



STRONGER WITH BREASTMILK ONLY

no water until 6 months
for a healthier baby

Enforce Regulations to Protect Breastfeeding

The *Stronger With Breastmilk Only* campaign promotes giving babies breastmilk only, on demand (day and night), and stopping the practice of giving water (and other liquids and foods), from the moment of birth through the first six months of life. It aims for all countries in West and Central Africa to achieve the global exclusive breastfeeding target of 50 per cent by 2025.

Stronger With Breastmilk Only echoes the call to action of the Global Breastfeeding Collective, a partnership of more than 20 international organizations, with the goal of increasing investment and policy change to support breastfeeding worldwide. This goal requires advocacy at the global, national and sub-national levels in order to meet the global breastfeeding target.

INTRODUCTION

The scientific evidence is clear: breastfeeding gives children the best start in life. It also contributes to mothers' health. Exclusive breastfeeding, meaning giving infants breastmilk only on demand (day and night) from the moment of birth and for the first six months of life, provides babies with all the water and food they need and protects them against illnesses and malnutrition. Although most women in West and Central Africa breastfeed their babies, only three out of 10 of infants receive only breastmilk in the first six months of life. Seven out of 10 are given other liquids and foods. In most cases, water is given.

The International Code of Marketing of Breastmilk Substitutes (the Code) and relevant World Health Assembly (WHA) resolutions were adopted to regulate the aggressive marketing of products promoted as replacements to breastmilk, feeding bottles and teats. Breastmilk substitutes (BMS) include infant formula, follow-up formula and growing-up milks for infants and children up to

36 months of age. It is also prohibited to promote other foods or drinks, such as bottled water, when represented as suitable for feeding an infant under the age of six months.

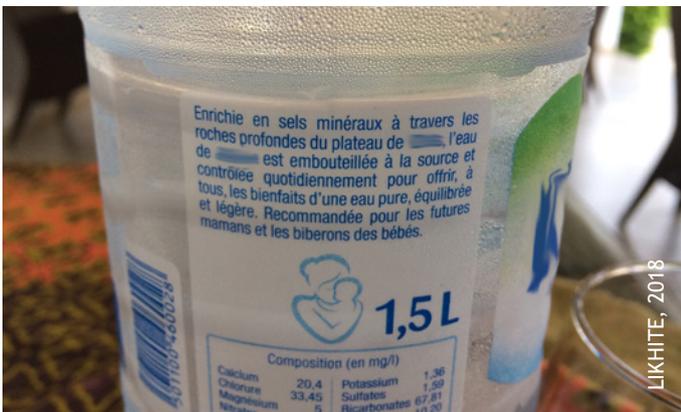
THE PROBLEM

Unethical marketing of BMS, bottles and teats can reduce breastfeeding rates, putting the health of children at risk and resulting in unnecessary costs for families and countries. Despite the WHA's prohibition on promotion of all BMS, manufacturers spend millions of dollars annually to promote their products. These efforts are highly successful, and the sales of BMS are projected to increase. Growth is expected to be highest in Africa, the Middle East and Asia.

Misinformation about breastfeeding, together with manufacturers' claims about their products' health benefits, can cause confusion among health workers, mothers and families about feeding infants and young children. A 2014 study in Senegal found

that nearly half of mothers reported having heard, seen or read commercial promotions for breastmilk substitutes. Studies have found that mothers who receive free formula samples when discharged from the hospital are less likely to breastfeed as recommended.

The promotion of bottled water aimed at babies is especially problematic in the region given the propensity to give water to babies. Such promotional messages compete directly with the public health messages for giving infants breastmilk only – no water, other liquids or foods, in the first six months of life.



For the Code and relevant WHA resolutions to be effective, governments must translate its provisions into national laws, regulations or other legal measures and actively enforce their implementation. As of 2018, worldwide, only 66 countries have implemented all or many of the Code's provisions.

In West and Central Africa, among the 24 countries:

- Eleven countries have legal measures that implement most or many of the provisions of the International Code. Most of these decrees were adopted in the 1990s and need to be updated. Four of these countries are revising their legal measures. However, none are actively enforcing or monitoring violations of their laws.
- Three countries have implemented only a few provisions of the Code.
- Ten countries have not implemented the Code. However, seven are in the process of advocating for or developing such measures.

