COMPLIANCE WITH
THE INTERNATIONAL CODE OF MARKETING
OF BREASTMILK SUBSTITUTES

According to the results of monitoring
carried out using methodology developed by
International Baby Food Action Network (IBFAN)

Kyiv 2004
Compliance with the International Code of Marketing of Breastmilk Substitutes

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To control the activities of manufacturers and distributors of baby food and other products stipulated by the IC, and to collect statements confirming marketing activities banned under the International Code of Marketing of Breastmilk Substitutes (ICMBS), the International Baby Food Action Network (IBFAN) developed a methodology of monitoring compliance with IC. This form of monitoring has become a social control tool used in many countries. In April 2004, as a result of a Ministry of Health request and with the assistance of UNICEF, the 'Social Monitoring' Centre carried out monitoring of compliance with the ICMBS in Ukraine. This publication presents the results obtained, and the most prominent indications of IC violations revealed by the monitoring. This publication is addressed to health care specialists, breastmilk substitute producers and distributors, and all those concerned with children's rights issues in Ukraine.

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Summary of the report

The monitoring of national policies and practices regarding the marketing of breastmilk substitutes in compliance with the International Code of Marketing of Breastmilk Substitutes (the Code) was conducted at the request of the Ministry of Health of Ukraine by the ‘Social Monitoring’ Centre with UNICEF assistance. The results of this survey show that baby food manufacturers market their products in 65 per cent of medical institutions in Ukraine, taking advantage of negligence, the lack of awareness and poor financial circumstances of medical personnel.

Through various marketing techniques the manufacturers achieve considerable influence over women’s decision not to breastfeed and use baby food instead. To shield mothers from the marketing pressures that can lead them to decide not to breastfeed, the International Code of Marketing of Breastmilk Substitutes was adopted by a resolution of the World Health Assembly in May 1981. All companies that produce or distribute breastmilk substitutes are obliged to follow the marketing regulations for these products (it is prohibited to market products covered by the Code; direct marketing of these products among consumers and medical personnel is also prohibited; there are certain guidelines on labelling, etc.). However, baby food producers and distributers in Ukraine constantly breach the Code or find ways to evade it.

Manufacturers of breastmilk substitutes very often make use of medical institutions to market their products and involve medical personnel for marketing purposes. A quarter of mothers received samples of products covered by the Code, which breaches item 5.2. Furthermore, in 67 per cent of cases mothers mainly received them in medical institutions from medical personnel. 55 per cent of mothers received gifts bearing the logos of these companies or brochures on breastmilk substitutes or associated products from manufacturers (indirectly through medical personnel, through retail trade or directly from sales agents). According to mothers, Hipp, Nestle, Nutricia and Milupa most frequently breach the ban on advertising and distribution of gifts, samples and discount coupons in medical institutions.

Information brochures, leaflets, magazines and advertisements (which are used as PR in most cases) on breastmilk substitutes, feeding bottles and teats are widely available for pregnant women, nursing mothers, and mothers of young children. Furthermore, manufacturers breach the Code by depicting attractive babies with bottles or babies near their product trademarks, but omitting the mandatory details on the advantages of breastfeeding. For example, 90 per cent of all informational materials aimed at the general public do not include statements on the negative effect of artificial breastfeeding. Approximately 25 per cent of materials imply that artificial feeding products are equivalent to or superior to breastfeeding. More than half use pictures or text idealizing breastmilk substitutes.

Almost all informational materials (90 per cent), which are distributed by breastmilk substitute manufacturers among Ukrainian medical personnel, violate the provisions of the International Code. Nutricia and Balta Concentrated Milk Products for Children top the list as their violations relating to content of informational materials distributed among medical personnel are the most frequent and varied.

The survey also revealed many violations in the Ukrainian retail trade. 75 per cent of all surveyed retail businesses violated a number of articles of the Code. Nestle, Hipp and Nutricia are worst in this respect and apply banned marketing tactics more often than other companies.

Only 35 per cent of monitored medical establishments were found to demonstrate no violations of the International Code at all. The following breaches are most widespread:

- Breastmilk substitutes are supplied to medical institutions with a discount and/or at a special price or free of charge (17 per cent of all monitored establishments);
Posters, clocks, etc. bearing a company name or logo are on display in medical institutions (47 per cent);

Advertising materials are distributed in medical institutions (48 per cent);

Gifts for medical personnel and mothers in medical establishments by manufacturers (43 per cent).

No single breastmilk substitute ‘close to breastmilk’ has yet been developed. Any statements of this kind are false and popularize the fallacious notion of better artificial feeding. Mother’s milk is the best feeding product for babies, as it facilitates comprehensive physical, nervous and mental development. It contains antibodies protecting babies from various infectious diseases. A bottle-fed baby is deprived of this natural immunization. Breast-fed children have higher mental development indicators in the long run compared with those who have been bottle-fed. Moreover, a bottle-fed baby is bereaved of unique contact with his/her mother, as a strong emotional bond between the baby and the mother is developed in the course of breastfeeding. This bond is a prerequisite for the normal development of the child’s mental and nervous system.

The Government of Ukraine has comitted itself to the implementation of the WHO/UNICEF ‘Global Strategy for Infant and Young Child Feeding’ approved by WHO resolution 55.25 on the Nutrition of Infants and Young Children. There are nine specific operational targets in the Global Strategy, and supporting the implementation of the International Code of Marketing of Breastmilk Substitutes and subsequent relevant WHO resolutions is one of them.

Breastfeeding is an inalienable element of any child’s right to proper care. State policy needs to address this issue since it has an interest in the upbringing of healthy, mentally steady and socially adapted citizens. Practically no financial resources are needed to adopt respective national legislation and to establish mechanisms of social control over the fulfillment of the International Code. It depends on a political decision that takes into account not only the willingness to make a profit from breastmilk substitute sales today, but also determination to preserve the health of the nation tomorrow.
1. INTRODUCTION

Nutrition is one of the basic components of children’s rights to achieve the best possible state of health. Breastmilk is the best food for babies in terms of contributing to their development. It contains all the substances needed for proper nutrition, as well as antibodies protecting the child from many infectious diseases. A child being fed with substitutes is deprived of this natural immunization. In addition, a child fed with breastmilk substitutes is deprived of a unique contact with his or her mother, because a strong emotional bond is established between mother and child in the course of breastfeeding, which is one of the advantages of a baby’s normal mental and nervous development.

