

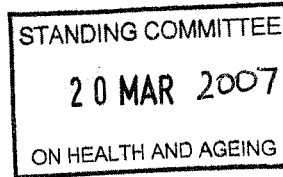
Nestlé Nutrition

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OUR REF: Nestle Submission : Inquiry into Breastfeeding
YOUR REF: N/A



Submission no. 335

AUTHORISED: 9/5/07 

19 March 2007

Secretary
Committee Secretariat
Standing Committee on Health and Ageing
House of Representatives
Parliament House
CANBERRA ACT 2600

Dear Secretary

Submission to the House of Representatives Standing Committee on Health and Ageing Inquiry into Breastfeeding

Thank you for agreeing to accept this submission after the Inquiry submission closing date.

We are pleased to provide this submission on behalf of Nestlé Australia Ltd and Nestlé New Zealand Ltd and have no objections in the Committee making our submission publicly available on the Inquiry website.

I would be pleased to assist you and the Committee further if needed, and can be contacted on 02 8756 2972 or via email to Ulrich.Preysch@au.nestle.com.

I look forward to the Report and recommendations from the Inquiry in due course.

Yours sincerely

A handwritten signature in black ink, appearing to read "Ulrich Preysch".

Ulrich Preysch

Country Business Manager

Infant Nutrition

Introduction

This submission is made on behalf of Nestlé Australia Ltd and Nestlé New Zealand Ltd. Nestlé is a manufacturer and importer of a wide variety of foods for the Australian and New Zealand markets including infant formula.

Nestlé welcomes the opportunity to provide this submission to the House of Representatives Standing Committee for consideration during the Parliamentary Inquiry into Breastfeeding. Nestlé reaffirms our support of the primacy of breastfeeding and our overall positive contribution to infant nutrition, health and wellbeing.

Nestlé is a member of the Infant Formula Manufacturer's Association of Australia (IFMAA) and supports the IFMAA submission to this Inquiry.

The primacy of breastfeeding

Nestlé fully supports the promotion of breastfeeding as the best option for infants and agrees with the spirit of the World Health Organization's International Code of Marketing Breast-milk Substitutes.^[1]

To that end, and as an ethical and principled manufacturer of infant formula, Nestlé is pleased to be a member of the IFMAA and a signatory to the voluntary Marketing in Australia of Infant Formulas (MAIF) Agreement. As a signatory to the Agreement, Nestlé is committed to meeting the obligations of the Agreement by providing "safe and adequate nutrition for infants by the protection and promotion of breastfeeding and by ensuring the proper use of breast milk substitutes, when they are necessary, on the basis of adequate information and through appropriate marketing distribution."^[2]

a) Promoting breastfeeding

Nestlé abides by the MAIF Agreement and actively promotes breastfeeding in the following ways:

- Our website contains positive and supportive information and advice on breastfeeding. Information on infant nutrition and products is shown only after visitors read and accept a statement on the positive health benefits and superiority of breastfeeding;
- The website does not promote, through pictures or words, formula over breastfeeding, but does provide factual information on the use of formula should individuals make the choice to do so;
- As required, our infant formula products promote that breastmilk is best for babies;
- Our products clearly identify age-appropriate complementary and supplementary feeding for children;
- Work with health care providers on infant nutrition.

b) Proper use of breast milk substitutes

Nestlé is a global leader in infant nutrition and is continually striving through research to improve the quality of infant formula offered for those babies who are not breastfed either due to medical reasons or through choice (Attachment 1).

The WHO Code advocates that babies be breastfed but, importantly, that if babies are not breastfed for whatever reason, the Code advocates that they be fed safely on the best available nutritional alternative.^[1]

The often overlooked requirement within the MAIF Agreement and WHO Code, outside of promoting breastfeeding, is "the proper use of breast milk substitutes...on the basis of adequate information..."^[1,2]

Nestlé believes that the restrictions on providing information on infant formula, has had a negative impact on the availability of "adequate" information for questioning mums and families.

The unintended consequence of restrictions on provision of material on infant formula is that mothers and carers can become frustrated at the lack of information. The negative health impacts for babies not being breastfed, irrespective of the reason, arising from incorrect sterilising of equipment or mixing of formula is of concern. Further, lack of information about formula as a suitable alternative should mothers choose, for whatever reason, not to establish or continue breastfeeding could result in babies being given inappropriate fluids such as whole cow's milk, tea, coffee, juice or soft drinks.

