

# Submission to the Commerce Commission on the Infant Nutrition Council's 2018 application for authorisation of a code change.

By Julie Fogarty, private citizen.

The Commerce Commission Authorisation Guidelines (2013) state the Commission can:

"authorise the following conduct or provisions of agreements that would otherwise breach the Commerce Act:..

12.2 provisions of agreements between any persons that have the purpose, or effect or likely effect, of substantially lessening competition in a market (section 27)"

There is no solid evidence that authorising the agreement proposed in this INC application will have either the purpose, effect, or likely effect of substantially lessening competition in a market. In fact, changes are proposed which, based on prior INC member interpretations of their marketing-ethics benchmarks, could actually see an increase rather than reduction of competition against breastfeeding.

As such, the INC application does not qualify for authorisation.

The application offers no evidence supporting how the formula industry "will have the ability and incentive to increase those marketing activities in future", if this application is not authorised (claimed in part 10). The World Health Assembly Resolution behind the Ministry of Health's 2017 letter asking the INC to extend their code to cover formula for ages 0 - 12 months, actually asks for marketing restrictions on any milk's marketed for children under three years (1). Also, regarding the impetus for this application stated at part 66, a new government has come in since that 2017 Ministry of Health letter was written. This application offers no indication of how the current government wishes to address the relevant agreements made in the 2016, and now 2018, World Health Assemblies - which call for promotional bans on any commercial milks marketed for babies under 36 months, not just those under 12 months. The application does not give that fact about the WHA resolutions, (e.g when it mentions them in part 66).

The Commerce Commission should strongly weigh up the global ethical standards of marketing for this industry - the UN-agreed (at WHA 2016) Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children: Implementation Manual\*.

Neither promotion of commercial complementary foods for babies under six months, promotion of commercial milks specifically for children under three years, dissemination of commercially biased material to parents, or the creation of conflicts of interest (through industry sponsorship of health professionals/organisations) should occur, by those global standards - but they all occur in NZ.

This all keeps infant formula (which will be the sole source of nourishment available for a proportion infants) unnecessarily overpriced, it undermines the right of all families to related infant and maternal health and nutrition information that's free from commercial influence, and it undermines breastfeeding – a gifted food/service from women which contributes to the NZ economy as food (goods), sensory, facial/oral and cognitive development (services), and a morbidity/mortality reducing public health and well-being measure.

As that Implementation Manual for governments points out:

*"Appropriate information for families should be accurate and unbiased. The information from baby food companies serves the interests of selling products, and thus cannot be independent and unbiased. Moreover, the primary responsibility for providing such information to mother and other caregivers lies with the government, NGOs and healthcare providers."*

\* found at <http://apps.who.int/iris/bitstream/10665/260137/1/9789241513470-eng.pdf?ua=1>

The March 2018 INC application indicates that the three multinationals Danone (Nutricia), Nestle and Heinz command 97% of the relevant market (part 84); all other INC members must account for 2% of the market, as non-INC members account for 1% (part 83). The only one of those three major players that the application mentions as advertising follow-on formula (in part 78), is Heinz, with a money back guarantee and discount coupons offered on its website (part 87(a)) - so not anywhere near the conventionally used, broad public arenas of advertising. Heinz has only an 11.7% share of the follow-on formula market, according to part 91 of the application. Toddler milk advertising, which according to WHA resolutions shouldn't happen, is by far the mainstay product used for formula-range promotion in NZ (see APPENDIX 4)

Even if the INC hadn't snuck in the loopholes they're trying to add, follow-on formula promotion by INC members (because most is done by third parties, retailers etc., who are exempt from the INC Code's scope) – and especially follow-on formula advertising functioning alone as brand promotion without toddler milk promotion accompanying it too – is so minimal that a loophole-free proposed change would not lessen competition.

Regarding the loopholes that are in the proposed INC code change:

The application claims at part 25: "The nature of the marketing restrictions will not substantively change. The applicant proposes to amend the definition of "infant formula" in the INC Code so that the term will include all formula for babies up to 12 months of age (instead of just babies aged up to 4-6 months, as is the case under the current version of the Code). This will, in effect, extend the application of the existing restrictions to follow-on formula as well."

This is misleading. The application proposes more than just a change of infant formula's definition to "include all formula for babies up to 12 months of age".

Contrary to what the INC application implies at part 25, the application's proposed INC Code of Practice presents a complete rewording of (rather than just an age-change addition to) its scope and that offers loopholes similar to those in the INC's current (and previous) follow-on formula marketing guidelines - <http://www.infantnutritioncouncil.com/wp-content/uploads/2014/07/NZ-FOF-marketing-guidelines-140701.pdf> - (the INC application failed to mention, particularly in part 10, the existence and wording of the current guidelines in this application) that, judging by my own research on and testing of the ASA's follow-on formula advertising monitoring some years ago (see APPENDIX 1), are set up to allow promotion of the product in question as long as the marketer is not literally calling the product a breastmilk substitute within said promotional material. The 2018 INC application opens things up so that it's not simply the case that infant formula and follow-on formula are automatically in scope. The products must also be presented as breastmilk substitutes within the marketing of concern; an easily avoided step already conventional in promotions of follow-on and toddler milk.

Screenshot of main loophole proposed in the INC Application of March 2018:

ensuring the proper use of breast milk substitutes, when they are necessary, on the basis of adequate information and through appropriate marketing and distribution."

**Article 2 Scope of Code**

*This Code applies to the marketing in New Zealand of infant formula when such products are marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breast milk. It also applies to their quality and availability, and to information concerning their use. (adapted from WHO Code Article 2), ~~as suitable to provide the sole source of nourishment for an infant or replace part of a breastfeed. It also applies to quality and availability and to information concerning its use. Follow-on formula for infants over six months of age is excluded from the provisions of the INC Code of Practice.~~*

**Article 3 Definitions**

For the purposes of the INC Code of Practice the following definitions apply:

**Advertisina**

The communication to the general public of an

This could well mean that INC members start up more\* promotion of infant formula for ages 0-6 months too. (\* as they already do still advertise stage 1 formula - see examples in APPENDIX 3). And it could happen quite free from scrutiny. Monitoring of advertising against this INC Code only can happen when public complaints are made. The Ministry of Health cannot initiate it. And with:

- 1) public knowledge of this complex voluntary code being minimal to start with;
- 2) this being an age of online and social media advertising options that allow expectant and new mothers to be individually targeted by ad activity not seen by the general public;
- 3) complaint-making on this matter an onerous endeavour for citizens;
- 4) complaint outcomes never in the public eye;
- 5) the legal clout of the market-dominating multinationals strong enough for them to usually successfully escape being found in breach, as is shown in the APPENDIX 1, 2, and 3 –

– then increased infant formula advertising could continue for some years unimpeded.

The Proposed INC Code does not have "a materially expanded scope" as claimed by the INC as a reason for the Commerce Commission revoking the current Code in part 70. It has a materially narrowed scope.

Further, the proposed new INC Code narrows down the definition of marketing personnel, opening up opportunities for a broader group of people to be involved in marketing of infant formula on behalf of INC members.

The proposed new code also proposes changes to Article 8.1 that mean marketing personnel no longer have responsibilities under the code, only the company does - i.e. personnel can breach the INC code, but as long as the marketer (INC member company) told them about the company's responsibilities, Article 8.1 isn't breached. A proposed change to Article 8.2 looks set to allow marketing personnel to breach that code aspect as long as the act wasn't formalised in their job description. And Article 8.3 is an entirely new addition, formalising already utilised code-interpretation loopholes that see formula companies seeking to advise families on health (nutrition) matters, when the 1981 International Code of Marketing of Breastmilk Substitutes (which the INC Code mimics in a corrupted form), and the 2016 WHA Resolution that updates it, say that should not happen.

approved form and only for the purpose of professional education and education of  
for the education of mothers and carers who have made the informed decision to  
provide infant formula to their infants

**Article 8 Persons engaged in marketing**

**8.1** Marketers should inform all each of their marketing personnel of the provisions of the INC Code of Practice and of the marketer's responsibilities under it.

**8.2** Marketing personnel should not as part of their job responsibilities perform educational functions about infant formula to pregnant women or mothers and carers of infants, unless requested to do so by and under the supervision of the health practitioner.

