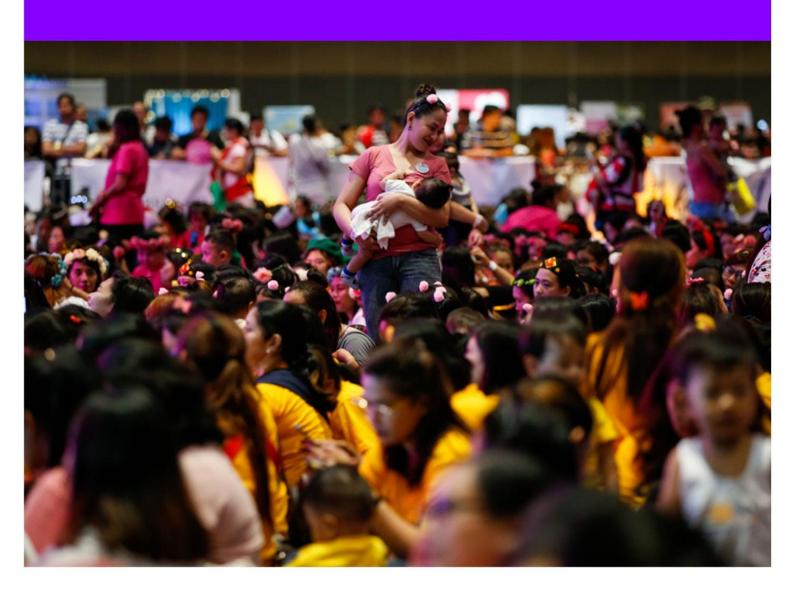


The Philippines

Marketing of breast-milk substitutes and complementary foods

May 2021





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Westat and the Nutrition Center of the Philippines (NCP), its local subcontractor, were responsible for the collection of data related to company compliance with the International Code of Marketing of Breast-milk Substitutes, all subsequent, relevant WHA resolutions, and any additional country-specific regulations related to marketing of these products. Westat is responsible for the analysis of the data related to compliance with those standards on which the Access to Nutrition Foundation (ATNF) will (in part) base the scoring of baby food companies in the ATNI BMS/CF Marketing Index 2021, which will in turn inform the companies' scores in the ATNI Global Index 2021. Westat and NCP engaged with health facilities, mothers of infants who attended those facilities, health professionals at the facilities, and retailers as part of the data collection and analysis process.

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1. Introduction

The Access to Nutrition Initiative (ATNI) is dedicated to objectively assessing and driving improvement in the contribution made by the private sector to addressing global nutrition challenges. ATNI does this by designing and regularly publishing various indexes and other private sector accountability tools. These indexes and tools measure and track, over time, the extent to which companies are working to increase consumers' access to healthy foods and responsibly exercising their influence on consumer choice and behavior.

One of ATNI's core activities is assessing the extent to which companies that make formulas and foods for infants and young children market their products in line with the prevailing international gold standard: the International Code of Marketing of Breast-Milk Substitutes (BMS) and subsequent, relevant World Health Assembly (WHA) resolutions. It is essential for these companies to play their part in contributing to optimal infant and young child nutrition and achieving nutrition goals, particularly those set by the World Health Organization (WHO) for 2025 and national governments.¹

This report sets out the results of a comprehensive study, commissioned by ATNI and undertaken by Westat, of the marketing of BMS and complementary foods (CF) conducted in 2020 in the National Capital Region of the Philippines, which includes Manila. PwC drew on relevant data from the same study in its verification assessment reports for Danone, Nestlé and Reckitt on the marketing of BMS in the Philippines. PwC's reports were prepared for FTSE Russell to inform its decisions on these companies' suitability for continued inclusion in its FTSE4Good Indexes. More information about the FTSE Russell methodology and use of this data is available here.

1.1 The importance of infant and young child nutrition

Nutrition is particularly important within the first 1,000 days of a child's life (from conception to age two), and optimal breastfeeding is crucial to infant and young child nutrition.² WHO recommends that infants and young children everywhere are breastfed exclusively for the first six months, at which point safe, appropriate weaning foods – also known as complementary foods – should be introduced to meet their evolving nutritional requirements. WHO also recommends that such foods should not be used as breast-milk substitutes, and infant and young children should continue to be breastfed until at least two years of age or beyond.³ Any product that potentially replaces the consumption of breastmilk before the age of 36 months is considered to be a BMS.

Breastfeeding has long been proven to provide myriad significant health benefits compared to BMS. These benefits are unique to breastfeeding and help both mother and infant.^{4,5} Positive long-term benefits for infants include protection against becoming overweight or obese, as well as against certain non-communicable diseases such as diabetes mellitus.^{6,7} Furthermore, in areas of the world where hygiene is poor and the availability of, and access to, food is sub-optimal, breastfeeding is key to lowering infants' risk of undernutrition and infectious diseases.⁸ The latest evidence from a systematic review and meta-analysis found that babies that continued to be breastfed after 12 months of age exhibited a two-fold lesser risk of mortality than those not breastfed.⁹

The Cost of Not Breastfeeding tool showed that 595,379 deaths from diarrhea and pneumonia of children between 6-59 months of age can be attributed each year to not breastfeeding according to the recommendations of WHO and UNICEF. Nearly two-thirds (64%) of these deaths occur in lower middle-income countries. It also estimates that 974 956 cases of childhood obesity can be attributed to not breastfeeding according to recommendations each year. ¹⁰



For mothers, breastfeeding can reduce the risk of certain types of cancer, such as ovarian and breast cancer, and prolonged breastfeeding reduces post-partum weight retention.^{11, 12} Continued breastfeeding, as opposed to simply breastfeeding for a short period of time, can also reduce the risk of type II diabetes as well as cardiovascular diseases for the mother.^{13, 14} The *Cost of Not Breastfeeding* tool has shown that optimal breastfeeding has the potential to prevent an additional 98,243 deaths of mothers annually from cancer and type II diabetes.¹⁵

1.2 Factors that affect breastfeeding

While the vast majority of women can breastfeed their infants, and most infants are able to be breastfed, in low-, middle- and high-income countries, breastfeeding rates are falling and a marked transition in global infant and young child feeding has occurred, with higher use of commercial milk formulas. ¹⁶ The transition is linked with rising rates of female participation in the labor force in many developing markets, urbanization, and increasing incomes and aspirations, which have encouraged the adoption of convenience-oriented lifestyles and made infant formula and prepared infant foods more desirable.

