

Third edition

GLOBAL COMMUNITY HEALTH ANNUAL WORKSHOP

Sustainable community health:  
practice-based solutions for today's challenges

13, 14 and 15 June 2023

## **Subtheme: Food insecurity**

Implications of a life course approach to commercial determinants of health (CDOH). A Latin American perspective.

Raul Mercer, MD MSc - Mariela Alderete MD  
Program of Social Sciences and Health, FLACSO, Argentina  
CAP-2030 (Children in All Policies)



## **WORKSHOP AGENDA**

### **Objectives**

### **Theoretical framework**

Commercial Determinants of Child and Adolescent Health (CDoCAH)  
Early food insecurity (EFI)  
Life Course approach (LCA)  
Child Rights Based Approach (CRBA)

### **Hands on**

What do we know? (A Latin American perspective)  
What do we do?  
What can be done at the community level? (discussion)

**We declare that we do not have conflicts of interest**



# **Objectives of this workshop**

- To analyze the conceptual bases of the commercial determinants of child and adolescent health**
- To recognize how harmful marketing and products potentially affect children's health**
- To identify the first stages of life as a crucial period on which the modalities of induced food insecurity are generated**

# Introducing the problem

[www.thelancet.com/futurechild](http://www.thelancet.com/futurechild)

## THE LANCET

February, 2020

[www.thelancet.com](http://www.thelancet.com)

A future for the world's children?  
A WHO-UNICEF-Lancet Commission



“Governments must harness coalitions across sectors to overcome ecological and commercial pressures to ensure children receive their rights and entitlements now and a liveable planet in the years to come.”



 unicef | for every child

A Commission by *The Lancet*



# Children are at risk today like never before

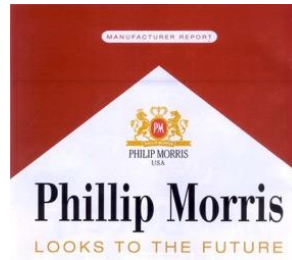
- Recent years have seen improvements in children's health, education, and survival
- But millions of children around the world still suffer from hunger, sickness, and violence
- New threats have also emerged:

## ENVIRONMENTAL THREATS

to children's current health and future well-being

## COMMERCIAL THREATS

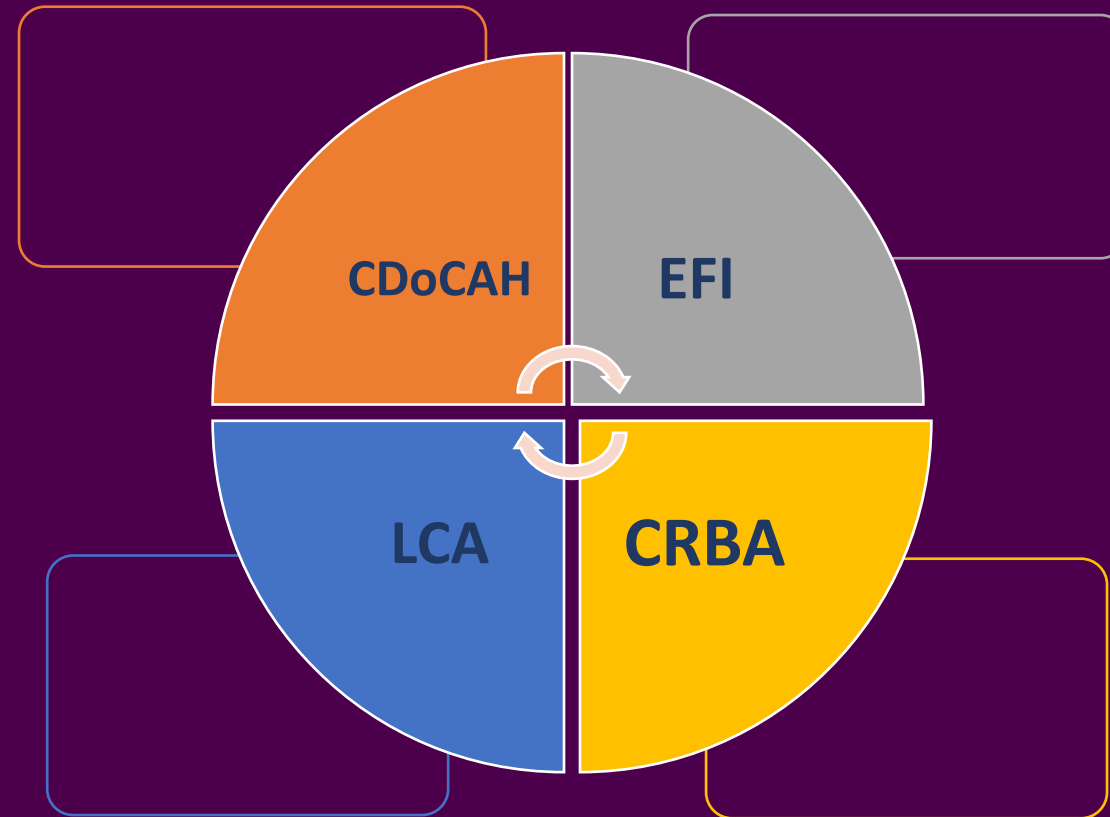
via targeted marketing of harmful substances



# Industry self-regulation *does not work*

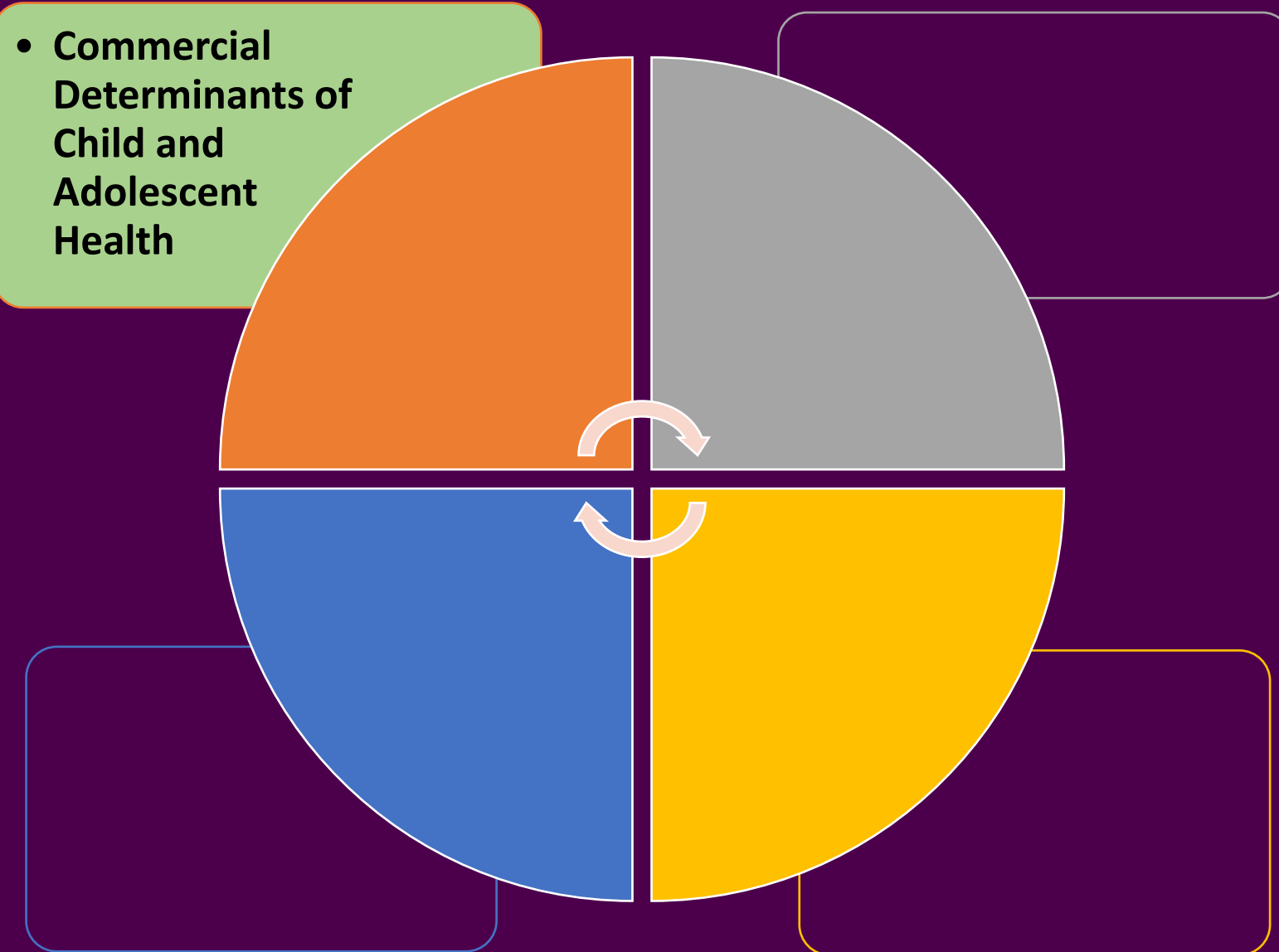
Studies in Canada, Mexico, New Zealand, the US and Australia – among others – have shown that self-regulation has not hampered the ability or propensity of businesses to advertise to children

