



Infant
Nutrition
Council

Industry supporting both
Breastfeeding & Infant Formula

AUSTRALIA & NEW ZEALAND

THE INFANT NUTRITION COUNCIL

CODE OF PRACTICE FOR THE MARKETING OF INFANT FORMULA IN NEW ZEALAND

Based on:

*The World Health Organization International Code of Marketing
of Breast-milk Substitutes (WHO 1981) (WHO Code)*

*Implementing and Monitoring the International Code of Marketing
of Breast-milk Substitutes in New Zealand: The Code in New Zealand
dated July 2007*

THE INFANT NUTRITION COUNCIL CODE OF PRACTICE FOR THE MARKETING OF INFANT FORMULA IN NEW ZEALAND

Introduction

Breastfeeding is the normal way to feed a baby and is important for baby's health and well-being. The World Health Organization recommends exclusive breastfeeding until six months of age, and then to complement breastfeeding with the appropriate introduction of solid foods with continued breastfeeding up to two years of age.

There is no question that breast milk provides the best possible nutrition for infants however, when a baby does not receive breast milk the only suitable and safe alternative is a scientifically developed infant formula.

In line with the aim of the Infant Nutrition Council's Code of Practice for the Marketing of Infant Formula in New Zealand (INC Code of Practice); infant formula companies, health practitioners and government all have an important role in ensuring that the mothers and carers of formula fed babies receive adequate and appropriate information while protecting the critical role of breastfeeding.

The Infant Nutrition Council is the key industry stakeholder in infant nutrition. It works with government and other stakeholders to support the public health goals for the protection and promotion of breastfeeding and, when needed, infant formula as the only suitable alternative.

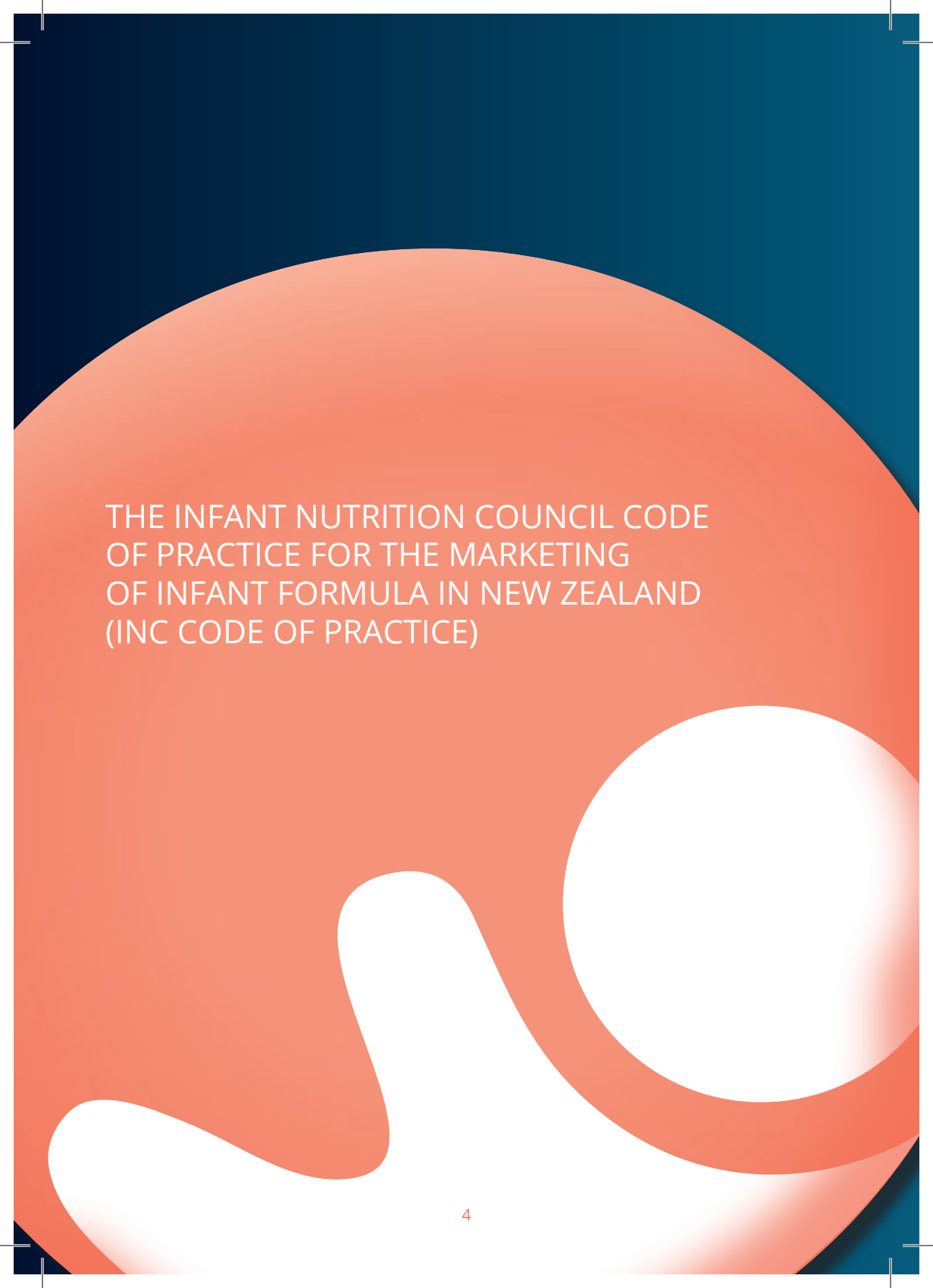
THE INFANT
NUTRITION COUNCIL
IS COMMITTED TO
SUPPORTING BOTH
BREASTFEEDING AND
THE APPROPRIATE USE
OF INFANT FORMULA.