**8.3** This Article does not restrict marketers from providing information or educational equipment or material in accordance with Article 4.

**Article 9 Labelling**

**9.1** Labelling of infant formula should comply with the requirements of the Australia

Article 4 in the International code covers information that the health sector should cover for new mothers when it discusses infant feeding with them, or that formula companies should cover when they provide factual information to the health sector. The INC's corrupted version of the International code has them very proactively informing mothers (in ways no other food-product or medical companies employ), grinding "Breast is Best" into frustrating trite in the process. The financial cost of this marketing-engagement-that-should-not-happen falls on families reliant on formula for their infants.

This industry is not committed to protecting breastfeeding, as claimed to be an impetus for this application, in part 66. They cannot be assumed to be acting in good faith on this proposal. Their ability to inform consumers needs to be halted, not expanded as proposed in the Article 8 changes.

I have previously (in 2017) submitted examples of misleading, breastfeeding-undermining formula industry advice to the Commerce Commission. Following that, the Commerce Commission communicated to me via letter dated 28<sup>th</sup> February 2018 about, in their own words: "The fact that the conduct influences mothers' breast milk production." As the Commerce Commission's deliberations on the INC application of 2015 weighed up public health cost savings of when breastfeeding occurs, the detriments likely if the 2018 INC application is authorised need serious consideration.

I will provide a few more examples of misleading marketing material in APPENDIX 2 of this document.

Further evidence the industry is not acting in good faith with this application, and is not genuinely committed to protecting breastfeeding, is there in how they state at part 55 (highlighting is mine):

*"Members of the INC recognise the importance of the promotion of breastfeeding as providing the best possible nutrition for infants and young children. This is reflected in the requirement set out in the INC Code of Conduct for each member of the INC to display the following statement on their websites "Breast milk is the normal way to feed a baby and is important for baby's health. Professional advice should be followed before using an infant formula. Introducing partial bottle feeding could negatively affect breastfeeding. **Good maternal nutrition is preferred for breastfeeding and reversing a decision not to breastfeed may be difficult.** Infant formula should be used as directed. Proper use of an infant formula is important to the health of the infant. Social and financial implications should be considered when selecting a method of feeding."*

However, the Code of Conduct actually only says they need a disclaimer to the "effect" of that statement (see APPENDIX 7 of the INC application). And I have had at least one INC member state in a MoH complaint response that it is the INC Code of **Practice** disclaimer - not the Code of **Conduct** disclaimer - that they must follow. This sits on page 16 of the current INC Code of Practice (a page that was left out of the version given in APPENDIX 1 of this INC application) and reads:

*"Breastfeeding provides babies with the best nutrition and is preferred whenever possible. Professional advice should be followed before using an infant formula. Introducing partial bottle feeding could negatively affect breastfeeding. **Good maternal nutrition is ideal for breastfeeding and reversing a decision not to breastfeed may be difficult.** Infant formula should be used as directed. Proper use of an infant formula is important to the health of the infant. Social and financial implications should be considered when selecting a method of feeding."*

[http://www.infantnutritioncouncil.com/wp-content/uploads/2013/05/48511-INC-A5-booklet\\_FA-web.pdf](http://www.infantnutritioncouncil.com/wp-content/uploads/2013/05/48511-INC-A5-booklet_FA-web.pdf)

Now, here is Ministry of Health advice relevant to the highlighted parts above:

[https://www.healthed.govt.nz/system/files/resource-files/HE1306\\_Feeding%20your%20baby%20infant%20formula.pdf](https://www.healthed.govt.nz/system/files/resource-files/HE1306_Feeding%20your%20baby%20infant%20formula.pdf)

*"If you decide not to breastfeed or to stop breastfeeding, **it is possible to restart but it will be difficult.** For some women, establishing breastfeeding is more difficult than for others, but with the right support, most mothers can breastfeed. **Healthy eating while breastfeeding is important, but if you are worried about the quality of your diet, don't let that stop you from breastfeeding.**" (page 16)*

<https://www.health.govt.nz/system/files/documents/publications/food-and-nutrition-guidelines-preg-and-bfeed.pdf>

*"The emphasis on achieving and maintaining a nutritionally adequate diet is important, and a poor maternal diet should be improved during pregnancy and breastfeeding to maintain the mother's health. However, **a poor diet should not be seen as a barrier to breastfeeding. Women should be confident that they can still breastfeed even if their diet is not optimal,** because the nutritional status of a lactating mother has a minimal effect on milk volume unless she is actually malnourished (Riordan 2005)." (p2)*

“A woman’s diet will not usually limit her ability to produce sufficient breast milk (with perhaps the exception of severe energy restriction), because **maternal nutrition has only a modest effect on breast milk production and composition.**” (Riordan 2005). (p11)

And crucially, here are the actual disclaimer statements on the marketing websites of the three multinationals commanding 97% of the NX formula market:

From Danone (Nutricia):

“... **In readying for and during breastfeeding, it's important that mums eat a healthy, balanced diet....Introducing bottle feeding either partially or exclusively, may reduce the supply of your own breast milk, which makes reversing the decision not to breast feed difficult...**”

<https://www.karinourish.co.nz/products/0-6-month-range/karicareplus-infant-formula-stage-1/>

“... **In readying for and during breastfeeding, it's important that mums eat a healthy, balanced diet...Introducing bottle feeding either partially or exclusively, may reduce the supply of your own breast milk, which makes reversing the decision not to breast feed difficult..**”

<https://www.aptanutrition.com.au/our-products.aspx>

“.. It is **important that, in preparation for and during breast feeding, you eat a healthy, balance diet... reversing the decision not to breast feed is difficult...**”

<https://www.mumstore.co.nz/>

From Nestle:

“..During pregnancy and **after delivery, a mother’s diet should contain sufficient key nutrients...A decision not to breast-feed, or to introduce partial bottle-feeding, could reduce the supply of breast-milk. Once reduced, it is difficult to re-establish..**”

<https://www.meandmychild.co.nz/>

From Heinz:

“.. **A healthy balanced diet is important to help mothers prepare for and maintain breastfeeding. Introducing partial bottle feeding may adversely affect breastfeeding by reducing the supply of breast milk and reversing a decision not to breastfeed is difficult..**”

<https://www.forbaby.co.nz/Baby-Foods-Products/Infant-Formula-Toddler-Milks>

None of them support women being “**confident that they can still breastfeed even if their diet is not optimal**”.

None of them support women fully registering it’s **possible** to return to full breastfeeding, or only **may** be difficult.

And we haven’t even got past the initial paragraph of disclaimer into breaking down how all the website content of each corporation might undermine breastfeeding.

Even the INC website’s FAQ webpage unfairly says: “**Maternal diet is important and can have an effect on breast milk.** More information about healthy eating for breastfeeding mothers can be found

at the following website: Australia – Healthy Eating Guidelines for Breastfeeding Women New Zealand – Eating for Healthy Breastfeeding Women/Ngā Kai Totika mā te Ūkaipō”  
<http://www.infantnutritioncouncil.com/resources/faqs/>

Further evidence the INC is not committed to protecting breastfeeding, as claimed to be an impetus for this application, in part 66.

And as claimed in part 56: “Recognition of the importance of the promotion of breastfeeding as providing the best possible nutrition for infants up to 12 months old is further reflected by the INC's desire to have the INC Code extended to apply to follow-on formula.”

Come on. Just look at the Ministry of Health letter at APPENDIX 3 of the INC application. The government began asking nicely for the industry to stop promoting follow-on formula at least a decade ago now, according to this application. Avoiding promotion of any milks targeted at under threes is the global, UN-level standard. And the physiologically normal timeframe of human self-weaning from breastfeeding is between ages 2.5 years and 7 years.

In fact, the 2004 Government review of our International Code interpretation looked at getting the industry to cease promotion of formula, only to meet industry-pushed technical loopholes.