THE SOLUTION

Strong and well-enforced national legislation can reduce the unethical marketing of BMS, including water marketed for infants, and ensure support for breastfeeding. The legislation must include:

- All the provisions of the Code as well as the relevant WHA resolutions.
- All BMS in accordance with the WHO guidance.
- All foods and drinks, including bottled water that is promoted as suitable for infants younger than six months.

Regulating the marketing of BMS ensures that:

- Mothers and families receive unbiased information about the healthiest way to feed their infants and young children.
- Health facilities and personnel are mandated to decline gifts from formula companies and to not promote BMS, bottles and teats.
- Health providers should understand these responsibilities and be equipped with the knowledge and skills to support recommended breastfeeding practices, including minimizing harm among children who require BMS for medical reasons or when a mother may choose not to breastfeed.

It is essential that national legislation, once adopted, is enforced. National measures must include effective sanctions as well as establish mechanisms to ensure routine monitoring for violations.

It is equally important to develop tools and strategies for increasing awareness among government officials, health workers and families regarding the Code and related national legislation. While companies that market BMS are keenly aware of the Code and its provisions, manufacturers and distributors of bottled water may need to be informed.

ACT NOW!

Health leaders, policy makers, programme managers and health care workers all have a role to play in improving health outcomes by strengthening, monitoring and enforcing national Code legislation. Strong regulations on the marketing of BMS ensure that parents can make informed decisions about how to feed their children so that children receive the full benefits of breastfeeding.



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TOOLS AND RESOURCES

ON PROTECTING INFORMED CHOICE AND OPTIMAL BREASTFEEDING PRACTICES BY ADOPTING THE FULL PROVISIONS OF THE CODE INTO NATIONAL LEGISLATION:

UNICEF, 'Advocacy Brief: Breastfeeding and the International Code of Marketing of Breastmilk Substitutes':

This brief provides an overview of the Code and its role in protecting babies and parents.

WHO, UNICEF and IBFAN, 'Marketing of Breast-milk Substitutes: National Implementation of the International Code, Status Report 2018':

This report provides information on the status of implementation of the Code in and by countries. It describes the extent to which Code provisions have been incorporated in national legal measures.

Global Breastfeeding Collective, 'International Code Toolkit':

This set of tools highlights the importance of restricting the promotion of breastmilk substitutes through strong laws and policy.

IBFAN-ICDC, 'Breaking the Rules, Stretching Rules: Report 2017':

This report provides a global compilation of marketing practices that violate the Code.

ON MONITORING AND ENFORCEMENT TOOLS AND PROTOCOLS THAT CAN ENSURE STRONG IMPLEMENTATION OF THE CODE:

WHO, 'Netcode Toolkit':

This set of resources provides detailed guidance on the development of a monitoring framework, protocols, and training materials for monitoring of the Code and relevant WHA resolutions, as well as the formulation, monitoring and enforcement of national legislation based on the Code.

ON IMPROVING KNOWLEDGE ABOUT THE CODE:

WHO, 'Frequently Asked Questions on the Code':

This user-friendly guide provides easy to understand questions about the provisions of the Code and helps understand its importance, how it applies in special circumstances and how to implement it.

UNICEF, 'Introductory Online Course on the Code':

This interactive course teaches policy makers, legislators, health practitioners, civil society partners and others about the Code and its specific provisions using videos, supplementary reading and module tests. Users can receive a certificate of completion.

ADDITIONAL TOOLS FOR CREATING AN ADVOCACY STRATEGY:

UNICEF, 'UNICEF Advocacy Toolkit: A guide to influencing decisions that improve children's lives':

This toolkit provides practical tools for country leaders for building and carrying out an advocacy strategy.

Alive & Thrive, 'Guide for Public Health Advocacy: Tools and Lessons Learned from Successful IYCF Advocacy in Southeast Asia':

This guide can be used to develop a nutrition advocacy strategy through a four-step process for policy change.

Global Breastfeeding Collective, 'Global Breastfeeding Scorecard, 2019 Increasing Commitment to Breastfeeding Through Funding and Improved Policies and Programmes':

This tool reviews national progress in implementing key breastfeeding interventions to encourage countries to support breastfeeding.



**STRONGER WITH
BREASTMILK ONLY**

no water until 6 months
for a healthier baby

Protect, promote and support giving babies breastmilk
only, no water for the first six months of life in
West And Central Africa

Consult the Stronger With Breastmilk Only Reference List for more information



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