



Working within the Code

**HSE Policy on the Marketing of
Breast Milk Substitutes**

A guide for staff



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Working within the Code – A guide for staff

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Foreword

We welcome the implementation of the *HSE Policy on the Marketing of Breast Milk Substitutes*. The policy can be accessed at www.hse.ie/nhcp.

Breastfeeding is the global standard for optimum nutrition and health for babies and young children. The evidence for the importance of breastfeeding for child and maternal life-long health is stronger than ever. It is important for normal growth and development; it's a baby's first vaccine and strengthens bonding and nurturing between mother and infant.

The World Health Assembly (WHA), the governing forum of the World Health Organization (WHO), adopted the *International Code of Marketing of Breast-milk Substitutes* (known as the Code) in 1981 as a minimum requirement to protect and promote appropriate infant and young child feeding. The code is a set of recommendations to regulate the marketing of breast milk substitutes, feeding bottles and teats. The code aims to stop the aggressive and inappropriate marketing of breast milk substitutes.

Aggressive marketing of breast milk substitutes remains a major structural factor threatening the enabling environment of breastfeeding. Clear evidence of a negative effect on infant and maternal health and rates of breastfeeding is found when breast milk substitutes are marketed inappropriately⁽¹⁾. The HSE supports the recommendations in the code that all parents, whichever way they feed their baby, should have access to accurate and effective information free from the influence of marketing campaigns that are designed to protect profits rather than families and babies.

The COVID-19 pandemic has highlighted the importance of protecting optimal nutrition, including breastfeeding, to improve child health. The HSE and Royal College of Physicians of Ireland⁽²⁾ advise that there is no increased risk to infants contracting COVID 19 due to breastfeeding. In contrast, there is evidence of exploitation of fears around contagion and increased intensification of marketing practices, particularly on social media, since the start of the pandemic^(3, 4). In this context, action to ensure families and healthcare staff are protected has never been greater.

The HSE policy and this accompanying guide for HSE staff outlines how each of us working in the public health service can reflect on our practice to ensure that we do not undermine breastfeeding and how we can protect ourselves from conflict of interests and take active measures to eliminate the advertising of breast milk substitutes within the HSE, within our workforce and HSE facilities.

We would like to thank the National Breastfeeding Implementation Group for developing and supporting the implementation of this health and wellbeing policy and guide for staff. We would like to acknowledge the contributions of the many staff members across the health service and voluntary sector who engaged in the consultation process and provided valued input and information contributing to the formation of the policy and this guide for staff on working within the Code.

Eliminating marketing practices across our public health services is another important step for ensuring all children, regardless of feeding method, get the best possible start in life and for promoting, supporting and protecting breastfeeding in Ireland.



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Acknowledgement

The National Breastfeeding Implementation Group wishes to acknowledge the generous contribution of the UNICEF UK Baby Friendly Initiative in granting permission to replicate parts of the document *Working within the International Code of Marketing of Breast-Milk Substitutes - A Guide for Health Workers* for health service staff in Ireland.

What is the *HSE Policy on the Marketing of Breast Milk Substitutes*?

The *HSE Policy on the Marketing of Breast-Milk Substitutes* requires that all services comply with the International Code of Marketing of Breast-Milk Substitutes developed by the World Health Organisation. The purpose of this Code is to restrict the influence of commercial interests related to infant feeding.

This means working to ensure that there is **no advertising of any of the following to mothers and their families:**

- **formula milks**
- **baby foods marketed for use before 6 months (e.g. cereals, baby teas, juices)**
- **bottles**
- **teats**
- **soothers**

(Further detail on the Code and a full definition of breast milk substitutes is available in Appendix A).

The Code does not in any way prohibit the provision of factual information about bottle feeding or introducing solid food, or require that mothers who bottle feed be denied information or care. It is intended to ensure that all parents, whichever way they feed their baby, have access to accurate and effective information free from the influence of marketing campaigns designed to protect profits rather than parents and babies.

Companies use a variety of marketing techniques to grow their markets, including product diversification, cross-promotion, digital marketing, and health professional co-optation⁽⁵⁾. Healthcare workers are an ideal resource for these companies. A healthcare worker under this policy is any person working or volunteering in the public or private healthcare system in Ireland. This can include healthcare professionals, administrative staff or housekeeping staff.

