

Marketing of breast-milk substitutes

National implementation of
the International Code,
status report 2024



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Abbreviations

BMS	breast-milk substitute(s)
IBFAN	International Baby Food Action Network
IYCF	infant and young child feeding
UNICEF	United Nations Children's Fund
WHA	World Health Assembly
WHO	World Health Organization

Executive summary

This report provides updated information on the status of implementation of the International Code of Marketing of Breast-milk Substitutes (BMS) and subsequent relevant World Health Assembly (WHA) resolutions (collectively referred to as “the Code”) in countries. It presents the legal status of the Code, including the extent to which the provisions of the Code have been incorporated in national legal measures. The report focuses on how legal measures delineate processes for monitoring and enforcement to ensure the effectiveness of the provisions included. It also highlights key examples of interference from manufacturers and distributors of breast-milk substitutes in efforts to weaken and delay the implementation of protections against unethical marketing.

Since 2022, WHO, UNICEF and civil society partners have taken significant steps to support countries in restricting the marketing of breast-milk substitutes.

2022. The legal measures were analysed for scope and content by using a standardized checklist of Code provisions (Annex 1).

The same scoring algorithm used since 2020 was applied to classify countries’ legislation into categories. The algorithm assigns point values for each Code provision, with a maximum possible total of 100 points for measures that reflect all provisions in the Code. Countries with legal measures that scored 75 or greater are considered to be “substantially aligned with the Code”, those with scores of 50 – < 75 are considered to be

“moderately aligned with the Code”, and those with scores < 50 are considered to have “some provisions of the Code included”. This algorithm facilitates a systematic and objective classification of countries and their legal measures.

Technical assistance and guidance on Code implementation

Since 2022, WHO, UNICEF and civil society partners have taken significant steps to support countries in restricting the marketing of breast-milk substitutes. New tools to educate decision-makers on key aspects of the Code and to clarify various provisions are now available. Countries have received technical legal assistance through regional workshops and one-on-one communications. Tools, such as model laws and guidance on regulating the digital marketing of breast-milk substitutes have been published to support the development of robust national legislation. The 2023 Global Congress on Implementation of the Code supported countries to learn more about the nature of BMS marketing, receive technical assistance, connect with other countries, and develop workplans for strengthening legislation, monitoring and enforcement.

Methodology

WHO, UNICEF and IBFAN collected information from their regional and country offices on new or additional legal measures adopted by countries since the last report in

Findings: legal status of the Code

A number of countries have strengthened their protection of breastfeeding since the 2022 report. Timor-Leste enacted legislation related to the Code for the first time in 2023. New legal measures in Burkina Faso, El Salvador, and China included additional marketing restrictions. Paraguay adopted a resolution related to implementation of existing breastfeeding protection measures. Singapore had previously been classified as having no legal provisions on the Code, but in fact, food regulations as amended in 2019 include several Code-related measures. Unfortunately, in Ukraine, recent legislation repealed earlier legal measures on the Code, resulting in a slightly lower score.

As of March 2024, a total of 146 WHO Members States, comprising 91% of all global annual births, have adopted legal measures to implement at least some of the provisions in the Code. Of these, 33 countries have measures in place that are substantially aligned with the Code. A further 40 countries have measures that are moderately aligned and 73 have included some provisions; while 48 have no legal measures at all. Alignment with the Code is highest in the WHO African, Eastern Mediterranean, and South-East Asia regions.

Key provisions of the Code are missing in the legislation of many countries. Only 38 countries have measures clearly covering the full breadth of breast-milk substitutes up to 36 months of age, although an additional 13 countries cover follow-up formula without specifying an age range.

While prohibitions of advertising and promotional devices at points of sale are more commonly covered (89 and 115 countries, respectively), only a small number of countries have regulations prohibiting the distribution of informational or educational materials from industry (28 countries) and only 68 countries prohibit the use of nutrition and health claims on labels. Protections against conflicts of interest in the health system are weak in most countries, with only 34 countries fully prohibiting gifts and incentives to health workers and 22 countries prohibiting industry sponsorship of health professional meetings.

Findings: monitoring and enforcement of Code laws

Monitoring and enforcement of national legislation is often inadequately specified. Among countries with legal measures on the Code, only 59% identify the entities responsible for Code monitoring and only 24% delineate the procedures for conducting monitoring. Sixty-four percent define what sanctions should be applied when violations occur, but only 18% specify how these sanctions should be determined and levied. A small number of countries (17 in total) clarify that monitoring and enforcement should be independent, transparent and free from commercial influence.

Analysis presented shows that rates of breastfeeding increase when legislation more clearly spells out how it is to be monitored and enforced. Where at least 3 of the provisions for monitoring and enforcement are spelled out in the legislation, the average rate of exclusive breastfeeding in infants 0-5 months of age is 53%, compared to only 27% in countries that do not include these provisions.

Conclusions

While countries are increasingly protecting breastfeeding through legal measures restricting the promotion of breast-milk substitutes, progress has been slow. Significant gaps in national legislation remain. Because monitoring and enforcement mechanisms are typically weak, even provisions that are included in the legal measures are often violated with no repercussions. As a result, unethical marketing continues to occur around the world, to the detriment of the health of infants, children and mothers.

The Code is recognized as a core obligation under the Convention on the Rights of the Child and other relevant UN human rights instruments. Strengthening the implementation of the Code must become a public health priority for all countries.

Recommendations

1. Countries should recognize their obligations under international human rights law and international agreements to enact binding legal measures to implement the Code and eliminate inappropriate marketing practices.
2. National governments and civil society partners should use the analyses in this report to identify gaps in existing legal measures and take action to ensure that all Code provisions are fully incorporated.
3. Countries should ensure that legal measures, monitoring systems and enforcement processes fully cover the emerging marketing tactics beyond traditional advertising that have been made possible through digital technologies.
4. Countries should ensure that domestically-based companies are held accountable for cross-border activities that violate the Code.
5. Legislative and executive processes to develop and implement legal measures on the marketing of breast-milk substitutes must be independent and free from the influences of manufacturers and distributors of products within the scope of the Code. Mechanisms must be introduced to protect against all conflicts of interest.
6. Laws and regulations on the Code should place specific duties of compliance on different entities in the supply chain, include procedures for monitoring and enforcement, and allocate adequate financial and human resources to ensure effective implementation and enforcement.
7. Health workers, health systems and health professional bodies should carry out their responsibilities under the Code to protect against promotion of breast-milk substitutes and avoid conflicts of interest.



1.

Introduction

1. Introduction

The International Code of Marketing of Breast-milk Substitutes, first adopted in 1981, remains a core component of global health policy to protect and promote breastfeeding. The World Health Assembly has reiterated the importance of the Code numerous times in subsequent resolutions and decisions, calling for enactment and enforcement of robust national legal measures implementing it. Human rights bodies have stated that adoption of the Code is part of States' core obligations under the Convention on the Rights of the Child and other relevant UN human rights instruments.¹ Full application of the Code and subsequent resolutions is essential to ensuring that parents and other caregivers are protected from inappropriate and misleading information.

This report updates information on the status of implementation of the Code globally. It describes key activities carried out by World Health Organization (WHO), United Nations Children's Fund (UNICEF), and International Baby Food Action Network (IBFAN) to assist countries with Code implementation. The report analyses the legal status of the Code at the national level, including the extent to which its provisions have been incorporated into legal measures. The report highlights specific provisions considered to be particularly instrumental in addressing and eliminating promotion of BMS, feeding bottles and teats. The report further examines how well national legislation addresses the monitoring and enforcement of those measures.

¹ United Nations Human Rights Office of the High Commissioner, 2016. Joint statement by the UN Special Rapporteurs on the Right to Food, Right to Health, the Working Group on Discrimination against Women in law and in practice, and the Committee on the Rights of the Child in support of increased efforts to promote, support and protect breast-feeding. (<https://www.ohchr.org/en/statements/2016/11/joint-statement-un-special-rapporteurs-right-food-right-health-working-group?LangID=E&NewsID=20871>, accessed 5 April 2024).



2.

*Technical assistance
and guidance on
Code implementation*

2. Technical assistance and guidance on Code implementation

To assist countries in application of the Code, WHO and UNICEF co-hosted a Global Congress on Implementation of the International Code of Marketing of Breast-milk Substitutes in Geneva in June 2023². Delegates from some 130 countries engaged in knowledge transfer and technical assistance with experts on the Code. The Congress covered six key themes that are essential for effective Code implementation:

- Building political will;
- Identifying and managing industry interference;
- Implementing the Code into national law;
- Strengthening coordination and governance mechanisms in national laws;
- Monitoring and enforcing Code laws;
- Taking action.

The objectives of the Congress were 1) to increase knowledge and skills of national actors on strategies to end the unethical marketing of breast-milk substitutes, bottles, and teats; 2) to develop national roadmaps/workplans to strengthen legislation, monitoring and enforcement of the International Code of Marketing of Breast-milk Substitutes, and 3) to build regional networks to share information and support of national action on the Code.

Countries from around the world shared their successes and challenges with Code implementation, particularly highlighting stories of industry interference in the legislative and monitoring processes (see case studies included in this report). Each country developed road maps or workplans to continue work on strengthening national legislation, monitoring and enforcement of the Code. In several regions networks have been built in order to continue sharing information and assistance across countries.

UNICEF and WHO hosted several regional workshops in 2023–24 to build greater capacity of government and civil society participants to develop effective legal instruments, monitor Code violations, and enforce national laws. These were conducted in South Asia (Sri Lanka, November 2022 and Nepal, May 2023), western Africa (Côte d'Ivoire, March 2024) and Central Asia (Uzbekistan, May 2024). UNICEF and WHO continue to provide direct technical legal assistance to countries seeking to develop or update Code laws and regulations.

Building upon the results of a study on the reach and influence of marketing of breast-milk substitutes on infant feeding in Bangladesh, China, Mexico, Morocco, Nigeria, South Africa, the United Kingdom of Great Britain and Northern Ireland, and Viet Nam,³ as well as an investigation of the scope, techniques and impact of digital marketing strategies for the promotion of BMS,⁴ WHO and partners published a series of papers on breastfeeding in the *Lancet* in 2023.⁵ The series documented how commercial milk formula sales have increased to about US\$55 billion annually, with more infants and young children receiving formula products than ever before. It described marketing tactics that are multifaceted and well-resourced, portraying breast-milk substitutes as solutions to common infant health and developmental challenges in ways that systematically undermine breastfeeding. The series was launched at events in London, New York City, Mexico City, Johannesburg, Canberra, and Bangkok.

In 2023, WHO and UNICEF updated the online training course about the Code to use the most recent learning technologies and make it more accessible.⁶ The course is directed towards health workers, policy-makers, public health practitioners and others with responsibilities for

² WHO. Global Congress on Implementation of the International Code of Marketing of Breast-milk Substitutes Summary report, 20–22 June 2023. (<https://www.who.int/publications/m/item/global-congress-on-implementation-of-the-international-code-of-marketing-of-breast-milk-substitutes>, accessed 5 April 2024).

³ How the marketing of formula milk influences our decisions on infant feeding. Geneva. WHO and UNICEF. 2022. Licence: CC BY-NC-SA 3.0 IGO. (<https://apps.who.int/iris/rest/bitstreams/1411756/retrieve>, accessed 5 April 2024).

⁴ Scope and impact of digital marketing strategies for promoting breast-milk substitutes. Geneva: World Health Organization; 2022. Licence: CC BY-NC-SA 3.0 IGO. (<https://www.who.int/publications/i/item/9789240046085>, accessed 5 April 2024).

⁵ The 2023 *Lancet* Series on Breastfeeding. <https://www.thelancet.com/infographics-do/2023-lancet-series-breastfeeding>.

⁶ WHO, UNICEF, Australian Breastfeeding Association. Introduction to the International Code of Marketing of Breast-milk Substitutes (2nd Edition). (<https://agora.unicef.org/course/info.php?id=45297>, accessed 5 April 2024).

putting the Code into effect. UNICEF published two resources on the Code: an overview of key Code provisions⁷ and a guide on protecting infant and young child nutrition from industry interference and conflicts of interest.⁸

In addition, to strengthen measures and establish effective systems for implementing and enforcing the Code and ending inappropriate promotion of foods for infants and young children, the UNICEF West and Central Africa Regional Office developed an annotated Model Law in 2022 in French and in English.⁹ The UNICEF Regional Office for South Asia also developed an updated model law that incorporates the digital marketing guidance, and provides additional guidance on how to include strong governance frameworks into Code legislation to allow for effective implementation, monitoring and enforcement.

In response to the growing recognition of the role of health care providers in supporting breastfeeding and protecting them and parents against inappropriate marketing, WHO co-hosted a series of webinars in 2022 highlighting how the receipt of gifts or sponsorship by health care providers and health care professional organizations distorts educational opportunities, prescription behaviours and guideline development. In June 2023, WHO and UNICEF published an information note on what constitutes sponsorship of health professional and scientific meetings by manufacturers of foods for infants and young children.¹⁰ WHO also convened leaders of health care professional associations to discuss what can be done about this type of sponsorship. A key outcome of the meeting was a joint call from global umbrella associations to end such sponsorship.¹¹

At the request of the World Health Assembly, WHO developed guidance on regulatory measures aimed at restricting digital marketing of breast-milk substitutes, containing 11 recommendations for Member State action.¹² The recommendations highlight new marketing tactics that were not possible without digital technologies and describe legislative solutions to addressing them.

The Codex Committee on Nutrition and Foods for Special Dietary Uses completed the revision of the Codex Alimentarius Standard for Follow-up Formula. The updated standard specifically states that its application should take into account the Code. It includes several provisions of both the Code and WHO's guidance on ending inappropriate promotion of foods for infants and young children, such as the requirements for statements on product labels, the prohibition of specific elements on product labels, protection against cross-promotion, the recognition that follow-up formula for infants aged 6–11 months is a breast-milk substitute, and acknowledgement that some countries regulate the product for children aged 12–35 months as a breast-milk substitute.

⁷ UNICEF, What I should know about 'the Code', 2023. (<https://www.globalbreastfeedingcollective.org/what-i-should-know-about-code>, accessed 5 April 2024).

⁸ UNICEF, Protecting Infant and Young Child Nutrition from Industry Interference and Conflicts of Interest, 2023. (<https://www.globalbreastfeedingcollective.org/protecting-infant-and-young-child-nutrition-industry-interference-and-conflicts-interest>, accessed 5 April 2024).

⁹ UNICEF, Regional model law for West and Central Africa: regulating the marketing of breastmilk substitutes, foods for infants & young children and related feeding utensils. (<https://www.unicef.org/wca/documents/regional-model-law-west-and-central-africa-regulating-marketing-breastmilk-substitutes>, accessed 17 April 2024).

¹⁰ WHO, Clarification on sponsorship of health professional and scientific meetings by companies that market foods for infants and young children: information note. (<https://www.who.int/publications/i/item/9789240074422>, accessed 5 April 2024).

¹¹ Macnab I, Drandić D, Kellams A, Ahmad Memon I, Stevenson A, Walker K. Call to end sponsorship from commercial milk formula companies. *The Lancet* 403, 2024. ([https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(24\)00242-3.pdf](https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(24)00242-3.pdf), accessed 5 April 2024).

¹² Guidance on regulatory measures aimed at restricting digital marketing of breast-milk substitutes. Geneva: World Health Organization; 2023 (<https://iris.who.int/handle/10665/374182>, accessed 5 April 2024).



3.

Methodology

3. Methodology

This report utilizes the same methodology as described in the 2022 status report, encompassing the application of a scoring algorithm to classify countries' legislation. This algorithm enables standardized classification based on criteria agreed upon by WHO, UNICEF, and IBFAN. The three organizations collected information from their regional and country offices regarding new or additional legal measures adopted by countries since 2022, alongside identifying previously overlooked legal measures. Additional analyses were conducted to enhance understanding of provisions concerning monitoring and enforcement of national laws based on the Code.

3.1 Data collection

For countries that have adopted legal measures since the 2022 report, relevant documents were obtained through ministries of health, assisted by WHO, UNICEF, and IBFAN regional and country offices. Documentation was also sourced from legal databases (Lexis-Nexis and FAOLEX), national gazettes, and internet search engines. If necessary, additional copies of legislation and translations were acquired from UNICEF and IBFAN-International Code Documentation Centre files. Although efforts were made to identify all relevant legal measures, it is possible that some measures were overlooked, particularly general laws related to advertising or consumer protection containing Code-relevant provisions. Moreover, monitoring and

enforcement procedures might exist in associated legal measures but were not reported to WHO. New legal measures were entered into the WHO Global database on the implementation of food and nutrition action.¹³ Only legal measures in force or set to be enacted by the end of 2024 are included in this report.

3.2 Analysis of legal provisions for the Code

Legal measures with available documentation were scrutinized for scope and content using a standardized checklist of Code provisions, which includes recommendations from subsequent World Health Assembly resolutions, including guidance associated with resolution WHA69.9. All legal measures, whether examined in previous reports or newly introduced legislation, were analysed.

National legal measures were scored based on how closely they adhere to Code recommendations and subsequent resolutions.¹⁴ Each Code provision was assigned a points value, with a maximum cumulative score of 100. These provisions were classified into seven categories, each with a specified number of points possible (refer to Table 1). A more detailed breakdown of the scoring algorithm is provided in Annex 1. This algorithm facilitates a systematic and objective classification of countries and their legal measures.

Table 1. Scoring algorithm used to classify national legal measures on the Code, points per category

Category	Maximum points available
Scope	20
Monitoring and enforcement	10
Informational/educational materials on IYCF	10
Promotion to general public	20
Promotion in health care facilities	10
Engagement with health workers and systems	15
Labelling	15
Total	100

¹³ Global database on the Implementation of Food and Nutrition Action (GIFNA). WHO. (<https://gifna.who.int/>, accessed 5 April 2024).

¹⁴ Resolution WHA69.9. Ending inappropriate promotion of foods for infants and young children. In: Sixty-ninth World health Assembly, Geneva, 23–28 May 2016. Resolutions and decisions, annexes. Geneva: WHO; 2016 (http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_R9-en.pdf, accessed 5 April 2024).

3.3 Classification of legislation

Using a maximum possible total score of 100, all WHO Member States were classified into the following categories:

- **Substantially aligned with the Code:** countries have enacted legislation or adopted regulations, decrees or other legally binding measures encompassing a significant set of provisions of the Code (score of 75 – 100);
- **Moderately aligned with the Code:** countries have enacted legislation or adopted regulations, decrees or other legally binding measures encompassing a majority of provisions of the Code (score of 50 – < 75);
- **Some provisions of the Code included:** countries have enacted legislation or adopted regulations, decrees or other legally binding measures covering less than half of the provisions of the Code (score of < 50);
- **No legal measures:** countries have taken no action or have implemented the Code only through voluntary agreements or other non-legal measures (includes countries that have drafted legislation but not enacted it).



4.

Legislative status of the Code

4. Legislative status of the Code

Under Article 11.1 of the Code, governments are urged to “take action to give effect to the principles and aim of this Code, as appropriate to their social and legislative framework, including the adoption of national legislation, regulation or other suitable measures”. The World Health Assembly stressed in resolution WHA34.22 (1981) that adoption of and adherence to the Code is a minimum requirement for all Member States to implement it “in its entirety”.¹⁵

Furthermore, the United Nations special rapporteurs on the right to food and the right to health and other human rights bodies have stated that adoption of comprehensive and enforceable normative measures to protect babies and mothers from marketing of BMS and fully align with the recommendations contained in the International Code are part of States’ core obligations under the Convention on the Rights of the Child and other relevant UN human rights instruments.¹⁶

4.1 Updates to national legal measures

Since the 2022 report, legal measures related to the Code have been reported from eight countries. Timor-Leste enacted legislation related to the Code for the first time in 2023. New legal measures enacted in Burkina Faso, El Salvador, and China included additional marketing restrictions, bringing them into closer alignment with the Code. Paraguay adopted a resolution related to implementation of existing breastfeeding protection measures including national marketing restrictions, but this resolution did not introduce new provisions. Singapore had previously been classified as having no legal provisions on the Code, but in fact, the food regulations as amended in 2019 include several Code-related measures and thus is now counted as having enacted some Code provisions in law. In Ukraine, recent legislation repealed earlier legal measures on the Code, resulting in a slightly lower score. A new resolution in Cuba has been passed but is yet to be gazetted and is therefore not included in this year’s status report.

4.2 Classification of national legal measures

As of March 2024, 146 (75%) of the 194 WHO Member States (countries) have adopted legal measures to implement at least some of the provisions in the Code. Ninety-one percent of global annual births occur in these countries. Among them, 33 countries are substantially aligned with the Code, providing protection against unethical marketing to 44% of the world’s births annually. Forty countries are moderately aligned with the Code, 73 include some provisions, and 48 have no legal measures.

Regional analysis indicates higher Code alignment in the WHO African, Eastern Mediterranean, and South-East Asia regions (Figure 1). While Europe has the largest proportion of countries with at least some legal measures on the Code, the European Directive that applies to all EU members and affiliated states only covers some Code provisions. The Americas and Western Pacific regions show the lowest adoption rates of Code-related legal measures.

Figure 2 shows a global map of where Code legislation is the strongest (see also Annex 2). While the majority of countries still have either limited or no legal measures in place, the number of countries substantially aligned with the Code is growing and the number of countries with no legal measures is shrinking.

4.3 Key provisions covered

The provisions covered in the 146 countries that do have national legal measures in place were divided into seven sections: scope; monitoring and enforcement; informational/ educational materials on infant and young child feeding (IYCF); promotion to the general public; promotion in health care facilities; engagement with health workers and systems; and labelling (Annex 3). Closer examination of the sub-scores for each of these sections provides a better understanding of where there are key gaps in existing legislation. Figure 3 shows the number of

¹⁵ Resolution WHA34.22. International Code of Marketing of Breast-milk Substitutes. In: Thirty-fourth World Health Assembly, Geneva, 4–22 May 1981. Resolutions and decisions, annexes. Geneva: World Health Organization; 1981 (<https://iris.who.int/handle/10665/156596>, accessed 5 April 2024).

