



Acknowledgements

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MARKETING OF BREAST-MILK SUBSTITUTES NIGERIA 2018

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Introduction

The Access to Nutrition Foundation (ATNF) is dedicated to objectively assessing and improving the contribution the private sector makes to addressing global nutrition challenges. ATNF designs and publishes a series of Access to Nutrition Indexes. The aim of the Indexes is to encourage companies to increase consumer access to healthy products and to responsibly exercise their influence on consumer choice and behavior.

The Global Access to Nutrition Index is published every two years and is made up of several components, one of which addresses the marketing of breast-milk substitutes (BMS). This is because ATNF believes that it is essential for companies to contribute to optimal infant and young child nutrition. Doing so is critical to achieving global nutrition goals, such as those set by the World Health Organization (WHO) for 2025 on reducing wasting and stunting, and other goals related to combating growing levels of overweight and obesity and reducing deaths and illness related to diet-related chronic diseases. It is also key to delivering Sustainable Development Goal (SDG) 3 – Good Health and Wellbeing, which in turn underpins the achievement of many other SDGs.

The importance of infant and young child nutrition

Nutrition within the first 1,000 days of a child's life, from conception to two years old, is particularly important. Optimal breastfeeding is a crucial element of infant and young child nutrition. Scaling up breastfeeding to near universal levels could prevent the deaths of over 820,000 children under five each year.² It is for this reason that WHO recommends that babies everywhere are breastfed exclusively for the first six months, at which point safe, appropriate complementary foods (CF) should be introduced to meet children's evolving nutritional requirements. WHO also notes that CF should not be used as BMS, and infants and young children should continue to be breastfed until they are two or older.³

Inappropriate marketing of BMS can undermine optimal infant and young child nutrition. It is one of several factors, which also include rising rates of female participation in the labor force, urbanization and increasing incomes and aspirations, that have encouraged the adoption of convenience-oriented lifestyles and made baby formula and prepared baby foods more desirable. In many countries, the caché of premium products is an important symbol of social status.⁴

How BMS marketing is addressed in the Global Access to Nutrition Indexes

ATNF appointed Westat, a leading global health and social sciences research company, to carry out two in-country assessments of BMS marketing, having worked successfully with the company on similar studies in Vietnam and Indonesia in 2015 (incorporated into the 2016 Global Index), and in India in 2016 (incorporated into the first India Index launched in 2016). In mid-2017, Westat undertook two studies that will feed in to the 2018 Global Index: one in Lagos, Nigeria and one in Bangkok, Thailand. For the Nigeria assessment, Westat appointed as its local partner Oxford Policy Management (OPM). OPM's expertise ranges from research and policy development through implementation, support and monitoring and evaluation.

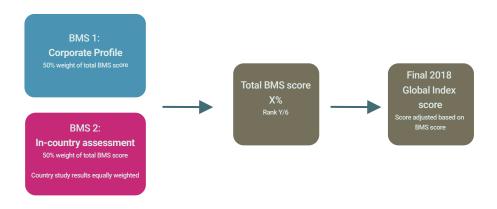
Because of the importance of infant and young child nutrition, each edition of the Global Access to Nutrition Index includes a BMS marketing sub-ranking that scores and ranks the world's six largest baby food manufacturers. They include four food and beverage sector companies – Danone, FrieslandCampina, Kraft Heinz and Nestlé – and two other companies – Abbott and RB/Mead Johnson Nutrition (RB/MJN).⁵ The BMS marketing sub-ranking scores of the four food and beverage sector companies will be reflected in their overall scores and ranking in the 2018 Global Access to Nutrition Index, due to be published in the second quarter of 2018. The two other companies were assessed to provide a more complete comparison of the world's major baby food producers.

The BMS marketing policies and practices of the six companies are assessed using ATNF's methodology, which measures the extent to which companies market their BMS products in line with the recommendations of the International Code of Marketing of Breast-milk Substitutes, subsequent

BOX 1 THE INTERNATIONAL CODE OF MARKETING OF BREAST-MILK SUBSTITUTES

The International Code of Marketing of Breast-milk Substitutes was adopted by the World Health Assembly in 1981. It is a non-binding instrument that sets out 'a recommended basis for action' for member states to regulate and monitor the marketing of BMS. Twenty-one resolutions have subsequently been passed that augment The Code, clarifying and/or extending its scope and application. The Code's articles relate in some cases to governments, in some cases to BMS manufacturers and in some cases to healthcare systems, workers and others. To give legal effect to The Code, countries need to enact laws and regulations and then monitor rigorously whether these are being respected.

