Bringing the EU into line: to protect babies rather than companies

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European Platform on Diet, Physical Activity and Health Brussels
Minimum UN standards

- 1981 - International Code adopted
- World Health Assembly – world’s highest health policy setting body.
- minimum standards that all Member States are required to implement - *in their entirety*.
- They protect parents and carers from commercial pressures and ensure they are properly informed and supported in their decisions.
Important!

The Code DOES NOT:

• **prevent** breastmilk substitutes from sold – *(provided they meet safety and nutritional standards and are marketed appropriately)*.

• **force women** to breastfeed against their wishes

• **stop essential information** reaching parents, carers and health workers

The Code DOES:

• **protect parents rights to full and frank information:**

• This means **clear labelling, warnings, scientific and factual information** for health workers - **not adverts, health claims** and **cover-ups**
Conflicts at the heart of EU policy

“A high level of human health protection shall be ensured in the definition and implementation of all Community policies and activities”

EU Treaty

“The Irish Government and Danone Baby Nutrition.. today announced details of a €50 million investment programme.... trebling of capacity to 100,000 tonnes annually.. 98% of the output ..will be exported and commercialized in more than 60 countries worldwide......

• Enterprise Ireland Press release 4.12.10

“A kilo of infant formula is worth ten times the value of a kilo of milk powder, so it’s obvious which product New Zealand should be selling.”

Gerry Brownlee, Economic Development Minister, 2011
Conflicts of interest and science

- Before 2000 EU scientific advisors did not have to declare interests – leading to many bad decisions
- IBFAN has helped change this but problems persist.
Weaknesses in EU Directives

• MEPs have called for the International Code to be adopted as a Directive since 1981 – the EU Commission has blocked its adoption

• promotion of follow-on milks, medical foods, bottles and other infant feeding products permitted

• **No pre-authorisation of optional ingredients**

• Seen as a Maximum rather than Minimum - EU Member States can’t meet their obligations under the Code – (some even allow infant formula advertising)
Global impact

• creates an imbalance at global level

• Codex standards in line with the International Code and Resolutions help governments protect health

• Codex meeting 2011 was 40% food industry – 59 as Business Interest NGOs (BINGOS). 49 on government delegations. Mexico 100% industry.

• UNICEF and WHO estimate that 1.5 million babies die every year because they are not breastfed.
Failing women and wasting money

- **90% of women in UK** who stop breastfeeding in the first six weeks stop before they want to.

- UK Breastfeeding rates are lowest among young and poor mothers – BF can counteract the effects of poverty for babies.

- For just **five illnesses**, moderate increases in breastfeeding would translate into cost savings for the UK National Health Service of **£40 million**

- *Preventing Disease and Saving Resources, UNICEF UK October 2012*
Strong legislation – an essential factor

- **International Code** has been more effective than the **Framework Convention on Tobacco Control**. (84 countries have laws)

- When laws are tough, comprehensive and independently monitored alongside Baby Friendly Hospitals and good maternity protection - breastfeeding rates recover and babies' lives are saved.

- **Global exclusive breastfeeding rates** have risen by at least 15% since 1990

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1 An international legal strategy for alcohol control: not a framework convention—at least not yet. Pre Publication in Addictions _3919 1..6 Allyn L. Taylor1 & Ibadat S. Dhillon2

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"The huge disparity in the retail value of milk formula sales between China and India is mainly due to the significant differences between their official regulatory regimes." It notes: “In India, all advertising is prohibited, while in China, TV advertising and the use of celebrity spokespeople are allowed.”

Euromonitor
State of the Code by company & country

STATE OF THE CODE BY COMPANY

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

STATE OF THE CODE BY COUNTRY

A survey of measures taken by governments to implement the provisions of the International Code of Marketing of Breastmilk Substitutes & subsequent World Health Assembly resolutions

Updated with new classifications!
Maternity Protection

UN/ILO

Global Strategy for Infant and Young Child Feeding (2002) recommends:
• Exclusive breastfeeding for six months and continued breastfeeding up to 2 years
• Mothers continue breastfeeding after return to paid employment.