Structural factors, such as inadequate maternity protection, workplace breastfeeding policies, and hospital and antenatal clinic policies that are not supportive of breastfeeding, strongly shape a mother's feeding preference even before birth.¹⁷ Socio-cultural factors further play a role where breastfeeding and complementary feeding practices are largely based on cultural customs and significantly influenced by grandmothers and the elderly in the community.

The global infant formula and baby foods market was estimated to have reached US\$53.7 billion in 2020.¹⁸ The sector's growth has been driven by investment in marketing by the manufacturers. Consumers indicate that traditional (46%) and online (68%) media sources influence their purchase of baby food/formula.¹⁹ This marketing of BMS and CF products has been demonstrated to contribute to the decreasing rates of breastfeeding.²⁰ All forms of marketing, including advertising, promotions and messages placed on labels, significantly shape the perceptions of caregivers by acting as an influential source of information. BMS and CF marketing strategies have been found to undermine optimal breastfeeding and timely introduction of CF, and to go against global guidance of exclusive breastfeeding for six months by promoting the early introduction of CF and displacing continued breastfeeding.²¹

In order to protect, promote and support breastfeeding, given its substantial and wide-ranging benefits, the WHA adopted The International Code of Marketing of Breast-Milk Substitutes in 1981and has passed many associated resolutions since. See Box 1 for further information.

1.3 How BMS and CF marketing is assessed in ATNI's Indexes

Since 2013, ATNI has published three iterations of the Global Access to Nutrition Index. Until 2018, these Global Indexes included a sub-ranking of the six largest baby food companies in the world. From 2021, ATNI will publish a separate Index expanded to assess the marketing of the nine largest baby food manufacturers. The ATNI BMS/CF Marketing Index 2021 will provide a more complete comparison of the world's major producers of formulas and foods for infants, older infants and young children by including, for the first time, three additional companies: Feihe, Mengniu and Yili. These companies are headquartered in China. The scores of the six companies that are constituents of the ATNI Global Index 2021 will again depend, in part, on their scores in the BMS/CF Marketing Index 2021.^a

^a Three of the nine companies are not included in the 2021 Global Index. Feihe because it is not among the world's 25 largest food and beverage manufacturers, the criterion for inclusion in that Index; Abbott and Reckitt as they are not food and beverage manufacturers.



The BMS and CF marketing policies, practices and disclosure of all nine companies will be assessed using <u>ATNI's methodology</u>, which measures two dimensions of their marketing:

- The extent to which these companies market their BMS products in line with the recommendations of The Code and subsequent relevant WHA resolutions (together here referred to as 'The Code'), and related national regulations where they go beyond The Code.^{22,}
- 2 The extent to which these companies market their CF in line with the recommendations of WHA 69.9, associated guidance and related national regulations.^b

Box 1: The International Code of Marketing of BMS and subsequent relevant WHA resolutions (The Code)

The International Code of Marketing of Breast-Milk Substitutes was adopted 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. The WHA has since passed 22 resolutions that augment The Code, clarifying and/or extending its scope and application.²⁴ The Code's articles make recommendations in some cases to governments, in some cases to manufacturers of formula and foods for infants and young children, and in some cases to healthcare systems, workers and others. To give legal effect to The Code, countries have to enact laws and regulations and rigorously monitor compliance.

The WHA passed resolution 69.9 in May 2016.²⁵ This resolution called upon manufacturers and distributors of foods for infants and young children to end all forms of inappropriate promotion, as set forth in the guidance. That guidance document: 1) extends the scope of application of The Code to formulas marketed as suitable for children up to 36 months of age; 2) clarifies how various articles of The Code should be applied; and 3) provides detailed new guidance on appropriate marketing of foods for older infants and young children aged 6-36 months.²⁶

In the Philippines study, data was collected on BMS and CF marketing and assessed against The Code, WHA 69.9 recommendations, and associated national legal measures, as appropriate. Therefore, the Philippines study is the first of the five similar studies ATNI has conducted to include the results of companies' compliance in marketing these products in line with WHA 69.9.

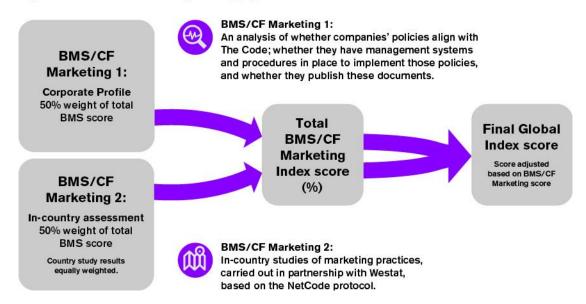
The score of companies in ATNI's BMS/CF Marketing Index 2021 is based on two types of research and analysis, as set out in Figure 1, each contributing 50% to the total:

- BMS/CF 1 Corporate Profile, which assesses their policy commitments, management systems and disclosure.
- BMS/CF 2 In-Country Assessments in two countries: the Philippines and Mexico.

^b It is important to note that because CF should only be introduced from six months of age onwards, if such products are not labelled and marketed that way they are defined as breast-milk substitutes. Therefore, the term CF is used here to designated foods and drinks marketed as suitable for children from six to 36 months of age.



Figure 1. BMS/CF marketing scoring system used for the Access to Nutrition Indexes



1.4 ATNI's study of BMS and CF marketing in the Philippines

Having worked successfully with Westat on previous studies, ATNI again appointed this global health and social sciences research company to carry out the in-country assessments in 2020. In the Philippines, Westat appointed the Nutrition Center of the Philippines (NCP) as its local partner. NCP specializes in social and biomedical research, program and policy development, implementation, monitoring and evaluation.

This report summarizes the findings of the Westat study in the Philippines. Full details of the study are available in the Westat report on ATNI's website, together with their reports of previous country studies. A similar report will be published in June 2021 summarizing the findings from the study in Mexico.



2. Context for the Philippines study

ATNI used the same criteria to select two higher-risk countries^c for this study as for the previous ones. This process was finalized in April 2019.