No breastmilk substitute (BMS) close to mother’s milk has been developed yet. Any statements like this are false, and lead to the spread of certain ideas among the public that bottle feeding is good for babies, since “modern milk formulas contain beneficial components not found in breastmilk” (according to the results of an opinion poll conducted by the ‘Social Monitoring’ Centre in November 2003, this is believed by 27 per cent of Ukraine’s adult population).

A major influence on mothers deciding not to breastfeed is the variety of ways manufacturers and distributors promote artificial feeding products on the market. The information mothers are exposed to is more likely to include advertising of artificial products than breastmilk.

To avoid the marketing pressure exerted on mothers who may then stop breastfeeding, the World Health Assembly adopted the International Code of Marketing of Breastmilk Substitutes (‘IC’ or ‘the Code’) in May 1981, to regulate the marketing of artificial feeding products for young children. All companies manufacturing or selling breastmilk substitutes are obliged to comply with specific rules on promotion methods (advertising for products covered by the IC is banned, there is a list of particular requirements for labels, etc.). The IC has been approved as a guideline for governments developing their own national programmes, and is considered to be the minimum requirement to protect breastfeeding practice. The Code aims to provide adequate and safe nutrition for children, while breastmilk substitutes should only be used based on medical indications.

However, manufacturers find ways to bypass the rules. Companies intend to sell their products, as of course, their profit depends on mothers’ choice of formulas. Marketing influences on consumers range from advertising, promotions promising benefits and discounts to consumers and influencing medical staff via sponsor assistance to clinics, etc. Improper marketing activities contribute to a change in attitudes: a formula is seen as equal to breastmilk, feeding from a bottle an indication of higher social status.

To control the activities of manufacturers and distributors of baby food and other products stipulated by the IC, and to collect statements confirming incidence of banned marketing activities, the International Baby Food Action Network (IBFAN) developed a methodology of monitoring compliance with the Code. This form of monitoring is being used as a social control tool in many countries. In April 2004, at the request of the Ministry of Health and with UNICEF assistance, the ‘Social Monitoring’ Centre carried out monitoring of compliance with the International Code of Marketing of Breastmilk Substitutes in Ukraine. This document includes a brief description of the results obtained, and the most prominent indications of IC violations revealed by the study.
2. MONITORING METHODOLOGY

**Study goal:** to evaluate compliance with the provisions of the International Code of Marketing of Breastmilk Substitutes in Ukraine. In global terms, the monitoring exercise aims to collect information to help develop methods to avoid commercial interference in medical issues and to protect breastfeeding.

**Study objectives:**

- To evaluate compliance with the IC in health care facilities;
- To investigate manufacturers’ compliance with IC requirements in retail and sales activity;
- To analyse whether labels on artificial baby food products available on the Ukrainian market meet IC requirements in terms of aesthetic and content design;
- To evaluate IC compliance by particular companies involved in the production or distribution of artificial infant feeding products;
- To analyse manufacturers’ information materials distributed among health workers and the general public as to their compliance with IC requirements on aesthetic and content design.

The monitoring included evaluation of IC compliance of certain products within its scope, such as:

- **Infant feeding formulas to be used from birth;**
- **Any other food and beverages that can be regarded as breastmilk substitutes;**
- **Bottles for baby food and teats.**

The monitoring was conducted by collecting information by observation and interviewing according to the IBFAN standard monitoring forms (SIM) to reveal breaches of particular IC provisions by different companies. The following categories of establishment, groups and items were investigated:

1. Health care facilities (method of information collection — observation, interviews) — a total of 81 health care facilities were investigated (maternity hospitals, child outpatient clinics and hospitals, women’s advice centres);

2. Mothers of children aged under six months (method of information collection — face-to-face interviewing) — a total of 185 mothers questioned;

3. Retail outlets selling products under IC coverage (method of information collection — observation, interviews) — a total of 91 sales facilities investigated (pharmacies, supermarkets, special baby food stores, etc.);

4. Labels on breastmilk substitutes and other supplementary goods (37 labels on infant formulas analysed, 55 on weaning food formulas, supplementary food and other breastmilk substitutes, 46 on bottles and teats for artificial feeding);

5. Company materials (information and advertising) for the general public (190 items analysed) and for health workers (75 items).

**Information collection period:** April 2004

Eight oblasts of Ukraine were selected for monitoring: Donetsk, Kyiv, Lviv, Odessa, Rivne, Kharkiv, Kherson oblasts and the city of Kyiv. A total of 760 standard monitoring forms were filled in during the study.
3. MONITORING RESULTS

The results of monitoring in Ukraine indicate that companies manufacturing breastmilk substitutes, baby food supplements, bottles and teats use marketing pressure directly on mothers and health workers through gifts, booklets and information materials, promotions, etc., and by using attractive labels with designs idealising feeding on their products.

Breaches were revealed in all areas investigated: at health care facilities, sales outlets, advertising and information materials both for the general public and for medical personnel, and on product labels.

3.1. Promoting breastmilk substitutes at health care facilities

Among the 81 health care facilities involved in the study, only 28 (35 per cent) revealed no IC breaches at all. At the other 65 per cent some kind of information from manufacturers and distributors was found as well as promotional activities taking advantage of either the lack of awareness or negligence among health workers, or the poor financial conditions of Ukrainian medical establishments.

According to WHO, only 3 per cent of mothers cannot breastfeed their children, therefore in 1994 the WHO Assembly (WHA 47.5) banned all kinds of gifts or subsidised supplies of breastmilk substitutes to health care facilities.

Figure 3.1.1 illustrates an arbitrary breakdown (from the point of view of the statistically insignificant quantity of observations) of the ‘proportion’ of breaches by certain companies among all registered breaches of IC provisions banning free or subsidised supplies of breastmilk substitutes to health care facilities.

