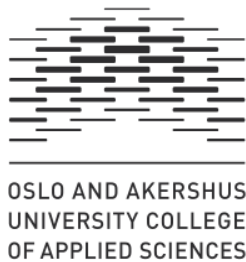


Media monitoring of breastmilk substitutes

Country report: Myanmar



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Summary

Background and aim: To promote and protect breastfeeding, the International Code of Marketing of Breastmilk Substitutes and subsequent World Health Assembly resolutions gives a set of recommendations for governments to provide information about the benefits of breastfeeding and to protect from misleading and unethical marketing of breastmilk substitutes. Manufacturers and distributors of products within the scope of the Code must be held responsible for ensuring their practices are in accord with the principles and aims of the Code. Its provisions should be seen as a minimum standard for national enforcement and legislative measures for protecting and promoting breastfeeding. To assess mass media promotion of products covered by the scope of the Code, identify where and when possible violations or circumventions are occurring, and to make recommendation to address the findings, a mass and social media scan was conducted in Myanmar.

Method: A media scan; using a set of keywords related breastmilk substitutes, of the main mass and social media channels in Myanmar were conducted for six months, from mid-March to mid-August 2015. Published, aired, and on-line materials were analyzed to assess current coverage, marketing trends and compliance with the Code.

Results: In total 2779 media clips were captured during the six-months period with a monthly average of 462. By far the largest total amount was found broadcasted through TV channels (2423). No violations of the Code in direct marketing of breastmilk substitutes for children less than 24 months, but daily advertisements for growing-up milks labeled to be suitable for children over 2 years, and weekly advertisements for milks for pregnant and lactating women circumventing the Code.

Conclusions/ Recommendations: To further strengthen national provisions implementing the Code, national laws should cover all milk products that can replace exclusive or continued breastfeeding in the child's diet, and considering including growing-up milk which serves as an engine for the baby food market and an opportunity for cross-promotion. This would also apply to milks for pregnant and lactating women. Ways to strengthen monitoring and enforcement of the Code with open channels, such as social media should be identified and taken into action.

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1 Background and aim

Alive & Thrive (A&T) is an initiative to save lives, prevent illness, and ensure healthy growth and development. Good nutrition in the first 1,000 days, from conception to two years of age, is critical to enable all children to lead healthier and more productive lives. A&T is scaling up improved infant and young child feeding and maternal nutrition through large-scale programs in several countries in Asia and Africa and through strategic technical support and the dissemination of innovations, tools, and lessons worldwide. A&T is funded by the Bill & Melinda Gates Foundation and the governments of Canada and Ireland. FHI 360 manages the initiative.

In April 2013, A&T Vietnam in coordination with the Vietnam National Assembly's Institute of Legislative Studies, Irish Aid and UNICEF, and with technical support from the European Union, the International Baby Food Action Network (IBFAN), the International Code Documentation Centre (ICDC), and the World Health Organization, organized a regional advocacy workshop, titled "Developing Stronger Policies and Laws on Infant and Young Child Feeding in the ASEAN Region and Beyond". Delegations from 13 countries convened in Hanoi to learn about the process that led to Vietnam's two major policy change successes: extending maternity leave to six months and expanding the ban on advertising of breastmilk substitutes for children under 24 months.

As a follow-up to the workshop in 2013, A&T along with UNICEF and Save the Children will provide technical assistance to seven countries, namely Cambodia, Indonesia, Lao PDR, Myanmar, Thailand, Timor Leste and Vietnam to strengthen the regional and national policy environment(s) for Infant and young child feeding (IYCF). Particular emphasis will be placed on National Codes, Maternity Entitlements and Health Systems Strengthening. An important first step in the process was to convene the seven countries in Bangkok, Thailand in March 2014 to develop country-specific roadmaps to enable policy change at national and regional levels. The roadmaps were built around the policy change process developed out of the Vietnam country experience. Country teams completed detailed national policy assessments in advance of the workshop, identified key policy priorities for a three-year period and developed roadmaps to achieve policy goals. All seven countries have indicated that national measures (laws, sub-laws or regulations) need strengthening and improved monitoring and

enforcement. To enable the above and track compliance to national measures on marketing of breastmilk substitutes in six countries (Cambodia, Indonesia, Lao PDR, Myanmar, Thailand, Timor Leste), A&T has conducted a media scan exercise. This report presents findings from Myanmar.