# Theoretical framework

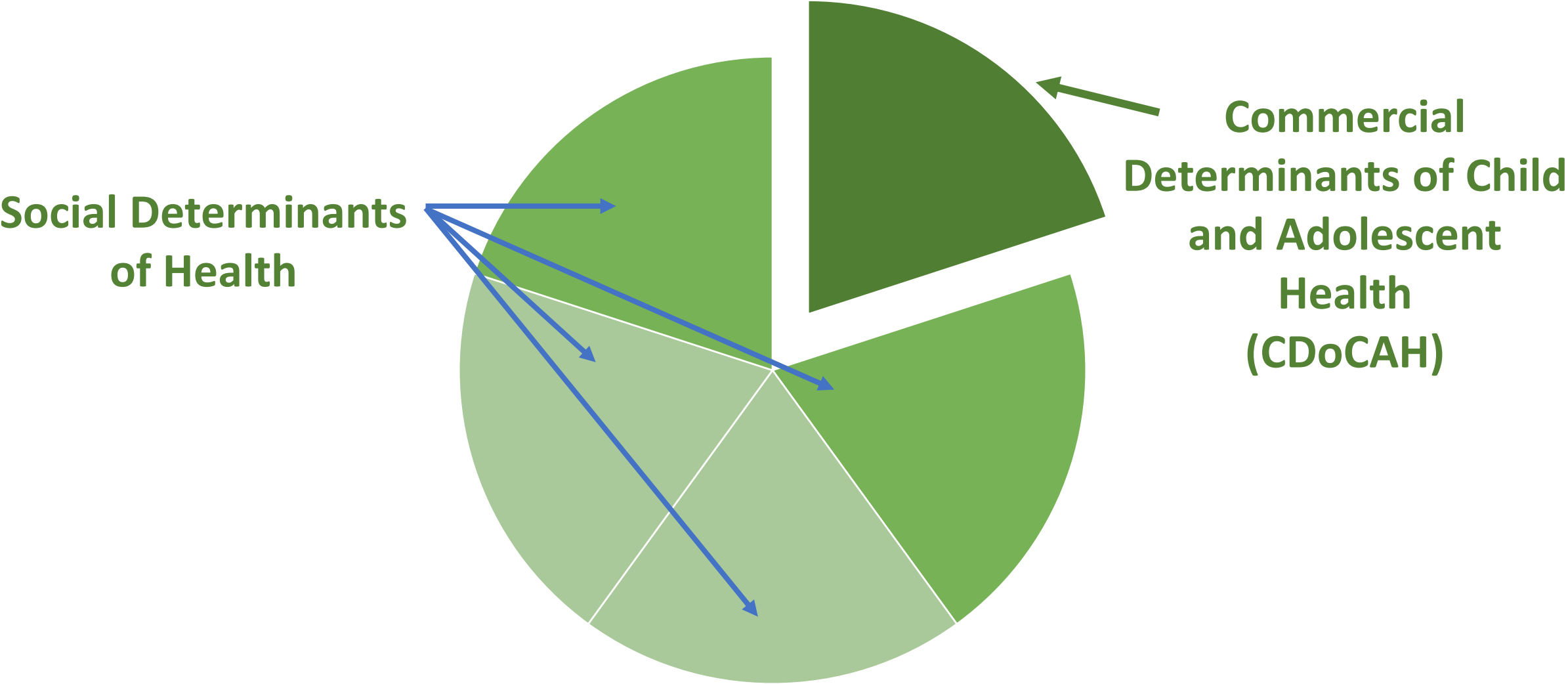




# Theoretical framework



# The Commercial Determinants of Health are a sub-set of the Social Determinants of Health



# ¿What are the Commercial Determinants of Health?

*“strategies and approaches used by the private sector to promote products and choices that are detrimental to health”, emphasizing that this definition conceptually links both macro (i.e. globalization, global risk society, and global consumer society) and micro (i.e. i.e. individualization, consumer choice and health behaviour), emphasizing them as 'dynamic'.*

*Kickbusch I. et al*

# What are the Commercial Determinants of Child and Adolescent Health (CDoCAH)?

*“... strategies and approaches used by the private sector to promote products and behaviors that are harmful to health, acting from **early stages of life**, affecting the **conditions to decide responsibly**, **violating the rights of children** and affecting the health, development and quality of **present and future life ...**”*