The Code helps to realise babies' basic human rights in relation to their right to life, survival and development and has their best interests as primary as set out in the United Nations Convention on the Rights of the Child



Which companies does the policy refer to?

Any company which manufactures or distributes formula milk, baby foods marketed for use before 6 months, bottles, teats or soothers. (See appendix B for names of the formula milks available in Ireland and their associated parent company).

Why are this policy and the Code needed?

The HSE wants to ensure that parents have **factual unbiased information** when it comes to their child's nutrition by eliminating inappropriate advertising of breast milk substitute products.

Good sources of factual unbiased information about infant feeding:

- www.hse.ie/mychild
- www.safefood.ie

Global market for breast milk substitutes was forecast to reach US\$70.7 billion by 2019⁽¹⁾.

Marketing has been proven to encourage formula consumption⁽⁶⁾ and sales are increasing 8% year-on-year⁽¹⁾. Companies spend this money because advertising works. None of us are immune to the influence of advertising.

Advertising tactics can be obvious or they can be subtle. Companies cannot explicitly advertise infant formula. This is why they use creative and indirect methods to reach new parents. This can be through healthcare workers who engage with new parents, by providing them with branded/unbranded materials or building relationships to encourage positive views of the brand and product.

Offering **gifts, lunches, educational opportunities** or **opportunities to speak** at events, they are subtly encouraging you to feel positive towards their brand through feelings of gratitude and/or obligation.

Offering **pens, diary covers, obstetric wheels** etc. for use in front of the public and other staff, is designed to trigger brand recognition.



These companies are intending to **exploit the trust that parents feel for health workers** – if you imply that you like a particular brand, parents will likely feel more positive towards it.

“This implication of endorsement is misleading to parents and this constant subtle advertising of formula milks and related products undermines any attempts to normalise breastfeeding within our culture”

(UNICEF UK, 2019)

Increasing profit is at the heart of all company actions. Producers of infant formula are commercial companies; their objective is to increase purchasing of their product, even when this may not be evident, such as at educational or other events.

Actions by these companies can undermine breastfeeding and mislead parents who bottle feed about what milk to use. For example, it is not necessary for babies receiving infant formula to switch to ‘follow-on milk’ at 6 months but advertising has misled some parents into thinking it is⁽¹²⁾.

How do regulations and Irish legislation align with the Code?

The EU has set out rules regarding composition, labelling and advertising of infant formulae. The EU regulations (and Irish law) are not as robust as the International Code of Marketing and its subsequent resolutions, meaning companies can still engage in marketing practices by finding ways around the law.

Follow-on milks – a clever marketing ploy

In Ireland, the formula industry is legally banned from marketing first infant formula. While the Code considers follow-on formula (i.e. infant formula marketed for babies over six months) as a breast milk substitute (see Appendix A for a definition), EU legislation does not. Follow-on formula was created to get around the law⁽⁷⁾. This allows the companies to advertise their brand name and logos on TV, online, in magazines and elsewhere. When people see adverts for follow-on formula, some think they are seeing adverts for infant formula⁽¹³⁾.

Under EU law, when companies provide information on nutrition and health claims for infant formula to healthcare professionals, this information must be scientific, objective and factual. The Food Safety Authority of Ireland (FSAI) has produced *Guidance For Compliance with Food Law When Communicating With Health Professionals About Infant Formula Products* (2020). You can find this and all Irish regulations regarding infant formula on www.fsai.ie

If you identify a potential breach in legislation

The FSAI enforces the legislation on infant formula and follow-on formula but not the Code. For example;

- advertising of infant formula is restricted to publications specialising in baby care and scientific publications.
- point of sale advertising, giving of samples, discount coupons, special displays or any other promotions designed to induce sales of infant formula at the retail level are prohibited.
- labelling of infant formula and follow-on formula so consumers can make a clear distinction and avoid any risk of confusion between different types of formula milks.
- donations of informational or educational equipment by manufacturers or distributors of infant formula allowed only on request by the appropriate national authority or within guidelines given by the authority. Infant formula branding not permitted on equipment.