¹⁶ Committee on the Elimination of Discrimination against Women considers the report of Bangladesh. 8 November 2016. UN OHCHR Media Centre. (<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=20871&LangID=E>, accessed 5 April 2024).

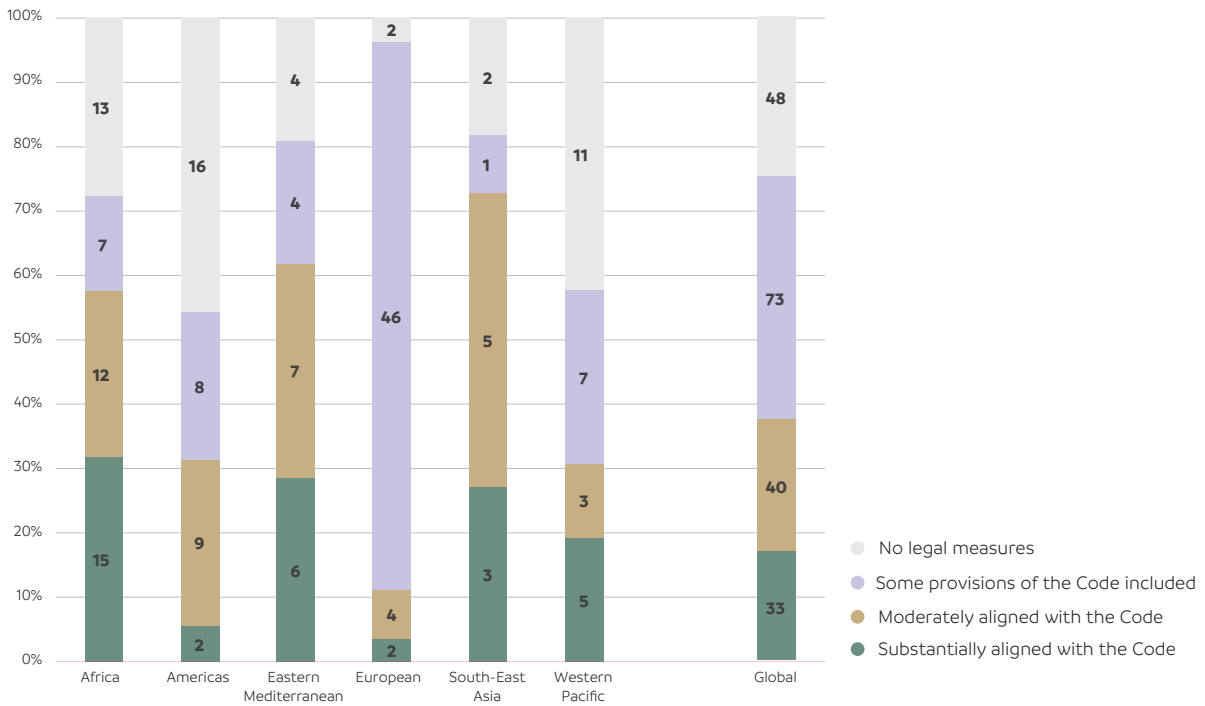


Figure 1. Legal status of the Code as enacted in countries, by WHO region (n=194)

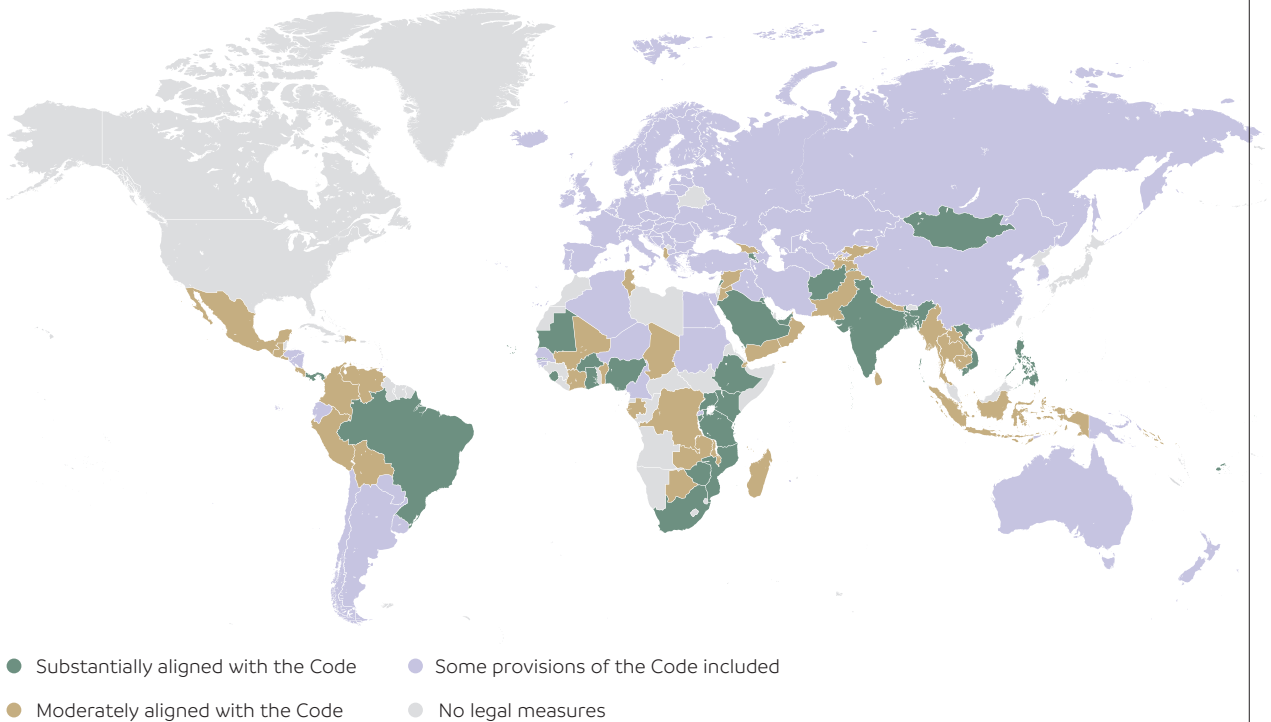


Figure 2. National legal status of the Code, 2024

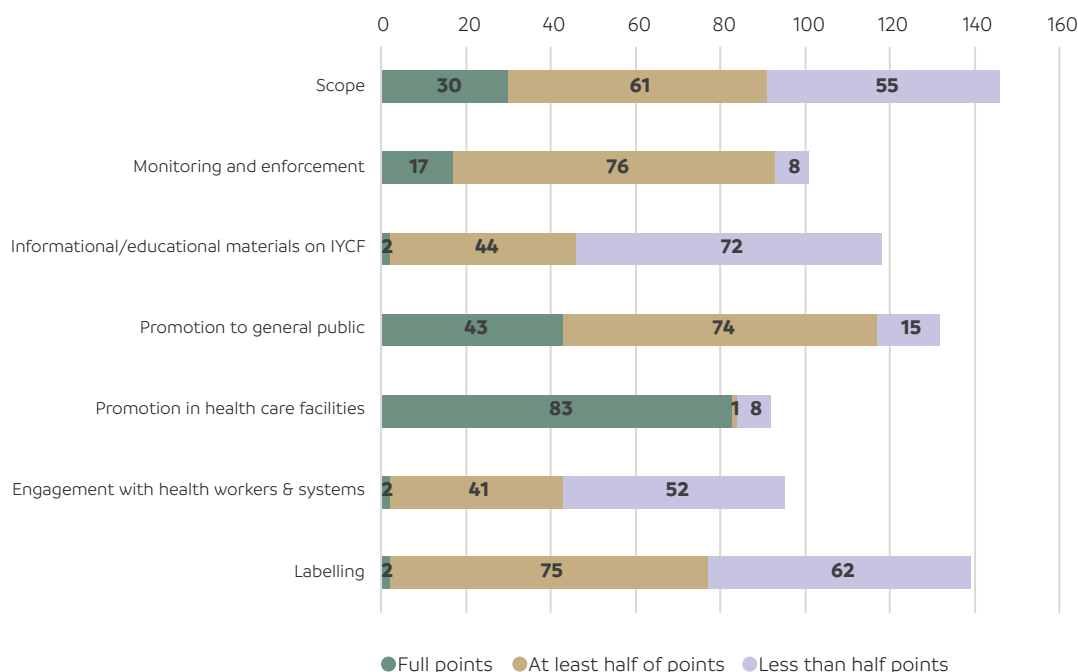


Figure 3. Number of countries receiving full, at least half, or at least some points on each section of the scoring algorithm

countries receiving full points, those with at least half the possible points, and those covering at least some of the provisions for each section.

While all national laws outline the range of products covered, merely 30 countries have enacted legislation encompassing the complete scope of the Code. This includes breast-milk substitutes marketed for up to 3 years of age, complementary foods inappropriately marketed for infants aged 0-5 months, and feeding bottles and teats. Surprisingly, only 101 countries specify monitoring and enforcement responsibilities in their laws. For others, these responsibilities may be outlined in separate laws or regulations not assessed for this report.

Additionally, almost all countries with Code legislation include some provisions on the labelling of milk formulas (139 countries). However, only two countries, Burkina Faso and Ethiopia, include all Code provisions on labelling.

Promotion to the general public is addressed in the majority of legislation (132 countries), showing better alignment with the Code. However, fewer countries cover promotion in health care facilities and engagement with health workers and systems (92 and 95 countries respectively).

When addressed, promotion in health care facilities tends to be well-aligned with the Code, but there are significant gaps in provisions on engagement with health workers and systems, with only Sierra Leone and Uganda covering all provisions in this area.

Annexes 4 through 9 provide detailed information on all provisions covered by national legal measures in the 146 countries. In terms of scope of the legal instruments, all countries except one cover breast-milk substitutes. (Papua New Guinea only has legislation regarding bottles and teats). However, only 38 countries have measures clearly covering the full breadth of BMS, including milk products targeted for use up to 36 months (Figure 4), although an additional 13 countries cover follow-up formula without specifying an age range, suggesting that milks up to 36 months might be included. Overall, 127 countries cover breast-milk substitutes at least through the first 12 months of life. Additionally, 87 countries cover complementary foods marketed for infants aged 0-5 months, and 79 countries include bottles and teats in the scope of their national legislation.

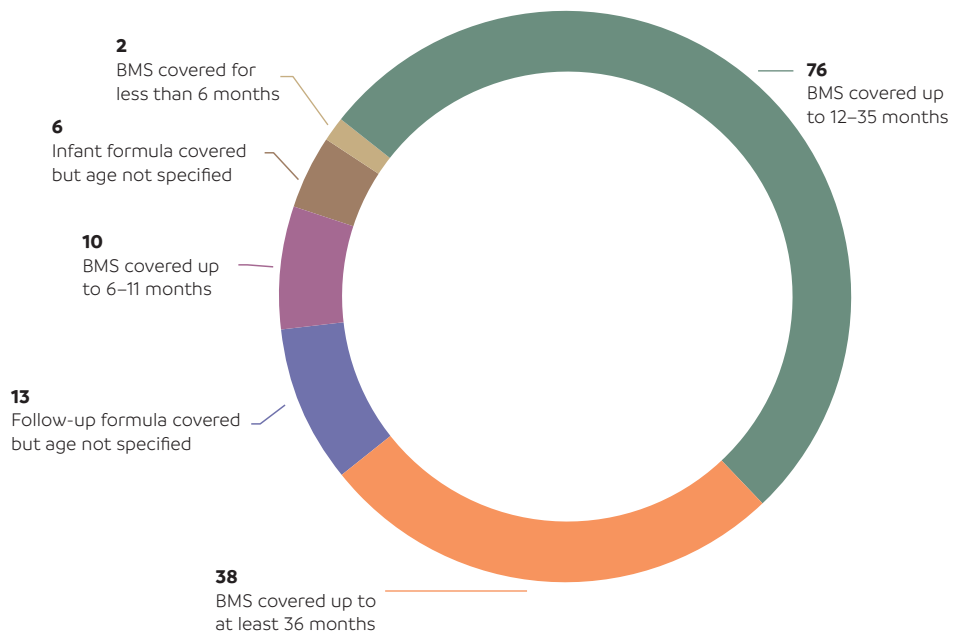


Figure 4. BMS products covered in scope of legal measures (n=145)

Figure 5 highlights key provisions of the Code, emphasizing persistent challenges in various countries. The selection of these provisions is not intended to diminish the importance of other Code provisions. Indeed, as emphasized in resolution WHA34.22, adoption of and adherence to the Code is a minimum requirement for all countries, and the Code should be implemented in its entirety.

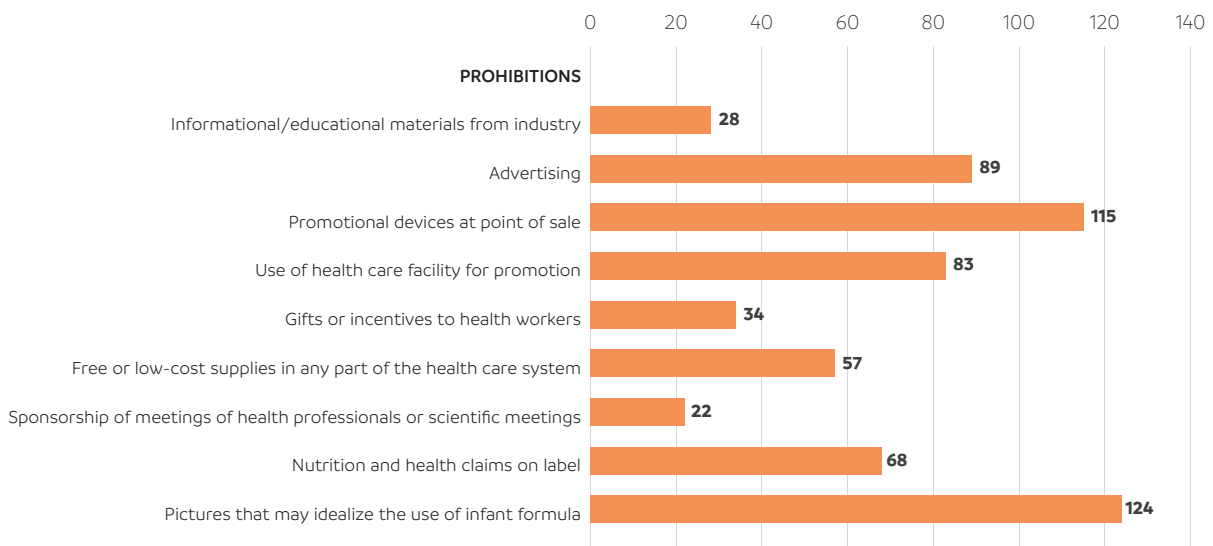


Figure 5. Number of countries with key Code provisions enumerated in legal measures, by provision

There remains significant disparity among countries in the incorporation of Code provisions into national legislation. While a majority of countries (124 countries) prohibit the use of images on labels that may idealize the use of infant formula, fewer (68 countries) prohibit the inclusion of nutrition and health claims on labels. Likewise, while many countries have banned advertising (89 countries) and promotional devices at points of sale (115 countries), only a small number (28 countries) have regulations against the distribution of informational or educational materials from manufacturers or distributors.

The health system has traditionally served as a conduit for promoting products covered by the Code, with promotion in health facilities persisting in many countries. However, despite this trend, few countries have robust measures in place to curb these promotional activities. While a considerable number of countries (83 countries) prohibit the use of health facilities for promotion, fewer (57 countries) have provisions to prohibit the distribution of free or low-cost supplies in the healthcare system. Moreover, a surprisingly low number of countries (34 countries)

prohibit gifts or incentives to health workers, and only 22 countries have legal restrictions on industry sponsorship of meetings involving health professionals or scientific groups.

4.4 Summary

This analysis demonstrates that while progress is being made in tightening the regulation of the marketing of breast-milk substitutes, significant gaps remain in many countries. On the one hand, three out of four countries, comprising 91% of all births, have enacted legislation covering at least some provisions of the Code, indicating that countries do recognize the importance of protecting breastfeeding against inappropriate marketing. But the fact that only 33 countries have legal measures substantially aligned with the Code demonstrates the continued opportunities for marketing that impairs breastfeeding. Gaps in covering the full scope of the Code, marketing through health care systems, nutrition and health claims, and advertising urgently need to be addressed.

Case Study 1. Challenges to Code legislation in Azerbaijan

The Republic of Azerbaijan passed the “Law on Infant and Young Child Nutrition” in 2003, aligning many of its regulations with those outlined in the Code. However, subsequent amendments to this legislation have significantly diminished its impact on regulating marketing of formula. Key provisions, such as the ban on featuring images of children on formula packaging, restrictions on organizing sales exhibitions and special displays for formula advertising, and the prohibition of formula sponsorship for events, including healthcare events, which were included in the 2003 edition of the law, were removed in 2016.



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Furthermore, the previous provision to include the statement that breastfeeding is superior to formula feeding advertisements, has been replaced with a regulation prohibiting the advertising of formula to pregnant women and mothers in medical institutions. Additionally, the latest amendment introduces a condition permitting the advertisement of baby formula products if the producers hold a food safety certificate issued by the Azerbaijan Food Safety Agency (AFSA). These advertisements must prominently display the manufacturer’s food safety registration or health certificate number, date of issuance, and the name of the issuing authority.

According to the 2019 amendment, upon request from the advertisement producer and broadcaster, company that wants to advertise the product must provide a certificate of conformity, origin, details of food safety registration, usage instructions, and any additional relevant information referenced in the advertisement, along with a copy of the document confirming the results of relevant research. There are otherwise no restrictions on how manufacturers can advertise formula products. Therefore, these provisions effectively permit the broad advertising of formula to various audiences across all available platforms except the ones stated in passed the “Law on Infant and Young Child Nutrition” article 10.6 and 10.9.

In light of the amendments that have been made gradually over time, the Azerbaijan authorities have recognized the need to review their Code legislation to strongly align with the international Code and to prevent industry interference.



5.

*Monitoring and
enforcement of
Code laws*

5. Monitoring and enforcement of Code laws

It is essential for key implementation, monitoring and enforcement to be considered in developing the legal instrument, before the legislative drafting process begins, not after the legal instrument is enacted. The details of effective implementation, monitoring and enforcement can and should be built into the instrument itself, helping ensure that it will not only appear strong on paper but be effective in practice.

For national Code legislation or regulations to be effective, responsible government agencies must be empowered to monitor compliance with national legal measures, identify violations, and take corrective action when violations are identified, through administrative, legal or other sanctions. Therefore, legal measures must ensure that appropriate agencies have sufficient legal power, resources and coordination mechanisms to implement, monitor and enforce the law.

Often, one government agency may have the power to pass implementing regulations, but not to enforce all aspects of the law. For example, a health ministry may have the power to prohibit formula marketing, but is unlikely to have the power to enforce it across the entire media spectrum, including everything from a national broadcasting campaign, to local outdoor advertising, to a wide-reaching digital campaign. It is therefore important that the agencies responsible for both monitoring and enforcement across the media spectrum, including digital environments, are identified in the law and provided with the necessary authorities.

Another key factor is ensuring that there is sufficient funding for monitoring and enforcement. To the extent possible, funding sources should be determined from the outset, so that they can be written into the measure, or included in a related budget bill. If there is a body that already monitors and enforces other legislation, it may require additional resources or expertise to enforce the new law.

Analysing existing measures and how their monitoring and enforcement mechanisms are designed – including what is working well and what is not effective – can help inform funding decisions for the measure.

5.1 Monitoring

It is important for the national legal instruments to clearly spell out who in government is responsible for monitoring compliance with their provisions. Of the 146 countries that have enacted at least some of the Code, 86 (59%) identify the responsible monitoring entities (Figure 6). For most regions, the percent of countries identifying monitoring authorities is higher, but the global figure is depressed because the European Directive that applies to all EU members and affiliated states leaves monitoring responsibilities up to each individual member and information is not available on how each member has taken up this responsibility.

The procedures for monitoring compliance also need to be delineated in the laws or regulations. This is rarely done. Only 24 countries (16%), mostly in Africa and Asia include clear language on how violations of the law should be identified.

WHO and UNICEF have developed a toolkit for monitoring the marketing of breast-milk substitutes. The protocol for ongoing monitoring systems¹⁷ provides a step-by-step guide to setting up a national monitoring system. The protocol emphasizes the need for the government to perform its duties and tasks without external pressure, have sufficient authority and resources, and make information publicly available. The protocol includes a simple monitoring form for recording violations and software for reporting and consolidating such reports.

¹⁷ World Health Organization, United Nations Children's Fund. NetCode toolkit. Monitoring the marketing of breast-milk substitutes: protocol for ongoing monitoring systems. Geneva: World Health Organization; 2017. (<https://www.who.int/publications/i/item/9789241513180>, accessed 5 April 2024).

Case Study 2.

Industry interference in Sierra Leone

Sierra Leone experienced a significant improvement in exclusive breastfeeding rates, rising from 32% in 2013 to 51% in 2021, which slightly exceeded the World Health Assembly's goal of 50% by 2025. To safeguard breastfeeding and support the progress in increasing breastfeeding rates as well as to combat the high level of formula marketing, Sierra Leone's parliament enacted the Breastmilk Substitutes Act in July 2021. The Act conforms closely with the Code, including all of its provisions, making it one of the strongest Code-based laws in the subregion of West Africa.

Several factors and processes brought about the passage of the law in Sierra Leone. The Stronger with Breastmilk Only initiative, launched in August 2020, involved national and sub-national discussions with the three arms of government (the executive, judiciary, and legislative) and other line ministries on the significance and implications of enacting a strong Code-based law in the country. Key stakeholders were also engaged, including health workers, health professional associations, regulatory bodies, religious network leaders, and the media. Additionally, sub-regional learning and exchanges and dedicated capacity-building support on the Code were provided to support the process.



