

International Baby Food Action Network (IBFAN)

Red internacional de grupos pro alimentación infantil Réseau international des groupes d'action pour l'alimentation infantile

1998 RECIPIENT OF THE RIGHT LIVELIHOOD AWARD

International Baby Food Action Network (IBFAN) Statement on the Promotion and Use of Commercial Fortified Foods as Solutions for Child Malnutrition

The International Baby Food Action Network (IBFAN) recognizes that the prevention and control of child malnutrition worldwide, with particular focus on undernutrition in developing countries, constitutes a major challenge and is concerned that if left un-checked, this poses an intolerable burden of disease and death on poor communities and countries.

IBFAN believes that addressing child undernutrition, apart from being a human rights imperative, is essential to achieve Millennium Development Goals 1 and 4, and concurs with United Nations's MDG Report 2011 that progress in the developing regions is insufficient to reach the target by 2015.

IBFAN is convinced that child malnutrition is the result of widespread global social and economic inequity, the marginalization of poor communities, as well as women's disempowerment and lack of access to productive resources. It leads to lack of affordable health care, inadequate support for optimal infant and young child feeding practices, lack of sufficient water for drinking and sanitation, resulting in repeated bouts of diarrhoeal and respiratory disease and chronic hunger and malnutrition in children.

IBFAN is concerned that solutions for child malnutrition, both its prevention and treatment, are becoming increasingly medicalised with the use of fortified commercial foods as "quick fixes" - ignoring community based approaches and underlying and basic causative factors. "

The current emphasis on commercial ready-made foods as a treatment for acute forms of malnutrition, should not be used as a model 'cure for all'. Experience has shown that such interventions are often not sustainable and ineffective in the long term. For example, according to a UNICEF report of 2009 "...Although significant progress has been made since 2005 in the Niger's ability to effectively treat severely acutely malnourished children through the community-based approach, the prevalence of acute malnutrition remains high...".

IBFAN is aware of research, which shows that the use of fortified commercial foods leads to weight gain in undernourished children. However, such studies do not compare the efficacy of such ready-made foods with improved feeding practices using home-made indigenous foods and support for optimal breastfeeding, whose contribution to nutrition is so valuable. Moreover, recent concerns about use of these products and their impact on prevalence of obesity and related diseases must not be taken lightly.

IBFAN also believes that the current focus of attention on treating acute forms of malnutrition with ready-to-use therapeutic foods should not be used to extend similar interventions to chronic malnutrition. Since commercial fortified foods are costly, they increase dependency on outside

agencies and shift the focus from community-based solutions, to treating malnutrition as a disease with ready made fortified food as the magic pill. Scaling up such "quick fixes" will delay and divert attention from action to achieve food security.

IBFAN strongly supports the right to adequate food for ALL and therefore calls upon governments, and all others concerned, globally and regionally:

- 1. To take immediate steps to prevent malnutrition through various measures including the enhancement of the rates of optimal breastfeeding infant and young child feeding practices, the provision of adequate drinking water, accessible health care and child care support systems that are free from inappropriate commercial influence.
- 2. To take meaningful steps towards resolving underlying factors of child malnutrition in a timely manner.
- 3. To take steps to eliminate poverty and hunger, by supporting sustainable food systems that that improve local food production, availability and affordability,include women and gender perspective in food security.
- 4. To implement the World Health Assembly resolution 63.23 to end inappropriate promotion of foods for infants and young children, including nutrition and health claims. This should also involve regulatory measures to ban the promotion of commercial fortified foods for malnutrition.
- 5. To take steps to ensure that the primary treatment of all types of acute malnutrition is based on local foods and supervised by a trained health professionals without undue commercial influence.
- 6. To re-evaluate the use of commercial ready-made foods in the prevention and treatment of child malnutrition in emergencies such as man-made and/or natural disasters and to advocate the use, wherever possible, of diverse indigenous /local foods.
- 7. To ensure that international, regional and local policies and plans of action for the prevention of child malnutrition are based on independent research and include impact evaluations.

August, 2011

Notes

http://www.un.org/millenniumgoals/pdf/(2011_E)%20MDG%20Report%202011_Book%20LR.pdf

v Breastfeeding in the second year of a child's life can provide 29% of energy requirements, 43% of protein, 75% of Vitamin A, 76% of Folate, 94% of Vitamin B12 and 60% of Vitamin C. Dewey KG. Nutrition, Growth, and Complementary Feeding of the Breastfed Infant. Pediatric Clinics of North American. February 2001;48(1).



The International Baby Food Action Network (IBFAN) is a 1998 Right Livelihood Award recipient. (www.ibfan.org) It consists of more than 200 public interest groups working together around the world to save lives of infants and young children and bring lasting change in infant feeding practices at all levels. IBFAN aims to promote the health and well-being of infants and young children and their mothers through protection, promotion and support of optimal breastfeeding and infant and young child feeding practices. IBFAN works for the universal and full implementation of International Code of Marketing of Breast-milk Substitute and subsequent relevant World Health Assembly (WHA) resolutions.

ii Schaetzel T and Nyaku A. The Case for Preventing Malnutrition Through Improved Infant Feeding and Management of Childhood Illness: USAID's Infant & young child nutrition project. http://www.path.org/files/IYCN the case prev mal pos.pdf This analysis was originally presented as a poster at the 10th Commonwealth Association of Paediatric Gastroenterology and Nutrition (CAPGAN) Congress on Diarrhoea & Malnutrition in Blantyre, Malawi in August 2009.

iii Jaffrey Sachs, Saying Nuts to Hunger: http://www.huffingtonpost.com/jeffrey-sachs/saying-nuts-to-hunger-b-706798.html

iv http://www.unicef.org/nutrition/index 51688.html