You can report any legislative breaches to the FSAI online or by phone. Find out more on www.fsai.ie/make_a_complaint.html

If you identify an issue with advertising by infant formula companies

The Advertising Standard Authority of Ireland (ASAI) accepts complaints regarding radio, TV and online advertisements that may be misleading, inappropriate or offensive. You can make a complaint using the ASAI website: www.asai.ie/make-a-complaint/

What are companies not permitted to do under the HSE policy and the Code?

Companies are not allowed to:

1. Promote their products in hospitals, shops or to the general public.
2. Give free samples to mothers or free or subsidised supplies to hospitals or maternity wards.
3. Give gifts to healthcare workers or mothers.
4. Promote their products to healthcare workers: any information on new scientific developments must contain only scientific, objective and factual information.
5. Promote foods for babies under 6 months or drinks for babies and young children up to 3 years of age.
6. Give misleading information.
7. Have direct contact with mothers.

If you identify non-compliance with this policy, report this to your manager.

As a healthcare worker, what do you need to consider?

As a healthcare worker, it is important you make yourself familiar with this policy. This guide is intended to help you use the Code in your day-to-day work. There are various ways in which companies will attempt to promote their brand through the health service, including through services or health workers who:

- procure or distribute infant formula
- receive and/or use materials from companies
- engage with companies or are ever contacted by their representatives
- receive invites to attend or speak at study days or events sponsored by companies
- provide parents with information on infant feeding
- provide parents with any resources from commercial companies
- engage in or are associated with infant feeding research and/or research sponsored by companies.

The following sections are intended to give you an insight into the various ways in which a particular brand may get promoted to healthcare workers or to parents through health services. Please also see Appendix C for a list of “dos and don’ts” under the policy for your reference.

Procuring and distributing infant formula and teats

The HSE policy on the marketing of breast milk substitutes aims to ensure that infant formula is not marketed through health facilities, that no one particular brand of formula is favoured over another and that free samples and reduced purchase prices are not used to incentivise formula use. Healthcare professionals should make clear that there is no nutritional difference between the brands of infant formula milk, but that using a first milk for the first year is recommended. Staff should be able to answer simple questions about each brand, such as if they are suitable for vegetarians. The purchasing of non-formula branded teats is preferred within the HSE.

Avoiding cross-promotion: Products such as specialist milks and breast milk fortifier may have similar labelling and branding to breast milk substitutes, the visibility of which implies endorsement and suggests that products from this particular company are trusted by the HSE. As such, the same principles of the Code apply here: companies should not supply free or subsidised products and, if this does not interfere with clinical need, parents should be offered a choice of brands or brands should be regularly rotated so as not to imply endorsement.

Company representatives can use specialist formulas and breast milk fortifiers to circumvent restrictions on their contact with staff – they may claim that these products require them to educate other staff members beyond designated staff assigned to engage with companies. This access allows for both promotional and cross-promotional activity; healthcare professionals should be wary of marketing representatives requesting meetings to explain the nuances of specialist formulas. Such information can be cascaded via dietitians or other colleagues with appropriate expertise. Companies can be contacted with specific questions when required by appropriate HSE staff.



Receiving materials from companies

Another way for companies to advertise their brand is to have a trusted healthcare worker use their branded materials in front of the public. Companies do this by offering healthcare workers useful resources such as pens, paper pads, mouse pads, diary covers, mugs, gestation wheels, weight conversion charts and measuring tapes. Even if they offer unbranded items, a person receiving them may feel subconsciously favourable to that company, despite their best intentions.

When any externally provided product is offered for use within the HSE or for use by parents, the source of this should be established at the outset. If it is associated with any company within the scope of the Code, it should be refused.



Engaging with companies and company representatives

Company representatives are typically employed to build relationships with health workers. If companies have unrestricted access to health workers, they can amass a large network of contact details for more sophisticated and targeted marketing.

If services need information from companies, a more efficient and appropriate relationship from the health service's perspective is for a limited number of staff with appropriate expertise to engage with companies. Company representatives should always be asked to send relevant information before any meeting so that staff have a chance to review any scientific evidence presented.

Alternatively, your service can get information on formula milks and associated products by contacting a HSE dietitian, a dietitian in HSE facilities or Government-funded healthcare facilities,

or refer to the *HSE Nutrition Reference Pack for Infants* - this the primary source for information for use by healthcare professionals in community settings. This can be accessed within public health nursing and community dietetic services.