At 14 health care facilities among the 81 monitored, 22 breaches were found (article 7.4) relating to the ban on giving out samples products at health care facilities. Product samples were distributed at 5 of the 18 maternity hospitals investigated, at 4 out of 20 child outpatient clinics, and 4 out of 22 children’s hospitals.

6.3. Facilities of health care systems should not be used for the display of products within the scope of this Code, for placards or posters concerning such products, or for the distribution of material provided by a manufacturer or distributor...

The study revealed that IC provisions were violated in almost half (47 per cent) the health care facilities investigated. 80 indications of IC breaches were found. At health care facilities, advertising and information materials with information on BMS (stands, booklets, leaflets) are...
frequently available to mothers. 72 items of advertising and information material were available to the general public at 40 of the 81 facilities investigated, and therefore easily available to mothers.

Pregnant or lying-in women are given booklets on infant formulas, gift kits (Hipp, Nestle), sample formulas (Nestle, Milupa), and tags with company names and logos were even attached to the cots and wrists of newborns (Nestle, Milupa, Nutricia) at a number of facilities, when checking out or while being attended by health workers. Some retail outlets like Antoshka and Be-Bi actively distribute gift kits among mothers, offering discount stamps for babyfood products — most from Hірр or Nestle, but not including non-IC covered items like baby lotion or cotton buds etc.).

Article 7.3. of the IC reads: ‘No financial or material inducements to promote products within the scope of this Code should be offered by manufacturers or distributors to health workers or members of their families, nor should these be accepted by health workers or members of their families’.

At 31 of the 81 health care facilities monitored, 46 BMS gifts received by health workers from manufacturers were found. These were mostly wall or desk calendars with the logo and BMS slogan, pens with a name or logo, gowns, stationary caddies, folders, clocks, notepads. In two maternity hospitals in Donetsk oblast, doctors gave their patients a certain number of prescriptions adviser them to take Nestle formulas (on special prescription forms — see Figure 3.1.4) having received free gowns with the Nestle logo from company representatives.

It is certainly difficult to calculate exactly how much such seemingly innocent Code violations as health workers wearing gowns with BMS manufacturer logos, or giving lying-in women advertising and information...
According to the monitoring, most breaches of the International Code of Marketing of Breastmilk Substitutes in health care facilities in Ukraine are as follows:

<table>
<thead>
<tr>
<th>Activity Description</th>
<th>Article IC violated</th>
<th>Companies most often violating this IC article</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplying breastmilk substitutes to health care facilities at a discount and/or special price or for free (35 incidents at 14 health care facilities registered, which accounts for 17 per cent of all facilities monitored)</td>
<td>6.6</td>
<td>Nestle, Nutricia, Hipp, Khotolsk Baby Food Plant (Malysh), Baltsk Baby Food Plant (Lasunya)</td>
</tr>
<tr>
<td>Distributing samples of breastmilk substitutes among health workers and mothers (a total of 22 incidents registered at 14 health care facilities (17 per cent)</td>
<td>7.4</td>
<td>Nestle, Nutricia, Hipp, Baltsk Baby Food Plant (Lasunya)</td>
</tr>
<tr>
<td>Displaying placards, billboards, clocks, etc. at health care facilities with the name or logo of a breastmilk substitute manufacturer (80 incidents at 38 (47 per cent) health care facilities registered)</td>
<td>6.2, 6.3</td>
<td>Nestle, Nutricia, Hipp, Baltsk Baby Food Plant (Lasunya)</td>
</tr>
<tr>
<td>Distributing company ad materials at health care facilities (72 incidents at 39 (48 per cent) health care facilities registered)</td>
<td>6.3, 4.2</td>
<td>Nestle, Nutricia, Hipp, Milupa</td>
</tr>
<tr>
<td>Company gifts to health workers (46 incidents at 31 (38 per cent) health care facility registered) and mothers (4 incidents at 4 clinics registered) at health care facilities</td>
<td>7.3</td>
<td>Nutricia, Nestle, Hipp, Baltsk Baby Food Plant (Lasunya)</td>
</tr>
</tbody>
</table>
materials on breastmilk substitutes influence mothers’ decisions to stop breastfeeding in favour of bottlefeeding. However, it is clear that double standards are being ‘accidentally’ created at most health care facilities in Ukraine, when on the one hand, medical providers promote breastfeeding, while not seeming to be against artificial feeding, or allow BMS ads to be displayed at health care facilities, and not objecting to the setting up of ‘caring parents’ corners in clinics. Parental confusion is totally natural when they have to decide how best to feed their baby: it is medical staff who bear most of the responsibility for reducing the harm caused by aggressive BMS marketing policy at health care facilities.

According to the results of the monitoring, there is no unity among health workers in their opposition to company activity, since first of all, there is no awareness of the harm these activities can cause breastfeeding. This is primarily a consequence of the low level of awareness among medical staff as to the content and spirit of the International Code.

3.2. Promoting breastmilk substitutes directly to the consumer (results of interviews with mothers)

According to the results of the monitoring, 185 interviews with mothers of children aged under 6 months were analysed. 156 interviews (84 per cent) give evidence of various IC violations.

- The monitoring illustrates the prevalence of IC violations in Ukraine (articles 5.2, 5.3, 5.4., 5.5, 6.2, 6.3, 7.4) related to marketing artificial baby food products to consumers (mothers of young babies, pregnant women).

- It should be emphasized that the manufacturers of IC products make extensive use of health care facilities to promote their products and direct marketing efforts involve health care specialists in promoting particular products. According to the interviews, the opinion of health workers is the most important factor influencing a mother’s decision to choose a particular formula or supplement brand for artificial feeding, instead of supporting lactation. Therefore, avoiding company marketing pressure on paediatricians, dieticians and other health workers is especially important in terms of eliminating the chance of mothers stopping breastfeeding due to the ‘advice of a doctor or other health worker’ representing the interests of one manufacturer or another.

- The ban on advertising and distributing gifts, samples, discount stamps, etc. at health care facilities, according to mothers questioned during IC monitoring, is most often broken by Hipp, Nestle, Nutricia, and Milupa.

