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ATNF releases report on marketing of breast-milk substitutes in Nigeria

Summary

The study found close to 150 incidences of BMS marketing in Nigeria that do not comply with the recommendations of The International Code of Marketing of Breast-milk Substitutes or the prevailing local regulations. By far the most prevalent form of marketing was point-of-sale promotion on major online retailers' sites, as was the case in Thailand for which ATNF published [results in February](#). All of the 35 products included in the study were found to have non-compliant labels and/or inserts but few other forms of marketing were found. Eighteen percent (18%) of the total number of the incidences of non-compliance related to infant formula, 3% to follow-on-formula, 12% to growing-up milks and 64% to complementary foods marketed as suitable for infants under six months of age. Of significant concern was the high number of parallel imports found in Lagos (products imported from other countries that are not intended for the Nigerian market).

Background

The Access to Nutrition Foundation (ATNF) is today publishing a report entitled '*Marketing of breast-milk substitutes: Nigeria 2018*' that summarises the results of a study undertaken in September and October 2017. ATNF has undertaken three similar studies in recent years based on the IGBM Protocol; this is second to be based on the Periodic Assessment Protocol of the first edition of the [NetCode protocol for ongoing monitoring systems](#) (NetCode protocol) developed by the World Health Organisation (WHO) in 2015. ATNF hopes that stakeholders will find this study valuable in their work to promote breastfeeding and optimal infant and young child nutrition in Nigeria and other countries.

"The World Health Organisation welcomes this timely report. It is important to document how the marketing of breast-milk substitutes continues in breach of international standards. We are pleased that the NetCode protocol has been used to provide systematic evidence on the frequency of violations." Dr Laurence Grummer-Strawn, WHO.

ATNF undertakes two in-country studies of BMS marketing to feed into each Global Access to Nutrition Index, which is published on a two-year cycle. The next Global Index is due to be released in May 2018. One component of each Global Index is a BMS Marketing sub-ranking which scores and ranks the world's six largest baby food manufacturers based on their level of compliance with The International Code of Marketing of Breast-milk Substitutes, subsequent World Health Assembly (WHA) resolutions (together referred to as The Code) and related national regulation. Their scores in the 2018 BMS Marketing sub-ranking will depend in part on the results of this study and a second study carried out in Thailand, and in part on analysis of their corporate policies, management systems and disclosure. Further information about the scoring system is available in the [ATNF BMS Marketing methodology](#).

The study

This report draws on the results of an extensive study done by Westat, a leading global health and social sciences research company. The Westat study is available [here](#). ATNF worked with Westat on four similar studies in Vietnam and Indonesia in 2015, in India in 2016, and in Thailand in 2017. Westat appointed Oxford Policy Management (OPM) as its local partner in Nigeria. OPM's expertise ranges from research and policy development to implementation, support, monitoring and evaluation.

"We are pleased that ATNF has undertaken this important study with Westat and OPM in Nigeria. The Government of Nigeria is committed to improving the rate of exclusive breastfeeding while sustaining the high rate of breastfeeding up to two years and beyond and curtailing the inappropriate marketing of breast-milk substitutes". Dr. Chris Isokpunwu, Head of Nutrition, Federal Ministry of Health, Nigeria

The purpose of the study was to determine, using ATNF's methodology (in turn based on the NetCode Protocol), the level of compliance with The Code and local regulations for five of the six major baby food companies whose products were found in Lagos: Abbott, Danone, FrieslandCampina, Kraft Heinz and Nestlé. No BMS products intended for the Nigerian market were found in Lagos made by RB/Mead Johnson, the other major global baby food manufacturer that ATNF rates, although many products were found that were not approved for sale in Nigeria by the country's food and drug administration (NAFDAC). As the results presented here are based only on data relating to products intended for sale in Nigeria, RB/Mead Johnson is not included. Data for six other smaller companies whose products were found in Lagos was also captured.

Nigeria was selected for the study using the same criteria ATNF has applied in selecting other countries for previous studies. First, the presence of all or most of the major baby food manufacturers which ATNF scores and ranks, and second, Nigeria's relatively high ranking on a risk rating system used by FTSE4Good to select countries for similar studies it undertakes.

The NetCode protocol recommends that studies are conducted in the largest city of the chosen country – in this case, Lagos. A summary of the study components is provided at the end of this document.

Context - Nigeria

While 95% of the children in Nigeria have been shown to be breastfed at some point in their early lives, the 2016-17 Multiple Indicator Cluster Survey (MICS) carried out by the National Bureau of Statistics and UNICEF showed that the prevalence of children exclusively breastfed until the age of six months is 23.7%. In addition, though continued breastfeeding at one year is 85.9%, there is a big drop to 37.1% at two years of age.

In Nigeria, two principal regulatory instruments control BMS marketing. The *Marketing (Breast-Milk Substitutes) Act 1990* controls various forms of marketing, and a 2005 regulation stipulates how products should be labeled. Westat's analysis of these national measures determined that they align with, or expand on, The Code in several ways, particularly in respect of product labeling. Further, new legislation that would extend restrictions on marketing further 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.

