



2004

INTERNATIONAL CODE DOCUMENTATION CENTRE



A survey of marketing practices of infant food and feeding bottle companies, compared to the requirements of the International Code of Marketing of Breastmilk Substitutes

STATE OF THE CODE BY COMPANY



The International Baby Food Action Network (IBFAN) is a coalition of more than 200 citizen groups in 95 developing and industrialised nations. IBFAN works for better child health and nutrition through the promotion of breastfeeding and the elimination of irresponsible marketing of infant foods, bottles and teats.

The Network helped to develop the WHO/UNICEF International Code of Marketing of Breastmilk Substitutes and is determined to see marketing practices everywhere change accordingly.

INTERNATIONAL CODE DOCUMENTATION CENTRE

The International Code Documentation Centre (ICDC) was established by IBFAN to focus on the implementation of the International Code. ICDC keeps track of Code measures worldwide.

- ICDC collects and compiles national legislation, both in draft in draft and final form
- ICDC analyses, compares and evaluates the different measures, using the International Code and subsequent WHA Resolutions as a yardstick.
- ICDC offers skills training in Code implementation and in effective monitoring of marketing practices.
- ICDC assists governments in drafting legislation.

The State of the Code by Company 2004 was compiled by Yeong Joo Kean and Annelies Allain of the International Code Documentation Centre, IBFAN Penang.

The companion chart is entitled *State of the Code by Country 2004*.

These charts are based on the most recent information available. ICDC welcomes additions or corrections and will incorporate them in future.

Price: USD3.00 per single copy airmail. Set of two State of the Code charts USD5.00 airmail. Special rates available for bulk orders. Please send orders with banker's cheque or international money order payable to "IBFAN" to:

IBFAN-ICDC

P.O. Box 19, 10700 Penang, Malaysia
Tel:+60-4-890 5799 Fax: +60-4-890 7291
E-mail: ibfanpg@tm.net.my

Previous IBFAN-ICDC *State of the Code* charts have been published in 1986, 1988, 1989, 1991, 1994, 1998 and 2001

MANUFACTURERS' RESPONSIBILITIES

The following excerpts from the International Code and from Resolutions 39.28, 47.5, 49.15, 54.2 and 55.25 outline responsibilities of companies

Resolution WHA 34.22, May 1981

Article 2. Scope of the Code

2. The Code applies to the marketing, and practices related thereto, of the following products: breastmilk substitutes, including infant formula; other milk products, foods and beverages, including bottle-fed complementary foods, when marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breastmilk; feeding bottles and teats. It also applies to their quality and availability, and to information concerning their use.

Article 4. Information and education

4.2 Informational and educational materials, whether written, audio, or visual, dealing with the feeding of infants and intended to reach pregnant women and mothers of infants and young children, should include clear information on all the following points: (a) the benefits and superiority of breastfeeding; (b) maternal nutrition, and the preparation for and maintenance of breastfeeding; (c) the negative effect on breastfeeding of introducing partial bottle-feeding; (d) the difficulty of reversing the decision not to breastfeed; and (e) where needed, the proper use of infant formula, whether manufactured industrially or home-prepared. When such materials contain information about the use of infant formula, they should include the social and financial implications of its use; the health hazards of inappropriate foods or feeding methods; and, in particular, the health hazards of unnecessary or improper use of infant formula and other breastmilk substitutes. Such materials should not use any pictures or text which may idealize the use of breastmilk substitutes.

Article 5. The general public and mothers

- 5.1 There should be no advertising or other form of promotion to the general public of products within the scope of this Code.
- 5.2 Manufacturers and distributors should not provide, directly or indirectly, to pregnant women, mothers or members of their families, samples of products within the scope of this Code.
- 5.3 In conformity with paragraphs 1 and 2 of this Article, there should be no point-of-sale advertising, giving of samples, or any other promotion device to induce sales directly to the consumer.
- 5.4 Manufacturers and distributors should not distribute to pregnant women or mothers of infants and young children any gifts of articles or utensils which may promote the use of breastmilk substitutes or bottle-feeding.
- 5.5 Marketing personnel, in their business capacity, should not seek direct or indirect contact of any kind with pregnant women or with mothers of infants and young children.

