

WHO/UNICEF INFORMATION NOTE

Cross-promotion of infant formula and toddler milks

The International Code of Marketing of Breast-milk Substitutes prohibits the promotion of breast-milk substitutes to the general public.¹ WHO has noted that breast-milk substitutes can sometimes be indirectly promoted through the promotion of related products that use similar colour schemes, designs, names, slogans, or mascots.² This common marketing practice, known as cross-promotion, puts the health of infants at risk because it discourages breastfeeding and creates confusion about the use of infant formula. This Information Note describes dangers inherent in the cross-promotion of infant formula and toddler milks.

What is cross-promotion?

The Cambridge English Dictionary defines cross-promotion as “activities that use one product to advertise another; the fact of a company advertising one of its products in or on another of its products.”³ A similar definition was used in the WHO set of recommendations on the marketing of foods and non-alcoholic beverages to children: “A consumer sales promotion technique in which the manufacturer attempts to sell the consumer new or other products related to a product the consumer already uses or which the marketer has available.”⁴

WHO has pointed out that “This can include packaging, branding and labelling of a product to closely resemble that of another (brand extension).”²

Manufacturers of breast-milk substitutes commonly use this tactic to link infant formula products (intended for infants aged 0-6 months) with other breast-milk substitutes intended for older infants or young children (e.g. follow-up formula, toddler milks or growing up milks). Infant formula and toddler drinks are typically labelled as part of the same line of products using the same or similar brand names, similar labels, colours, and logos.^{5,6,7}

The tactic focuses on building loyalty to an entire product line. The formula and toddler milk products are typically sold as a line of products, labelled as stages 1, 2, and 3, where

the stages are defined for infants and young children of specific ages. These products are then sold in close proximity in stores.

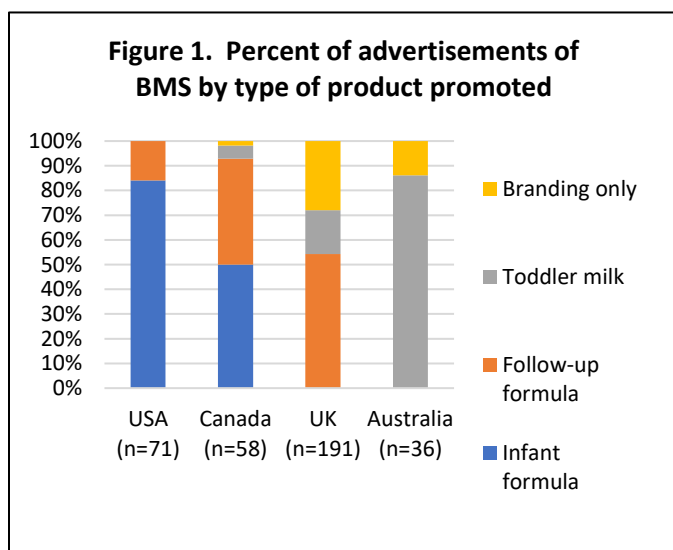
Promotion of toddler milks is a strategy to circumvent national Code legislation

While WHO has clearly stated that toddler milks are breast-milk substitutes,² only 44 countries clearly restrict the marketing of breast-milk substitutes for children beyond the first year of life and an additional 27 countries have legislation covering follow-up formula without specifying the age range that is covered. As such, promotion of toddler milks is currently allowed in most countries.

Manufacturers of breast-milk substitutes have used this gap in legislation to promote formulas for older infants or young children.^{8,9,10} In some countries, ads for infant formula have nearly disappeared since the development of the International Code of Marketing of Breast-milk Substitutes, but ads for toddler milks have dramatically increased.¹¹

The promotion strategies utilized by these manufacturers appear to be directly related to the status of marketing restrictions present in the country. In one study, content analysis was conducted of the advertisements for breast-milk substitutes in four countries with different regulatory environments on marketing.⁶ In the USA & Canada, where there is no regulation of

the marketing of breast-milk substitutes, nearly all advertisements were for infant formula or FUF (Figure 1). In the United Kingdom, where infant formula advertising is legally prohibited, the ads either marketed follow-up formula for infants 6-12 months of age or only promoted the brand without referencing specific BMS products. In Australia, where the “Marketing in Australia of Infant Formula: Manufacturers’ and Importers’ Agreement” (MAIF) prohibits infant and follow-up formula advertising, only toddler milks are advertised. It is clear that the marketing of toddler milks is a response to legislation that restricts marketing of formulas for infants.



