

Media and Marketing Study on Formula Milk and Related Products for Infants and Young Children

- Executive Summary -



Department of Health

Family Health Service

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Background

The World Health Organization (WHO)'s International Code of Marketing of Breast-milk Substitutes (the International Code) and its subsequent relevant Health Assembly's resolutions aims to provide safe and adequate nutrition for infants through protecting, promoting and supporting breastfeeding, and to ensure the proper use of breastmilk substitutes on the basis of adequate and unbiased information and through appropriate marketing and distribution.

The Family Health Service (FHS) of the Department of Health (DH) commissioned Consumer Search Hong Kong Limited (CSG) to conduct a study on the marketing practices of formula milk and formula milk related products (namely, feeding bottles and teats for infants and young children) in Hong Kong (the Study) with a view to assessing the local marketing situation.

Study Objective

The objective of the Study was to systematically identify and analyse the information used for marketing and promoting formula milk and formula milk related products for infants and young children up to the age of 36 months to the general public, expectant parents and parents in Hong Kong.

Methodology

The Study covered information commonly adopted by the manufacturers of formula milk or formula milk related products for infants and young children up to the age of 36 months for dissemination to the general public and parents. It included (i) information disseminated via media advertisements; (ii) information presented as health education materials; (iii) information attached to or appearing on the container of the products (product label information); and (iv) product information. Information presented in various format including but not limited to image, text or other representations were studied.

The items of information studied came from 7 formula milk manufacturers (covering 10 brands) that represented over 90% of the respective advertising expenditure and 2 of the formula milk related product manufacturers in Hong Kong.

Four checklists corresponding to the 4 categories of information were used for recording the findings. The items in the checklists were designed with reference to the International Code, the subsequent relevant Health Assembly's resolutions and the local context.

A pilot study was conducted between 13 and 20 November 2015. Adjustments to the content of the checklists were made before conducting the main actual fieldwork.

In the main actual fieldwork, product label information and media advertisements were captured over 28 continuous calendar days between 15 February and 13 March 2016, while product information and health education information were captured during a period of 60 continuous calendar days between 11 February and 10 April 2016. The information on media advertisements was sourced from the database of a private advertising monitoring company, which covered magazines and newspapers, out-of-home advertising media, television and radio broadcasts, websites, mobiles websites and applications.

All items of information collected in the study were coded and the datasets were validated.

Study Findings

In the Study, a total of 410 relevant items were collected and studied including 161 media advertisements, 122 materials presented as health education, 77 product labels and 50 product information materials.

(i) Media Advertisements (161 items, with 160 on formula milk and 1 on formula milk related product)

Among 161 media advertisements items found, 81 came from social media, 31 came from websites, mobile apps and email, while 40, 7 and 2 items came from print media, television commercials (TVC), and out-of-home advertising respectively. Out of the 160 items of media advertisements on formula milk studied, there were 107 items (66.9%) that had images, texts or other representations that might idealise the use of their products, of which 67 items implied health benefits to the child if the product was consumed. The health benefits included supporting digestive system and gut health, general growth and development, immunity, allergy prevention, brain and visual

development. Nine items (5.6%) contained statements about the nutritional value or quality of their products, such as “contains no added cane sugar”, “contains protein of superior quality” and “contains nutrient of superior quality”.

Although only 7 TVCs related to formula milk were found, they were frequently broadcasted involving a total broadcasting frequency of 37,994 times, equivalent to 16,022.1 minutes (or 11.13 days). Although the TVCs did not specifically promote formula milk for babies below 6 months, they often showed brief product shots of follow-up formula milk with very similar packaging to infant formula milk. Five TVCs conveyed imageries of happy, clever and healthy child(ren), and a happy family. The other two highlighted the nutritional quality of their products.

Some media advertisements, in particular those in print media and social media, contained information on sales inducement (33 items, 20.6%), seeking of personal details of the infants or their parents (39 items, 24.4%) or invitation to attend exhibitions on baby products, relevant activities or antenatal seminars (33 items, 20.6%).

Only 1 media advertisement of formula milk related product was found. The item was in print media and was found to have images, texts or other representations that might idealise the use of formula milk related products.

(ii) Health Education Information (122 items, with 58 relevant to breastfeeding or formula milk feeding, and 64 were about other matters)

Information presented as health education materials on infant and young children nutrition were commonly found on manufacturer’s websites in text and video format. There were 58 items presented as health educational materials on breastfeeding or formula milk feeding. All of them contained product promotional activities (e.g. appearance of products or relevant promotional activities on the same webpage as the health education item on manufacturer’s website). Although most items (53 items, 91.4%) explained the benefits and superiority of breastfeeding, only a minority of the items mentioned about the value of exclusive breastfeeding for the first 6 months and sustaining breastfeeding (13 items) and the importance of introducing complementary food from the age of 6 months (5 items).

There were 64 items presented as educational materials concerning matters other than breastfeeding or formula milk feeding. All these items also contained product promotional activities.

(iii) Product Label Information (77 labels, with 61 on formula milk and 16 on formula milk related products)

The information on the labelling of 77 products were studied including 61 formula milk products and 16 on formula milk related products. All product labels of formula milk contained images, texts or other representations which might idealise the use of their products, such as emphasis on the child health benefits and on the superior quality of the product, or conveying message of endorsement and recommendations by professionals or trusted bodies.