3.3. Promoting breastmilk substitutes in retail outlets

In the course of monitoring, 220 IC breaches were registered in 69 outlets found in all oblasts. The activities of only 22 (25 per cent) sales outlets were compliant with the Code (no IC violations found).

Table 3.3.1 Breakdown of IC violations found at retail outlets selling breastmilk substitutes during monitoring (in numbers)

<table>
<thead>
<tr>
<th>Description of violation:</th>
<th>Number of outlets breaking IC</th>
<th>Total number of violations registered</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Companies sending their representatives (promoters) to advise shop-assistants and buyers on food for children or first product use*</td>
<td>20</td>
<td>48</td>
</tr>
<tr>
<td>2. Shops using gimmicks to stimulate babyfood/bottles/teats sales**</td>
<td>57</td>
<td>172</td>
</tr>
</tbody>
</table>

* — breaches of IC articles 5.1, 5.2, 5.5: ban on advertising of breastmilk substitutes, distribution of product samples by agents and representatives soliciting contact with mothers of young children to improve sales.

** — breaches of IC articles 5.1, 5.2, 5.3, 5.4, 6.6: ban on advertising of breastmilk substitutes, displays, promotional purchase, discount sales, discounts and gifts to mothers of young children.
Although the quantity of observations is insufficient for a statistically significant conclusion, we can state that it is highly probable that many companies manufacturing artificial babyfood products often behave improperly in Ukrainian retail outlets, with many IC breaches; this is due to the fact that at most of the investigated outlets (75 per cent of incidents), a significant number of proofs of violations of Code articles were found.

Where breaches are registered the outlets have a great amount of booklets, information leaflets on company products covered by the IC, posters (mostly Nestle and Hipp), calendars, as well as wall clocks (mostly Nestle) and coins with Hipp and Nuk logos. All information and advertising products are available for all customers, and were received by the sales outlets as gifts from company representatives for dissemination among customers.

Sales representatives contact shop assistants and doctors; consultants in shops and pharmacies distribute products, ads, free samples and gifts, run free tastings, presentations of baby food and formulas; health workers are often invited to train to then teach shop assistants and pharmacists to advise buyers on the benefits of certain breastmilk substitutes.

Quite frequently customers are advised by paediatricians, paediatric consultants or child physicians in shops, who promote products from certain manufacturers. Doctors work on different schedules — or visit facilities several times a week on certain days, or do full-time counselling. According to the monitoring, doctors most often represent Nestle, fewer of them, Nutricia.
Figure 3.3.3. Breakdown of violations of the ban on promotions in the retail system covered by the IC

- Other companies: 9 violations
- Baltsk Babyfood Plant: 2 violations
- Avent: 2 violations
- Humana: 2 violations
- Heinz: 2 violations
- AquaEco: 3 violations
- Canpol: 3 violations
- Khorol Plant: 3 violations
- Chicco: 3 violations
- Kolinska: 4 violations
- Bebe Jou: 4 violations
- Bebi Nova: 4 violations
- Hintex: 4 violations
- Milupa: 5 violations
- Nuk: 5 violations
- Mapa: 5 violations
- Abbot Laboratories: 10 violations
- Nutricia: 40 violations
- Hipp: 46 violations

Figure 3.3.4. Nestle, Hipp, Nutricia, Nuk and Karapuz ads in pharmacy windows in Donetsk

Figure 3.3.5. Large Nestle ad boxes (Bila Tserkva, Chuguyev), a clock (Kherson), banners (Kherson)

Figure 3.3.6. A Hipp poster found in a Zdolbunov (Rivne oblast) pharmacy
IC articles 5 and 6 ban advertising, distributing samples, gifts to help stop breastfeeding and switching to artificial feeding, discounts on artificial infant food items or other tricks to talk buyers into making a purchase at retail outlets. During the monitoring, 172 breaches of the above IC provisions were found at 57 outlets.

This is the breakdown of IC violations found during the monitoring of sales outlets regarding compliance with the IC by particular companies:

### 3.4. Labels on IC products

#### 3.4.1. Labels on infant formulas

While analysing infant formula labels, a number of breaches were found of IC articles 9.2 and 9.4 describing the information that must be on labels:

- the label had no text implying ‘important warning’ or similar — 16 incidents;
- no statement that breastfeeding is best for the child — 10 incidents;
- the label had no warning that incorrect preparation is dangerous — 19 breaches;
- the label had no phrase implying that the product should only be used with the advice of a health specialist — 20 breaches;
- the label had no clear and understandable instructions on use/cooking — 1 breach;
- the label bore text written in a foreign language — 3 incidents;
- information on shelf life/expiry date not easily readable — 1 incident;
- no information on batch number — 5 incidents.

Article 9.2. of the International Code of Marketing of Breastmilk Substitutes emphasises that the terms “humanised”, “maternalised” or similar terms should not be used... The labels on a number of products made by Lasunya and Kolinska say that this product is as close as possible to breastmilk or has all the ingredients found in breastmilk.

Article 9.2 IC: ‘... Neither the container nor the label should have pictures of infants, nor should they have other pictures or text which idealize the use of infant formula...’ The product labels of some companies have photographs, drawings or other images of a baby — 6 incidents. The labels of infant formulas may have other drawings or photographs, idealizing
formula use (16 such packages were found). These may be images of bottles, teats, or toy animals (bears, rabbits, cows).

**Hipp products, especially Hipp Pre (see Figure 3.4.1.3) are distributed among a religious community. When a child is born, the community gives the mother several boxes of this product (this incident was found in Rivne).**

The highest number of breaches of IC provisions regarding label designs on infant formulas found during monitoring were on Nestle, Nutricia and Belact (a Vollhovitsky plant) products.

### 3.4.2. Labels of weaning food products

55 labels on weaning formulas, additional feeding and other BMS breaching the IC were analysed.

The labels of products in Figure 3.4.2.1 have photographs, drawings or images of babies, which is a breach of IC article 9.2 (see above).

**IC Article 5.1:** *There should be no advertising or other form of promotion to the general public of products within the scope of this Code*. The labels on feeding supplements for children over 6 months from the following companies resemble the labels of young infant formulas from the same companies, which is one of the hidden ways of promoting products covered by the Code:

This practice of the use of similar or identical packaging for products both covered and not covered by the Code, is harmful both from the point of view of banning IC product promotion and because of the high probability that the consumer will be mistaken in choosing a product.

