



International Baby Food Action Network - IBFAN

Geneva Infant Feeding Association - GIFA

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## Informal consultation on nutrition and the right to food

### IBFAN-GIFA's input into the Special Rapporteur's report on nutrition

9 June 2016

#### The burden of malnutrition:

*Obesity* is not only the consequence of an excess of calories resulting from an unbalanced diet ; indeed, to quote the American Heart Association, « the causes of obesity are multi-factorial and complex, and therefore, must be addressed on multiple levels. Recently, endocrine disrupting chemicals (EDCs) [...] have been proposed as potential “obesogens” that contribute to a toxic chemical burden that may initiate or exacerbate the development of obesity and its related comorbidities. [...] Laboratory studies are still elucidating the exact mechanisms by which these substances affect weight, but current evidence suggests that they disrupt developmental and homeostatic controls over fat production and energy balance. [...] Although limited research exists on the effect of these environmental chemicals on human populations, several epidemiological studies have found that chemical exposure, **particularly during critical developmental periods**, is positively correlated with increased weight, cardiovascular disease and diabetes. » (emphasis added)

[https://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm\\_316488.pdf](https://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm_316488.pdf)

“A substantial body of evidence suggests that a subclass of endocrine-disrupting chemicals (EDCs), which interfere with endocrine signalling, can disrupt hormonally regulated metabolic processes, **especially if exposure occurs during early development**. These chemicals, so-called 'obesogens' might predispose some individuals to gain weight despite their efforts to limit caloric intake and increase levels of physical activity.” (emphasis added)

<http://www.nature.com/nrendo/journal/v11/n11/full/nrendo.2015.163.html>

Bottle-feeding increases the exposure to EDCs, for example bisphenol A.  
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3924007/>



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## **A HR based approach to nutrition governance**

***Effective State intervention to address malnutrition*** : States obligations with regard to IYCF are defined in the Global Strategy for Infant and Young Child Feeding (GSIYCF), adopted by World Health Assembly in 2002.

<http://apps.who.int/iris/bitstream/10665/42590/1/9241562218.pdf?ua=1&ua=1>

They are structured in a 3 pillar framework : PROTECT, PROMOTE and SUPPORT optimal breastfeeding and complementary feeding practices.

This 3 pillar framework has been integrated to the system of human rights through its inclusion in the the CRC GC 15 on child's right to health (§44).

[http://tbinternet.ohchr.org/\\_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fGC%2f15&Lang=en](http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fGC%2f15&Lang=en)

Under the GSIYCF, before entering the details of this 3 pillar framework, States have the obligation to develop, implement, monitor and evaluate **comprehensive national policies on IYCF**, accompanied by a **detailed action plan**. States should ensure effective national coordination of all related measures and therefore should appoint a **national coordinator** and establish a **multisectoral national BF committee**. The action plan should be supported by **adequate human, financial and organizational resources**. A **monitoring system to collect data** on nutrition, IYCF and BF following international indicators should also be set up in order to assess the effect of the measures implemented.

### **PROTECT :**

- 1) **Full implementation of the International Code** and subsequent relevant WHA resolutions and **enforcement** through a systematic monitoring mechanism and deterrent sanctions for violators. All milk products intended and marketed as suitable for feeding IYC **up to the age of 36 months** should be covered.

*2016 WHO/UNICEF/IBFAN Code report :*

[http://www.who.int/nutrition/publications/infantfeeding/code\\_report2016/en/](http://www.who.int/nutrition/publications/infantfeeding/code_report2016/en/)

Code fully or mostly implemented in 39 countries only. Quality and substance of specific Code-related provisions varies significantly. Monitoring and enforcement of the Code is weak : only 32 countries have a monitoring mechanism in place and only few of them are fully functional. Just 6



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countries have dedicated budgets or funding for monitoring and enforcement.

*WHO Guidance on ending inappropriate promotion of foods for IYC*, welcomed by the 2016 WHA : covers BMS and complementary foods up to 36 of age – recalls the obligation to implement the Code.

[http://apps.who.int/gb/ebwha/pdf\\_files/WHA69/A69\\_R9-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_R9-en.pdf)

- 2) Adopt legislation on **maternity protection** which allows mothers to exclusively breastfeed for 6 months as recommended (6 months of leave after birth) and to continue breastfeeding after they return to work (workplace policies including childcare facilities, breastfeeding rooms on the workplace, breastfeeding breaks).
- 3) Ensure that **processed complementary foods** are marketed for use at an appropriate age, regulated in accordance with the Codex Alimentarius standards, and are safe, culturally acceptable, affordable and nutritionally adequate.

