



## **SUBMISSION REGARDING THE AUTHORISATION APPLICATION FROM INFANT NUTRITION COUNCIL LIMITED RESTRICTING ADVERTISING AND MARKETING OF FORMULA PRODUCTS**

**To:** The Commerce Commission

**Details of Submitter:** WellSouth Primary Health Network

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**Date:** 7 September 2023

**OIA:** We do not object to the release of any information from our submission

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### **Introduction**

Thank you for the opportunity to comment on the Commerce Commission's determination for reauthorising restrictive trade practice of infant formula for children aged up to 12 months. This submission was developed by the Health Promotion Team at WellSouth Primary Health Network (WellSouth).

WellSouth is a charitable trust funded by Te Whatu Ora Health New Zealand to provide primary health care services to residents enrolled with general practices in Otago and Southland. WellSouth works to reduce health disparity and improve access to health care when it is needed. This includes first contact support to restore people's health when they are unwell, alongside a range of equity focused programmes to improve health care access and affordability, and to promote and maintain good health and wellbeing. The health promotion programme facilitates the process of enabling people to

increase self-determination and control over, and to improve, their health. One aspect of health promotion is to advocate for healthy social, cultural and physical environments and communities.

### General Comments

WellSouth supports the application from the Infant Nutrition Council Limited for reauthorisation to continue the current restrictive trade practices arrangements that restrict advertising and marketing activities of infant formula up to 12 months of age. WellSouth also applauds their minor changes to the version of the INC Code included in their application, to employ more inclusive and gender-neutral language.

Breastfeeding is safe, clean, and convenient, and breast milk is unparalleled in providing the ideal food for the healthy growth and development of babies and infants. Breastfeeding imparts positive impacts on all aspects of hauora (health) for both mother and child<sup>1</sup>, including taha tinana (physical health), taha whānau (emotional and social health), and taha hinengaro (mental health)<sup>2</sup>. WellSouth believe that public health matters should be given priority over any commercial gain an industry may experience. There is also a growing body of evidence promoting breastfeeding as more economically beneficial over breastmilk substitutes in both developing and developed countries, with interventions improving breastfeeding practices being cost-effective with low cost-benefit ratios<sup>2,3,4,5</sup>.

Accordingly, WellSouth strongly supports the World Health Organisation's (WHO) recommendation that women exclusively breastfeed up to six months of age, with the continuation of breastfeeding alongside the introduction of appropriate complementary foods up to two years of age or beyond. WellSouth fully supports the Ministry of Health assertion that impartial information free of commercial influence is essential for enabling parents and carers to make the best possible feeding choice, and for being fully supported to do so. Reauthorisation to continue the restricted trade

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<sup>1</sup> World Health Organisation. (1981). *International Code of Marketing of Breast-milk Substitutes*. Geneva: World Health Organisation.

<sup>2</sup> Smith, J., Galtry, J., & Salmon, L. (2014). Confronting the formula feeding epidemic in a new era of trade and investment liberalization. *Journal of Australian Political Economy*, 73:132-170

<sup>3</sup>Kent, G. (2015). Global infant formula: monitoring and regulating the impacts to protect human health. *International Breastfeeding Journal*, doi:10.1186/s13006-014-0020-7. Article URL: <http://dx.doi.org/10.1186/s13006-014-0020-7>.

<sup>4</sup> Holla, R., Iellmao, A., Gupta, A., Smith, J.P., & Dadhich, J.P. (2015). Investing in breastfeeding – the world breastfeeding costing initiative. *International Breastfeeding Journal*, doi:10.1186/s13006-015-0032-y. Article URL: <http://dx.doi.org/10.1186/s13006-015-0032-y>.

<sup>5</sup> Victora CG, Bahl R, Barros A et al. (2016). Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effects. *Lancet*, 387:475-490.

practice embodied in the current INC Code would support Aotearoa New Zealand's on-going efforts and work underway towards meeting international standards and fulfilling our obligations under the WHO's *International Code of Marketing of Breast Milk Substitutes*<sup>1</sup>.