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During the passage of the law, infant formula companies employed various tactics to undermine and interfere with its enactment. Industry lobby groups targeted Parliament's leadership and parliamentary committees such as Health, Legislative Trade, and Gender to lobby against the enactment of the law. They also offered incentives/funds to groups such as trade unions and civil societies to lobby against the passage of the law. At one point, lobby groups pressured the Office of the President not to sign the Bill into legislation. Industry groups also attempted to reduce fines within the Bill and lobby for flexible articles enabling industries to continue BMS marketing activities.

Despite these industry tactics, the legislative champions and the government of Sierra Leone were able to pass the law. With the support of civil society organizations, leadership, and members of Parliament, a stronger advocacy case was presented to the Office of the President to counteract industry tactics and sign the bill into law. The technical arm (Ministry of Health – Directorate of Food and Nutrition and its partners) also collaborated with the parliamentary committee chairpersons and its membership to review and strengthen any loopholes in the Bill, which was later passed into law.

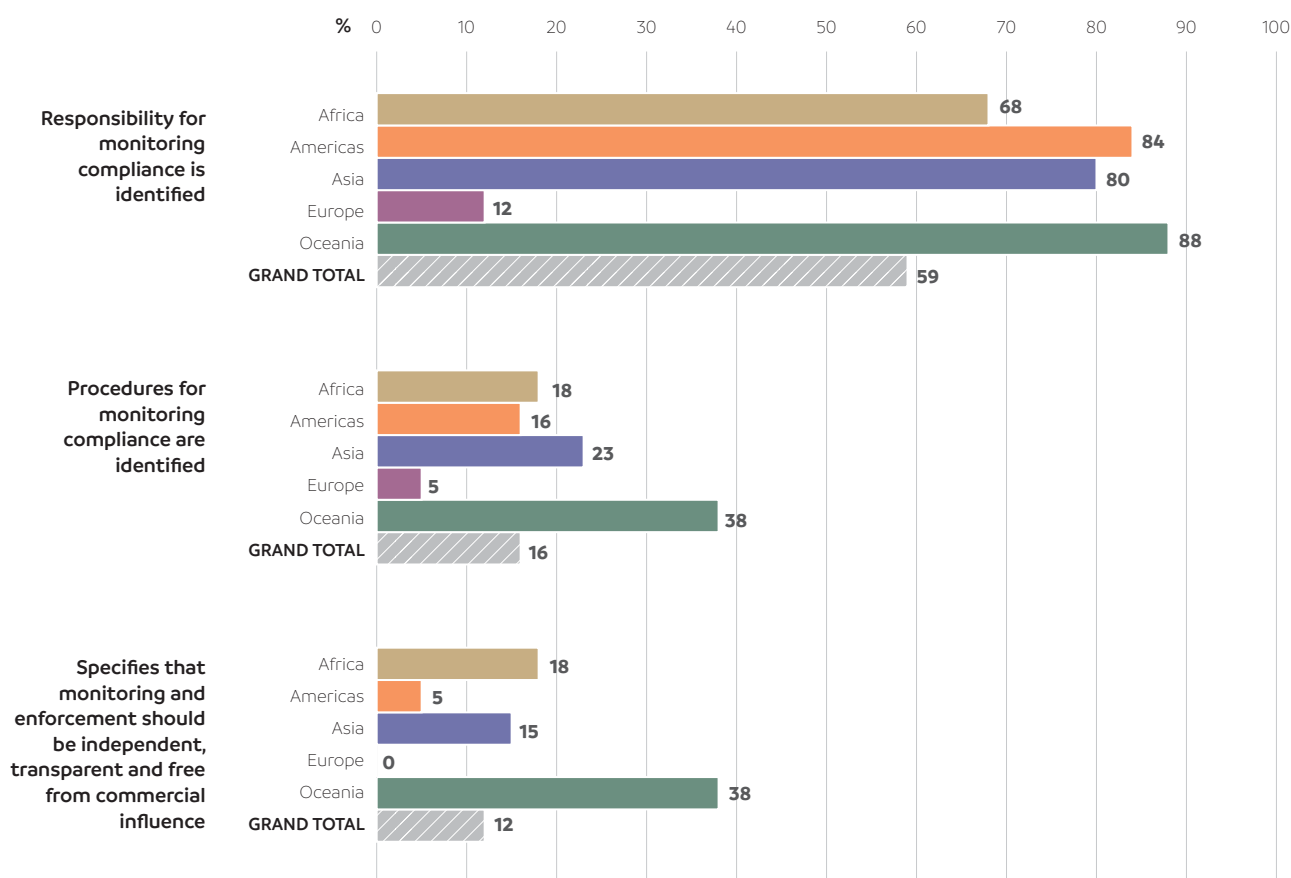


Figure 6. Monitoring provisions delineated in legal measures

It is equally important to ensure that the legal instrument clearly assigns responsibility for monitoring compliance to the appropriate agencies, ensuring that these have the necessary powers and resources to carry out the monitoring activities. Often, monitoring of compliance requires coordination between multiple agencies, including at the national and sub-national levels. Considerations for setting up appropriate compliance monitoring include: whether there are existing inspectors or monitoring mechanisms for similar products and settings that can be used to monitor compliance with the new Code-based law; whether civil society and/or public monitoring can be used and incorporated into the monitoring mechanism, and; whether monitoring mechanisms for digital violations can be based on those undertaken for related laws, such as those regulating tobacco, alcohol and pharmaceuticals.

It is critical that monitoring mechanisms be free of conflicts of interest and that safeguards are put in place to ensure that persons or bodies conducting monitoring preserve their independence, integrity, trustworthiness and credibility. While manufacturers and distributors of products within the scope of the Code should monitor their own monitoring practices, governments and civil society partners should not receive financial support from manufacturers and distributors to conduct monitoring. As illustrated in

the case-studies included in this report, industry interference often leads to weaker Code legislation and ineffective monitoring systems.

WHA 49.15 urged Member States “to ensure that monitoring the application of the International Code and subsequent resolutions is carried out in a transparent, independent manner, free from commercial interest.” Legal instruments in only 17 countries (12%) specify that monitoring and enforcement should be independent, transparent and free from commercial influence.

5.2 Enforcement

The Innocenti Declaration of 2005 called upon all governments to “establish sustainable enforcement mechanisms to prevent and/or address non-compliance” with the Code. Without regular application of enforcement actions to sanction violations as they occur, violations will continue.

The legal instruments in 93 countries (64%) do define the sanctions that should be applied when violations are identified (Figure 7). As is the case for monitoring, enforcement actions for the European Directive are the responsibility of individual member countries and information is not avail-

Case Study 3.

Provincial legislation in Pakistan

Over the past two decades, Pakistan has made strides to implement the Code and protect breastfeeding and child nutrition. It adopted the Protection of Breast-feeding and Child Nutrition Ordinance in 2002, followed by the Protection of Breast-feeding Rules in 2009, which clarify certain provisions in the Ordinance.

The Ordinance and Rules are both federal and provincial measures that were intended to apply throughout the country. However, due to the 18th constitutional amendment in 2010 (on provincial autonomy), the Ordinance was devolved and provinces had to develop/adopt the legislative measures at the provincial level for implementation, monitoring and enforcement. Progress in the provinces includes:

- The Punjab Protection of Breast-feeding and Child Nutrition (Amendment) Act in 2012;
- The Sindh Protection and Promotion of Breastfeeding and Child Nutrition Act in 2013 (replaced in 2023 by the Sindh Protection and Promotion of Breast-Feeding and Young Child Nutrition Act);
- The Balochistan Protection and Promotion of Breastfeeding and Child Nutrition Act in 2014;
- The Khyber Pakhtunkhwa Protection of Breastfeeding and Child Nutrition Act in 2015; and
- The Punjab Province adopted the Punjab Food Authority (Baby Food) Regulations in 2018.
- The Gilgit Biltistan and Azad Jammu & Kashmir Protection of Breastfeeding and Child Nutrition Act is currently in the process of development.

In 2023, Sindh Province had a major achievement with the adoption of the Sindh Protection and Promotion of Breast-Feeding and Young Child Nutrition Act, 2023, which incorporates the recommendations of the 2016 WHO guidance on ending the inappropriate promotion of foods for infants and young children.

The progress in Sindh has inspired other provinces to accelerate their efforts, and subsequently the other provinces including Punjab and the federal government revised their Code legislation to incorporate the 2016 Guidance, which was tabled for endorsement. However, industry pushback poses a major hurdle. Industry groups have used a variety of avenues to oppose the law, including by contacting foreign embassies within Pakistan, to suggest that the law was seeking to limit access to baby formula.

In August 2023, five baby food companies challenged the Sindh Protection and Promotion of Breast-Feeding and Young Child Nutrition Act before the Sindh High Court, alleging the law was enacted in violation of the Constitution. Litigation is a common industry tactic to interfere with Code implementation and is used to threaten existing laws, as well as cause regulatory chill – an attempt to delay, weaken or stop the development of new legal measures.

Children's rights advocates are continuing to press forward, and the Pakistan Paediatric Association has been successfully impleaded as party in the petition by court. Efforts are underway to maintain momentum for implementing the Code in Sindh province and throughout the country.

able on how these countries have defined sanctions. It is likely that the coverage of enforcement processes is higher than noted here.

It is important that a broad range of sanctions are identified in the legal instrument and are directly connected to the legal duties and responsibilities of different entities set out in the legal instrument, and proportionate to the entities' size, control over the compliance and legal responsibility. The legal instrument should include a broad range of penalties, sanctions and corrective actions.

For example, penalties should be large enough to deter violations, while being proportionate to the nature and seriousness of the offence and the resources available to the violator. Multinational manufacturers and distributors have immense resources compared with small retailers and fines and other sanctions should reflect this. Consideration should also be given to the control the violator has over the violating conduct, and include various entities in the digital space. For example, media platforms and internet service providers can be required to remove a digital violation, and failure to do so should include a proportionate penalty, which may be less than the penalty for the manufacturer or advertising firm responsible for the publication of the violation. Repeat offenders should be met with increased penalties, particularly in the case of large corporate manufacturers and distributors. The legal instrument should set initial levels of fines but provide powers for these to be increased (e.g., to account for inflation).

Operating licenses, product registration, permits and other professional licenses are also effective enforcement mechanisms, as are any associated fees that can be increased following repeated violations. Duties and

corresponding sanctions (civil and criminal) can also be placed on individuals within large corporations who have control over compliance, as this may increase their deterrent effect.

Beyond sanctions, other immediate and ongoing actions should be available to the Minister, their delegate or an inspector as may be appropriate. It is important to include a range of short- and long-term corrective actions to build in protections against the immediate harm caused by violations of this Act, as well as to create deterrence against future violations. For example, the legal instrument can set out what should happen when the Minister has evidence of non-compliance, the orders that can be issued immediately as well as longer term corrective actions. Short-term powers may include issuing cease-and-desist orders, notices of non-compliance, orders to remove a prohibited material or advertisement, and orders to recall product for non-compliant labelling and/or composition of products. Other corrective actions may include counter-advertising campaigns to correct the false or misleading aspects of an advertisement, promotion or label determined to be in violation of this Act, at the cost of the person(s) responsible for the violation. The consequences of non-compliance with these orders should be included, as well as the right to administrative and judicial appeals.

In addition to identifying what the sanctions should be, legal instruments need to spell out the procedures for imposing the sanctions. Authorities responsible for enforcement will need to have a system for receiving reports of violations, verifying the completeness of the information provided, validating the report, and issuing appropriate sanctions, including fines, warnings, cease and desist orders, or criminal prosecution.

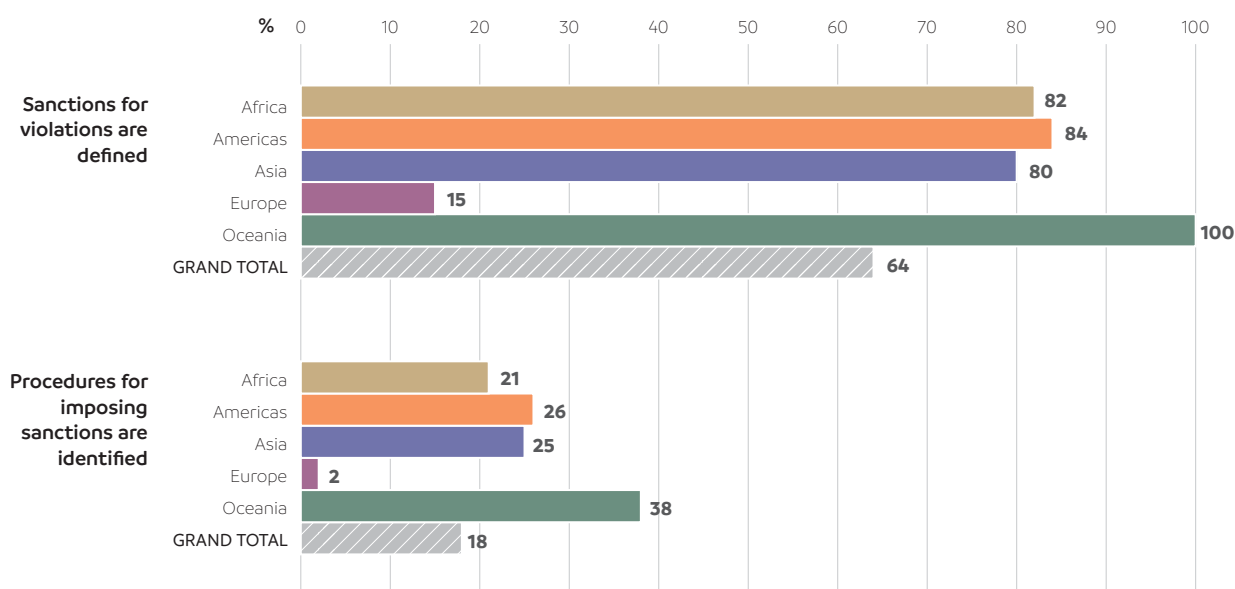


Figure 7. Enforcement provisions delineated in legal measures

Only 27 countries (18%) have included the procedures for imposing sanctions in their laws and regulations.

5.3 How monitoring and enforcement provisions affect breastfeeding

The aim of the Code of Marketing of Breast-milk Substitutes is to protect and promote breastfeeding. Thus, it is important that enactment of related national laws and other measures are effective in actually leading to increased rates of breastfeeding. The five monitoring and enforcement provisions documented above are important steps in ensuring effective protection and promotion of breastfeeding.

Countries that have not included monitoring and enforcement provisions in their laws have similar rates of exclusive breastfeeding in the first 6 months and continued breastfeeding to two years, compared to countries with no legal measures on the Code (Figure 8). On the other hand, as more provisions are spelled out, the average rate of breastfeeding increases. This is evidence that the Code laws do work, but only if they are effectively monitored and enforced.

Governments should establish robust and sustainable monitoring and enforcement mechanisms to implement national laws and regulations. Such mechanisms must involve all relevant government agencies, be adequately funded, and allow for public engagement and scrutiny, including through the periodic release of implementation reports.

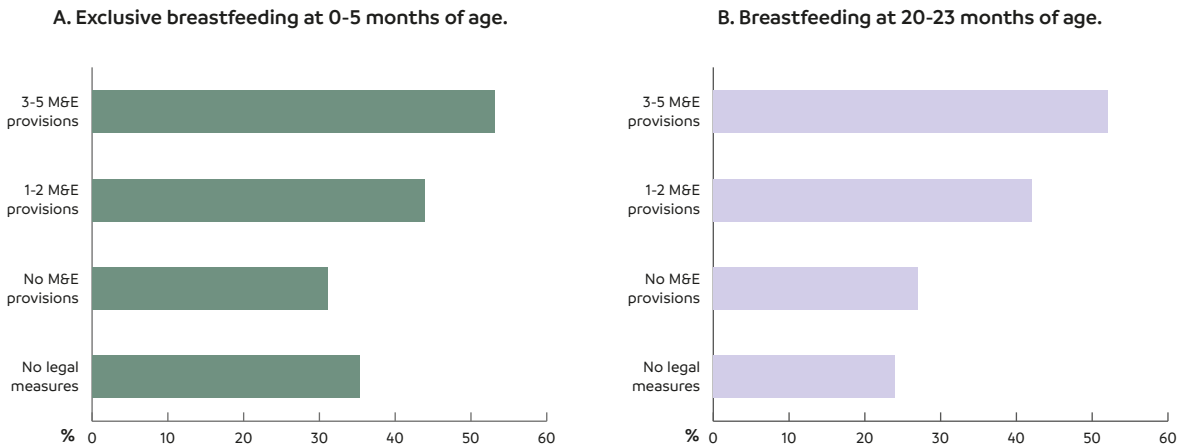


Figure 8. Percent of children breastfed by status of monitoring and enforcement provisions



6.

Conclusions and recommendations

6. Conclusions and recommendations

Building upon the considerable evidence base produced in the last several years regarding the nature, reach, and impact of the inappropriate marketing of breast-milk substitutes, WHO, UNICEF and civil society partners have taken significant steps to support countries in restricting this marketing. New tools to educate decision-makers on key aspects of the Code and to clarify various provisions have been made available. Regional workshops have provided technical legal assistance to countries. Implementation tools, such as model laws and guidance on regulating the digital marketing of breast-milk substitutes have been published to guide specific action on legislation. The 2023 Global Congress on Implementation of the Code supported countries to learn more about the nature of BMS marketing, receive technical assistance, connect with other countries, and develop workplans for strengthening legislation, monitoring and enforcement.

A growing number of countries have enacted legal measures to protect breastfeeding by restricting the marketing of breast-milk substitutes, bottles and teats. The total number of countries with legislation substantially aligned with the Code has grown to 33, protecting 44% of the world's newborns from unethical marketing. The number of countries with legal measures on at least some provisions of the Code now stands at 146, representing 75% of WHO Member States. Alignment with the Code is highest in the WHO African, Eastern Mediterranean, and South-East Asia regions.

This report documents remaining gaps on a number of provisions recommended by the Code. Only 38 countries have measures clearly covering the full breadth of breast-milk substitutes up to 36 months of age, although an additional 13 countries cover follow-up formula without specifying an age range. While prohibitions of advertising and promotional devices at points of sale are more commonly covered, only a small number of countries have regulations against the distribution of informational or educational materials from manufacturers or distributors and many countries allow the use of nutrition and health claims on labels. Protections against conflicts of interest in the health system are weak in most countries.

This report has highlighted significant gaps in the monitoring and enforcement of national legislation. Only 24% of countries with Code legislation delineate the procedures for monitoring compliance and 18% specify how sanctions should be determined and levied when the law is violated. A small number of countries clarify that monitoring and enforcement should be independent, transparent and free from commercial influence. For national Code legislation or regulations to effectively protect infants and mothers, the legal measures must ensure that appropriate agencies have the power, resources and coordination mechanisms to implement, monitor and enforce them. Analysis presented here showed that rates of breastfeeding increase when legislation more clearly spells out how it is to be monitored and enforced.

The report also provides evidence of how manufacturers and distributors of baby feeding products have interfered in the development of effective legislation, monitoring and enforcement of legal measures on the Code. The tactics used mirror those used by tobacco industry: (1) maneuvering to hijack the political and legislative process; (2) exaggerating economic importance of the industry; (3) manipulating public opinion to gain appearance of respectability; (4) fabricating support through front groups; (5) discrediting proven science; and (6) intimidating governments with litigation.¹⁸ With law-making processes increasingly subject to intense lobbying and legal challenges from corporate interests, governments need to protect their right and duty to regulate in the public interest. Protecting legal processes from undue influence from industry is critically important.

Breastfeeding is one of the most important interventions that exists to protect the health of infants, children and mothers. The Code is unquestionably a necessary component of protecting breastfeeding. It has been identified as a core obligation under the Convention on the Rights of the Child and other relevant UN human rights instruments. Strengthening the implementation of the Code must become a public health priority for all countries.

¹⁸ Granheim SI, Engelhardt K, Rundall P, Bialous S, Iellamo A, Margetts B. Interference in public health policy: examples of how the baby food industry uses tobacco industry tactics, *World Nutrition* 8(2), 2017. (<https://doi.org/10.26596/wn.201782288-310>, accessed 30 April 2024).

Recommendations

1. Countries should recognize their obligations under international human rights law and international agreements to enact binding legal measures to implement the Code and eliminate inappropriate marketing practices.
2. National governments and civil society partners should use the analyses in this report to identify gaps in existing legal measures and take action to ensure that all Code provisions are fully incorporated.
3. Countries should ensure that legal measures, monitoring systems and enforcement processes fully cover the emerging marketing tactics beyond traditional advertising that have been made possible through digital technologies.
4. Countries should ensure that domestically-based companies are held accountable for cross-border activities that violate the Code.
5. Legislative and executive processes to develop and implement legal measures on the marketing of breast-milk substitutes must be independent and free from the influences of manufacturers and distributors of products within the scope of the Code. Mechanisms must be introduced to protect against all conflicts of interest.
6. Laws and regulations on the Code should place specific duties of compliance on different entities in the supply chain, include procedures for monitoring and enforcement, and allocate adequate financial and human resources to ensure effective implementation and enforcement.
7. Health workers, health systems and health professional bodies should carry out their responsibilities under the Code to protect against promotion of breast-milk substitutes and avoid conflicts of interest.



Annexes

Annex 1. Scoring algorithm used to classify national legal measures Code

In this algorithm, developed for use with a WHO/UNICEF/IBFAN checklist, national legal measures are scored in terms of how well they reflect the recommendations put forward in the Code. Each provision of the Code is assigned a points value, and the provisions are grouped into seven categories, with the maximum score of points across all categories adding up to 100. Table A1.1 details the maximum number of points available for each provision covered and the subtotals for each category.