Key findings

In total, 147 incidences of non-compliance for BMS products were found in Lagos during the short study period. This figure is substantially lower than the levels in Thailand (3,185), Indonesia (1,246) or Vietnam (384) but higher than the levels found in India (26) all of which were undertaken using a similar methodology (the IGBM protocol) in recent years.

By far the largest number of incidences of non-compliance were point-of-sale promotions found on online retailers' sites: they accounted for 109 or 74% of all of the observed non-compliances. All of these were price promotions. In addition, the labels and/or inserts of all 35 BMS products assessed were found to have at least one non-compliant element and most had many more than one.

The five major companies whose products were found in Lagos, are scored according to their relative level of compliance with The Code. 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, all related only to product labels. (This results in a normalized score of 1.0). It is therefore rated as having a **high** level of compliance overall.
- **Danone** had four incidences of non-compliance for the four products found in Nigeria all related only to product labels. (This results in a normalized score of 1.0). It is therefore rated as having a **high** level of compliance overall.
- **Nestlé** had four incidences of non-compliance for the four products found in Nigeria all related only to product labels. (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.

For the four food and beverage manufacturers included in the 2018 Global Access to Nutrition Index (i.e. all except Abbott), these scores will be incorporated into their overall score on that Index.

A total of 16 incidences of non-compliance were found associated with the six other companies, for which ten BMS products were found. The breakdown of the incidences of non-compliance by company and by product type is shown in the table below.

	Total non-compliances	Infant formula	Follow-on formula	Growing-up milk	Complementary foods ml - six	No specific product type
Companies included in the BMS sub-ranking of 2018 Global ATNI						
Abbott (US)	4	2	2	-	-	0
Danone (FR)	4	1	1	2	-	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	131	16	4	16	94	1
Companies not included in the BMS sub-ranking of 2018 Global ATNI						
Perrigo (IRE)	6	6	0	0	0	0
Aspen Holdings (ZA)	3	1	1	1	0	0
Alter Farmacia (ES)	2	1	0	1	0	0
Promisador (ZA)	2	1	1	0	0	0
Chidera Inc (US)	2	1	1	0	0	0
Vietnam Dairy (VT)	1	1	0	0	0	0
Sub-total	16	11	3	2	0	0
Total	147	27	7	18	94	1

Key recommendations

Monitoring of online retailers revealed relatively high levels of point-of-sales promotions. The three baby food manufacturers whose products were being promoted in this way should work to strengthen their contracts with distributors and retailers, particularly those with online sites, to restrict such promotion.

The Government of Nigeria is clearly effectively restricting promotions for BMS products in 'brick and mortar' retailers as none were found. It should also look at how to ensure that its system to monitor promotions extends to online retailers.

Forty-five BMS products available in Lagos were confirmed to be parallel imports, whereas 35 other BMS products were found on the market. Sixteen of these were confirmed by their manufacturers to be made for the Nigerian market whereas the others were not. The parallel import products (where confirmed as such by the companies being ranked by ATNF) 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. Additional attention should also be paid to ensuring that product labels and inserts comply with Nigeria's labeling regulations.

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.

Finally, 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.

Full details by company, types of marketing and types of product, recommendations and study limitations are available in the [ATNF summary report](#) and the [Westat report](#).

Key components of the Nigeria study			
Lagos	<p>Healthcare facilities (HCF): 33 HCFs were selected from the sampled districts <i>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.</i></p> <p><i>Of the 33 selected HCFs, six were public facilities and 27 private facilities.</i></p>	<p>Interview mothers: 330 mothers with children younger than 24 months were interviewed.</p>	
		<p>Interview health workers: <i>The types of the health workers including nurses, doctors, midwives and assistants in the well-baby clinics and maternity clinics. A total of 98 healthcare professionals were interviewed.</i></p>	
		<p>Identify and evaluate informational and educational materials found in HCFs.</p>	
	<p>Retail stores: 43 physical retail outlets were selected. <i>One small retailer or pharmacy close to each HCF + ten large retail stores based on the volume and variety of products within the scope of the study. Five major online retailers.</i></p>	<p>Identify and evaluate marketing and point-of-sale promotions, and informational and educational materials found in retail stores.</p>	
	<p>Labels and inserts of 35 unique BMS products were purchased. <i>(A large and small pack of each product type, if available were bought) selected via a detailed internet search and stores visits in Greater Lagos.</i></p>	<p>Assess labels and inserts for compliance with local regulations and The Code and WHA resolutions.</p>	
Nigeria	<p>Media: Assess traditional and internet advertising. <i>Websites and online retailers were selected based on relevance and prominence. Other media channels were selected based on size of audience.</i></p>	<p>Monitor paid-for advertising: Media channels monitored for six months.</p>	<p>Television (77), radio (193) and print media (24)</p>
			<p>12 parent and child websites</p>
		<p>5 online retailers</p>	<p>5 local company websites, 3 brand websites and 10 social media company platforms</p>
		<p>Monitor companies' own advertising: Data was obtained for eight weeks.</p>	