



Ending the inappropriate promotion of foods for infants and young children

A primer on WHO guidance

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**World Health
Organization**

Western Pacific Region

Why worry about inappropriate promotion of foods for infants and young children?

Optimal feeding of infants and young children is central to healthy growth and development. WHO recommends exclusive breastfeeding for the first 6 months of life, followed by continued breastfeeding with appropriate complementary feeding until 2 years or beyond.

Whenever possible, complementary foods should be prepared using fresh ingredients. The transition to healthy and safely prepared family foods can prevent child malnutrition. The introduction of a variety of locally available and affordable fresh foods can help develop healthy food habits for life.

Aggressive marketing of breast-milk substitutes and commercially produced complementary foods and beverages can undermine progress in optimal infant and young child feeding by misleading and confusing caregivers about the nutrition and health-related qualities, as well as the appropriate age and safe use of these foods.

WHO recently published *Guidance on ending the inappropriate promotion of foods for infants and young children**. The goal of the guidance is to promote, protect and support breastfeeding, prevent obesity and noncommunicable diseases, promote healthy diets, and ensure that caregivers receive clear and accurate information on feeding.

* WHA A69/7 Add. 1.
http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_7Add1-en.pdf

Scope of the guidance

The guidance targets all commercially produced foods and beverages that are marketed as suitable for feeding infants and young children aged 6–36 months.

A food or beverage product is covered by the guidance if it:

- uses the words baby, infant, toddler and/or young child;
- recommends an age of introduction of less than 3 years;
- uses an image of a child appearing younger than 3 years of age or feeding with a bottle; or
- is presented as suitable for children under the age of 3 years in any other way.



Examples of the target audiences, promotion channels and tactics

The term *promotion* includes the communication of messages that are designed to persuade or encourage the purchase or consumption of a product or raise awareness of a brand.

Target audiences include, for example:

- caregivers
- health professionals and health workers
- other intermediaries (health facilities, nurseries, paediatric services).

Promotional channels include, for example:

- traditional mass communication channels (newspapers, radio, television, billboards)
- Internet
- social media (Facebook, Twitter, Instagram).

Promotional tactics include, for example:

- cross-promotion and brand extension
- financial sponsorships
- loyalty and voucher schemes
- advergames and advertorials
- product placement
- sales and giveaways.



Are infants and children being adequately protected from marketing of breast-milk substitutes and inappropriate promotion of foods?

Member States endorsed the *International Code of Marketing of Breast-milk Substitutes* (the Code) in 1981, followed by relevant World Health Assembly resolutions.

Progress on implementing the Code in the Western Pacific Region has been slow. Only four countries are currently fully implementing the Code in national legislation. Two of these protect children up to 36 months of age* from the marketing of breast-milk substitutes. Two countries have legal measures incorporating many provisions of the Code, and five countries have legal measures that contain a few provisions.

Insufficient laws and lack of sanctions allow for continued systematic inappropriate marketing of breast-milk substitutes. However, new marketing techniques and strategies (for example, the use of social media) continue to create additional challenges. Furthermore, the infant and child food industry is continually expanding ways of promoting their products that circumvent the Code. Thus, there is a need for better protection of infants and children through clarification and inclusion of products and promotion techniques covered by the Code.

* WHO, UNICEF, IBFAN. Marketing of breast-milk substitutes: national implementation of the International Code. Status Report 2016.



In response to a request by Member States in 2012, WHO prepared the *Guidance on ending the inappropriate promotion of foods for infants and young children*. Member States are urged to continue to implement the Code, and to take all necessary measures in the interest of public health to end the inappropriate promotion of foods for infants and young children.