Table A1.1. Scoring algorithm used to classify national legal measures on the Code, points by provision covered

Category	Provision covered:	Points	Sub-totals	
Scope	BMS covered at least up to 6 months of age (where infant formula is covered but no definition of age is provided, half credit is awarded, i.e., two points)	4		
	BMS covered at least up to 12 months of age (in addition to above)	4		
	BMS covered at least up to 36 months of age (in addition to above) (where follow-up formula is covered but no age range is specified, half credit is awarded, i.e., two points)	4		
	Complementary foods covered	4		
	Bottles and teats covered	4		
	Scope: sub-total score			20
Monitoring and enforcement	Definition of sanctions for violations	5		
	Identification of who is responsible for monitoring compliance	3		
	Requirement that monitoring and enforcement should be independent, transparent and free from commercial influence	2		
	Monitoring and enforcement sub-total score			10
Informational/educational materials on IYCF	Informational/educational materials from industry prohibited	4		
	Required information in these materials –one third point for each of the following nine elements: — the benefits and superiority of breastfeeding — maternal nutrition, and preparation for and maintenance of breastfeeding — the negative effect on breastfeeding of introducing partial bottle-feeding — the difficulty of reversing the decision not to breastfeed — proper use of infant formula — for materials on use of infant formula: social and financial implications of its use — for materials on use of infant formula: health hazards of inappropriate feeding — for materials on use of infant formula: health hazards of inappropriate use — for materials on use of infant formula: risk of intrinsic contamination of powdered formula	3		
	Prohibition of reference to proprietary products	1.5		
	Prohibition of pictures or text idealizing BMS	1.5		
	Informational/educational materials on IYCF sub-total score			10

Category	Provision covered:	Points	Sub-totals	
Promotion to general public	Advertising ¹	7		
	Promotional devices at point of sale	6		
	Samples to public	2		
	Gifts to pregnant women and mothers	2		
	Contact with mothers	3		
	Promotion to general public sub-total score			20
Promotion in health care facilities	Overall prohibition on use of health care facilities for promotion. If no overall prohibition, two points are given for each of the following five prohibited specific types of promotion within health facilities: <ul style="list-style-type: none"> — displaying covered products — displaying placards or posters concerning covered products — distribution of any material provided by a manufacturer or distributor — use of health facility to host events, contests or campaigns — use of personnel provided by or paid for by manufacturers and distributors 	10		
	Promotion in health care facilities sub-total score		10	
	Engagement with health workers and systems	Overall prohibition ² of all gifts or incentives to health workers and health systems. If no overall prohibition (total three points), one point is given for each of the following specific types of gifts or incentives that are prohibited: <ul style="list-style-type: none"> — financial or material inducements to promote products within the scope — fellowships, study tours, research grants, attendance at professional conferences (where these are not prohibited but they must be disclosed to the institution, half credit is awarded, i.e., half point) 	3	
		Provision of free or low-cost supplies ³ in any part of the health care system	2	
		Donations of equipment or services (where donations are prohibited only if they refer to a proprietary product, half credit is awarded, i.e., one point)	2	
		Product samples	2	
Product information restricted to scientific and factual matters		2		
Sponsorship of meetings of health professionals or scientific meetings ⁴		4		
Engagement with health workers and systems sub-total score				15

¹ No points are awarded if exceptions are made for certain types of advertising.

² Points are awarded only if manufacturers and distributors are prohibited for providing gifts or incentives. Prohibitions directed only at health workers or health systems receiving gifts or incentives are not considered adequate.

³ No points are awarded if permission may be granted for exceptions. Provisions related to donations to social welfare and other organisations or institutions were not part of this analysis.

⁴ Points are awarded only if the sponsorship of the meeting itself is prohibited. Prohibitions on sponsorship of individual attendance at meetings is not considered to be adequate.

Category	Provision covered:	Points	Sub-totals
Labelling	Prohibition of nutrition and health claims	4	
	Required information on infant formula products— (one-half point for each of the following six elements): <ul style="list-style-type: none"> — the words “Important Notice” — a statement on superiority of breastfeeding — a statement on using only on the advice of a health worker — instructions for appropriate preparation — warning on health hazards of inappropriate preparation — warning that powdered formula may contain pathogens 	3	
	Prohibition of pictures that may idealize the use of infant formula on label of infant formula products	3	
	Required information for follow-up formula, growing up milks, as well as other foods for IYC up to 3 years--one-third point for each of the following three elements: <ul style="list-style-type: none"> — the recommended age for introduction of the product — the importance of continued breastfeeding for 2 years — the importance of no complementary feeding before 6 months 	1	
	Prohibited content for follow-up formula, growing up milks, as well as other foods for IYC up to 3 years —one point for each of the following four elements: <ul style="list-style-type: none"> — any representation suggesting use before 6 months — images or text that discourages breastfeeding or compares to breast milk⁵ — messages that recommend or promote bottle feeding — professional endorsements 	4	
	Labelling sub-total score		15
Maximum total score from all categories:			100

⁵ No points are awarded if only images are prohibited rather than images and text.

Annex 2. Legal status of the Code in all WHO Member States

Table A2.1. Legal status of the Code in WHO Member States, date of most recent legal measure and status category

Country	Region	Date of most recent legal measure	Legal status of the Code (category)
Afghanistan	Eastern Mediterranean	2009	Substantially aligned with the Code
Albania	European	2017	Moderately aligned with the Code
Algeria	Africa	2012	Some provisions of the Code included
Andorra	European	2016	Some provisions of the Code included
Angola	Africa		No legal measures
Antigua and Barbuda	Americas		No legal measures
Argentina	Americas	2018	Some provisions of the Code included
Armenia	European	2014	Substantially aligned with the Code
Australia	Western Pacific	2016	Some provisions of the Code included
Austria	European	2016	Some provisions of the Code included
Azerbaijan	European	2003	Some provisions of the Code included
Bahamas	Americas		No legal measures
Bahrain	Eastern Mediterranean	2018	Substantially aligned with the Code
Bangladesh	South-East Asia	2017	Substantially aligned with the Code
Barbados	Americas		No legal measures
Belarus	European		No legal measures
Belgium	European	2016	Some provisions of the Code included
Belize	Americas		No legal measures
Benin	Africa	1997	Moderately aligned with the Code
Bhutan	South-East Asia		No legal measures
Bolivia (Plurinational State of)	Americas	2006	Moderately aligned with the Code
Bosnia and Herzegovina	European	2000	Some provisions of the Code included
Botswana	Africa	2005	Moderately aligned with the Code
Brazil	Americas	2018	Substantially aligned with the Code
Brunei Darussalam	Western Pacific		No legal measures
Bulgaria	European	2016	Some provisions of the Code included
Burkina Faso	Africa	2023	Substantially aligned with the Code
Burundi	Africa	2013	Substantially aligned with the Code
Cabo Verde	Africa	2007	Substantially aligned with the Code
Cambodia	Western Pacific	2007	Moderately aligned with the Code
Cameroon	Africa	2005	Some provisions of the Code included
Canada	Americas		No legal measures
Central African Republic	Africa		No legal measures

Country	Region	Date of most recent legal measure	Legal status of the Code (category)
Chad	Africa	2019	Moderately aligned with the Code
Chile	Americas	2015	Some provisions of the Code included
China	Western Pacific	2023	Some provisions of the Code included
Colombia	Americas	1992	Moderately aligned with the Code
Comoros	Africa	2014	Moderately aligned with the Code
Congo	Africa		No legal measures
Cook Islands	Western Pacific	2014	Some provisions of the Code included
Costa Rica	Americas	1995	Moderately aligned with the Code
Côte d'Ivoire	Africa	2021	Moderately aligned with the Code
Croatia	European	2016	Some provisions of the Code included
Cuba	Americas		No legal measures
Cyprus	European	2016	Some provisions of the Code included
Czechia	European	2016	Some provisions of the Code included
Democratic People's Republic of Korea	South-East Asia		No legal measures
Democratic Republic of the Congo	Africa	2006	Moderately aligned with the Code
Denmark	European	2016	Some provisions of the Code included
Djibouti	Eastern Mediterranean	2010	Moderately aligned with the Code
Dominica	Americas		No legal measures
Dominican Republic	Americas	1996	Moderately aligned with the Code
Ecuador	Americas	1999	Some provisions of the Code included
Egypt	Eastern Mediterranean	2010	Some provisions of the Code included
El Salvador	Americas	2023	Moderately aligned with the Code
Equatorial Guinea	Africa		No legal measures
Eritrea	Africa		No legal measures
Estonia	European	2016	Some provisions of the Code included
Eswatini	Africa		No legal measures
Ethiopia	Africa	2021	Substantially aligned with the Code
Fiji	Western Pacific	2016	Substantially aligned with the Code
Finland	European	2016	Some provisions of the Code included
France	European	2016	Some provisions of the Code included
Gabon	Africa	2004	Moderately aligned with the Code
Gambia	Africa	2006	Substantially aligned with the Code
Georgia	European	1999	Moderately aligned with the Code

Country	Region	Date of most recent legal measure	Legal status of the Code (category)
Germany	European	2016	Some provisions of the Code included
Ghana	Africa	2000	Substantially aligned with the Code
Greece	European	2016	Some provisions of the Code included
Grenada	Americas		No legal measures
Guatemala	Americas	1987	Moderately aligned with the Code
Guinea	Africa		No legal measures
Guinea-Bissau	Africa	1982	Some provisions of the Code included
Guyana	Americas		No legal measures
Haiti	Americas		No legal measures
Honduras	Americas	2013	Some provisions of the Code included
Hungary	European	2016	Some provisions of the Code included
Iceland	European	2016	Some provisions of the Code included
India	South-East Asia	2003	Substantially aligned with the Code
Indonesia	South-East Asia	2013	Moderately aligned with the Code
Iran (Islamic Republic of)	Eastern Mediterranean	2010	Some provisions of the Code included
Iraq	Eastern Mediterranean	2015	Some provisions of the Code included
Ireland	European	2016	Some provisions of the Code included
Israel	European		No legal measures
Italy	European	2016	Some provisions of the Code included
Jamaica	Americas		No legal measures
Japan	Western Pacific		No legal measures
Jordan	Eastern Mediterranean	2015	Moderately aligned with the Code
Kazakhstan	European	2015	Some provisions of the Code included
Kenya	Africa	2021	Substantially aligned with the Code
Kiribati	Western Pacific	2014	Substantially aligned with the Code
Kuwait	Eastern Mediterranean	2014	Substantially aligned with the Code
Kyrgyzstan	European	2008	Moderately aligned with the Code
Lao People's Democratic Republic	Western Pacific	2019	Moderately aligned with the Code
Latvia	European	2016	Some provisions of the Code included
Lebanon	Eastern Mediterranean	2008	Substantially aligned with the Code
Lesotho	Africa		No legal measures
Liberia	Africa		No legal measures
Libya	Eastern Mediterranean		No legal measures

Country	Region	Date of most recent legal measure	Legal status of the Code (category)
Lithuania	European	2016	Some provisions of the Code included
Luxembourg	European	2016	Some provisions of the Code included
Madagascar	Africa	2011	Moderately aligned with the Code
Malawi	Africa	2004	Moderately aligned with the Code
Malaysia	Western Pacific		No legal measures
Maldives	South-East Asia	2008	Substantially aligned with the Code
Mali	Africa	2006	Moderately aligned with the Code
Malta	European	2016	Some provisions of the Code included
Marshall Islands	Western Pacific		No legal measures
Mauritania	Africa	2020	Substantially aligned with the Code
Mauritius	Africa		No legal measures
Mexico	Americas	2012	Moderately aligned with the Code
Micronesia (Federated States of)	Western Pacific		No legal measures
Monaco	European	2016	Some provisions of the Code included
Mongolia	European	2017	Substantially aligned with the Code
Montenegro	European	2016	Some provisions of the Code included
Morocco	Eastern Mediterranean		No legal measures
Mozambique	Africa	2005	Substantially aligned with the Code
Myanmar	South-East Asia	2014	Moderately aligned with the Code
Namibia	Africa		No legal measures
Nauru	Western Pacific		No legal measures
Nepal	South-East Asia	1994	Moderately aligned with the Code
Netherlands (Kingdom of the)	European	2016	Some provisions of the Code included
New Zealand	Western Pacific	2015	Some provisions of the Code included
Nicaragua	Americas	1999	Some provisions of the Code included
Niger	Africa	1998	Some provisions of the Code included
Nigeria	Africa	2019	Substantially aligned with the Code
Niue	Western Pacific		No legal measures
North Macedonia	European	2004	Some provisions of the Code included
Norway	European	2016	Some provisions of the Code included
Oman	Eastern Mediterranean	2021	Moderately aligned with the Code
Pakistan	Eastern Mediterranean	2018	Moderately aligned with the Code
Palau	Western Pacific	2006	Substantially aligned with the Code

Country	Region	Date of most recent legal measure	Legal status of the Code (category)
Panama	Americas	2012	Substantially aligned with the Code
Papua New Guinea	Western Pacific	1984	Some provisions of the Code included
Paraguay	Americas	2023	Some provisions of the Code included
Peru	Americas	2006	Moderately aligned with the Code
Philippines	Western Pacific	2012	Substantially aligned with the Code
Poland	European	2016	Some provisions of the Code included
Portugal	European	2016	Some provisions of the Code included
Qatar	Eastern Mediterranean		No legal measures
Republic of Korea	Western Pacific	2016	Some provisions of the Code included
Republic of Moldova	European	2018	Some provisions of the Code included
Romania	European	2016	Some provisions of the Code included
Russian Federation	European	2015	Some provisions of the Code included
Rwanda	Africa	2006	Some provisions of the Code included
Saint Kitts and Nevis	Americas		No legal measures
Saint Lucia	Americas		No legal measures
Saint Vincent and the Grenadines	Americas		No legal measures
Samoa	Western Pacific		No legal measures
San Marino	European	2016	Some provisions of the Code included
Sao Tome and Principe	Africa	2020	Moderately aligned with the Code
Saudi Arabia	Eastern Mediterranean	2019	Substantially aligned with the Code
Senegal	Africa	1994	Some provisions of the Code included
Serbia	European	2016	Some provisions of the Code included
Seychelles	Africa	1992	Some provisions of the Code included
Sierra Leone	Africa	2021	Substantially aligned with the Code
Singapore	Western Pacific	2019	Some provisions of the Code included
Slovakia	European	2016	Some provisions of the Code included
Slovenia	European	2016	Some provisions of the Code included
Solomon Islands	Western Pacific	2010	Moderately aligned with the Code
Somalia	Eastern Mediterranean		No legal measures
South Africa	Africa	2012	Substantially aligned with the Code
South Sudan	Africa		No legal measures
Spain	European	2016	Some provisions of the Code included
Sri Lanka	South-East Asia	2004	Moderately aligned with the Code
Sudan	Eastern Mediterranean	2000	Some provisions of the Code included

Country	Region	Date of most recent legal measure	Legal status of the Code (category)
Suriname	Americas		No legal measures
Sweden	European	2016	Some provisions of the Code included
Switzerland	European	2020	Some provisions of the Code included
Syrian Arab Republic	Eastern Mediterranean	2000	Moderately aligned with the Code
Tajikistan	European	2006	Moderately aligned with the Code
Thailand	South-East Asia	2017	Moderately aligned with the Code
Timor-Leste	South-East Asia	2023	Some provisions of the Code included
Togo	Africa		No legal measures
Tonga	Western Pacific		No legal measures
Trinidad and Tobago	Americas	1985	Some provisions of the Code included
Tunisia	Eastern Mediterranean	1983	Moderately aligned with the Code
Türkiye	European	2019	Some provisions of the Code included
Turkmenistan	European	2009	Some provisions of the Code included
Tuvalu	Western Pacific		No legal measures
Uganda	Africa	1997	Substantially aligned with the Code
Ukraine	European	2022	Some provisions of the Code included
United Arab Emirates	Eastern Mediterranean	2018	Substantially aligned with the Code
United Kingdom	European	2016	Some provisions of the Code included
United Republic of Tanzania	Africa	2012	Substantially aligned with the Code
United States of America	Americas		No legal measures
Uruguay	Americas	2017	Some provisions of the Code included
Uzbekistan	European	2019	Some provisions of the Code included
Vanuatu	Western Pacific		No legal measures
Venezuela (Bolivarian Republic of)	Americas	2007	Moderately aligned with the Code
Viet Nam	Western Pacific	2021	Substantially aligned with the Code
Yemen	Eastern Mediterranean	2002	Moderately aligned with the Code
Zambia	Africa	2006	Moderately aligned with the Code
Zimbabwe	Africa	1998	Substantially aligned with the Code

Annex 3. Total and category sub-total scores of countries that have legal measures in place

Table A3.1. Total and category sub-total scores of countries that have legal measures in place

Country	Sub-total scores							Total Score*
	Scope	Monitoring and enforcement	Informational/ educational materials	Promotion to general public	Promotion in health care facilities	Engagement with health workers and systems	Labelling	
Maximum points available:	20	10	10	20	10	15	15	100
Afghanistan	18	10	10	17	10	14	14	92
Albania	20	8	9	17	10	8	3	74
Algeria	2	0	0	0	0	0	4	6
Andorra	8	0	3	10	0	0	11	32
Argentina	12	8	0	0	0	0	13	33
Armenia	20	8	9	17	10	14	12	90
Australia	8	8	0	0	0	0	11	27
Austria	8	0	3	10	0	0	11	32
Azerbaijan	16	0	0	0	10	8	2	35
Bahrain	20	8	7	20	10	8	7	80
Bangladesh	20	8	6	20	10	4	11	79
Belgium	8	0	3	10	0	0	11	32
Benin	18	5	2	17	10	9	5	65
Bolivia (Plurinational State of)	16	8	4	17	10	5	8	68
Bosnia and Herzegovina	6	5	0	15	10	0	6	42
Botswana	20	10	4	20	10	8	1	73
Brazil	20	8	8	17	10	6	14	83
Bulgaria	8	0	3	10	0	0	11	32
Burkina Faso	20	8	10	20	10	13	15	96
Burundi	16	5	5	17	10	9	13	75
Cabo Verde	16	10	8	15	10	12	7	78
Cambodia	16	8	5	0	10	5	7	51
Cameroon	16	0	3	9	2	6	5	41
Chad	20	5	2	20	10	8	7	72
Chile	12	5	0	7	0	0	5	29
China	8	8	0	7	2	3	9	27
Colombia	12	0	1	17	10	9	6	55
Comoros	8	8	5	20	10	4	6	60

Country	Sub-total scores							Total Score*
	Scope	Monitoring and enforcement	Informational/educational materials	Promotion to general public	Promotion in health care facilities	Engagement with health workers and systems	Labelling	
Cook Islands	2	8	0	7	10	0	10	37
Costa Rica	16	8	3	5	10	4	10	56
Côte d'Ivoire	16	8	6	20	10	5	8	73
Croatia	8	0	3	10	0	0	11	32
Cyprus	8	0	3	10	0	0	11	32
Czechia	8	0	3	10	0	0	11	32
Democratic Republic of the Congo	12	8	4	20	10	4	3	60
Denmark	8	0	3	10	0	0	11	32
Djibouti	14	5	0	20	10	7	0	56
Dominican Republic	16	10	3	20	10	3	8	70
Ecuador	8	8	5	0	10	2	6	40
Egypt	16	0	8	10	0	0	2	36
El Salvador	16	8	4	20	10	4	12	73
Estonia	8	0	3	10	0	0	11	32
Ethiopia	16	8	6	20	10	10	15	85
Fiji	20	10	9	17	10	14	5	85
Finland	8	0	3	10	0	0	11	32
France	8	0	3	10	0	0	11	32
Gabon	16	8	4	15	10	7	6	66
Gambia	20	8	8	17	10	9	5	77
Georgia	20	3	3	18	10	4	7	65
Germany	8	0	3	10	0	0	11	32
Ghana	16	8	10	20	10	6	6	75
Greece	8	0	3	10	0	0	11	32
Guatemala	8	8	4	14	10	6	4	53
Guinea-Bissau	2	0	0	17	10	2	0	31
Honduras	16	8	4	0	0	2	7	38
Hungary	8	0	3	10	0	0	11	32
Iceland	8	0	3	10	0	0	11	32
India	16	8	4	20	10	13	8	78

Annex 3. Total and category sub-total scores of countries that have legal measures in place

Country	Sub-total scores							Total Score*
	Scope	Monitoring and enforcement	Informational/ educational materials	Promotion to general public	Promotion in health care facilities	Engagement with health workers and systems	Labelling	
Indonesia	18	8	3	14	10	5	6	63
Iran (Islamic Republic of)	14	8	4	9	0	4	0	39
Iraq	18	0	4	0	10	2	7	40
Ireland	8	0	3	10	0	0	11	32
Italy	8	0	3	10	0	0	11	32
Jordan	14	3	2	20	10	5	1	55
Kazakhstan	2	3	0	7	2	0	0	14
Kenya	16	10	10	20	10	9	7	82
Kiribati	18	8	4	17	10	14	10	81
Kuwait	20	10	6	20	10	14	7	86
Kyrgyzstan	16	8	5	20	10	6	9	73
Lao People's Democratic Republic	20	8	5	17	6	6	11	72
Latvia	8	0	3	10	0	0	11	32
Lebanon	20	8	9	20	10	14	9	90
Lithuania	8	0	3	10	0	0	11	32
Luxembourg	8	0	3	10	0	0	11	32
Madagascar	16	8	6	17	10	9	7	73
Malawi	12	10	6	20	10	9	5	71
Maldives	20	10	6	20	10	14	14	93
Mali	10	5	6	20	10	4	1	56
Malta	8	0	3	10	0	0	11	32
Mauritania	20	0	8	20	10	4	13	76
Mexico	12	3	0	20	10	5	11	60
Monaco	8	0	3	10	0	0	11	32
Mongolia	20	8	7	15	10	11	7	78
Montenegro	14	8	0	17	0	2	6	47
Mozambique	20	10	10	20	10	8	3	81
Myanmar	16	8	5	20	10	3	12	74
Nepal	16	8	6	17	10	7	7	71
Netherlands (Kingdom of the)	8	0	3	10	0	0	11	32