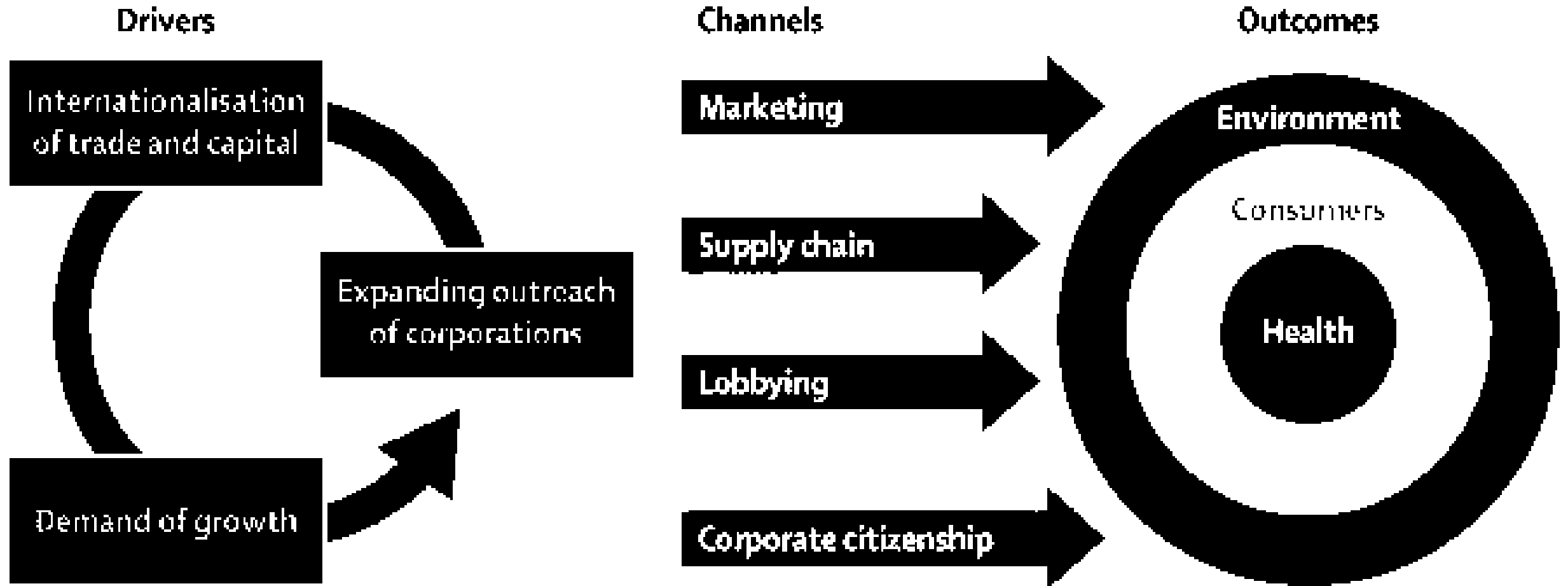
*Mercer-Alderete (in process)*

**How do commercial determinants  
affect child health?**

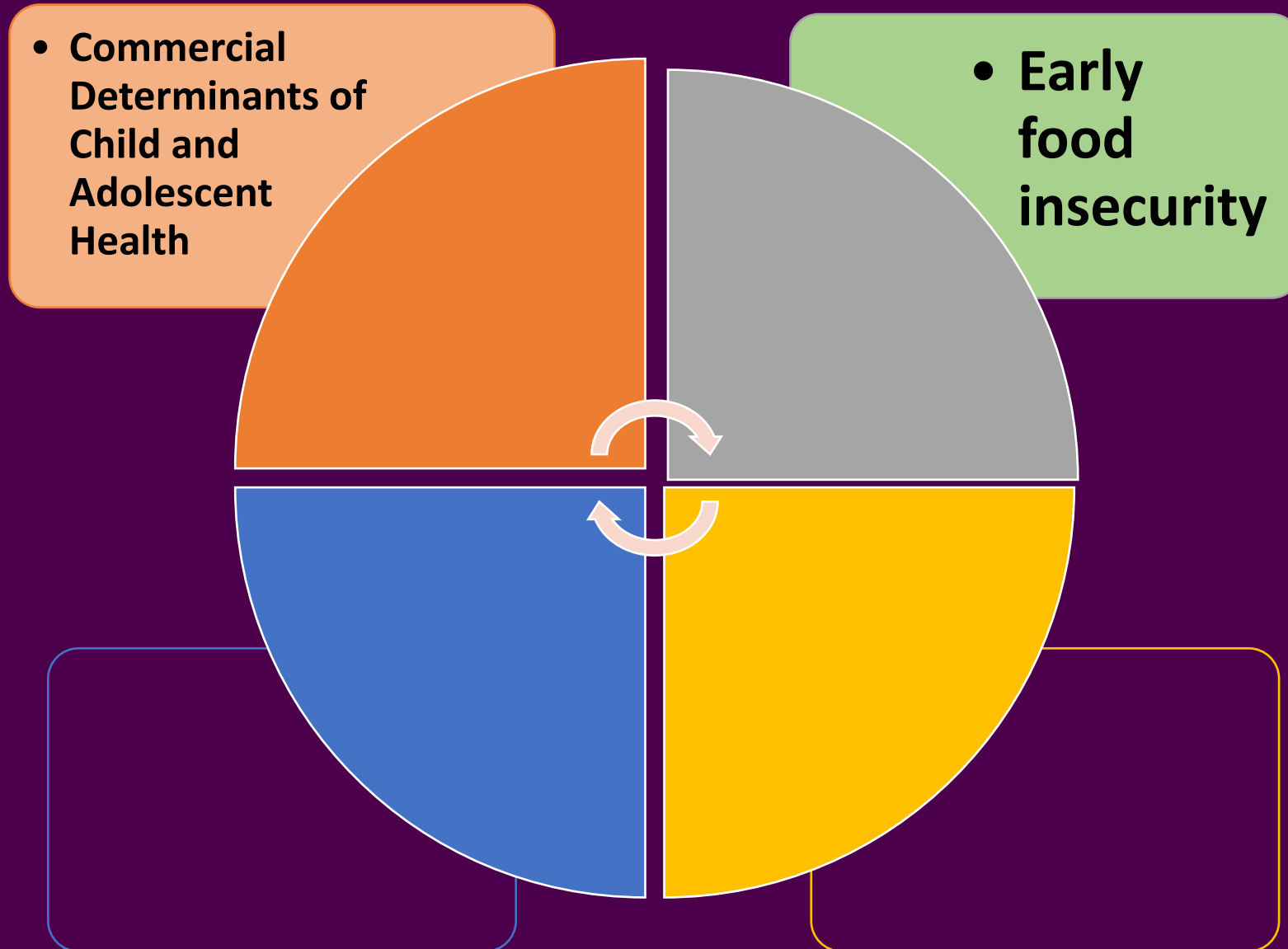
**a) Harmful marketing strategies**

**b) Harmful product itself**

# Pathways for action of commercial determinants of health



# Theoretical framework



# Food Insecurity

*“..refers to the situation in which people do not have adequate access to sufficient, safe and nutritious food to meet their dietary needs and lead active and healthy lives.”*