Numerous studies have documented that pregnant women and mothers perceive advertisements of toddler milks as also advertising infant formula. One study in Italy found that 81% of mothers reported seeing advertisements for infant formula, even though such advertisements are not allowed by law.¹² In a series of six focus groups in Australia, every group understood toddler milk advertisements to be advertising formula milk products.¹³ A study in the UK found that 41% of pregnant women and 36% of mothers of infants reported seeing ads for infant formula (mostly on television or in magazines) even though only ads for follow-up formula actually existed.¹⁴

In a trial in which pregnant women were exposed to ads for toddler milks, respondents clearly understood toddler milk advertisements to be promoting a range of products that included infant formula and follow-up formula and accepted their claims uncritically. Toddler milk advertisements appeared to function as indirect advertising for infant and follow-up formula.¹⁵

Cross-promotion across breast-milk substitute categories is common practice

Many manufacturers of infant formula, follow-up formula, or toddler milks use similar labelling across their product line. In studies conducted in Cambodia, Nepal, Senegal, and Tanzania, at least 80% of the labels on toddler milks used a similar colour scheme or design as on the companies’ infant formula; two-thirds or more contained similar brand names. In all but Nepal, similar slogans, mascots, and symbols were used.⁷

In a review of studies on compliance with the International Code of Marketing of Breast-milk Substitutes, Ye¹⁶ found that nearly all television advertisements for breast-milk substitutes in Cambodia, Indonesia, and Viet Nam were for toddler milks. In Italy, 42% of BMS ads found in parenting magazines were for toddler milks.¹² Among ads for breast-milk substitutes in Chile, 88% of internet ads, 89% of print ads, and 63% of supermarket ads were for toddler milks.¹⁷ Similarly in Ecuador, most advertising encountered for BMS was concentrated on toddler milks.

Cross-promotion is an effective marketing tool

The practice of promoting multiple related products across a single brand line is a proven strategy in marketing. Advertising only one product in a line can then effectively promote all the others by eliciting positive associations for a brand, which consumers then apply to all of the products bearing that brand¹⁸. Key examples include Coca-Cola promoting a line of soft drinks with ads showing only one example, Aunt

Jemima promoting its pancake mix through its labelling of pancake syrup, or Colgate promoting its toothpaste through toothbrush labels.¹⁹

Identifiers such as packaging, colour or logos are often used as category labels by marketers. Category labels encourage consumers to transfer what they know about a familiar brand or group of products (known as a line) to a new or different product.^{18,20,21,22}

Line extensions allow marketers to promote only some products in the total line, knowing that other products with a similar labelling will benefit from the promotions.²³ This is achieved by increasing the prominence of the logo and product name on the entire range of products.

For toddler milks, brand features such as logos, graphics, package type, shape and product names are much more prominent than any text clarifying the appropriate age at which these milks should be offered. The age ranges for each product are typically not even visible on the front of the pack. This observation suggests that the labelling is more focused on promoting the entire line of BMS products including infant formula.

Cross-promotion of breast-milk substitutes creates confusion among families

Mothers often do not perceive any real difference between infant formula and follow-up formula, using either product for the feeding of infants. Often these ads do not clearly identify the recommended age of use for these products. In the UK, 24% of new mothers

reported that there is no difference between infant formula milk and follow-up formula milk and an additional 16% did not know if there was any difference.¹⁴

In another study in Italy, two-thirds of mothers exposed to ads for follow-up formula did not understand the meaning of the numeral “2” on the package, 28% said the product was intended for use in the first 6 months of life, and 59% reported that the baby on the label was younger than 6 months.¹²

Among 15 Australian mothers exposed to ads for toddler milks, only three were able to correctly identify that the product being advertised was suitable for toddlers.²⁴

This confusion can pose dangers to infant health since the composition of toddler milks is not nutritionally adequate for infants. Follow-up formula and toddler milks contain more protein and lower levels of essential fatty acids, B vitamins, and multiple minerals than is recommended by WHO for adequate growth and development of infants.^{25,26,27} In general, follow-up formulas and toddler milks are slightly less expensive than infant formula.