Country	Sub-total scores							Total Score*
	Scope	Monitoring and enforcement	Informational/educational materials	Promotion to general public	Promotion in health care facilities	Engagement with health workers and systems	Labelling	
New Zealand	8	8	0	0	0	0	11	27
Nicaragua	16	8	3	2	10	2	9	50
Niger	8	8	0	9	4	4	4	37
Nigeria	20	8	6	20	10	9	11	84
North Macedonia	12	8	0	2	0	2	0	24
Norway	8	0	3	10	0	0	11	32
Oman	20	0	0	20	10	3	12	65
Pakistan	16	5	6	20	10	10	6	73
Palau	20	10	6	17	10	14	13	90
Panama	16	8	5	20	10	12	9	80
Papua New Guinea	4	5	0	7	2	0	0	18
Paraguay	16	8	5	0	0	0	2	31
Peru	16	8	4	17	10	6	11	72
Philippines	20	10	9	10	10	14	12	85
Poland	8	0	3	10	0	0	11	32
Portugal	8	0	3	10	0	0	11	32
Republic of Korea	2	8	0	9	0	4	3	26
Republic of Moldova	8	0	3	10	0	0	10	31
Romania	8	0	3	10	0	0	11	32
Russian Federation	12	0	0	0	0	0	6	18
Rwanda	8	3	2	20	10	2	5	50
San Marino	8	0	3	10	0	0	11	32
Sao Tome and Principe	20	8	4	15	10	7	3	67
Saudi Arabia	20	8	4	20	10	8	7	77
Senegal	12	8	0	0	10	2	0	32
Serbia	16	0	6	17	0	2	7	48
Seychelles	4	3	0	17	10	0	6	40
Sierra Leone	20	10	10	20	10	15	14	99
Singapore	8	8	0	0	0	0	11	27
Slovakia	8	0	3	10	0	0	11	32

Annex 3. Total and category sub-total scores of countries that have legal measures in place

Country	Sub-total scores							Total Score*
	Scope	Monitoring and enforcement	Informational/ educational materials	Promotion to general public	Promotion in health care facilities	Engagement with health workers and systems	Labelling	
Slovenia	8	0	3	10	0	0	11	32
Solomon Islands	4	10	3	17	10	2	6	52
South Africa	20	8	4	20	10	13	12	87
Spain	8	0	3	10	0	0	11	32
Sri Lanka	16	8	2	20	10	8	5	69
Sudan	4	5	0	15	10	2	1	37
Sweden	8	0	3	10	0	0	11	32
Switzerland	16	0	6	7	0	0	11	40
Syrian Arab Republic	8	8	4	20	10	8	6	63
Tajikistan	20	8	8	8	10	13	3	70
Thailand	16	10	1	20	2	10	6	65
Timor-Leste	12	8	6	10	0	2	6	43
Trinidad and Tobago	10	8	0	0	0	0	7	25
Tunisia	16	8	0	20	10	4	6	64
Türkiye	12	5	3	10	0	2	7	39
Turkmenistan	20	5	0	13	2	2	7	49
Uganda	16	10	6	20	10	15	6	83
Ukraine	6	8	0	8	0	2	10	34
United Arab Emirates	16	8	4	17	10	14	10	79
United Kingdom	8	8	3	10	0	0	11	40
United Republic of Tanzania	20	5	6	20	10	10	8	78
Uruguay	12	3	0	17	10	0	5	47
Uzbekistan	16	3	0	11	2	6	5	43
Venezuela (Bolivarian Republic of)	16	5	5	17	10	8	14	74
Viet Nam	16	10	5	20	10	10	8	79
Yemen	16	5	1	17	10	1	7	57
Zambia	18	8	4	20	10	4	9	72
Zimbabwe	20	8	6	20	10	10	7	81

*Total score may differ slightly from the sum of sub-scores due to rounding error.

Annex 4. Provisions on scope and on monitoring and enforcement

Table A4.1. Provisions on scope and monitoring and enforcement, in countries that have legal measures in place

Country	Scope			Monitoring & Enforcement		
	BMS products covered up to age (months)	Complementary foods	Bottles & teats	Identifies who is responsible for monitoring compliance	Defines sanctions for violations	Requires that monitoring and enforcement should be independent, transparent and free from commercial influence
Afghanistan	unspecified	✓	✓	✓	✓	✓
Albania	36	✓	✓	✓	✓	✗
Algeria	unspecified	✗	✗	✗	✗	✗
Andorra	12	✗	✗	✗	✗	✗
Argentina	24	✓	✗	✓	✓	✗
Armenia	36	✓	✓	✓	✓	✗
Australia	12	✗	✗	✓	✓	✗
Austria	12	✗	✗	✗	✗	✗
Azerbaijan	36	✓	✗	✗	✗	✗
Bahrain	36	✓	✓	✓	✓	✗
Bangladesh	60	✓	✓	✓	✓	✗
Belgium	12	✗	✗	✗	✗	✗
Benin	unspecified	✓	✓	✗	✓	✗
Bolivia (Plurinational State of)	24	✓	✓	✓	✓	✗
Bosnia and Herzegovina	unspecified	✗	✓	✗	✓	✗
Botswana	36	✓	✓	✓	✓	✓
Brazil	36	✓	✓	✓	✓	✗
Bulgaria	12	✗	✗	✗	✗	✗
Burkina Faso	36	✓	✓	✓	✓	✗
Burundi	30	✓	✓	✗	✓	✗
Cabo Verde	24	✓	✓	✓	✓	✓
Cambodia	24	✓	✓	✓	✓	✗
Cameroon	30	✓	✓	✗	✗	✗
Chad	36	✓	✓	✗	✓	✗
Chile	12	✓	✗	✗	✓	✗
China	12	✗	✗	✓	✓	✗
Colombia	24	✓	✗	✗	✗	✗
Comoros	4	✓	✓	✓	✓	✗
Cook Islands	unspecified	✗	✗	✓	✓	✗
Costa Rica	12	✓	✓	✓	✓	✗

Annex 4. Provisions on scope and on monitoring and enforcement

Country	Scope			Monitoring & Enforcement		
	BMS products covered up to age (months)	Complementary foods	Bottles & teats	Identifies who is responsible for monitoring compliance	Defines sanctions for violations	Requires that monitoring and enforcement should be independent, transparent and free from commercial influence
Côte d'Ivoire	24	✓	✓	✓	✓	✗
Croatia	12	✗	✗	✗	✗	✗
Cyprus	12	✗	✗	✗	✗	✗
Czechia	12	✗	✗	✗	✗	✗
Democratic Republic of the Congo	6	✓	✓	✓	✓	✗
Denmark	12	✗	✗	✗	✗	✗
Djibouti	unspecified	✗	✓	✗	✓	✗
Dominican Republic	24	✓	✓	✓	✓	✓
Ecuador	12	✗	✗	✓	✓	✗
Egypt	24	✓	✓	✗	✗	✗
El Salvador	36	✓	✗	✓	✓	✗
Estonia	12	✗	✗	✗	✗	✗
Ethiopia	36	✓	✗	✓	✓	✗
Fiji	60	✓	✓	✓	✓	✓
Finland	12	✗	✗	✗	✗	✗
France	12	✗	✗	✗	✗	✗
Gabon	12	✓	✓	✓	✓	✗
Gambia	36	✓	✓	✓	✓	✗
Georgia	36	✓	✓	✓	✗	✗
Germany	12	✗	✗	✗	✗	✗
Ghana	12	✓	✓	✓	✓	✗
Greece	12	✗	✗	✗	✗	✗
Guatemala	6	✗	✓	✓	✓	✗
Guinea-Bissau	unspecified	✗	✗	✗	✗	✗
Honduras	24	✓	✓	✓	✓	✗
Hungary	12	✗	✗	✗	✗	✗
Iceland	12	✗	✗	✗	✗	✗
India	24	✓	✓	✓	✓	✗
Indonesia	unspecified	✓	✓	✓	✓	✗
Iran (Islamic Republic of)	unspecified	✓	✗	✓	✓	✗
Iraq	unspecified	✓	✓	✗	✗	✗

Country	Scope			Monitoring & Enforcement		
	BMS products covered up to age (months)	Complementary foods	Bottles & teats	Identifies who is responsible for monitoring compliance	Defines sanctions for violations	Requires that monitoring and enforcement should be independent, transparent and free from commercial influence
Ireland	12	x	x	x	x	x
Italy	12	x	x	x	x	x
Jordan	unspecified	✓	x	✓	x	x
Kazakhstan	unspecified	x	x	✓	x	x
Kenya	24	✓	✓	✓	✓	✓
Kiribati	unspecified	✓	✓	✓	✓	x
Kuwait	36	✓	✓	✓	✓	✓
Kyrgyzstan	24	✓	✓	✓	✓	x
Lao People's Democratic Republic	36	✓	✓	✓	✓	x
Latvia	12	x	x	x	x	x
Lebanon	36	✓	✓	✓	✓	x
Lithuania	12	x	x	x	x	x
Luxembourg	12	x	x	x	x	x
Madagascar	24	✓	✓	✓	✓	x
Malawi	6	✓	✓	✓	✓	✓
Maldives	36	✓	✓	✓	✓	✓
Mali	unspecified	x	x	x	✓	x
Malta	12	x	x	x	x	x
Mauritania	36	✓	✓	x	x	x
Mexico	36	x	x	✓	x	x
Monaco	12	x	x	x	x	x
Mongolia	36	✓	✓	✓	✓	x
Montenegro	unspecified	✓	x	✓	✓	x
Mozambique	36	✓	✓	✓	✓	✓
Myanmar	24	✓	✓	✓	✓	x
Nepal	12	✓	✓	✓	✓	x
Netherlands (Kingdom of the)	12	x	x	x	x	x
New Zealand	12	x	x	✓	✓	x
Nicaragua	24	✓	✓	✓	✓	x
Niger	6	x	✓	✓	✓	x

Country	Scope			Monitoring & Enforcement		
	BMS products covered up to age (months)	Complementary foods	Bottles & teats	Identifies who is responsible for monitoring compliance	Defines sanctions for violations	Requires that monitoring and enforcement should be independent, transparent and free from commercial influence
Nigeria	36	✓	✓	✓	✓	✗
North Macedonia	6	✓	✓	✓	✓	✗
Norway	12	✗	✗	✗	✗	✗
Oman	36	✓	✓	✗	✗	✗
Pakistan	12	✓	✓	✗	✓	✗
Palau	36	✓	✓	✓	✓	✓
Panama	12	✓	✓	✓	✓	✗
Papua New Guinea	not covered	✗	✓	✗	✓	✗
Paraguay	20	✓	✓	✓	✓	✗
Peru	24	✓	✓	✓	✓	✗
Philippines	36	✓	✓	✓	✓	✓
Poland	12	✗	✗	✗	✗	✗
Portugal	12	✗	✗	✗	✗	✗
Republic of Korea	unspecified	✗	✗	✓	✓	✗
Republic of Moldova	12	✗	✗	✗	✗	✗
Romania	12	✗	✗	✗	✗	✗
Russian Federation	12	✓	✗	✗	✗	✗
Rwanda	6	✗	✓	✓	✗	✗
San Marino	12	✗	✗	✗	✗	✗
Sao Tome and Principe	36	✓	✓	✓		
Saudi Arabia	36	✓	✓	✓	✓	✗
Senegal	12	✓	✗	✓	✓	✗
Serbia	12	✓	✓	✗	✗	✗
Seychelles	6	✗	✗	✓	✗	✗
Sierra Leone	36	✓	✓	✓	✓	✓
Singapore	12	✗	✗	✓	✓	✗
Slovakia	12	✗	✗	✗	✗	✗
Slovenia	12	✗	✗	✗	✗	✗
Solomon Islands	6	✗	✗	✓	✓	✓
South Africa	36	✓	✓	✓	✓	✗
Spain	12	✗	✗	✗	✗	✗

Country	Scope			Monitoring & Enforcement		
	BMS products covered up to age (months)	Complementary foods	Bottles & teats	Identifies who is responsible for monitoring compliance	Defines sanctions for violations	Requires that monitoring and enforcement should be independent, transparent and free from commercial influence
Sri Lanka	12	✓	✓	✓	✓	✗
Sudan	4	✓	✗	✗	✓	✗
Sweden	12	✗	✗	✗	✗	✗
Switzerland	36	✓	✗	✗	✗	✗
Syrian Arab Republic	6	✗	✓	✓	✓	✗
Tajikistan	36	✓	✓	✓	✓	✗
Thailand	36	✓	✗	✓	✓	✓
Timor-Leste	12	✗	✓	✓	✓	✗
Trinidad and Tobago	unspecified	✗	✗	✓	✓	✗
Tunisia	12	✓	✓	✓	✓	✗
Türkiye	36	✗	✗	✗	✓	✗
Turkmenistan	36	✓	✓	✗	✓	✗
Uganda	12	✓	✓	✓	✓	✓
Ukraine	unspecified	✗	✗	✓	✓	✗
United Arab Emirates	24	✓	✓	✓	✓	✗
United Kingdom	12	✗	✗	✓	✓	✗
United Republic of Tanzania	60	✓	✓	✗	✓	✗
Uruguay	12	✓	✗	✓	✗	✗
Uzbekistan	36	✓	✗	✓	✗	✗
Venezuela (Bolivarian Republic of)	24	✓	✓	✗	✓	✗
Viet Nam	24	✓	✓	✓	✓	✓
Yemen	24	✓	✓	✗	✓	✗
Zambia	unspecified	✓	✓	✓	✓	✗
Zimbabwe	60	✓	✓	✓	✓	✗

✗ = the provision is not included in national legal measures

Annex 5. Provisions on informational and educational materials

Table A5.1. Provisions on informational and educational materials, in countries that have legal measures in place

Country	Informational/educational materials from industry prohibited	Required content for all information/education/communication materials					Required content for materials dealing with infant formula				Prohibited content	
		The benefits and superiority of breastfeeding	Maternal nutrition and preparation for and maintenance of breastfeeding	The negative effect on breastfeeding of introducing partial bottle-feeding	The difficulty of reversing the decision not to breastfeed	Proper use of infant formula	Social and financial implications of its use	Health hazards of inappropriate feeding	Health hazards of inappropriate use	Risk of intrinsic contamination of powdered formula	Reference to proprietary products	Pictures or text idealizing BMS
Afghanistan	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✓
Albania	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓
Algeria	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Andorra	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗
Argentina	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Armenia	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✓	✓
Australia	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Austria	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗
Azerbaijan	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Bahrain	✓	✓	✓	✓	✗	✗	✗	✓	✓	✗	✗	✓
Bangladesh	✓	✓	✓	✓	✓	✗	✓	✓	✓	✗	✗	✗
Belgium	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗
Benin	✗	✓	✓	✓	✓	✗	✓	✗	✓	✗	✗	✗
Bolivia (Plurinational State of)	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Bosnia and Herzegovina	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Botswana	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✗
Brazil	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✓
Bulgaria	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗
Burkina Faso	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Burundi	✗	✓	✓	✓	✓	✗	✓	✓	✓	✗	✓	✓
Cabo Verde	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✓
Cambodia	✗	✓	✓	✓	✗	✓	✓	✓	✓	✗	✓	✓
Cameroon	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✓	✓
Chad	✗	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗
Chile	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
China	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗

Country	Informational/educational materials from industry prohibited	Required content for all information/education/communication materials					Required content for materials dealing with infant formula				Prohibited content	
		The benefits and superiority of breastfeeding	Maternal nutrition and preparation for and maintenance of breastfeeding	The negative effect on breastfeeding of introducing partial bottle-feeding	The difficulty of reversing the decision not to breastfeed	Proper use of infant formula	Social and financial implications of its use	Health hazards of inappropriate feeding	Health hazards of inappropriate use	Risk of intrinsic contamination of powdered formula	Reference to proprietary products	Pictures or text idealizing BMS
Colombia	x	✓	x	✓	x	x	x	✓	x	x	x	x
Comoros	x	✓	✓	✓	x	✓	✓	✓	✓	x	✓	✓
Cook Islands	x	x	x	x	x	x	x	x	x	x	x	x
Costa Rica	x	✓	✓	x	x	✓	x	✓	✓	x	x	✓
Côte d'Ivoire	✓	✓	✓	✓	x	✓	✓	✓	✓	x	x	x
Croatia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Cyprus	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Czechia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Democratic Republic of the Congo	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x
Denmark	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Djibouti	x	x	x	x	x	x	x	x	x	x	x	x
Dominican Republic	x	✓	✓	✓	x	x	x	x	x	x	✓	x
Ecuador	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓
Egypt	✓	✓	✓	x	✓	✓	x	✓	✓	x	x	✓
El Salvador	x	✓	✓	✓	✓	x	x	✓	✓	x	✓	x
Estonia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Ethiopia	✓	✓	x	x	x	x	x	x	x	x	x	✓
Fiji	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓
Finland	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
France	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Gabon	x	✓	✓	✓	✓	x	x	x	x	x	✓	✓
Gambia	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓
Georgia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Germany	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Ghana	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Greece	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Guatemala	x	✓	✓	✓	✓	✓	x	✓	✓	x	x	✓
Guinea-Bissau	x	x	x	x	x	x	x	x	x	x	x	x

Country	Informational/educational materials from industry prohibited	Required content for all information/education/communication materials					Required content for materials dealing with infant formula				Prohibited content	
		The benefits and superiority of breastfeeding	Maternal nutrition and preparation for and maintenance of breastfeeding	The negative effect on breastfeeding of introducing partial bottle-feeding	The difficulty of reversing the decision not to breastfeed	Proper use of infant formula	Social and financial implications of its use	Health hazards of inappropriate feeding	Health hazards of inappropriate use	Risk of intrinsic contamination of powdered formula	Reference to proprietary products	Pictures or text idealizing BMS
Honduras	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓
Hungary	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Iceland	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
India	x	✓	✓	✓	✓	x	✓	✓	✓	x	✓	x
Indonesia	x	✓	✓	✓	✓	x	x	x	x	x	x	✓
Iran (Islamic Republic of)	x	✓	x	✓	✓	✓	✓	x	✓	x	x	✓
Iraq	x	✓	✓	✓	x	✓	x	✓	✓	x	✓	x
Ireland	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Italy	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Jordan	x	✓	✓	x	x	✓	✓	✓	✓	x	x	x
Kazakhstan	x	x	x	x	x	x	x	x	x	x	x	x
Kenya	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Kiribati	✓	x	x	x	x	x	x	x	x	x	x	x
Kuwait	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Kyrgyzstan	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓
Lao People's Democratic Republic	x	✓	x	✓	✓	✓	x	✓	✓	x	✓	✓
Latvia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Lebanon	✓	✓	✓	✓	✓	✓	x	✓	✓	x	✓	✓
Lithuania	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Luxembourg	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Madagascar	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Malawi	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Maldives	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Mali	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Malta	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Mauritania	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓
Mexico	x	x	x	x	x	x	x	x	x	x	x	x

Country	Informational/educational materials from industry prohibited	Required content for all information/education/communication materials					Required content for materials dealing with infant formula				Prohibited content	
		The benefits and superiority of breastfeeding	Maternal nutrition and preparation for and maintenance of breastfeeding	The negative effect on breastfeeding of introducing partial bottle-feeding	The difficulty of reversing the decision not to breastfeed	Proper use of infant formula	Social and financial implications of its use	Health hazards of inappropriate feeding	Health hazards of inappropriate use	Risk of intrinsic contamination of powdered formula	Reference to proprietary products	Pictures or text idealizing BMS
Monaco	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Mongolia	✓	✓	✓	✓	x	✓	x	x	✓	x	✓	x
Montenegro	x	x	x	x	x	x	x	x	x	x	x	x
Mozambique	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Myanmar	x	✓	✓	✓	x	✓	✓	✓	✓	x	✓	✓
Nepal	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Netherlands (Kingdom of the)	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
New Zealand	x	x	x	x	x	x	x	x	x	x	x	x
Nicaragua	x	✓	x	x	x	x	x	✓	✓	x	x	✓
Niger	x	✓	x	x	x	x	x	x	x	x	x	x
Nigeria	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x
North Macedonia	x	x	x	x	x	x	x	x	x	x	x	x
Norway	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Oman	x	x	x	x	x	x	x	x	x	x	x	x
Pakistan	✓	x	x	x	x	x	x	x	x	x	x	✓
Palau	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Panama	x	✓	✓	✓	x	✓	x	✓	✓	✓	✓	✓
Papua New Guinea	x	x	x	x	x	x	x	x	x	x	x	x
Paraguay	x	✓	✓	✓	✓	✓	x	✓	✓	x	✓	✓
Peru	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓
Philippines	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓
Poland	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Portugal	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Republic of Korea	x	x	x	x	x	x	x	x	x	x	x	x
Republic of Moldova	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Romania	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Russian Federation	x	x	x	x	x	x	x	x	x	x	x	x
Rwanda	x	✓	✓	✓	✓	✓	x	✓	✓	x	x	x