TABLE 1 Status of the implementation of the International Code of Marketing of Breast-milk Substitutes in the Western Pacific Region (WHO, UNICEF, IBFAN. 2016)*

	Legislative Status Country	Milk products covered up to age (months)	Complementary foods covered up to age (months)
Full provisions in law	Palau	36	12
	Philippines	36	-
	Viet Nam	24	24
Many provisions in law	Cambodia	24	-
	Mongolia	-	-
Few provisions in law	China	24	-
	Lao People's Democratic Republic	24	24
	Papua New Guinea	-	-
	Republic of Korea	unspecified	-
	Solomon Islands	unspecified	-

* Fiji's Marketing Controls (Foods for Infants and Young Children) Regulation from 2010 was amended and weakened in June 2016. The reference was adapted and Fiji was not included in the table.

Recommendations to end the inappropriate promotion of foods for infants and young children

WHO Member States welcomed the *Guidance on ending the inappropriate promotion of foods for infants and young children* at the Sixty-ninth World Health Assembly.

Recommendation 1

Optimal infant and young child feeding should be promoted based on the guiding principles for complementary feeding of the breastfed child and the guiding principles for feeding non-breastfed children 6–24 months of age. Emphasis should be placed on the use of suitable, nutrient-rich, home-prepared, and locally available foods that are prepared and fed safely.

Recommendation 2

Products that function as breast-milk substitutes should not be promoted. A breast-milk substitute should be understood to include any milks (or products that could be used to replace milk, such as fortified soy milk), in either liquid or powdered form, that are specifically marketed for feeding infants and young children up to the age of 3 years (including follow-up formula and growing-up milks). It should be clear that the implementation of the *International Code of Marketing of Breast-milk Substitutes* and subsequent relevant Health Assembly resolutions covers all of these products.



Recommendation 3

Foods for infants and young children that are not products that function as breast-milk substitutes should be promoted only if they meet all the relevant national, regional and global standards for composition, safety, quality and nutrient levels and are in line with national dietary guidelines. Nutrient profile models should be developed and utilized to guide decisions on which foods are inappropriate for promotion. Relevant Codex standards and guidelines should be updated and additional guidelines developed in line with WHO's guidance to ensure that products are appropriate for infants and young children, with a particular focus on avoiding the addition of free sugars and salt.

Recommendation 4

The messages used to promote foods for infants and young children should support optimal feeding and inappropriate messages should not be included. Messages about commercial products are conveyed in multiple forms, through advertisements, promotion and sponsorship, including brochures, online information and package labels. Irrespective of the form, messages should always:

- include a statement on the importance of continued breastfeeding for up to two years or beyond and the importance of not introducing complementary feeding before 6 months of age;
- include the appropriate age of introduction of the food (this must not be less than 6 months);
- be easily understood by parents and other caregivers, with all required label information visible and legible.

Messages should not:

- include any image, text or other representation that might suggest use for infants under the age of 6 months (including references to milestones and stages);
- include any image, text or other representation that is likely to undermine or discourage breastfeeding, that makes a comparison to breast-milk, or that suggests that the product is nearly equivalent or superior to breast-milk;
- recommend or promote bottle feeding;
- convey an endorsement or anything that may be construed as an endorsement by a professional or other body, unless this has been specifically approved by relevant national, regional or international regulatory authorities.

Recommendation 5

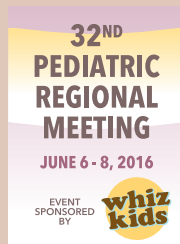
There should be no cross-promotion to promote breast-milk substitutes indirectly via the promotion of foods for infants and young children.

- The packaging design, labelling and materials used for the promotion of complementary foods must be different from those used for breast-milk substitutes so that they cannot be used in a way that also promotes breast-milk substitutes (for example, different colour schemes, designs, names, slogans and mascots other than company name and logo should be used).
- Companies that market breast-milk substitutes should refrain from engaging in the direct or indirect promotion of their other food products for infants and young children by establishing relationships with parents and other caregivers (for example through baby clubs, social media groups, child care classes and contests).