<https://www.health.govt.nz/system/files/documents/publications/breastmilk.pdf> (pages 11 and 14)

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*The Ministry is required to use the definitions in the Australia New Zealand Food Standards Code as this is the legal and regulatory framework for food in New Zealand. The Ministry can provide further guidance on the relationship of the definitions with the WHO Code, but must ensure there is no conflict with the Australia New Zealand Food Standards Code.*

*The Australia New Zealand Food Standards Code defines:*

- an ‘infant’ as ‘a person under the age of 12 months’
- ‘infant formula’ as ‘a product represented as a breast-milk substitute for infants and which satisfies the nutritional requirements of infants aged from birth up to four to six months’
- ‘follow on formula’ as ‘a product represented as either a breast milk substitute or replacement for infant formula and which constitutes the principal liquid source of nourishment in a progressively diversified diet for an infant aged from six to 12 months’.

*“The Ministry sought a legal opinion about whether follow on formula falls within the scope of the WHO Code. It was clarified that follow on formula is a ‘milk product’ as defined in the Code, but the product must also be marketed or represented as suitable for use as a breast-milk substitute to fall within the scope of the code. The NZIFMA made it clear in its submission to the Ministry that ‘follow on formula is not marketed or sold as a breast-milk substitute. It is marketed as an alternative to cows’ milk for infants who are no longer being breastfed’. However, follow on formula is used as a breast-milk substitute, so the Ministry believes that care needs to be taken with the marketing of follow on formula in New Zealand.”*

That split Food Standards definition of follow on formula, with its “either”, exists to cover the long-established difference between Australia and New Zealand’s 1981 International Code interpretations.

The composition requirements don’t vary between the two countries.

Same-species milk is the physiological norm for all baby mammals. Anything else is a substitute.

NZ’s formula industry has avoided ceasing promotion of all its breastmilk substitutes, when cessation is asked by the 1981 International Code, for thirty seven years, by twisting the wording and ignoring the spirit of that Code. It is not committed to protecting breastfeeding. Such bad-faith activity from the formula industry is why the 2016 WHO/WHA Guidance on Ending Inappropriate Promotion of Foods for Infants and Young Children was produced.

Part 53 and Part 87 (a) give further proof the INC misinforms about formula's capabilities and is not committed to protecting breastfeeding.

Part 85. Of the application covers "How competitors compete:

86. *Although there are regulatory constraints on the composition, labelling and marketing of follow-on formula, within those constraints the market is dynamic and innovative.*

87. *In particular, market participants compete on the following non-price factors:*

*(a) participants may use specific approved ingredients to improve growth and development outcomes in infants. Participants compete by using varying ingredients in order to better mimic the composition or developmental outcomes of breast milk;..."*

And Part 53 of the application says – "A primary focus of research and development is on producing infant formula products that contain ingredients found in breastmilk and more closely match the outcomes of breastfed infants."

These are misleading statements. The following points are evidence that INC member product development is primarily focused on profit growth over infant health.

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<https://changingmarkets.org/wp-content/uploads/2017/10/Milking-it-Final-report-CM.pdf>

From the Changing Markets "Milking It" report released late last year (which deals with the two most dominant corporations on the NZ formula market, Danone and Nestle):

*"Key findings*

*In this report, we have reviewed over 400 products on sale in a variety of countries across the world from the top four infant formula manufacturers: Nestlé, Danone, Mead Johnson Nutrition and Abbott. Our study focused on the most popular types of cows'-milk-based powdered milk formula for infants under 12 months old in 14 markets: the US; the UK; Germany; France; Poland; Bulgaria; Spain; The Netherlands; mainland China and Hong Kong; Indonesia; Australia; New Zealand and South Africa..*

*".. This report exposes the lack of scientific underpinning behind the products BMS manufacturers put on different markets. Manufacturers are constantly placing new formula products on the market with a variety of different claims. Often, they claim that their products are informed by the 'latest developments in nutritional science'. However, the wide variety of products on sale within and between countries and the efforts of companies to push expensive premium products, especially to high-growth Asian markets, call such claims into question.*

*'Our research shows that manufacturers behave very differently in different markets, and that often their products are closer to those of their direct competitors within the same market than their own products elsewhere. There is evidence that such decisions are primarily informed by market research instead of scientific or health considerations. We have identified companies' very sophisticated use of market research and social media to study consumer preferences in this area. Such research seems to be primarily focused on consumer affordability and willingness to pay, as there is no clear scientific justification for the very large price differences observed within brands on each market and also within brands across different countries.'*

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The Ministry of Health States at <https://www.health.govt.nz/system/files/documents/publications/food-and-nutrition-guidelines-healthy-infants-and-toddlers-revised-dec12.pdf> :

*"Different or more expensive formula is not necessarily better than regular or standard formula for the infant unless a health practitioner specifically recommends it." (page 38)*

*“Infant formula manufacturers are developing formula that contains additives similar to some of the components of breast milk, but it cannot be assumed that their inclusion in infant formula conveys the same benefits to the infant as they convey when in breast milk” (page 38)*

*“If an infant is thriving on regular or standard infant formula and complementary foods, there is generally no advantage in changing to a follow-on formula. The practice of introducing follow-on formula, instead of standard infant formula, in the second six months of life together with complementary foods is unnecessary (World Health Assembly 1986).” (page 37)*

(An indication that follow-on formula exists as a marketing tool for formula promotion).

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From the global *Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children: Implementation Manual* states at <http://apps.who.int/iris/bitstream/10665/260137/1/9789241513470-eng.pdf?ua=1> page 2

*“... scientific studies and reports provided evidence from numerous countries that foods are being sold as suitable for introduction before six months, that breast-milk substitutes are being indirectly promoted through association with complementary foods, and that **inaccurate and misleading claims are being made that products will, for instance, improve a child’s health or improve intellectual performance...**”*

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With the current Food Standards review on, the INC has submitted that they don’t even want the Food Standards Infant Formula Standard to provide and guidance or requirements on the type of sugar (a most basic component of infant nutrition) that can be used, when the International Codex Standard does provide such guidance (e.g. Codex recommends lactose for animal-milk based formulas. Lactose aids the absorption of other nutrients, compared to other sugars (see <https://www.health.govt.nz/system/files/documents/publications/food-and-nutrition-guidelines-healthy-infants-and-toddlers-revised-dec12.pdf>).

From the INC Submission to Food Standards at <http://www.infantnutritioncouncil.com/wp-content/uploads/2016/05/P1028-Review-of-IF-INC-Sub-v17-FINAL.pdf> :

*“145. Carbohydrate source: Standard 2.9.1 does not include any provisions relating to the source of carbohydrate in infant formula. Codex STAN 72-1981 includes guidance on the type of digestible carbohydrate to be used but this is not mandatory. Q1.8 What issues, if any, do you have with the current approach to regulation of the source of carbohydrate in infant formula? Please provide your rationale. 146. INC Response: **INC supports maintaining the current approach in Standard 2.9.1 not to include provisions relating to carbohydrate source. There is no failure in relation to safety and no trade barrier relating to this area.**”*

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The fact is that any infant formula ingredient that is proven to aid growth and development is made a compulsory ingredient. The optional ingredients are ones that at least been assessed for safety by Food Standards Australia New Zealand (FSANZ), but are not proven beneficial.

The INC has made press releases this year, calling for an increased ability to inform consumers of the compositional benefits of their premium products. <http://www.infantnutritioncouncil.com/press-release-11-may-2018/> and <http://www.infantnutritioncouncil.com/press-release-17-may-2018/>.