WHA Resolution 34.2 adopted at the 49th Session of the World Health Assembly on 25.05.96: ‘...feeding solely on breastmilk over 6 months...’ Ten labels on weaning products from different companies say that this product is recommended for use within the first few days of birth. Often there are foods on sale recommended for use from the age of one, two, or four months.

The labels of a number of Nestle and Nutricia products decorated with an image of a toy bear, Hipp products with picture of a baby and bottles.
Article 9.2 of the International Code of Marketing of Breastmilk Substitutes reads: ‘Manufacturers and distributors of infant formula should ensure that each container has a clear, conspicuous, easily readable and understandable message printed on it, or on a label which cannot readily become separated from it, in an appropriate language...’

The label on this fruit puree made by the Minusinsk Food Factory says that the product is recommended by the Ministry of Health (to be used from three months of age).

Two labels on Fruto Nyanya juice made by the Lebedinsky Factory recommend use from five months of age and state that this product is approved by the Scientific Child Health Centre of the Russian Academy of Medical Sciences.

The lack of agreement among health workers on when to start adding weaning foods to a baby’s diet probably creates an opportunity for reputable health care facilities or authorities to recommend using certain weaning products before a child reaches six months.

3.4.3. Labels on bottles and teats used for administering artificial babyfood

During monitoring, 46 labels on bottles and teats were analysed, and 33 of them (72 per cent) were found to breach the IC: that means that almost three-quarters of the labels of products available on the Ukrainian market included photographs, drawings or other images of children and parents feeding children from a bottle on the labels (number of violations found).
market have IC breaches. The worst culprits are Chicco, Heinz, Baby Nova, and Hintex.

Article 5.1: 'There should be no advertising or other form of promotion to the general public of products within the scope of this Code'.

Article 9.1: 'Labels should be designed to provide the necessary information about the appropriate use of the product, and not to discourage breastfeeding'.

- A Heinz label on a bottle with a teat had an ad for breastmilk substitutes.
- A Cannon Rubber label bore text saying: "this company’s teats are as similar as possible to the form of a mother’s nipple", which has a negative effect on breastfeeding.
- Lamprecht, Nuk and Timex Line labels claim that "the unique technology used to make these teats makes feeding your baby as close as possible to breastfeeding".

It was found that Chicco, Baby Nova, Heinz, Bebi-Comfort, and Hintex products are often on sale in Ukraine with texts in a foreign language.

Analysis of breastmilk substitute labels (infant formulas, weaning food), bottles and teats available on the Ukrainian market indicates numerous breaches of IC provisions (article 9.2) by manufacturers of these products.

The labels do not include all information requirements as clearly stipulated by the Code, sometimes totally ignore them, and many of them use idealistic images of pretty smiling babies, mothers feeding them with bottles, toys, etc. Unfortunately, products with labels in foreign languages are often found on sale (mostly teats and bottles for artificial food), without instructions for use, production date and sell-by date.

Obviously, universal state standards should be introduced for all label designs on products used for artificial infant feeding, based on IC provisions (article 9). In case a comprehensive law is passed to avoid marketing pressure on breastfeeding, one of its sections must clearly regulate the contents and requirements for label design on products for artificial infant feeding.
3.5. Information materials for health workers from manufacturers of breastmilk substitutes and other products covered by the IC

During the course of monitoring, 75 items provided by infant feeding manufacturers to health workers were analysed (booklets, leaflets, reference books, etc.). Among them, 68 (91 per cent of the total number) were found to breach the IC.

Among the materials given to health workers by manufacturers of products within the scope of the Code were 34 leaflets, 28 booklets, and 6 other types of material (magazines, reference books). The greatest IC violations among materials for health workers were found at outpatient clinics (27), pharmacies (10), doctors’ surgeries (9), maternity hospitals (8) and children’s hospitals (6). In 35 cases, breaches were found in company materials available to mothers, given the proven fact that in most cases (26) such materials reached mothers via health workers.

Many of the materials found during monitoring insist that bottlefeeding is equal or better than breastfeeding (in 29 items), using drawings or text idealising the use of BMS (in 35 items).

8.2: Personnel employed in marketing products within the scope of this Code should not, as part of their job responsibilities, perform educational functions in relation to pregnant women or mothers of infants and young children’.

In the course of the study, a blatant violation of this article was found in Odessa. Baltsk Baby Food Plant representatives (Lasunya) were dispensing booklets to mothers visiting a doctor, right at his surgery.
From the point of view of the quantities of information and educational products disseminated among health workers, Nutricia, Nestle, Hipp and Baltsk Babyfood Plant JSC (Lasunya TM) are the most active in gaining the loyalty of health workers. The materials distributed by these companies are least likely to meet all Code provisions regarding the messages that must be presented in them. IC requirements on the contents of leaflets, booklets etc. are most often breached in materials given to health care personnel by Nutricia.