FIGURE 1 BMS marketing scoring system used for the Access to Nutrition Indexes





BMS₁

An analysis of whether companies' policies align with The Code; whether they have management systems and procedures in place to implement those policies, and; whether they publish these documents.



BMS 2

In-country studies of marketing practices, carried out in partnership with Westat, based on the NetCode protocol.

relevant World Health Assembly (WHA) resolutions (together referred to as The Code) and related local regulations.

The BMS sub-ranking score is based on two components (see Figure 1):

- The first component (BMS 1 Corporate Profile) comprises 50% of the total score.
- The second component (BMS 2 In-country assessment) therefore also comprises 50% and was based for both the 2018 and 2016 Global Indexes on two in-country studies.⁶ For the 2018 Index, the BMS 2 scores are based on the results of the Nigeria study set out in this report and a similar study done in Thailand.

If the four food and beverage sector companies included in the Global Index market their products fully in line with The Code, their overall Index score is not affected. If they do not, their overall Index score is reduced by between 0 and -1.5 points based on the total BMS marketing score (BMS 1 and BMS 2).⁷ For example, if a company achieves a score of 40% on the total BMS marketing sub-ranking, its overall Index score is reduced by -0.9 (-1.5 * (100-40%) = -0.9).

ATNF's study of BMS marketing in Nigeria

This report summarizes the findings of the study of the marketing of BMS in Nigeria using the 2015 version of the NetCode protocol.⁸ It sets out the level of compliance with The Code for each of the five major baby food companies whose products were found in Lagos: Abbott, Danone, FrieslandCampina, Kraft Heinz and Nestlé. RB/MJN is not included because, although a number of its BMS products were found for sale in Lagos, when ATNF asked the company to confirm (after data collection had been completed) which of those products were intended for the Nigerian market, it stated that none were. That is, all of its products found for sale were parallel imports (products confirmed not meant for the local market and not approved by the National Agency for Food and Drug Administration and Control (NAFDAC)).

Each company's level of compliance has been determined using the established scoring system set out in the ATNF methodology. Full details of the Westat Nigeria study, including findings for all 22 companies whose products were found in Lagos are available in the Westat report, along with their reports of previous country studies.

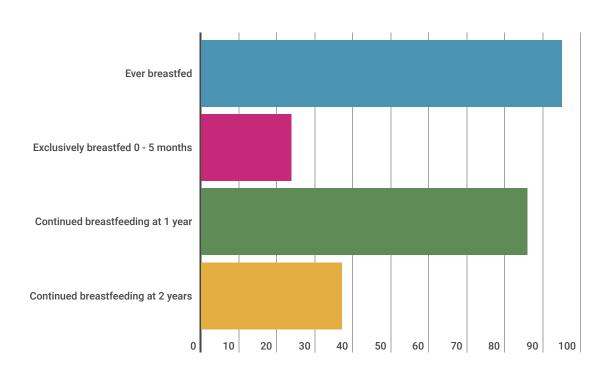
BOX 2 HOW ATNF ADDRESSED THE RECOMMENDATIONS OF WHA 69.9 IN THE STUDY

A WHA resolution was passed in May 2016, known as WHA 69.9, which: 1) extended the scope of application of The Code to formulas marketed as suitable for children up to 36 months of age, and; 2) clarified how various Articles should be applied and set out new recommendations for marketing complementary foods for children between six and 36 months. Although data was collected to assess corporate compliance with WHA 69.9 these results have not been included in the companies' scores in order to provide comparability with the three previous studies. Further, as the resolution was adopted in May 2016, it was felt that companies would not, by the time of the study, have made changes to reflect its recommendations. However, the Westat report provides commentary about the extent to which companies have embraced the resolution's recommendations. Future editions of the BMS marketing sub-ranking of the Global Index will include these figures.

Context for the Nigeria study

Nigeria was selected using the same criteria ATNF has used for previous studies. That is, the presence of all or most of the major baby food manufacturers that ATNF ranks, combined with Nigeria's ranking on a risk rating system used by FTSE4Good to select countries for similar studies it undertakes. The rating is based on data relating to the child mortality rate, level of malnutrition, HIV rates, corruption levels, the Human Development Index score, status of implementation of The Code, and other factors. The NetCode protocol recommends that the study be conducted in the largest city of the chosen country. ATNF therefore selected Lagos as the geographical study area within Nigeria.