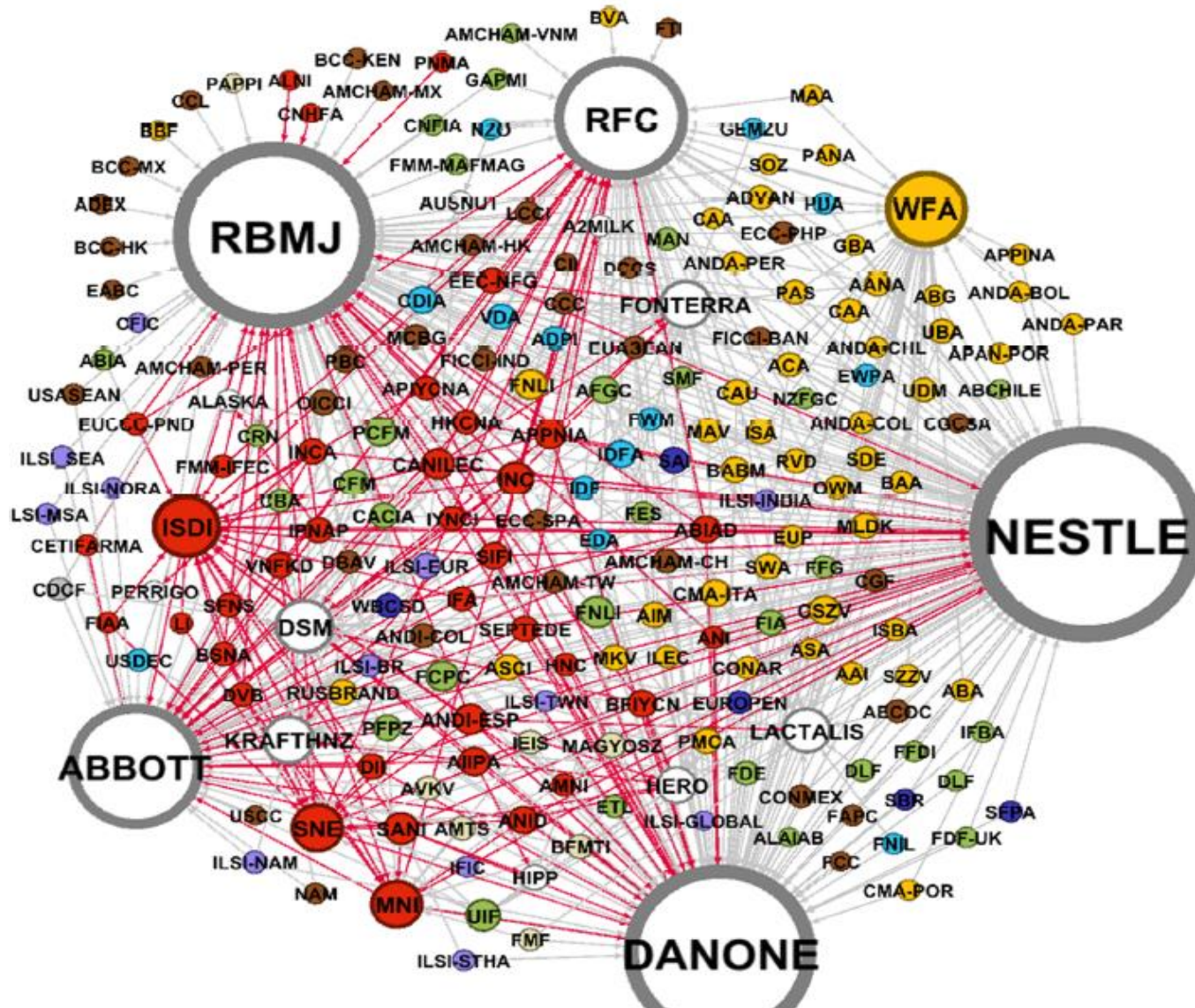


# Early Food Insecurity (EFI)

“..refers to the situation in which children do not have the **contextual conditions** to promote, protect and fulfil the **right** to an adequate access to nutritious food and feeding experiences considering the **best interest of the child ....**”

Mercer-Alderete (in process)

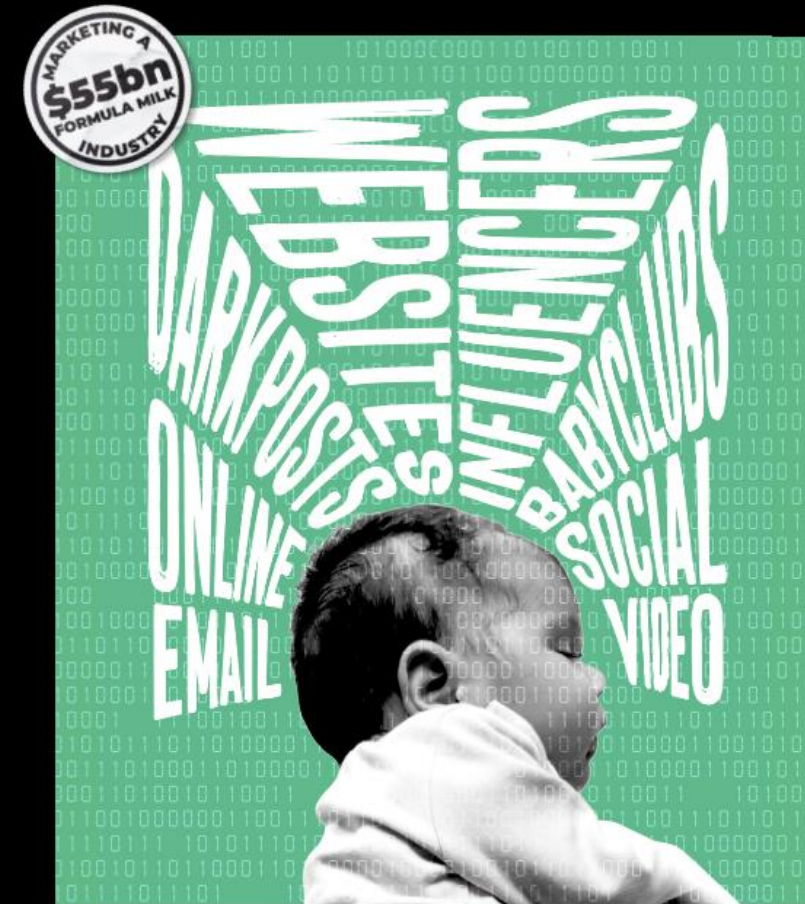
# Greatest global threat to the right to adequate child nutrition as a factor of early food insecurity: the industry of breast milk substitutes



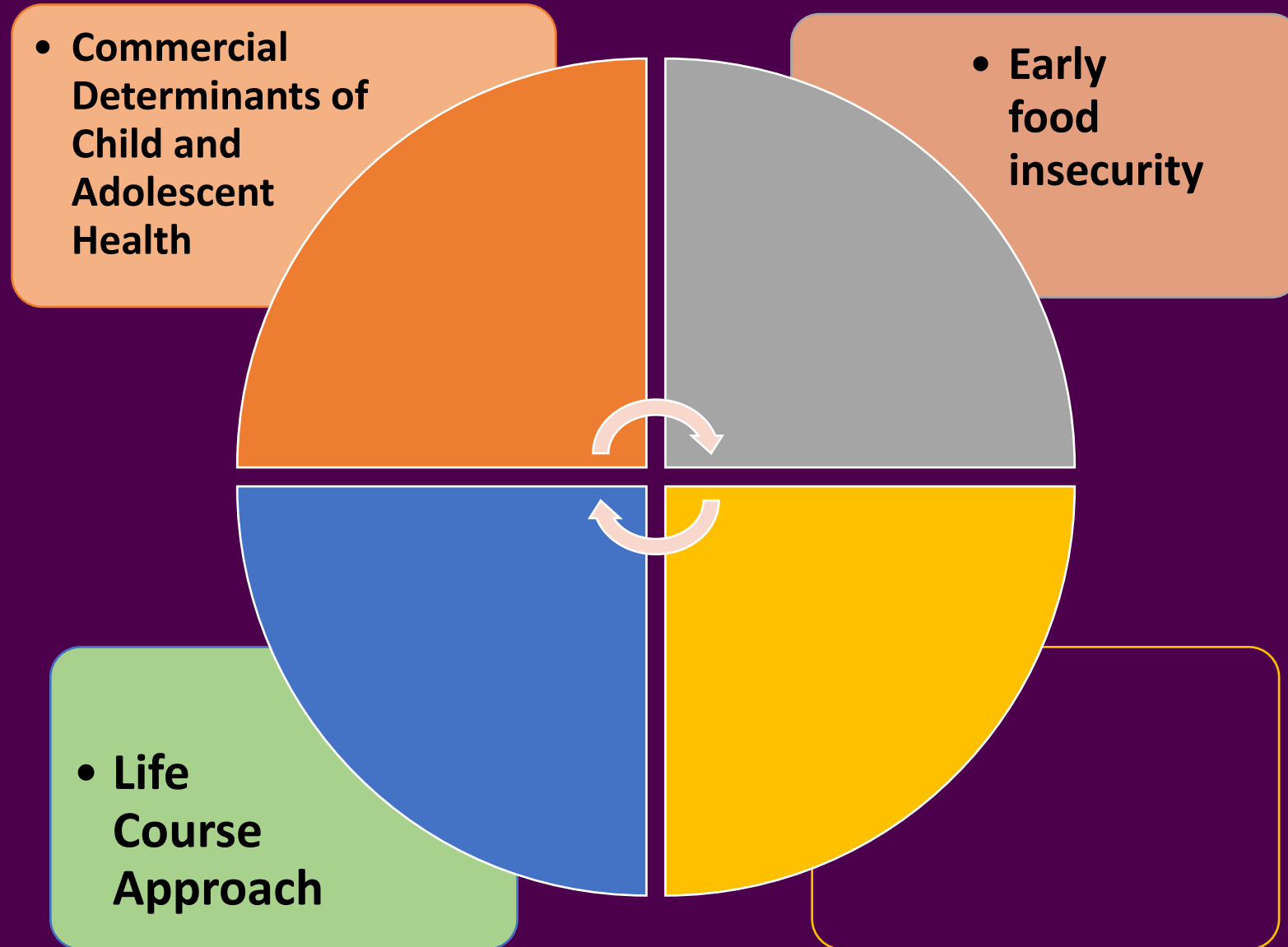
The size of the circles is proportional to the number of "links" that the organization has with others in the network;