As manufacturers of formula, we are committed to ensuring adequate, factual and scientific information is available to support appropriate use of formula. To that end, our product information is clear and factual, but not promotional, in line with the MAIF and WHO Code. The WHO Code and "Frequently Asked Questions" confirm the importance of "creating an overall environment that enables mothers to make the best possible feeding choice, based on impartial information and free of commercial influences, and to be fully supported in doing so."^[3]

Breastfeeding rates - marketing of breast milk substitutes

Nestlé acknowledges that breastfeeding provides health benefits for infants, their carers and the health system overall. There is no question that breast milk provides for an infant's nutritional needs and the best possible health protection.

Recent data showing low rates of breastfeeding are worrying, despite very active industry, consumer and community support. Anecdotal evidence suggests that there is a lack of support for mothers in the community, hospitals and in the workplace to establish and maintain breastfeeding. Questions around the impact of broader health system factors such as early discharge from hospital, limited hospital and in-home care resources, workforce pressures and access to lactation consultants, have been raised.

The results of the National Health Survey 2001^[4] shows that about one-third of mothers stopped breastfeeding as a result of physical milk production. Interestingly, 21 percent of mothers stopped breastfeeding based on their own perception of what is an appropriate point in time. The importance of this result is to question the driver of this perception of an "appropriate" time and thereby more effectively target information and education programs, along with structural support services.

There may be value in undertaking a perceptions survey or round of consultation with mothers to flesh out the results of the 2001 National Health Survey to ensure that efforts are appropriately targeted, resulting in improved knowledge and breastfeeding rates.

There have been many claims that the marketing of infant formula, even the mere existence of formula, is having a negative impact on breastfeeding rates. There is no data to suggest that the provision of information relating to infant formulas is negatively impacting on breastfeeding rates. Yet a great deal of attention is paid to this element of infant nutrition.

There is no evidence to suggest that by providing information on choice to mothers, that they will choose infant formula. Nestlé believes these mothers who have already chosen to use IF should have access to the best possible products based on scientific evidence that aim to achieve health outcomes as close as possible to the breastfed infant and to protect the health and safety of those infants that are formula fed. This is particularly important for disadvantaged, Indigenous and remote communities.

There have also been suggestions from pro-breastfeeding lobby groups that the marketing of toddler milk products, aimed at toddlers from 12 months of age, is adversely impacting on infant breastfeeding rates. An extension to the MAIF Agreement to include toddler milks has been mooted without substantiation.

The marketing of toddler product is outside the scope of the WHO Code and MAIF Agreement to which Nestlé and other IFMAA members have voluntarily agreed to abide.

Nestlé does not support the extension of the MAIF agreement to include toddler milks. In fact there is no data available to indicate that the supply and advertisement of milk based drinks for toddlers above 12 months of age has any impact on the decision of mothers to stop breastfeeding before 6 months of age.

Breastfeeding rates – other measures

Australia is a world leader in promoting the benefits of breastfeeding and the importance of maternal and child nutrition. There are a number of national strategies, guidelines and policies that either directly or indirectly relate to infant nutrition and breastfeeding and yet we are still seeing reasonably low breastfeeding rates.

With the comprehensive system in place in relation to infant formula, through the signing of the MAIF Agreement and the establishment of the Advisory Panel on the Marketing in Australia of Infant Formula (APMAIF), Nestlé believes that government and community attention should now be directed towards implementing other measures such as those outlined in "The Global Strategy for Infant and Young Child Feeding", endorsed by WHO Member States in 2002.

Consistent with the WHO Code, other resolutions, declarations and the Baby-Friendly Hospital Initiative, the Strategy outlines measures to promote breastfeeding and improve breastfeeding rates. Those actions are to^[3]:

- Ensure that every facility providing maternity services fully practises the "Ten steps to successful breastfeeding";
- Enacts imaginative legislation protecting breastfeeding rights of working women and enforce them;
- Develop, implement, monitor a comprehensive policy on infant and young child feeding;
- Ensure that the health and other relevant sectors protect, promote and support exclusive breastfeeding for six months and continued breastfeeding for up to two years or beyond; and that they also promote timely, adequate, safe and appropriate complementary feeding from six months onwards; and
- Provide guidance on feeding infants in exceptionally difficult circumstances.