Article 6. Health care systems

6.2 No facility of a health care system should be used for the purpose of promoting infant formula or other products within the scope of this Code.

6.3 Facilities of health care systems should not be used for the display of products within the scope of this Code, for placards or posters concerning such products, or for the distribution of material provided by a manufacturer or distributor other than that specified in Article 4.3.

Article 7. Health workers

- 7.2 Information provided by manufacturers and distributors to health professionals regarding products within the scope of this Code should be restricted to scientific and factual matters, and such information should not imply or create a belief that bottle-feeding is equivalent or superior to breastfeeding. It should also include the information specified in Article 4.2.
- 7.3 No financial or material inducements to promote products within the scope of this Code should be offered by manufacturers or distributors to health workers or members of their families.
- 7.4 Samples of infant formula or other products within the scope of this Code, or of equipment or utensils for their preparation or use, should not be provided to health workers except when necessary for the purpose of professional evaluation or research at the institutional level.

Article 9. Labelling

- 9.1 Labels should be designed to provide the necessary information about the appropriate use of the product, and so as not to discourage breastfeeding.
- 9.2 Manufacturers and distributors of infant formula should ensure that each container has a clear, conspicuous, and easily readable and understandable message printed on it, or on a label which cannot readily become separated from it, in an appropriate language, which includes all the following points: (a) the words "Important Notice" or their equivalent; (b) a statement of the superiority of breastfeeding; (c) a statement that the product should be used only on the advice of a health worker as to the need for its use and the proper method of use; (d) instructions for appropriate preparation, and a warning against the health hazards of inappropriate preparation. Neither the container nor the label should have pictures of infants, nor should they have other pictures or text which may idealize the use of infant formula. They may, however, have graphics for easy identification of the product as a breastmilk substitute and for illustrating methods of preparation. The terms "humanized", "maternalized" or similar terms should not be used.

Article 11. Implementation and monitoring

- 11.3 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.
- 11.5 Manufacturers and primary distributors of products within the scope of this Code should apprise each member of their marketing personnel of the Code and of their responsibilities under it.

Resolution WHA 39.28, May 1986

REQUESTS the Director-General to specifically direct the attention of Member States and other interested parties to the fact that:

- the practice being introduced in some countries of providing infants with specially formulated milks (*so-called "follow-up" milks*) is not necessary.

Resolution WHA 47.5, May 1994

URGES Member States:

- to ensure that there are *no donations of free or subsidized supplies* of breastmilk substitutes and other products covered by the International Code of Marketing of Breast-milk Substitutes *in any part of the health care system*.

Resolution WHA 49.15, May 1996

URGES Member States to ensure that:

- *complementary foods are not marketed* for or used *in ways that undermine exclusive and sustained breast-feeding*;
- the financial support for professionals working in infant and young child health does *not create conflicts of interest*, especially with regard to the WHO/UNICEF BFHI;
- monitoring the application of the International Code and subsequent relevant resolutions is carried out in a *transparent independent manner, free from commercial influence*.

Resolution WHA 54.2, May 2001

URGES Member States:

- ...to protect, promote and support exclusive breastfeeding for six months as a global public recommendation, taking into account the findings of the WHO expert consultation on optimal duration of exclusive breastfeeding and to provide safe and appropriate complementary foods, with continued breastfeeding for up to two years and beyond...

Resolution WHA 55.25, May 2002

- Requests the Codex Alimentarius Commission to continue to ...improve the quality standards of processed foods for infants and young children and to promote their safe and proper use at an appropriate age, including through adequate labelling, consistent with the policy of WHO, in particular the International Code .. resolution WHA 54.2, and other relevant resolutions of the Health Assembly.

STATE OF THE CODE BY COMPANY

SUMMARY

Infant Food Companies

This chart summarises the marketing performance of 16 transnational baby food companies and 14 bottle and teat companies. It acts as a score chart for the practices of the selected companies. It is based on reports by IBFAN groups working independently or with governments in 69 countries. The benchmark standards used for measuring marketing practices are the *International Code of Marketing of Breastmilk Substitutes* and relevant *World Health Assembly (WHA) resolutions*.