Country	Informational/educational materials from industry prohibited	Required content for all information/education/communication materials					Required content for materials dealing with infant formula				Prohibited content	
		The benefits and superiority of breastfeeding	Maternal nutrition and preparation for and maintenance of breastfeeding	The negative effect on breastfeeding of introducing partial bottle-feeding	The difficulty of reversing the decision not to breastfeed	Proper use of infant formula	Social and financial implications of its use	Health hazards of inappropriate feeding	Health hazards of inappropriate use	Risk of intrinsic contamination of powdered formula	Reference to proprietary products	Pictures or text idealizing BMS
San Marino	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Sao Tome and Principe	✓	x	x	x	x	x	x	x	x	x	x	x
Saudi Arabia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓
Senegal	x	x	x	x	x	x	x	x	x	x	x	x
Serbia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Seychelles	x	x	x	x	x	x	x	x	x	x	x	x
Sierra Leone	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Singapore	x	x	x	x	x	x	x	x	x	x	x	x
Slovakia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Slovenia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Solomon Islands	x	x	x	x	x	x	x	x	x	✓	✓	✓
South Africa	✓	x	x	x	x	x	x	x	x	x	x	x
Spain	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Sri Lanka	x	✓	x	x	x	x	x	x	x	x	x	✓
Sudan	x	x	x	x	x	x	x	x	x	x	x	x
Sweden	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Switzerland	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Syrian Arab Republic	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓
Tajikistan	✓	✓	x	x	x	✓	x	✓	✓	x	✓	✓
Thailand	x	x	x	x	x	✓	✓	✓	✓	x	x	x
Timor-Leste	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Trinidad and Tobago	x	x	x	x	x	x	x	x	x	x	x	x
Tunisia	x	x	x	x	x	x	x	x	x	x	x	x
Türkiye	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Turkmenistan	x	✓	x	x	x	x	x	x	x	x	x	x
Uganda	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Ukraine	x	x	x	x	x	x	x	x	x	x	x	x

Country	Informational/ educational materials from industry prohibited	Required content for all information/education/ communication materials					Required content for materials dealing with infant formula				Prohibited content	
		The benefits and superiority of breastfeeding	Maternal nutrition and preparation for and maintenance of breastfeeding	The negative effect on breastfeeding of introducing partial bottle-feeding	The difficulty of reversing the decision not to breastfeed	Proper use of infant formula	Social and financial implications of its use	Health hazards of inappropriate feeding	Health hazards of inappropriate use	Risk of intrinsic contamination of powdered formula	Reference to proprietary products	Pictures or text idealizing BMS
United Arab Emirates	x	✓	x	✓	✓	x	x	x	x	x	✓	✓
United Kingdom	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
United Republic of Tanzania	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Uruguay	x	x	x	x	x	x	x	x	x	x	x	x
Uzbekistan	x	x	x	x	x	x	x	x	x	x	x	x
Venezuela (Bolivarian Republic of)	x	✓	x	✓	✓	x	x	✓	✓	x	✓	✓
Viet Nam	x	✓	✓	✓	x	✓	✓	✓	✓	x	✓	✓
Yemen	x	✓	✓	✓	✓	x	x	x	x	x	x	x
Zambia	x	✓	✓	✓	✓	x	x	✓	✓	x	✓	x
Zimbabwe	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

x = the provision is not included in national legal measures

Annex 6. Provisions on promotion to the general public

Table A6.1. Provisions on promotion to the general public, in countries that have legal measures in place

Country	Advertising	Samples to public	Promotional devices at point of sale	Gifts to pregnant women and mothers	Contact with mothers
Afghanistan	✓	✓	✓	✓	✗
Albania	✓	✓	✓	✓	✗
Algeria	✗	✗	✗	✗	✗
Andorra	✗	✓	✓	✓	✗
Argentina	✗	✗	✗	✗	✗
Armenia	✓	✓	✓	✓	✗
Australia	✗	✗	✗	✗	✗
Austria	✗	✓	✓	✓	✗
Azerbaijan	✗	✗	✗	✗	✗
Bahrain	✓	✓	✓	✓	✓
Bangladesh	✓	✓	✓	✓	✓
Belgium	✗	✓	✓	✓	✗
Benin	✓	✓	✓	✓	✗
Bolivia (Plurinational State of)	✓	✓	✓	✓	✗
Bosnia and Herzegovina	✓	✓	✓	✗	✗
Botswana	✓	✓	✓	✓	✓
Brazil	✓	✓	✓	✓	✗
Bulgaria	✗	✓	✓	✓	✗
Burkina Faso	✓	✓	✓	✓	✓
Burundi	✓	✓	✓	✓	✗
Cabo Verde	✓	✗	✓	✓	✗
Cambodia	✗	✗	✗	✗	✗
Cameroon	✓	✓	✗	✗	✗
Chad	✓	✓	✓	✓	✓
Chile	✓	✗	✗	✗	✗
China	✓	✗	✗	✗	✗
Colombia	✓	✓	✓	✓	✗
Comoros	✓	✓	✓	✓	✓
Cook Islands	✓	✗	✗	✗	✗
Costa Rica	✗	✓	✗	✗	✓
Côte d'Ivoire	✓	✓	✓	✓	✓
Croatia	✗	✓	✓	✓	✗
Cyprus	✗	✓	✓	✓	✗

Country	Advertising	Samples to public	Promotional devices at point of sale	Gifts to pregnant women and mothers	Contact with mothers
Czechia	✗	✓	✓	✓	✗
Democratic Republic of the Congo	✓	✓	✓	✓	✓
Denmark	✗	✓	✓	✓	✗
Djibouti	✓	✓	✓	✓	✓
Dominican Republic	✓	✓	✓	✓	✓
Ecuador	✗	✗	✗	✗	✗
Egypt	✓	✗	✗	✗	✓
El Salvador	✓	✓	✓	✓	✓
Estonia	✗	✓	✓	✓	✗
Ethiopia	✓	✓	✓	✓	✓
Fiji	✓	✓	✓	✓	✗
Finland	✗	✓	✓	✓	✗
France	✗	✓	✓	✓	✗
Gabon	✓	✓	✓	✗	✗
Gambia	✓	✓	✓	✓	✗
Georgia	✓	✓	✓	✗	✓
Germany	✗	✓	✓	✓	✗
Ghana	✓	✓	✓	✓	✓
Greece	✗	✓	✓	✓	✗
Guatemala	✓	✓	✗	✓	✓
Guinea-Bissau	✓	✓	✓	✓	✗
Honduras	✗	✗	✗	✗	✗
Hungary	✗	✓	✓	✓	✗
Iceland	✗	✓	✓	✓	✗
India	✓	✓	✓	✓	✓
Indonesia	✓	✓	✗	✓	✓
Iran (Islamic Republic of)	✓	✓	✗	✗	✗
Iraq	✗	✗	✗	✗	✗
Ireland	✗	✓	✓	✓	✗
Italy	✗	✓	✓	✓	✗
Jordan	✓	✓	✓	✓	✓
Kazakhstan	✓	✗	✗	✗	✗

Country	Advertising	Samples to public	Promotional devices at point of sale	Gifts to pregnant women and mothers	Contact with mothers
Kenya	✓	✓	✓	✓	✓
Kiribati	✓	✓	✓	✓	✗
Kuwait	✓	✓	✓	✓	✓
Kyrgyzstan	✓	✓	✓	✓	✓
Lao People's Democratic Republic	✓	✓	✓	✓	✗
Latvia	✗	✓	✓	✓	✗
Lebanon	✓	✓	✓	✓	✓
Lithuania	✗	✓	✓	✓	✗
Luxembourg	✗	✓	✓	✓	✗
Madagascar	✓	✓	✓	✓	✗
Malawi	✓	✓	✓	✓	✓
Maldives	✓	✓	✓	✓	✓
Mali	✓	✓	✓	✓	✓
Malta	✗	✓	✓	✓	✗
Mauritania	✓	✓	✓	✓	✓
Mexico	✓	✓	✓	✓	✓
Monaco	✗	✓	✓	✓	✗
Mongolia	✓	✓	✓	✗	✗
Montenegro	✓	✓	✓	✓	✗
Mozambique	✓	✓	✓	✓	✓
Myanmar	✓	✓	✓	✓	✓
Nepal	✓	✓	✓	✓	✗
Netherlands (Kingdom of the)	✗	✓	✓	✓	✗
New Zealand	✗	✗	✗	✗	✗
Nicaragua	✗	✓	✗	✗	✗
Niger	✓	✓	✗	✗	✗
Nigeria	✓	✓	✓	✓	✓
North Macedonia	✗	✓	✗	✗	✗
Norway	✗	✓	✓	✓	✗
Oman	✓	✓	✓	✓	✓
Pakistan	✓	✓	✓	✓	✓
Palau	✓	✓	✓	✓	✗
Panama	✓	✓	✓	✓	✓

Country	Advertising	Samples to public	Promotional devices at point of sale	Gifts to pregnant women and mothers	Contact with mothers
Papua New Guinea	✓	✗	✗	✗	✗
Paraguay	✗	✗	✗	✗	✗
Peru	✓	✓	✓	✓	✗
Philippines	✗	✓	✓	✓	✗
Poland	✗	✓	✓	✓	✗
Portugal	✗	✓	✓	✓	✗
Republic of Korea	✓	✓	✗	✗	✗
Republic of Moldova	✗	✓	✓	✓	✗
Romania	✗	✓	✓	✓	✗
Russian Federation	✗	✗	✗	✗	✗
Rwanda	✓	✓	✓	✓	✓
San Marino	✗	✓	✓	✓	✗
Sao Tome and Principe	✓	✓	✓	✗	✗
Saudi Arabia	✓	✓	✓	✓	✓
Senegal	✗	✗	✗	✗	✗
Serbia	✓	✓	✓	✓	✗
Seychelles	✓	✓	✓	✓	✗
Sierra Leone	✓	✓	✓	✓	✓
Singapore	✗	✗	✗	✗	✗
Slovakia	✗	✓	✓	✓	✗
Slovenia	✗	✓	✓	✓	✗
Solomon Islands	✓	✓	✓	✓	✗
South Africa	✓	✓	✓	✓	✓
Spain	✗	✓	✓	✓	✗
Sri Lanka	✓	✓	✓	✓	✓
Sudan	✓	✓	✓	✗	✗
Sweden	✗	✓	✓	✓	✗
Switzerland	✓	✗	✗	✗	✗
Syrian Arab Republic	✓	✓	✓	✓	✓
Tajikistan	✗	✓	✓	✗	✗
Thailand	✓	✓	✓	✓	✓
Timor-Leste	✗	✓	✓	✓	✗
Trinidad and Tobago	✗	✗	✗	✗	✗

Country	Advertising	Samples to public	Promotional devices at point of sale	Gifts to pregnant women and mothers	Contact with mothers
Tunisia	✓	✓	✓	✓	✓
Türkiye	✗	✓	✓	✓	✗
Turkmenistan	✓	✗	✓	✗	✗
Uganda	✓	✓	✓	✓	✓
Ukraine	✗	✓	✓	✓	✗
United Arab Emirates	✓	✓	✓	✓	✗
United Kingdom	✗	✓	✓	✓	✗
United Republic of Tanzania	✓	✓	✓	✓	✓
Uruguay	✓	✓	✓	✓	✗
Uzbekistan	✓	✓	✗	✓	✗
Venezuela (Bolivarian Republic of)	✓	✓	✓	✓	✗
Viet Nam	✓	✓	✓	✓	✓
Yemen	✓	✓	✓	✓	✗
Zambia	✓	✓	✓	✓	✓
Zimbabwe	✓	✓	✓	✓	✓

✗ = the provision is not included in national legal measures

Annex 7. Provisions on promotion in health care facilities

Table A7.1. Provisions on promotion in health care facilities, in countries that have legal measures in place

Country	Overall prohibition on use of health care facility for promotion	Type of prohibition explicitly covered				
		Display of covered products	Display of placards or posters concerning covered products	Distribution of any material provided by a manufacturer or distributor	Use of health facility to host events, contests or campaigns	Use of personnel provided by or paid for by manufacturers and distributors
Afghanistan	✓	✓	✓	✓	✓	✗
Albania	✓	✓	✓	✓	✗	✗
Algeria	✗	✗	✗	✗	✗	✗
Andorra	✗	✗	✗	✗	✗	✗
Argentina	✗	✗	✗	✗	✗	✗
Armenia	✓	✗	✓	✓	✓	✗
Australia	✗	✗	✗	✗	✗	✗
Austria	✗	✗	✗	✗	✗	✗
Azerbaijan	✓	✗	✓	✓	✗	✓
Bahrain	✓	✓	✓	✓	✗	✓
Bangladesh	✓	✗	✓	✗	✓	✓
Belgium	✗	✗	✗	✗	✗	✗
Benin	✓	✓	✓	✗	✗	✓
Bolivia (Plurinational State of)	✓	✗	✓	✓	✗	✗
Bosnia and Herzegovina	✓	✗	✓	✗	✗	✗
Botswana	✓	✗	✓	✓	✗	✓
Brazil	✓	✗	✓	✗	✗	✓
Bulgaria	✗	✗	✗	✗	✗	✗
Burkina Faso	✓	✓	✓	✓	✗	✓
Burundi	✓	✗	✓	✓	✓	✗
Cabo Verde	✓	✓	✓	✗	✓	✗
Cambodia	✓	✗	✗	✗	✗	✗
Cameroon	✗	✗	✓	✗	✗	✗
Chad	✓	✓	✓	✓	✗	✓
Chile	✗	✗	✗	✗	✗	✗
China	✗	✗	✓	✗	✗	✗
Colombia	✓	✓	✓	✗	✗	✗
Comoros	✓	✓	✓	✓	✗	✗
Cook Islands	✓	✗	✓	✗	✗	✗
Costa Rica	✓	✗	✓	✗	✗	✗

Country	Overall prohibition on use of health care facility for promotion	Type of prohibition explicitly covered				
		Display of covered products	Display of placards or posters concerning covered products	Distribution of any material provided by a manufacturer or distributor	Use of health facility to host events, contests or campaigns	Use of personnel provided by or paid for by manufacturers and distributors
Côte d'Ivoire	✓	✓	✓	✓	✗	✗
Croatia	✗	✗	✗	✗	✗	✗
Cyprus	✗	✗	✗	✗	✗	✗
Czechia	✗	✗	✗	✗	✗	✗
Democratic Republic of the Congo	✓	✓	✓	✓	✗	✓
Denmark	✗	✗	✗	✗	✗	✗
Djibouti	✓	✓	✓	✓	✗	✓
Dominican Republic	✓	✓	✓	✗	✗	✗
Ecuador	✓	✓	✓	✓	✗	✓
Egypt	✗	✗	✗	✗	✗	✗
El Salvador	✓	✗	✓	✗	✓	✗
Estonia	✗	✗	✗	✗	✗	✗
Ethiopia	✓	✓	✓	✓	✓	✗
Fiji	✓	✓	✓	✗	✓	✗
Finland	✗	✗	✗	✗	✗	✗
France	✗	✗	✗	✗	✗	✗
Gabon	✓	✗	✓	✗	✗	✗
Gambia	✓	✗	✓	✗	✗	✗
Georgia	✓	✓	✓	✗	✗	✗
Germany	✗	✗	✗	✗	✗	✗
Ghana	✓	✗	✓	✗	✗	✗
Greece	✗	✗	✗	✗	✗	✗
Guatemala	✓	✗	✓	✗	✗	✓
Guinea-Bissau	✓	✓	✓	✓	✗	✓
Honduras	✗	✗	✗	✗	✗	✗
Hungary	✗	✗	✗	✗	✗	✗
Iceland	✗	✗	✗	✗	✗	✗
India	✓	✗	✓	✓	✗	✓
Indonesia	✓	✗	✗	✗	✗	✓

Country	Overall prohibition on use of health care facility for promotion	Type of prohibition explicitly covered				
		Display of covered products	Display of placards or posters concerning covered products	Distribution of any material provided by a manufacturer or distributor	Use of health facility to host events, contests or campaigns	Use of personnel provided by or paid for by manufacturers and distributors
Iran (Islamic Republic of)	x	x	x	x	x	x
Iraq	✓	x	✓	x	x	x
Ireland	x	x	x	x	x	x
Italy	x	x	x	x	x	x
Jordan	✓	✓	✓	x	x	x
Kazakhstan	x	x	✓	x	x	x
Kenya	✓	✓	✓	✓	✓	✓
Kiribati	✓	x	✓	✓	✓	✓
Kuwait	✓	x	✓	✓	✓	x
Kyrgyzstan	✓	✓	✓	x	x	x
Lao People's Democratic Republic	x	✓	✓	x	✓	x
Latvia	x	x	x	x	x	x
Lebanon	✓	✓	✓	✓	✓	x
Lithuania	x	x	x	x	x	x
Luxembourg	x	x	x	x	x	x
Madagascar	✓	x	✓	✓	✓	x
Malawi	✓	x	✓	✓	x	✓
Maldives	✓	✓	✓	x	x	✓
Mali	✓	✓	✓	x	x	✓
Malta	x	x	x	x	x	x
Mauritania	✓	✓	✓	x	x	✓
Mexico	✓	✓	✓	✓	x	x
Monaco	x	x	x	x	x	x
Mongolia	✓	x	✓	✓	x	x
Montenegro	x	x	x	x	x	x
Mozambique	✓	✓	✓	x	✓	x
Myanmar	✓	x	✓	x	x	x
Nepal	✓	✓	✓	✓	x	x
Netherlands (Kingdom of the)	x	x	x	x	x	x
New Zealand	x	x	x	x	x	x

Country	Overall prohibition on use of health care facility for promotion	Type of prohibition explicitly covered				
		Display of covered products	Display of placards or posters concerning covered products	Distribution of any material provided by a manufacturer or distributor	Use of health facility to host events, contests or campaigns	Use of personnel provided by or paid for by manufacturers and distributors
Nicaragua	✓	✗	✓	✗	✗	✓
Niger	✗	✓	✓	✗	✗	✗
Nigeria	✓	✓	✓	✗	✓	✓
North Macedonia	✗	✗	✗	✗	✗	✗
Norway	✗	✗	✗	✗	✗	✗
Oman	✓	✗	✓	✗	✓	✗
Pakistan	✓	✓	✓	✗	✗	✗
Palau	✓	✗	✓	✗	✗	✗
Panama	✓	✓	✓	✗	✓	✗
Papua New Guinea	✗	✗	✓	✗	✗	✗
Paraguay	✗	✗	✗	✗	✗	✗
Peru	✓	✗	✓	✗	✗	✓
Philippines	✓	✓	✓	✗	✗	✓
Poland	✗	✗	✗	✗	✗	✗
Portugal	✗	✗	✗	✗	✗	✗
Republic of Korea	✗	✗	✗	✗	✗	✗
Republic of Moldova	✗	✗	✗	✗	✗	✗
Romania	✗	✗	✗	✗	✗	✗
Russian Federation	✗	✗	✗	✗	✗	✗
Rwanda	✓	✓	✓	✓	✗	✓
San Marino	✗	✗	✗	✗	✗	✗
Sao Tome and Principe	✓	✗	✓	✗	✗	✗
Saudi Arabia	✓	✓	✓	✗	✓	✓
Senegal	✓	✗	✓	✗	✗	✗
Serbia	✗	✗	✗	✗	✗	✗
Seychelles	✓	✗	✓	✗	✗	✗
Sierra Leone	✓	✗	✓	✓	✓	✗
Singapore	✗	✗	✗	✗	✗	✗
Slovakia	✗	✗	✗	✗	✗	✗
Slovenia	✗	✗	✗	✗	✗	✗

Annex 7. Provisions on promotion in health care facilities

Country	Overall prohibition on use of health care facility for promotion	Type of prohibition explicitly covered				
		Display of covered products	Display of placards or posters concerning covered products	Distribution of any material provided by a manufacturer or distributor	Use of health facility to host events, contests or campaigns	Use of personnel provided by or paid for by manufacturers and distributors
Solomon Islands	✓	✗	✓	✗	✗	✗
South Africa	✓	✓	✓	✗	✗	✗
Spain	✗	✗	✗	✗	✗	✗
Sri Lanka	✓	✓	✓	✓	✗	✓
Sudan	✓	✗	✓	✗	✗	✗
Sweden	✗	✗	✗	✗	✗	✗
Switzerland	✗	✗	✗	✗	✗	✗
Syrian Arab Republic	✓	✓	✓	✓	✗	✓
Tajikistan	✓	✗	✓	✗	✓	✗
Thailand	✗	✗	✓	✗	✗	✗
Timor-Leste	✗	✗	✗	✗	✗	✗
Trinidad and Tobago	✗	✗	✗	✗	✗	✗
Tunisia	✓	✗	✓	✗	✗	✗
Türkiye	✗	✗	✗	✗	✗	✗
Turkmenistan	✗	✗	✗	✓	✗	✗
Uganda	✓	✗	✓	✗	✓	✓
Ukraine	✗	✗	✗	✗	✗	✗
United Arab Emirates	✓	✓	✓	✗	✓	✗
United Kingdom	✗	✗	✗	✗	✗	✗
United Republic of Tanzania	✓	✓	✓	✓	✗	✗
Uruguay	✓	✗	✓	✗	✗	✗
Uzbekistan	✗	✗	✓	✗	✗	✗
Venezuela (Bolivarian Republic of)	✓	✓	✓	✓	✓	✗
Viet Nam	✓	✓	✓	✗	✗	✓
Yemen	✓	✓	✓	✗	✗	✗
Zambia	✓	✓	✓	✓	✓	✓
Zimbabwe	✓	✓	✓	✗	✗	✓

✗ = the provision is not included in national legal measures

Annex 8. Provisions on engagement with health care workers and health systems

Table A8.1. Provisions on engagement with health care workers and health systems, in countries that have legal measures in place