In <http://www.infantnutritioncouncil.com/press-release-17-may-2018/> (Press release: 17 May 2018



Headlined “*Scientific Innovation Giving Australian Mothers Informed Choice*”)

The INC say:

*“Claims by academics that premium brands are a waste of money, don’t contain additional beneficial ingredients, and that manufacturers make up scientific-sounding terms to make their products sound better are ludicrous and not borne out by the facts...”*

*..These ingredients can become mandatory under the Food Standards code once their efficacy is proven through scientific evidence and when the Infant Formula Standard is reviewed. (FSANZ is presently conducting the latest review.)*

*“In fact, DHA – an omega-3 fatty acid that is a primary structural component of the brain, cerebral cortex, skin, and retina – was at one stage an optional ingredient in Europe but has now been mandated in regulation there, says Carey.*

*“Even though DHA remains an option extra in Australia, this is a great example of how innovation is essential for infant health and development, and precedes regulation..”*

The essence of that INC press release is very contradictory to what the INC has actually submitted to Food Standards for the Infant Formula review (1), and to Codex International for their follow-up formula (the International term for follow-on formula) review (2):

(1)

<http://www.infantnutritioncouncil.com/wp-content/uploads/2016/05/P1028-Review-of-IF-INC-Sub-v17-FINAL.pdf>

*“... 108. Long chain polyunsaturated fatty acids (LC-PUFAs): INC supports in principle the retention of a voluntary permission for DHA as this is unlikely to pose a risk to the infant. INC’s ‘support in principle’ is predicated on consideration of the text that FSANZ proposes in the standard...”*

(2)

[http://www.infantnutritioncouncil.com/wp-content/uploads/2017/05/2017-1-CP-FINAL-OI-INC-Response-Form-Composition-6\\_12.pdf](http://www.infantnutritioncouncil.com/wp-content/uploads/2017/05/2017-1-CP-FINAL-OI-INC-Response-Form-Composition-6_12.pdf)

*“... INC confirms its previous positions, namely a) support for the optional addition of DHA and b) no mandatory addition of ARA when DHA is added. This needs to be made clear in the footnote..”*

DHA has been an optional formula ingredient for years and years. Ditto for prebiotics, probiotics etc.

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## **APPENDIX 1**

Some history on formula industry evasion of follow-on formula marketing restrictions in NZ  
(evidence competition will not likely decrease with authorisation)

As stated earlier, the 2004 Government review of our International Code interpretation looked at getting the industry to cease promotion of formula, only to meet industry-pushed technical loopholes.

<https://www.health.govt.nz/system/files/documents/publications/breastmilk.pdf> (pages 11 and 14)

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*The Ministry is required to use the definitions in the Australia New Zealand Food Standards Code as this is the legal and regulatory framework for food in New Zealand. The Ministry can provide further guidance on the relationship of the definitions with the WHO Code, but must ensure there is no conflict with the Australia New Zealand Food Standards Code.*

*The Australia New Zealand Food Standards Code defines:*

- an 'infant' as 'a person under the age of 12 months'
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*"The Ministry sought a legal opinion about whether follow on formula falls within the scope of the WHO Code. It was clarified that follow on formula is a 'milk product' as defined in the Code, but the product must also be marketed or represented as suitable for use as a breast-milk substitute to fall within the scope of the code. The NZIFMA made it clear in its submission to the Ministry that 'follow on formula is not marketed or sold as a breast-milk substitute. It is marketed as an alternative to cows' milk for infants who are no longer being breastfed'. However, follow on formula is used as a breast-milk substitute, so the Ministry believes that care needs to be taken with the marketing of follow on formula in New Zealand."*

That split Food Standards definition of follow on formula, with its "either", exists to cover the long-established difference between Australia and New Zealand's 1981 International Code interpretations.

The composition requirements don't vary between the two countries.

Same-species milk is the physiological norm for all baby mammals. Anything else is a substitute. That would always be the good-faith interpretation in infants best interests.

NZ's formula industry has avoided ceasing promotion of all its breastmilk substitutes, when cessation is asked by the 1981 International Code, for thirty seven years, by twisting the wording and ignoring the spirit of that Code. It is not committed to protecting breastfeeding. Such bad-faith activity from the formula industry is why the 2016 WHO/WHA Guidance on Ending Inappropriate Promotion of Foods for Infants and Young Children was produced.
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Resulting from that 2004 review that included public consultations etc., in 2007 the Ministry released its The Code in New Zealand document.

*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.*

This is reproduced at Appendix 8 of the 2018 INC application. On page 115 of the application (page 20 of The Code in New Zealand) it reads:

*"NZIFMA follow-on formula marketing guidelines*

*NZIFMA companies have adopted guidelines for the marketing of follow-on formula. These guidelines have been provided to the Advertising Standards Complaints Board in order to assist it with its decision-making on complaints about follow-on formula advertising.*

The guidelines state:

- To avoid any confusion with infant formula, which is a breast milk substitute suitable for infants under six months of age, follow-on formula advertising and informational material prepared by NZIFMA companies should position this product as being suitable for (1) infants already on infant formula when they reach the age of at least six months, and (2) infants of six months of age or over, who are receiving complementary foods, in preference to cows' milk.
- Follow-on formula is marketed in New Zealand as an alternative to cows' milk, not as an alternative to breast milk. This product is not suitable for infants under six months of age."

P117 of the application (page 22 of The Code in New Zealand) says:

*"How to make a complaint about the advertising of formula for infants aged over six months*

*If you have concerns about the advertising of follow-on formula or food for infants aged over six months, you can make a complaint to the Advertising Standards Complaints Board under the Code for Advertising of Food. The board will use the guidelines provided by the NZIFMA (see page 20) when considering complaints about follow-on formula."*

Around 2012 is when the NZIFMA New Zealand Infant Formula Manufacturers Association rebranded itself as the Infant Nutrition Council (the new, far more opaque name which in itself is a marketing tool for companies) and released the INC Code, meaning The Code in New Zealand was no longer a one-stop-shop for International Code compliance in NZ.

Follow-on formula advertising put before the Advertising Standards prior to that 2012 change had featured specific statements saying "this is not a breastmilk substitute" (which did consumers no favours information wise, as the product is, by law, composed as able to be used in place of breastfeeding as a main source of liquid nutrition, not just a complementary food (for moistening cereal etc.) alongside breastfeeding)

Here are some examples:

**Complaint 11/374**

**"The Chairman** ... noted that the advertisement clearly stated that the product "...is not a breast milk substitute, but rather a specially formulated complement to solid foods". The Chairman considered that the likely consumer take-out of the advertisement was that the follow-on formula advertised was not a substitute to breast milk but rather a complement to solid foods that could be used in conjunction with breastfeeding."

**Complaint 10/205:**

**"The Chairman** ... said the advertisement clearly promoted the product as a follow-on formula for a six month old or older baby to complement the solid food component in the child's diet and not as a breast-milk substitute. Accordingly, it met the standard of social responsibility required by the Code for the Advertising of Food and the Chairman ruled that there were no grounds for the complaint to proceed."

**Complaint 08/540**

**"The Chairman** ... noted in the advertisement where it said "Note: S-26 GOLD Progress is a nutritious follow-on formula for the baby 6 months and older. S-26 GOLD Progress is not a breast milk substitute". He was of the view that the advertisement clearly stated that the product was not a breast milk substitute, and did not market itself as such, clearly stating that the product was a supplement to an older baby's solid food diet."

**These three advertisements were deemed socially responsible by the ASA, due to their communication of the products as complementary foods rather than breast-milk substitutes.**

Following the 2012 rebranding of the NZIFMA to the INC, the ASA Code for Advertising Food was changed to say that the INC Code is an appropriate industry code for it to consider.

By 2013/2014, examples of follow-on formula ceased having the earlier-agreed statement that it was not a breastmilk substitute. Heinz was featuring follow-on formula alongside its stage 3 and 4 Nurture formulas in brand-promotion TV commercials, and Danone was featuring it in gift promotions for its Karicare brand alongside its Stage 3 product.

However, ASA complaints put forward by myself and at least one other person at that time were met with decisions that no longer looked at the Follow-On Formula Marketing Guidelines. Danone denied the very existence of the guidelines. I had to appeal multiple times, and then the ASA finally accepted an appeal in April 2014 and agreed to relook at Danone's advertising against the Guidelines in The Code in New Zealand (they seemed to have forgotten what they were meant to do), but put their decision on hold until August. During that time, the INC quietly reviewed and rewrote their Guidelines – with no public consultation as had happened with the 2004 government review – to remove the requirement that they actually stipulate in promotions that the follow-on formula is not a breastmilk substitute... leaving the guidelines absolutely what they were all along – a blanket loophole for avoiding International Code compliance for the product. The ASA referred to the new guidelines provided to them (even though their own policy is to apply code versions that were in place at time of advertising) and did not ultimately uphold any complaints I made to them.

INC member promotion of follow-on formula has been minimal ever since, as far as I am aware. (Third party promotion are always a different story). But this does indicate how problematic NZ's voluntary, highly compartmentalised system for monitoring compliance with the International Code really is. And how the industry cannot be trusted to act in good faith.