To ensure full implementation of all its components, the Global Strategy calls upon governments to appoint a national coordinator with appropriate authority and to constitute an effective broad-based body to lead coordinated multi-sectoral implementation of the strategy by all concerned parties.^[3]

Recommendations

Nestlé supports the Australian Government's commitment to improving maternal and child health, and in particular infant nutrition and breastfeeding, and recommends that efforts be directed towards providing greater access to nutritional experts/lactation consultants to assist in establishing and maintaining breastfeeding both in the hospital and in-home environments.

Nestlé does not support the position that the existence of formula and toddler milks influences a mother's decision to continue breastfeeding or move to formula, and does not recommend extending the MAIF Agreement to include toddler milks.

Nestlé recommends that the Australian Government continue to support the goal of "good infant nutrition" by ensuring mothers, carers and families have access to appropriate information.

Nestlé recommends that a survey or other form of research be commissioned to more fully understand the reasons mothers give for not commencing or for the early cessation of breastfeeding to ensure future government measures are appropriately targeted to achieve our common goal of increase breastfeeding rates.

Conclusion

Again, as a signatory to the MAIF Agreement and supporter of the primacy of breastfeeding for infants, Nestlé is proud of our track record in promoting breastfeeding and infant nutrition and wellbeing. In Australia, the willingness of manufacturers to abide by the MAIF Agreement and the networks of consumer and community "watch dogs" ensures that the system works well. We do not believe there is any evidence to support the introduction of new measures with respect to marketing of infant formulas, nor the suggestion that the MAIF Agreement should be extended to include toddler milks. However Nestlé does agree that there are other measures which the Australian Government could introduce to support mothers and promoting healthy infant nutrition for the wellbeing of our future generations.

Attachment 1

Nestlé's contribution to infant health and nutrition

Research

Some examples of research conducted using Nestlé infant formula products which has contributed to the knowledge of infant health and nutrition are:

- More than 20 studies have shown that non - or partially breastfed infants with increased risk of allergies have a reduced risk (similar to breastfed infants) of developing early allergy symptoms, especially atopic eczema, when they are fed on a clinically proven hypoallergenic infant formula compared to a regular, unhydrolysed formula.^[5] Apart from reducing the allergic burden on these infants and the wider community, these hypoallergenic formulas have also been shown to promote a faster gastric emptying time compared to conventional infant formula.^[6] This can be important when formula is used in a complementary way to breast-feeding.
- Many studies have shown that addition of probiotics, especially *Bifidobacterium lactis*, to infant formulae supports the immune system and reduces the risk of rotaviral and antibiotic associated diarrhoeas, constipation and nappy rash.^[7,8,9] Emerging research is now also showing benefits of probiotics with regards to prevention of allergy and neonatal necrotising enterocolitis.^[10,11]
- Studies on reducing the protein levels in IF to reduce the stress on infants kidneys.^[12,13]
- Studies on improving the protein quality in IF to bring it closer to that of breastmilk.^[12,13]

It is important to note that all of these studies are aiming to increase the overall health and well-being of the formula fed infant. It is widely established that breast-fed infants have better health outcomes than those infants who are formula-fed. The fundamental aspect of research with infant formulas is to strive to bring the health of those formula-fed infants closer to that of the breast-fed infant.

Nestlé Nutrition Institute

- The Nestlé Nutrition Institute was established worldwide in 2006, although Nestlé Nutrition has been heavily involved in nutrition resources and publications for over 60 years. It is important to note that the focus of these publications is on nutrition concepts which are science- and research-based, they are not based on products or brand names.

- The Nestlé Nutrition Institute is committed to contributing to proper nutrition information and education of health care providers by providing access to the latest knowledge in nutritional science.
- Through the NNI health care professionals have access to workshops, publications, educational material and scholarships as well as an interactive website.
- Recent Workshops have focused, for example, on polyunsaturated fatty acids, nutrition and bone development, intestinal immunology, probiotics, food allergy, obesity and diabetes amongst many other topics.
- The NNI produces and distributes high quality paediatric publications and journals edited independently, for health care professionals.
- Nestlé has, and will continue to conduct Symposium in Australia / New Zealand to enable health care professionals to gain access to world renowned experts in infant nutrition and to receive the latest science-based updates in infant health and nutrition.

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