

### Control of Marketing Strategy of Infant and Young Child Food

The Third National Health Assembly,  
considered the report on Control of Marketing Strategy for Infant and Young  
Child Food<sup>1</sup>:

*Acknowledging* the Resolution of the 63<sup>rd</sup> World Health Assembly, 2010, requesting each country to apply the International Code on Marketing of Breast Milk Substitutes into its laws;

*Recognizing* 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 food is a factor that can exercise influence over the use of food formula, including subsequent impacts on household expenditure, the economic and health service systems;

*Concerned* that the Code of Marketing of Infant and Young Child Food and Related Products, B.E. 2551 (2008) has no binding effect and no penalty clauses for acts of violation, that they are not sufficient to control the marketing strategy for infant and young child food, and that they do not cover new forms of marketing;

*Concerned about* the severe impact of the marketing of infant and young child food 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 food in one legal form or another tend to have a lower incidence of violation of the International Code of Breast Milk Substitutes and a higher rate of breastfeeding than those countries that have control mechanisms on a voluntary basis;

*Aware* that actions to solve problems about the marketing strategy for infant and young child food 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 formula-feeding practice, and arranging for the environment to be conducive to breastfeeding in 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:

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<sup>1</sup> Document: Health Assembly 3/Main2

1. Requesting the National Health Commission to submit the Resolution of the Third National Health Assembly on Control of Marketing Strategy for Infant and Young Child Food 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 food in accordance with the Code of Marketing of Infant and Young Child Food 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 Interior, Ministry of Commerce, Ministry of Social Development and Human Security, Ministry of Labour, and other agencies concerned, both public, private and people.

1.1.2 Develop and work to get the Bill on Marketing of Infant and Young Child Food, B.E...legislated by the end of 2012, putting in place working mechanisms and using the Code of Marketing of Infant and Young Child Food and Related Products, B.E. 2551 (2008) as minimum basic criteria for the above mentioned Bill. In addition, Set up a breastfeeding promotion fund while the operational funding could come from the import duties or revenue from selling imported formula products in the same manner as Thai Health Promotion Fund which has been considered a successful model initiated by Thailand and already well-received by other countries.

1.1.3 Develop operational mechanisms, monitoring and evaluation system as well as reporting system involving the participation of all sectors concerned at local, provincial and national levels as well as of international organizations.

1.2 The Ministry of Labour to act as the main agency together with the Prime Minister's Office, the Comptroller-General's Department, and every sector concerned in studying the extension of the right to maternity leave and considering amending legal provisions on the right to maternity leave to be extended to 180 days and entitled to receiving wages while on such leave, in the case of breastfeeding mothers, and setting measures of welfare to promote and support breastfeeding for mothers at business establishments and workplace, as well as considering tax deduction measures and making public recognition of business establishments that serve as models for breastfeeding promotion.

2. Urging members of the National Health Assembly to cooperate in supporting the Bill on Marketing of Infant and Young Child Food, B.E... and in 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 National Code of Breast Milk Substitutes, together with the public, private and people sectors, including education institutes at all levels, 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, Advertising Association of Thailand, and Association of Manufacturers of Food for infants and Young Children.

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