From ICDC’s desk in Penang...

This issue of Legal Update proudly announces the publication of the *Breaking the Rules, Stretching the Rules 2010* (BTR 2010) report. Yes, it is finally completed!

BTR 2010 is the result of three years of collective voluntary effort by Code aficionados around the world. They have made it possible for IBFAN-ICDC to compile evidence of Code violations by companies selling products under the scope of the Code. Our collection centre in Penang has been continuously receiving information from groups and individuals over the years. The final report, after sieving out unsubstantiated complaints and borderline cases, contains entries from 46 countries.

This BTR is the first handled entirely by ICDC staff — from documentation to analysis, writing, design and layout. In previous years, extra help was recruited. This time around, everyone at ICDC assumed production tasks. We learnt to multi-task to ensure that the office did not come to a standstill. The entire reporting process took the better part of 2010.

In the midst of tying up the report, Joo Kean and Annelies had to carry out consultancies on Code implementation in Samoa and Liberia. It was then left to the remaining staff to finish off the project.

At times, we had to resort to long distance communications to iron out the kinks, to dot our ‘i’s’ and cross our ‘t’s’. Just before the office closed for the holidays in December, BTR 2010 was launched on the IBFAN website.

As BTR reports are increasingly sought after by companies and market researchers, they are now being made commercially available. Yes, companies do pay good money to read about themselves, even if our reports are almost, always unflattering.

The proceeds help pay the rent!

IBFAN groups and contributors continue to get the BTR free. A special edition of the report has already been sent out to these people. If you belong to either group and have been inadvertently left out of our mailing list, please drop us a note and you will hear from us.

In the meantime, we give you the BTR highlights.

Information is power!

Raja Abdul Razak, Publication Support
Websites, SMS, home parties... all are cheap but effective ways to advertise to more people.

Social networking via the internet and cell phones are new marketing tactics used to propagate positive messages about a product to mothers. Companies obtain mobile numbers and emails of new mothers through databases of health facilities or retail businesses. They also invite mothers to sign up for mother and baby clubs by offering support to make infant feeding choices.

Marketing is very often disguised as consumer information. Companies are offering information on breastfeeding, sending out mixed messages about feeding options. They seize every available opportunity to promote their products. During the melamine-in-milk crisis, companies took out ads and sent out messages that their formulas did not contain milk from China. At the same time, free samples were offered.

In the US, visitors can sign up on a website for brands they would like to 'evaluate'. The website then selects hosts to hold parties and sends boxes of goodies for the host, their friends, family and neighbours to try out. These events are powerful branding exercises and are sales driven.

Health facilities, particularly those which are not Baby Friendly, are still the preferred conduits for companies to reach mothers and babies. ‘Medical endorsement’ of products is obtained through clever means. Donations of formula are still being secretly distributed to hospitals and clinics. Promotional brochures and leaflets, passed off as scientific and factual information for health professionals, are widely distributed to pregnant women and new mothers. In return for allowing such promotion, health facilities and their staff receive gifts, services and various types of sponsorship.

Quality assurance or marketing ploy? SMS from Abbott to mothers in Singapore offers free samples.

Marketing by any other name – ‘brand evaluation’ came with gifts like coupons for free formula courtesy of Gerber/Neutlé.

More conventional marketing methods are still being used; they are now pushier than ever. This happens in countries where the Code has not been implemented as law. Brazen advertising even for infant formula has returned with a vengeance.

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Larger than life. Giant cans of Mead Johnson formulas on pillars in metro stations in Hong Kong.

Surprise supplies! In Malaysia, free supplies of Similac (Abbott) S-26 and Promil Gold (Wyeth) were found to be routinely distributed to private hospitals by carton loads.

Stick it to them! Even in a wealthy country like France, tiny gifts like plasters carrying Milupa and Guigoz logos are attractive to health workers.

Freebies galore. Hipp gifts for Armenian doctors include doctor’s coat, product samples, balloons and bottles.

Hand in glove. A hospital in Singapore allows Friso promotion in return for ‘handsome benefits.’

Blanket promotion. Infant formula promotion on baby blankets in a Singapore hospital. The twin dolphin logo on the blanket is the same as on the label of Mamex Gold infant formula (inset)

Turning back the clock. A UAE supermarket brochure promotes different infant formulas with tempting discounts.

Medical endorsement. Prescription pads, such as this one of Nursie 1 & Nursie Premium are supplied to a hospital in Saudi Arabia.

