



A WORLDWIDE NETWORK OF LACTATION PROFESSIONALS

The WHO Code and You

Many IBCLCs are seeking a better understanding of how the *International Code of Marketing of Breast-milk Substitutes* (WHO Code) applies to them, and to ILCA, their professional association. In a nutshell:

(1) All health workers **should** support the WHO Code.¹

(2) All IBCLCs **should** support the WHO Code, because the IBCLCE Code of Professional Conduct recognizes this as an important IBCLC duty to protect the public health of mothers and children.²

(3) ILCA supports the WHO Code as a basic purpose for which the professional association was created.³

(4) ILCA goes a few steps further. It has a long-standing prohibition in its by-laws from accepting money from a WHO-Code-violator.⁴ Thus, ILCA will not accept JHL ads, nor exhibit hall booth rental (at its own conference), by Code violators. The Board of Directors of ILCA broadened this prohibition in December 2011, to preclude advertisers with "any financial relationship with non-compliant entities, including any company owned by a non-compliant entity, any company that purchases a non-compliant entity, and any company with another financial relationship with a non-compliant entity."⁵

(5) Other conference hosts -- who are not ILCA, nor an ILCA affiliate or chapter -- may permit exhibit booths by Code-violators. How? The WHO Code allows it, in a setting where health workers/IBCLCs can critically assess not only speakers but advertisers.⁶

(6) Health workers/IBCLCs can remain Code-compliant if they are in an arms-length business relationship with a Code violator. How? The health workers/IBCLCs are *paying for* the four product-types that fall under the Code⁷, to turn around and use in their practices or businesses (e.g. they purchase bottles and teats for their medically-indicated use with non-breastfeeding babies; they purchase or rent pumps that will be sold or rented to mothers at retail).⁸

(7) To remain Code-compliant if you are in a business relationship with a Code violator, the health worker/IBCLC should not accept any free samples, nor any "freebies" (like meals, name badge holders, ID lanyards, mugs, notepads, tote bags, computer mouse pads, etc.). And remember: **NO MARKETING**. You can sell the product. You can talk to a mother about any product and its use. You can open the box and show the features to the mother who comes in and asks about it. You can pull out a box and describe features to a mom who comes in asking about that product type, even if she doesn't know the brand name. You just can't *market* the products ... so do not plaster your walls and counters and website with signs advertising the logos and brands of the products falling under the WHO Code.

(8) Here is a simple rule of thumb: A health worker/IBCLC will always be Code-compliant by simply refusing to take ANY freebies or samples from ANY company. That way you don't have to keep track of who is a Code violator and who is not. And you'll avoid the appearance of a conflict of interest with ALL commercial entities.

¹ WHO Code definitions include:

'Health care system' means governmental, nongovernmental or private institutions or organisations engaged, directly or indirectly, in health care for mothers, infants and pregnant women; and nurseries or childcare institutions. It also includes health workers in private practice. For the purposes of this Code, the health care system does not include pharmacies or other established sales outlets.

'Health worker' means a person working in a component of such a health care system, whether professional or nonprofessional, including voluntary, unpaid workers."



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A health worker's responsibilities are as follows:

"7.1 **Health workers** should encourage and protect breastfeeding; and those who are concerned in particular with maternal and infant nutrition **should make themselves familiar with their responsibilities under this Code**, including the information specified in Article 4.2" [regarding risks of formula use; benefits of breastmilk][emphasis added].

"7.3 **No financial or material inducements to promote products** within the scope of this Code should be offered by manufacturers or distributors to health workers or members of their families, nor **should these be accepted by health workers** or members of their families" [emphasis added].

"7.4 Samples of infant formula or other products within the scope of this Code, or of equipment or utensils for their preparation or use, should not be provided to health workers except when necessary for the purpose of professional evaluation or research at the institutional level. **Health workers should not give samples of infant formula** to pregnant women, mothers of infants and young children, or members of their families" [emphasis added]."

The full text of the WHO Code, and its subsequent World Health Assembly resolutions, is at <http://www.who.int/nutrition/publications/infantfeeding/9241541601/en/>

² "A crucial part of an IBCLC's duty to protect mothers and children is adherence to the principles and aim of the *International Code of Marketing of Breast-milk Substitutes* and subsequent relevant World Health Assembly's [sic] resolutions." <http://www.ibclce.org/upload/downloads/CodeOfProfessionalConduct.pdf>

³ ILCA is organized to accomplish several stated purposes, including "**support the world-wide implementation of the International Code of Marketing of Breast-milk Substitutes** and other subsequent WHA resolutions which are consistent with the goals and objectives of the Association" (ILCA By-Law 2.1)(emphasis added).

⁴ "As an organization, **ILCA and its affiliates will not endorse any literature or products, or accept direct funding from** industries producing or marketing products that do not comply with the *International Code of Marketing of Breast-milk Substitutes* and subsequent WHA resolutions" (ILCA By-Law 2.2.1)(emphasis added).

⁵ "ILCA does not invest in, nor accept funding, donations, advertising nor sponsorship from, entities which do not comply with the International Code of Marketing of Breast-milk Substitutes and all subsequent WHA resolutions, and/or entities that have any financial relationship with non-compliant entities, including any company owned by a noncompliant entity, any company that purchases a non-compliant entity, and any company with another financial relationship with a non-compliant entity." Motion passed December 2011, amending ILCA Advertising Policy. Policy as revised may be read in full at http://www.ilca.org/files/resources/advertising_opportunities/ILCA_Advertising_Policy.pdf.

⁶ The WHO Code says: "7.2 Information provided by manufacturers and distributors to health professionals regarding products within the scope of this Code should be restricted to scientific and factual matters, and such information should not imply or create a belief that bottle feeding is equivalent or superior to breastfeeding."

⁷ The WHO Code says: "Article 2. Scope of the Code. The Code applies to the marketing, and practices related thereto, of the following products: breastmilk substitutes, including **infant formula**; other milk products, foods and beverages, including **bottle-fed complementary foods**, when marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breast-milk; feeding **bottles** and **teats**. It also applies to their quality and availability, and to information concerning their use" (emphasis added).

⁸ The WHO Code preamble recognizes legitimate uses and availability of Code-covered products: "Considering that when mothers do not breastfeed, or only do so partially, there is a legitimate market for infant formula and for suitable ingredients from which to prepare it; that all these products should accordingly be made accessible to those who need them through commercial or noncommercial distribution systems; and that they should not be marketed or distributed in ways that may interfere with the protection and promotion of breastfeeding."

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