<table>
<thead>
<tr>
<th>Company materials for health workers</th>
<th>Nutricia</th>
<th>Nestle</th>
<th>Hipp</th>
<th>Baltsk Babyfood Plant</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total quantity of materials analysed</strong></td>
<td>23</td>
<td>23</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>(including those without violations)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Not enough information on the benefits and highest value of breastfeeding (article 4.2a)</strong></td>
<td>12 52 per cent</td>
<td>12 52 per cent</td>
<td>5 50 per cent</td>
<td>5 56 per cent</td>
</tr>
<tr>
<td><strong>Not enough information on the negative effect that bottled weaning has on breastfeeding (article 4.2c)</strong></td>
<td>19 83 per cent</td>
<td>12 52 per cent</td>
<td>8 80 per cent</td>
<td>9 100 per cent</td>
</tr>
<tr>
<td><strong>Not enough information on how difficult it is to go back to breast feeding after using substitudes (article 4.2d).</strong></td>
<td>18 78 per cent</td>
<td>14 61 per cent</td>
<td>8 80 per cent</td>
<td>9 100 per cent</td>
</tr>
<tr>
<td><strong>Not enough information on maternal nutrition, preparation for and maintenance of breast feeding (article 4.2b)</strong></td>
<td>18 78 per cent</td>
<td>11 48 per cent</td>
<td>8 80 per cent</td>
<td>9 100 per cent</td>
</tr>
<tr>
<td><strong>Quantity of company materials with information on infant formulas</strong></td>
<td>22</td>
<td>22</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td><strong>Not enough information on correct use of infant formulas (article 4.2e)</strong></td>
<td>17 77 per cent</td>
<td>16 73 per cent</td>
<td>1 17 per cent</td>
<td>5 63 per cent</td>
</tr>
<tr>
<td><strong>Not enough information on the social and financial importance of formula use (article 4.2)</strong></td>
<td>18 82 per cent</td>
<td>13 59 per cent</td>
<td>5 83 per cent</td>
<td>8 100 per cent</td>
</tr>
<tr>
<td><strong>Not enough information on the fact that incorrect feeding or wrong preparation of formulas is bad for health (article 4.2)</strong></td>
<td>19 86 per cent</td>
<td>14 64 per cent</td>
<td>3 50 per cent</td>
<td>7 88 per cent</td>
</tr>
<tr>
<td><strong>Not enough information on the fact that unnecessary or wrong use of formula or other breastmilk substitutes is unsafe for health</strong></td>
<td>19 86 per cent</td>
<td>15 68 per cent</td>
<td>4 67 per cent</td>
<td>7 88 per cent</td>
</tr>
<tr>
<td><strong>Total quantity of materials (including those without violations)</strong></td>
<td>23</td>
<td>23</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td><strong>Materials suggest that bottled food is the same or better than breastmilk (article 4.2)</strong></td>
<td>13 57 per cent</td>
<td>7 30 per cent</td>
<td>2 20 per cent</td>
<td>3 33 per cent</td>
</tr>
<tr>
<td><strong>Materials use drawings or text idealising the use of breastmilk substitutes (article 4.2)</strong></td>
<td>17 74 per cent</td>
<td>10 43 per cent</td>
<td>1 10 per cent</td>
<td>3 33 per cent</td>
</tr>
</tbody>
</table>
3.5.1. Company materials available to the general public

In the course of the monitoring exercise, 190 materials from manufacturers of products for the general public covered by the Code were found and analysed (booklets, leaflets, ads, posters, etc.). These included 84 booklets, 57 information leaflets, 14 advertisements, 10 posters, 9 specialist magazines, and 16 other items (reference books and booklets, stickers, calendars and others). Most information materials breaching the code were found in publications and advertising sheets for parents (52), shops (34), pharmacies (32), and supermarkets (28) and outpatient clinics (16); 9 items breaching the IC breaches were found at maternity hospitals, and 7 at doctors’ surgeries.

Article 5.1 of the International Code of Marketing of Breastmilk Substitutes: ‘There should be no advertising or other form of promotion to the general public of products covered by this Code’.

Breaches of this provision are promos run by Hipp (‘Ten Years with the Babies of Ukraine’, ‘Taming The Obstinate Spoon’) and Nestle (‘New Year Gifts for Your Baby’, ‘Make Your Tot
Happy with Yummy Porridge! 'Nestle’s Autumn Promo’) — these concerned all company products, including those within the scope of the Code, and were obviously aimed at increasing consumer demand for the companies’ products.

The analysis of information materials disseminated among consumers and the general public results in reasoned confirmation of the practice of active use of marketing pressure on consumer behaviour by the manufacturers of artificial children’s food products in Ukraine.

<table>
<thead>
<tr>
<th>Company materials available to the general public</th>
<th>Nestle</th>
<th>Hipp</th>
<th>Nutricia</th>
<th>Milupa</th>
<th>Avent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total quantity of materials</strong></td>
<td>37</td>
<td>32</td>
<td>21</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Not enough information on the benefits and highest value of breastfeeding (article 4.2a)</td>
<td>26</td>
<td>23</td>
<td>14</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>70 per cent</td>
<td>72 per cent</td>
<td>67 per cent</td>
<td>80 per cent</td>
<td>80 per cent</td>
</tr>
<tr>
<td>Not enough information on the negative effect bottled weaning has on breastfeeding (article 4.2c).</td>
<td>33</td>
<td>29</td>
<td>17</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>89 per cent</td>
<td>91 per cent</td>
<td>81 per cent</td>
<td>90 per cent</td>
<td>90 per cent</td>
</tr>
<tr>
<td>Not enough information on how difficult it is to go back to breast feeding after using substitutes (article 4.2d).</td>
<td>32</td>
<td>27</td>
<td>17</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>86 per cent</td>
<td>84 per cent</td>
<td>81 per cent</td>
<td>90 per cent</td>
<td>90 per cent</td>
</tr>
<tr>
<td>Not enough information on maternal nutrition, preparation for and maintenance of breast feeding (article 4.2b).</td>
<td>30</td>
<td>25</td>
<td>17</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>81 per cent</td>
<td>78 per cent</td>
<td>81 per cent</td>
<td>90 per cent</td>
<td>90 per cent</td>
</tr>
<tr>
<td><strong>Quantity company materials on infant formulas</strong></td>
<td>15</td>
<td>14</td>
<td>12</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Not enough information on the correct use of infant formulas (article 4.2e).</td>
<td>7</td>
<td>7</td>
<td>9</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>47 per cent</td>
<td>50 per cent</td>
<td>75 per cent</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Not enough information on the social and financial importance of formula use (article 4.2).</td>
<td>10</td>
<td>13</td>
<td>11</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>67 per cent</td>
<td>93 per cent</td>
<td>92 per cent</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Not enough information on the fact that incorrect feeding or preparation of formulas is unhealthy (article 4.2).</td>
<td>10</td>
<td>11</td>
<td>11</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>67 per cent</td>
<td>79 per cent</td>
<td>92 per cent</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Not enough information on the fact that unnecessary or wrong use of formula or other breastmilk substitutes is unhealthy (article 4.2).</td>
<td>10</td>
<td>11</td>
<td>11</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>67 per cent</td>
<td>79 per cent</td>
<td>92 per cent</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total quantity of materials</strong></td>
<td>37</td>
<td>32</td>
<td>21</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Materials suggest that bottled food is the same or better than breastmilk (article 4.2).</td>
<td>4</td>
<td>6</td>
<td>8</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>11 per cent</td>
<td>19 per cent</td>
<td>38 per cent</td>
<td>20 per cent</td>
<td>50 per cent</td>
</tr>
<tr>
<td>Materials use drawings or text idealising use of breastmilk substitutes (article 4.2).</td>
<td>22</td>
<td>10</td>
<td>14</td>
<td>8</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>59 per cent</td>
<td>31 per cent</td>
<td>67 per cent</td>
<td>80 per cent</td>
<td>50 per cent</td>
</tr>
</tbody>
</table>

