

## Protecting Breastfeeding at the WHA69

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THE ISSUE

The World Health Assembly (WHA) is the decision-making body of the World Health Organization (WHO). It is a major annual health meeting and consequently represents a major advocacy opportunity to influence health and nutrition policies. In 2016, member states adopted a resolution calling for the

elimination of inappropriate promotion of food for infants and young children (<u>WHA69.9</u>), a resolution for which Action Against Hunger exerted tremendous advocacy efforts.

As regularly outlined by Action Against Hunger, the inadequate promotion and use of breastmilk substitutes (BMS) contributes to malnutrition. The Lancet's Series on breastfeeding has shown risks of bacterial contamination when mothers are not able to sterilize bottles or boil water<sup>1</sup>. This major public health issue was addressed by the WHO through the creation of a Code of Marketing, restricting the practices of companies targeting children under- two years of age. This Code has now been transposed in many countries, including India, but more efforts are needed in its monitoring.

WHAT WAS HAPPENING?

The draft guidance of Code of Marketing aiming to end the inappropriate promotion of BMS was a concern for Action Against Hunger and the Infant Feeding in Emergencies network as it was going against the International Code of Marketing. The draft

document allowed in fact distribution of BMS during emergencies and through "officially sanctioned health programs", with no further explanation given. This indiscriminate distribution of products can lead to increased interruption of breastfeeding and higher health risks, especially if BMS is used with unsafe water. It became clear that our objective would be to protect the Code by advocating for a revised guidance.

**NECESSARY PATHWAY** 

For almost 40 years, Action Against Hunger has fought malnutrition and pushed for sustainable change. In 2016, we engaged extensively in the 69th World Health Assembly (WHA) to advocate for the revision of the guideline for the Code of Marketing for BMS. We started by

sending letters to Governments through our missions. Our message was passed by a delegation at

<sup>&</sup>lt;sup>1</sup> "Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect", Victora, Cesar G et al., 2016, *The Lancet*, Volume 387, Issue 10017

a state consultation organized by the WHO. Discussing with civil society partners, we decided to propose amendments to the draft guidance for a Member state to present during another WHO meeting in April 2016. Thanks to this work, the new guidance was finally adopted. It was now critical to make sure that the guidance was endorsed by an adequate resolution, which we did, along with a coalition of international NGOs including Helen Keller International.

We used various advocacy methods to achieve this objective: we organized a ministerial dinner with an international nutrition champion and brought together Ministers of Health and the WHO, to secure support to the resolution. Most importantly, Action Against Hunger successfully raised awareness about the criticality of the resolution among State delegations, secured the active support of a regional group and pushed delegates to oppose lobby groups and to attend working groups for stronger wording. A bold statement calling for the adoption of the resolution was also delivered at the Assembly. Despite thorough efforts of several states and the private sector to undermine it, the resolution was finally adopted on May  $28^{\text{th}}$ , 2016.

Among many drivers of success identified by Action Against Hunger, our ability to understand highly technical documents was a key factor. Infant and young child feeding guidance can be complex, and Governments do not always send large delegations to events like the WHA, meaning that they do not have the technical understanding of all the matters discussed. Lobby groups from the private sector sometimes use this as an opportunity to influence targeted documents.

POLICY ADAPTATION

The Code of Marketing of Breastmilk substitute has now been extended to limit marketing of milk targeting children under 3 years old. Once transposed into national regulation, we hope that it will contribute to increase breastfeeding and reduce malnutrition.