

**Submission to the Taskforce
On Hong Kong Code of Marketing of Breastmilk Substitutes
Regarding
Hong Kong Code of Marketing and Quality of Formula Milk and Related
Products, and Food Products for Infants & Young Children**

The Asia-Pacific Infant and Young Child Nutrition Association (APIYCNA) is a not-for-profit organization set up with the mission of improving the nutritional well-being of infants and young children throughout the Asia Pacific region. APIYCNA believes that ensuring optimal infant and young child nutrition is a shared responsibility: Government, NGOs, civil society, and the private sector all have essential roles to play in this effort and should work together.

APIYCNA and its members thank the Hong Kong authorities for the opportunity to comment on the said draft code and trusts that its comments will be taken into account.

APIYCNA welcomes the aims of the HK Code to contribute to the provision of safe and adequate nutrition for infants and young children, by:

- (a) Protecting breastfeeding; and
- (b) Ensuring the proper use of formula milk, formula milk related products and food products for infants and young children up to the age of 36 months, on the basis of adequate and unbiased information and through appropriate marketing.

APIYCNA concurs with the recommendation of the World Health Organization (WHO) for exclusive breastfeeding for the first six months of life and continued breastfeeding with timely, safe, and appropriate complementary feeding thereafter. Like the Hong Kong government, we share a strong commitment to supporting improved nutrition for infants, young children and their mothers.

Our industry is fully committed to ensure that marketing policies and practices are (i) transparent and consistent with the aims and principles of the WHO International Code of Marketing of Breast-Milk Substitutes, and (ii) in line with any legislation to implement the WHO Code, as enacted by national governments in the region. APIYCNA stands ready to work in partnership with all stakeholders, in Hong Kong and the wider region, to support public health goals to protect and promote breastfeeding and the proper use of infant formula where necessary.

Our industry is responsible, highly regulated, and follows all relevant laws and regulations in the countries in which its products are marketed. With this in mind, we are concerned that the current draft code is of a voluntary nature. We strongly recommend the Hong Kong government to (i) separately address the marketing code and labeling & quality standards in order to ensure that consumers in Hong Kong can benefit from international best practices evident in the EU and US and standards such as the *Codex Alimentarius*, and (ii) implement specific legislation that sets relevant rules for foods for infants and young children, including, among others, rules on composition, labeling and advertising that will lend certainty and clarity to both consumers and manufacturers in Hong Kong.

We respectfully request that Hong Kong adopt international best practices and standards opposed to the excessive application and/or extension of select provisions. For example, we note that certain restrictions in the draft HK Code on labeling, advertising or promotion of foods go beyond the existing rules set in the relevant *Codex Alimentarius* standards. Similarly, the current draft incorporates selective provisions of the International Code of Marketing of Breast Milk Substitutes but makes them applicable to all formula milk for infants.

APIYCNA believes it is discriminatory to impose marketing guidelines for foods specifically designed and labeled as complementary foods yet continue to allow unlimited marketing practices for other foods commonly used as complementary foods such as snack crackers, fast foods, soft drinks, and such that may form part of the regular family diet. Such a discriminatory practice could potentially give mothers in Hong Kong a false impression that products that can be freely advertised are somehow superior to products that have been scientifically designed as complementary foods. The WHO itself acknowledges that inadequate knowledge is often a greater determinant of malnutrition than the lack of food. Therefore, access to factual information on complementary foods and milk is critical to educating caregivers while reducing the risk of malnutrition in infant and young children.

We believe that marketing restrictions up to 36 months would deprive mothers in Hong Kong of the necessary nutritional and educational information on the appropriate and sufficient alternatives available to them. In fact, such restrictions could have the unwanted adverse effect of parents selecting food that can be advertised and bear claims, although it is inappropriate for their infants and young children. These could include sugary drinks and snack foods, which are not specifically formulated to children's needs.

There is ample data available to show marketing practices have little or no influence on breastfeeding. For example, in the US, where marketing of infant formula and access to information is freely allowed, breastfeeding rates are at their highest level in 40 years. Research by notable educational and health institutions in Hong Kong have shown that advertising does not factor into mothers' decisions whether or not to breastfeed. In fact, the research posits that many Hong Kong mothers who decide not to exclusively breastfeed do so for reasons they feel were beyond their control to change, such as social pressures and medical and health reasons, returning to work shortly after giving birth, not producing enough breast milk and feeling that the baby was not getting enough milk. APIYCNA believes that addressing these root causes of low breastfeeding rates will have the greatest impact on improving infant nutrition.

It is imperative that we recognise that the challenge of infant, young child and maternal nutrition is complex and multi-faceted, and identifying and implementing solutions requires multi-stakeholder collaboration. Breastfeeding is but one important component of infant and young child nutrition, and a number of other critical factors must also be considered. The WHO puts it well when it says, “(an) optimal strategy to ensure rapid improvement of nutrition requires the implementation of a set of specific nutrition interventions and the integration of nutrition into health, agriculture, education, employment, social welfare and development programmes.”¹

APIYCNA and our members are committed to working in tandem with all stakeholders in Hong Kong to improve infant and young child health and nutrition, including the implementation of best practices in marketing. APIYCNA's priority is to “raise the bar” on consistent compliance by industry in Hong Kong and across the region. We welcome the opportunity for public-private partnership to jointly develop a path forward that provides the best nutritional start to life for all children in Hong Kong and the Asia Pacific.

¹ *Maternal, infant and young child nutrition: comprehensive implementation plan (World Health Organization)*