Table 3.5.2.1 Proportions of company materials available to the general public violating IC article 4.2 compared with all materials obtained and analysed during the monitoring
This leads to the establishment of a positive image of bottled food and therefore a lessening of the breastfeeding role. Booklets and leaflets, magazine publications and advertising (mostly disguised as PR) publications on BMS, bottles and teats give information on their products, not mentioning all the data on benefits of breastfeeding that they should display, and using images of pretty, smiling babies with bottles or close to the product brand name are all used.

3.5.2. Results of monitoring Ukrainian Internet resources

The study of Ukrainian Internet resources found IC breaches on the websites of the following companies: Humana, Nestle, Remedia, Baltsk Babyfood Plant (Lasunya TM) and Friesland Nutrition. Also, violations of the International Code of Marketing of Breastmilk Substitutes by Hipp and Chicco were found on other unofficial sites.

The official website of AnikaRu, the exclusive distributor of Friesland Nutrition babyfood shows images of smiling children besides pictures of its products, and the Remedia site shows children being fed with a spoon. The Children’s Paradise store (Lutsk) web site, which has information on Chicco products, also has photographs of smiling babies.

Some sites have texts that idealize the use of breastmilk substitutes in some way. The Humana site says that Humana Pre milk ‘almost totally meets breastmilk in terms of protein content’, while the official Baltsk Baby Food Plant site describes Detolact formula as ‘a breastmilk substitute as close as possible to mothers’ milk...’. The official Friesland Nutrition site claims that ‘Friesolac can be a good substitute for mothers’ milk, if the mother can’t breastfeed or wants to stop breastfeeding for a reason... Friesolac is a fully adapted formula, there is no need to use other vitamins.’

When reviewing official websites, it was found that practically all rules of IC article 4.2 on the information that must be included in manufacturers' materials were violated. This information is provided in such a way that it reduces the importance of breastfeeding for the health of the child and mother, and emphasises the ‘identity’ between the products presented and the natural breastmilk formula.

Figure 3.5.3.1. The websites of Remedia and AnikaRu, the exclusive Friesland Nutrition baby food dealer.
4. CONCLUSIONS

As stipulated by the Convention of the Rights of a Child, nutrition is one of the essential components of children’s rights for achieving the best possible state of health. The Government of Ukraine has declared its commitment to realizing children’s rights and this includes commitments to the UNGASS outcome document ‘A World Fit for Children’, implementation of the Global Strategy for Infant and Young Children Feeding, and respective WHA resolutions.

The primary obligation of the Government is to formulate, implement, monitor and evaluate national policy on infant feeding. All manufacturers and distributors of products covered by the International Code of Marketing of Breastmilk Substitutes, including feeding bottles and teats, are responsible for monitoring their marketing practices according to the principles and aims of the Code. They should ensure that their conduct conforms at every level to the Code, subsequent Health Assembly resolutions, and national measures that are adopted to support both.

The situation of non-compliance of BMS marketing with international standards in Ukraine is based on the following factors:

- the absence of national legislation to regulate the marketing of products for artificial infant feeding;
- a low level of awareness among health workers: many health care facility staff have no information on or are utterly unfamiliar with the International Code of Marketing of Breastmilk Substitutes;
- the position of health care facility management is also related to a lack of information: there is no unity in opposing the promotion of products within the scope of IC, since primarily, there is no awareness of the harm the activities of these manufacturers cause to breastfeeding;
- the companies involved in the production and/or sales of breastmilk substitutes, bottles and teats in Ukraine which, taking advantage of the ignorance of medical service providers, the general public, decision makers, and lack of awareness of the harmful influence of their incorrect marketing activity on breastfeeding, as well as the absence of legal and social control, are aggressively implementing marketing programmes involving medical providers, retail sales outlets and the media;
- the position of retail outlets permitting advertising, activities of sales agents dealing directly with mothers and pregnant women etc. which is mostly caused by unawareness of IC provisions and commercial interest.

The aftermath of further ignorance of the issue of the absence of control over marketing of breastmilk substitutes and supplementary products for artificial infant feeding will be a further reduction in the proportion of children feeding on breastmilk. Thus, the company-created image of artificial food being healthy and solving a lot of ‘problems’, undoubtedly causes harm regarding attitudes and stereotypes that lead women to stop or not choose breastfeeding even without medical indications, let alone negative impact on breastfeeding caused by involving medics in BMS sales.

At the moment, the crucial factor in implementing the practice of supporting breastfeeding and preventing business interference in medical issues in Ukraine is the achievement of a high level of awareness among the authorities, health workers at all levels, media representatives and society in general as to modern approaches to breastfeeding issues and compliance with the International Code of Marketing of Breastmilk Substitutes.

Therefore, the Code’s information will only be efficient if proper national legislation and appropriate national programmes are adopted to protect breastfeeding in Ukraine from
commercial pressure, including documents to regulate business activities in the spirit of IC provisions in the area of production or sales of infant feeding products.

The following interventions are recommended to facilitate compliance with the International Code of Marketing of Breastmilk Substitutes in Ukraine:

1. An interindustry working group should be set up to do preliminary work, and a bill of Law of Ukraine should be developed to exert control over the marketing of products for artificial infant feeding. Parliament should be approached to pass a proper Law.

