

January 2023 to December 2023

Undermining Breastfeeding for Profit

A Report on the
Weekly Collection of
International Code Breaches



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February 2024© Breastfeeding Advocacy Australia

Table of Contents

| | |
|--|----|
| Who is BAA? | 5 |
| Introduction | 6 |
| Breastfeeding Rates | 7 |
| BAA Weekly Collections <ul style="list-style-type: none">• The last 12 months• Type of Advertising• Who initiated the advertising? | 8 |
| Industry rhetoric <ul style="list-style-type: none">• Greenwashing• Australian government | 11 |
| Recommendations | 14 |
| Abbreviations | 15 |
| Definitions from the International Code | 16 |
| References | 18 |

Remember....

“Sponsorship by its very nature creates a conflict of interest. Whether it takes the form of gift items, meals or help with conference expenses, it creates a sense of obligation and a need to reciprocate in some way. The ‘gift relationship’ thus influences our attitude to the company and its products and leads to an unconscious unwillingness to think or speak ill of them.”

David Clark 2017¹

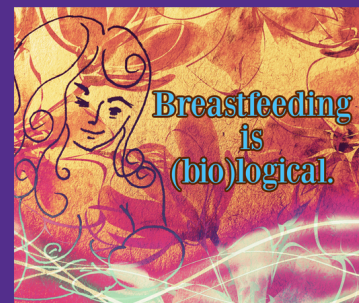
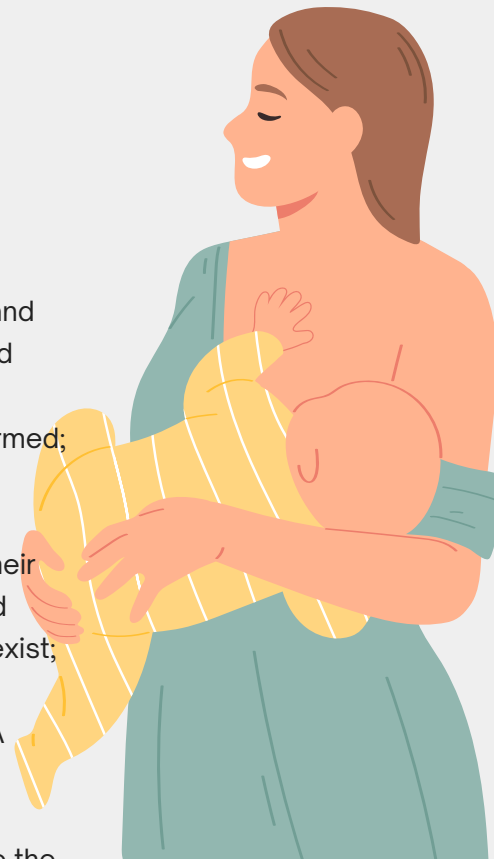


Who is BAA?

Breastfeeding Advocacy Australia is a volunteer, non-profit organisation with 12 specific goals (as listed below and in our constitution) and this includes a Mother Support arm called Nurturing Mothers BAA.

Breastfeeding will be culturally and politically enabled, protected and promoted as the ultimate achievable norm of infant and young child feeding in Australia. Breastfeeding Advocacy Australia is established to be a non-profit organisation whose purpose is to advance health by undertaking any of the following activities:

- creating public and government awareness of the role of successful breastfeeding as the single most important public health measure a country can implement;
- providing education to government agencies, health workers and the public about critical barriers to achieving breastfeeding and strategies to make positive change;
- providing a forum for interested parties to interact and be informed;
- participation in opportunities that affect policy related to breastfeeding;
- recognise and advocate for the human rights of families and their infants in Australia to enact an informed decision to breastfeed without the existing legislative and informational barriers that exist;
- advocate for legislation to enforce the International Code of Marketing of Breast-milk Substitutes and the subsequent WHA resolutions (the Code);²
- identify and expose products and practices that undermine informed decision making about breastfeeding that fall outside the Code;
- record breaches of the Code and report them to international, federal and state governing bodies whose role is to protect, promote and support breastfeeding;
- expose predatory marketing practices and report them to international, federal and state governing bodies whose role is to protect, promote and support breastfeeding;
- create cognizance of how attitudes towards infant feeding have been affected by commercial influence amongst those who work with families including, but not limited to health professionals, child-care workers, legal representatives, the media and politicians;
- advocate for families to be given information about biologically normal sleep in the first 1000 days of life;
- advocate for breastmilk, breastfeeding and unpaid carers work to be recorded numerically in the GDP figures



Introduction

We begin this report on the collection of violations from 2023 with a reminder that the existing International Code² is the minimum standard that industry agreed they would abide by in 1981.