One of the most important factors was the presence of all or most of the six major infant and young child food manufacturers included in the BMS/CF Marketing Index 2021. Market presence (but not market share) was determined using Euromonitor International data and/or information provided either by the companies to ATNI directly or which ATNI collected from their websites. A key requirement for this study was also that Danone, Nestlé and Reckitt were present in the two countries due to ATNI's collaboration with FTSE Russell. Additional information considered to select countries was the status of implementation of The Code and levels of exclusive breastfeeding, as well as practical factors such as the likelihood of receiving government approvals to undertake the studies, language, and safety.

While all six companies were present in Mexico and it ranked highly on all factors, no other country where all six companies were present met or ranked highly on the selection criteria. Thus, countries where only five companies were present were then considered. The Philippines ranked next highest on this basis by some margin, which was an official market of Abbott, Danone, FrieslandCampina, Nestlé and Reckitt.

ATNI therefore decided, with the input of its BMS Expert Group, that Mexico and the Philippines were the best and only feasible combination of countries, and that the assessment of the company not present in the Philippines - KraftHeinz - would be based on only one market. This was also the case in previous assessments when it was not possible to select two markets in which all companies were present. However, between the finalization of the country selection and beginning the research, FrieslandCampina pulled its Friso products out of the Philippines (in October 2019). Therefore, only four companies could be included in this study which was undertaken during 2020: Abbott, Danone, Nestlé and Reckitt.

2.1 Infant and young child feeding practices in the Philippines

Figures from the Philippines Department of Science and Technology's Food and Nutrition Research Institute show that the proportion of infants who breastfed within one hour of birth has increased from 65% in 2015 to 74% in 2019. By that same year, 35% of infants between birth and six months of age were exclusively breastfed. This is a significant improvement from 2015, when only 25% of this age group were fed this way, but still lags significantly behind the WHO goal of 50% by 2025 and the average in the South Asia region of 44%. The highest proportion of exclusively breastfed infants in the Philippines was among newborns, with the proportion gradually decreasing as the infants grew older. By one year of age, 55% of children continued to be breastfed to some extent, which decreased to 34% by two years of age. ²⁷

^c Higher-risk countries are defined by FTSE Russell using UNICEF data relating to child mortality and level of malnutrition

^d Although the BMS/CF Marketing Index 2021 has been expanded from the six to the nine largest companies worldwide, thereby including the three largest Chinese companies, as these three companies do not market their products outside China their presence in other markets could not be considered when making the country selection.

^e Reckitt is the new name for RB, which acquired Mead Johnson Nutrition in 2017. The company changed its name and branding in March 2021.



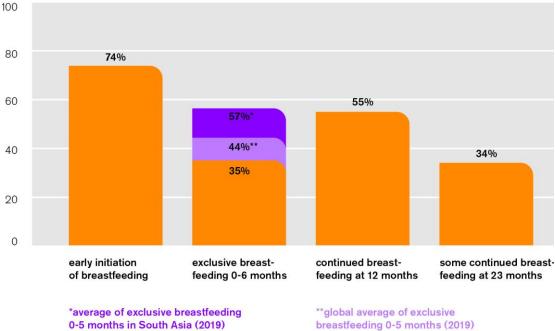


Figure 2. Breastfeeding rates in the Philippines, 2019

0-5 months in South Asia (2019)

Source: Philippine's Department of Science and Technology Food and Nutrition Research Institute 2015a, 2016a, 2020c & 2020d for Philippine's data; WHO for regional and global data

Research by Alive & Thrive, published in 2019, demonstrated the significant opportunities associated with adopting optimal breastfeeding practices in the Philippines. This research estimated potential to avoid 8,924 child deaths, prevent 1,913 maternal deaths from cancers and type II diabetes and save over US\$16 million in health system costs related to the treatment of children with diarrhea and pneumonia. Further, it estimated that improving breastfeeding practices could also generate an additional US\$3.8 billion for the economy by increasing children's cognitive capacity, preventing premature mortality in the early years and reducing families' out-of-pocket expenditure to treat diarrhea and pneumonia.²⁸

In terms of the diets and feeding practices of children aged six to 23 months:

- A high proportion of these breastfed and non-breastfed children were given CF the minimum number of times per day, i.e., at the daily recommended meal frequency (MMFf).
- 20% of these children met the recommended minimum dietary diversity (MDD⁹), with the proportion increasing as the age of the child increased.
- The proportion of these children who had a minimum acceptable diet (i.e., which met both MDD and MMF to ensure both dietary quality and nutrient adequacy) significantly decreased from 2015 to 2019 from 18.6% to 9.9%.
- Further, about 84% of children aged 6-8 months received CF at the right time, i.e., at six months of age or older.²⁹

^f WHO recommends that children aged 6-23.9 months of age should receive solid, semi-solid, or soft foods or milk feeds the minimum number of times or more per day based on their age: this is known as minimum meal frequency (MMF). It should be 2 times for breastfed infants 6–8 months; 3 times for breastfed children 9–23 months; 4 times for non-breastfed children six–23 months.

⁹ WHO recommends that children aged six to 23.9 months of age should receive foods from 4 or more key food groups every day.



2.2 The Philippines infant and young child food market

The Philippines had a population of 105 million in 2019, with a GDP of US\$377 billion the same year.³⁰ By 2020, the baby food market in the Philippines had reached over US\$850 million, the highest value of the previous six years, as shown in Figure 3, having declined slightly in 2017 and 2018.^h Overall, the market grew 6% during between 2015 and 2019. Sales of all types of formula made up just over 95% of the baby food segment in 2020, with growing-up milks accounting for over half of all formula sales.³¹

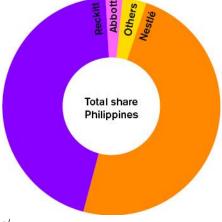
1000 800 600 400 200 2015 2016 2017 2018 2019 2020

Figure 3. Sales of baby foods in the Philippines, 2015-2020 (US\$ million)

Source: Euromonitor International

Nestlé and Reckitt are by far the largest companies in the baby food market as a whole in the Philippines, accounting for just over 90% of the market in 2020, as shown in Figure 4.³² Danone entered the Philippines market in mid-2019 and is included within the 'Others' group, as its market share is still very small. In terms of CF, Nestlé accounted for well over 90% of the sales of this product type, through its Cerelac and Gerber brands.³³ Just over half (52%) of older infants and young children aged 6-23 months reportedly consume commercial baby food.³⁴

Figure 4. Company shares of the baby food market in the Philippines, 2020 (US\$ million)



Source: Euromonitor International

^h Euromonitor International uses the following definition of baby food: it comprises dried baby food, prepared baby food, other baby food, and milk formula (including standard milk formula, follow-on milk formula, growing-up milk formula, special baby milk formula).