#### PROMOTE :

States should take all necessary measures to promote breastfeeding as a norm to feed infants, in particular by ensuring promotion of BF through **IEC means**, by developing **specific information campaigns** about BF, the risk of not BF, the Code, etc. and by ensuring that all information provided through educational and media authorities are **accurate and complete**.

#### SUPPORT :

- 1) **Skilled counseling and help for IYCF** -> health professionals and community health workers should be adequately trained (pre-service training, in-service training/continual updates, in-depth information on IYCF, responsibilities under the Code, and the Global Strategy).
- 2) **Baby-Friendly Hospital Initiative** which sets out the Ten steps to successful BF should be fully institutionalized within the national health system, including in private hospitals.
- 3) Adequate **access to antenatal care and education** about BF and complementary feeding
- 4) Promote **good nutrition for pregnant and lactating women**



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- 5) Development of **community-based support networks**
  - 6) Access to **lactation consultants and trained peer counselors** in hospitals, clinics and at community level.
  - 7) Support IYCF in **exceptionally difficult circumstances**, including LBW, malnourished infants and those affected by HIV.
- Protection, promotion and support of breastfeeding is not free, it costs money. As IBFAN analysis of the implementation of the GSIYCF shows, very few countries could implement all the interventions indicated in the GSIYCF. Primary obstacle : lack of adequate resources, especially financial resources.
- IBFAN developed a tool to help governments estimate the cost of implementing the Global Strategy World Breastfeeding Costing Initiative (WBCi)  
<http://www.worldbreastfeedingcosting.org/about.html>)

**Nutrition education** : States should ensure that thorough and unbiased nutrition education, including on the importance of BF, is provided to all segments of the society, in particular to parents and children (recalled in the UN CRC, article 24 (e)).

Today, baby food companies claim to be appropriate partners to develop nutrition education – see Nestlé Healthy Kids Programme launched in 2010 and covering 50 countries reaching 5 million children, also nutrition education program to teen girls in India under the framework of the UN Every Woman Every Child « to best feed their children when they reach childbearing age ». IBFAN has serious concerns related to the increasing influence of corporate sector in policy making and programme development, which illustrates the need of adequate safeguards against conflicts of interests at institutional level.

In 2015, IBFAN and FIAN developed a joint submission on the adolescents' right to adequate food, in which they call States to “ensure that comprehensive, clear and unbiased information on optimal breastfeeding practices and their impact on child and maternal health are **systematically included in sexual and reproductive health education of adolescents**. In addition, adolescents should be provided with thorough information and education on healthy eating habits as well as on optimal child nutrition and health. These interventions would enable adolescents to take the best decisions regarding their own health and nutrition, and the way to feed their child. Thus, the inclusion of breastfeeding and healthy eating habits within sexual, reproductive health and life skills



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curricula of adolescents would help break the intergenerational cycle of malnutrition and enhance the overall health condition of all segments of the population.”

[http://www.gifa.org/wp-content/uploads/2015/04/FIAN\\_IBFAN\\_Joint-Submission\\_GC-on-the-Rights-of-Adolescents1.pdf](http://www.gifa.org/wp-content/uploads/2015/04/FIAN_IBFAN_Joint-Submission_GC-on-the-Rights-of-Adolescents1.pdf)

### **Role of the private sector and accountability :**

Accountability should be ensured through binding mechanisms and regulations rather than through voluntary initiatives.

*Non-binding mechanisms do not work in holding corporations accountable for their abuses:* IBFAN’s experience in trying to hold Nestlé accountable through the OECD Guidelines and Global Compact

- *OECD Guidelines :* In 2009, Baby Milk Action/IBFAN UK asked the Swiss NCP to address Nestlé’s marketing strategies for breast-milk substitutes that claim to ‘protect’ babies. The Swiss NCP had earlier said it could not act on a report detailing generally widespread violations by Nestlé and had asked for a specific case. **As the Swiss NCP stressed it could only promote ‘dialogue’,** Baby Milk Action suggested it ask Nestlé to provide copies of the labels it was refusing to change so these could be assessed against the minimum marketing requirements adopted by the World Health Assembly. The Swiss NCP **declined to ask Nestlé for the labels and closed the case, expressing that it did not wish to be copied in on further correspondence between Baby Milk Action and Nestlé.**
- *UN Global Compact :* stresses it is not compliance based initiative, it does claim to be accountable. It also says this, to quote: “Nevertheless, safeguarding the reputation, integrity and good efforts of the Global Compact and its participants requires transparent means to handle credible allegations of systematic or egregious abuse of the Global Compact’s overall aims and principles.” The UN Global Compact publishes company Communications on Progress on its website, including Nestlé’s Creating Shared Value reports. It has even launched a Nestlé report at a joint event. This gives Nestlé a very good image, but contains misleading information. **IBFAN registered a complaint about N’s activities with the UN Global Compact Office under so-called Integrity Measures.** Not just about baby food marketing, but trade union busting; failure to act on child labour and slavery in its cocoa supply chain; exploitation of farmers, particularly in the dairy and coffee sectors; and environmental degradation, particularly of water resources. **However, we got nowhere with the UN Global Compact Office. It stressed that it is a voluntary**