Companies must only provide you with information on formula milk and other breast milk substitutes that:

- | | |
|---|--|
| ✓ is up-to-date | ✗ does not exaggerate claims |
| ✓ is scientific | ✗ avoids superlative terms like ‘optimal’, ‘maximum’, ‘exceptional’, ‘excellent’, ‘the best’, ‘unparalleled’ |
| ✓ is accurate | ✗ avoids terms like ‘humanised’, ‘maternalised’, ‘adapted’ and ‘secure’ |
| ✓ provides clear, accessible references when referring to published studies | ✗ does not include images of infants or pictures idealising the use of formula |
| ✓ provides sufficient detail on the origin and conclusions from any unpublished data they are using | |

Study days and events sponsored by companies

“Study days no longer directly focus on breast and bottle feeding, which would arouse suspicion, but rather are specialist in nature, focusing on, for example, allergy or growth. This reassures prospective participants of their legitimacy.”

(UNICEF UK, 2019)

Sponsored study days and events are a highly effective mechanism for circumventing workplace controls on company representatives’ access to health workers. The arguments made for attending include that the topics covered are relevant and helpful to practice, that the cost of non-sponsored study days is prohibitive, and the assertion that there is no promotional element to the day, or even if there is, that the attendee will not be influenced by it. What is often missing from these arguments is evidence of a full understanding of how commercial companies operate and the real purpose of a ‘free’ study day.

At the event itself, there are opportunities for introductions, closing statements, lectures by company representatives and promotional materials that can be given to everyone who attends. There is also the opportunity to cast doubt on the evidence base for infant feeding recommendations. For example, the recommendation to introduce solid food to babies at around six months delays parents starting to buy commercial weaning foods. Any doubt that can be cast on the legitimacy of this recommendation is therefore only good for the company.

Participants are asked to register for the event, which provides the company with contact details for future promotional opportunities. Well qualified speakers are invited and these experts become a further inducement to attend and a quality assurance for participants. They also provide the

added bonus of enhancement of the company brand by association. Participants are likely to leave study days/events feeling positive towards the company. In some cases, study days may be offered through a seemingly independent third party, stressing the fact that ‘benefactors’ (i.e. the companies) have no involvement or influence on the study day but which is actually funded or owned by one of the companies.

This HSE policy requires that education events provided by the companies are not held on HSE facilities’ premises, HSE job titles are not to be used to advertise events and staff should not attend events during their working time. Training on the Code and how it affects HSE staff is available via the breastfeeding eLearning programme on HSELand.



When considering attending or speaking at an event or study day sponsored by or associated with a company, ask yourself:

- Is your attendance really necessary?
- Is it possible your name or image (if they take photos/videos of event) will be used to enhance the name and reputation of the company?
- Are you attending during working hours?
- Does speaking/attending cause a conflict of interest?
- Is it compatible with the DOH's and your professional body's Code of Conduct and responsibilities to implement best practice?
- Are there other opportunities to update your knowledge or showcase your work, e.g., through publications or study days/events held by organisations independent of infant formula company funding?
- How will your attendance reflect on the HSE and its values?
- What impact would attending have on families you serve?

Giving parents infant feeding information

The companies provide a plethora of education and 'support' for pregnant women, parents and carers, from leaflets and telephone helplines to smartphone apps and websites. This HSE policy recommends that none of these promotional products are ever offered or recommended to parents.

As these companies invest significant money in activities to promote formula feeding, it is important for the health service to give parents objective, accurate and consistent information on the benefits of breastfeeding.



Parents who are formula feeding should be given impartial, factual information on formulas, without endorsing a particular brand or feeding product over others (unless there is a clinical indication for this).