As shown in Figure 5, the predominant sales channels for BMS and CF in the Philippines are modern grocery retailers and traditional grocery retailers. Non-grocery specialists account for a low but steady proportion of sales. Having been a relatively non-existent channel prior to 2019, e-commerce tripled between 2018 and 2020, though remains the smallest route to market by a significant margin.

500 400 300 200 100 0 2015 2016 2017 2018 2019 2020 **Traditional** E-Commerce Modern Grocery Non-Grocery Retailers, mainly **Grocery Retailers** Specialists e.g. Health and Beauty supermarkets e.g.small grocers **Specialist Retailers**

Figure 5. Value of sales of baby food by distribution channel (US\$ million)

Source: Euromonitor International

2.3 The Philippines laws and regulations restricting the marketing of foods for infants and young children

In addition to assessing the companies' compliance with The Code, the Westat study also assessed their compliance with prevailing relevant national regulations relating to BMS and CF where they were stricter than The Code. According to the 2020 WHO, UNICEF and IBFAN Status Report on National Implementation of The Code, the Philippines' law that implements The Code is classified as being "substantially aligned" with it 35 National regulations cover a range of marketing and advertising restrictions including on all formulas and foods marketed as suitable from birth to 36 months. These are documented in 'The Philippine Code of Marketing of Breast-milk Substitutes, (Executive Order 51, 1986)"36 and the 'Revised Implementing Rules and Regulations of the Milk Code (rIRR)' of 2006.37 The regulations also provide standards on quality, availability and label information related to product use. Further detail is presented in the Westat report. An update to the rIRR is understood to be under consideration at the time of writing. This study may therefore provide a baseline against which to measure the effectiveness of any revised legal measures.

The recently launched Expanded Breastfeeding Promotion Act establishes standards for workplaces and public health facilities designed to address some of the factors that hinder optimal breastfeeding and reaching the WHO's Global Nutrition Targets 2025. 38



3. Study methodology and scope

3.1 Study methodology

ATNI's methodology for the Philippines study was based on the 2017 NetCode Toolkit: Protocol for Periodic Assessment (NetCode Protocol).³⁹ Published by WHO and UNICEF and developed in partnership with several expert organizations, it stipulates the types of data that should be collected, where and how. The way the NetCode Protocol was applied for this study is summarized in Table 1.

The objectives of the study were to determine whether the marketing of companies whose BMS and CF products were for sale in the Philippines complied with The Code, including WHA 69.9, and the Philippines national regulations where stricter than The Code.

3.2 Geographic scope

The NetCode Protocol recommends that the study is conducted in the largest city of the chosen country. Hence the National Capital Region, which includes Manila, was selected as the geographic study area.

3.3 Product type scope

The product types within the scope of this report are all BMS and CF for infants and young children marketed as suitable from birth to 36 months of age, including:

BMS

- Infant formula marketed as suitable for infants from birth to six months of age
- Follow-on formula marketed as suitable for older infants from six months to 12 months of age
- Growing-up milk marketed as suitable for young children from 12 to 36 months of age
- Complementary foods when marketed as suitable for infants below six months of age

CF

 Complementary foods marketed as suitable for older infants and young children from six months of age

Formulas for special medical purposes (FSMPs) are included within the above definitions of product types. Bottles and teats were not included within the scope of the study.

3.4 Company scope

Four companies' products were found in the study area: Abbott, Danone, Nestlé and Reckitt. Although FrieslandCampina had been present in the market at the time of selecting the countries for this study, it later pulled out, in October 2019. None of its products were therefore found and no results are presented. As noted previously, the Philippines is not an official market for KraftHeinz and similarly no results are presented for this company. Any products found in this country were not marketed by the company itself (i.e., they were parallel imports). Marketing for products made by 35 other companies was also found. ATNI did not contact these 'other' companies to determine whether or not the Philippines is an official market for their products.



Table 1: Study location and activities

National Capital Region	Healthcare facilities (HCFs): 33 Health Centers (HCs) and 10 Maternity Facilities (MFs) 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. 43 HCFs were selected.*	Interview mothers** 330 mothers with children younger than 24 months were interviewed. Interview healthcare workers The type of healthcare workers included were nurses, doctors and midwives. A total of 126 health care workers were interviewed.				
	Of the selected HCs, 26 were public and seven were private facilities. All 10 MFs were private facilities.	Evaluation of informational and educational materials.				
	Retail stores: 43 physical retail outlets were selected. One small retailer or pharmacy close to each HCF and 10 large retail stores based on the volume and variety of products under the scope of the study. Five major online retailers.	sale promotions and information education materials. ariety of				
	Labels and inserts of 126 unique BMS products. Large and small packs of each product type (if available) were selected via a detailed internet search and store visits in greater Manila.	Labels and inserts products assesse with national regu Code/WHA resolu	d for compliance lations and The			
Philippines	Media: assessment of traditional and internet advertising. Websites and online retailers were selected based on relevance and prominence. Other media channels were selected based on size of audience.	Paid advertising: media channels monitored for six months. Online retailers monitored for eight weeks	Television (4) and radio (18)*** 10 parent and child websites and four social media platforms associated with the websites.*** Five online retailers			
		Companies own advertising: data was obtained for 8 weeks.	Six company and eight brand websites for the Philippines market, as well as four social media platforms.****			

^{*} Total 110 HCFs were selected; 33 facilities allocated to the main sample and 77 saved for the reserve sample.

^{**} Participation rate was 100%, i.e. no mothers refused to take part in the survey.

*** Television and radio stations were monitored by Organic Intelligence (OI), an independent media monitoring organization.

**** Social media platforms included seven YouTube pages, 10 Facebook pages, seven Twitter pages, and seven Instagram pages.

****** Social media platforms included three YouTube pages, nine Facebook pages, two Twitter pages, and one Instagram page.



