



AUSTRALIAN MEDICAL
ASSOCIATION
ABN 37 008 426 793

T | 61 2 6270 5400
F | 61 2 6270 5499
E | ama@ama.com.au
W | www.ama.com.au

39 Brisbane Ave Barton ACT 2600
PO Box 6090 Kingston ACT 2604

AMA submission to The Department of Health and Aged Care's Review of the Marketing of Infant Formula Agreement (MAIF) review.

Submitted via survey:

<https://consultations.health.gov.au/population-health-and-sport-division/maif-review/>

14. The MAIF Agreement is effective in achieving its aims.

Strongly disagree

Disagree

Agree

Strongly agree

Unsure

The AMA acknowledges the Marketing in Australia of Infant Formula (MAIF) Agreement is a voluntary, self-regulatory code which restricts signatories' ability to promote and market breastmilk substitutes. The purpose of the agreement is to protect and encourage the promotion of breastmilk as the optimal source of nutrients for all infants.

Efforts should be made to ensure that parents who are unable or choose not to breastfeed can still access appropriate support and information to allow them to effectively feed their infant.

The AMA is concerned that due to the current approach of the MAIF Agreement, consumers are not being protected and kept well informed on all parties marketing infant formula. This is due to the 'opt-in' nature of the MAIF Agreement as it now stands, as well as digital marketing practices that fall out-of-scope of the MAIF currently.

15. The scope of the MAIF Agreement is appropriate.

Strongly disagree

Disagree

Agree

Strongly agree

Unsure

The AMA believes the current scope of the MAIF Agreement is not appropriate, to achieve the overarching goals of the agreement. This is due to a change in digital marketing practices since the agreement's inception in 1992. Now more than ever, Australians are being targeted by advertising online. The MAIF plays a pivotal role in helping to regulate infant formula marketing on digital platforms when complaints are lodged. However, for the MAIF agreement to regulate

these complaints in line with the goals of the agreement, the scope of the agreement must be kept current to changes in digital marketing practices. Expansions to the agreement's scope could include regulating the marketing of infant formula by third parties on digital platforms, online point-of-sale infant formula advertising, and specific targeting of parents and carers with infant formula advertising.

17. The scope of parties covered by the MAIF Agreement is appropriate.

Strongly disagree

Disagree

Agree

Strongly agree

Unsure

The AMA notes that due to the self-reporting and 'opt-in' nature of the MAIF agreement, that not all parties involved in the marketing of infant formula are covered under the current scope. The AMA is concerned about the voluntary nature of the MAIF agreement.

Many of the complaints made to the MAIF Review Board, have been ruled out-of-scope as the formula brand in question has not signed onto the MAIF Agreement. Other complaints are being made against third-party retailers, who advertise infant formula, but are also out of the current scope of the agreement. This suggests that harmful marketing practices could be being conducted, by parties out of scope of the MAIF, which goes against the goals of the agreement.

This must be addressed in an updated scope of the MAIF, so that the obligations outlined in the MAIF agreement for companies making and selling infant formula can apply to all marketing of all infant formulas. Consumers can then make informed decisions regarding infant formula being marketed towards them.

18. The MAIF Agreement (under Clause 7) restricts the type of information that can be provided to health care professionals on infant formula products. What activities can be done to increase the awareness of the appropriate use of breast milk substitutes amongst health care professionals?

The AMA acknowledges that for parents, learning to predict and accommodate the feeding pattern of their newborn infant can be the cause of anxiety and tension. Medical practitioners can be an appropriate source of reassurance and support through this period, if informed regularly on the current options for breast milk substitutes, and how they can be used appropriately.

The AMA believes that parents should receive appropriate education from health professionals, regarding infant feeding patterns, perception of milk supply and infant feeding cues. Parental anxiety around infant formula products and feeding can contribute to feeding difficulties, which may further exacerbate the parental anxieties. Every infant is unique and feeding patterns and behaviour are likely to differ substantially, even between siblings. This must be considered in

the information being provided to parents and carer by health professionals, regarding the appropriate use of infant formulas.

The AMA recommends that Continuing Professional Development (CDP) for health professionals, especially GPs, is developed around current health advice on infant formulas. This ensures that health professionals have a clear source of information to turn to, when looking to provide advice to patients, on the options around infant formula use.

19. Are the current advertising and marketing provisions covered by the MAIF agreement appropriate?

Strongly disagree

Disagree

Agree

Strongly agree

Unsure

19a. Should the scope be changed to include modern marketing techniques, such as targeting advertising on social media platforms?

The AMA strongly encourages this change to bring these modern marketing techniques in-scope of the MAIF agreement, as the current scope is insufficient, where targeted digital advertising practices on social media are concerned.

19b. What changes would you suggest and how could they be implemented?

The AMA suggests that changes are made to the MAIF, to encompass the development of new digital platforms, and targeted social media advertising practices. These digital marketing practices should be regulated in line with the current MAIF agreement regulations, that are already used against the other infant formula marketing practices.

28. The MAIF Agreement's effectiveness is not reduced by its voluntary, self-regulatory approach.

Strongly disagree

Disagree

Agree

Strongly agree

Unsure

Please provide more detail about your response (suggested word count 250 words):

The voluntary, self-regulatory model of the MAIF in 2023, does not remain fit for purpose. The AMA believes that all manufacturers and retailers who market infant formula, need to be held accountable under the agreement. This non-voluntary approach would ensure well-regulated standards of practice across the whole infant formula industry are being met, for better consumer protection.

30. What changes would you make to the MAIF Agreement and its processes?

As the AMA has suggested in previous questions, the scope of the MAIF agreement must be changed to meet new digital marketing practices. The MAIF agreement should also look at evolving from an 'opt-in' model to a compulsory regulatory model for the marketing of all infant formula, across all platforms and retailers in Australia.

30b. What do you think would be the potential benefits of these changes?

The AMA believes that these proposed changes would provide a standard of regulation for all infant formula products, across all marketing platforms. This would better protect consumers and ensure they can be accurately and truthfully informed regarding their infant formula choices.

32. Do you have anything further to add?

Infant nutrition and early infant growth patterns lay the foundation for eating patterns and weight gain later in life. Infants need a healthy start to life to reduce the risk of chronic conditions later in life, and doctors and healthcare professionals are uniquely positioned to support parents to achieve this. New parents should be supported to make informed decisions regarding the feeding of their infant, recognising that this will be influenced by numerous social, physiological, and individual lifestyle factors.

Although different in composition, infant formula is an adequate source of nutrients for infants who are not breastfed. Parents seeking to bottle feed their infants should receive appropriate support and guidance around formula feeding, including volume, frequency of feeds, feeding cues and sterilisation and preparation of formula.

Mothers who had intended to breastfeed, but were unable to, may feel a sense of guilt or failure for adopting formula feeds. It is important that treating medical practitioners provide appropriate reassurance about the efficacy of formula feeding and work to remove any stigma associated with infant formula.

Parents seeking information can be overwhelmed with conflicting and often misleading advice from social media, family and friends, and the internet. An increasingly important aspect of antenatal education, including that information surrounding feeding of infants, involves improving the health literacy of parents to equip them to seek evidence-based information from reliable sources, such as government or hospital-based websites.

12 MAY 2023

Contact

AMA Public Health Team