



## STEP ONE

# THE CODE

### STEP 1A

**Comply fully with the International Code of Marketing of Breastmilk Substitutes and relevant World Health Assembly resolutions (hereafter referred to as 'The Code').**

#### HIPANGA 1A

**Me tautuku ki te katoa o te Whakaritenga ā-Ao mō te Hoko i ngā Whakakapi Waiū, me ngā whakatau o te Huihuinga Hauora o Te Ao e hāngai ana.**

Review date: November 2022

*The CDHB commits to adhering to and further incorporating the principles of Te Tiriti o Waitangi, outlined in the breastfeeding policy, at each review.*

## PURPOSE

The promotion of breastmilk substitutes is one of the largest undermining factors for breastfeeding. (NZBA Resource Docs 2020)

The aim of The Code "is to contribute to the provision of safe and adequate nutrition for infants, by the protection and promotion of breastfeeding, and by ensuring the proper use of breastmilk substitutes, when these are necessary, on the basis of adequate information and through appropriate marketing and distribution."

*(International Code of Marketing of Breastmilk Substitutes (1981) World Health Organization, Geneva)*

## RESPONSIBILITY

This guideline, associated with the Breastfeeding Policy is applicable to all Canterbury District Health Board (CDHB) employees working within maternity facilities including, visiting health professionals and students.

## GUIDELINE

Compliance with The Code and relevant, subsequent World Health Assembly resolutions is mandatory, the main points as follows:

- CDHB will not advertise, promote or distribute free samples of, or coupons for, breastmilk substitutes, feeding bottles, teats or dummies. The display of manufacturers' logos on items such as calendars, posters, pens and stationery is also prohibited.



He aroha whāereere, he pōtiki piri poho

A mother's love, a breast-clinging child

- CDHB will pay no less than 80%, of the retail price when purchasing supplies of breastmilk substitutes and will adhere to the policy of rotation of formula brands. (see [Infant Feeding – Breastmilk Substitute/Infant Formula Policy](#) (Ref.6906, page 6)).
- No employees of manufacturers or distributors of breastmilk substitutes, bottles, teats or dummies are permitted to have direct or indirect contact with pregnant or postnatal māmā and whānau in CDHB Health facilities.
- Employees of manufacturers and distributors of breastmilk substitutes will only have access to the WCH Clinical Dietitian, by appointment, who will in turn inform Maternity Manager, Lactation Consultants, and Neonatologists/Paediatricians as required, about changes to infant feeding products. (See [AF Policy](#), (Ref.6906, page 6) for CDHB's Visiting Supplier Representatives statement.)
- CDHB staff will not accept gifts, free samples, non-scientific literature, materials, equipment, money or support for in-service education or events from manufacturers or distributors of breastmilk substitutes, bottles, teats or pacifiers.
- Samples for professional research or evaluation are acceptable under The Code. Evaluation of products carried out by staff in these cases will be disseminated to co-workers whenever possible. Information materials given to WCH staff, relating to infant formula products, may contain only scientific and factual information
- Infant formula, human milk fortifier (HMF), other breastmilk substitutes, bottles, and teats will not be stored in areas that are accessible/visible to pregnant wāhine, māmā, whānau and visitors.
- Whānau who have made a fully informed decision to artificially feed their babies will have this decision respected and will be completely supported. Māmā and whānau will be shown how to prepare formula feeds by a health worker on a one-to-one basis when needed in the postnatal period.
- All infant feeding information and education given to pregnant wāhine, māmā and their whānau will explain the importance of breastfeeding, the social and financial implications of breastmilk substitute usage, the potential health effects involved in the use of breastmilk substitutes and risks associated with the incorrect preparation and usage of these products.
- Group instruction on the preparation and use of artificial feeds is not permitted at any time during the maternity journey.
- Whānau who have made a fully informed decision to artificially feed their babies are not advised to bring powdered infant formula into WCH. Powdered infant formula is not a sterile product and contamination with bacteria including Cronobacter Sakazakii [CS] is possible. Liquid Ready-to-Feed formula is both sterile and convenient and used within CDHB facilities.
- Records of infant formula purchase and usage are maintained in WCH, including infant formula brand rotation.

## AUDIT

Audit is crucial to ensuring high standards of care for māmā and pēpi. Methods may include, interview of māmā and whānau (with consent), review of infant formula use records and environmental audit.

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Step 1: The Code

Breastfeeding Guidelines

Christchurch Women's Hospital

Christchurch New Zealand