FIGURE 2 Breastfeeding rates in Nigeria



Source: Multiple Indicator Cluster Survey, NBS, UNICEF, Nigeria 2016-2017

Infant and young child feeding practices in Nigeria

While 95% of the children in Nigeria have been breastfed at some point in their early lives, the 2016-17 Multiple Indicator Cluster Survey (MICS) done by the National Bureau of Statistics and the United Nations Children's fund (UNICEF) shows that the prevalence of timely initiation and continuation of breastfeeding at two years of age is low (see Figure 2). The prevalence of children exclusively breastfed until the age of six months is 23.7%. Though continued breastfeeding at one year is 85.9%, there is a huge drop to 37.1% at two years of age.

Data in the Nigeria Demographic Health Surveys (NDHS) shows that the prevalence of children fed in accordance with infant and young child feeding recommendations has remained low (NDHS reviewed 1999, 2003, 2008 and 2013) with early or timely initiation of breastfeeding showing a decline over time, and the prevalence of exclusive breastfeeding remaining unchanged.¹¹

A study in 2017 by Alive & Thrive and UNICEF estimated that, in Nigeria, 103,742 lives could be saved annually

through improved breastfeeding practices. In addition, the study revealed that the annual cost of treating children with diarrhea and pneumonia resulting from inadequate breastfeeding practices¹² is approximately NGN 6.93 billion (\$22 million).

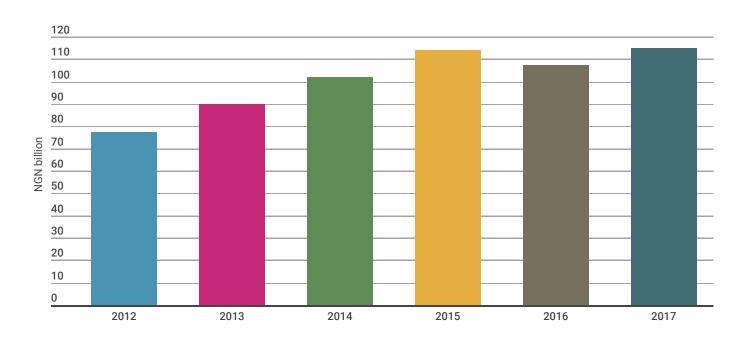
In terms of the economic costs of the use of BMS by Nigerian families, the authors found that the cost of purchasing economy brand infant formula can be significant – up to 34% of a family's earnings for the first two years of a child's life.

The Nigerian baby food market

The baby food market in Nigeria has been growing for years, though it shrank in 2016. It was, however, expected to have grown again in 2017, reaching a value of NGN 114.9 billion (see Figure 3). The 'dried baby food' category accounts for the major share within the baby food market, with a value of over NGN 60 billion in 2017.

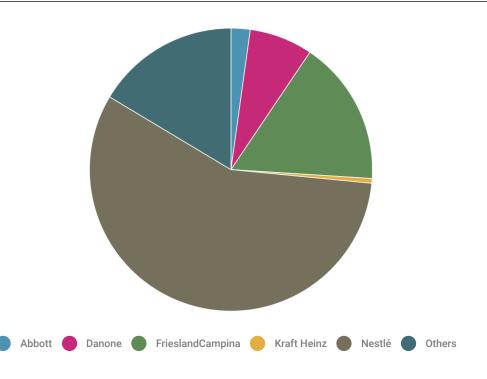
Nestlé was by far the largest company in the baby food market in Nigeria in 2016, with a share of more than 56% of the total market (see Figure 4).

FIGURE 3 The baby food market in Nigeria



Source: Derived from Euromonitor International, Packaged Food 2017 Edition¹³

FIGURE 4 Leading baby food companies, Nigeria, 2016



Source: Derived from Euromonitor International, Packaged Food 2017 Edition

Nigerian laws and regulations restricting the marketing of baby foods

As well as assessing compliance with The Code, the study assessed corporate compliance with prevailing relevant national regulations relating to BMS, including:

- A range of marketing restrictions in Marketing (Breast-Milk Substitutes) Act 1990, including a prohibition on advertising formulas for infants up to 12 months of age.¹⁴
- A range of marketing restrictions in the National Agency for Food and Drug Administration and Control Act 1993 (as amended) – Marketing of Infant and Young Children Food and Other Designated Products (Registration, Sales, etc.) Regulations 2005.¹⁵ The scope of this act covers formulas and CF for infants and young children up to 36 months of age.