2. Proposals should be put forward for consideration by the appropriate committees of the Government and Parliament on passing an amendment to the Law on Advertising to ban advertising of breastmilk substitutes, teats and bottles in the media, regulate a clear content of company information materials targeted at health workers and the general public, ban free distribution of such materials among visitors to health care facilities, and in the retail system, ban the use of POS materials and other marketing contrivances (promos, discounts, exhibitions, direct marketing, especially direct contact with mothers or via post and the Internet) that promote products via health care facilities and retail outlets, etc.

3. Job descriptions should be developed for health care personnel to reflect the MOH position on the need for compliance with IC in the health care system, to ban cooperation between paediatricians and manufacturers or distributors and on placing advertising materials in health care facilities, etc.

4. Contacts between the MOH and state agencies representatives should be established, between people dealing with breastfeeding maintenance and manufacturers and distributors’ representatives to search for a joint position and develop a memorandum (a voluntary agreement) on the need to comply with IC.

5. Training and educational work should be continued and activated on IC content and banned marketing methods used to promote BMS and supplementary goods among medical providers, decision makers, distributors and manufacturers.

6. An information letter from the MOH should be written and distributed among Ukraine’s health authorities operating under state administration, which would cite both the text of the Code and a brief summary of the monitoring results.

7. The MOH Edict on improvement of breastfeeding implementation and maintenance in Ukraine should include an item on the need for compliance with IC provisions at all health care facilities.

8. A short leaflet of address should be issued and disseminated at health care facilities on the contents of IC.

9. A round table should be organized with NGO leaders involved in women’s, family and children’s problems, with a presentation of the monitoring results and a discussion on publicity on complying with IC provisions as everyday practice.

10. Conditions should be established to encourage NGOs to develop, publish and distribute materials with anti-advertising for artificial baby food for children aged under six months, via the retail system and health care facilities.

The mechanism for control over compliance with IC provisions has to become monitoring of its compliance on a regular basis and at different levels (generally national, in some districts and settlements). The monitoring results have to be made public, and serve as an argument to make the right social and, in case of adopting a national legislation, legal redress against manufacturers of artificial infant feeding products violating the International Code.
It would be expedient to carry out monitoring using the IBFAN methodology and tools tested and adapted during this study, initiated by UNICEF and conducted by the Social Monitoring Centre. Thus, in the case of adopting national norms regulating sales of artificial baby food products that breach IC provisions, the monitoring tools will require proper adaptation.

When carrying out monitoring, one should take into account the need for a lot of preliminary work to train the personnel involved in data collection, processing and analysis, since all the staff will have to undergo intensive training not only on study methodology, but also know thoroughly and clearly understand the provisions of the International Code of Marketing of Breastmilk Substitutes, be able to distinguish and correctly register incidents of Code violations. The experience of the Social Monitoring Centre gained in conducting the study can be used both in training the personnel of other organizations, and for direct monitoring on IC compliance on a regular basis.

The development of proper national legislation and a mechanism of social control over compliance with IC provisions, in particular, conducting compliance monitoring on a regular basis will not require much outlay, but will depend on political decisions requiring the elimination of the desire to profit from breastmilk substitutes sales today, protecting the nation’s health for the future.
### 4. Project of the National Monitoring Programme on Compliance with the International Code of Marketing of BMS in Ukraine

<table>
<thead>
<tr>
<th>Object monitored</th>
<th>Sources / method of information collection</th>
<th>Frequency of data collection</th>
<th>Organization responsible</th>
<th>Possible executor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Health care facilities in Ukraine providing medical services to pregnant women and mothers of young children (maternity hospitals, child outpatient clinics and hospitals, women’s consultations)</td>
<td>• Health care facilities / observation, surveying (interviews) of staff, surveying (interviews) of patients (pregnant women, mothers, parents of children aged under 6 months) • Mothers and parents of children aged under six months / interviews</td>
<td>Every two years at national level (at the level of regional representation by particular oblasts)</td>
<td>Ministry of Health</td>
<td>Independent research organization with a network of personnel able to act as interviewers and observers</td>
</tr>
<tr>
<td>2. Retail sales outlets selling BMS and bottles and teats for artificial food</td>
<td>• Sales outlets / observation, surveying (interviews) of personnel, surveying (interviews) of customers (pregnant women, mothers, parents of children aged under 6 months) • Mothers and parents of children aged under six months / interviews</td>
<td>Every two years at national level (at the level of regional representation by particular oblasts)</td>
<td>Ministry of Health, Ministry of Economy, Committee for Consumer Rights Protection</td>
<td></td>
</tr>
<tr>
<td>3. Mass media</td>
<td>• Specialist periodicals for pregnant women and parents of young children • Women’s magazines, publications for the general public • TV and radio programmes for pregnant women and parents of young children • Internet resources available to Ukrainian consumers • Outdoor advertising / systematic analysis of materials</td>
<td>Once a year over 1-2 months for periodicals</td>
<td>Ministry of Health, Committee for Consumer Rights Protection, State Information Policy Committee</td>
<td>Press services of Ministries and agencies, primarily MOH, involved in media monitoring</td>
</tr>
<tr>
<td>4. Information materials from manufacturers on artificial infant feeding products for medical professionals</td>
<td>• Special publications for medical professionals (reference books, almanacs, etc.) Information materials from particular manufacturers (booklets, leaflets etc.) distributed among health workers / systematic analysis of materials, content analysis of blatant violations</td>
<td>On a continuous basis in terms of setting up a system of transfer of materials disseminated among medical professionals to the relevant press service or independent organization</td>
<td>Ministry of Health, Committee for Consumer Rights Protection, State Information Policy Committee</td>
<td>Press services Ministries, primarily MOH, involved in media monitoring, an independent research organization with experience of and opportunities to monitor the media</td>
</tr>
<tr>
<td>5. Information materials distributed among potential consumers (pregnant women, parents of children aged under six months)</td>
<td>• Information materials disseminated via the health care system • Information materials disseminated via BMS sales outlets • Information materials given to mothers / systematic analysis of materials, also content analysis of blatant violations</td>
<td>Once a year</td>
<td>Ministry of Health, Committee for Consumer Rights Protection, State Information Policy Committee</td>
<td></td>
</tr>
</tbody>
</table>
6. REFERENCES


