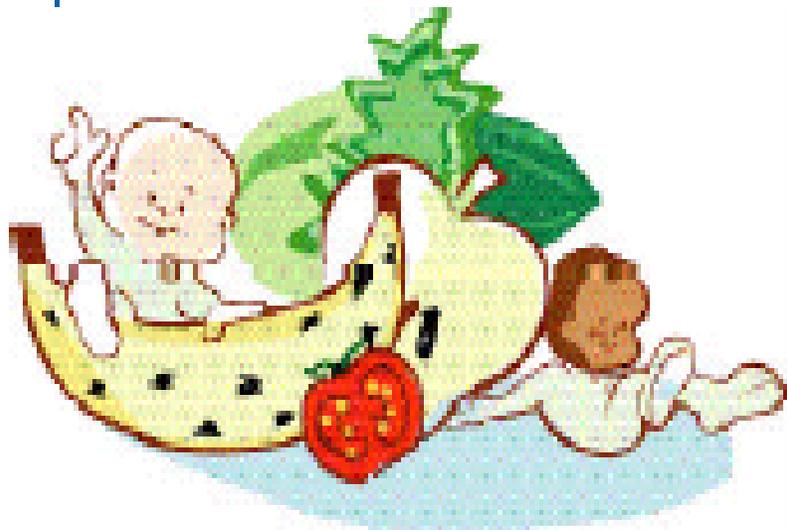


Complementary feeding and Conflict of Interest



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No conflict of
interest to be
declared in
relation to
my
participation
at the WABA
GBPM

WABA GLOBAL BREASTFEEDING PARTNERS MEETING
PENANG, MALAYSIA, 25-27 SEPT. 2018.

Why complementary feeding is a matter of concern?

- Breastfeeding is recommended till the second year and beyond, and should be complemented after the 6th month.
- Breastfeeding reduces all-cause mortality by 49% in the 2nd of year of life, as it (6 studies).
- Each additional month of breastfeeding reduces childhood obesity by 4% (17 studies).
- Breastfeeding more than 12 months reduces breast cancer by 26% (50 studies) and ovarian cancer by 37% (29 studies).

Entitlement to food, entitlement to healthy food

According to Nobel Prize winner Amartya Sen: people suffer hunger and die not from lack of food, but from lack of entitlement to food.

Complementary feeding had steadily become a matter of concern for WHO

Appropriate complementary feeding practices contribute to the UN global target for a 25% decrease in premature mortality from non-communicable diseases by 2025.

- The 1981 International Code ([WHA Res. 34.22](#)) referred to complementary foods and recommended the use of locally available foods.
- [WHA Res. 39.28 \(1986\)](#) stated that follow-on formulas are “not necessary” and [WHA Res. 49.15 \(1996\)](#) stated: “complementary foods should not be marketed” – and “to avoid conflict of interest”.
- [WHA Res. 63.10 \(2010\)](#) urged Member States “to end inappropriate promotion of food for infants and young children and health and nutrition claims”.
- [WHA Res. 65.6 \(2012\)](#) calls on Member States to end the inappropriate promotion of food for infants and young children and nutrition and health claims, address the double burden of malnutrition and promises to develop risk assessment, disclosure and management tools to safeguard against possible conflicts of interest in policy development and implementation of nutrition programmes.

In [2013](#), WHO requested clarification and guidance on what constitutes inappropriate promotion of food for infants and young children and how to end it.

WHO Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children WHA Resolution 69.9 (2016)

Why does the Guidance cover foods for children up to 36 months of age?

While WHO does not have a definition of the “young child”, the Codex Guidelines on Formulated Complementary Foods for Older Infants and Young Children define the young children as those up to three years of age.