An official, ASA record of the above described, mickey-mouse events can be viewed at <https://drive.google.com/open?id=1vCH0w2wg4FuQ3clx9pMoSnW5oWKYxK3Q> – do note that they do not present things in a systematic chronological order

The current INC Follow-on formula Marketing Guidelines are in there, and also sit at <http://www.infantnutritioncouncil.com/wp-content/uploads/2014/07/NZ-FOF-marketing-guidelines-140701.pdf>

## **APPENDIX 2**

A few additional examples of misleading formula industry marketing that undermines breastfeeding and consumer information rights

(evidence competition will not likely decrease with authorisation)

On the Maternity Services Consumer Council website is a report by a New Zealand doctor who attended a function run by INC member Bayer.

[https://www.maternity.org.nz/files/DRUG\\_COMPANY\\_FREEBIES.pdf](https://www.maternity.org.nz/files/DRUG_COMPANY_FREEBIES.pdf)

It reads:

*“..Bayer Consumer Care*

*The presentation by Ayumi Uyeda, the young female drug company rep was unremarkable in that it was clearly her job to promote the wonders of the Novalac range of specialised infant formulas. She consistently described them as “premium products”, and the higher cost was simply “a price differential.”*

*Ayumi Uyeda referred to the EDEN study of 3.500 babies, “an observational study of what happens in private practice” that was firstly an epidemiological study on presenting problems, and secondly the effects of Novalac on the problem. However, there was no mention of RTCs.*

*Her slides showed the “scientifically developed” range of specialised infant formulas and how they differed from each other. The slick marketing of solutions to “problems” such as reflux, colic and constipation, the expansion of the diagnostic criteria used to identify such commonplace events as spilling or spitting up, periods of prolonged crying and distress, and constipation and diarrhoea, along with the supply of free drinks and good food, was both impressive and incredibly dishonest.*

*Needless to say, I left after the presentations – before dinner was served – because I suddenly found I had completely lost my appetite. I went instead to the bar and bought a spiced tomato juice and sat mulling over what I had just witnessed with a health professional friend.”*

---

Following are screenshots of the Heinz response to Ministry of Health complaint 11-2015-15, where I compared Ministry of Health advice with misleading statements on the Heinz “Forbaby” website (which gets given to parents as a reference by Plunket (Well-Child provider for at least 90% of NZ babies), under their sponsorship by Heinz).

The screenshots show Heinz agreeing to change material (but without admitting any fault). The Ministry did not call them in breach on this. I found the Ministry had adopted a stance that if INC members removed or altered their material, then that effort will be accounted for in decisions. This is what the ASA does, except the ASA publishes all steps, and the Ministry doesn’t – they only publish outcome summaries. There is minimal impetus on INC members to comply with their INC Code from the outset as they can now just wait to see if someone bothers complaining, and sort it if they need to then.

I haven’t rechecked the website lately to see if they reverted to their old versions of the website information, but I note that while they changed their “importance of maternal diet” info to reassure that maternal diet doesn’t have to be healthy for breastfeed infants to be healthy, their current disclaimer doesn’t give that reassurance.

The left columns are what Heinz had previously been saying:

Text on Website	Heinz Wattie's position
<p>Disclaimer text: <i>Breastfeeding is best for babies. Breast milk provides the ideal balanced nutrition and protection for babies. A healthy balanced diet is important to prepare for and maintain breastfeeding.</i></p>	<p>Heinz Wattie's believes that the word "important" is not synonymous with "essential" or "crucial", so this statement does not imply that the lack of a healthy balanced diet is "barrier" to breast feeding.</p> <p>Further, the word "important" is closer in meaning to the word "ideal" as appears on the last page of Code: "<i>Good maternal nutrition is ideal for breastfeeding</i>". (Contrary to the Complaint the word "preferred" does not appear here.)</p> <p>In addition, Heinz considers that the words "prepare for" would ordinarily be read as meaning "prepare <u>a mother</u> for".</p> <p>Notwithstanding the above, in the interests of avoiding any potential uncertainty (but without any admission), this section of text has been amended to read:</p> <p><i>"Breastfeeding is best for babies. Breast milk provides the ideal balanced nutrition and protection for babies. A healthy balanced diet is important to <u>help mothers</u> prepare for and maintain breastfeeding."</i></p>
<p><i>While you're breastfeeding you'll be passing on a lot of nutrients to your baby, so your diet during breastfeeding can really make a difference. Getting plenty of good foods in your diet during this time will make sure you're both getting the nourishment you need.</i></p>	<p>Heinz Watties does not believe that this statement is inconsistent with the Ministry of Health policies referred to in the Complaint.</p> <p>Notwithstanding this, in the interests of avoiding any potential uncertainty (but without any admission), this section of text has been amended to read:</p> <p><i>"While you're breastfeeding you'll be passing on a lot of nutrients to your baby, so your diet during breastfeeding can <u>really</u> make a difference. Getting plenty of good foods in your diet during this time will make sure you're <del>both</del> getting the nourishment you need."</i></p>
<p><i>Eating well while you're breastfeeding is beneficial for several reasons. Firstly it means you're passing on plenty of good nutrition to your baby...</i></p>	<p>Heinz Watties does not believe that this statement is inconsistent with the Ministry of Health policies referred to in the Complaint.</p> <p>Notwithstanding this, in the interests of avoiding any potential uncertainty (but without any admission), this section of text has been amended to read:</p> <p><i><u>"You should be confident you can breastfeed even if your diet is not optimal, but</u> eating well while you're breastfeeding is beneficial for several reasons. Firstly it means you're passing on plenty of good nutrition to your baby..."</i></p>



<p><i>When you are breastfeeding, your body needs extra energy (calories or kilojoules) to produce breast milk and feed your baby. By nourishing yourself well, you support your body to produce good quality breast milk in the right quantities for your baby to thrive...</i></p>	<p>Heinz Watties does not believe that this statement is inconsistent with the Ministry of Health policies referred to in the Complaint.</p> <p>Notwithstanding this, in the interests of avoiding any potential uncertainty (but without any admission), this section of text has been amended to read:</p> <p><i>“When you are breastfeeding, your body <del>needs</del> <b><u>will benefit</u></b> from extra energy (calories or kilojoules) to produce breast milk and feed your baby. By nourishing yourself well, you support your body to produce good quality breast milk in the right quantities for your baby to thrive...”</i></p>
<p><i>Breastmilk provides the ideal nutrition for your baby, and it's recommended you breast feed for at least the first six months...</i></p>	<p>Heinz Watties does not believe that this statement is inconsistent with the Ministry of Health policies referred to in the Complaint.</p> <p>Notwithstanding this, in the interests of avoiding any potential uncertainty (but without any admission), this section of text has been amended to read:</p> <p><i>“Breastmilk provides the ideal nutrition for your baby, and it's recommended you breast feed <del>for at least the first six months</del> <b><u>until around six months and your baby is ready for foods. When your baby is ready, introduce him or her to appropriate complementary foods and continue to breastfeed until they are at least one year of age or beyond.</u></b>”</i></p>
<p><i>You know your baby is well fed if they seem satisfied after their feeds and produce lots of wet nappies (at least 6-8 wet nappies in a 24 hour period). They should also gain weight steadily after the first two weeks, have times when they're awake and alert, and your breasts and nipples shouldn't be sore..”</i></p>	<p>Heinz Watties does not believe that this statement is inconsistent with the Ministry of Health policies referred to in the Complaint.</p> <p>Notwithstanding this, in the interests of avoiding any potential uncertainty (but without any admission), this section of text has been amended to read:</p> <p><i>“You know your baby is well fed if they seem satisfied after their feeds and produce lots of wet nappies (at least 6-8 wet <b><u>washable</u></b> nappies <b><u>or 5-6 disposable nappies</u></b> in a 24 hour period ). They should also gain weight steadily after the first two weeks, have times when they're awake and alert, and your breasts and nipples shouldn't be <b><u>too</u></b> sore <b><u>after the first week</u></b>”</i></p>

## **APPENDIX 3**

A few examples of INC Member infant formula promotion since the 2015 INC Code Authorisation by the Commerce Commission