All product labels of formula milk contained 1 or more health benefit statements, notably about supporting the brain development, supporting the digestive system and gut health and supporting the immune system. About one-third of the labels (20 labels, 32.8%) contained statements about the superior nutritional value or quality. For example, these labels mentioned that the product had a better nutritional quality or a higher nutritional level.

Variation was seen regarding the instructions on preparation of formula milk (such as the temperature of the water used) and warnings displayed on the product label. Among the 39 labels of powdered formula targeted at infants under 12 months of age, only 7 labels (17.9%) mentioned using boiled water allowed to cool down to no less than 70°C to prepare formula milk. There were 15 labels that mentioned the required temperatures to be other than 70°C. Unlike infant formula, only around half of the labels of follow-up formula mentioned that breastfeeding is the normal means for feeding infants and young children, and is natural for their growth and development, or equivalent.

Most (14 labels, 87.5%) of the labels of formula milk related products contained images, texts or other representations which might idealise the use of their products. The most mentioned representation was about the functions or the quality of the products (11 labels, 78.6%). These representations included stating that the design of the teat might help better digestion and healthy development of jaw muscles, and that the design of the bottle might help to prevent ear infection or stomach discomfort. Nine labels drew comparison with breastfeeding. For example, the labels stated that the teats enabled the baby to mimic the natural suckling pattern, or to mimic the baby's latch-on to the breast.

Nearly all (15 labels, 93.8%) the labels of formula milk related products contained the term "maternalise" or equivalent. Three (18.8%) labels contained texts that

mentioned that breastfeeding might be inconvenient, which appeared to discourage breastfeeding.

(iv) Product Information (50 items on formula milk)¹

During the study period, a total of 50 items of formula milk product information were identified. In general, product information provided information specific to the products for potential consumers' reference. It might contain information on product specifications, instruction of usage, materials or ingredients, and condition of storage. However, most of the items (48 items, 96.0%) had images, texts or representations that might idealise the use of formula milk and formula milk related products. The most mentioned representation implied a better development and growth of children if the products were consumed (43 items).

Many items (43 items, 86.0%) contained health benefit statements. They were mainly about supporting the digestive system and gut health/ better absorption, supporting brain development and supporting the immune system.

About one-third of the items (17 items) mentioned the nutritional quality of their products, such as the high nutritional quality, protein of high quality and docosahexaenoic acid (DHA) of high quality/ a higher amount of DHA.

Nine (18%) items contained images or texts which might encourage feeding by formula milk. The value of exclusive breastfeeding for the first 6 months followed by sustained breastfeeding for 2 years or beyond was only seen in 10 out of 50 items.

Conclusions

It was common for the manufacturers of formula milk and formula milk related products for infants and young children up to the age of 36 months to produce information in various formats for marketing and promotion to parents and the general public. Such information often contained texts, images or other representations to attract consumers to purchase the products, thereby encouraging formula feeding and discouraging

¹ There was no product information for formula milk related product available since there was no official website for the brands selected and no product information item was issued. Product information found in the product inserts of formula milk related products were categorised and analysed under product labels.

breastfeeding.

Recurrent themes portraying benefits to the child health and development, such as improving immunity and digestive system, supporting brain development, supporting general growth and development, and emphasising the high nutritional quality were observed for promotion of the formula milk products. Formula milk related product manufacturers tended to promote their products by drawing comparison with breastfeeding.

In this study, it was found that formula milk manufacturers commonly used social media platform as a means to advertise their products. An overseas study also showed that infant formula manufacturers used various social media tools to promote products, thereby creating communities among users, and making discussions about infant feeding. The social media based content examined had little to nil compliance to the International Code. Therefore, the impact of social media for marketing formula milk should not be underestimated.

Although there were only 7 TVCs of formula milk during the 28-day survey period, the frequency and the total air time of these TVCs was 37,994 times and 16,022.1 minutes (or 11.13 days) respectively, reflecting a very aggressive marketing strategy. According to the private advertising monitoring company used in this study, milk powder for infants and children had the fourth highest advertising spending in 2016. Although the television commercials did not specifically promote infant formula, the commercials often showed brief product shots of follow-up formula with very similar appearance to infant formula, which might give the impression that the advertisement promoted infant formula as well.

Although most items acknowledged that breastfeeding is best for infants, many did not mention other optimal infant and young child feeding practices such as sustaining breastfeeding and the importance of introducing complementary food from the age of 6 months.

WHO advised that boiled water cooled down to no less than 70°C water should be used to prepare formula milk for consumption by infants under 12 months of age. Only a few formula milk labels displayed this instruction. Instead, because a lower temperature could maintain the active cultures in the milk powder, some labels recommended a lower temperature to prepare the formula milk. This might pose a health risk to children because formula milk powder is not a sterile product.

Breastfeeding confers many health benefits to mothers and their babies. Mothers'

decision to initiate and sustain breastfeeding depends on a variety of factors. Nonetheless, exposure to prevalent marketing practices of formula milk and formula milk related products does not foster a promotive and supportive breastfeeding community. According to the principles of the International Code and the subsequent relevant Health Assembly's resolutions, steps should be taken to ensure that there is no advertising, or any form of promotional activities to promote formula milk for children under 36 months and its related products. Manufacturers of formula milk and formula milk related products should be encouraged to follow these principles so as to create an environment that is conducive to breastfeeding.