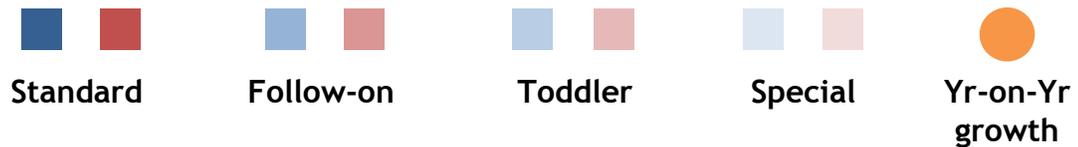
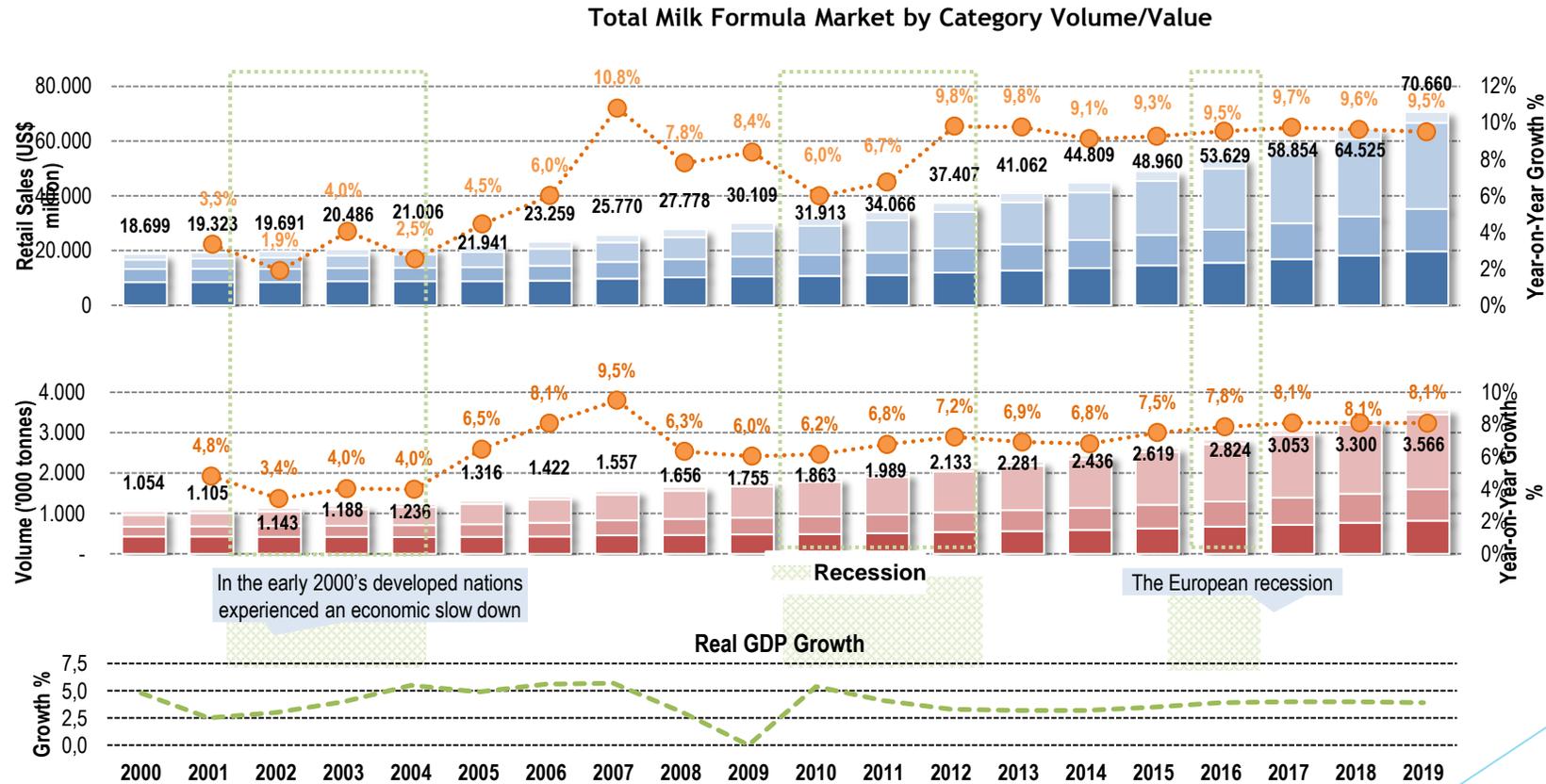
In addition, WHO recommends breastfeeding for 2 years or beyond, and as such protection of continued breastfeeding beyond 2 years against inappropriate promotion is essential.

Furthermore, unhealthy snack foods are being marketed for consumption by children, including young children, and greater protection against such marketing practices is important.

Codex Guidelines on Formulated Complementary Foods for Older Infants and Young Children. CAC/GL-8-1991 (Revised 2013). http://www.codexalimentarius.org/download/standards/298/CXG_008e.pdf

The breast milk substitute (BMS) industry is large and growing

- In 2014, global sales of all baby milk formula were about US\$ 44.8 billion
- By 2019, the market value is projected to reach US\$ 70.6 billion.



Growing Up Milks

BREASTFEEDING IS BEST FOR BABIES



NAN.
PELARGON.