- White circles:** corporations in the baby food industry;
- Circles and Red Lines:** Big Formula Baby Network and Nutrition Associations;
- Yellow circles:** brand and advertising associations;
- Green Circles:** Food, Beverage, and Grocery Manufacturers Associations;
- Brown circles:** general industry trade associations, eg, chambers of commerce;
- Light blue circles:** Dairy industry trade associations;
- Purple Circles:** Consumer and Industry Information.

# Greatest global threat as a determinant of early food insecurity



# Theoretical framework



# CDoCAH and Life Course

[click to return to contents](#)

## **The capture of child development knowledge by marketing companies**

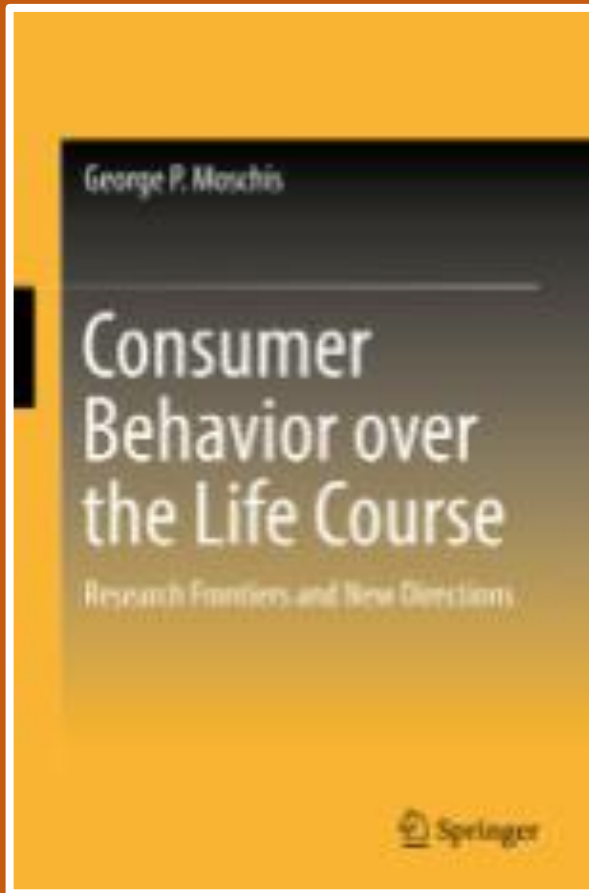
Dr Mark Tomlinson, and Dr Raul Mercer (and the CAP-2030 working group on Commercial Determinants of Child and Adolescent Health)

The magnitude of marketing targeting children is well described (1), as is the long history of close alignment between children's marketing and developmental psychology (2). We have also known for a long time how the marketing industry divided children (certainly in the USA but increasingly globally) into discrete age, gender, ethnic and product segments in order to facilitate tailored messaging (3). While Cook (2) has argued that one of the common threads to much of the marketing is conceptualising children as small emergent consumers, it is not entirely clear that the marketing and advertising industries targeting children explicitly use a life course approach when targeting children. In this short piece, we wish to make the case for a better understanding of the effectiveness of harmful marketing targeting children using the framework of a life-course approach.

The concept of the life course is based on conceptual and theoretical breakthroughs in the study of development, and on the proliferation of longitudinal studies which examined behavioural adaptations to real-

# “They” have the science

## *Consumer Behavior over the Life Course*



- Efforts to study consumers throughout their lifespan
- The Life Course Paradigm: Conceptual and Theoretical Foundations
- Consumer behavior in the context of the life course
- The Life Course Research Framework: Illustrative Application in the Study of Financial Behaviors
- Life Course Research Methods
- Contributions to previous efforts to study consumers throughout their lifespan
- Applications to Selected Areas of Consumer Behavior: An Agenda for Future Research Implications for professionals
- Summary, Opportunities, Challenges and Recommendations