- ❖ Swiss based **Nestlé** controls 40% of the world baby food market and that dominant position is unfortunately matched with its record as the worst Code offender. It was the company with the greatest number of reported violations of nearly all key provisions of the International Code. Nestlé maintains it abides by the Code but that means it abides by its own in-house 'Instructions', which fall short of the International Code.
- ❖ Dutch **NUMICO** which owns Nutricia, Cow & Gate, Milupa, Sari Husada and a string of smaller baby food companies worldwide comes in as a close second worst violator. Like Nestlé, its internal 'Guidelines' restrict the scope of the Code to 'starter formula' to suit the company's own ends. In this chart, **Milupa** is listed separately because its marketing strategies and product lines are distinctly different from other NUMICO companies.
- ❖ Of the three American companies, **Mead Johnson's** violations are worse than those of **Abbott Ross** and **Wyeth**. All three, however, infringe the Code in a blatant manner. Wyeth, in particular, has had a few brushes with national authorities on Code matters.
- ❖ **Dumex** (Danish) has regressed most, compared to its results in 2001. It seems bent on infiltrating the health facilities in South East Asian countries and in China. Dumex now outstrips **Friesland** (Dutch), and runs neck to neck with **Hipp** (Germany) which is one of the most aggressive companies in Eastern Europe. **Meiji** (Japan), **Humana** (Germany) and **Heinz** (USA) follow.

❖ **Danone** (France), **Gerber** (USA/Switzerland) and **Snow** (Japan) have a significantly better showing in 2004 than in 2001. However, very little monitoring was carried out in the countries where Danone and Gerber do most of their marketing. Snow shows up well because its violations were only recorded in Thailand and Hong Kong. The company withdrew from the baby food market in many countries including Japan, where it was involved in several product liability scandals.

❖ Finally, **Morinaga** (Japan) grades better on all counts except one, i.e. promotion in health care facilities.

No company was found to fully comply with all the requirements of the Code and WHA resolutions.

Bottles and Teats

Bottle and teat companies continue to violate the Code through unrestrained advertising and misleading labelling which often equates bottle feeding with breastfeeding.

A Japanese company, **Pigeon**, appears the most aggressive in its marketing practices and outstripped other companies by far. It is followed by the UK-based **Avent/Cannon**, while Italian **Chicco** has the doubtful honour to be third. **Camera** (Taiwan), **Gerber** (USA), **Nuk** (Germany), **Huki** (Indonesia) and **Evenflo** (USA) also frequently violate the Code.

Overall trends

The latest phenomenon in baby food marketing seems to be in 'functional' claims. Companies try to differentiate their formulas by adding a string of additives and then claiming performance benefits for these. 11 out of the 16 companies jumped on the fatty acids (DHA etc.) bandwagon and are competing using misleading claims, esp. with regard to improved intelligence and the similarity to mother's milk. Regulatory agencies have been slow to challenge these claims.

Many companies still close their eyes to the fact that the *Code* covers all *breastmilk substitutes*, not just infant formula. This deliberate misinterpretation contributes significantly to their poor rating. Donations of *free and low-cost supplies* continue

to occur despite the many resolutions which ban this practice. Monitoring reveals that promotion is most rampant in affluent societies. Even within developing countries, companies focus on the richer parts, disproving the claim that free formula is charity. Public hospitals hardly receive free donations; private hospitals have to fight to keep them out. The free formula is often passed on as samples to mothers which undermines breastfeeding.

Exclusive breastfeeding for six months. Only Nestlé has changed the labels of its complementary foods to six months in partial compliance with WHA 54.2 (2001) because it has done so only in developing countries. Other companies producing complementary foods continue to label and promote their products as suitable from a much earlier age, sometimes as early as the first week, generally from 'the fourth month' (end of three months) or from four months.

All selected companies abuse the Code provision allowing scientific and factual *information to health professionals*. They include text and images that are promotional and misleading. Often, these materials fail to contain warnings specified by the Code and are given in bulk to health facilities for distribution to mothers.