ILO Convention 2000 No 183:
min 14 weeks + BF breaks

ILO recommendation 2000 No191, came into force 2002, ratified by 11 MS and 5 candidate c. and pot.c.c.
min 18 w + BF facilities at work

EU

DRAFT EU Council Dir. on safety and health at work 2008/0193(COD) am.
Dir 92/85/EEC

CURRENT: leave before and after birth: 14 weeks, no BF breaks

PROPOSAL:
Commission: 18 wks;
Council: no agreement (<18 wks likely)
Parliament: 20 wks + BF breaks.

No action yet in 2012 awaiting Council 1st reading, budgetary conciliation convocation.

Risk that there will be no changes

New ILO Maternity Protection Package http://mprp.itcilo.org
26th countries have now ratified the ILO Convention 183 (2000) on maternity protection at work

The former Yugoslav Republic of Macedonia on 3 October 2012 (leave: 9 months for one child; 1 year for 2 or more children).

The other 25 countries are:

- Albania (2004): 365 days (52 weeks)
- Austria (2004): 16 weeks
- Azerbaijan (2010): 125 days (70 before, 56 after birth)
- Belarus (2004): 126 days (18 weeks)
- Belize (2005): 14 weeks
- Benin (2012): 14 weeks
- Bosnia & Herzegovina (2010): 1 year (28 days before birth; twins: 18 months) (52 weeks)
- Bulgaria (2001): 135 days (19 weeks)
- Cuba (2004): 18 weeks
- Cyprus (2005): 15 weeks
- Hungary (2003): 24 weeks
- Italy (2001): 5 months (20 weeks)
- Kazakhstan (2012): 18 weeks (twins: 20 weeks)
- Latvia (2009): 16 weeks
- Lithuania (2003): 126 days (18 weeks)
- Luxembourg (2008): 16 weeks
- Mali (2008): 14 weeks
- Moldova (2006): 126 days (18 weeks)
- Montenegro (2012): 365 days (52 weeks)
- Morocco (2011): 14 weeks
- Netherlands (2009): 16 weeks
- Romania (2002): 126 days (18 weeks)
- Serbia (2010): 16 weeks
- Slovakia (2000): 28 weeks
Independent monitoring - forming coalitions

- IBFAN groups join with others to monitor and tackle marketing in a unified way – for example in Ireland, France, Italy and the UK.
- The Baby Feeding Law Group – brings 24 health professional and lay NGOs together.
Creating new markets

• Baffle with science
• Trigger fears that foods lack essential nutrients
• Build ‘trust’ through ‘history of safe use’
• Extend the bottle feeding period

Sales of toddler milks, said to be an industry priority, because their promotion is less regulated, are predicted to grow by 31%.
Euromonitor International
http://www.firststepsnutrition.org/children/eating-well_first-six-months.html
Undermining confidence in family foods

“I now know that even if I bought the highest quality ingredients, organic or not I couldn’t match the degree of quality assurance that Cow & Gate baby foods have. “It is impossible to buy one on the market that has so few contaminants, especially from nitrates”

“What if I grow my own?” I mused.

“Do you know if the soil on your vegetable patch contains heavy metals, or what pesticides may have been used in the past?” Stephan asked.

“No I don’t... there’s a thought...”

Lifting the Lid – by Cow & Gate (Danone)
Artificially fed infants consume 30,000 more calories than breastfed infants by 8 months of age” (equivalent to 120 Mars bars - 4 a week). Student Study Guide KG Auerbach, J Riordan 1993
Breastfeeding and prevalence of obesity in childhood

Prevalence of obesity in childhood at age five and six, Germany

Infant weight gain is associated with
• Maternal prepregnant BMI
• Short duration of breastfeeding
• Early introduction of complementary foods

• Those factors are sufficient to move an infant from the 75th to the 85th percentile of weight gain
targeting pregnant women

websites, facebook, company 'carelines,' know-how buses – all lure parents

This is all against the Code

“Marketers are becoming more aware of the need to target parents as early as possible. Brand relationships and trust bonds can be formed during pregnancy when the child is not yet even born. Babies and Toddlers: Emerging Opportunities. datamonitor.com
Luring parents to Facebook