# Noncommunicable diseases (NCDs) are the #1 cause of mortality & disability globally

*...and they start at early stages of life...*

*Inadequate health systems, treatment, care*

## What drives the NCD response

*Shared risk factors and systemic challenges  
>>>> common solutions*

### DISEASES



Cardiovascular Disease



Chronic Respiratory Diseases



Cancer



Diabetes



Mental and Neurological Conditions

### RISK FACTORS



Unhealthy Diet



Tobacco Use



Harmful Use of Alcohol



Physical Inactivity



Air Pollution

*Social and commercial determinants*

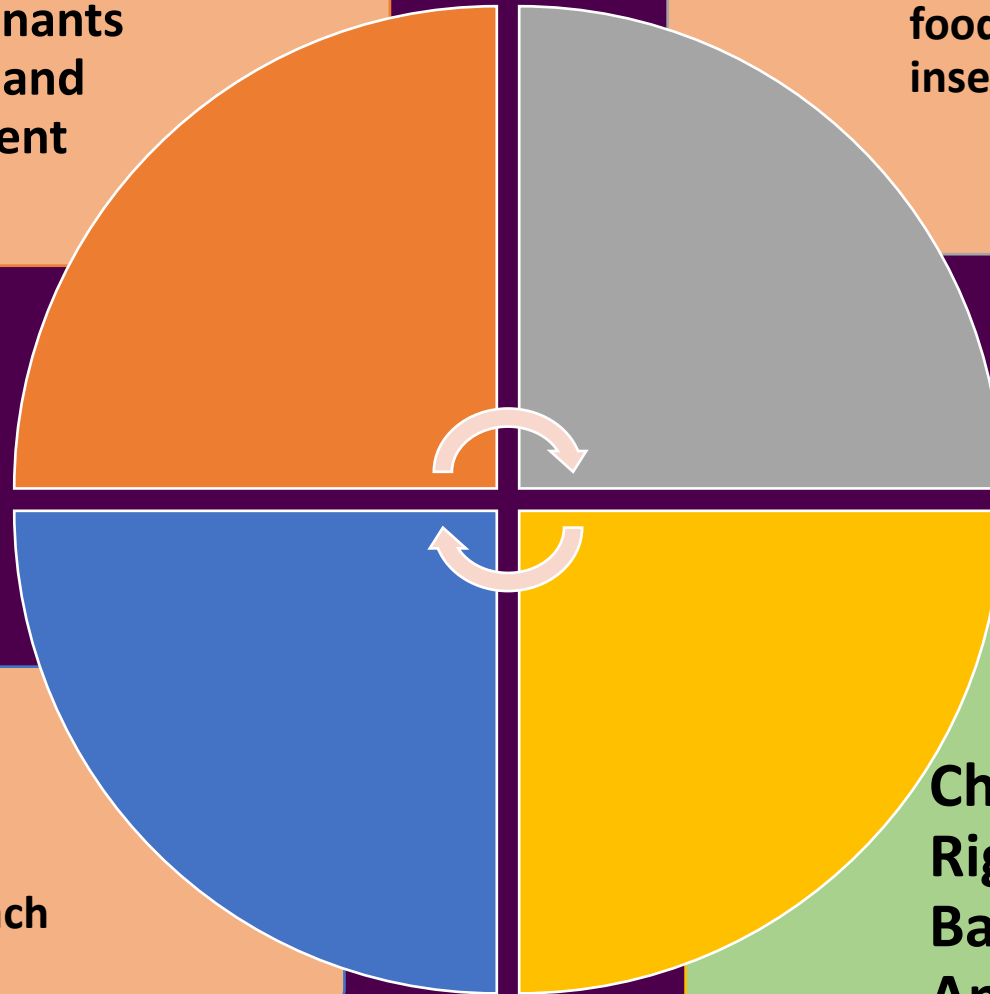
# Theoretical framework

• Commercial Determinants of Child and Adolescent Health

• Early food insecurity

• Life Course Approach

Child Rights Based Approach





# Rights, justice, and equity: a global agenda for child health and wellbeing



*Jeffrey L Goldhagen, Sherry Shenoda, Charles Oberg, Raúl Mercer, Ayesha Kadir, Shanti Raman, Tony Waterston, Nicholas J Spencer*

Worldwide challenges to child health and wellbeing are rapidly becoming existential threats to children and childhood. Inequities, armed conflict and violence, nuclear proliferation, forced migration, globalisation, and climate change are among the global issues violating children's rights to optimal survival and development. Child rights-based approaches will be required to enhance the response to the civil-political, social, economic, and cultural determinants of these

*Lancet Child Adolesc Health 2019*

Published Online

November 19, 2019

[https://doi.org/10.1016/](https://doi.org/10.1016/S2352-4642(19)30346-3)

[S2352-4642\(19\)30346-3](https://doi.org/10.1016/S2352-4642(19)30346-3)

- 1 Provide secure child friendly spaces for children to thrive (includes food security)**
2. Ensure a life free of poverty
3. Promote social inclusion and non discrimination
- 4. Address the effects oof social determinants of health (includes the CDoCAH)**
5. Respond to the increasing complexity of physical and mental health conditions
6. Respect changing family and community structures
- 7. Respond the effects of globalization and marketing on child health (includes the CDoCAH)**
- 8. Frame all public and private sector policies on child health policies (includes the CDoCAH)**
9. Create the opportunity for a life free of violence
10. Focus on pthe planetary effects of climate change on children's health

Source: The Lancet (2019) [https://doi.org/10.1016/S2352-4642\(19\)30346-3](https://doi.org/10.1016/S2352-4642(19)30346-3)

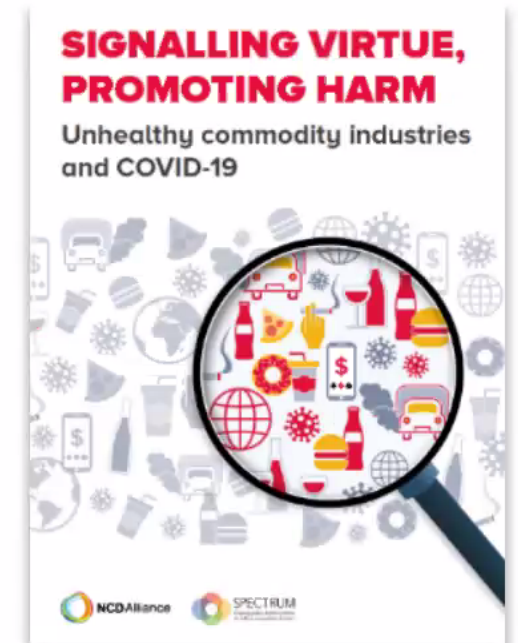
# NCDs are a political responsibility, not an individual choice

**An NCD response focused on equity requires...**

Calling for a comprehensive human-rights approach

Ensuring policy coherence to build systems that promote health, and not harm

Redressing outreach and power imbalances to protect communities



Should children be subject of rights or market commodities?



# Hands on

**What do we know?**

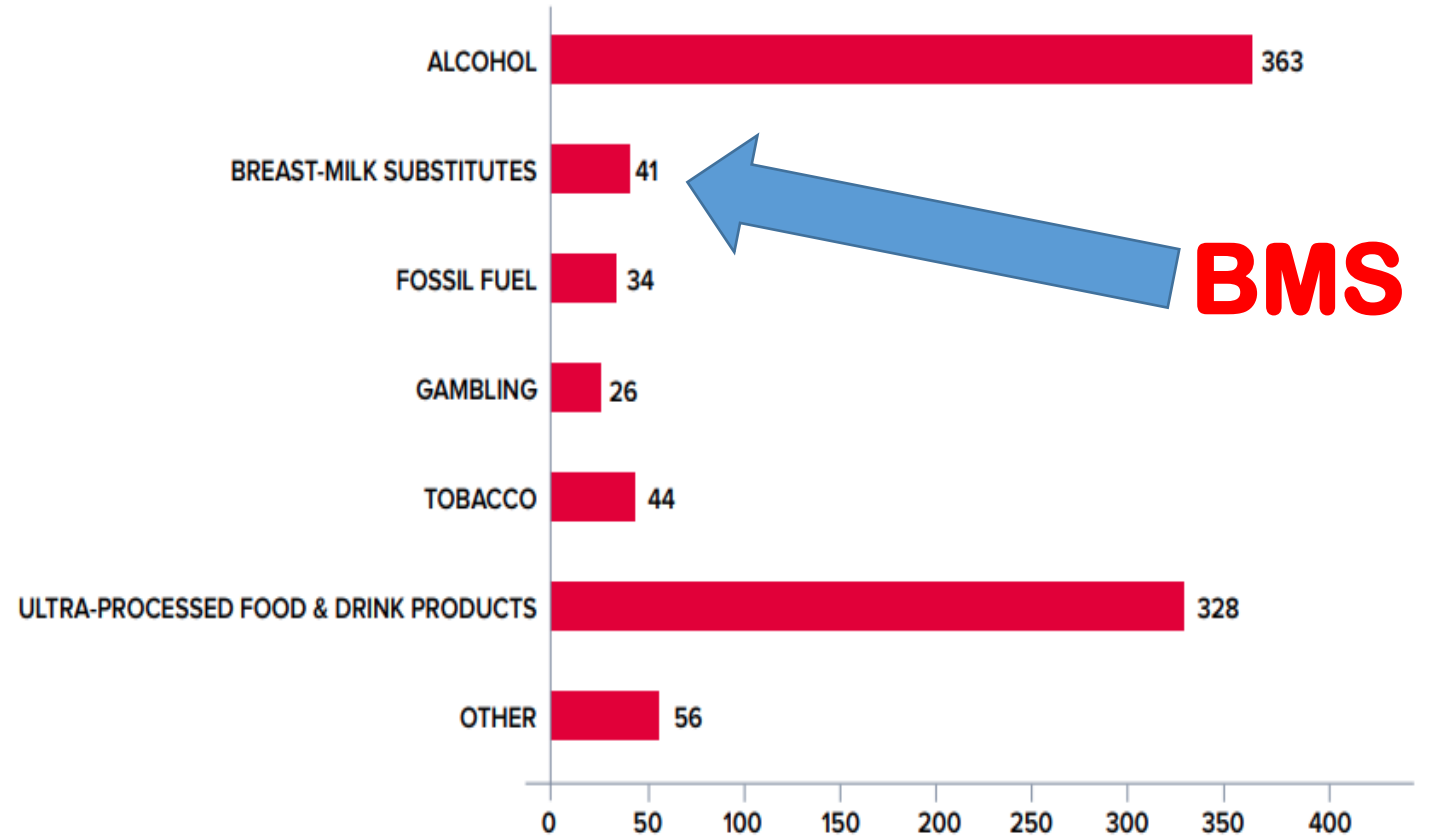
(A Latin American perspective)