Health facilities and health workers continue to be targeted for company promotion especially in countries where the Code has not been implemented or is not properly enforced. Health workers are showered with gifts and display items sporting the company and/or brand names. Such gestures are effective to indirectly influence mothers in making infant feeding decisions. When company materials are displayed in health facilities, they implicitly gain the added value of medical endorsement and companies capitalise on this useful avenue of promotion.

Sponsorship of medical seminars, conferences and associations of medical professionals is becoming more widespread, creating dependency and giving rise to conflicts of interests.

See the companion chart: *State of the Code by Country 2004*, which tracks the progress in Code implementation made by governments.

COMPANIES	CODE REQUIREMENTS						
	A	B	C	D	E	F	G
1. Abbott Ross (USA) ❖ Similac, Similac Advance, Similac Advance Excel, Similac LF, Isomil, Gain, Abbott Extra Cereal, Similac Cereal	X	X	~	X	X	X	~
2. Danone (French) Actimel, Gallia, Nursie, Bledilait, Bledine, Bledina, Phosphatine, Zywrec Zdroj	~	~	X	~	X	~	~
3. Dumex/INC (Danish) Dumex, NutraKids, Mamex, Mamil	~	X	~	X	X	X	~
4. Friesland/Coberco (Dutch) Dutch Baby, Frisolac, Frisolac H, Frisosoy, Frisovom, Frisomel, Frisian Flag, Frisocrem	~	~	~	X	X	~	X
5. Gerber/Novartis (USA/Swiss) Gerber cereals, Gerber juice, Gerber First, Second and Third Foods.	—	—	X	~	~	?	X
6. Heinz (USA) Nurture, Farley's Farex, Heinz cereals, Step 1, 2 + 3 jarred foods, infant juices, Plasmon	✓	✓	X	X	~	?	X
7. Hipp (German) Hipp Pre, Hipp 1 & 2, Hipp HA, Hipp NE, Hipp purees, juices, cereals, ready meals, "goodnight" meals, muesli	~	~	X	X	X	X	~
8. Humana (German) ❖ Humana 0, Humana 1 & 2 Humana 0-HA, Pre Humana Humana-0VLB, Humana SL, Amorosa	~	X	?	X	~	?	X
9. Mead-Johnson/Bristol Myers Squibb (USA) ❖ Enfamil, Enfalac, Enfapro, Olac, Pregestimil, Prosobee, Alacta, Enfamil AR, Enfamil Soya	X	X	~	X	X	X	~
10. Meiji (Japanese) Meiji FP-T, Meiji FM-T, Meiji FU, Meiji Step, Meiji Hohoemi	X	~	~	X	~	X	✓
11. Milupa (German) owned by NUMICO (Dutch) Aptamil, Conformil, Milumil, Milupa cereals, Milubrei, Miluvit, Kinder Grieb, Milutee, Milupa Infant Foods	~	~	X	X	~	?	~
12. Morinaga (Japanese) ❖ Hagakumi, Chirumiru Ayumi, Morinaga 1 & 2, Morinaga BMT, Chil Mil, NL 33	~	~	—	~	X	~	~
13. Nestlé/Carnation (Swiss) Aletemil, Alfare, Bear Brand, Beba, Guigoz, Lactogen, Nan, Nan HA, Nestogen, Nidina, Pelargon, Cerelac, Nestle Cereals, Nestum	X	X	X	X	X	X	~
14. Nutricia/Cow & Gate/ Sari Husada (Dutch/UK/ Indonesian) owned by NUMICO (Dutch) Bebelac, Cow & Gate, Nutrilon, Nutriben, Nenatal, SGM, Vitalac	X	X	~	X	X	X	~
15. Snow Brand (Japanese) Snow Brand P7L, Snow Brand AI, Snow Brand F, Smart Baby	~	~	—	X	X	~	✓
16. Wyeth (USA) SMA, SMA Gold, SMA Progress, Nursoy, Infasoy, S-26, S-26 Gold, S-26 AR, Promil, Promil Gold, Progress	X	X	—	X	X	X	~

KEY

- Substantial Compliance
- Partial Compliance
- Substantial Violation
- Compliance Unknown
- Not Applicable

Notes

The selected companies in this chart are listed alphabetically. Each baby food company's name is followed by some of its best-known brands. Twelve of the baby food companies listed are members of the International Association of Infant Food Manufacturers (IFM), an industry association which claims that its members comply with the Code. The symbol: ❖ marks the four that do not belong to IFM. The columns on the chart reflect the key provisions of the International Code and related WHA resolutions. In rating the companies for each category, activities related to products within the scope of the Code were measured according to all relevant Code provisions and subsequent Resolutions. The following explanations illustrate some of those criteria. The text of the most relevant Code provisions and related WHA Resolutions is reproduced overleaf.