1.1 The International Code and the Situation in Myanmar

World Health Organization (WHO) recommends initiating breastfeeding within one hour of birth. Exclusive breastfeeding should be practiced for the first six months of the baby's life, meaning no other liquids or food than breastmilk is given. Thereafter, local, nutritious foods should be introduced while breastfeeding continues for up to two years of age or beyond [1]. Due to an overall decline in breastfeeding rates and with an aim to protect and promote breastfeeding, the World Health Assembly adopted the International Code of Marketing of Breastmilk Substitutes (the Code) in 1981. The Code sets out clear guidelines for the promotion of breastfeeding and the marketing of breastmilk substitutes [2]. In the years to follow, several WHA resolutions have clarified the Code and closed loopholes. When referring to the Code in this report, it comprises both the original Code and its subsequent resolutions.

The Code is left to individual governments to legislate and enforce, using its provisions as a minimum standard for these national efforts. In 2014, Myanmar's Food and Drug Board of Authority issued the Order of Marketing of Formulated Food for Infant and Young Child under the National Food Law. The legislation has strict guidelines on labeling, marketing, information and education, and monitoring of breastmilk substitutes confirming the importance of exclusive and continued breastfeeding [3]. The age range of infant and young children considered is 0-24 months. The use of language insinuating that breastmilk substitutes are superior to breastmilk is prohibited and guidelines to ensure appropriate labeling of age for products and warnings against the health hazards of inappropriate preparation and storage are also provided. Further, the guidelines is prohibiting all kinds of marketing of breastmilk substitutes including point-of sales advertising, incentives, sales, direct and indirect promotions and samples to mothers and families of infants and young children. In addition to that, companies are also prohibited from incentivizing marketing personnel and/or establishing sales quotas. Marketing, donating and making any kind of contribution to healthcare systems or providers is strictly prohibited. In the area of

information and education, guidelines is prohibiting manufacturers or distributors of breastmilk substitutes from communicating with healthcare providers, organizing information and education programs inside or outside the healthcare system and distributing materials through the healthcare system. Information and educational materials must include language on the value of exclusive and continued breastfeeding and the importance of introducing complementary foods at six months of age [3]. In addition to national legislation restricting the marketing activities, the Code itself states that manufactures and distributors of products within the scope of the Code, should regard themselves as responsible for making sure that their practices is in accord with the principles and aims of the Code [2].

The primary responsibility to ensure that objective and consistent information is provided regarding breastfeeding lies with the government [2]. The information should be clear on the benefits and superiority of breastfeeding; maternal nutrition and a good breastfeeding practice; the negative effect on breastfeeding of introducing partial bottle-feeding; the difficulty of reversing the decision not to breastfeed; and the proper use of formula for infants and young children where needed [2]. Governments should also take appropriate measures so that advertising or other forms of promotion to the general public of products within the scope of the Code does not occur. Only at the request and with the written approval of the appropriate authority of the government can personnel employed in marketing products within the scope of the Code be in charge of providing breastfeeding information, otherwise such practices should not be carried out. That includes that no samples of products within the scope of the Code or any gifts of articles or utensils that may promote the use of breastmilk substitutes or bottle-feeding are given. There should neither be direct or indirect contact between companies selling products covered by the Code and pregnant women or mothers of infants or young children [2].

Euromonitor International defines Myanmar as one of the markets of the future and being one of the fastest growing economies in Southeast Asia. All consumer goods categories recorded significant growth over the 2009-2013 period, with canned/preserved food and baby food as the most dynamic packaged food categories [4]. With an increasing level of industrialization, social medias is a new and dominant channel for communication, also

among pregnant and new mothers. This allows for direct contact with mothers. A variety of platforms provide opportunities to interact with the audience and also for mothers to interact with each other. Several companies have launched their own web-based communities and use them as an arena for promoting products and educating parents [5].

