAchieveBreastfeedingGoalsforWICClinics.pdf