In the UK, half of mothers in a national survey that had ever used follow-up formula reported that they introduced it before 6 months of age.²⁸ Similarly in the US, among parents who reported serving their infant a milk product other than breast milk, 14% selected a toddler milk as the product that they served their infant most often in the past month and more than half of these believed they were using infant formula.²⁹

In summary, the now common cross-promotion practice by which breast-milk substitutes for infants are promoted through labelling and advertisements of toddler formulas is a threat to breastfeeding and infant health. This marketing tactic has become highly prevalent in an apparent attempt to circumvent national regulation of the marketing of products for infants. Mothers are confused by this strategy and often believe that there is little difference among the different products in a line. As a result, young infants are being fed with toddler milk, which cannot meet their nutritional needs. The practice of cross-promotion of breast-milk substitutes must be curbed.

References:

- ¹ International Code of Marketing of Breast-milk Substitutes. Geneva: World Health Organization; 1981, (http://www.who.int/nutrition/publications/code_english.pdf, accessed 9 May 2019).
- ² Maternal, infant and young child feeding. Guidance on ending the inappropriate promotion of foods for infants and young children. In: Sixty-ninth World Health Assembly, Geneva, 23–28 May 2016. Provisional agenda item 12.1. Geneva: World Health Organization; 2016 (A69/7 Add 1; http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_7Add1-en.pdf?ua=1, accessed 9 May 2019).
- ³ Cambridge Dictionary. Cross-promotion. 2019. (<https://dictionary.cambridge.org/dictionary/english/cross-promotion>, accessed 9 May 2019).
- ⁴ Set of recommendations on the marketing of foods and non-alcoholic beverages to children. Geneva: World Health Organization; 2010, (<http://www.who.int/iris/handle/10665/44416>, accessed 9 May 2019).
- ⁵ Baker P, Smith J, Salmon L, Friel S, Kent G, Iellamo A et al. Global trends and patterns of commercial milk-based formula sales: is an unprecedented infant and young child feeding transition underway? *Public Health Nutr.* 2016;19(14):2540–50. doi:10.1017/S1368980016001117
- ⁶ Berry NJ, Jones SC, Iverson D. Circumventing the WHO Code? An observational study. *Arch Dis Child.* 2012;97:320–325. doi:10.1136/adc.2010.202051.
- ⁷ Pereira C, Ford R, Feeley AB, Sweet L, Badham J, Zehner E. Cross-sectional survey shows that follow-up formula and growing-up milks are labelled similarly to infant formula in four low and middle income countries. *Matern Child Nutr.* 2016; 12(S2), 91–105. doi:10.1111/mcn.12269
- ⁸ Baumslag N, Michels B. Milk, money, and madness: The culture and politics of breastfeeding. London: Bergin and Garvey; 1995.
- ⁹ Palmer G. Questionable value of follow on milk advertising. *Health Visit.* 1990; 63(5): 175–177
- ¹⁰ Popkin BM. Infant formula promotion and the health sector in the Philippines. *Am J Public Health.* 1990;80: 74–75
- ¹¹ Smith J, Blake M. Infant food marketing strategies undermine effective regulation of breast-milk substitutes: trends in print advertising in Australia, 1950–2010. *Aust N Z J Public Health,* 2013;37(4), 337–44. doi:10.1111/1753-6405.12081.
- ¹² Cattaneo A, Pani P, Carletti C, Guidetti M, Mutti V, Guidetti C, et al. Advertisements of follow-up formula and their perception by pregnant women and mothers in Italy. *Arch Dis Child.* 2015;100(4), 323–8. doi:10.1136/archdischild-2014-306996.