Industry helped draft the Code and yet there is no attempt to adhere to the basic standards of marketing practice laid out in those first documents. Despite more than forty years of advocacy and evidence that minimal compliance has ever been achieved, the talking and arguing between advocates continues.

Those who call themselves code experts then fail to include the full scope of the code contribute to the relentless assault on mothers and babies by big business.

In 2023 mothers were in a much worse position than when the Code was initiated in 1981 and there is little chance of improvement. The "we support breastfeeding" rhetoric serves those who seek attention and self-importance, but it does nothing to effect real change.

This truth continues, those who take money from code violators to get published or advance their career are welcomed and celebrated by breastfeeding advocates, this is confusing, and incongruent with change. Breastfeeding needs a few people in leadership roles to consider how their actions filter down to mothers and babies. The current situation is filled with fence-sitters and enablers who have failed to grasp the essence of the Code, that the actions that are acceptable in marketing other products are **NOT SUITABLE FOR BREASTFEEDING**.

Sponsorship and education are incompatible, and it is time for all key breastfeeding organisations to demonstrate some ethical leadership and put mothers and babies before money.



**THE CODE
IS THE
MINIMUM
STANDARD**

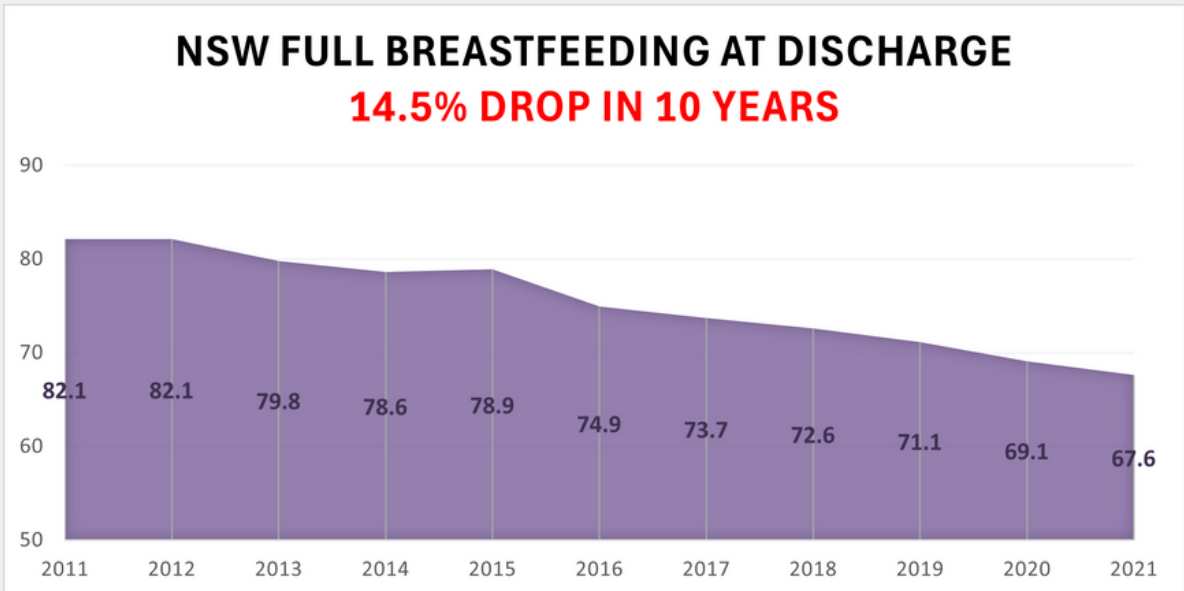
Breastfeeding rates

The Australian National Breastfeeding Strategy 2019 and Beyond (ANBS)³ is very thorough, but there is no budget or plan for it to be implemented and as noted further in the report the ONLY action to date is a review (for the 4th time using tax-payer money) the existing MAIF agreement. This report will publish the **NSW breastfeeding at discharge data** from the NSW Mothers and Babies Report⁴ because this is the only data that exists and the results should alarm all those responsible for public health in Australia.