(evidence competition will not likely decrease with authorisation, as INC members don't necessarily even follow the current version adequately)

Yashili promotion of their full range on a baby magazine social media page.

le Photos Videos Shop Pages Places

 **OHbaby!**   
May 26, 2016  

Yashili SUPER  $\alpha$ -Golden Stage formula strives to preserve the very best nature's goodness at every step. Our new packaging design "Deep Cap with Spoon" allows mums to prepare the formula without directly handling it, which is second-to-none in NZ.  
<http://www.yashili.co.nz/store-locations>

**The best and most beautiful things in the world cannot be touched**




[www.yashili.co.nz](http://www.yashili.co.nz)  
YASHILI.CO.NZ

ct\_NZ....jpg ^  YashiliNZHeartKids....jpg ^

award x [585 un] x S Hutt Vi x f ohbab: x OH Search: x Why E: x Feedin: x New Tab x OH OHbal: x Spons: x OH www.c: x

www.ohbaby.co.nz/directory/details/336/yashili



Search Listings

Region


Category

Keyword

Search

**Yashili**

As dedicated experts in researching babies' nutritional needs, Yashili strives to preserve the very best of nature's goodness at every step. SUPER α-Golden Stage formula is proudly made here in New Zealand, manufactured and packaged at Yashili's state-of-the-art Pokeno plant in Waikato. Yashili SUPER α-Golden Stage formula's new packaging design "Deep Cap with Spoon" allows mums to prepare the formula without directly handling it. It is the first time that this packaging technology is available in New Zealand.



**Where to buy:**  
Web: [www.yashili.co.nz](http://www.yashili.co.nz)

**Contact:**  
Phone: 09 600 5800

**Retail Stores:**  
Available at selected New World stores nationwide.  
To find your nearest store visit:

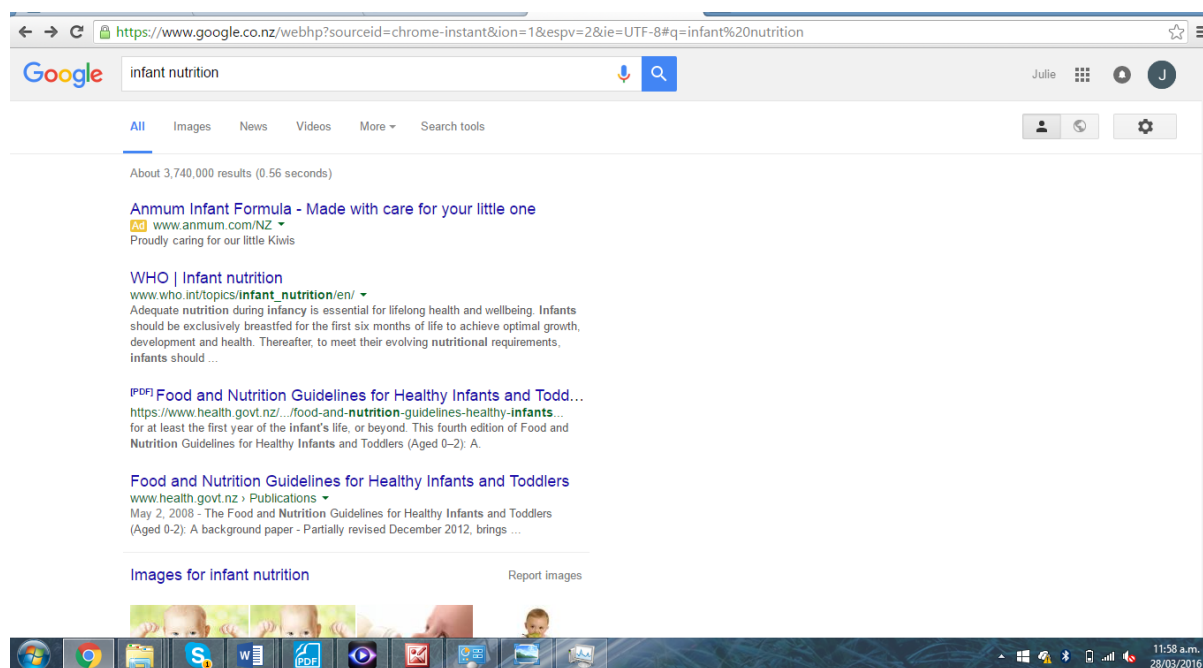
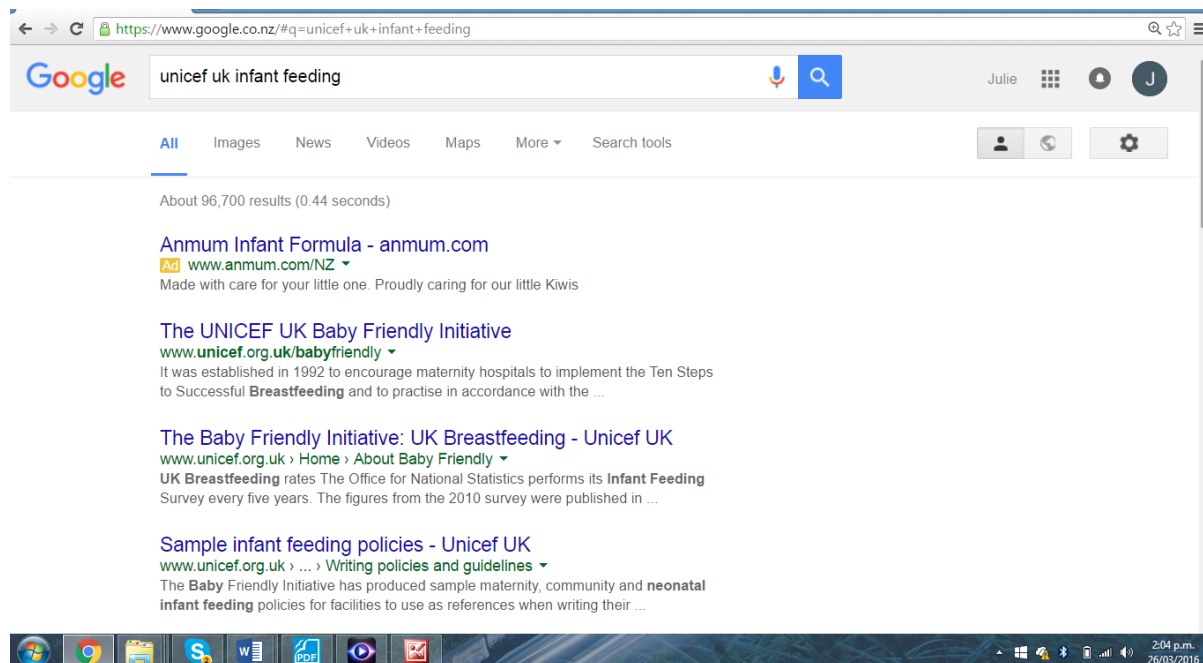
Windows taskbar: 2:55 AM 8/10/2016

