

NZIFMA

CODE OF PRACTICE FOR THE MARKETING OF INFANT FORMULA

Based on:

- (i) The World Health Organisation's International Code of Marketing of Breast-milk Substitutes (WHO Code)
- (ii) Implementing and Monitoring the International Code of Marketing of Breast-milk Substitutes in New Zealand: The Code in New Zealand, dated July 2007 ISBN 978-0-478-19154-7 (print), 978-0-478-19155-4 (online).

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Introduction

Breastfeeding is the optimum method of infant feeding from birth and should be encouraged wherever possible. It is also recognised that women have the fundamental right to choose how they wish to feed their infants and every effort should be made to ensure that all the facts are made available to them.

The New Zealand Infant Formula Marketers' Association (NZIFMA) accepts that some mothers, for a variety of reasons, will choose to provide formula feed. We recommend that proprietary infant formula should be the alternative to breast-milk for feeding infants up to at least the age of six months, and that the use of proprietary formulas throughout the first year of life is preferable if the infant is not breastfed.

It is agreed also that proper and suitable educational facilities be given to those mothers who do not breastfeed their infants. These educational facilities must be provided by the health care system with the cooperation, where appropriate, of the marketers of infant formula. It is essential that adequate instruction on the use of infant formula is given to pregnant women and mothers of infants, their families and caregivers of infants, both within the health care system, and in the educational literature and labelling provided by marketers. It is agreed that instructions provided should be simple and easy to comprehend.

This is a self-regulatory Industry Code of Practice, which applies to all the companies represented by NZIFMA.

Key Principles of NZIFMA Code of Practice

The NZIFMA voluntary Code of Marketing Practice applies to the marketing of infant formula products suitable for infants up to the age of six months. Follow-on formula, for infants over six months of age, is excluded from the provisions of the NZIFMA Code of Practice.

The companies represented on the New Zealand Infant Formula Marketers' Association (NZIFMA) have agreed that the following key principles will apply for the marketing of infant formula.

- a) NZIFMA and its member companies encourage and support breastfeeding as the best choice for babies.
- b) NZIFMA companies should not advertise infant formula products directly to consumers.
- c) NZIFMA companies should not initiate either direct or indirect contact with pregnant mothers or family members to promote infant formula.
- d) NZIFMA Companies should not distribute samples of infant formula to pregnant women, mothers of infants, their families and infant caregivers but may provide samples to the health sector for the purpose of professional evaluation or research.
- e) All infant formula educational and informational material prepared by NZIFMA companies and circulated through the health sector should be in accordance with the letter and the spirit of the NZIFMA Code of Practice.

- f) NZIFMA companies should not give financial or material incentives to health practitioners for the purpose of promoting infant formula.
- g) Infant formula product and usage information published by or under the local control of NZIFMA companies through the electronic media, and accessible to consumers as well as health practitioners, should also be in accordance with the letter and the spirit of the NZIFMA Code of Practice.
- h) NZIFMA will inform retailers of the provisions of the NZIFMA Code of Practice. Retailer advertisements and the in-store promotion of infant formula products should be limited to product names, price and price savings.

NZIFMA Code of Practice for the Marketing of Infant Formula

Article 1 Aim of NZIFMA Code

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 infant formula, when this is necessary*, on the basis of adequate information and through appropriate marketing.

** Note: for the purposes of the Aim, 'necessary' includes mothers or carers who make the informed decision to provide infant formula to their infants.*

Article 2 Scope of Code

This Code applies to the marketing in New Zealand of infant formula as suitable to provide the sole source of nourishment for an infant or replace part of a breastfeed. It also applies to quality and availability and to information concerning its use. Follow-on formula for infants over six months of age, is excluded from the provisions of the NZIFMA Code of Practice.

Article 3 Definitions

For the purposes of the NZIFMA 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 NZIFMA companies on the internet are excluded from this definition.

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.

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 whether professional or non-professional, including pharmacists, voluntary unpaid workers and those providing information to pregnant women and mothers.

Infant A person under the age of 12 months.

Infant Formula A product represented as a breast-milk substitute for infants and which satisfies the nutritional requirements of infants aged from birth up to four to six months. (Food Standards Australia New Zealand – Infant Formula Standard 2.9.1).

<i>Labelling</i>	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
<i>Marketer</i>	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.
<i>Marketing</i>	Product promotion, distribution, selling, advertising, product public relations and information services.
<i>Marketing Personnel</i>	Any persons whose functions involve the marketing of a product or products coming within the scope of this Code.
<i>Sample</i>	A single package or small quantity of infant formula provided without cost to the recipient.
<i>Supplies</i>	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 be in conformity with 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 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 NZIFMA 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 NZIFMA will inform retailers of the provisions of the NZIFMA Code of Practice. Retailer advertisements and the in-store promotion of infant formula products should be limited to product names, price and price savings.

5.3 NZIFMA 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 published by or under the local control of NZIFMA companies through the electronic media and accessible to consumers as well as health practitioners should be in accordance with the letter and the spirit of the NZIFMA Code.

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 Clause 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 NZIFMA 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, other than in circumstances of emergency relief or poverty. The donated supplies may be given but only under the following conditions:

- 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.

6.6 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.

6.7 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

7.1 Information provided by marketers to health workers 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 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, should be provided only for the purposes of professional evaluation and research, or for the education of mothers who have made the informed decision to provide infant formula to their infants.

Article 8 Persons engaged in marketing

8.1 Marketers should inform all marketing personnel of the provisions of the NZIFMA Code of Practice and of their responsibilities under it.

8.2 Marketing personnel should not perform educational functions about infant formula to pregnant women or mothers of infants, unless requested to do so by and under the supervision of the health worker.

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 NZIFMA Code of Practice.

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.

9.5 Specialised infant formula for metabolic disorders are exempt from the provisions under Article 9.2 of the NZFIMA Code of Practice.

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 NZIFMA shall be responsible for monitoring the provisions of the NZIFMA Code of Practice.

11.2 All persons concerned in any way with the marketing of infant formula should cooperate with the NZIFMA in order to ensure that the provisions of the NZIFMA Code of Practice are applied as effectively as possible.

Article 12 Complaints Process

12.1 Any complaints about possible contraventions of the NZIFMA Code of Practice should be made in writing and sent to Complaints under NZ WHO Code, Population Health Directorate, Ministry of Health, P.O. Box 5013, Wellington. The Ministry will forward the complaint to the Executive Director of the NZIFMA if it relates to a possible breach of the NZIFMA Code of Practice by an NZIFMA company. The NZIFMA will seek comment on the complaint from the marketer.

12.2 The marketer will reply and NZIFMA will notify the Ministry of the explanation within twenty days of any complaint received. If the issue is not resolved to the complainant's satisfaction, it will be submitted to the compliance panel to consider.

12.3 The panel is convened up to three times a year if necessary to consider the complaints.

12.4 Either party is able to appeal a decision of the compliance panel under certain circumstances. An adjudicator will make a decision on an appeal. The adjudicator's decision is final and binding.

12.5 All parties connected with any complaint will be notified immediately of the outcome of the compliance panel's decision and, if necessary, the appeal adjudicator's decision.

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To obtain copies of the Ministry of Health publication *Implementing and Monitoring the International Code of Marketing of Breast-milk Substitutes in New Zealand: The Code in New Zealand*, you can print a copy of the document from the Ministry website www.moh.govt.nz or order a copy from:

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