

ULAANBAATAR DECLARATION

on

Breastfeeding and Infant and Young Child Feeding

**One Asia Breastfeeding Partners Forum 8
ULAANBAATAR, MONGOLIA**

14-16 September 2011.

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The International Baby Food Action Network (IBFAN) is a 1998 Right Livelihood Award recipient. (www.ibfan.org) It consists of more than 200 public interest groups working together around the world to save lives of infants and young children and bring lasting change in infant feeding practices at all levels. IBFAN aims to promote the health and well-being of infants and young children and their mothers through protection, promotion and support of optimal breastfeeding and infant and young child feeding practices. IBFAN works for the universal and full implementation of *International Code of Marketing of Breast-milk Substitute and subsequent relevant World Health Assembly (WHA) resolutions*.

The One Asia Breastfeeding Partners Forum 8, held in Ulaanbaatar, Mongolia from 14 to 16 September 2011, brought together 42 participants from 16 countries and areas - Afghanistan, Bangladesh, Bhutan, People's Republic of China, Hong Kong SAR, India, Indonesia, Republic of Korea, Malaysia, Mongolia, Nepal, Philippines, Sri Lanka, Taiwan, Thailand and Vietnam.

The theme of the Forum was "Climate Change and Food Security".

The participants also noted that climate change affects people's health and food security, as well as their human rights and cultural rights, especially those related to food production, distribution and consumption.

The participants recognized the underlying causative factors of undernutrition and noted with concern the increasing medicalization of malnutrition, and the promotion of product-based "quick fix" solutions rather than addressing the underlying social determinants of malnutrition.

The participants were deeply concerned at the growing tendency to involve the commercial for-profit sector directly or indirectly through their lobby bodies or front organisations, which are floated in the guise of education or research, in negotiations and process of policy making for the food and nutrition sector, including infant and young child feeding as well as programme implementation.

Climate Change and Food Security

Climate change affects the health of the peoples of the world, including the health and well being of infants and young children.

Climate change affects food production in terms of what is produced, how it is produced, and how much is produced, and thus affects food security and the choices related to feeding of infants and young children.

Climate change is an issue of Human Rights, as it impacts the Human Right to a life with dignity, which includes access to adequate nutritious food and to quality health care. It is also an issue of social justice, as its impact is felt most strongly by the most vulnerable sections of society, including women and children.

Climate change impacts the cultural ways in which people relate to food including sharing of food within the household as well as feeding practices, particularly feeding of infants and young children.

The production, distribution and feeding of infant formula contributes significantly to greenhouse gas emissions and global warming. The various processes involved in its manufacture, including its transport, use large amounts of non-renewable energy, use unacceptably large amounts of natural resources of land, water, and forests, produce non-recyclable and non-biodegradable material, create toxic byproducts, and generate tonnes of waste. In addition, use of formula contributes to the unacceptable and high levels of infant and young child morbidity and mortality.

On the other hand, Breastfeeding is zero waste, ecologically sound, is available at all times at the right temperature, has a minimal carbon and water footprint, and promotes health and nutritional well-being in infants and young children and it contributes to food security for the first two years in most significant manner.

Inappropriate Promotion of Baby Foods

The World Health Assembly Resolution 63.23 calls upon governments and baby food manufacturers to end all kinds of "inappropriate promotion" of foods for infants and young children, particularly the use of health and nutrition claims. However, the WHA has not defined what constitutes "inappropriate promotion". According to

one definition in this context, promotion means “...to employ directly or indirectly any method of encouraging any person to purchase or use breastmilk substitute, feeding bottle or infant food. Participants at IBFAN Breastfeeding Partners Forum after having shared methods of promotion adopted by the manufacturers and convinced that it is impossible to put any promotion under ‘appropriate promotion’ as it leads to unnecessary use of a food for infants and young children. They specifically listed out the categories of promotion that could be included in the definition of “inappropriate ” promotion as in box given below

Box 1 - Elements of Inappropriate Promotion

1. Public display of commercial foods for infants and young children, display of placards and posters in public places/health facilities.
2. Projection of such foods as life savers, replacement of natural/homemade foods, use of health and nutrition claims on labels or advertisements, calling it essential or as good or close to human milk, etc.
3. Any form of promotion to the general public through any media, including advertising, use of celebrities, setting up baby mother clubs, online promotions, and offering any kind of incentive to the public (gifts, discounts, free samples, free home deliveries, etc.)
4. Conducting of nutrition education programmes for people or in any manner, including virtual programmes, Sponsoring in any manner of conferences, seminars, workshops, continuing education programmes for health workers/professionals, including medical and nursing students by institutes, foundations, trusts, and similar initiatives/front organisations floated by the baby food industry.
5. Giving of gifts, commissions, and other forms of incentives (including travel sponsorship, educational/research sponsorship, etc.) to any member of the health delivery system or the governance system.