Westat's analysis of the national measures determined that these align with, or expand on, The Code in several ways, particularly in respect of product labeling. The label regulations set out definitions of some terms used in the analysis of product labels. New legislation is pending the approval of the Nigerian Ministry of Health. This study, therefore, provides a baseline against which to measure the effectiveness of the new regulation in curtailing BMS marketing once passed.

Study scope

Products within the study scope

This study focused on compliance of companies whose BMS products were for sale in Nigeria with The Code, subsequent WHA resolutions (up to, but not including, WHA 69.9) and Nigeria's national regulations.¹⁶

Thus, this report presents results only for BMS for infants and young children including:

- Infant formula for infants from birth.
- Follow-on formula for infants from six months of age.¹⁷
- Growing-up milk for children from 12 months of age.
- Complementary foods marketed as suitable for infants and young children aged up to six months.¹⁸

Study methodology

The methodology of the Nigeria study was based on the 2015 version of the NetCode protocol, which stipulates the types of data that should be collected as shown in Table 1. Only observed incidences of non-compliance are included in the scores for the five companies being rated by ATNF rather than incidences of non-compliance reported by mothers and healthcare workers because this data is subjective and can be subject to various forms of recall bias.

TABLE 1 Study location and activities

Lagos	Healthcare facilities (HCFs); 33 HCFs were selected from the sampled districts HCFs were selected via a two- stage sample design. 1) Systematically selected sample of 10 Local Government Areas, in which 2) 33 HCFs were selected. ^A	Interview healthcare workers The types of healthcare workers included nurses, doctors, midwives and assistants in well-baby clinics and maternity clinics. A total of 98 healthcare professionals were interviewed. ^C Evaluation of informational and educational materials Evaluation of marketing and point-of-sale promotions and informational and educational materials Labels and inserts of legitimate assessed for compliance with local regulations and The Code/WHA resolutions				
	Of the selected HCFs, six were public facilities and 27 were private.					
	Retail stores; 43 physical retail outlets were selected One small retailer or pharmacy close to each HCF and ten large retail stores based on the volume and variety of products under the scope of the study. Five major online retailers. ^D					
	Labels and inserts of 34 unique BMS products (a large and small pack of each product type, if available) selected via a detailed internet search and stores visits in Greater Lagos.					
Nigeria	Media; assessment of traditional and internet	Paid-for advertising: Media channels monitored for six	Television (77), radio (193) and print media (24) ^E			
	advertising Websites and online retailers were selected based on relevance and prominence. Other media channels were selected based on size of audience.	months.	12 parent and child websites			
			5 online retailers ^F			
		Companies' own advertising: Data was obtained for eight weeks.	5 local company and 3 brand websites, as well as 10 social media company platforms. ^G			

- A total of 110 HCFs were selected; 33 facilities were allocated to the main sample, and the remaining 77 facilities were saved for the reserve sample.
- B There were a total of 15 refusals.
- There was one HCF with only two staff. For that HCF, only two interviews were conducted.
- For all companies ranked by ATNF, the only promotions included in their scores were those found on major online retail sites with which they confirmed they have a commercial relationship. ATNF is aware that some point-of-sale promotions on these sites are initiated by small traders which do not procure their merchandise from the companies directly. Nevertheless, ATNF believes that companies have an opportunity and a responsibility to encourage major online retailers to ensure that all of their BMS products are marketed responsibly on those sites, in line with The Code, including those sold by small traders.
- E Media monitoring was conducted by Compliance and Contract Monitoring (CCM), an independent media monitoring company in Lagos.
- F Data was gathered for eight weeks.
- Included were manufacturing companies' Facebook pages (5), Instagram accounts (2) and YouTube channels and twitter feeds (3).

Results

Table 2 presents a summary of the findings of the study. It sets out the observed incidences of non-compliance for the 11 companies that were assessed in the study: the five companies ranked by ATNF and six other companies. In addition to cataloguing the types of non-compliance that can be observed, Westat also interviewed mothers and healthcare workers to capture their recollection of various types of marketing. While these results are not included in companies' scores (as they are subjective and cannot be verified), they provide additional insights into the levels and types of marketing in Lagos.