3.5 Product scope

ATNI was able to confirm with the four ATNI Index companies which of their products initially found were 'legitimate' products, i.e., products intended for the Philippines market. As shown in Table 2, this figure totaled 81, comprising 62 BMS products and 19 CF products. These companies confirmed that 101 other BMS and CF products found made by them were in fact parallel imports. ATNI therefore excluded these products from the study.ⁱ

Table 2: Number of legitimate products included in the study made by the four ATNI Index companies

	Total	BMS	CF
Abbott	8	8	n/a
Danone	6	6	0
Nestlé	50	31	19
Reckitt	17	17	n/a
Total	81	62	19

A further 88 products made by 35 other companies not included in ATNI's Indexes were found. ATNI was not able to confirm with these companies how many were legitimate products and how many were parallel imports. Therefore, all of these products were included in the study. Of these 88 products, marketing was found in relation to 53 made by 17 'other' companies and there were no findings in relation to 35 products made by 18 'other' companies. ATNI did not contact these 'other' companies to determine whether or not the Philippines is an official market for their products.

In sum, the results presented in Tables 3 and 4 relate to 134 available BMS and CF products made by 21 companies, for which there were findings.

¹ ATNI enquired of each of these four companies once data collection in healthcare facilities was complete to confirm their list of official/legitimate products made for the Philippines market in order to exclude assessment of these products from these companies' Index scores.



4. Results

Table 3 presents a summary of the findings of the study by article of The Code. It shows the observed incidences of non-compliance with The Code for the four companies present in the country included in the BMS/CF Marketing Index 2021, and for the 17 'other' companies. In addition to cataloguing incidences of non-compliance with The Code and/or national laws and regulations which they observed, Westat's local partner NCP interviewed mothers and healthcare workers to capture their recollections of the various types of marketing they had been exposed to. While these results are not included in the companies' scores (as they are considered subjective, prone to recall bias and cannot be verified), they provide additional insights into common marketing practices.

In total, 152 incidences of non-compliant marketing for BMS and CF products were found during the study period for all companies, 72 of which related to the practices of the ATNI Index companies and 80 which related to those of the 'other' companies.

4.1 Results by company

The four ATNI Index companies (Abbott, Danone, Nestlé, Reckitt) are scored according to their relative level of compliance (i.e., their scores are normalized). The normalized scores are calculated by dividing the number of observed incidences of non-compliance by the total number of BMS/CF products found. No weighting related to the companies' market share is applied.

As in previous studies, companies are rated as being in complete compliance with The Code, including WHA 69.9, and stricter national legal requirements if the number of non-compliant incidences is zero. If, once normalized, there is less than one incidence of non-compliance, they are rated as having a high level of compliance. If there are between 1.1 and 2 normalized incidences of non-compliance, a medium compliance rating is given. A low compliance rating is assigned when a company is found to have more than 2.1 normalized incidences of non-compliance.

As noted, the Philippines is not an official market for FrieslandCampina or KraftHeinz, and therefore no results are presented in relation to these companies despite their inclusion in ATNI's Indexes. (However, as these companies are present in Mexico, their results in that market are set out in the reports of Westat and ATNI for that country.)

The results for all companies are set out in Table 3.

Abbott had six observed incidences of non-compliance with The Code, as assessed using ATNI's methodology, relating to eight BMS products, and none in relation to local regulation. These incidences all related to labels which omitted only one instruction that powdered formulas should be prepared one feed at a time, as set out in the WHO/FAO guidelines on safe preparation, storage and handling of powdered infant formula referenced in WHA 61.20 (but not a requirement of local regulations). Abbott's normalized score is 0.75 and it is therefore rated as having a high level of compliance.

Danone had no observed incidences of non-compliance with The Code, as assessed using ATNI's methodology, relating to six products, and none in relation to local regulation. Danone's normalized score is zero and it is therefore rated as having complete compliance.



Table 3. Summary and scores

	Level of compliance	Relative number of non-compliances	Total number of products found ¹	Total number of incidences of non-compliance	Information /education materials at HFs and retail outlets	Observations of equipment at HFs	Media monitoring (traditional and online)	Promotions at retail outlets (physical and online retailers) ²	Promotional material at HFs	Non-compliant product labels
					Sub- article 4.2	Sub- article 4.3	Sub- article 5.1	Sub- article 5.3	Sub- article 6.3, 6.8	Sub- article 9.2, 9.4
Companies	included in A	TNI BMS	/CF Marl	ceting Ind	ex			1.00		
Abbott	High	0.75	8	6	0	0	0	0	0	6
Danone	Complete	0.0	6	0	0	0	0	0	0	0
Nestlé	High	0.94	50	47	0	0	45	2	0	0
Reckitt	Medium	1.11	17	19	0	1	3	0	1	14
Sub total			81	72	0	1	48	2	1	20
Other com	panies not inc	luded in	the ATNI	BMS/CF	Marketin	g Index				
Alnut			2	2	0	0	0	0	0	2
Bellamy's (Organic*		2	2	0	0	0	1	0	1
Bubs Australia			2	3	0	0	0	1	0	2
Happy Fam	nily Organics		4	5	0	0	0	2	0	3
HiPP			5	11	0	0	1	6	0	4
Kalbe			3	3	0	0	0	0	0	3
Little Fredo	lie		4	17	0	0	0	13	0	4
Morinaga			3	3	0	0	0	0	0	3
Nosh Food	s		1	1	0	0	0	0	0	1
Nutri-Del			1	1	0	0	0	0	0	1
NutriDense)		2	2	0	0	0	0	0	2
Only Organ	nic*		8	9	0	0	0	1	0	8
Perrigo Nutritionals		2	2	0	0	0	0	0	2	
Rafferty's Garden		7	14	0	0	0	7	0	7	
Rebisco		1	1	0	0	0	0	0	1	
Want-Want Foods		3	3	0	0	0	0	0	3	
Woolworths		1	1	0	0	0	0	0	1	
Sub-total C	Other		53	80	0	0	1	31	0	48
Total			134	152	0	1	49	33	1	68

Source: Westat Philippines report (2020)

Nestlé had 47 observed incidences of non-compliance with The Code, as assessed using ATNI's methodology, in relation to a total of 50 BMS and CF products, and none in relation to local regulation. Two incidences were price promotions for BMS products on an online retail site, which Nestlé stated it did not initiate. In total, 45 unique adverts or promotions were found on the traditional media or online media sites monitored. Of these, 24 were found on TV and radio for growing-up milks but not for any other product types. These television adverts were repeated 4,504 times in total during the study period, while the radio adverts were repeated 93,582 times. The remaining 21 incidences were online media