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**initiative, aimed at facilitating communication and dialogue. The Global Compact Office refused to apply the Integrity Measures to Nestlé, a patron sponsor of its events and told IBFAN that no company has been excluded following a civil society complaint.**

- *Treaty process:* Therefore, a legally binding instrument on transnational corporations and other business enterprises with respect to human rights (HRC resolution 26/9) is needed and all Member States should be called to actively and constructively participate in this process. <http://www.treatymovement.com/statement/>

*The PPP paradigm:* In a report commissioned by the UN Global Compact Office on cooperation between the UN system and the private sector, it is stated that: 'there has been a tendency, within the United Nations system and elsewhere, to use the concept of partnership very loosely to refer to almost any kind of relationship' (Nelson, 2002). For clarification the following definition was suggested: 'Partnership is a voluntary and collaborative agreement between one or more parts of the United Nations system and non-State actors, in which all participants agree to work together to achieve a common purpose or undertake a specific task and to share risks, responsibilities, resources, competencies and benefits' (Nelson, 2002: 47).

*Diverse categories of public-private interaction are lumped together under the blur term of PPP:* fundraising, requesting or accepting corporate donations in cash or in kind, negotiations or public tenders for lower product prices, research collaborations which are, in fact, often publicly subsidized, negotiations, consultations and discussions with corporations and their business associations (e.g. regarding their willingness of salt manufacturers to iodize salt), co-regulatory arrangements to implement 'voluntary' (legally non-binding) codes of conduct, corporate social responsibility projects, and contracting out of public services. Some researchers also include the so-called global health and nutrition alliances such as the Global Alliance for Improved Nutrition (GAIN), and high-level interactions between the UN and corporations, such as the Global Compact, under the term of PPP.

The PPP paradigm is based on a number of assumptions, implicit or otherwise that: interactions with business actors should preferably be conducted as 'partnerships' which are based from the outset on 'trust' and should aim at 'mutual benefits'; public-private 'partnerships' are a 'win-win' situation; this policy paradigm is the policy innovation of the new Millennium, or simply that it is an unavoidable necessity.



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Accepting these assumptions at face value carries large risks. UN agencies may not examine corporate donations or joint ventures carefully enough to check for problematic conditionalities attached to the arrangement. They may not adequately check for potential negative outcomes of the arrangements nor for problematic hidden agenda of the commercial party. Overall, the trend towards 'partnerships' with business has resulted in side-lining and neglect of conflict of interest issues. There are undoubtedly some interactions in which all parties have something to gain and which are fully in the public interest. Nonetheless, the stress on 'win-win' situations leads to a partial and possibly biased assessment.

#### Risks of PPPs:

Commercial actors using the interaction to gain political and market intelligence information in order to gain political influence and/or a competitive edge (over companies which are not interesting enough as 'partners' for UN agencies); business actors using the interaction to set the global public agenda; business actors using the interaction to 'capture' and/or side-line intergovernmental public agencies; UN agencies developing an internal climate of censorship and self-censorship, and a weakening of efforts to hold transnational corporations publicly accountable to society for their practices and actions.

#### Alternatives to PPPs:

However, they are based on a great misunderstanding and needlessly confuse the debate. Calling for an abandoning the PPP paradigm and calling for a moratorium on and potential halt of some concrete partnership initiatives is not the same as a wholesale call for abandoning interactions between the public and private sector. None of the critics advocate this. They know that these two sectors have always interacted with each other, be it in research collaboration or in public efforts to regulate, for example, harmful marketing practices of pharmaceutical, alcohol, tobacco and (infant and/or junk) food industries.

#### Safeguards against conflicts of interests:

The first concrete step in this endeavour consists in replacing the PPP policy paradigm by a policy paradigm that is centred on public interest. As already stated, this does not mean abandoning interactions between public and commercial actors. Rather, it requires much more critical policy reflection where increased interactions between public and business actors is likely to positively and negatively impact on the achievement of access to adequate food and nutrition for all.

The following measures can help to better ensure due diligence when the public sector is interacting with business actors: re-name PPPs as public-private interactions or similar, less value-laden terms, identify the category or



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subcategory of the interaction that best facilitates identification of conflicts of interest; and establish clear and effective institutional policies and measures that put the public interest at centre stage in all public-private interactions.