The **HSE's mychild.ie website and publications** provide evidence-based information on breast and formula feeding for parents. A new mychild.ie pregnancy and early childhood email support journey is in development. You can also access information on infant feeding from:

- HSE booklet *Breastfeeding: a good start in life* - available from www.healthpromotion.ie
- www.mychild.ie/breastfeeding
- HSE books for parents - *My Pregnancy, My Child: 0 to 2 years* and *My Child: 2 to 5 years* – available at www.mychild.ie/books
- *How to prepare your baby's bottle* booklet available at www.safefood.ie
- Information on *Using Expressed Breast Milk or Infant Formula Safely* – available at www.fsai.ie
- HSELand – e-based training healthcare professionals on formula feeding
- *HSE Nutrition Reference Pack for Health Care Professionals*
- The Unicef UK Baby Friendly Initiative available at www.unicef.org.uk
- www.lalecheleagueireland.com
- www.cuidiu.ie

Information provided for parents or staff which does not appear promotional

Companies may offer anything from unbranded diary covers, to teaching packs, to websites of information that appear to have no promotional element at all. It is important to consider the true purpose of the distribution of such 'gifts'. Gratitude and obligation are common reactions to being given a gift and such emotions can be a good basis for future contact and relationship building. Providing something useful is a good way of getting the all-important contact details of parents or health workers who work with parents. These contact details can then be used for more sophisticated and targeted marketing.

Initially, health professionals may review these for inaccurate or promotional information before declaring them 'clean' and suitable for use. However, websites and leaflets can also easily be changed. Changes can then be made that go undetected for long periods of time as the information continues to be distributed or recommended by health workers.



Advertising via sampling companies

In some areas, advertising to pregnant women and new parents via commercial companies that provide information, display screens, bags, books, coupons, sample goods and baby boxes is facilitated. These materials also often try to persuade parents to visit websites or sign up to baby clubs and newsletters. Care should be taken when signing contracts or agreeing to distribute these materials to ensure that mothers' details will not be given or sold to companies that come under the scope of the Code. Regular checks should therefore be made of all the forms of media promoted to ensure that they comply with the Code. If your service facilitates advertising to pregnant women and new mothers in this way, it is important that all advertising complies with the Code. Appendix D provides a guide on what is acceptable.

Research activities and funding by companies

Given the health benefits of breastfeeding for babies and mothers, the health service has a responsibility to promote, protect and support breastfeeding. Additionally, the health service welcomes research that can identify ways to improve the care, health and wellbeing of children and parents. However, it is important that any research funded by these companies or on the subject of infant feeding does not compromise best practice or the care given to parents and children. The *HSE National Infant Feeding Policy for Maternity and Neonatal Services (2019)* and the *HSE National Infant Feeding Policy for CHOs and PCTs (2018)* outline best practice for supporting infant feeding in the health service.

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Appendix A:

Details on the *International Code of Marketing of Breast-Milk Substitutes*

The *International Code of Marketing of Breast-Milk Substitutes*

The Code is a set of recommendations to regulate the marketing of breast milk substitutes, feeding bottles and teats. The Code aims to stop the aggressive and inappropriate marketing of breast milk substitutes. The World Health Assembly (WHA) adopted the *International Code of Marketing of Breast-Milk Substitutes* in 1981 as a minimum requirement to protect and promote appropriate infant and young child feeding. The WHA is the governing forum of the World Health Organization (WHO).

The Code advocates that babies be breastfed. If babies are not breastfed, for whatever reason, the Code also advocates that they be fed safely on the best available nutritional alternative. Breast milk substitutes should be available when needed but not be promoted.

You can read the full Code here: <http://bit.ly/1O9Syh1> or go to the Nutrition_publications section of www.who.int/. A useful summary of all the subsequent resolutions can be found here: <http://www.infactcanada.ca/wha-resolutions.html>

Definition of a breast milk substitute (WHO 2017)

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

This includes:

- infant formula including special formula for specific medical and nutritional needs
- follow-on formula and growing up milks up to the age of 3 years
- baby foods marketed for use before 6 months, e.g. cereals, baby teas, juices
- feeding bottles, teats and soothers.

Appendix B:

Formula milks available in Ireland and their associated parent company

Staff should familiarise themselves with the names of the formula milk products available for infants and young children available in Ireland and their associated parent company so that when you receive information, materials or invitations you are clear about how they are connected with the marketing of infant formula.