Requirements

- A. No advertising or other direct promotion of infant formula to the public:** Companies may not advertise or use any other method of promotion to induce sales to consumers. [Article 5]
- B. No advertising or other direct promotion of follow-up milks to the public:** Follow-up milks replace breastmilk and thus constitute breastmilk substitutes within the scope of the Code. Their promotion therefore is a violation of the Code. [Article 2, WHA 39.28 (1986)]
- C. No advertising or other direct promotion of other breastmilk substitutes to the public:** The term "other foods marketed as breastmilk substitutes" used in this chart includes cereals, infant teas, juices, strained foods and other foods and drinks marketed for infants. These products should not be promoted for babies younger than six months of age, suggest that they be used in a feeding bottle, or promoted within the healthcare system. This column evaluates company compliance with the relevant Code provisions and with Resolutions WHA 39.28 (1986), WHA 47.5 (1994) and WHA 49.15 (1996).
- D. No promotion in health care facilities:** Companies may not promote products in health care facilities via posters, samples, or gifts. Pamphlets and other materials written for mothers must comply with Article 4. [Art. 4, 5 & 6]
- E. No promotion to health workers:** Companies may not offer gifts to health workers as inducements to promote their products. Informational materials must be restricted to factual and scientific matters and must include all information specified in Article 4.2 of the Code. Samples may be given only for research or professional evaluation. [Article 7]
- F. No free or subsidised supplies:** Donations or low-price sales of breastmilk substitutes, feeding bottles and teats may not be made to any part of the health care system. [WHA 39.28 (1986); WHA 47.5 (1994)]
- G. Adequate labels:** Infant formula labels must not bear pictures of babies or idealise bottle feeding. Labels must be written in the local language, must include all specified information in a clear, conspicuous and easily understandable manner and must not discourage breastfeeding. [Art. 9]

CODE REQUIREMENT	COMPANIES													
	Avent/Cannon (UK)	Babelito (Argentina)	Camera (Taiwan)	Chicco (Italy)	Curity (USA)	Eventflo (USA)	Gerber (USA)	Huki (Indonesia)	Japlo (Malaysia)	Johnson & Johnson (USA)	Mister Baby (Italy)	NUK (Germany)	Pigeon (Japan)	Tommee Tippee (USA)
No promotion to the public	X	~	~	X	~	X	X	X	~	X	X	X	X	X
No promotion in health care facilities	~	?	~	~	~	?	?	~	?	?	?	~	X	?
Adequate labels	X	?	X	X	?	~	~	~	~	—	?	?	X	~

Sources: In 2002, IBFAN-ICDC introduced the Standard IBFAN Monitoring (SIM) Forms as a tool to monitor compliance with the International Code of Marketing of Breastmilk Substitutes and subsequent World Health Assembly resolutions. SIM enabled independent monitors in 69 countries to submit information and evidence of Code violations in a systematic and standardised manner to IBFAN-ICDC for analysis.

For national monitoring, groups in China, Egypt, Indonesia, Japan and Vietnam requested training which IBFAN-ICDC facilitated, sometimes on request of the government or through assistance from UNICEF country offices. Training was also extended to groups in Anglophone Africa by IBFAN Africa, in Latin America by LACMAT Argentina. Groups and individuals in Eastern and Central Europe, Hong Kong, Thailand and the UAE shared their monitoring information.

Altogether, IBFAN-ICDC received over 3,000 reports of Code violations during a period of more than 2 years. This chart reflects the general performance of the largest companies vis-à-vis the Code.

A record of the evidence of Code violations which forms the basis for this chart is available as a 95-page IBFAN publication – *"Breaking the Rules, Stretching the Rules 2004"*.