The analysis focused on the 34 BMS products intended for the Nigerian market, i.e. excluding parallel imports, for the four product types of infant formula, follow-on formula, growing-up milk and complementary foods.

Forty-five BMS products were excluded from the results as they were identified as parallel imports. Eight were made by Abbott, 15 by Danone, nine by Nestlé, seven by RB/MJN, and six by 'Other' companies. A further 73 complementary foods labeled as suitable for children from 6-36 months were found (12 made by Danone, two by FrieslandCampina, four by Kraft Heinz, 12 by Nestlé and 43 by 'Other' companies). However, as described in the ATNI methodology, these products were not included in the analysis and did not affect the companies' results.

In total, 146 incidences of non-compliance for BMS products were found in Lagos during the study period. This figure is substantially lower than the levels in Indonesia (1,246), Thailand (3,185) and Vietnam (384) found in previous studies, though it is higher than in India (26).

Results by company

The five companies rated by ATNF are scored according to their relative level of compliance (i.e., normalized), calculated by dividing the total number of incidences of non-compliance associated with BMS products by the number of BMS products found in Lagos.

Companies are rated as being in complete compliance with the methodology if the number of incidences of non-compliance is zero. If there is less than 1 incidence of non-compliance, normalized, they are rated as having a high level of compliance; between 1.1 and 2 normalized incidences of non-compliance results in a medium compliance rating and a low compliance rating is assigned when a company is found to have more than 2.1 normalized incidences of non-compliance.

- Abbott had four incidences of non-compliance for the four products found in Nigeria. (This results in a normalized score of 1.0). It is therefore rated as having a high level of compliance overall.
- Danone had three incidences of non-compliance for the three products found in Nigeria (This results in a normalized score of 1.0). It is therefore rated as having a high level of compliance overall.¹⁹
- Nestlé had four incidences of non-compliance for the four products found in Nigeria (This results in a normalized score of 1.0). It is therefore rated as having a high level of compliance overall.
- FrieslandCampina had 25 incidences of non-compliance for the four products found (6.3 per product on average).
 It is therefore rated as having a low level of compliance overall.
- Kraft Heinz had 94 incidences of non-compliance for the nine products found (10.4 per product on average).
 It is therefore rated as having a low level of compliance overall.

A total of 16 incidences of non-compliance were identified in association with ten BMS products of the six 'Other' companies. A total of six point-of-sale promotions were identified related to Perrigo's products, and all ten products were found to have one or more non-compliant elements to their labels and/or inserts.

Point-of-sale promotions

By far the largest number of incidences of non-compliance were point-of-sale promotions on online retail sites – a total of 109 or 74% of all observed non-compliances²⁰. All of these were price promotions. Two companies rated by ATNF accounted for 103 of them (94% of the total): 85 were for CF for infants from birth to six months old made by Kraft Heinz (78% of the total) and 18 were for infant formula and growing-up milks made by FrieslandCampina (17% of the total). There were none for follow-on formula. A total of six such promotions were found for Perrigo's 'Member's Mark' products.

TABLE 2 Ranking and summary of observed non-compliances per relevant Code sub-article, Nigeria 2017

Ranking and summary	oi obseivi	eu non-c	Unipliance	es per re	ievani Oo	ue sub-a	u ucie, iviç	jena 20 i	′	
	Level of compliance	Relative no. of non- compliances*	No. of products found	Total non-compliances identified	No. of products referenced on information and educational materials	Observations of equipment at HCFs	No. of products referenced in adverts + promotions on assessed media	No. of point-of-sale promotions: all retailers	No. of products referenced on promotional materials at HCFs	No. of product labels/inserts with at least one non-compliance
					Article 4	Article 4.3	Article 5.1	Article 5.3	Articles 6.3, 6.8	Article 9
Companies included in the BMS	sub-ranki	ng of 201	8 Global	ATNI						
Abbott (US)	HIGH	1.0	4	4	0	0	0	0	0	4
Danone (FR)	HIGH	1.0	3	3	0	0	0	0	0	3
Nestlé (CH)	HIGH	1.0	4	4	0	0	0	0	0	4
FrieslandCampina (NL)	LOW	6.3	4	25	2	1	0	18	0	4
Kraft Heinz (US)	LOW	10.4	9	94	0	0	0	85	0	9
Sub-total			24	130	2	1	0	103	0	24
Companies not included in the B	MS sub-ra	anking of	2018 Glo	bal ATNI						
Perrigo (IRE)			0	6	0	0	0	6	0	0
Aspen Holdings (ZA)			3	3	0	0	0	0	0	3
Alter Farmacia (ES)			2	2	0	0	0	0	0	2
Promisador (ZA)			2	2	0	0	0	0	0	2
Chidera Inc (US)			2	2	0	0	0	0	0	2
Vietnam Dairy (VT)			1	1	0	0	0	0	0	1
Sub-total			10	16	0	0	0	6	0	10
Total			34	146	2	1	0	109	0	34