HOSPITAL BULLETIN



Recommendation 6

Companies that market foods for infants and young children should not create conflicts of interest in health facilities or throughout health systems. Health workers, health systems, health professional associations and nongovernmental organizations should likewise avoid such conflicts of interest. Such companies, or their representatives, should not:

- provide free products, samples or reduced-price foods for infants or young children to families through health workers or health facilities, except as supplies distributed through officially sanctioned health programmes.

Products distributed in such programmes should not:

- display company brands;
- donate or distribute equipment or services to health facilities;
- give gifts or incentives to health-care staff;
- use health facilities to host events, contests or campaigns;
- give any gifts or coupons to parents, caregivers and families;
- directly or indirectly provide education to parents and other caregivers on infant and young child feeding in health facilities;
- provide any information for health workers other than that which is scientific and factual; and
- sponsor meetings of health professionals and scientific meetings.

Likewise, health workers, health systems, health professional associations and nongovernmental organizations should not:

- accept free products, samples or reduced-price foods for infants or young children from companies, except as supplies distributed through officially sanctioned health programmes, and products distributed in such programmes should not display company brands;
- accept equipment or services from companies that market foods for infants and young children;
- accept gifts or incentives from such companies;
- allow health facilities to be used for commercial events, contests or campaigns;
- allow companies that market foods for infants and young children to distribute any gifts or coupons to parents, caregivers and families through health facilities;
- allow such companies to directly or indirectly provide education in health facilities to parents and other caregivers; and
- allow such companies to sponsor meetings of health professionals and scientific meetings.

Recommendation 7

The WHO set of recommendations on the marketing of foods and non-alcoholic beverages to children should be fully implemented, with particular attention being given to ensuring that settings where infants and young children gather are free from all forms of marketing of foods high in saturated fats, trans-fats, free sugars or salt. While foods marketed to children may not be specifically intended for infants and young children, they may, nevertheless, be consumed by them. A range of strategies should be implemented to limit the consumption by infants and young children of foods that are unsuitable for them.

Please refer to <http://www.who.int/nutrition/topics/guidance-inappropriate-food-promotion-iyce/en/> for more information related to the recommendations.

Additional resources

- Action plan to reduce the double burden of malnutrition in the Western Pacific Region (2015–2020) (http://iris.wpro.who.int/bitstream/handle/10665.1/10892/9789290617037_eng.pdf).
- Breastfeeding: a winning goal for life (http://apps.who.int/iris/bitstream/10665/208237/1/wpro_breastfeeding_obstacles_eng.pdf).
- Comprehensive implementation plan on maternal, infant and young child nutrition (http://www.who.int/nutrition/publications/CIP_document/en/).
- Ending the inappropriate promotion of foods for infants and young children. Resolution WHA 69.9. (http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_R9-en.pdf).
- Global strategy on infant and young child feeding (<http://www.who.int/nutrition/publications/infantfeeding/9241562218/en/>).
- Guidance on ending the inappropriate promotion of foods for infants and young children. WHA A69/7 Add. 1 (<http://www.who.int/nutrition/topics/guidance-inappropriate-food-promotion-iyf/en/>).
- Guiding principles for complementary feeding of the breastfed child (http://www.who.int/nutrition/publications/guiding_principles_compfeeding_breastfed.pdf).
- Guiding principles for feeding non-breastfed children 6–24 months of age (http://www.who.int/maternal_child_adolescent/documents/9241593431/en/).
- International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly resolutions (http://www.who.int/nutrition/publications/code_english.pdf).
- Marketing of breast-milk substitutes: national implementation of the International Code. Status report 2016. (http://www.who.int/nutrition/publications/infantfeeding/code_report2016/en/).
- Network for global monitoring and support for implementation of the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly Resolutions (NetCode) (<http://www.who.int/nutrition/netcode/en/>).
- Set of recommendations on the marketing of foods and non-alcoholic beverages to children (<http://www.who.int/dietphysicalactivity/marketing-food-to-children/en/>).

Contact

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