Prevention and Treatment of Undernutrition

The food security of infants and young children depends entirely on the capacity of the mother to provide exclusive breastfeeding for the first six months and the presence of household food security to sustainably provide adequate and nutritious complementary foods after that along with continued breastfeeding.

Under-nutrition is the result of inadequate or inappropriate feeding of infants and young children, rooted in lack of unbiased accurate information or on lack of access to food, quality health care, clean drinking water, and sanitation facilities. Commercial baby milk and food manufacturers are finding new ways of promotion for influencing the families and health workers and health professionals in their choices with regard to infant feeding practices.

At the same time, there is a concerted move towards medicalising solutions to malnutrition, both its prevention and its treatment, with the use of fortified commercial foods and ready –to-eat foods, therapeutic and otherwise, ignoring community-based approaches using locally available food and underlying social and economic causative factors.

Conflict of Interest

The World Health Organization (WHO) defines a potential conflict of interest as “A conflict of interest can occur when a Partner’s ability to exercise judgment in one role is impaired by his or her obligations in another role or by the existence of competing interests”.¹

Participants noted the role of the for-profit sector in building research evidence on the need/efficacy of their products.

Participants further noted with concern the existence of conflict of interest situations in the interactions between professional bodies and/or international organisations on the one hand and the industry on the other, in the areas of child health, food and nutrition.

Participants also were concerned with the growing tendency of governments and international organisations to engage the for-profit sector or business interest NGOs (BINGOs) in decision making processes in the areas of health, food and nutrition, including infant and young child feeding, without differentiating them from public interest NGOs.

Deeply concerned, the participants of the Forum call upon all governments, UN organisations especially WHO, UNICEF, FAO, ILO, and international organisations like ADB and World Bank, to:

1. Ensure that enhancing optimal breastfeeding rates is put at the centre of development agenda, and mitigation of climate change by ensuring that breastfeeding and infant and young child feeding is dealt as a coordinated activity in the child health /nutrition sector with adequate budget allocation.
2. Clearly articulate the scope of “inappropriate promotion” of baby foods to include the elements given in Box 1.
3. Strictly monitor and implement the International Code for Marketing of Breastmilk Substitutes and related subsequent World Health Assembly Resolutions, in particular the Resolution 63.23, as well as national legislations, to end all forms of promotion of commercial foods for infants and young children.
4. Develop legally binding guidelines and create national mechanisms for preventing, identifying and managing conflict of interest in public policy making and research in the areas of food, nutrition and health. Article 5.3 of the WHO Framework Convention on Tobacco Control provides a model framework².
5. Take immediate steps to achieve MDG 4 on child survival and prevent child malnutrition through 100% coverage of key interventions including enhancement of rates of optimal breastfeeding, infant and young child feeding practices, the provision of potable water and sanitation facilities, accessible health care and childcare support systems that are free from any commercial influence.
6. Take steps to ensure that the primary strategy to prevent and/or treat all types of malnutrition is based on local indigenous foods and is free from any commercial influence.
7. Create the enabling environment for ALL women to practice optimal infant and young child feeding through special measures such as maternity leave of at least six months, wage compensation, paternity leave, provision of crèche and child care facilities in the community and the work place, provision of adequate breastfeeding and childcare breaks at the work place, financial and nutritional support for women where needed.

To further the above recommendations and to intensify our collective efforts, members of the International Baby Food Action Network (IBFAN) Asia pledge to continue advocacy at national and international levels for the following actions:

1. Work towards linkages of climate change to the use of artificial feeding vs. breastfeeding and commercial foods vs. local homemade foods for complementary feeding including creating a strong demand for governments to collect and provide data on use of artificial feeding with animal milk or commercial foods.
2. Raise awareness and do advocacy on the issue of conflict of interest with the general public, civil society organisations, professional bodies, governments, and international organisations.
3. Work towards comprehensive prevention and management of child malnutrition with the use of local, indigenous foods as against the current paradigm of ready to use foods.

¹ World Health Organization. Roll Back Malaria Partnership: Conflict of interest policy and procedure. Available: <http://www.rbm.who.int/docs/constituencies/RBMcoiPolicy.pdf>

² WHO (2003) WHO Framework Convention on Tobacco Control http://www.who.int/fctc/text_download/en/index.html