



# IMPLEMENTING THE NATIONAL REGULATIONS ON THE MARKETING OF BREASTMILK SUBSTITUTES (BMS) AND RELATED PRODUCTS: THE ROLE OF RELIGIOUS & COMMUNITY LEADERS

## PREAMBLE:

Breastfeeding is one of the most cost-effective and impactful interventions for reducing malnutrition and under-five mortality—both of which are very high in Nigeria. **The World Health Organization (WHO) recommends exclusive breastfeeding for the first six months of a child's life, along with continued breastfeeding up to two years of age and beyond.** Research shows that infants under six months who are not breastfed are three to four times more likely to die than those who receive any breast milk.

Improving breastfeeding practices could save approximately 100,000 lives in Nigeria each year and add \$150 million (USD) to Nigeria's economy each year due to increased productivity. Breastfeeding protects children from infectious and chronic diseases, increases cognitive development, and lowers healthcare costs for families and societies. Everyone benefits when mothers breastfeed. Yet despite its unparalleled benefits, mothers and families face significant commercial pressures that undermine breastfeeding.

In 1981, the World Health Assembly (WHA) adopted a resolution for member countries to implement a Code of Marketing of Breast Milk Substitutes (The Code) in response to concerns from member states about a rise in infant mortality as a result of promotion of infant formula. The Code is aimed at protecting and promoting optimal infant and young child feeding by controlling inappropriate marketing of breast milk substitutes (BMS). The Code covers products such as infant formula, follow-on formula, growing-up milk, and other related products. Nigeria was a signatory to the adoption of the Code in 1981 and has enacted legislation and developed National Regulations in line with the provisions of the Code.

## PROVISIONS OF THE CODE/ NATIONAL REGULATIONS

- No advertising of BMS and related products such as feeding bottles, teats, pacifiers, etc. to the public
- No free samples of BMS and related products to pregnant women, new mothers, or families
- No promotion of BMS and related products in healthcare facilities or by health professionals, including the distribution of free or low-cost supplies
- No company sales representatives to advise mothers
- No gifts or personal samples to health workers
- No words or pictures idealising artificial feeding, or pictures of infants on labels of infant milk containers
- Information to health workers should be scientific and factual
- All information on artificial infant feeding, including that on labels, should explain the benefits of breastfeeding and the costs and hazards associated with artificial feeding
- Unsuitable products, such as sweetened condensed milk, should not be promoted for babies
- Manufacturers and distributors should comply with the Code's provisions even if countries have not adopted laws or other measures



## BENEFITS OF BREASTFEEDING

### To the baby:

- Prevents malnutrition and contains optimal nutrients for growth and development
- Stimulates optimal intellectual development, improved vision, and general health
- Protects against diseases and health issues

### To the mother:

- Aids in quick recovery from childbirth and prevents postpartum bleeding
- Helps extend the time between pregnancies
- Fights against iron deficiency, breast and ovarian cancers, osteoporosis, and other diseases

### To the community:

- Healthier children make a healthier community
- Fewer materials used in breast milk substitute production means a cleaner environment
- Lower cost to mothers and families, lower national health costs needed long-term
- Increased community and national development



## RELIGIOUS AND COMMUNITY LEADERS HAVE A ROLE TO PLAY TO PROTECT BREASTFEEDING

### Religious and community leaders must:

- Learn to identify inappropriate marketing activities of infant food manufacturers and their marketers, and report any Code violations to NAFDAC
- Not allow breast milk substitute advertisements in your communities, churches, or mosques
- Identify infant and young child feeding volunteer groups in your communities to obtain more information on best feeding practices
- Support mothers so they are able to practice exclusive breastfeeding and optimal nutrition for their children
- Speak with families about the importance of introducing nutritious complementary foods while continuing breastfeeding for two years or beyond
- Discuss taboos, beliefs, and harmful traditional practices that hinder breastfeeding in your community
- Encourage fathers and other family members to support exclusive breastfeeding

## WHAT ARE THE MAJOR OBSTACLES TO BREASTFEEDING IN NIGERIA?

- Cultural practices and tradition including:
  - Throwing away the colostrum (the yellowish first breast milk)
  - Giving the baby water
- Lack of community support for breastfeeding mothers
- Inappropriate and aggressive marketing of breast milk substitutes and foods for infants below three years, by the infant food manufacturers and their marketers
- Low awareness of Nigerian law about breast milk substitute marketing
- No coordinated community practice for monitoring and enforcing breast milk substitute marketing violations

## REPORT ALL VIOLATIONS TO NAFDAC HQ OR NEAREST OFFICE IN THE STATES:

NAFDAC Corporate Headquarters: Plot 2032 Olusegun Obasanjo Way, Zone 7, Wuse Abuja.

Website: [www.nafdac.gov.ng](http://www.nafdac.gov.ng) | Email: [nafdac@nafdac.gov.ng](mailto:nafdac@nafdac.gov.ng); [info@nafdac.gov.ng](mailto:info@nafdac.gov.ng)

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