The INC Code of Practice supports the aim of the World Health Organization International Code of Marketing of Breast-milk Substitutes (WHO 1981) (WHO Code) which is:

“...to contribute to the provision of safe and adequate nutrition for infants, by the protection and promotion of breastfeeding and by ensuring the proper use of breast milk substitutes, when they are necessary, on the basis of adequate information and through appropriate marketing and distribution.”

The INC Code of Practice is based on the World Health Organization International Code of Marketing of Breast-milk Substitutes (WHO 1981) and forms part of New Zealand’s official application of the WHO Code within the context of New Zealand’s legal and economic environment.

The INC Code of Practice is a voluntary self-regulatory code of conduct which applies to the manufacturers and importers of infant formula who are members of INC. It applies to the marketing of infant formula products suitable for infants up to the age of 12 months.



THE INFANT NUTRITION COUNCIL CODE
OF PRACTICE FOR THE MARKETING
OF INFANT FORMULA IN NEW ZEALAND
(INC CODE OF PRACTICE)

ARTICLE 1

Aim of the INC Code of Practice

“The aim of the Code is to contribute to the provision of safe and adequate nutrition for infants by the protection and promotion of breastfeeding and by ensuring the proper use of breast milk substitutes, when they are necessary, on the basis of adequate information and through appropriate marketing and distribution.”

ARTICLE 2

Scope of Code

This Code applies to the marketing in New Zealand of infant formula when such products are marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breast milk. It also applies to their quality and availability, and to information concerning their use (adapted from WHO Code Article 2).

ARTICLE 3

Definitions

For the purposes of the INC Code of Practice the following definitions apply:

Advertising The communication to the general public of an advertising promotional message through mass media. For example, television, national or local newspapers, magazines and radio, the internet or at point of purchase.

Price information at point of sale and infant formula product composition and usage information for consumers and health workers and published by or under the local control of INC companies on the internet are excluded from this definition.

Breast milk substitute Any food marketed or otherwise represented as a partial or total replacement for breast milk, whether or not suitable for that purpose.

Formula Feeding Providing infants with proprietary infant formula, either exclusively or as a supplement to breastfeeding.

Health Care Provider Public, private and non-governmental institutions or organisations 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 purpose of this Code of Practice, the health care system does not include pharmacies or other established sales outlets.

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| Health Practitioner | A practitioner of a particular health profession who is registered with, and overseen by an authority. For example dietitian, doctor, nurse, pharmacist. |
| Health Worker | A person working in a component of such a health care system including voluntary unpaid workers and those providing information to pregnant women and mothers. |
| Infant | A person under the age of 12 months. |
| Infant Formula | Any food described or sold as an alternative for human milk for the feeding of infants up to the age of twelve months and formulated in accordance with all relevant clauses of the Australia New Zealand Food Standards Code, including Infant Formula Products Standard 2.9.1 |
| Labelling | Words, particulars, trade marks, brand names, pictorial matter or symbols relating to, and appearing on the packaging of, products that are offered for retail sale, as defined by the Australia New Zealand Food Standards Code |
| Marketer | A person, corporation or any other entity engaged in the business of distributing and marketing infant formula to wholesale or retail level, whether directly or through an agent. |
| Marketing Personnel | Any persons whose functions involve the marketing of a product or products coming within the scope of this Code and who is employed by a marketer. |
| Marketing | Product promotion, distribution, selling, advertising, product public relations and information services. |
| Sample | A single package or small quantity of infant formula provided without cost to the recipient. |
| Supplies | 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. |

ARTICLE 4

Information and education

4.1

Any information or educational equipment or material provided by marketers should conform to the policies of the health care system.