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In the US, a Gerber Good Start TV ad shows a baby looking in wonder at scientific formulations and how immune supporting ‘probiotics’ flow into a tin of Good Start Protect Plus. Gerber claims to have made a scientific breakthrough with probiotics found in breastmilk.

These formulas from different companies are labelled ‘Premium’ to capture the elite or ‘Gold’ to draw resemblance to breastmilk.

Special message. Sticker on the Hipp lid says in Vietnamese, “Convenient for mothers, superior for baby”.

Stages and ages. Covering all bases be it 6 months or earlier.

Aside from the ‘gold rush’, especially where laws are weak, companies go so far as to imply on the labels that their products can result in superior, intelligent babies. This marketing ploy is effective in undermining breastfeeding because all mothers want intelligent children.

Despite the global public health recommendation for 6 months exclusive breastfeeding, few companies label complementary foods as suitable from 6 months unless national laws require them to do so. One company actually fudges the age recommendation by implying through the use of “stages” that complementary feeding can begin once a baby reaches a certain stage, usually way before 6 months. This is a sad trick to induce mothers into giving their babies complementary foods too early.

Products such as Good Night milks and Good Morning cereals are increasingly common. Labels show idealising slogans and pictures of babies or cartoon animals snugly sleeping or sprightly and ready, depending on the time of day. Experts are unable to identify any nutritional or health advantage from use of these products, and have expressed concern about the displacement of breastfeeding.

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Scaling new heights. In Hong Kong, Mead Johnson’s Enfapro A+ is advertised on TV as having the highest DHA content. The DHA content is shown flying out of a DHA tower into the brains of a baby!

See how mummy does it...and baby cleverly follows, learning “faster than others by a step”
Code compliance by feeding bottle and teat companies have conventionally been overlooked. It must not be forgotten that they come under the purview of the Code. There has been a hive of activities involving this category of companies. Mostly, these involve consorting with health professionals, especially lactation consultants.

Since many lactation consultants support the Code, the message has been conveyed that feeding bottle and teat companies need to be Code compliant. Notably, one company, Evenflo, has pledged compliance with the Code. Code monitors are consistently checking their marketing practices. So far so good.

Other companies have not seen it fit to change their ways. To cash in on the increased trend in breastfeeding in developed countries, they have started to market breastmilk feeding bottles to nursing mothers. Promoting breastmilk feeding bottles undermines the breastfeeding process and the very important element of bonding.

Bottle and teat manufacturers try to outdo each other in the ‘just like mom’ stakes. Avent highlights the unique Airflex system of its feeding bottle which allows baby to feed as if it is suckling at the breast; Chicco calls their oddly shaped bottle the ‘natural inclination’; Dodie says their teat “reproduces the shape of a flattened nipple during breastfeeding”; “A natural sensation!” claims Nuby; Tommee Tippee boldly asserts their bottle ‘works like mom’.

This part of the report highlights marketing practices of products which do not come under the scope of the Code but which undermine or discourage breastfeeding. Sponsorship activities which may give rise to conflicts of interest are also covered.

Growing-up milks (GUMs) – marketed for young children 1 to 3 years, was popular once upon a time in Southeast Asia. It has now spread to other parts of the world. This is part of a continuing effort by baby food companies to stay one step ahead of policy makers.

Their aggressive promotion is working so well that the market for GUMs is the fastest growing among all milk categories, even though it is strictly an unnecessary product.

The GUM TV ad is an example how companies aggressively push the product. They impress upon parents that it is their duty to ensure that the potential of every child is fully unleashed, with help from a tin of milk. This type of ad derails laws which forbids promotion of infant and follow-up formulas.

Sponsorship is another area which companies are exploiting relentlessly. In an era of shrinking resources, companies forge links with health professionals by providing them with contributions for their professional development. Companies spend considerable sums, mostly from their marketing budgets, on sponsorship for fellowships, study tours, research grants and attendance at professional conferences to gain goodwill and wield influence over health professionals. They expect a proportionate return for the money invested. Since health professionals have a duty to promote breastfeeding, receiving benefits from company largesse may give rise to conflicts of interest and invariably calls into question their professionalism and integrity.

Evidence shows that events sponsored by companies often involve product promotion. These come in overt forms where there are product displays and gifts with company and product logos or more insidiously, through talks and seminars about scientific innovations and formulations which their unnamed products carry.