^{*} Total number of incidences of non-compliance identified divided by the total number of products evaluated, e.g. for FrieslandCampina, 25/4=6.3

Labels and inserts

The labels and/or inserts for the 34 BMS products assessed all had at least one non-compliant element (the average number of non-compliances per product was 5.8).²¹
The most common type of non-compliance was the lack of a statement on the superiority of breastfeeding. In total, 29% of the infant formulas did not include a statement that the BMS product should only be used under recommendation of a clinician, while 89% of all products were not compliant with the Nigerian regulation to bear directions for use in English and the three main Nigerian languages.

Adverts and promotions on traditional and company media

The results from the interviews with mothers revealed that 60 of them said they had seen at least one BMS promotion in the last six months. The mothers most frequently recalled seeing ads for products within the scope of The Code on television (68%).

However, this contrasts with no adverts being found for BMS products by the company that monitored TV channels (and other traditional media). The monitoring company did find a lot of adverts for FrieslandCampina's 'Peak 4,5,6' milk products; these are marketed as suitable for young children from four to six years of age. This may be an example of the impact on mothers of promoting products for older children using very similar branding to similar products for younger children — i.e. cross-promotion — creating brand awareness and some confusion over which products are BMS and which are not.

Equipment and materials

One item of equipment was found displaying branding – a growth chart – donated by FrieslandCampina. The fact that it displayed a brand name and/or logo means that it was non-compliant with The Code's original recommendations.²² By extension, therefore, it would also contravene the stronger recommendation of WHA 69.9 that no equipment should be donated.

Financial or material inducements

One of the 98 healthcare workers reported contact by a company to provide a personal gift (by Nestlé). Thirteen (13%) reported that a company representative made future offers to sponsor events or workshops for HCF staff or to provide payment to attend events or workshops outside of the facility. This represented a total of 14 reports: Ten from Nestlé, one from FrieslandCampina and three from 'Other' companies.

Samples, gifts and contact

Of the 330 mothers interviewed, nine (3%) reported receiving a gift associated with a BMS company. Of these

nine, seven were from company representatives, and none were from retail personnel. For the most part, mothers could not remember a specific company. However, one specific gift was reported from FrieslandCampina. In addition, three mothers reported that retail personnel encouraged them to use BMS products. The company name was unknown.

Four (1%) of the interviewed mothers reported receiving a free sample of a BMS product from Nestlé (2), Abbott (1), and one was unknown. Of the interviewed mothers, none reported receiving a free sample from a healthcare worker. Nevertheless, there were 58 reports made by 47 mothers (14% of the mothers interviewed) of a health worker telling them to use baby food products. The company name was unknown in most of the reports (69%). However, seven (12%) reports were for Nestlé products, and two (3%) were for Danone.

Lastly, two of the 98 healthcare workers interviewed reported instances of receiving samples of a BMS product by Nestlé (1) and 'Other' companies (1).