# SIGNALLING VIRTUE, PROMOTING HARM

Unhealthy commodity industries  
and COVID-19



# Harmful consumption during COVID-19



# Consumption of Sugar Beverages in Mexico

- **Mexico** is among the countries with the highest consumption of sugary drinks in the world, with approximately **163 liters per person per year**.
- Beverages that contribute the highest energy intake in the Mexican population: **soft drinks, drinks made with fruit juices, fresh waters, whole milk and fruit juices**.
- More than half of the **boys and girls (54.6%) between the ages of 6 months and 2 years consume sugary drinks** and this is higher in rural areas (56.4%) than in urban areas (53.8%).
- Likewise, **92.9% of schoolchildren** consume sugary drinks.



# Food Insecurity and Obesity among Brazilian women and children (Life Course Approach)

- The weighted prevalence of any level of **food insecurity** among households with **children** was 48.6%
  - mild = 29.4%
  - moderate = 13.5%
  - severe = 5.7%



# ARGENTINA: Child food situation



ABRIL 2023

## Situación alimentaria de niños, niñas y adolescentes en Argentina

¿Dónde estamos y a dónde vamos?

SÓLO EL

20%

de las cantidades recomendadas de frutas y verduras consumen las niñas, niños y adolescentes.

Existe una amplia brecha entre su patrón alimentario actual y las recomendaciones de consumo.



MÁS DEL

35%

del aporte calórico diario de niños, niñas y adolescentes son productos ultraprocesados.

El alto consumo de estos productos atraviesa a toda la población infanto juvenil.

HAY

58%

más de probabilidad de malnutrición por exceso en los y las adolescentes de nivel socioeconómico más bajo respecto a los de nivel socioeconómico más alto.

La malnutrición por exceso se asocia a la pobreza en adolescentes de 13 a 17 años.

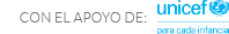


La malnutrición por exceso en adolescentes está en aumento en todos los grupos socioeconómicos. Al comparar dos momentos del tiempo (EMSE 2012-2018), se evidenció que el aumento en la prevalencia de malnutrición por exceso fue mayor en los niveles educativos bajo y medio respecto al alto.



# Impact of market regulation on burden of diseases

## ARGENTINA



# Hands on

What do we know? (A Latin American perspective)

**What do we do?**

# Knowledge generation

Commentary

BMJ Global Health

## Conflicts of interest are harming maternal and child health: time for scientific journals to end relationships with manufacturers of breast-milk substitutes

Catherine Pereira-Kotze <sup>1</sup>, Bill Jeffery <sup>2</sup>, Jane Badham,<sup>3</sup> Elizabeth C Swart <sup>4</sup>, Lisanne du Plessis <sup>5</sup>, Ameena Goga <sup>6,7</sup>, Lori Lake <sup>8</sup>, Max Kroon,<sup>9</sup> Haroon Saloojee <sup>10</sup>, Christiaan Scott <sup>11,12</sup>, Raul Mercer <sup>13</sup>, Tony Waterston <sup>14</sup>, Jeffrey Goldhagen <sup>15,16</sup>, David Clark,<sup>17</sup> Phillip Baker <sup>18</sup>, Tanya Doherty <sup>1,18</sup>

To cite: Pereira-Kotze C, Jeffery B, Badham J, et al. Conflicts of interest are harming maternal and child health: time for scientific journals to end relationships with manufacturers of breast-milk substitutes. *BMJ Global Health* 2022;7:e008002. doi:10.1136/bmjgh-2021-008002

Handling editor: Suye Abintola

Received 15 November 2021  
Accepted 24 November 2021

The promotion and support of breastfeeding globally is dwarfed by the USD \$57 billion (and growing) formula industry that engages in overt and covert advertising and promotion as well as extensive political activity to foster policy environments conducive to market growth.<sup>1</sup> This includes health professional financing and engagement through courses, e-learning platforms, sponsorship of conferences and health professional associations<sup>2</sup> and advertising in medical/health journals. These contribute to the overuse of specialised formulas<sup>3</sup> and inappropriate dissemination of health and nutrition claims.<sup>4</sup> Such 'medical marketing' reduces breastfeeding initiation, exclusivity, and duration, irrespective of country context.<sup>5</sup> It also creates a subtle, unconscious bias and conflict of interest

### Summary box

- ▶ Forty years after the World Health Assembly adopted the International Code of Marketing of Breast-milk Substitutes, inappropriate marketing of breast-milk substitutes persists and puts infants and young children at risk of malnutrition, illness and death.
- ▶ The formula industry is large and powerful and has used various 'medical marketing' strategies to influence scientists and health professionals as to the purported benefit of breast-milk substitutes.
- ▶ The examples provided in this commentary show how a manufacturer is using a leading scientific journal to market breast-milk substitutes through paid advertisements and advertisement features.
- ▶ By receiving funding from breast-milk substitute manufacturers, journals create a conflict of interest, whereby the publisher and readers of the journal may favour corporations consciously or unconsciously in

Commentary

BMJ Global Health

## Questioning the ethics of international research on formula milk supplementation in low-income African countries

Tanya Doherty <sup>1,2,3</sup>, Ingunn Marie S Engebretsen <sup>4</sup>, Thorkild Tylleskär,<sup>4,5</sup> Kathy Burgoine <sup>6</sup>, Anne Baerug,<sup>7</sup> Raul Mercer,<sup>8</sup> Phillip Baker,<sup>9</sup> David Clark,<sup>10</sup> Catherine Jane Pereira-Kotze <sup>2</sup>, Max Kroon<sup>3,11</sup>

To cite: Doherty T, Engebretsen IMS, Tylleskär T, et al. Questioning the ethics of international research on formula milk supplementation in low-income African countries. *BMJ Global Health* 2022;7:e009181. doi:10.1136/bmjgh-2022-009181

Handling editor: Suye Abintola

Received 25 March 2022  
Accepted 25 April 2022

Over the past three decades, the increase in funding for priority public health issues largely affecting low/middle-income countries (LMICs) has led to the growth in international research involving researchers or research sponsors from a high-income country (HIC) conducting research in LMICs. The ethical considerations in such international research were raised in the 1990s and several ethical guidelines specifically addressing international research were published.<sup>1-3</sup> However, in 2022, we still find examples of research undertaken by HIC principal investigators and funders, with no benefit and large potential for harm, being undertaken in LMICs.