Country	Overall prohibition of all gifts or incentives to health workers and health systems	Type of gift or incentive			Other prohibitions					
		Financial or material inducements to promote products within the scope	Fellowships, study tours, research grants, attendance at professional conferences	Fellowships, etc., not permitted but must be disclosed to the institution	Provision of free or low-cost supplies in any part of the health care system	Donations of equipment or services	Donations prohibited only if they refer to a proprietary product	Product samples	Product information restricted to scientific and factual matters	Sponsorship of meetings of health professionals or scientific meetings
Afghanistan	✓	✓	✓	✗	✓	✗	✓	✓	✓	✓
Albania	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗
Algeria	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Andorra	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Argentina	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Armenia	✓	✗	✓	✗	✓	✗	✓	✓	✓	✓
Australia	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Austria	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Azerbaijan	✗	✓	✗	✓	✓	✗	✗	✓	✓	✗
Bahrain	✗	✓	✗	✗	✓	✗	✓	✓	✓	✗
Bangladesh	✗	✓	✓	✗	✗	✗	✗	✓	✗	✗
Belgium	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Benin	✗	✓	✗	✓	✓	✗	✓	✓	✓	✗
Bolivia (Plurinational State of)	✗	✓	✗	✗	✗	✗	✗	✓	✓	✗
Bosnia and Herzegovina	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Botswana	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗
Brazil	✗	✓	✓	✗	✓	✗	✗	✗	✓	✗
Bulgaria	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Burkina Faso	✓	✓	✓	✗	✓	✗	✗	✓	✓	✓
Burundi	✓	✓	✗	✓	✓	✗	✗	✓	✓	✗
Cabo Verde	✓	✓	✓	✗	✗	✗	✓	✓	✓	✓
Cambodia	✗	✗	✗	✓	✓	✗	✗	✗	✓	✗
Cameroon	✗	✗	✗	✓	✗	✗	✓	✓	✓	✗
Chad	✓	✓	✗	✓	✗	✗	✓	✓	✓	✗
Chile	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗

Country	Overall prohibition of all gifts or incentives to health workers and health systems	Type of gift or incentive			Other prohibitions					
		Financial or material inducements to promote products within the scope	Fellowships, study tours, research grants, attendance at professional conferences	Fellowships, etc., not permitted but must be disclosed to the institution	Provision of free or low-cost supplies in any part of the health care system	Donations of equipment or services	Donations prohibited only if they refer to a proprietary product	Product samples	Product information restricted to scientific and factual matters	Sponsorship of meetings of health professionals or scientific meetings
China	x	✓	x	x	x	x	x	✓	x	x
Colombia	x	✓	x	x	✓	✓	✓	✓	✓	x
Comoros	x	✓	x	✓	x	x	x	✓	x	x
Cook Islands	x	x	x	x	x	x	x	x	x	x
Costa Rica	x	x	x	x	✓	x	x	x	✓	x
Côte d'Ivoire	x	✓	x	x	✓	x	x	✓	x	x
Croatia	x	x	x	x	x	x	x	x	x	x
Cyprus	x	x	x	x	x	x	x	x	x	x
Czechia	x	x	x	x	x	x	x	x	x	x
Democratic Republic of the Congo	x	✓	x	✓	x	x	x	x	✓	x
Denmark	x	x	x	x	x	x	x	x	x	x
Djibouti	x	✓	x	✓	✓	x	✓	x	✓	x
Dominican Republic	x	✓	x	x	x	x	x	✓	x	x
Ecuador	x	x	x	x	x	x	x	x	✓	x
Egypt	x	x	x	x	x	x	x	x	x	x
El Salvador	x	x	x	x	✓	x	x	x	✓	x
Estonia	x	x	x	x	x	x	x	x	x	x
Ethiopia	✓	✓	✓	x	x	x	✓	x	✓	✓
Fiji	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Finland	x	x	x	x	x	x	x	x	x	x
France	x	x	x	x	x	x	x	x	x	x
Gabon	x	x	x	✓	✓	x	x	✓	✓	x
Gambia	x	✓	x	✓	✓	x	✓	✓	✓	x
Georgia	x	x	x	x	✓	x	x	✓	x	x
Germany	x	x	x	x	x	x	x	x	x	x
Ghana	x	✓	x	✓	✓	x	x	x	✓	x
Greece	x	x	x	x	x	x	x	x	x	x

Annex 8. Provisions on engagement with health care workers and health systems

Country	Overall prohibition of all gifts or incentives to health workers and health systems	Type of gift or incentive			Other prohibitions					
		Financial or material inducements to promote products within the scope	Fellowships, study tours, research grants, attendance at professional conferences	Fellowships, etc., not permitted but must be disclosed to the institution	Provision of free or low-cost supplies in any part of the health care system	Donations of equipment or services	Donations prohibited only if they refer to a proprietary product	Product samples	Product information restricted to scientific and factual matters	Sponsorship of meetings of health professionals or scientific meetings
Guatemala	x	✓	x	✓	x	x	x	✓	✓	x
Guinea-Bissau	x	x	x	x	✓	x	x	x	x	x
Honduras	x	x	x	x	x	x	x	x	✓	x
Hungary	x	x	x	x	x	x	x	x	x	x
Iceland	x	x	x	x	x	x	x	x	x	x
India	✓	✓	✓	x	✓	x	x	✓	✓	✓
Indonesia	x	x	x	✓	✓	x	x	✓	x	x
Iran (Islamic Republic of)	x	x	x	x	x	x	x	✓	✓	x
Iraq	x	x	x	x	✓	x	x	x	x	x
Ireland	x	x	x	x	x	x	x	x	x	x
Italy	x	x	x	x	x	x	x	x	x	x
Jordan	x	x	x	✓	x	x	x	✓	✓	x
Kazakhstan	x	x	x	x	x	x	x	x	x	x
Kenya	✓	✓	✓	x	✓	x	x	✓	✓	x
Kiribati	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Kuwait	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Kyrgyzstan	✓	x	x	x	x	x	✓	✓	x	x
Lao People's Democratic Republic	x	x	x	✓	x	x	✓	✓	✓	x
Latvia	x	x	x	x	x	x	x	x	x	x
Lebanon	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Lithuania	x	x	x	x	x	x	x	x	x	x
Luxembourg	x	x	x	x	x	x	x	x	x	x
Madagascar	x	✓	x	✓	✓	x	✓	✓	✓	x
Malawi	✓	✓	x	✓	✓	✓	✓	✓	x	x
Maldives	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Mali	x	x	x	✓	x	x	✓	✓	x	x
Malta	x	x	x	x	x	x	x	x	x	x

Country	Overall prohibition of all gifts or incentives to health workers and health systems	Type of gift or incentive			Other prohibitions					
		Financial or material inducements to promote products within the scope	Fellowships, study tours, research grants, attendance at professional conferences	Fellowships, etc., not permitted but must be disclosed to the institution	Provision of free or low-cost supplies in any part of the health care system	Donations of equipment or services	Donations prohibited only if they refer to a proprietary product	Product samples	Product information restricted to scientific and factual matters	Sponsorship of meetings of health professionals or scientific meetings
Mauritania	x	x	✓	x	x	x	✓	x	✓	x
Mexico	x	✓	x	✓	x	x	✓	x	✓	x
Monaco	x	x	x	x	x	x	x	x	x	x
Mongolia	✓	✓	✓	x	x	x	x	✓	✓	✓
Montenegro	x	x	x	x	x	x	x	x	✓	x
Mozambique	✓	✓	x	x	x	x	✓	✓	✓	x
Myanmar	x	x	x	✓	x	x	x	x	✓	x
Nepal	✓	✓	x	✓	x	x	x	✓	✓	x
Netherlands (Kingdom of the)	x	x	x	x	x	x	x	x	x	x
New Zealand	x	x	x	x	x	x	x	x	x	x
Nicaragua	x	x	x	x	x	x	x	x	✓	x
Niger	x	x	x	✓	x	x	✓	x	✓	x
Nigeria	x	✓	x	x	✓	✓	✓	x	x	✓
North Macedonia	x	x	x	x	✓	x	x	x	x	x
Norway	x	x	x	x	x	x	x	x	x	x
Oman	x	✓	x	x	✓	x	x	x	x	x
Pakistan	✓	✓	✓	x	✓	x	✓	✓	✓	x
Palau	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Panama	✓	✓	✓	x	✓	x	✓	x	✓	✓
Papua New Guinea	x	x	x	x	x	x	x	x	x	x
Paraguay	x	x	x	x	x	x	x	x	x	x
Peru	x	x	✓	x	x	x	✓	✓	✓	x
Philippines	✓	✓	✓	x	✓	x	✓	✓	✓	✓
Poland	x	x	x	x	x	x	x	x	x	x
Portugal	x	x	x	x	x	x	x	x	x	x
Republic of Korea	x	x	x	x	✓	x	x	✓	x	x
Republic of Moldova	x	x	x	x	x	x	x	x	x	x

Country	Overall prohibition of all gifts or incentives to health workers and health systems	Type of gift or incentive			Other prohibitions					
		Financial or material inducements to promote products within the scope	Fellowships, study tours, research grants, attendance at professional conferences	Fellowships, etc., not permitted but must be disclosed to the institution	Provision of free or low-cost supplies in any part of the health care system	Donations of equipment or services	Donations prohibited only if they refer to a proprietary product	Product samples	Product information restricted to scientific and factual matters	Sponsorship of meetings of health professionals or scientific meetings
Romania	x	x	x	x	x	x	x	x	x	x
Russian Federation	x	x	x	x	x	x	x	x	x	x
Rwanda	x	✓	x	✓	x	x	x	x	x	x
San Marino	x	x	x	x	x	x	x	x	x	x
Sao Tome and Principe	✓	✓	✓	x	✓	x	x	✓	x	x
Saudi Arabia	x	✓	x	✓	x	✓	✓	✓	✓	x
Senegal	x	x	x	x	✓	x	x	x	x	x
Serbia	x	x	x	x	x	x	x	x	✓	x
Seychelles	x	x	x	x	x	x	x	x	x	x
Sierra Leone	✓	✓	✓	x	✓	✓	✓	✓	✓	✓
Singapore	x	x	x	x	x	x	x	x	x	x
Slovakia	x	x	x	x	x	x	x	x	x	x
Slovenia	x	x	x	x	x	x	x	x	x	x
Solomon Islands	x	✓	x	x	x	x	✓	x	x	x
South Africa	✓	x	x	✓	✓	x	x	✓	✓	✓
Spain	x	x	x	x	x	x	x	x	x	x
Sri Lanka	x	✓	✓	x	✓	x	x	✓	✓	x
Sudan	x	x	x	x	x	x	x	✓	x	x
Sweden	x	x	x	x	x	x	x	x	x	x
Switzerland	x	x	x	x	x	x	x	x	x	x
Syrian Arab Republic	x	✓	x	✓	✓	x	x	✓	✓	x
Tajikistan	x	✓	✓	x	✓	x	✓	✓	✓	✓
Thailand	✓	✓	x	x	✓	x	✓	✓	✓	x
Timor-Leste	x	x	x	x	✓	x	x	x	x	x
Trinidad and Tobago	x	x	x	x	x	x	x	x	x	x
Tunisia	x	x	x	x	✓	x	x	✓	x	x
Türkiye	x	x	x	x	✓	x	x	x	x	x
Turkmenistan	x	x	x	x	x	x	x	x	✓	x

Country	Overall prohibition of all gifts or incentives to health workers and health systems	Type of gift or incentive			Other prohibitions					
		Financial or material inducements to promote products within the scope	Fellowships, study tours, research grants, attendance at professional conferences	Fellowships, etc., not permitted but must be disclosed to the institution	Provision of free or low-cost supplies in any part of the health care system	Donations of equipment or services	Donations prohibited only if they refer to a proprietary product	Product samples	Product information restricted to scientific and factual matters	Sponsorship of meetings of health professionals or scientific meetings
Uganda	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓
Ukraine	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗
United Arab Emirates	✓	✓	✓	✗	✓	✗	✓	✓	✓	✓
United Kingdom	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
United Republic of Tanzania	✓	✓	✗	✓	✓	✗	✓	✓	✓	✗
Uruguay	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Uzbekistan	✗	✗	✗	✗	✓	✗	✗	✓	✓	✗
Venezuela (Bolivarian Republic of)	✓	✓	✓	✗	✓	✗	✓	✓	✗	✗
Viet Nam	✗	✓	✓	✗	✗	✗	✗	✓	✓	✓
Yemen	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗
Zambia	✗	✓	✗	✗	✗	✗	✓	✓	✗	✗
Zimbabwe	✓	✓	✓	✗	✓	✗	✓	✓	✓	✗

✗ = the provision is not included in national legal measures

Annex 9. Provisions on labelling in countries that have legal measures in place

Table A9.1. Provisions on labelling, in countries that have legal measures in place

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula				
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens		Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements
Afghanistan	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓	✓	✗	✓
Albania	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗
Algeria	✗	✗	✓	✗	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Andorra	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Argentina	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✓	✓	✗	✗
Armenia	✓	✓	✓	✗	✓	✓	✗	✓	✓	✗	✓	✓	✓	✗	✗	✗
Australia	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Austria	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Azerbaijan	✗	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Bahrain	✗	✗	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✓	✗	✗	✗
Bangladesh	✓	✓	✓	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✓
Belgium	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Benin	✗	✓	✓	✗	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Bolivia (Plurinational State of)	✗	✓	✓	✗	✓	✗	✗	✓	✓	✗	✓	✗	✓	✓	✓	✓
Bosnia and Herzegovina	✗	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Botswana	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Brazil	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗
Bulgaria	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Burkina Faso	✗	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Burundi	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✓	✓	✗
Cabo Verde	✗	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Cambodia	✗	✓	✓	✓	✓	✓	✗	✓	✗	✓	✓	✗	✓	✗	✗	✗
Cameroon	✗	✗	✓	✗	✓	✓	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula			
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens	Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements
Chad	x	✓	✓	x	✓	✓	x	✓	x	x	x	x	✓	✓	x
Chile	x	x	✓	✓	✓	x	x	✓	x	x	x	x	x	x	x
China	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Colombia	x	x	✓	x	✓	✓	x	✓	x	x	x	x	x	✓	x
Comoros	x	✓	✓	✓	✓	✓	x	✓	x	x	x	x	✓	✓	x
Cook Islands	✓	✓	✓	✓	✓	✓	x	✓	x	x	x	x	x	x	x
Costa Rica	x	✓	✓	✓	✓	✓	x	✓	x	x	✓	✓	✓	✓	✓
Côte d'Ivoire	x	x	✓	✓	✓	✓	x	✓	✓	✓	x	x	✓	✓	x
Croatia	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Cyprus	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Czechia	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Democratic Republic of the Congo	x	✓	✓	✓	✓	✓	x	x	x	x	x	x	x	x	x
Denmark	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Djibouti	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Dominican Republic	x	✓	✓	✓	✓	✓	x	✓	✓	x	✓	x	✓	✓	x
Ecuador	x	✓	✓	x	✓	✓	x	✓	x	x	✓	x	✓	x	x
Egypt	x	✓	✓	✓	✓	x	x	x	x	✓	x	x	x	x	x
El Salvador	x	x	x	✓	✓	x	x	✓	x	x	x	x	x	x	x
Estonia	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Ethiopia	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Fiji	x	x	x	x	✓	✓	x	✓	x	x	x	x	✓	x	x
Finland	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
France	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Gabon	x	✓	✓	x	✓	✓	x	✓	x	x	x	x	✓	x	x

Annex 9. Provisions on labelling in countries that have legal measures in place

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula				
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens	Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements	
Gambia	x	✓	✓	x	✓	✓	x	✓	x	x	x	x	x	x	x	x
Georgia	x	✓	✓	✓	✓	x	x	✓	✓	x	x	x	x	✓	✓	x
Germany	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	x	✓	x	x
Ghana	x	✓	✓	x	✓	✓	x	✓	x	x	x	✓	x	x	x	x
Greece	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x	x
Guatemala	x	x	✓	x	✓	x	x	✓	✓	x	x	✓	✓	✓	x	x
Guinea-Bissau	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Honduras	x	✓	✓	x	✓	✓	x	✓	✓	x	x	✓	✓	x	x	x
Hungary	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x	x
Iceland	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x	x
India	x	✓	✓	✓	✓	✓	x	✓	x	x	x	x	x	✓	✓	✓
Indonesia	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	x	x	x	x	x
Iran (Islamic Republic of)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Iraq	x	✓	✓	✓	✓	✓	x	✓	x	x	x	x	✓	x	x	x
Ireland	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x	x
Italy	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x	x
Jordan	x	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x
Kazakhstan	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Kenya	x	✓	✓	x	✓	✓	✓	✓	✓	x	✓	x	✓	x	x	x
Kiribati	✓	✓	✓	✓	✓	x	x	✓	x	x	x	x	✓	x	x	x
Kuwait	x	✓	✓	✓	✓	x	x	✓	✓	x	✓	x	✓	x	x	x
Kyrgyzstan	x	x	✓	✓	x	✓	✓	✓	✓	x	✓	✓	✓	✓	x	x
Lao People's Democratic Republic	✓	✓	✓	✓	✓	✓	x	✓	x	x	x	x	✓	x	x	x
Latvia	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x	x

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula			
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens	Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements
Lebanon	x	✓	✓	✓	✓	✓	x	✓	✓	x	x	✓	✓	✓	x
Lithuania	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Luxembourg	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Madagascar	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	x	x
Malawi	x	x	✓	x	✓	✓	x	✓	x	x	x	x	x	x	x
Maldives	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓
Mali	x	x	x	x	✓	✓	x	x	✓	x	x	x	x	x	x
Malta	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Mauritania	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓	x	✓	✓
Mexico	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Monaco	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Mongolia	x	x	✓	✓	✓	x	x	✓	✓	x	✓	✓	✓	x	x
Montenegro	x	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	x	x	x
Mozambique	x	✓	✓	✓	✓	✓	x	x	✓	x	✓	x	x	x	x
Myanmar	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	x	x	✓	✓	x
Nepal	x	✓	✓	✓	✓	x	x	✓	x	x	x	✓	✓	x	x
Netherlands (Kingdom of the)	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
New Zealand	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Nicaragua	x	✓	✓	x	✓	✓	x	✓	✓	x	x	✓	✓	✓	✓
Niger	x	x	✓	x	✓	x	x	✓	✓	x	x	x	x	x	x
Nigeria	✓	✓	✓	x	✓	✓	✓	✓	✓	x	x	x	✓	x	x
North Macedonia	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Norway	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Oman	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	✓	✓	x	x

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula			
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens	Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements
Pakistan	x	x	✓	x	✓	x	x	✓	x	x	x	✓	✓	x	x
Palau	✓	✓	✓	✓	✓	✓	x	✓	✓	x	✓	✓	✓	✓	x
Panama	x	✓	✓	✓	✓	✓	x	✓	x	x	x	x	✓	✓	✓
Papua New Guinea	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Paraguay	x	x	✓	x	✓	x	x	x	✓	x	✓	x	x	x	x
Peru	✓	✓	✓	x	✓	x	x	✓	✓	x	x	x	✓	✓	x
Philippines	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	x	✓	✓	x
Poland	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Portugal	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Republic of Korea	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x
Republic of Moldova	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	x	x	x
Romania	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Russian Federation	x	x	✓	x	✓	x	x	✓	✓	x	x	✓	✓	x	x
Rwanda	x	✓	✓	x	✓	✓	x	✓	x	x	x	x	x	x	x
San Marino	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Sao Tome and Principe	x	x	✓	x	✓	✓	x	x	x	x	x	x	✓	x	x
Saudi Arabia	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	x	x
Senegal	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Serbia	x	✓	✓	✓	✓	✓	x	✓	✓	✓	x	x	✓	x	x
Seychelles	x	✓	✓	✓	✓	✓	x	✓	x	x	x	x	x	x	x
Sierra Leone	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓
Slovakia	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x
Slovenia	✓	✓	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	x	x

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula				
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens	Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements	
Solomon Islands	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
South Africa	✓	✗	✓	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✗	✗	✗
Spain	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Sri Lanka	✗	✓	✓	✓	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Sudan	✗	✗	✓	✗	✗	✗	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗
Sweden	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Switzerland	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✓	✗	✓	✗	✗	✗
Syrian Arab Republic	✗	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Tajikistan	✗	✗	✓	✓	✓	✓	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗
Thailand	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
Trinidad and Tobago	✗	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✗	✓	✗	✗	✗
Tunisia	✗	✓	✓	✗	✓	✓	✗	✓	✗	✗	✗	✗	✓	✗	✗	✗
Türkiye	✓	✓	✓	✓	✓	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗
Turkmenistan	✗	✓	✓	✓	✓	✗	✗	✓	✓	✗	✓	✗	✓	✗	✗	✗
Uganda	✗	✗	✓	✗	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
Ukraine	✗	✓	✓	✓	✓	✗	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗
United Arab Emirates	✓	✗	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
United Kingdom	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗
United Republic of Tanzania	✗	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✓	✓	✗	✗	✗
Uruguay	✗	✗	✓	✓	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗
Uzbekistan	✗	✗	✓	✓	✓	✗	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗

Country	Prohibition of nutrition and health claims	Required information for infant formula						Prohibited content for infant formula	Required information for follow-up formula			Prohibited content for follow-up formula			
		The words "Important Notice"	Statement on superiority of breastfeeding	Statement on use only on advice of a health worker	Instructions for appropriate preparation	Warning against the health hazards of inappropriate preparation	Warning that powdered formula may contain pathogens	Pictures that may idealize the use of infant formula	Recommended age for introduction of the product	Importance of continued breastfeeding for 2+ years	Importance of no complementary foods <6 months	Image/text suggesting use at <6 months	Images/text that undermines or discourages breastfeeding or compares to breast milk	Messages that recommend or promote bottle feeding	Professional endorsements
Venezuela (Bolivarian Republic of)	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✗	✓	✓	✓
Viet Nam	✗	✓	✓	✓	✓	✗	✗	✓	✓	✗	✓	✗	✓	✓	✗
Yemen	✗	✓	✓	✓	✓	✓	✗	✓	✗	✗	✓	✗	✓	✗	✗
Zambia	✗	✓	✓	✓	✓	✓	✗	✓	✓	✗	✗	✓	✓	✓	✗
Zimbabwe	✗	✓	✓	✓	✓	✓	✗	✓	✓	✓	✗	✗	✓	✗	✗

✗ = the provision is not included in national legal measures

Annex 10. Legal measures analysed for this report

Afghanistan

- 2009 Breastfeeding support and strengthening regulation

and follow-on formula and as regards requirements on information relating to infant and young child feeding

Albania

- 1999 Law No 8528 for Promotion and Protection of Breastfeeding
- 2017 Protocol No. 2024/1 Order No. 179, On Defining the Main Content Elements of the Informational and Educational Materials on Infant and Young Child Feeding

Azerbaijan

- 2003 The Law of the Republic of Azerbaijan on protection on breastfeeding of infants and young children and controlled artificial feeding

Bahrain

- 1995 Amiri Decree: Monitoring the use, Marketing, and Promotion of Breast-milk Substitutes
- 2018 Resolution (7) 2018 on regulating procedures and control on the use, marketing and promotion of breast milk substitutes

Algeria

- 2012 Arrêté interministériel du Aouel Rabie Ethani 1433 correspondant au 23 février 2012 portant adoption du règlement technique algérien fixant les spécifications, les conditions et les modalités de présentation des préparations destinées aux nourrissons

Bangladesh

- 2013 The Breast-milk Substitutes, Infant Foods, Commercially Manufactured Complementary Foods and the Accessories Thereof (Regulation of Marketing) Act, 2013 (Act No. 35 of 2013)
- 2017 Breastmilk Substitute, Infant Food, Commercially Manufactured Infant Additional Food and Use of Equipment (Regulation of Marketing) Rules, 2017

Andorra

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Belgium

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Argentina

- 1999 Argentine Food Code CHAPTER XVII
- 2018 Argentine Food Code CHAPTER XVII as amended 2018

Benin

- 1997 Décret portant réglementation de la commercialisation des substituts de lait maternel et des aliments pour nourrissons (décret no 97-643)

Armenia

- 2014 Law on Breastfeeding promotion and regulation of marketing of infant food

Bolivia (Plurinational State of)

- 2006 Decreto Supremo No. 0115 Reglamento a la Ley No. 3460, de Fomento a la Lactancia Materna y Comercialización de sus Sucedáneos

Australia

- 1991 Food Standards Australia and New Zealand Act 1991
- 2015 Standard 2.9.1
- 2016 Standard 1.2.1
- 2016 Standard 1.2.7

Bosnia and Herzegovina

- 2000 Decree on the Ban against Marketing, Advertising and Distribution of Breastmilk Replacements

Austria

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula

Botswana

- 2005 Marketing of Foods for Infants and Young Children Regulations

Brazil

2006 Law No. 11265 of July 3, 2006

2018 Decreto N° 9.579, 2018

Bulgaria

2013 EU Regulation 609/2013

2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Burkina Faso

2022 DÉCRET No. 2022-013 PRES-TRANS/PM/MEFP/MSMP/MARAH/MDICAPME/MGF portant réglementation de la commercialisation des substituts du lait maternel, des aliments pour nourrissons et jeunes enfants et des ustensiles d'alimentation (à titre de régularisation)

2023 Arrêté interministériel No. 2023-00120/MDICAPME/MSHP/MEFP/MARAH portant composition, attributions et fonctionnement du comité de suivi de l'application de la réglementation sur la commercialisation des substituts du lait maternel, des aliments pour nourrissons et jeunes enfants et des ustensiles d'alimentation au Burkina Faso.