TABLE 3 Results by product type

	Total non- compliances	Infant formula	Follow-on formula	Growing-up milk	Complementary foods nil - six	No specific product type*			
Companies included in the BMS sub-ranking of 2018 Global ATNI									
Abbott (US)	4	2	2	-	-	0			
Danone (FR)	3	1	1	1	-	0			
Nestlé (CH)	4	2	1	1	0	0			
FrieslandCampina (NL)	25	11	0	13	0	1			
Kraft Heinz (US)	94	-	-	-	94	0			
Sub-total	130	16	4	15	94	1			
Companies not included in the BMS sub-ran	king of 2018 (Global ATNI							
Perrigo (IRE)	6	6	0	0	0	0			
			Ŭ		U				
Aspen Holdings (ZA)	3	1	1	1	0	0			
Aspen Holdings (ZA) Alter Farmacia (ES)	3 2	1							
		1 1 1	1	1	0	0			
Alter Farmacia (ES)	2	1 1 1	1	1	0	0			
Alter Farmacia (ES) Promisador (ZA)	2	1	1 0 1	1 1 0	0 0	0 0			
Alter Farmacia (ES) Promisador (ZA) Chidera Inc (US)	2 2 2	1	1 0 1	1 1 0 0	0 0 0 0	0 0 0			

^{*} Items of equipment bear only the company or brand names or logos and cannot be attributed to particular product types.

Results by product type

Analyzing the observed incidences of non-compliance by product type, as shown in Table 3, illustrates that the products promoted most heavily in Nigeria are complementary foods for infants from birth to six months, with a total of 94 incidences of non-compliance found (64% of the total). However, these all related to products made by Kraft Heinz, some or all of which are likely to be parallel imports. Nevertheless, because the company did not respond to ATNF's requests to identify which products of those found were parallel imports, all were treated as being intended for the Nigerian market and were included in the company's results.

A total of 27 incidences of non-compliance were found for infant formulas, but only seven were found for follow-on formula. A total of 17 incidences of non-compliances were observed for growing-up milks, of which 13 were online price promotions for FrieslandCampina.

More detailed results are available in the Westat report.

Recommendations

Advertisements and point-of-sale promotions

Monitoring of online retailers revealed relatively high levels of point-of-sale promotions. Baby food manufacturers whose products are being promoted in this way should work to strengthen their contracts with distributors and retailers, particularly those with online sites, to restrict such promotion. They should also monitor whether those sites comply with their policies and alert retailers when they identify a breach. Some companies already do this, which we commend. The Government of the Republic of Nigeria is clearly effectively restricting promotions for BMS products in 'brick and mortar' retailers. It should also try to ensure that its system to monitor promotions extends to online retailers.

Parallel imports

Forty-five BMS products available in Lagos were identified by companies as parallel imports. These products were excluded from the results presented here as companies are not responsible for these products being for sale in Nigeria. However, it would appear that more needs to be done by the government to clamp down on such imports.

Product labeling

Analysis of products identified as designed and approved for sale in Nigeria showed that none of the labels and seven (out of ten) inserts of the 34 BMS products assessed were compliant with local regulations and/or The Code. They all had at least one non-compliance. In fact, most labels exhibited multiple instances of non-compliance. The Nigerian

Government should review its processes to assess product labels and inserts prior to endorsing their use.

Awareness raising

Given the significant and widespread nutrition challenges Nigeria faces, and the important role that breastfeeding can play in preventing illness in childhood and later life, more resources should be dedicated to educating communities, consumers, healthcare workers and baby food companies, as well as distributors and retailers, about the value of breastfeeding and the recommendations of The Code.

Cross-promotion

In light of the extensive advertising of milk-based products aimed at older children, using similar branding and packaging to BMS, greater emphasis should be placed by companies and the Government on eliminating cross-promotion of such products. The Government should ensure that sufficiently robust measures are incorporated to address cross-promotion in the proposed new Act.

Study limitations

Several limitations to the study should be noted. First, the interviewers selected three health workers within each HCF, following the NetCode protocol which indicates ideally a clinic director, physician and nurse or midwife. They might or might not have been the best workers to interview with respect to facility-related issues, i.e. others might have had more experience of companies' marketing activities in the facility. In particular, most of the health workers interviewed were nurses (52%). Fewer more senior level staff were interviewed, such as directors, doctors, and department heads. Therefore, it is possible that types of marketing that more senior staff may be more knowledgeable about, such as equipment donations and visits by baby food company representatives, may have under-reported.

Second, the selection of retail outlets to observe point-ofsale promotions was purposive, not representative. Because of this design, we cannot generalize the study results to the universe of stores in Lagos. Additionally, observations were made only on one day, so it is possible that some stores would have been different if visited over a period of time.

Given that this study was conducted over only a short period of time in Lagos, it is not necessarily representative of the situation in Nigeria as a whole and the results cannot therefore by generalized to the whole country.