Yashili on that same magazine's website

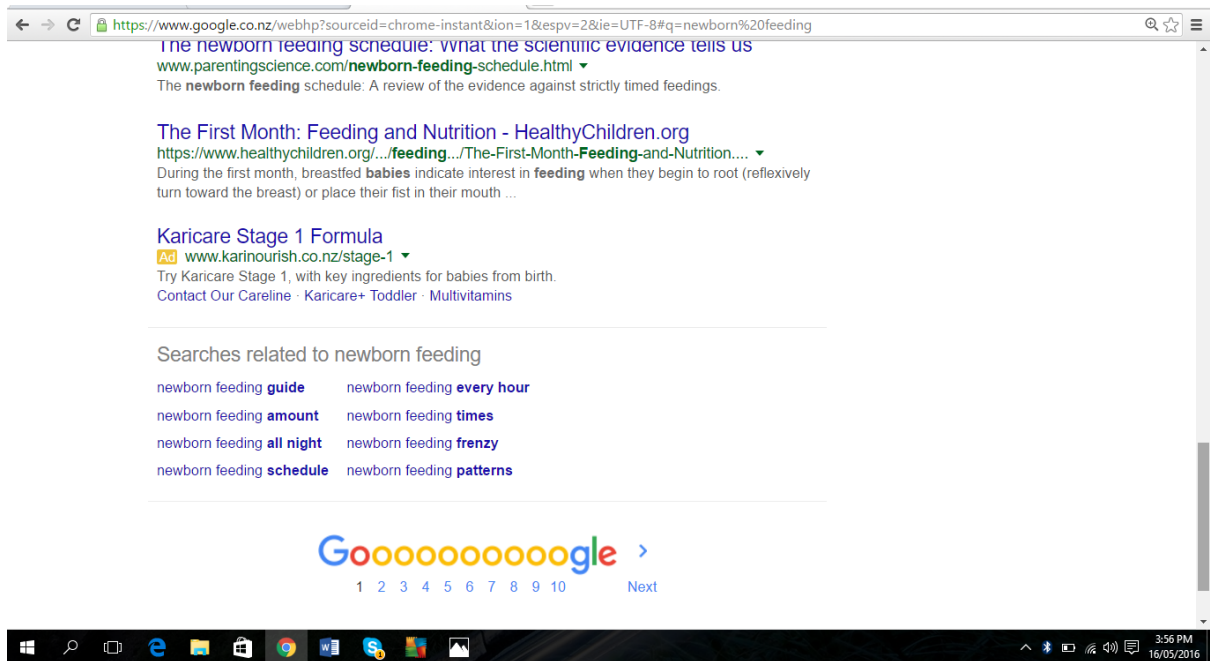
2016 Fonterra Infant Formula advertising via Google, during a general infant feeding search. This was not deemed in breach by the Ministry of Health. It was deemed a website ad.

(Yes, because websites are “made with care for your little one”)

That is the point where I gave up on the Ministry of Health monitoring of the INC Code.



Danone advertising infant formula via Google, during an “infant feeding” search. 2016.



## **APPENDIX 4**

A few examples of how toddler milk and brand-name adverts dominate.

(evidence competition will not likely decrease with authorisation)

See also the scores of examples I already submitted to the Commerce Commission in 2017

Helping to  
grow clever  
little minds



For your  
free sample,  
[click here](#)

Nestle. Online ad. They're "Helping to Grow Clever Little Minds" has been used for years, in TVCs and online.



# Search

About 7,730 results (0.20 seconds)

[Aptamil Gold+ Toddler - Milk Drink Supplement](#)

**Ad** [www.aptanutrition.co.nz/OneGiantLeap](http://www.aptanutrition.co.nz/OneGiantLeap)   
 Nutritionally Supporting Cognitive Function & Immune System. Learn More Today.

[Karicare+ Toddler](#)

**Ad** [www.karinourish.co.nz/toddler](http://www.karinourish.co.nz/toddler)   
 With prebiotics to help support a happy tummy. Your Gentle Choice.   
 Range Of Trusted Products · Careline Team Of Experts

[Karicare+ Toddler](#) [Contact Our Careline](#)   
[Multivitamins](#)

[Grass Fed Infant Formula - Go Beyond Organic. Learn More.](#)

**Ad** [www.grassfed.co.nz/infantformula](http://www.grassfed.co.nz/infantformula)   
 100% New Zealand Grass Fed Milk **Infant Formula**. Buy Online Today, Free Shipping.   
 Shop Online · Sourced From New Zealand · GMO Free · Grain Free   
 Types: Infant (0-6 Months), Follow-On (6-12 Months), Toddler (12-36 Months)

[Register](#) [A New Standard](#)   
[Login](#) [Contact Us](#)   
[Our Formulas](#) [The Source](#)

[Best Formula For Babies](#)

**Ad** [www.izito.co.nz/Best+Formula+For+Babies](http://www.izito.co.nz/Best+Formula+For+Babies)   
 Search Best Formula For Babies Get Results from 6 Engines at Once   
 Powerful and Easy to Use · Find Related Results Now · 100+ Qualitative Results · Get More Related Info   
 Types: News, Video, Images, Web, Wiki

Ads when searching infant formula news stories on Stuff website, May 2017

Online ads from Danone.



and the  
**immune  
system**\*



**Aptamil**  
Toddler


\*Zinc necessary for a normal immune system and cognitive function when prepared as directed and consumed as part of a healthy varied diet.