- ¹³ Berry NJ, Jones SC, Iverson D. Relax, you're soaking in it: sources of information about infant formula. *Breastfeed Rev.* 2011 Mar;19(1):9–18.
- ¹⁴ NOP World. Attitudes to feeding: Report of survey findings. London: Crown, 2005. (https://webarchive.nationalarchives.gov.uk/20130124070750/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4118854.pdf, accessed 9 May 2019).
- ¹⁵ Berry NJ, Jones SC, Iverson D. It's all formula to me: women's understandings of toddler milk ads. *Breastfeed Rev.* 2010;18(1):21–30.
- ¹⁶ Ye S. Monitoring the International Code of Marketing of Breast-Milk Substitutes: A Comparative Analysis of Past Study Efforts; 2016. (https://www.who.int/nutrition/events/2nd_comparative_analysis_studies_netcode_june2016.pdf?ua=1, accessed 9 May 2019)
- ¹⁷ Monitoreo al código internacional de comercialización de sucedáneos de la leche materna en Santiago, Chile, Departamento de Nutrición, Facultad de Medicina, Universidad de Chile; 2017. (https://dipol.minsal.cl/wrdprss_minsal/wp-content/uploads/2018/02/INFORME-FINAL-MONITOREO-CICSLM-EN-CHILE-2017.pdf, accessed 9 May 2019).
- ¹⁸ Park CW, Milberg S, Lawson R. Evaluation of brand extensions: the role of product feature similarity and brand concept consistency. *Journal of Consumer Research* 1991;18(2): 185–193. doi:10.1086/209251.
- ¹⁹ Chi C. 10 of the most (& least) successful brand extensions to inspire your own. HubSpot; 2019. (<https://blog.hubspot.com/marketing/brand-extensions>, accessed 9 May 2019).
- ²⁰ Kotler P, Armstrong G. Principles of Marketing. Upper Saddle River, New Jersey: Prentice Hall; 2001.
- ²¹ Moreau CP, Markman AB, Lehmann DR. "What is it?" categorization flexibility and consumers' responses to really new products. *Journal of Consumer Research* 2001;27(4): 489–498.
- ²² Yamauchi T, Markman AB. Inference Using Categories. *J Exp Psychol Learn Mem Cogn.* 2000;26(3): 776–795.
- ²³ Morein JA. Shift from brand to product line marketing. *Harv Bus Rev.* 1975;53(5): 56–64.
- ²⁴ Berry NJ. Got milk?: the influence of toddler formula advertising on attitudes and beliefs about infant feeding. University of Wollongong Thesis Collection, 2010. (https://www.researchgate.net/profile/Nina_Berry/publication/48828947_Got_milk_the_influence_of_toddler_formula_advertising_on_attitudes_and_beliefs_about_infant_feeding/links/573cec6708ae298602e5997a/Got-milk-the-influence-of-toddler-formula-advertising-on-attitudes-and-beliefs-about-infant-feeding.pdf, accessed 9 May 2019).
- ²⁵ Codex Standard for Follow-Up Formula, CODEX STAN 156-1987. (http://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCODEX%252FBSTAN%252B156-1987%252FCXS_156e.pdf, accessed 9 May 2019).
- ²⁶ WHO, FAO. 2014. Vitamin and mineral requirements in human nutrition, 2nd ed. Geneva, WHO, FAO.
- ²⁷ Codex Standard for Infant Formula and Formulas for Special Medical Purposes Intended for Infants, CODEX STAN 72 – 1981. (http://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCODEX%252FBSTAN%252B72-1981%252FCXS_072e.pdf, accessed 9 May 2019).
- ²⁸ McAndrew F, Thompson J, Fellows L, Large A., Speed M, Renfrew MJ. Infant Feeding Survey 2010. Leeds: Health and Social Care Information Centre, 2012. (<http://content.digital.nhs.uk/catalogue/PUB08694/Infant-Feeding-Survey-2010-Consolidated-Report.pdf>, accessed 9 May 2019).
- ²⁹ Rudd Center unpublished data from an online survey of parents with children ages 6 to 36 months old in 2017. Manuscript in preparation.