A reminder for those reading this report that the ANBS recommends:

1.3 Action area—Policy coordination, monitoring, research and evaluation

| Action | Detail | Responsibility |
|---|--|---|
| Monitor and report on breastfeeding rates | <ul style="list-style-type: none">Seek agreement from all jurisdictions on national breastfeeding indicators to be collected at the local level through the Child Digital Health Record.Commission a baseline infant feeding survey and repeat the survey every five years. | Commonwealth and all states and territories |



The extent and nature of national monitoring and evaluation of breastfeeding practices can influence public awareness and support for breastfeeding and whether it is valued at the population level as part of the food system.

ANBS³ p.37

↓

14.5%

BAA Weekly Collections

Between January 2023 and December 2023 BAA recorded approximately 1075 examples of the continuation of the advertising that undermines breastfeeding for profit in Australia.

Every week a new post is created. Group members are asked to post a picture with the date and location of the activity. Each post is entered onto a spreadsheet and the picture is dated and saved into a file.

Each weekly post has its own link. Contributors can interact with the Group admin and there are many questions and discussions that broaden the value of Weekly Collections beyond a simple record of predatory marketing to building a community of knowledgeable advocates.



Post a picture



Ask a question



Collect
evidence



Build
community



The last 12 months

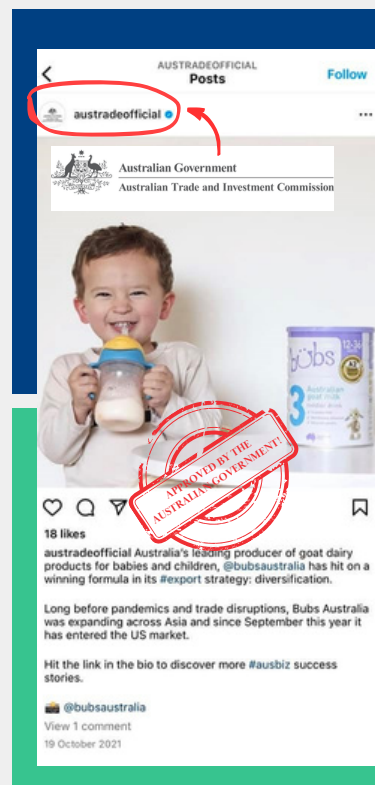
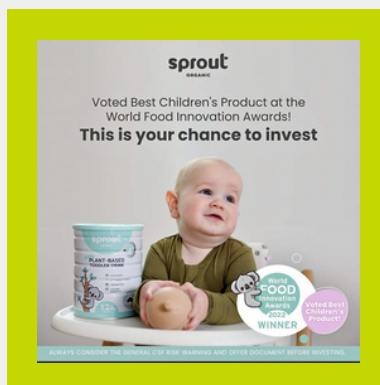
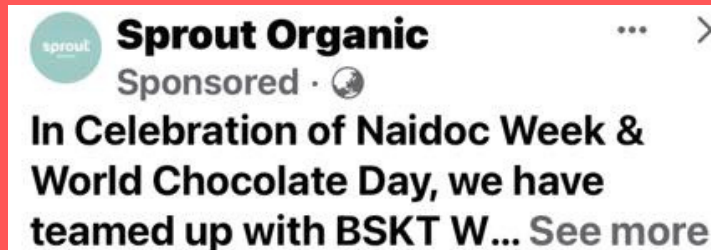
There has been a marked increase in toddler drink marketing with industry "hiding" 0-12m products behind invitations to their websites to gain access to Specials, Discounts, Rewards Points across the whole range. Once inside the website the 0-6m is often the first product displayed. Reward Points are new in the last few months - particularly with Sprout.