1.2 Aim

Monitoring of media channels is commonly done by companies or other stakeholders holding a brand name to see how their brand is presented in the media or to track their competitors. Mass media monitoring was conducted in this case with an aim to capture the advertisements of products under the scope of the Code, in addition to milk for pregnant and lactating women, in order to determine current trends in Myanmar's media landscape related to this and to assess compliance with the Code and national regulations.

The International Code of Marketing of Breastmilk Substitutes defines marketing as: product promotion, distribution, selling, advertising, product public relations, and information services. The following products are included:

Breastmilk substitutes means any food being marketed or otherwise represented as a partial or total replacement for breastmilk, whether or not suitable for that purpose. When referring to breastmilk substitutes, the following industry terms of products are considered in this study:

- **Infant formula** including milk or milk-like formulations for infants from birth with an upper age usually between 6-12 months and commonly referred to as "Stage 1". There are a variety of infant formulas available on the market, and special formulas like soy formula, lactose-free formula and therapeutic milks are also included.
- **Follow-up formula** (or follow-on formula) including milk or milk-like formulations commonly marketed for babies from 6 months of age and with an upper age usually between 12-24 months. Often called "Stage 2". As breastfeeding is recommended to continue for two years or beyond, this product, because it is meant to replace breastmilk, is always considered a breastmilk substitute.
- **Growing-up milk** (or toddler milk or formulated milk) commonly promoted for young children 1-3 years and called "Stage 3 and 4". The recommended age range overlaps with the period when young children should still be partially breastfed as continued breastfeeding is recommended for up to 2 years or beyond ("or beyond" could be interpreted to mean "up to 3 years").

Bottles and teats, which are defined as any container and a teat meant to feed infants, which include those used with breast pumps.

Milk formula for pregnant and lactating women does not come under the scope of Code, but is a product potentially undermining breastfeeding and the overall spirit of the Code. It targets pregnant and lactating mothers, and could sometimes be seen marketed as "Stage 0" with similar brand as those for breastmilk substitutes.

2 Methods

2.1 Data collection

From mid-March through mid-August 2015, an independent media agency, Sail Group of Companies, conducted a scan of the main mass media channels in the country using breastmilk substitutes, bottles and teats and milk for pregnant and lactating women as key words, as well as the main baby food industry brands identified by the media agency. Monthly category scans and by brand analysis was provided by the media agency with a summary of all media channels used in the category in each month. Translations of the most common advertisements were given. The media agency scanned two types of media: 1) mainstream media comprising broadcast, online and printed press, and 2) new media including all kinds of social media.

2.1.1 Mainstream media

Broadcast media: This category consists of materials broadcasted through TV channels. The media agency monitored the following channels in the country: Free to Air (5 channels), MRTV, MWD, MRTV4, Channel 7 and Reader's Channel and Pay TV 5 Network (8 channels), Sky Net (19 Commercial Channels), 4 digital (9 channels) and MWD digital (6 channels). Advertisements for the following brands were captured: Pediasure, Dumex and Dumex Dugro, Dutch Lady, Lactogen, Pediasure, Appeton, Similac and Moringa.

Online and printed press: Both online and printed press was monitored, including 20 daily newspapers, 170 weekly journals/magazines and 90 magazines. Advertisements for the following brands were captured: Dutch Lady, Nestle Lactogen, Pedisure, Appeton, Penguin milk powder, Premier milk powder, Morinaga, Pep milk powder, GainIQ Similac, Dumex Dugro, Annum Materna Milk Powder, Foremost and Crown.

2.1.2 New media

Facebook was the focus for the review of social media and based on the pages with the most "likes". Dumex, Premier, Aptamil and Appeton's pages were captured. This was also used as a probe to make further investigations of the Facebook pages during the time of analysis by the researchers.

2.2 Analysis

Media analysis was conducted on the media clips, relaying mostly on the English translations. Text, pictures and audiovisuals were examined. For the compliance assessment, the primary focus was to identifying violations and circumventions of national regulations and the International Code. The relevant articles in the Code considered for this study is Article 5 relating to the General Public and Mothers, and Article 8.2 addressing Persons Employed by Manufactures and Distributors [2]. All practices not directly in violation of the current regulations, but in some way going around these restrictions, are seen as circumventions.