<http://www.ibfan.org/art/538-4.pdf>

SUN:

See IBFAN awareness paper

[http://www.ibfan.org/art/SUN-IBFAN\\_281112.pdf](http://www.ibfan.org/art/SUN-IBFAN_281112.pdf)

SUN reference note on conflicts of interests 2015: does not define COIs adequately - see J. Richter Powerpoint on conflicts of interests p. 50-51 – also: should good governance be « inclusive » ? see p. 54

[http://www.gifa.org/wp-](http://www.gifa.org/wp-content/uploads/2016/03/JRIchter_2016_03_IBFAN_CoI_and_nutrition_governance_FINAL.pdf)

[content/uploads/2016/03/JRIchter\\_2016\\_03\\_IBFAN\\_CoI\\_and\\_nutrition\\_governance\\_FINAL.pdf](http://www.gifa.org/wp-content/uploads/2016/03/JRIchter_2016_03_IBFAN_CoI_and_nutrition_governance_FINAL.pdf)

GAIN:

In 2014, GAIN had assets of \$61million and claimed to work with 600 companies and CSOs, with a goal to: “ reach 1.5 billion people with fortified foods that have a sustainable nutritional impact.” In 2012, GAIN was found to have been pressuring the Kenyan government to weaken its draft law on baby food marketing. In a Policy briefing, GAIN implied that proceeding with the law would threaten “Kenya's ability to meet its commitments as a Scaling Up Nutrition (SUN) country.” GAIN also lobbies against World Health Assembly Resolutions at Codex Alimentarius meetings where global food standards are set, clearly trying to open up markets for fortified foods and supplements for its Business Alliance members such as Danone, Pepsico, Coca Cola, Britannia. Danone, one of the biggest Code violator, was forced under public pressure to step down from GAIN's Board, of which it was a member, but continued until recently to be a GAIN partner. About GAIN's lack of transparency: The BMJ wrote to Veena Rao about her opinion piece entitled, "*Law on infant foods inhibits the marketing of complementary foods for infants, furthering undernutrition in India*". In this online Personal View, Veena Rao did not declare any competing interests. She has now told us that she has been "a member of the Advisory Board on the Britannia Nutrition Foundation (a non-profit trust) since 2009." Britannia Industries is represented on the Lead Group of SUN and the Board of GAIN. Its stated purpose is to "*Help people enjoy life-through healthy snacking.*" Encouraging all day snacking on 'slightly better for you' junk foods seems to be one of the food industry's Top Strategic Priorities.

<http://info.babymilkaction.org/sites/info.babymilkaction.org/files/Wolf%20GAIN%20PR.21.1.14.pdf>





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Conflicts of interests : remind public agencies and UN Member States of the OECD Guidelines on Managing COIs in the Public Service (2003) and use the OECD toolkit <http://www.oecd.org/governance/ethics/49107986.pdf>

## **Climate change**

### IBFAN awareness paper 'Climate change and health' :

Protecting, promoting and supporting breastfeeding is one practical example of “finding durable solutions to the post-disaster phase to empower and assist people disproportionately affected by disasters...” Infants and young children are highly vulnerable to the effects of climate change. They are the first ones who suffer in the disasters caused by global warming and environmental degradation: Whenever natural disasters strike, breastfeeding protects babies' health and can ensure they survive in the post-disaster period. Scientific research has provided the evidence for this protective effect on infants' health and that of their mothers: Supporting breastfeeding mothers to re-establish breastfeeding thus alleviates the severe impact on the survival and health of vulnerable infants during the increasing number of disasters caused by climate change.

<http://ibfan.org/docs/climate-change-2015-English.pdf>

### UNICEF report 'Unless we act now: The impact of climate change on children':

“In emergency situations such as storms, breastfeeding becomes vital: not only is breastfeeding the best source of nutrition for the baby, it contains antibodies that protect the child against illness. In emergency situations it becomes almost impossible to prepare and feed breastmilk substitutes safely.”

[http://www.unicef.org/publications/files/Unless we act now The impact of climate change on children.pdf](http://www.unicef.org/publications/files/Unless_we_act_now_The_impact_of_climate_change_on_children.pdf)

### IFE Operational Guidance :

Appropriate and timely support of infant and young child feeding in emergencies (IFE) saves lives. All countries should implement and enforce this guidance developed by the IFE Core group [WHO, UNICEF, UNHCR, WFP, IBFAN-GIFA, CARE USA, Foundation Terre des hommes and the Emergency Nutrition Network (ENN)].

<http://files.enonline.net/attachments/1001/ops-guidance-2-1-english-010307-with-addendum.pdf>

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