Members are becoming increasingly angry when they witness social engineering. The marketing creating a false belief that pumps, dummies, lactation teas and "other paraphernalia" are necessary to breastfeed or mimic breastfeeding, for example "closer to nature" etc. Members are now seeing the subtle but deliberate bottle emojis and other graphics, and sharing them on the Weekly post, so there is a slow and increasing awareness. Cross promotion is very evident, with the advertising of pre-pregnancy - grave ultra processed food (UPF), like growing up milks (GUM) 4+.



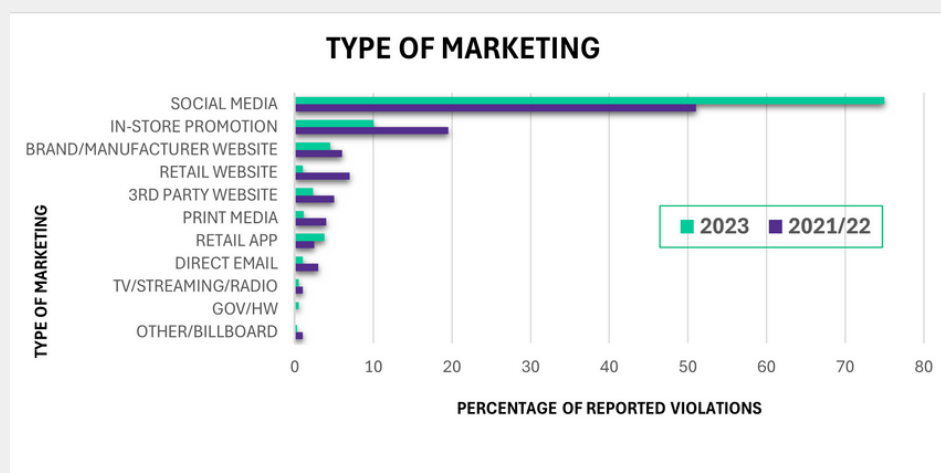
Toddler drink marketing





Type of Advertising

The year has shown changes in the type of advertising reported. Significantly, the amount of Social Media advertising has jumped from 50% to 75% of the reported violations. A disturbing change is the emergence of government agencies as an advertising vehicle.



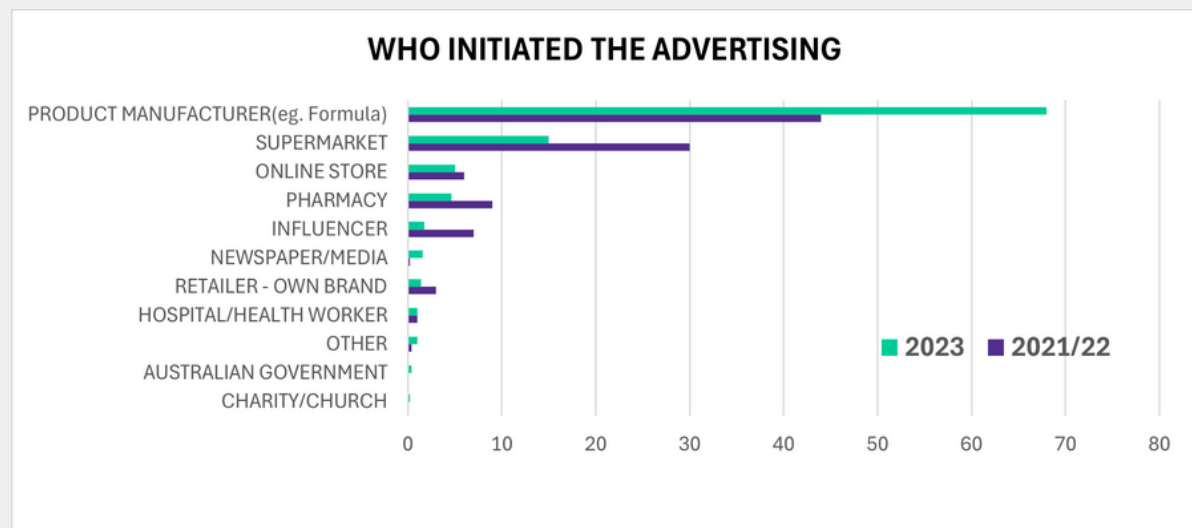
50%↑
social media
marketing

Initiation of advertising

It was pleasing to note that there were no charities or churches reported in 2023 but the appearance of the Australian government and the **35%** increase in initiation of advertising from the product (eg. formula) manufacturers is concerning.