WellSouth services and programmes are aligned with the Ministry of Health's objectives to increase the prevalence and duration of breastfeeding<sup>6</sup>. This is based on the well-established evidence that breastfeeding provides optimal nutrition, lowers the rates of infections and disease, and breastfed children are less likely to develop obesity, and diabetes later in life<sup>6,7</sup>. In the Southern region that WellSouth serves, 74% of infants in 2022 were exclusively breastfed upon discharge from hospital, a decline of -3% from 2021<sup>8</sup>. Breastfeeding rates (exclusive and fully) remain steady on 74% at six weeks before dropping off to 59% at three months of age. However, breastfeeding rates for both six week and three month indicators are lower for Māori infants (71% and 43% respectively), Pacific infants (62% and 52% respectively) and infants in highly deprived Quintile 5 areas (64% and 37% respectively)<sup>9</sup>.

A 2022 WHO and United Nations Children's Fund (UNICEF) joint research report emphasises the continued risk that formula milk marketing and advertising poses on infant and young children's health<sup>10</sup>. There is strong evidence showing formula milk marketing practices and tactics continue to systematically disrupt informed decision-making and undermine breastfeeding. The myriad of marketing channels utilised to gain access to expectant or new parents negatively affects breastfeeding rates, both increasing sales of breast milk substitutes, and increasing the likelihood parents will stop breastfeeding sooner<sup>2, 3,10,11</sup>.

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<sup>6</sup> Ministry of Health. (2007). *Implementing and Monitoring the International Code of Marketing of Breast-milk Substitutes in New Zealand: The Code in New Zealand*. Wellington: Ministry of Health

<sup>7</sup> World Health Organisation. (2017). *The International Code of Marketing of Breast-milk Substitutes: Frequently Asked Questions (2017 Update)*. Geneva, Switzerland: World Health Organization. Licence: CC BY-NC-SA 3.0 IGO.

<sup>8</sup> Baby Friendly Aotearoa New Zealand (NZBA). (2022). *National Infant Feeding Data at Discharge: Report 2022*. Accessed 07 September 2023, <https://www.babyfriendly.org.nz/baby-friendly-aotearoa/breastfeeding-data/2022#c451>.

<sup>9</sup> Ministry of Health. (2023). Well Child/Tamariki Ora Quality Improvement Framework: March 2023 reporting period. Wellington: Ministry of Health

<sup>10</sup> World Health Organization and United Nations Children's Fund (UNICEF). (2022). *How the marketing of formula milk influences our decisions on infant feeding*. Geneva, Switzerland: World Health Organisation and UNICEF. Licence CC BY-NC-SA 3.0 IGO.

<sup>11</sup> Rosenberg, K. D., Eastham, C. A., Kasehagen, L. J., & Sandoval, A. P. (2008). Marketing infant formula through hospitals: the impact of commercial hospital discharge packs on breastfeeding. *American Journal of Public Health, 98*(2), 290.

### **Specific Comments**

Part 1: Section 21. It is important to note that the reauthorisation will only apply to members of the Infant Nutrition Council, of which membership is voluntary. Breastmilk substitutes are produced and marketed through a global system<sup>3,10</sup>. Given the increasing globalisation of the industry and the increasing globalisation of trade agreements between countries, WellSouth remains concerned that if the government does not expand these marketing restrictions to include all formula companies trading in New Zealand, there is potential for non-member companies, outside of the INC Code remit, to continue to exploit the public. This concern is heightened by the significant increase in online and social media channels the public are exposed to everyday, but which often can remain outside of traditional advertising and marketing regulations.

### **Conclusion**

In conclusion, WellSouth strongly supports the reauthorisation of the Infant Nutrition Councils application to continue the current arrangements to restrict the marketing of breastmilk substitutes up to the age of 12 months, but would like to see this expanded beyond the voluntary members of the Infant Nutrition Council to all formula companies trading in New Zealand.