4.2

Informational and educational materials provided by the marketers of infant formula, whether written, audio or visual, dealing with the feeding of infants with infant formula, should include clear information on all of the following points:

- the benefits and superiority of breastfeeding;
- maternal nutrition, and the preparation for and maintenance of breastfeeding;
- the negative effect on breastfeeding of introducing partial bottle-feeding;
- the difficulty of reversing the decision not to breastfeed;
- where needed, the proper use of proprietary infant formula.

4.3

When information and educational materials contain information about the use of infant formula, they should include the social and financial implications of its use, the health hazards of inappropriate foods or feeding methods and, in particular, the health hazards of unnecessary or improper use of infant formula. Such materials should not use any pictures or text, which may idealise the use of infant formula in comparison to breastfeeding.

4.4

Explicit instructions must be given to guide mothers and carers of infants on the appropriate and correct use of infant formula. Members of the health professions, and those members of the public who request it, must be provided with accurate and relevant information about infant formula, which should accurately reflect current knowledge and responsible opinion.

ARTICLE 5

Marketing to the general public

5.1

The advertising of infant formula to the general public, prepared by or under the local control of INC companies through mass media, including television, national or local newspapers, magazines, radio, the electronic media or at point of purchase should be avoided.

5.2

INC will inform retailers of manufacturers and importers' obligations under the INC Code of Practice.

5.3

INC companies should not distribute samples of infant formula to pregnant women, mothers of infants, or their families and caregivers of infants.

5.4

Gifts of utensils or other articles that may discourage a mother from breastfeeding her infant should not be distributed to pregnant women, mothers of infants and caregivers of infants.

5.5

Marketing personnel, in their business capacity, should not seek direct or indirect contact with pregnant women or with parents of infants and young children. This does not prevent appropriately qualified personnel from responding to complaints or unsolicited requests for information. For these requests parents should be referred to a health practitioner whenever health advice is required.

5.6

Infant formula product and usage information including pack shots, published by or under the local control of INC companies through the electronic media and accessible to consumers as well as health practitioners should be in accordance with the intent of the INC Code of Practice.

ARTICLE 6

Contact with the health care system

6.1

Marketers of infant formula should not use any facility of the health care system for the purpose of promoting infant formula. This does not, however, preclude the dissemination of information to health workers as provided in Article 6.2.

6.2

Scientific, factual and relevant information regarding infant formula may be supplied to the health care system, provided that only appropriately trained personnel are used for this purpose.

6.3

The distribution or display of infant formula information and educational materials which meet the requirements of Article 4 of the INC Code of Practice may be allowed in the facilities of the health care system, but this will be at the discretion of the health care system authorities concerned, whose agreement must be obtained.

6.4

The demonstration of the correct preparation, storage and use of infant formula to all mothers who need this should be the responsibility of health workers. Any assistance for this purpose may be given by marketing personnel, if requested by and used under the supervision of the health care system authorities.

6.5

Quantities of infant formula can be purchased by health care organisations at wholesale prices. However, the distribution of bulk quantities of free product to the health care system should be avoided.

6.6

If in circumstances of emergency relief or poverty there are donated supplies, these need to meet the following conditions:

- they are given to a single designated health agency to control, and are not provided directly from industry to consumer;
- they are for infants who are medically required to be fed, or are already being fed infant formula;
- the supply is continued for as long as the infants concerned need it;
- the supply is not used as a sales inducement;
- in the case of emergency relief, the donations are in accordance with national emergency preparedness plans and supporting documents.

6.7

The donation to the health care system of equipment and materials should be made only in accordance with the normal policies of the health care system. Such equipment or materials may only bear the donating company's name or logo, but should not refer to a proprietary product that is within the scope of this Code, and should be distributed only within the health care system.

6.8

The use by the health care system of "professional service representatives", "mothercraft nurses" or similar personnel, provided or paid for by manufacturers or distributors, shall not be permitted.

