Control of Food Marketing Strategy for Infant and Young Child Nutrition

The Third National Health Assembly,

Having considered the report on Control of Food Marketing Strategy for Infant and Young Child Nutrition¹:

Taking cognizance of the Resolution of the 63rd World Health Assembly, 2010, requesting each country to adjust the Universal Criteria on Marketing of Infant and Young Child Nutrition into its laws;

Taking note of confirmed information that marketing of infant and young child nutrition has become more aggressive, sophisticated and complex and taking note of information confirming the incidence of widespread marketing behaviors likely to go against such universal criteria;

Concerned that the exclusive breastfeeding practice for at least six months in Thailand is so low that it has become a cause for concern, especially when the country is ranked at No. 105 in comparison with other 109 countries;

Noting that the impact of marketing for infant and young child nutrition is a factor that can exercise influence over the use of food formula, which is the aim of the World Health Organization, UNICEF, and the Thai Government;

Realizing that marketing for infant and young child nutrition is a factor that can threaten their health and development, including subsequent impacts on household expenditure, the economic and health service systems;

Concerned that the Universal Criteria on Marketing of Infant and Young Child Nutrition and Related Products, B.E. 2551 (2008) has no biding effect and no penalty clauses for acts of violation, that they are not sufficient to control the marketing strategy for infant and young child nutrition, and that they do not cover new forms of marketing;

Concerned about the severity of the trend seen in the impact of the marketing of infant and young child nutrition on reduced breastfeeding unless there is an effective mechanism to control such marketing;

Taking note of the findings of the study that countries with a system to control the marketing strategy for infant and young child nutrition in one legal form or another tend to have a lower incidence of violation of the Universal Criteria and a higher rate of breastfeeding than those that have control mechanisms on a voluntary basis;

Aware that actions to solve problems about the marketing strategy for infant and young child nutrition are limited in their enforcement, contents, and participation of all sectors concerned, thus making it very difficult to take an integrative approach, to have a clear mechanism or system that will help develop actions, generate relevant knowledge, and enhance the potentials of the personnel, and to have information that can indicate the efficiency and effectiveness of the actions;

Aware that the way to solve such problems should require a management approach in an integrative and transparent manner essentially geared toward protecting public interests, such as developing management mechanisms, issuing effective control regulations, campaigning and raising awareness about breastfeeding and reduced formulafeeding practice, and arranging for the environment to be conducive to breastfeeding in

¹ Document: NHA3/Main2

workplace, including the need for cooperation from all sectors in order to achieve the objective of creating security for the future of the society;

Hereby adopts the following resolutions:

1. Requesting the National Health Commission Office to submit the Resolution of the Third National Health Assembly on Control of Marketing Strategy for Infant and Young Child Nutrition to the cabinet for approval and for further work assignment to agencies concerned to take actions as follows:

1.1 The Ministry of Health to act as the main agency to:

1.1.1 Take actions to control the marketing of infant and young child nutrition in accordance with the Criteria on Marketing of Infant and Young Child Nutrition and Related Products B.E. 2551 (2008), using the Food Act B.E. 2522 (1979) as an instrument, and to foster participation leading to implementation, especially in the area of disseminating knowledge, creating a popular trend, and monitoring marketing practices through various sectors, including the Ministry of Social Development and Human Security, Ministry of Labour, and other agencies concerned, both public and private.

1.1.2 Develop and work to get the Bill on Food for Infants and Young Children, B.E...legislated by the end of 2012, putting in place working mechanisms and using the Criteria on Marketing of Infant and Young Child Nutrition and Related Products B.E. 2551 (2008) (Health Assembly 3/Main 2/Annex 1) as minimum basic criteria.

1.1.3 Develop operational mechanisms, follow-up and monitoring and to report the progress.

1.2 The Ministry of Labour is requested to, through the Department of Welfare and Labour Protection, study the possibility of extending the right to maternity leave and considering amending legal provisions on the right to maternity leave to be extended longer and entitle them to receive wages while on such leave, and set measures of welfare to promote and support breastfeeding for mothers at business establishments and workplace.

2. Requesting that members of the National Health Assembly to cooperate in raising and promoting social awareness in breastfeeding, supporting the extension of the right to maternity leave at workplace on a voluntary basis, developing monitoring and surveillance of any violation of the Criteria on Marketing of Infant and Young Child Nutrition and Related Products, togeher with the public, private and people sectors, including the Office of National Human Rights Commission, Thai Health Promotion Foundation, Network for Age-Appropriate Nutrition, Foundation for Consumers, Family Network Foundation, Federation of Consumer Organizations, local government organizations, health-professional organizations, Federation of Thai Industries, Chamber of Commerce of Thailand, and Advertising Association of Thailand.

3. Requesting the Secretary-General of the National Health Commission to report the progress to the Fifth National Health Assembly.