2.3 Limitations

This study only covers mass media, and is therefore limited to promotion of breastmilk substitutes through such channels. Compliance of the Code and national regulations is therefore likewise limited to that area.

3 Results

3.1 Mainstream media

Table 1 shows the top advertisement expenditure (in USD) to breastmilk substitute brands in Myanmar. Abbott's Similiac Gain IQ has the largest expenditure with 486,460 USD followed by Pedia Sure Complete (389,711 USD), Dutch Lady (229,975) and Nestlé Lactogen Active (166,423).

Table 1. Advertisement expenditure January to July 2015, Myanmar

Brands	USD
Gain IQ Similac, GUM	486,460
Pedia Sure Complete	389,711
Dutch Lady	229,975
Nestlé Lactogen Active, GUM	166,423
Dumex Dugro Milk Powder	149,531
Abbott Nutrition Similac Gain IQ, Similac Mum IQ Plus & Gain IQ Kid	29,538
Moringa Chil School Powder Milk (Kalbe)	28,834

A total of 2779 media clips were captured during the six-month period with a monthly average of 462 (table 2). By far the largest part was found broadcasted through TV channels (2423). No violations in regarding marketing of breastmilk substitutes for children less than 24 months were found. Daily exposure to advertisements for growing-up milks marketed for children above 24 months, and weekly exposure to advertisements for milks for pregnant and lactating women circumventing the Code.

Table 1. Number of media materials captured in the scanning per month based on media channel, Myanmar

	March	April	May	June	July	Aug	Total	Mean
TV	660	78	507	449	482	247	2423	403
Newspapers ¹	6	5	19	15	14	14	73	12
Magazines ¹	-	5	20	14	20	20	79	13
Journal ¹	26	22	55	31	39	31	204	34
Total	692	110	601	509	555	312	2779	462

¹Print and online

3.1.1 Growing-up milks

Daily exposure to advertisements for growing-up milks were seen both in print/online press and in broadcasted materials, with the latter as the main communication channel.

Commonly the growing-up milks were labeled as “Stage 3 or 4” and/or recommended for children from 2 years. Some of the key messages in the advertisements were:

- The formula would provide good digestion, physical and mental growth, and nutrients
- The child would grow stronger bones and taller height
- When drinking the formula, the digestion was claimed to be better and the kids would eat more
- It was good for the memory and the brain
- It would makes the child taller, alert and have good digestion
- Choose it for your children’s bright future
- For smart new generation
- Scientifically proven for requirements of children growth
- Pedia Sure’s message was that the “mother had a duty to give enough nutrition for her kids and since kids do not finish their food, Pedia Sure would fill their needs for nutrition”
- Other messages: “Let your child’s potential shine”, “For happier small tummies” and “Complete nutrition, complete happiness”

3.1.2 Milks for pregnant and lactating women

The media monitoring found weekly exposure to advertisements for milks for pregnant and lactating women. Often the ads were promoting both growing-up milks and milks for pregnant women, leaving the stages in-between blank. Some of the key messages communicated were as follows:

- The formulas would provide complete nutrition
- Milks for pregnant was marketed as being for both mother and fetus, while the milks for lactating mothers were for both the mother and her infant
- It was for mothers that wanted to give the best to their babies and would assure the development of brain, bones and muscles
- It was also said to prevent morning sickness and contained iron and folic acid to avoid deficiencies

3.2 Social media

Companies use their Facebook page to promote their brand and products. Breastmilk substitutes for children less than 24 months were promoted and idealized formula usage. Baby pictures were used and formulas were claimed to be closest to mothers' milk. Dumex held a photo contest and also showed the launching event of Dumec New Dugro in Yangon on July 18, 2015. Selected kids for the Milk Moustache photo contest was showed at the launching event.

