

WHO Code Compliance

Requirements for WHO Code Compliance

Introduction

There must be no advertising or promotion of breastmilk substitutes, bottles, teats and dummies within or by the service either to the general public or to staff.

All antenatal and postnatal services must be free of such promotion and these items must not be sold on the facility's premises or by its staff. Supplies of infant formula, bottles and teats are brought at wholesale or not less than 80% retail prices.

Research has provided evidence that clearly shows that breastmilk substitute marketing practices influence health workers' and mothers' behaviours related to infant feeding. Marketing practices prohibited by *The International Code of Marketing of Breast-milk Substitutes (The Code)* have been shown to be harmful to infants, increasing the likelihood that they will be given formula and other items under the scope of *The Code* and decreasing the optimal feeding practices. The 1991 the UNICEF Executive Board called for the ending of free and low-cost supplies of formula to all hospitals and maternity wards by the end of 1992. Compliance with *The Code* is required for health facilities to achieve Baby Friendly status.

Questions on Code Compliance have been added to the appraisal and assessment tools to monitor any distribution of free and low cost supplies of breastmilk substitutes. At the same time, certain questions determine if mothers are subjected to double messages by being exposed to promotion of breastmilk substitutes, bottles or teats through any written materials distributed or displayed in health care facilities.

Rationale

Advertising and other promotion of breastmilk substitutes, feeding bottles, teats and dummies has the potential to undermine breastfeeding in two key ways: Firstly, the use of any of these products may itself interfere with either the supply and demand mechanism which regulates breastmilk supply or with the baby's feeding technique (especially in the early days), or both.

Secondly, the literature (both text and images) which accompanies, or which is used to promote the products tends to carry messages – either overt or subtle – which may undermine confidence in breastfeeding. At worst, the information provided is inaccurate or misleading; at best it is necessarily biased in favour of the product.

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This makes such information inadequate, both as a means of providing scientific and clinical information for staff and for enabling pregnant women and mothers to make fully informed choices.

The International Code of Marketing of Breastmilk Substitutes (WHO, 1981, and subsequent WHA Resolutions) exists to restrict the activities of companies that manufacture or distribute products which may harm breastfeeding. Baby Friendly health-care services are required to ensure that their practices are in line with the Code.

Monitoring practice and ensuring compliance

Staff training plays an important part in reducing the amount of promotional materials in circulation but training alone is not enough to ensure that no such materials make their way to clients. Constant vigilance is necessary, for example with regard to leaflets and posters, which can seem to appear

in clinic and waiting areas almost of their own accord. In community facilities, particular attention should be paid to leaflet racks which may be topped up by outside contractors.

Some services distribute bags of literature and product samples to new mothers. It is the responsibility of senior staff to liaise with the companies supplying these to ensure that no items in breach of the Code are included.

Contact between representatives of companies that manufacture or distribute breastmilk substitutes, bottles, teats and/or dummies with the general public and staff / workers at the service should be restricted. Health-care staff can be a key target for the dissemination of information to parents.

Company representatives can take up a great deal of health-care staff time to deliver a limited amount of factual information. Direct contact with staff also provides the opportunity for items such as diary covers and pens to make their way into the facility. A more appropriate use of health-care resources is for a named individual in the service to meet with company representatives on a regular basis and to disseminate information to staff as and when appropriate.

Staff often resort to using company-branded tools to carry out their work, pointing out that alternatives are not available to them.

NZBA
PO Box 20454
Bishopdale
Christchurch

Tel: (03) 3572072
Fax: (03) 3572074
Email: info@nzba.co.nz
www.babyfriendly.org.nz



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It is the responsibility of the organisation to ensure that items such as pens, tourniquets and weight conversion charts are provided for their staff so that promotional items are not needed.

Companies with an interest in bottle feeding often put on study days, to which health-care staff are invited. It is important to recognise that subtle promotional messages will always be delivered on such occasions and that the content of speakers' talks may also be biased. While the facility cannot dictate how staff will spend their own time, it can ensure that promotion and sponsorship by companies whose products may undermine breastfeeding play no part in training provided by the organisation.

Key points from the International Code

- Products should not be advertised or otherwise promoted to the public.
- Mothers and pregnant women and their families should not be given samples of products.
- Health care providers should not be given free or subsidised supplies of products and must not promote products.
- People responsible for marketing products should not try to contact mothers or pregnant women or their families.
- The labels on products should not use words or pictures, including pictures of infants, to idealise the use of their products.
- Health workers should not be given gifts.
- Health workers should not be given samples of products, except for professional evaluation or research at the institution level.
- Material for health workers should contain only scientific and factual information and must not imply or create a belief that bottle-feeding is equivalent or superior to breastfeeding.
- All information and educational materials for pregnant women and mothers, including labels, should explain the benefits and superiority of breastfeeding, the social and financial implications of its use, and the health hazards of the unnecessary or improper use of formula.
- All products should be of a high quality and take account of the climate and storage conditions of the country where they are used.

Implementing and Monitoring the International Code of Marketing of Breast-milk Substitutes in New Zealand: The Code in New Zealand. MoH 2007

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1. All products, within the scope of the Code are brought at wholesale or not less than 80% retail prices.
2. Infant formula is purchased in accordance with the Policy and purchase records are available for verification purposes.
3. The type of Infant formula purchased is rotated on a regular basis.
4. All products, within the scope of the Code are kept out of view of pregnant women, mothers and their families.
5. The facility has a written policy on WHO Compliance which includes the contact person within the service for formula representatives.
6. Marketing personnel are denied contact with pregnant women, mothers and their families.
7. Pregnant and non-breastfeeding women are taught about formula feeding on an individual basis.
8. Education materials for pregnant women, including their labels explain:
 - the benefits and superiority of breastfeeding;
 - the social and financial implications of the use of infant formulas; and
 - the health hazards of unnecessary or improper use of formula.
9. All material used by health workers contain only scientific and factual information and this information is not presented in a way that implies (or creates a belief) that bottle-feeding is equivalent or superior to breastfeeding.
10. There are no words / pictures displayed in the service that idealise the use of products, including pictures of infants on the labels of products.
11. The service and its employees do not promote or advertise (within the scope of the Code) products to the general public.
12. Formula samples are not given to mothers, pregnant women or their families.
13. Free or subsidised supplies are not given to health care providers.
14. Samples given to health workers are only those used for professional evaluation or research.
15. Free gifts, materials or money, from infant formula companies are not given to health workers or the service / organisation / practice.

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- 16 Gift bags, if given by the service, do not contain anything that could interfere with the successful initiation and establishment of breastfeeding, for example, feeding bottles, teats, pacifiers or infant formula.
- 17 As part of the education program, staff are able to report an understanding of the International Code of Marketing of Breastmilk Substitutes and its impact on their practice.
- 18 Infant formula company literature is only used by the service for professional education.

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Documentation required for WHO Code Compliance prior to Assessment

1. A copy of the facility's Artificial Feeding Policy. The Policy must contain the following information:
 - frequency of the rotation of the brands of infant formula used;
 - infant formula is purchased in accordance with the Policy;
 - alternation of infant formula; and
 - A point of contact for formula company representatives.