



*The International Code of Marketing of Breast-milk Substitutes*  
and subsequent relevant World Health Assembly resolutions  
**IN A NUTSHELL**

Don't take any freebies or gifts of any kind  
and  
ANY IBCLC (or HCP or BFG Helper or volunteer) may talk to  
ANY parent about  
ANY product – EVEN by brand name  
In a one-on-one educational or clinical setting  
and  
ANY person may purchase, and  
ANY person may sell  
ANY WHO-Code-covered product

Your Big Ask →→→→	Is the company (or individual) <b>meeting their obligations under the Code?</b>
Article 1 Aim of the Code	Provide safe nutrition for infants by promoting/protecting BFG and ensuring proper use of substitutes (when necessary) based on adequate info and appropriate marketing
Article 2 Scope of the Code	(1) Bottles (2) Teats (3) Infant formula (including “follow-on” products marketed for children up to 36 months) (4) Products marketed for babies < 6 months (cereals, juices, mixes, teas, jarred food, etc.)
Article 3 Definitions	[see <a href="http://www.ibfan.org">www.ibfan.org</a> >The Issue>The International Code> The full Code; <a href="http://ibfan.org/the-full-code">http://ibfan.org/the-full-code</a> ]
Article 4 Information and education	Governments ensure objective info about infant and young child feeding Info describes benefits of BFG, and risks of formula use and preparation No pictures or text that idealise the use of breastmilk substitutes Donations of products or materials only at governmental request
Article 5 The general public and mother	No advertising/promotions to the general public No product samples or other gifts to (pregnant) mothers and their families No direct contact by sales force with (pregnant) mothers and their families
Article 6 Health care systems	Facilities protect/promote BFG; no facilities promote products (coupons, posters, placards, etc.) Infant formula teaching only by health workers No donations to families of formula-using infants
Article 7 Health workers	Health workers protect/promote BFG Health workers do not give out product samples Info to health workers by marketers must be scientific and factual only Product samples and financial/material inducements are NOT given by marketers, and are NOT accepted by health workers
Article 8 Persons employed by mfgs and distributors	Bonuses are not to be calculated on volumes of products sales Sales personnel do not provide teaching to mothers and their families Do not create conflicts-of-interest
Article 9 Labelling	Describe contents and appropriate use of the product; do not discourage BF Include notice of superiority of BFG No pictures or text to idealise formula use
Article 10 Quality	Product quality for infants should be a high standard Food products must meet Codex standards (re: quality and hygiene)
Article 11 Implementation and monitoring	Governments should give effect to the Code Governments and WHO should monitor Code implementation Manufacturers/marketers should monitor their compliance NGOs/others should join governments in informing mfgs of infractions In even years the Director-General reports on implementation status

*Adapted from Code Essentials 4 (2<sup>nd</sup> ed.): Complying with the International Code of Marketing of Breastmilk Substitutes and subsequent WHA resolutions, ICDC, July 2018. Heteronormative binary terms are in the original.*

Put another way it means ...

1. No advertising of products under the scope of the Code to the public-at-large
2. No free samples to parents
3. No promotion of products in health care facilities, including the distribution of free or low-cost supplies
4. No company representatives to advise/teach new parents and their families
5. No gifts or personal samples to health care workers
6. No words or pictures idealising artificial feeding, including pictures of infants, on the labels of the products
7. Information to health workers should be scientific and factual
8. All information on artificial feeding, including the labels, should explain the benefits of breastfeeding and all costs and hazards associated with artificial feeding
9. Unsuitable products such as sweetened condensed milk should not be promoted for babies
10. All products should be of a high quality and take account of the climatic and storage conditions of the country where they are used
11. Promote and support exclusive breast/chestfeeding for six months as a global public health recommendation with continued breast/chestfeeding for up to two years of age or beyond
12. Foster appropriate complementary feeding from the age of six months, recognizing that any food or drink given before nutritionally required may interfere with lactation/nursing
13. Complementary foods are not to be marketed in ways to undermine exclusive and sustained breastfeeding
14. Financial assistance from the infant feeding industry may interfere with professionals' unequivocal support for breastfeeding

*Adapted from Code Essentials 3 (2<sup>nd</sup> ed.): Responsibilities of Health Workers under the International Code of Marketing of Breastmilk Substitutes and subsequent WHA resolutions, ICDC, April 2018.*

Put another way it means ...

Breast/chestfeeding and human milk use are a public health imperative  
As health workers we promote, protect, and support lactating parents and their families

We **DO**:

- Provide info on artificial feeding to parents who need to use it, and tell them about the risks
- Accept product information but only when it is scientific and factual

Acting on our responsibilities under the Code we **DO NOT**:

- X Allow direct/indirect ads and promotion of products covered by the Code
- X Allow work places to be used for product display/promotion
- X Accept free or low-cost supplies of products
- X Give samples to pregnant parents or families with babies
- X Allow companies to contact pregnant parents

To avoid conflicts of interest we **DO NOT**:

- X Accept equipment and materials with brands, company names or logos in our work places
- X Accept personal gifts, money, meals, trips, education, etc. from companies
- X Accept company contributions for fellowships, conference attendance, research grants, study tours, etc.

--IBFAN and ICDC "Protecting Infant Health" poster, 2012 [adapted]