4 Discussion

Daily exposure to advertisements for growing-up milks and weekly exposure to advertisements for milks for pregnant and lactating women were found during the six-month period of media scan. Line extension is known to be a highly successful marketing strategy for profiting on the established brand name. Line brands are when a company has several complementary products under the same brand concept. New products can be launched effectively and cost-efficient and can also help revitalize the already existing parent brand or flagship products. Products like follow-up formulas, growing-up milk and milk formula for pregnant and lactating women, can strengthen the brand name of the original infant formula. Often brand names and designs, or pictures and logos that are identical or very similar are used. This makes it difficult for mothers to distinguish between the different products being marketed for varies ages and allows for cross-promotion. It's also a way of bending the rules and avoiding marketing restrictions on breastmilk substitutes.

WHO affirms that follow-up formula is covered by the Code when marketed for use as a partial or total replacement for breastmilk [6]. They also confirm that it's unnecessary and unsuitable as a breastmilk replacement from six months of age onwards. In resolution 63.23 from 2010 [7], WHA calls on all government to end all forms of inappropriate promotion of foods for infants and young children. This would cover growing-up milks.

Often the advertisements were for the combination of milks for pregnant and lactating women and growing-up milk (stage 3 and 4), leaving the stages 1 and 2 in-between blank. This is an example of a line marketing strategy where the companies offer formula products in a stage-step model. This might be considered as a hidden promotion of infant formula for

children less than one year and it is in all cases causing a normalization of formula use and an overall promotion of artificial feeding practices. Milks for pregnant and lactating women gives baby food companies direct access to mothers and making them familiar to their products and the use of formula at an early stage. Moreover, milk for mothers may undermine their confidence in their own ability to provide good nutrition for themselves and their children. It is not to be considered as violations as the products are not within the scope of the Code, but it is important to be aware of such products being advertised for as a possible market tactic and to see the overall trends in the market. It can also be helpful in affecting policy changes [8].

Companies manufacturing breastmilk substitutes were in virtual contact with mothers through social media. In WHA Resolution 54.2, governments are called on to strengthen mechanisms to ensure Code compliance in all forms of media, emphasizing new modern communication methods, including electronic means [9]. User-generated content on social-media sites is not clearly covered by the provisions in the Code or subsequent resolutions, but may create a way for manufactures to circumvent the rules. Encouraging users to post comments or experiences about formula products provides brand sites with potential marketing content without themselves having to taking any actions breaching the Code. Also, common virtual actions like re-post, re-tweet and “like” provides greater exposure to manufactured-created content without the manufactures actively violating the Code [10].

Despite the use of tested and systematic methods by the media agency, it is possible that the media scan did not capture all relevant materials, which may have led to an underestimation of the frequency of media coverage of the topics of interest. The initial intention of this study was to also monitor editorial content on breastfeeding, in order to explore current trends in breastfeeding promotion. This has not been sufficiently captured by the media agency and analysis presented in this report is conducted on advertisements. Another limitation is that the scan reviewed content only in Burmese, but the results and analysis had to be presented in English. There may be discrepancies between the content and the interpretation. Finally, this study only collected content related to the promotion and marketing through mass and social media, thus missing below-the-line marketing tactics promoting breastmilk substitutes in hospitals and other health care services or at point of sale. Such violations are therefore not captured in this study. Similarly, the study did not

capture media coverage or advertisements related to complementary foods, which is within the scope of the Code when marketed for children below six months of age.

5 Conclusions and recommendations

Advertising of growing-up milks marketed for children from 2 years is circumventing the Code and national legislation. Both the growing-up milks and the milks for pregnant and lactating women can contribute to cross-promotion and normalisation of the use of breastmilk substitutes and artificial feeding at all ages. Social media is being used as a channel to provide information and promote products under the scope of the Code.

- Further strengthen national provisions implementing the Code making sure national laws covers all milk products that can replace exclusive or continued breastfeeding in the child's diet, and considering expanding the age range further to so that growing-up milk will be covered in order to avoid an opportunity for cross-promotion.
- The marketing of milk for pregnant and lactating women should be watched carefully since its use can undermine breastfeeding, and because it also may allow cross-promotion of products that are covered by the Code.
- Identify ways to strengthen monitoring and enforcement of the Code with open channels, such as social media.

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