¹ The company's score is, however, based only on the number of unique adverts.



promotions related to products of Nestlé's Cerelac and Gerber brands, or were brand-level marketing. These promotions lacked wording required by WHA 69.9 (about continued breastfeeding to two years and beyond) and/or invited contact with the company. All of the company's product labels were compliant with The Code and local regulations. Nestlé's normalized score is 0.94 and it is therefore rated as having a high level of compliance.^k

Reckitt had 19 observed incidences of non-compliance with The Code, as assessed using ATNI's methodology, in relation to 17 BMS products, and none in relation to local regulation. Three adverts were found on traditional media for two different growing-up milks, and while the company provided information showing that they were approved by the Interagency Committee for the Philippine Milk Code, such advertising is not allowed under The Code. These ads were repeated on TV channels 821 times. No other promotion was found through online media monitoring. One item of equipment and one piece of promotional material were found at healthcare facilities both with the branding of Lactum, a Reckitt brand, which are proscribed by The Code and/or WHA 69.9. The remaining 14 were due to product labels omitting instructions that powdered formulas should be prepared one feed at a time and/or that left-overs of the product need to be discarded immediately. (This is recommended in the WHO/FAO guidelines on safe preparation, storage and handling of powdered infant formula, referenced in WHA 61.20, but is not a requirement of local regulations). Reckitt's normalized score is 1.11 and it is therefore rated as having a medium level of compliance.

Other companies: The observed incidences of non-compliance, as assessed using ATNI's methodology, in relation to the 53 products made by the 17 'other' companies, accounted for 52% of the total. Of these, 60% (48) were related to product labels and all but one of the others related to promotions found on online retailers. ATNI does not allocate a normalized score to these companies as they are not included in the BMS/CF Marketing Index 2021.

4.2 Results by article of The Code

Information/education materials at health facilities (Article 4, sub-article 4.2)

No instances of non-compliance with this article of The Code were observed at any health facilities.

Equipment and materials (Article 4, sub-article 4.3, WHA 69.9)

One piece of equipment/material was observed at one of the 43 health facilities included in this study. It was a branded child's medical record book donated by Reckitt, branded Lactum.

Adverts and promotions on traditional and online company media (Article 5, sub-article 5.1, WHA 69.9)

The reports from the interviews with mothers, which are not included in ATNI's tables and scores but which provide valuable context, revealed that overall 145 mothers (44%) stated that they had seen at least one promotion of BMS or CF in the previous six months. Mothers mostly recalled seeing advertisements on television (86%) and, to a much lesser extent, social media (9%).

Regarding advertising on traditional media and online promotion of products, Nestlé had the greatest number of incidences of non-compliance, accounting for 45 of the 49 observed for all companies. Of these, 24 were for growing-up milks, 15 were for individual CF products and six related to CF brand-level marketing rather than to a specific product. Three were for growing-up milks made by Reckitt, and one promotion was found for a CF made by HiPP. Across all forms of media, the largest number of ads and promotions were found for growing-up milk (27), followed by CF (15). A further six promotions for

^k Were the results relating to CF 6-36 to be removed, to provide a like-for-like comparison with previous ATNI in-country studies that did not measure compliance against WHA 69.9, there would be a total of 26 incidences of non-compliance relating to 31 BMS products, generating a normalized score of 0.83, and a high level of compliance.

¹The company's score is, however, based only on the number of unique adverts.

^m These two items are shown in Table 4 under the heading 'unspecified product'.



CF brands rather than specific products were identified which lacked the wording required by WHA 69.9.

Traditional media: Based on monitoring undertaken by media monitoring company Organic Intelligence, 27 unique advertisements or promotions were found, 55% of the total found through all forms of media monitoring. Of these,12 (44%) were television adverts and 15 (56%) were radio promotions. All of the observations in the traditional media monitoring related to Reckitt and Nestlé products. None of these adverts or promotions related to infant formulas, follow-on formulas or CF marketed as suitable for infants under six months of age. Rather, all related to growing-up milks or CF. The TV ads were repeated on TV channels 5,325 times (821 times by Reckitt and 4,504 times by Nestlé), while the radio ads were repeated 93,582 times (all radio promotions were for Nestlé products).

Online media: Of the 22 promotions observed, 21 were on Nestlé's Facebook pages and one on HiPP's company website. All were for CF products. These findings accounted for 45% of the total found through all forms of media monitoring. While neither Philippine regulations nor The Code or WHA 69.9 prohibit the advertisement or promotion of CF per se, WHA 69.9 Recommendation 4 stipulates that certain messages should or should not be conveyed in all forms of promotion. Therefore, each advert or promotion for these products was reviewed to determine whether it was compliant with that recommendation, and none was found to be so.

Samples, gifts and contact with mothers (Article 5, sub-article 5.2, 5.4, 5.5 and WHA 69.9)

Only one mother reported receiving a sample of a Nestlé product from personnel in a shop/pharmacy (though the product type of sample could not be recalled by the mother). Five mothers reported receiving a gift associated with a BMS company from shop/pharmacy personnel. None reported contact with, or receiving samples or gifts from, BMS company representatives, indicating relatively good compliance with this element of The Code and local regulations.

Point-of-sale promotions (Article 5, sub-article 5.3)

Point-of-sale promotions in physical retail stores appear to be well controlled in the Philippines. In this study, 33 point-of-sale promotions were observed, which accounted for 27% of the total number of findings. All were found on online retailers' sites. The promotion types observed on retail websites included 27 price-related promotions and six incentives to purchase products. No promotions were observed for Abbott, Danone or Reckitt products. Two related to Nestlé products and 31 related to seven 'other' companies, as shown in Table 3.º

The most common product category for point-of-sale promotion was CF for the 0-6-month age group, with 23 observed promotions, though some promotions were observed for infant formulas (6), growing-up milks (2) and follow-on formulas (2).