At Cow & Gate we believe that the best part of parenting is seeing your little baby become a little person. To celebrate this belief and share our point of
This Danone leaflet sent to mothers in the UK perpetuates the notion that breastfeeding will always be painful - many mothers believe this so don’t ask for help - and the problems continue.
Targeting health workers

Three advertisements in the same journal (June 2012) claim that each brand is better than the others.
Pushing the limits

SMA advert - 2003. The Judge found SMA to be guilty of ‘cynical and deliberate breach of the regulations’...the defendant....was prepared to ignore the advice of their legal department and took the risk of prosecution.’
Mass uncontrolled trial of risky ingredients

•“...with all products being almost identical .. Even if Formulaide (DHA and ARA) has no benefit..it would be widely incorporated into formulas, as a marketing tool and allow companies to promote their products as closest to human milk.”

Hambricht and Quist Spot Report

•“We find the case for labelling infant formula or follow on formula with health or nutrition claims entirely unsupportable. If an ingredient is unequivocally beneficial as demonstrated by independent review of scientific data it would be unethical to withhold it for commercial reasons. Rather it should be made a required ingredient of infant formula in order to reduce existing risks associated with artificial feeding....”

•UK Scientific Advisory Committee on Nutrition
10 reasons to stop this DHA claim

1. The claim contradicts leading scientific opinion and is highly promotionist. There is no consistent or convincing evidence of a causal relationship between DHA-fortified formula and better visual performance. The European Scientific Committee on Food (ECSC) debated the evidence for health claims, in need of more robust methodological research.

2. The European Food Safety Authority (EFSA), which validates the evidence for health claims, is restricted to using independently-funded research. Therefore, EFSA opinions state that it could not have reached conclusions on health claims without considering the studies claimed by the applicant or proprietors.

3. EFSA further classified its opinion in a letter to the European Commission, six months later, stating that the available evidence did not support the claim for toddlers' development as the in-laboratory evidence for DHA in formula. This would have an effect on the visual development of infants if DHA supplement shown to be beneficial for DHA-acid formula on the first 6 months.

4. The authorized DHA added to formulas is a synthetic, biologically-related compound that may not provide the same benefits as natural sources. The US FDA used in March that DHA-fortified infant formulas may not have the same impact as breast milk, which is a complex, multifaceted system.

5. The EFSA was told by a study in 2009 that DHA supplementation in infant formulas is not as beneficial as breast milk. The EFSA said that "some of the studies presented do not show a benefit of DHA alone or DHA plus ARA on infant development or health compared to the breast-fed control group."

6. In 2009 the UK Scientific Advisory Committee on Nutrition said, "We find the claims for promoting infant health with DHA or other sources of essential omega-3s are not substantiated. Our advice is that additional evidence is needed to support the claims made for infant formula."

7. Parental protection is a cornerstone of the FATCA and EU regulations. Since 2013, EU legislation on infant formula has further strengthened protection against false health claims.

8. The claim that DHA reduces the risk of heart disease is discredited. Despite claims by the World Health Organization (WHO) and the American Heart Association (AMA), there is no evidence to support the claim.

9. The claim that DHA prevents or reduces the risk of cancer is unfounded. The International Agency for Research on Cancer (IARC) has classified DHA as a non-cancerous agent. The EFSA has also stated that "there is no evidence to support the claim that DHA reduces the risk of cancer.

10. The claim that DHA supports healthy brain development is not supported by evidence. The EFSA stated, "There is no evidence to support the claim that DHA supports healthy brain development."

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Stopping loopholes for advertising of formula milk

Tags: BRESC, CHILDREN, INFANT FORMULA, NUTRITION
POSTED IN BLOG, NEWS, STORES, NEWS ON 16/02/2013

Every parent wants their child to have the best possible start in life. We all know that the nutrition that infants receive in their first months and years is crucial for their growth and development, and will affect them for...
Is the PARNUTS review a chance to protect EU children?

Thank you!

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