ARTICLE 7

Contact with health workers and health practitioners

7.1

Information provided by marketers to health workers and health practitioners regarding infant formula should be restricted to scientific and factual matters and such information should not imply or create a belief that formula feeding is equivalent or superior to breastfeeding. Such information should include that specified in Articles 4.2 and 4.3 of this Code.

7.2

No financial or material inducement to promote infant formula should be offered to health workers, health practitioners or members of their families. However, articles of general utility may be distributed to members of the health care system, provided they are inexpensive and relevant to the practice of medicine and general health care.

7.3

Samples of infant formula, or of equipment or utensils for the preparation or use of infant formula, may be provided at the request of a health practitioner on completion of a "Samples Request Form" consistent with the Infant Nutrition Council approved form and only for the purposes of professional evaluation and research, or for the education of mothers and carers who have made the informed decision to provide infant formula to their infants.

ARTICLE 8

Persons engaged in marketing

8.1

Marketers should inform each of their marketing personnel of the provisions of the INC Code of Practice and of the marketer's responsibilities under it.

8.2

Marketing personnel should not as part of their job responsibilities perform educational functions about infant formula to pregnant women or mothers and carers of infants, unless requested to do so by and under the supervision of the health practitioner.

8.3

This Article does not restrict marketers from providing information or educational equipment or material in accordance with Article 4.

ARTICLE 9

Labelling

9.1

Labelling of infant formula should comply with the requirements of the Australia and New Zealand Food Standards Code.

9.2

Labelling of infant formula should be designed to provide the necessary information about the appropriate use of the product and to conform to the provisions of Article 4.4 of the INC Code of Practice.

LABELLING OF INFANT FORMULA SHOULD BE DESIGNED TO PROVIDE THE NECESSARY INFORMATION ABOUT THE APPROPRIATE USE OF THE PRODUCT

9.3

Each container of infant formula offered for retail sale should comply with the requirements of the Australia and New Zealand Food Standards Code and carry a clear and conspicuous message:

- stating the superiority of breastfeeding;
- recommending that personnel of the health care system should be consulted about infant feeding;
- giving clear and precise instructions on the use of infant formula;
- warning against the hazards of inappropriate preparation.

9.4

The provision of a contact point and telephone number on the product label is permissible.

ARTICLE 10

Compositional quality

10.1

Infant formula composition and quality must comply with the general provisions of the Australia and New Zealand Food Standards Code.

ARTICLE 11

Implementation

11.1

The members of INC who are manufacturers and importers of infant formula shall be responsible for monitoring the provisions of the INC Code of Practice and making sure that their conduct at every level conforms to the intent and aims of the Code.

11.2

All personnel of INC member companies who are concerned in any way with the marketing of infant formula should cooperate with the INC in order to ensure that the provisions of the INC Code of Practice are applied as effectively as possible.

THE MEMBERS OF INC WHO ARE MANUFACTURERS AND IMPORTERS OF INFANT FORMULA SHALL BE RESPONSIBLE FOR MONITORING THE PROVISIONS OF THE INC CODE OF PRACTICE AND MAKING SURE THAT THEIR CONDUCT AT EVERY LEVEL CONFORMS TO THE INTENT AND AIMS OF THE CODE

ARTICLE 12

Monitoring

12.1

The Ministry of Health is responsible for monitoring the implementation of the INC Code of Practice. The Ministry does this by receiving complaints about potential breaches of the Code.

12.2

Any person, including individuals and community and consumer groups, can lodge a complaint with the Ministry of Health alleging a breach of the INC Code of Practice.

Breastfeeding provides babies with the best nutrition and is preferred whenever possible. Professional advice should be followed before using an infant formula. Introducing partial bottle feeding could negatively affect breast feeding. Good maternal nutrition is ideal for breast feeding and reversing a decision not to breast feed may be difficult. Infant formula should be used as directed. Proper use of an infant formula is important to the

health of the infant. Social and financial implications should be considered when selecting a method of feeding.

The Infant Nutrition Council is committed to working in collaboration with government, regulatory authorities, health care professionals and breastfeeding advocates, to improve the health and wellbeing of infants in Australia and New Zealand.

For information about the complaints management process or how to make a complaint please contact the Ministry of Health at <http://www.health.govt.nz/our-work/who-code-nz/breast-milk-substitutes-complaints-procedure>

INFANT NUTRITION COUNCIL CONTACT DETAILS

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December 2018