Dear Healthcare Professional,

**NESTLÉ LAUNCHES
THE FIRST ACIDIFIED
GROWING UP MILK IN
SOUTHERN AFRICA.**

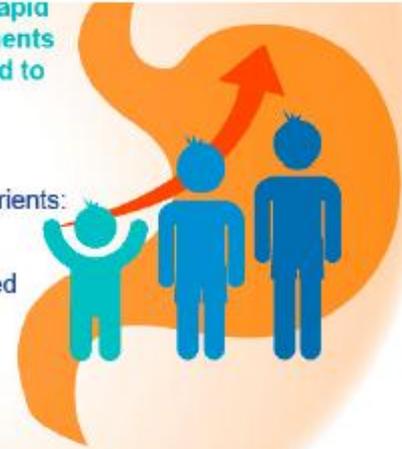


NAN PELARGON
Growing Up milk
is now available
for toddlers!

Growing up milk supports the rapid growth and nutritional requirements of pre-school children compared to regular milk. ^{1,2}

Growing Up Milk provides:

- Higher content of key micronutrients: Vitamin A, Iron, Zinc ³
- Lower protein content compared to regular cow's milk ⁴
- High content of essential fatty acids ^{5,6}



NAN PELARGON 3:

REDUCES risk of infection from:



Acidification with lactic acid has been shown to:

Suppress the growth of certain pathogenic bacteria ⁹

Conflict of Interest

a **conflict of interest** means-

“a set of conditions in which professional judgement concerning a primary interest (such as a patient’s welfare or the validity of research) tends to be unduly influenced by a secondary interest (such as financial gain)”

- Thompson (1993; p573)

What are the limits and risks that we would have when we are dealing with conflicts of interest when defending breastfeeding and healthy complementary feeding?



When ONE PARTNER objective is to make profits and the OTHER PARTNER objective is the defense of the "product" human milk and healthy complementary foods, then:
IT IS NOT POSSIBLE TO HAVE A 'PARTNERSHIP' WITH FOOD COMPANIES AND BE FREE OF CONFLICT OF INTEREST

2016 : WHO Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children



Recommendations

1. Optimal infant and young child feeding: EBF 6 months + Continue BF + CF till 2nd y +
2. Products that function as breast-milk substitutes (including follow-up formula and growing-up milks) should not be promoted.
3. Adherence to established standards and guidelines (Codex should review and establish clear standards)
4. Messages for the promotion of foods for infants and young children
- 5. Avoidance of cross promotion**
6. Avoidance of conflict of interest
7. Implementation on the marketing of foods and non-alcoholic beverages to children



WHO Guidance Recommendation n.4 –

Messages should include:

- importance of continued breastfeeding for up to two years or beyond and the importance of not introducing complementary feeding before 6 months of age;
- 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 being 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;
- any image, text or other representation that is likely to undermine or discourage breastfeeding;
- recommend or promote bottle feeding;
- endorsement by a professional or other body, unless specifically approved by relevant national, regional or international regulatory authorities.

WHO Guidance Recommendation n.6 - Avoidance of conflict of interest

- The World Health Assembly – the world’s highest health policy setting body - has recommended many times that health professionals should avoid conflicts of interest in all infant and young child feeding activities.
- The 2016 recommendation said that “...health professional associations should not...accept equipment or services from companies that market foods for infants and young children, accept gifts or incentives from such companies” or “allow such companies to sponsor meetings of health professionals and scientific meetings”.
- As senior WHO staff stated recently ‘acceptance of funding or other incentives, however conditional, creates a sense of obligation and loyalty to the company in question’.
- The funding of pediatric societies (events, research, etc) by breastmilk substitutes companies affects public trust in their guidance on infant feeding. The connection – the image transfer - will also enhance public faith in the safety and acceptability of formula milk and other milks commercialized for young children .

CONCLUSION:

The 2016 WHO Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children should be implemented and included as a fundamental part of National Codes to protect safe and healthy complementary feeding.

The Resolution 69.9 of the World Health Assembly must be implemented by the breastfeeding movement.

XV ENAM

XV Brazilian National Breastfeeding Meeting

V ENACS

V Brazilian National Healthy Complementary Feeding Meeting

3rd WBC

3rd World Breastfeeding Conference

1st WCFC

1st World Complementary Feeding Conference

**Breastfeeding and healthy
complementary feeding:
human rights to be protected for life**

November 11th to 15th, 2019

RIO DE JANEIRO | BRAZIL