Formula brand	Parent company	Formula brand	Parent company
Aptamil Nutricia Cow & Gate Infatrini Neocate	Danone	Enfamil Pregestimil Nutramigen Puramino	Mead Johnson
Similac	Abbott	SMA	Nestlé
Nannycare	Vitacare	Kabrita	Hyproca Nutrition Europe
Holle	Holle	Hipp organic	Hipp
Kendamil	Kendal Nutricare		

This list is accurate as of September 2021

Appendix C:

“Dos and Don’ts” of the HSE Policy on the Marketing of Breast-Milk Substitutes

HSE Policy on the Marketing of Breast milk Substitutes	
Procuring and distributing infant formula	
<ul style="list-style-type: none"> ✓ Store formula stocks securely out of view and ensure they are only accessible by staff. 	<ul style="list-style-type: none"> ✗ Do not accept donations of free or subsidised supplies of infant formula or other products from these companies
<ul style="list-style-type: none"> ✓ Obtain formula for infants with medical reasons through normal procurement channels. 	<ul style="list-style-type: none"> ✗ Do not give bottles of ready-to-feed formula and teats to mothers leaving hospital.
<ul style="list-style-type: none"> ✓ The procurement of non-formula branded teats is preferred. 	
Receiving materials from companies	
<ul style="list-style-type: none"> ✓ Discard any branded materials currently used or available for the public to see or cover all logos and identifying information until you source an alternative. 	<ul style="list-style-type: none"> ✗ Do not accept gifts, hospitality of any kind, or personal samples from these companies.
	<ul style="list-style-type: none"> ✗ Do not accept any branded or unbranded materials from these companies or use them for work.
Engaging with companies and company representatives	
<ul style="list-style-type: none"> ✓ Only relevant staff should engage with companies regarding information on breast milk substitutes or new products (e.g. Consultant Neonatologists, Consultant Paediatricians, HSE Dietitians, Dietitians in HSE facilities and Government-funded healthcare facilities, Directors of Nursing, Directors of Midwifery, and Directors of Public Health Nursing). 	<ul style="list-style-type: none"> ✗ Do not accept cold calls from company representatives.
<ul style="list-style-type: none"> ✓ Report breaches of the legislation on marketing breast milk substitutes to the FSAI if you receive information from companies which: <ul style="list-style-type: none"> ○ do not back up their claims with accurate, up-to-date, scientific, and accessible evidence, or ○ uses exaggerated, superlative or misleading language, e.g. ‘optimal’, or ‘the best’ (see page 9) www.fsai.ie/make_a_complaint.html 	

Study days and events sponsored by companies	
<p>✓ Consider how appropriate it is for you to attend or speak at this study day or event using the checklist on page 10.</p>	<p>✗ You are not permitted to host company-sponsored events on HSE premises.</p>
	<p>✗ Do not facilitate advertising or promotion of sponsored events and study days.</p>
	<p>✗ You are not permitted to use the HSE's name, or the name of the hospital or institution where you work, or your HSE staff job title in association with your role in company-sponsored events or study days.</p>
	<p>✗ If you receive any contribution from a company or if a contribution is accepted on your behalf, you must disclose this to your management.</p>

HSE Policy on the Marketing of Breast Milk Substitutes

Giving parents infant feeding information

<p>✓ If it is essential in individual circumstances to give a family specific instructional material from a company on the use of a specialised feeding product, seek approval from management as appropriate.</p>	<p>✗ Do not promote any brand of formula or feeding equipment.</p>
<p>✓ Only use child health information provided by the HSE, Government agencies and Government-funded agencies, and other reputable sources approved by the HSE.</p>	<p>✗ Do not permit or facilitate any contact (direct or indirect such as through information materials) between company employees and pregnant women, mothers or members of their families.</p>
<p>✓ If developing or using information and educational materials on infant feeding, refer to sections 2.7.12 to 2.7.16 of the HSE policy for guidance on what should be included.</p>	

Giving materials to parents

<p>✓ All advertising by <i>any</i> commercial company to pregnant women and new mothers must comply with the code. Please see a guide in Appendix D on what is acceptable and unacceptable. We suggest regular checks in each HSE premises to ensure that it complies with this guidance.</p>	<p>✗ It is recommended you do not display or give parents any materials provided by companies, e.g. those promoting baby clubs, websites, care lines, phone apps, weaning information, recipe books and parent handbooks.</p>
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Research activities and funding by companies