Promotional material within healthcare facilities (Article 6, sub-article 6.3 and 6.8, WHA 69.9) One incidence of a Reckitt promotional material was observed in a healthcare facility. This was on a mattress cover branded with a Reckitt product (Lactum 3+6+). The fact that a brand name and/or logo was displayed resulted in non-compliance with The Code's original recommendations, and the subsequent recommendation of WHA 69.9 that no equipment should be donated. One healthcare worker also reported that a company (Reckitt) offered to donate a piece of equipment (a scale liner).

ⁿ For all companies ranked by ATNI, the only promotions included in their scores on major online retail sites were those with which they confirmed they had a commercial relationship. ATNI is aware that some point-of-sale promotions on these sites are initiated by those sites or small traders which do not procure their merchandise from the companies directly. Nevertheless, ATNI believes that manufacturers have an opportunity and a responsibility to encourage major online retailers to ensure that all their BMS products are marketed responsibly on those sites in line with The Code.

o ATNI confirmed with Nestlé that the two promotions for its products were initiated by the online retailer Lazada and did not have the consent of Nestlé.

PReckitt indicated that Lactum 3+6+ is in fact a brand of products intended for children of three years of age, or six years of age, and older. However, given how easily mothers and caregivers could confuse this branding with promotion of products for infants of three or six months of age, this finding was included.



Overall, the relatively small number of such findings show a high level of compliance with The Code and local regulations.

Inducements, samples and contact with healthcare workers (Article 7, sub-article 7.3, 7.4 and 7.5 and WHA 69.9)

While financial or material inducements or product samples offered to healthcare workers do not contribute to companies' overall scores or the total number of incidences of non-compliance as noted in the introduction to the results section, they were commonly reported by the professionals interviewed. A total of 48 incidences were noted. Thirty-six offers were made by Nestlé, nine by Reckitt and one by Abbott. Two incidences were reported as related to HiPP, which is categorized within the 'other' company group.

In terms of the offers made, in relation to Article 7.3 and WHA 69.9, one healthcare worker reported being contacted by Nestlé wanting to provide them with a personal gift. In relation to Article 7.4 and WHA 69.9, there were seven reported instances of healthcare professionals being contacted by companies to provide samples of BMS products to mothers, five from Nestlé and two from Reckitt. In relation to Article 7.5 and WHA 69.9, the other 40 reports by healthcare workers of being contacted by companies regarding payment to attend events or workshops outside the facility; 30 were reportedly made by Nestlé representatives, seven by Reckitt representatives, two by those from HiPP, and one by Abbott.

Labels and inserts (Article 9, sub-article 9.2 and 9.4, WHA 58.32, 61.20 and 69.9)

Overall, more than two thirds (68.5%) of all of the observed incidences of non-compliance found in the Philippines related to product labels both on legitimate and parallel import products.

In total, 101 products made by the four companies within the BMS/CF Marketing Index 2021were excluded from the label analysis because they were parallel imports. Of the 81 legitimate products made by these four companies, 61 (75%) were found to be fully compliant with The Code, relevant WHA resolutions and local regulations. None of Nestlé's or Danone's products were found to be incorrectly labelled.⁹

Of 17 products found in the market made by Reckitt, a total of 14 had labels that were not fully compliant with WHO/FAO guidelines related to WHA 61.20. Of the eight BMS products made by Abbott, six had labels that were also non-compliant in the same way. However, all of these product labels were compliant with all other elements of Article 9 of The Code and WHA 61.20.

Of the 53 products made by 'other' companies, the labels of 48 were found not to include all of the necessary information to be compliant with The Code, applicable WHA resolutions and/or local regulations. ATNI expects most of these to be parallel imports. This finding underlines the importance of all companies adopting Code-aligned policies so that their products are at least labelled following The Code's recommendations in all markets, if not necessarily according to local labelling requirements that go beyond The Code.

4.3 Results by product type

Analysis of the overall observed incidences of non-compliance by product type is presented in Table 4. The products promoted inappropriately most often (33.6%) in the Philippines were CF, followed by growing-up milks (23.7%). Non-compliance related to CF for infants aged 0-6 months accounted for the next highest proportion (17.8%), followed by infant formula (14.5%), while follow-on formula accounted for the lowest proportion of non-compliance (5.2%). A further 5.3% of findings related to marketing at a brand level which could not be attributed to a specific product. Just over half of the

^q Several labels of FSMPs were found to include health and/or nutrition claims which are not allowed under local regulations. However, as these products had been issued a product registration certificate by the relevant local authority, these findings are not included in ATNI's results.



incidences of non-compliance overall (52%) were attributable to companies within the 'other' category, while 48% are attributable to the four companies included in the BMS/CF Marketing Index 2021.

Table 4. Total number of observed incidences of non-compliance by product type

Product type			j	CF	Unspecified		
	Total inci- dences of non-com- pliance	Comple- mentary foods (0-6 months)	Infant formula	Follow-on formula	Growing- up milk	Comple- mentary foods (6-36 months)	Unspecified product*
Companies included in the	ne ATNI BM	S/CF Mark	eting Index	Č,			
Abbott	6	n/a	4	0	2	n/a	0
Danone	0	0	0	0	0	0	0
Nestlé	47	0	1	1	24	15	6
Reckitt	19	n/a	6	4	7	n/a	2
Sub total	72	0	11	5	33	15	8
Other companies not inc	luded in the	ATNI BMS	/CF Marke	ting Index			
Alnut	2	0	0	0	0	2	0
Bellamy's Organic*	2	1	0	1	0	0	0
Bubs Australia	3	2	0	0	0	1	0
Happy Family Organics	5	0	2	0	0	3	0
HiPP	11	0	5	1	3	2	0
Kalbe	3	0	0	0	0	3	0
Little Freddie	17	14	0	0	0	3	0
Morinaga	3	0	2	1	0	0	0
Nosh Foods	1	0	0	0	0	1	0
Nutri-Del	1	0	0	0	0	1	0
NutriDense	2	0	0	0	0	2	0
Only Organic*	9	2	0	0	0	7	0
Perrigo Nutritionals	2	0	2	0	0	0	0
Rafferty's Garden	14	8	0	0	0	6	0
Rebisco	1	0	0	0	0	1	0
Want-Want Foods	3	0	0	0	0	3	0
Woolworths	1	0	0	0	0	1	0
Sub-total Other	80	27	11	3	3	36	0
Total	152	27	22	8	36	51	8
Total %	100%	17.8%	14.5%	5.3%	23.7%	33.6%	5.3%

^{*} Items of equipment could not be attributed to particular product types, only to brands.