Another disappointment was the inclusion of UNICEF, both in Australia and Malaysia, are being used as a vehicle to promote the use of expensive ultra-processed food (UPF) instead of nutritious, sustainable, and available local food sources, including wet nursing and re-lactation. The ignorance of these precious, life-saving food sources by UNICEF decision makers is concerning.

These expensive unsafe UPFs are not sterile and require clean water heated to 70°C, water and detergent to clean feeding equipment. These basics to prevent life-threatening gastro-intestinal infections are not readily available in emergency situations.



35% ↑

product (eg. formula)
manufacturer
initiation

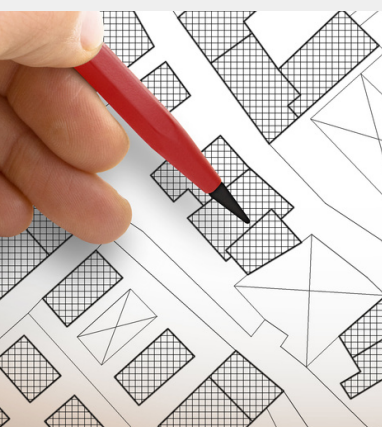
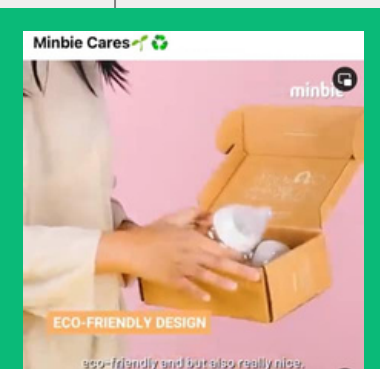
Greenwashing

Many companies that are featured in the weekly collections actively "greenwash" their products, using this as a marketing ploy.

Meaning of greenwashing in English ⁵

Behaviour or activities that make people believe that a company is doing more to protect the environment than it really is:

- The campaign was little more than greenwashing to improve the oil company's image.
- The environmental movement has warned consumers against greenwashing, saying that when businesses use terms such as "environmentally friendly" and "green" they are often meaningless.



Australian Government

Failure to act on breastfeeding protection and support is itself unconscionable but to actually give money to the formula manufacturing industry (the so-called Infant Nutrition Council) is affronting to the mothers and babies struggling to breastfeed in an actively hostile Australian health system.

This industry spends more money on marketing than Australia spends on health, why are our taxpayer dollars being given to them to undermine breastfeeding in India! Australians should be outraged at this absence of interest in public health both here and abroad.

As 2023 came to a close the only action taken to implement the Australian National Breastfeeding Strategy 2019 and Beyond (ANBS)² was another (there have been 4 tax-payer funded reviews already) review of the inadequate MAIF⁶ agreement.

\$300,000 for the Infant Nutrition Council to develop new export markets for Australia's infant formula industry⁷



**TIME
TO
ACT**



Recommendations

BAA will continue to remind the readers of this unmet recommendation from the taxpayer funded Best Start Report 2008.⁸

Recommendation 22

That the Department of Health and Ageing adopt the World Health Organization's International Code of Marketing of Breast-milk Substitutes and subsequent World Health Assembly resolutions

Further recommendations

Penalties commensurate with the profits and marketing budgets that reflect the costs to public health.

An independent central body that oversees the infant feeding and parenting industry.

Government directives about the use of bottle-feeding images in public health messages.

No industry representatives or academics that have received funding from industry on any public health committees.

All taxpayer funded organisations related to infant care and feeding must be free from commercial influence.

No Professional Development Points for events that take sponsorship from products that undermine breastfeeding.

All donations must be unbranded and suitable for the situation.

Emergency workers must have training on breastfeeding and harm minimisation for artificially fed infants.

Plain paper packaging for infant formula products, with penalties for false claims.

No Australian UPF to be distributed to vulnerable overseas countries.
All companies and Australian government representatives must respect the laws related to infant feeding products in countries outside Australia.