2023 Arrêté interministériel No. 2023-00119/MDICAPME/MSHP/MEFP/MARAH fixant les normes et règles d'emballage, d'étiquetage, de promotion des substituts du lait maternel, des aliments pour nourrissons et jeunes enfants et des ustensiles d'alimentation destinés à la commercialisation et de gestion de l'information y relative.

Burundi

2013 Decret No.100/258 portant réglementation de la commercialisation des substituts du lait maternel

Cabo Verde

2004 Decreto-Lei n° 54/2004,

2005 Decreto-Regulamentar No. 1/2005 (regulating infant food public information campaigns, labelling requirements and the related information)

2007 Decreto-Regulamentar No. 6/2007

Cambodia

2005 Sub-decree on Marketing of Products for Infant and Young Child Feeding

2007 Joint Prakas on Marketing products for infant and young child feeding

Cameroon

2005 Decret No. 2005/5168/PM portant réglementation de la commercialisation des substituts du lait maternel

Chad

2019 Loi No ___PR/2019 Portant règlementation de la commercialisation, de la distribution et de l'utilisation des substituts du lait maternel et des aliments de complément pour nourrissons et jeunes enfants de six a trente-six mois en République du Tchad.

Chile

1996 Food Regulations No 977

2015 Law No. 20,869 on Food Products Advertisement

China

2015 Advertising Law of the People's Republic of China

2021 National Food Safety Standard for Infant formula GB10765

2021 National Food Safety Standard for Formula for Older Infants GB10766

2021 National Food Safety Standard for Formula for Young Children GB10767

2023 Measures for the Implementation of the Maternal and Infant Health Care Law

2023 Order of the State Administration of Market Supervision and Administration

Colombia

1992 DECRETO NUMERO 1397 de 1992 por el cual se promueve la lactancia materna, se reglamenta la comercialización y publicidad de los alimentos de formula para lactantes y complementarios de la leche materna y se dictan otras disposiciones.

Comoros

2014 DÉCRET N° 14 -081/PR Portant promulgation de la loi N° 14-010/AU du 21 avril 2014, portant code sur la commercialisation et la distribution des substituts du lait maternel en Union des Comores

Cook Islands

2014 Cook Islands Food Regulations

Costa Rica

1994 Ley N° 7430 Fomento de la Lactancia Materna

1995 Reglamento Ley N.7430 Ley de Fomento a la Lactancia Materna

Côte d'Ivoire

- 2013 Décret no. 2013-416 du 6 juin 2013 portant réglementation de la commercialisation des substituts du lait maternel
- 2021 Arrêté interministériel No. 687 portant création, composition, attribution et fonctionnement, de la Commission d'Autorisation de Commercialisation des Substituts de Lait Maternel
- 2021 Arrêté interministériel No. 688 du 02 Aout 2021 portant réglementation de la promotion ou de la publicité des substituts du lait maternel
- 2021 Arrêté interministériel No. 689 Fixant les conditions d'autorisation de commercialisation des substituts du lait maternel
- 2021 Arrêté No. 001 du 11 août 2021 portant creation du comité national pour la promotion, la protection, le soutien à l'allaitement et au développement de la petite enfance (CNAPE)

Croatia

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Cyprus

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Czechia

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Democratic Republic of the Congo

- 2006 Arrêté n°1250/CAB/MIN/S//008/MC/2006 du 28 mars 2006 portant Code congolais de commercialisation des substituts du lait maternel

Denmark

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Djibouti

- 2010 Loi n89/AN/10/6eme L portant Reglementation de la Fabrication, de la Fourniture et de la Distribution des Substituts de Lait Maternel et assurant la Protection et l'Encouragement de l'Allaitement Maternel

Dominican Republic

- 1995 Law No 8-95, declaring Promotion and Support of Breastfeeding a National Priority
- 1996 Decreto No. 31-96 que establece el Reglamento para la Aplicación de la Ley sobre Promoción, Enseñanza y Difusión para la Práctica de la Lactancia Materna.

Ecuador

- 1995 Law 101, Law on Promotion, Support and Protection of Breastfeeding; No. 1469 Reglamento para la Aplicacion de la Ley de Fomento, Apoyo y Protección de la Lactancia Materna
- 1999 Reglamento de la Ley de fomento, apoyo y protección de la lactancia materna

Egypt

- 2010 Egyptian Child's Act by-law

El Salvador

- 2023 Ley Amor Convertida en Alimento
- 2023 Reglamento de la Ley Amor Convertido en Alimento para el Fomento, Protección y Apoyo a la Lactancia Materna

Estonia

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of

the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Ethiopia

- 2019 Food and Medicine Proclamation 1112
- 2021 Baby Food Control Directive 840 2021

Fiji

- 2009 Food Safety Regulations 2009
- 2010 Marketing Controls (Foods for Infants and Young Children) Regulations 2010
- 2016 Food Safety (Amendment) Regulations 2016

Finland

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

France

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Gabon

- 2004 Décret No 000033/PR/MSP portant promotion, protection de l'allaitement maternel et règlementant la qualité, les méthodes de commercialisation ainsi que l'utilisation d'alimentation infantile en République Gabonaise

Gambia

- 2006 Breastfeeding Promotion Regulations, 2006

Georgia

- 1999 Law of Georgia on Protection and Promotion of Breast-Feeding, Consumption of Bottle-Feeding Products (No. 2380)

Germany

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Ghana

- 2000 Breastfeeding Promotion Regulations 2000, LI1667

Greece

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Guatemala

- 1983 Ley de comercialización de los sucedaneos de la leche materna y su reglamento. Decreto Ley Numero 66-83
- 1987 Reglamento para la Comercialización de los Sucedáneos de la Leche Materna. Acuerdo Gubernativo No. 841-87

Guinea-Bissau

- 1982 Decree No 8-A/82

Honduras

- 2013 Ley de Fomento y Protección de la Lactancia Materna, Decreto No.231-2013 as amended by Decree 76-2014

Hungary

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Iceland

- 2013 EU Regulation 609/2013

- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding
- India**
- 1992 The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992
- 1993 The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Rules, 1993
- 2003 The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act, 1992 as amended in 2003
- Indonesia**
- 2012 Government regulation of the Republic of Indonesia No. 33 of 2012 on Exclusive Breastfeeding
- 2013 Decree Number 39 on infant milk formula and other baby products
- Iran (Islamic Republic of)**
- 1995 Law for the promotion of Breastfeeding and protection of mothers during the nursing period,
- 2010 Rules under Article 2 of the Law for the promotion of Breastfeeding and protection of mothers during the nursing period
- Iraq**
- 2015 Instructions No.2 of 2015, Protection and Promotion of Breastfeeding
- Ireland**
- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding
- Italy**
- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding
- Jordan**
- 2015 Law no. 62 of 2015 Law of Control of Marketing of Breast-milk Substitutes
- Kazakhstan**
- 2013 Advertising Law of the Republic of Kazakhstan, 2013
- 2015 Advertising Law of the Republic of Kazakhstan, as amended 2015
- Kenya**
- 2012 The Breast Milk Substitutes (Regulation and Control) Act No.34 of 2012
- 2021 The Breast Milk Substitutes (Regulation and Control) (General) Regulations, 2021
- Kiribati**
- 2014 Food Regulations and Standards 2014
- Kuwait**
- 2014 Ministerial Decree No. 134/ 2014
- Kyrgyzstan**
- 2008 Law No. 263 on support of breastfeeding and regulation of marketing of products and articles for child feeding (2008)
- 2008 Law 264 On introducing amendments into some acts of law of the Kyrgyz Republic (Law of the Kyrgyz Republic "On advertising", Code of the Kyrgyz Republic on administrative responsibility) (2008)
- Lao People's Democratic Republic**
- 2019 Decree No. 472/GOL on Food Products and feeding equipment for infants and toddlers
- Latvia**
- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding
- Lebanon**
- 2008 Law organizing the marketing of infant and young child feeding products and tools

Lithuania

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Luxembourg

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Madagascar

- 2011 Décret No.2011-629 portant Réglementation de la Commercialisation des Substituts du Lait Maternel

Malawi

- 2004 Public Health (Marketing of infant and young child foods) rules 2004

Maldives

- 2008 Regulation on Import, Produce and Sale of Breast Milk Substitutes in the Maldives MGFS-FS/R1:2008

Mali

- 2006 Arrêté interministériel n 06-1907 / Ms-Mic-Mep-Ma-Sg du 04 septembre 2006 Portant réglementation de la commercialisation, de l'information et du contrôle de la qualité des substituts du lait maternel au Mali

Malta

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Mauritania

- 2020 Arrêté conjoint No. 641 /MS/MCT/ portant sur les procédures applicables aux substituts du lait maternel

Mexico

- 1999 Reglamento de Control Sanitario de Productos y Servicios
- 2012 NORMA Oficial Mexicana NOM-131-SSA1-2012, Productos y servicios. Fórmulas para lactantes, de continuación y para necesidades especiales de nutrición. Alimentos y bebidas no alcohólicas para lactantes y niños de corta edad. Disposiciones y especificaciones sanitarias y nutrimentales. Etiquetado y métodos de prueba

Monaco

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Mongolia

- 2017 Infant and Young Child food Act

Montenegro

- 2015 Law on food Safety
- 2016 Regulation on manner and conditions for marketing food for special nutritional needs

Mozambique

- 2005 Código Nacional de Comercialização dos Substitutos do Leite Materno

Myanmar

- 2014 Order of Marketing of Formulated Food for Infants and Young Children

Nepal

- 1992 The Mother's Milk Substitutes (Control of Sale and Distribution) Act, 2049 (1992)
- 1994 Mother's Milk Substitutes (Control of Sale and Distribution) Regulation

Netherlands (Kingdom of the)

- 2013 EU Regulation 609/2013

- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

New Zealand

- 1991 Food Standards Australia and New Zealand Act 1991
2015 Standard 2.9.1
2016 Standard 1.2.1
2016 Standard 1.2.7

Nicaragua

- 1999 Ley 295 Ley de Promoción, Protección y Mantenimiento de la Lactancia Materna y Regulación de la Comercialización de Sucedáneos de la Leche Materna

Niger

- 1998 Arrêté N° 215 MSP/DSF portant réglementation de la commercialisation des substituts du lait maternel,

Nigeria

- 1990 Marketing (Breast-milk Substitutes) Act 41 of 1990
1999 Marketing (Breast-milk Substitutes) Act 41 of 1990 as amended by Act 22 of 1999
2019 Marketing of Infant and Young Children Food and Other Designated Products (Registration, Sales, Etc.) Regulations

North Macedonia

- 2004 Law on consumer protection

Norway

- 2013 EU Regulation 609/2013
2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Oman

- 2021 Marketing Regulations of Designated Products for Infants and Young Children (OS 1649/2021)

Pakistan

- 2002 The Protection of Breast-feeding and Child Nutrition Ordinance, 2002
2012 The Protection of Breast-feeding and Child Nutrition Ordinance, as amended 2012,
2018 Punjab Food Authority (Baby Food) Regulations.

Palau

- 2006 Promotion of Optimal Infant and Young Child Nutrition

Panama

- 1995 Ley 50 (de 23 de Noviembre de 1995) "Por la cual se protege y fomenta la lactancia materna
2012 Decreto Ejecutivo No. 1457 (de 30 de Octubre de 2012) que reglamenta la Ley

Papua New Guinea

- 1977 Baby Feed Supplies (Control) Act 1977
1984 Baby Feed Supplies (Control) Act 1977, amended 1984

Paraguay

- 1999 Ley No. 1.478 de Comercialización de Sucedáneos de la Leche Materna
2017 Decreto No. 7550/17 Por el cual se reglamenta la ley No. 5508 de "promoción, protección de la maternidad y apoyo a la lactancia materna".
2023 Resolution SG No. 847/2023 Resolution designating representatives of Min Public Health and Social Welfare to exercise presidency of National Commission for the promotion and support of breastfeeding

Peru

- 2006 Aprueban Reglamento de Alimentación Infantil (Decreto Supremo No.009-2006-SA)

Philippines

- 1986 Executive Order No. 51, National Code of Marketing of Breastmilk Substitutes, Breastmilk Supplement and Other Related Products.
2006 Administrative Order No. 2006-0012, Revised implementing Rules and Regulations of Executive Order No 51
2012 Joint Administrative Order No. 2012-0027

Poland

- 2013 EU Regulation 609/2013
2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of

the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Portugal

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Republic of Korea

- 2010 Livestock Products Sanitary Control Act, 2010
- 2016 Livestock Products Sanitary Control Act, as amended 2016

Republic of Moldova

- 2018 Government Decree No. 179 validating Sanitary Regulations on food products intended for infants and children of tender age, food for special medical purposes, for the complete replacement of the diet for weight control purposes

Romania

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Russian Federation

- 2013 Decision of Eurasian Economic Commission N67 on Customs Union Technical Regulations on milk and safety of milk products
- 2015 Federal Law N 3B-FZ with revision 08.03.2015 and update from 01.10.2015

Rwanda

- 2006 Rwanda Standard RBS/CD 112 Code of marketing of breast milk substitutes

San Marino

- 2013 EU Regulation 609/2013

- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Sao Tome and Principe

- 2020 Lei n.º 7/2020 Lei de Comercialização de Substitutos do Leite Materno.

Saudi Arabia

- 2019 Breastmilk substitutes Marketing Saudi Code Executives Regulations (updated)

Senegal

- 1994 Arrêté interministériel 5969, du 25 juillet 1994, fixant les conditions de commercialisation des substituts du lait maternel

Serbia

- 2005 Rulebook on designation of packaged foods for infants and young children
- 2016 Advertising Law 2005 amended in 2016
- 2016 Rulebook on the health and safety of dietary products

Seychelles

- 1992 Food Act (Breast-milk substitute) Regulations (revised edition 1994)

Sierra Leone

- 2021 Breastmilk Substitutes Act

Singapore

- 1973 Singapore Sale of Food Act
- 2019 Singapore Food regulations as amended 2019

Slovakia

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Slovenia

- 2013 EU Regulation 609/2013

- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Solomon Islands

- 2010 Pure Food (Food Control) Regulations 2010

South Africa

- 2012 Foodstuff, Cosmetics and Disinfectants Act. 1972 (Act 54 of 1972) Regulations Relating to Foodstuffs for Infants and Young Children (No. R 991 of 2012)

Spain

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Sri Lanka

- 2004 Code for the Promotion, Protection and Support of Breast Feeding and Marketing of Designated Products (Amended Code 2002)

Sudan

- 2000 Breastfeeding Promotion and Protection Decree,

Sweden

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding

Switzerland

- 2016 Ordonnance du DFI sur les denrées alimentaires destinées aux personnes ayant des besoins nutritionnels particuliers

- 2020 Ordonnance du DFI sur les denrées alimentaires destinées aux personnes ayant des besoins nutritionnels particuliers, as modified 2020

Syrian Arab Republic

- 2000 Syrian Code of Marketing of Breast-milk Substitutes
Regulative resolution number /19/T

Tajikistan

- 2006 Law on Protection of Breastfeeding for Children

Thailand

- 2007 Notification of the Ministry of Public Health (No. 308) B.E. 2550 (2007) concerning Modified Milk for Infant and Modified Milk of follow up Formula for Infant and Young Children.
- 2017 Control of Marketing of Infant and Young Child Food Act

Timor-Leste

- 2023 Decree-Law 8/2023 Legal framework for the marketing of breast milk substitutes

Trinidad and Tobago

- 1985 Food and Drugs Act, Chapter 30:01

Tunisia

- 1983 Loi No. 24 du 4 Mars 1983 relatif au contrôle de la qualité, à la commercialisation et à l'information sur l'utilisation des substituts du lait maternel et produits apparentés

Türkiye

- 2019 Turkish Food Codex Regulation on food intended for infants and young children and total diet replacement for weight control.
- 2019 Turkish Food Codex Infant Formula and Follow up Formula Communiqué (Communiqué No: 2019/14)

Turkmenistan

- 2009 Law on protection and promotion of breastfeeding and baby foods requirements

Uganda

- 1997 The Food and Drugs (Marketing of Infant and Young Child Foods) Regulations, 1997

Ukraine

- 1996 Ukraine law about advertising (Bulletin of the Verkhovna Rada of Ukraine (VVR), 1996 (as amended)
- 2019 Ukraine Law "On Information for Consumers on Food Products".

- 2021 Law of Ukraine No. 1822-IX Bringing the Legislation of Ukraine in the Field of Baby Food Provision in Compliance with the Requirements of the European Union Legislation Oct. 21 2021 (Law 1822)
- 2022 Order of Ministry of Health No. 1084 on the approval of safety requirements and individual indicators of quality of baby food (invalidates 2013 order 696)

United Arab Emirates

- 2018 Decree of the Cabinet No. 21 (2018) on regulating the marketing of infant and young children products.

United Kingdom

- 2013 EU Regulation 609/2013
- 2016 Commission delegated regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding
- 2016 The Food for Specific Groups (Information and Compositional Requirements) (England) Regulations (United Kingdom Statutory Instruments No. 688)

United Republic of Tanzania

- 2012 Food, Drugs and Cosmetics (Marketing of Foods and Designated Products for Infants and Young Children) Regulations

Uruguay

- 1994 Decreto No 315 Reglamento Bromatologico Nacional
- 2017 Ministerial Order 62. Norma Nacional de Lactancia Materna

Uzbekistan

- 2019 Law of the Republic of Uzbekistan on Support of Breastfeeding requirements for food for infants and children

Venezuela (Bolivarian Republic of)

- 2007 Ley de Promoción, Protección y Apoyo a la Lactancia Materna

Viet Nam

- 2011 Decree 86/2011/ND-CP guiding the implementation the law on inspections
- 2012 Law No. 16/2012/QH13 on Advertising

- 2014 Decree 100/2014/ND-CP on trade and use of nutritional products for infants, feeding bottles and teats
- 2020 Decree 117/2020/ND-CP on administrative sanction in health sectors
- 2021 Decree 38/2021/ND-CP on administrative sanction on advertising
- 2021 Decree 70/2021/ND-CP on cross-border advertising services

Yemen

- 2002 Cabinet Decree No.(18) for the Year 2002 Concerning regulation for Promotion and protection of Breast-feeding

Zambia

- 2006 Food and Drugs (Marketing of Breast Milk Substitutes) Regulations, 2006 (Statutory Instrument No. 48 of 2006)

Zimbabwe

- 1998 Statutory Instrument 46 of 1998, Public Health (Breast-milk Substitutes and Infant Nutrition) Regulations, 1998

For more information, please contact:

Department of Nutrition and Food Safety
World Health Organization

Avenue Appia 20
CH-1211 Geneva 27
Switzerland

Email: nutrition@who.int
www.who.int/teams/nutrition-and-food-safety