5. Recommendations

ATNI urges the companies whose marketing practices were assessed in this study to immediately begin work to determine how the identified incidences of non-compliance occurred, and to put in place the necessary systems and procedures to eliminate them and to ensure they do not recur. Further, ATNI recommends that these companies strengthen their marketing policies to bring them fully into line with the intent and specific recommendations of The Code and all subsequent relevant resolutions, including WHA 69.9.

In addition, ATNI hopes that the authorities in the Philippines will find the study useful. The current legal measures, and the related Inter-Agency Advisory Committee review process for the current scope of the law in the Philippines, appear to be generally effective. The findings presented here illustrate areas the authorities could consider in the revision of legal measures and the ongoing review of current approaches to monitoring corporate marketing practices.

In respect of specific forms of marketing, ATNI makes the following recommendations:

Advertisements and point-of-sale promotions on traditional and digital media

There are two principal reasons that the majority of incidences of non-compliance were related to growing-up milks and CF marketed as suitable for children aged 6-36 months. The first is that current local regulations relating to these product types do not yet incorporate all of the recommendations of The Code; strengthening local measures to bring them fully into line with The Code could remedy this. The second reason is that the marketing policies of the ATNI-Index companies also do not currently extend to these products; these companies are urged to expand their scope. In addition, addressing this gap would help to reduce the likelihood of cross-promotion proscribed by Recommendation 5 of WHA 69.9. In light of the growing use and reach of online media, it is, of course, critical that any additional governmental or corporate policies explicitly cover these forms of media. As ATNI has not assessed the policies of the 'other' companies, it cannot comment further on them.

Promotion on online retailers' platforms

While recognizing the limits companies face under anti-trust regulations, which inter alia prevent any company influencing the pricing decisions of another, manufacturers are urged to look for ways to engage with online retailers to reinforce the policy stance that their BMS products should not be discounted or otherwise promoted. Similarly, the authorities are encouraged to do more to ensure that distributors and retailers, within physical stores and online, understand their obligations under local regulations and The Code, and that suitable penalties are in place to deter infraction of those obligations.

Product labelling

While product labels were broadly compliant with local regulations and The Code, some gaps remain with relation to the provisions of WHA 61.20 which came into effect in 2008, and in relation to Recommendation 4 of WHA 69.9. The authorities and companies could look to close these gaps to improve compliance. Specifically, such efforts could: i) extend labelling requirements to embed in regulation the guidance related to the implementation of WHA 61.20 on the safe preparation of powdered formulas, and; ii) ensure that health and nutrition claims are not allowed on any BMS product labels, including FSMPs.

Parallel imports

This study illustrated that there appeared to be a large number of parallel imports for sale in the Philippines, with these products accounting for 43% of products found (101 products in total). The authorities could, perhaps, look into how these products might be more strictly controlled. Product manufacturers are also urged to consider how they might deter this trade, so that only products intended for the Filipino market are sold in the country.



Monitoring

ATNI urges the authorities and local stakeholders to continue to regularly monitor marketing of BMS and CF intended for young children up to three years of age. Such monitoring should maintain a particular focus on advertising and promotion on all forms of media and ensuring that manufacturers and distributors do not offer financial or material inducements to healthcare professionals to promote products.



6. Study limitations

Several limitations to this study should be noted. First, the interviewers selected three health workers within each healthcare facility, following the NetCode Protocol which indicates that ideally a clinic director, physician and a nurse or midwife be interviewed. It is difficult to confirm whether or not these individuals were 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 midwives (40%) and nurses (32%); fewer senior-level staff, such as directors, doctors and department heads, were interviewed. Therefore, it is possible that types of marketing that are experienced more commonly by senior staff, such as equipment donations and visits by baby food company representatives, may have been under-reported.

The selection of retail outlets to observe point-of-sale promotions was purposive, not representative. Because of this design, the study results cannot be generalized to the universe of stores in the National Capital Region. Additionally, observations were made only on one day, so it is possible that different promotions would have been identified had some stores been visited at a different time of the month or year.

As noted, the approach to country selection meant that it was not possible to select two higher risk countries where all six companies were present (i.e. other than the three that only sell their products in China). FrieslandCampina and KraftHeinz were therefore not included in the study. Further, the methodology does not take into account factors such as the market share of each company, share by product type, length of time in the market or market penetration. ATNI will include in its future stakeholder consultations on the methodology whether and how these issues could be addressed.

Traditional and digital media were monitored only for a few weeks, at one time during the year, at specific times of the day or week. Therefore, daily, weekly and seasonal variations will not have been fully captured. Similarly, given how extensive and pervasive online marketing now is, the study included relatively few digital media channels (the companies' Facebook, YouTube, Instagram and Twitter accounts, 10 parent and child websites and four social media platforms associated with those websites) and a limited number of social media marketing techniques. The media monitoring component of this study, therefore, provides only a limited snapshot of the total advertising and marketing that takes place. Further, ATNI counted in each company's score only number of unique adverts on traditional media and not the number of times each was repeated, which would better reflect the reach of that advertising. ATNI will strive to develop a different scoring system in future studies that captures reach.

Given that this study was conducted over a short period of time, it is not necessarily representative of the situation in the Philippines as a whole, and thus the results cannot be generalized to the whole country.



7. Next steps

The results presented here are based on one of two studies conducted by Westat in 2020 in the Philippines and Mexico. ATNI will publish a similar summary report for the Mexico study. As relevant, the results from these two studies will be combined with the companies' BMS/CF Corporate Profile scores to generate overall scores and rankings for the companies included in the BMS/CF Marketing Index 2021. A detailed report will be published in June 2021 presenting the findings for this Index, along with scorecards for each of the companies detailing their performance in all areas.



Endnotes

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³³ Euromonitor International data 2020, under license

³⁴ Department of Science and Technology - Food and Nutrition Research Institute (DOST-FNRI). 2020b. 2019 ENNS Results Dissemination. Nutritional Status and Feeding Practices of Children Under 2. Retrieved from: <a href="http://enutrition.fnri.dost.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php?xx=%20uploads/2019%20ENNS%20Results%20Dissemination.gov.ph/site/preview.php.

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