Next steps

This study was one of two conducted over the summer of 2017. ATNF published a similar summary in early 2018 of the study carried out in Bangkok, Thailand. The results from these two studies will be combined with ATNF's Corporate Profile scores to generate overall scores and rankings for the six multinationals included in the BMS marketing sub-ranking of the 2018 Global ATNI. This Index is due to be published

in the second quarter of 2018, along with scorecards for each of these six companies detailing their performance in all areas

ATNF hopes that the five multinational companies assessed in Nigeria will immediately begin work to determine how the incidences of non-compliance identified occurred and to put in place necessary practices to eliminate them. In addition, ATNF hopes that the Nigerian government will find the study useful in their work to monitor corporate marketing practices following the enactment of the new legislation.

NOTES

- 1 http://www.who.int/nutrition/global-target-2025/en/
- ² Lancet 2016 Breastfeeding Series, 2016
- 3 http://www.who.int/nutrition/topics/infantfeeding_recommendation/en/
- http://www.nielsen.com/sa/en/press-room/2015/oh-baby-global-baby-food-and-formula-sales-will-reach-nearly-35-billion.
 html
- ⁵ Note that RB used to be called Reckitt Benckiser but rebranded to use only the name RB. It acquired Mead Johnson Nutrition in the summer of 2017 and therefore is now called RB/Mead Johnson Nutrition.
- ⁶ If in the future it is possible to draw on additional NetCode studies, the results will be an average of the number of studies used; e.g. if the results from 3 country studies are used, each will be weighted 33.3%. In addition, when a company is not assessed in all countries, only the country/countries that the company was assessed in will be taken into account in the BMS 2 score.
- ⁷ The total possible adjustment of -1.5 is based on consultation with stakeholders and advice from the ATNF Expert Group.
- 8 http://www.who.int/nutrition/netcode/toolkit/en/
- The FTSE4Good Index Series is a product of FTSE Russell. The Indexes comprise companies that demonstrate good practice; Environmental, Social and Governance risk management is measured using FTSE Russell's ESG criteria. Companies that make BMS must meet FTSE4Good's BMS criteria to be included in the Indexes.
- 10 Multiple Indicator Cluster Survey, NBS, UNICEF, Nigeria 2016-17
- 11 Ogbo et al. International Breastfeeding Journal (2017) 12:9 DOI 10.1186/s13006-017-0101-5
- 12 http://aliveandthrive.org/wp-content/uploads/2016/03/CONB-Nigeria.pdf
- 13 Euromonitor's data does not distinguish between parallel imports and products intended for the Nigerian market.
- 14 https://extranet.who.int/nutrition/gina/sites/default/files/NGA%201990%20Marketing%20Breast-Milk%20Substitutes%20 Act 0.pdf
- http://www.nafdac.gov.ng/images/MARKETING_OF_INFANT__YOUNG_CHLDREN_FOOD__OTHER_DESIGANTED_ PRODUCTS_REG_SALES_ETC._REGULATIONS_2005.pdf
- Although Westat's study included all formulas intended for infants up to 36 months of age, as well as CF for that age group, the scores presented here are based only on the scope and definitions of The Code and resolutions up to, but not including, WHA 69.9. In future Indexes, the scores will reflect companies' performance related to WHA 69.9.
- ¹⁷ Follow-on formula is sometimes called follow-up formula.
- ¹⁸ Note that although this act extends to the marketing of CF for infants and young children from 6 to 36 months, this summary does not consider these products, as it focuses solely on BMS marketing in order to provide comparability with previous studies.
- ¹⁹ This report was revised on May 23rd 2018, reducing the total number of products assessed for Danone from 4 to 3, following a further review of included products which concluded that one product was parallel import. This amendment did not influence the relative number of non-compliances found (1), nor the level of compliance (High).
- ²⁰ For all ATNI companies other than Kraft Heinz, only promotions on retailers' sites they confirmed they have commercial relationships are included. Kraft Heinz did not respond to the request to confirm this information. As a result, all such promotions are included.
- 21 If a product label or insert has one or more non-compliant element it is counted as non-compliant. This score does not reflect, therefore, the total number of incidences of non-compliance, rather the total number of products with non-compliant labels or inserts.
- ²² One other growth chart was found with Pfizer branding. Pfizer was bought by Nestle in 2012. Since 2015 no Pfizer branded products have been available in the market. This piece of equipment is not therefore included in Nestle's score.