<p>✓ If you are associated in any way with research on infant feeding, you are required to consider all elements of this policy, the <i>WHO Code of Marketing of Breast-Milk Substitutes</i> and its relevant subsequent WHA resolutions, EU and Irish regulations on infant formula and HSE Infant Feeding and Breastfeeding Policies.</p>	<p>✗ You are not permitted to offer participants in research studies any products or gifts from infant formula companies.</p>
<p>✓ You must disclose any contribution from a company towards fellowships, research grants, attendance at professional conferences etc. to your management.</p>	<p>In line with HSE policies, research proposals should not:</p> <ul style="list-style-type: none"> ✗ exclude mothers and babies from care practices outlined in HSE infant feeding policies ✗ require women to state a feeding intention in the antenatal period ✗ categorise breastfeeding mothers whose babies require a supplement of infant formula for clinical reasons or who request a supplement of infant formula as “formula feeding” or “partially breastfeeding”. Instead, these mothers should be given every help to breastfeed fully.
<p>✓ If you receive funding from these companies, you must include a declaration on all relevant documentation relating to conflict of interest including research ethics submissions, submissions for conferences and publications, etc.</p>	

Appendix D:

Guidelines for compliance with advertising in WHO/UNICEF baby friendly facilities

Hospital and community services working to meet standards for the Baby Friendly Initiative in Ireland must adhere to the International Code of Marketing of Breast milk Substitutes. This means working to ensure that there is no advertising of formula milk, bottles, teats or solid food for babies under six months old to mothers and their families.

The following guidelines should be used when considering what can be allowed to be advertised. These have been adapted from UNICEF UK *Working within the Code of Marketing of Breast-milk Substitutes* (2019).

1. Advertisements for infant formula, follow-on formula, baby milks, juices and teas, feeding bottles, teats, dummies and nipple shields are not acceptable.
2. No generic 'company level' advertising from Cow & Gate, Aptamil, SMA, Nestlé, Nutricia, Danone, Hipp, Nannycare, Mead Johnson, Abbott or any other company that markets infant milks in Ireland.
3. Pharmacy chains and baby shops: any advertisements from these companies must have nothing to do with feeding.
4. Complementary/weaning foods: no samples are acceptable. Advertising may be acceptable but any advert should be crystal clear in the text or headline that the addition of solid foods to the diet is something that begins at around six months of age. No text, image or headline should suggest use before six months. Adverts should not contain any cross promotion to promote breast milk substitutes indirectly via the promotion of complementary/weaning foods for infants and young children.
5. Breast pumps: advertising is acceptable (but see point 1). Adverts should not include negative imagery of breastfeeding. Adverts for breast pumps that also promote a company's bottles and/or teats are not acceptable. Companies that produce bottles/teats as well as breast pumps should make no reference to them by text, audio or image in an advert for breast pumps. For further information, see *UNICEF UK INFOSHEET: Will working with breast pump companies affect our baby friendly status?*
6. Breast pads: advertising is acceptable, provided that the copy is not negative towards breastfeeding.
7. Nipple creams, nipple sprays and so on: advertising is not normally acceptable. Adverts for some products in this area may be appropriate where there is clinical evidence that they do not interfere with successful breastfeeding. The text should:
 - never be negative in any way towards breastfeeding;
 - not claim that the product can prevent sore or cracked nipples;
 - clearly state that correct positioning and attachment is the way to prevent and cure sore or cracked nipples;

- only make claims that have been clinically proven in relation to the product's ability to soothe sore nipples or aid moist wound healing;
 - not recommend routine use.
8. Website addresses: website addresses may appear on adverts but should be given no more prominence than other contact details (address, phone number, etc.). The purpose of the advert should not be to drive people to the website if this contains advertisements for formula milk, bottles, teats or dummies, or if it contains inaccurate or misleading information related to infant feeding.
 9. Any advert aimed at the mother should not imply that she needs to consume any specific food or drink in order to breastfeed.
 10. Other adverts should not be negative towards breastfeeding or present bottle feeding as the norm for all babies. Examples of offending adverts in this area would be those which use bottles, dummies or infant formula in illustrations to depict a 'typical' baby's environment.
 11. Any editorial should be accurate and positive about breastfeeding and reflect the principles of the above guidelines. It is recommended that the editorial does not contradict Baby Friendly principles such as skin-to-skin contact after delivery, keeping baby close and responsive feeding.

Ask our
breastfeeding
expert



Have a question about breastfeeding?

Talk with lactation consultants by live chat or email on the HSE's online breastfeeding service available at

mychild.ie

Every drop of breast milk makes a difference

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