*Helps lay the foundations for your child's firsts*

**Aptamil**  
Toddler

**FIND OUT MORE**



**Choose Gentle,  
Choose Karicare**

**KariCareline**

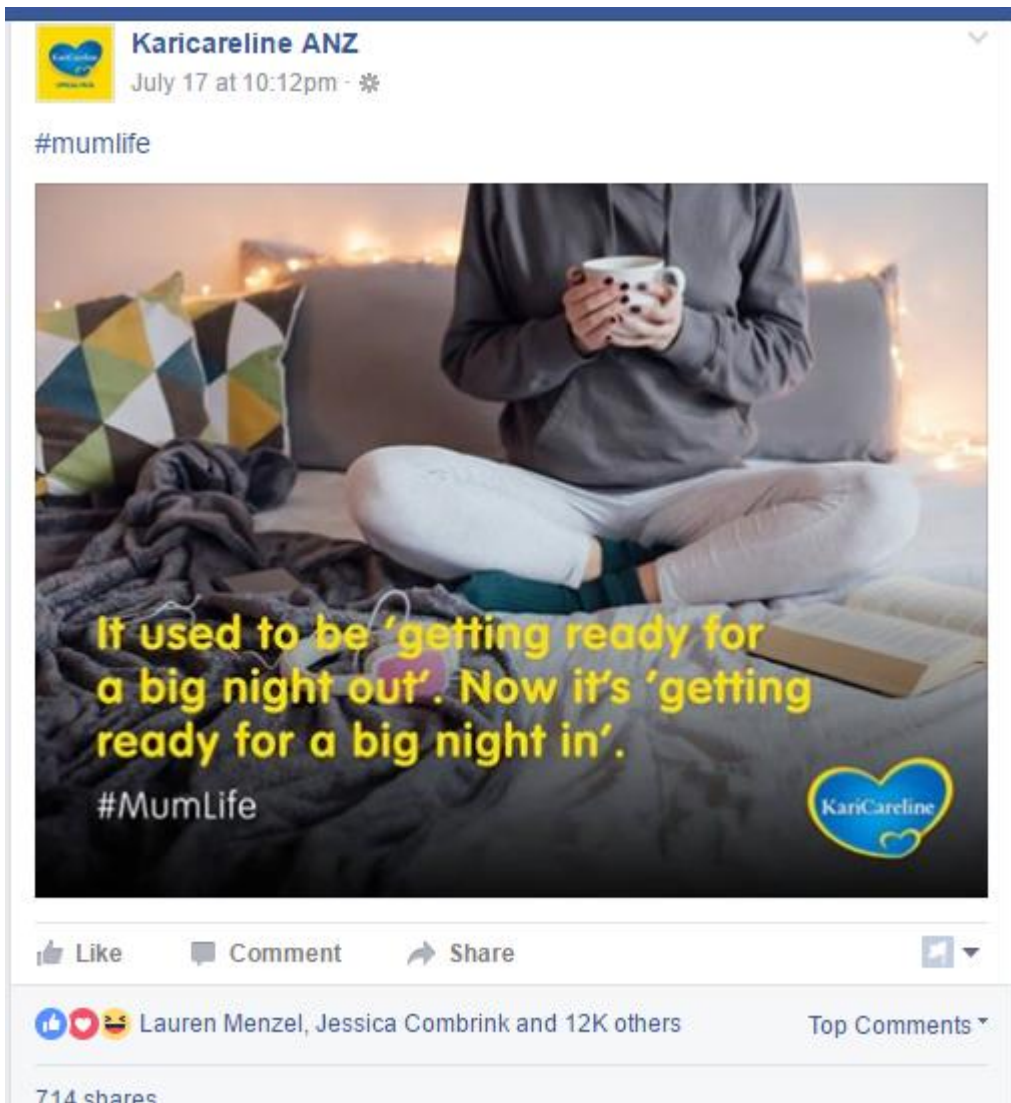
KariCareline ANZ  
@KariCarelineANZ

Home  
About

Current view of the Danone social media page for formula-brand awareness



Current view of the Nestle social media page for formula-brand awareness



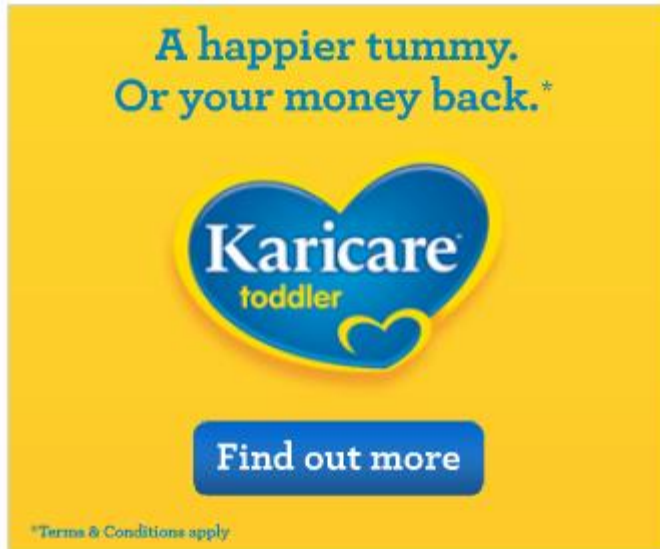


2017 Danone in supermarkets





Ad Feedback



October 2015 online ad



## Improving Latch By Improving Positioning: Introduction and Laid Back Breastfeeding (Part 1 of 7)

Nestle advertising over a breastfeeding video.



Nestle online ad





Check your weather



ADVERTISEMENT



**Go beyond organic**  
Nature. Nurture. Grassfed™



LEARN MORE »

## Bomber in 'network'



45 min ago | Suspected bomber's father, younger brother among seven arrested amid fears bomb-maker at large in UK.

## Kiwi stranded after United flight



1 hour 12 min ago | Kiwi traveller could be set for an extended stay in San Francisco after "a total screw up".

## Fog disrupts flights

ADVERTISEMENT



Go beyond organic

Nature. Nurture. Grassfed™

munchkin  
grass fed



LEARN MORE »

May 2017



noodle dance for kids



A video player interface showing a video titled 'From Farm to Sippy'. The video content shows four babies sitting in a grassy field with a large brown cow behind them. The video player includes a progress bar at 0:02 / 0:06, a volume icon, and a 'Your video will begin in 4' notification. The URL 'grassfed.co.nz/' is visible in the bottom left of the video frame.

KIDZ BOP Kids - KIDZ BOP Shuffle (#MoveItMarch)



KIDZ BOP

You tube ad july 2017

Sponsored

Create Ad



**Fernbaby Toddler Gold+ Formula**

[fernbabynewzealand.co.nz](http://fernbabynewzealand.co.nz)

Save 20% and receive free delivery with our payment plan.

## **APPENDIX 5**

Screenshots of the market-dominating companies' website disclaimers discussed in this submission (how they are worded to undermine breastfeeding by not reassuring women that breastfeeding is still the ideal even if maternal diet is suboptimal)

# Heinz


The screenshot shows a web browser window with the URL <https://www.forbaby.co.nz/Baby-Foods-Products/Infant-Formula-Toddler-Milks>. A modal window is displayed with the following content:

**Welcome to Wattie's Forbaby website.**

**This section of the website contains information on Nurture and infant formula products.**

Before you enter this section, please read this **Important Information:**

Breastfeeding is best for babies. Breast milk provides the ideal balanced nutrition and protection for babies. A healthy balanced diet is important to help mothers prepare for and maintain breastfeeding. Introducing partial bottle feeding may adversely affect breastfeeding by reducing the supply of breast milk and reversing a decision not to breastfeed is difficult. Infant formula should be prepared and used as directed because unnecessary or improper use can be harmful to the health of the baby. Social and financial implications, such as issues of convenience and cost to the household, should be considered before selecting a method of feeding.



If you are considering using infant formula, it is important to discuss this with a health professional.

This information about infant formula is provided for informational and educational purposes only.

**Please click on 'I Understand' to proceed to information on infant formula products and to acknowledge you have read and understood the information above.**

Buttons: Cancel, I Understand

# Nestle

The screenshot shows a web browser window with the URL <https://www.meandmychild.co.nz>. The main content area displays the following text:

## Welcome to Me and My Child

Welcome to Me and My Child where you'll find lots of information on the wonderful journey of parenthood, from pregnancy, to birth and your child's early development. Every child's development is different, so be sure to consult with your health care professional if you have any concerns.

You'll also find plenty of information about what you can feed your child.

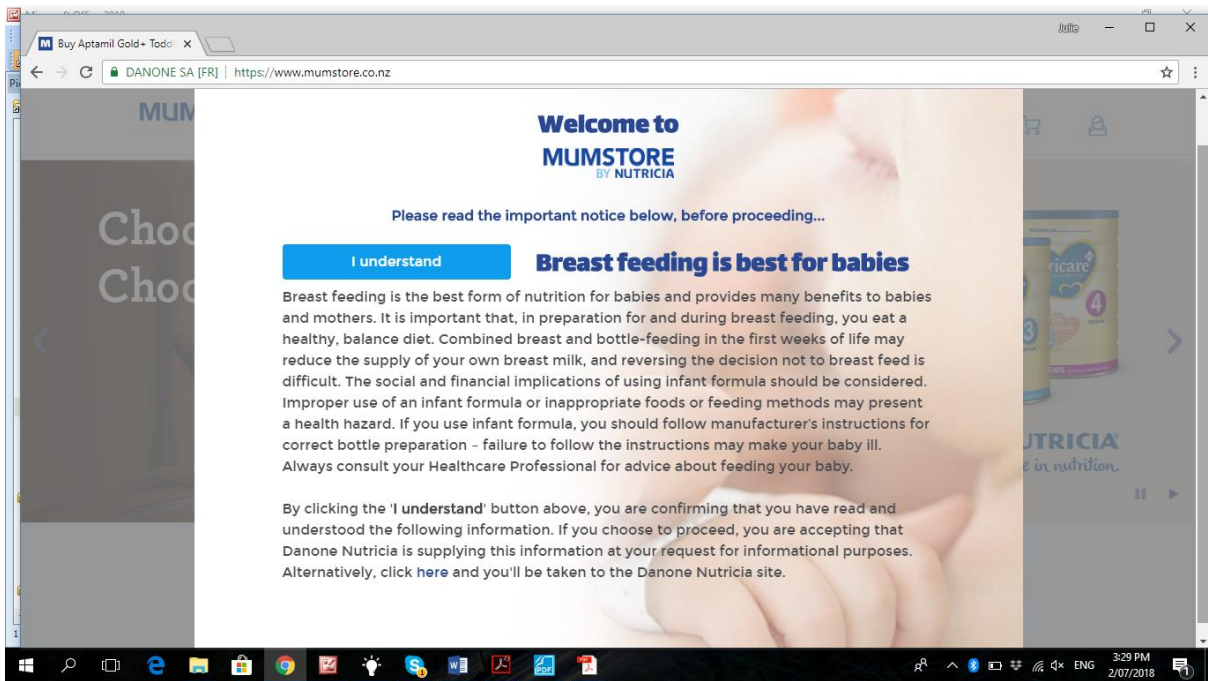
When it comes to babies, Breastfeeding is best, and provides the ideal balanced diet and protection against illness. During pregnancy and after delivery, a mother's diet should contain sufficient key nutrients. Professional guidance can be sought on diet and the preparation for and maintenance of breastfeeding. Infant formula is intended to replace breast-milk when mothers do not breastfeed. A decision not to breast-feed, or to introduce partial bottle-feeding, could reduce the supply of breast-milk. Once reduced, it is difficult to re-establish. Infant formula should be prepared and used as directed. Unnecessary or improper use, such as the use of unboiled water, unboiled bottles or incorrect dilution may present a health hazard. Social and financial implications, such as the preparation requirements and the cost of providing formula until 12 months of age, should be considered when choosing how to feed infants.

This website mentions food, toddler milks and sometimes infant formula.

By clicking on the "I understand" link below, you confirm your understanding that Nestlé is supplying this information about formulas for informational or educational purposes.

Button: I Understand >

# Danone



# Danone