**PUBLIC
HEALTH
BEFORE
PROFIT**



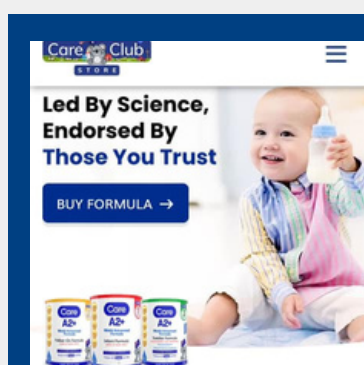
Abbreviations

| | |
|--------------------|--|
| ACM | Australian College of Midwives |
| BAA | Breastfeeding Advocacy Australia |
| BMS | Breastmilk Substitute |
| COI | Conflict of Interest |
| GDP | Gross Domestic Product |
| GUM | Growing Up Milk 36 months+ |
| IBFAN | International Baby Food Action Network |
| International Code | International Code on the Marketing of Breastmilk Substitutes |
| MAIF | Marketing in Australia of Infant Formulas: Manufacturers and Importers Agreement |
| NMBAA | Nurturing Mothers BAA |
| Toddler Drink | Powdered drink for 12 – 36 months |
| UPF | Ultra-processed food |
| WHO | World Health Organization |

Definitions

from the International Code of Marketing of Breast-milk Substitutes

| | |
|--------------------------|--|
| "Breast-milk substitute" | means any food being marketed or otherwise presented as a partial or total replacement for breast milk, whether or not suitable for that purpose. |
| "Complementary food" | means any food whether manufactured or locally prepared, suitable as a complement to breast milk or to infant formula, when either become insufficient to satisfy the nutritional requirements of the infant. Such food is also commonly called "weaning food" or breast-milk supplement". |
| "Container" | means any form of packaging of products for sale as a normal retail unit, including wrappers. |
| "Distributor" | means a person, corporation or any other entity in the public or private sector engaged in the business (whether directly or indirectly) of marketing at the wholesale or retail level a product within the scope of this Code. A "primary distributor" is a manufacturer's sales agent, representative, national distributor or broker. |
| "Health care system" | means governmental, nongovernmental or private institutions or organizations engaged, directly or indirectly, in health care for mothers, infants and pregnant women; and nurseries or child-care institutions. It also includes health workers in private practice. For the purposes of this Code, the health care system does not include pharmacies or other established sales outlets. |
| "Health worker" | means a person working in a component of such a health care system, whether professional or non-professional, including voluntary unpaid workers. |
| "Infant formula" | means a breast-milk substitute formulated industrially in accordance with applicable Codex Alimentarius standards, to satisfy the normal nutritional requirements of infants up to between four and six months of age, and adapted to their physiological characteristics. Infant formula may also be prepared at home, in which case it is described as "home-prepared". |
| "Label" | means any tag, brand, marks, pictorial or other descriptive matter, written, printed, stencilled, marked, embossed or impressed on, or attached to, a container (see above) of any products within the scope of this Code. |



Definitions

from the International Code of Marketing of Breast-milk Substitutes

| | |
|-----------------------|--|
| "Manufacturer" | means a corporation or other entity in the public or private sector engaged in the business or function (whether directly or through an agent or through an entity controlled by or under contract with it) of manufacturing a product within the scope of this Code |
| "Marketing personnel" | means any persons whose functions involve the marketing of a product or products coming within the scope of this Code |
| "Samples" | means single or small quantities of a product provided without cost. |
| "Supplies" | means quantities of a product provided for use over an extended period, free or at a low price, for social purposes, including those provided to families in need. |



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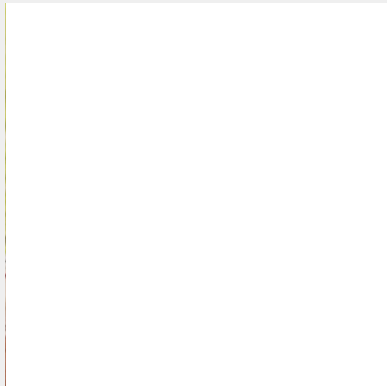
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PROTECT

PROMOTE



SUPPORT

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