A randomised controlled trial that began recruiting in February 2021 is nearing completion in Uganda and Guinea-Bissau<sup>4</sup> of formula supplementation of breastfed newborns for 30 days, beginning within 6 hours of birth. The primary objective of this trial is to evaluate the efficacy of formula supplementation among low birthweight (LBW) infants <2500 g <6 hours of age and those not LBW with weights <2500 g at 4 days of age. The trial compares breastfeeding and formula (up to 59 mL

### SUMMARY BOX

- ⇒ The increase in funding for priority public health issues largely affecting low/middle-income countries (LMICs) has led to the growth in international research involving researchers or research sponsors from a high-income country conducting research in LMICs.
- ⇒ Several ethical guidelines specifically addressing international research have been published, yet we still find examples of research undertaken by high-income country principal investigators and funders with no benefit and large potential for harm, being undertaken in LMICs.
- ⇒ In this commentary, we provide an example from a trial of formula milk supplementation in Uganda and Guinea-Bissau and outline ways in which this trial violates basic ethical principles and human rights and has zero potential for scale-up within the research settings.
- ⇒ Appropriate, safe and scalable alternatives to formula milk supplementation of low birthweight newborns should be prioritised including zero separation of mothers and newborns, lactation support and human milk banks.
- ⇒ We challenge LMIC institutional review boards, research funders, clinicians, scientists and governments to carefully consider potential maleficence, especially if an intervention is not scalable locally, and assume their responsibility to protect their cit-



# ADVOCATING FOR CHILDREN'S RIGHTS

## Briefing on Regulating Commercial Marketing for and to Children Committee of the Rights of the Child (United Nations)

Monday, 3 February 2020  
Palais Wilson, Geneva

**Dr Anshu Banerjee, Director, Department of Maternal, Newborn, Child and Adolescent Health and Ageing, WHO**  
**Dr Raul Mercer, Coordinator, Program of Social Sciences and Health, FLACSO, Argentina**  
**Dr Stefan Swartling Peterson, Chief of Health Section, Programme Division, UNICEF**

# Advocacy against marketing of BMS

## SAVE THE DATE

### MARKETING THE \$55 BILLION FORMULA MILK INDUSTRY

**WEDNESDAY 23 FEBRUARY 2022**

**EVENT 1**

10h00-11h30 CET/WAT (Geneva)  
14h30-16h00 IST (New Delhi)  
17h00-18h30 PHST (Manila)

REGISTER HERE

**EVENT 2**

08h00-09h30 PST (Vancouver)  
10h00-11h30 CST (Mexico City)  
11h00-12h30 EST (New York)

REGISTER HERE

**WATCH THE LIVE-STREAM HERE.**

for every child

Children in All Policies

\$55bn  
FORMULA MILK  
INDUSTRY

**JOIN US FOR THE VIRTUAL LAUNCH OF A NEW WHO-UNICEF REPORT.**

*How the marketing of formula milk influences our decisions on infant feeding.*

- Data from **8 countries**
- Insights from **8,500+ women**
- Views of **300+ health professionals**
- Actions to protect the **health and human rights** of children and women

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10h00-11h30 CST (Mexico City)  
11h00-12h30 EST (New York)

REGISTER HERE

**WATCH THE LIVE-STREAM HERE.**



**Save the dates**

**Expert Meeting on Harmful Commercial Marketing and Children's Health**

**Wednesday 01 December, Thursday 02 December & Friday 03 December 2021**  
12:00 - 15:00 GMT each day via Zoom

We invite you to an online expert meeting on harmful commercial marketing and its impact on the realisation of children's rights to health and wellbeing. This meeting is organised by Children in All Policies 2030 (CAP-2030), the World Health Organization, the Office of the United Nations High Commissioner for Human Rights, and UNICEF.

The aim of the meeting is to:

- Facilitate consultation on how to proceed with **strengthening a comprehensive global policy and regulatory response**, and
- Accelerate **rights-based efforts to reduce and eliminate harmful commercial marketing** to children and mitigate its impact on the enjoyment of their rights.

The impact on children from harmful marketing is a global, longstanding and growing problem. In 2020 the WHO-UNICEF/Lancet Commission published "A Future for the world's children", which examined the key challenges and barriers facing children's health, cited this issue as one of the most underappreciated threats to child health and wellbeing. Addressing commercial marketing to children, and mitigating its harmful impact, requires robust, sustainable and well-coordinated global and national efforts. We envisage that the meeting will provide a starting point to begin building a multi-sectoral coalition of partners committed to working together: sharing research, ideas, and insights to support solutions to the issue.

Days one and two of the meeting (Wednesday 1st and Thursday 2nd December) will be dedicated to hearing and discussing the **latest health evidence across a range of product areas**, examining the **child rights dimension** to the problem and the **current regulatory landscape**, and exploring steps to improve protection for children. The format will be a combination of short presentations and moderated discussions.

The final day, Friday 3rd December, will concentrate on discussing and agreeing on **key high-level approaches** needed through "small breakout groups". This will be followed by a plenary session to put these into a **roadmap for future action**.

To register your attendance please use [this link](#), and we will be in touch with further details.

**2030 Children in All Policies**

**World Health Organization**

**unicef**

**United Nations HUMAN RIGHTS OFFICE OF THE HIGH COMMISSORER**

**Expert Meeting on Harmful Commercial Marketing and Children's Health**

December 1-3, 2021  
12:00-15:00 GMT

Hyperlinked contents  
[click on each item to go to the relevant page](#)

[Zoom details](#)

[Key information](#)

[Background to the meeting and introduction to the roadmap framework](#)

Useful resources:

We have produced two short background reports on themes related to the meeting.

1. [The capture of child development knowledge by marketing companies](#)

## SAVE THE DATE

**#EndExploitativeMarketing**

### THE PROBLEM WITH THE FORMULA MILK INDUSTRY

**WEBINAR 01**

**AN UNHEALTHY INFLUENCE ON HEALTH PROFESSIONALS?**

**Thursday 8 September 2022**

**2:00-3:15pm BST (London)**

**WEBINAR 02**

**SHOULD HEALTH PROFESSIONAL ASSOCIATIONS REFUSE INDUSTRY FUNDING?**

**Thursday 29 September 2022**

**2:00-3:15pm BST (London)**

## Series

### Breastfeeding 1

**Breastfeeding: crucially important, but increasingly challenged in a market-driven world**

*Rafael Pérez-Escamilla, Cecilia Tomari, Sonia Hernández-Cordero, Phillip Baker, Aluisio J D Barros, Fra Laurence M Grummer-Strawn, David McCoy, Purnima Mehan, Paulo Augusto Ribeiro Neves, Ellen Ph Linda Richter, on behalf of the 2023 Lancet Breastfeeding Series Group\**

Lancet 2022; 401: 472-85  
Published Online February 7, 2023  
[https://doi.org/10.1016/S0140-6736\(22\)00332-6](https://doi.org/10.1016/S0140-6736(22)00332-6)  
See Comment page 415  
This is the first in a Series of three papers about breastfeeding. All papers in the Series are available at <https://www.thelancet.com/html/breastfeeding-2023>.  
\*Members listed at the end of this Series paper  
Department of Social and Behavioral Sciences, Yale School of Public Health, Yale University, New Haven, CT, USA (Prof R Pérez-Escamilla PhD); Johns Hopkins University School of Nursing, Baltimore, MD, USA (C Tomari PhD); Research Center

## Series

### Breastfeeding 2

**Marketing of commercial milk formula: a system parents, communities, science, and policy**

*Nigel Rollins, Ellen Plawo, Phillip Baker, Gillian Kingston, Kapono Mathwa Mahoso, David McCoy, Paulo Augusto Ribeiro Pérez-Escamilla, Linda Richter, Kathryn Russ, Gita Sen, Cecilia Tomari, Cesar G Victora, Paul Zambano, Gauri 2023 Lancet Breastfeeding Series Group\**

Lancet 2022; 401: 486-502  
Published Online February 7, 2023  
[https://doi.org/10.1016/S0140-6736\(22\)00334-6](https://doi.org/10.1016/S0140-6736(22)00334-6)  
See Comment page 415  
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\*Members listed at the end of this Series paper  
Department of Maternal, Newborn, Child and Adolescent Health and Aging, WHO, Geneva, Switzerland (Prof R Rollins PhD); Amagasaki, MD, USA (E Plawo PhD); Institute for Physical Activity and Nutrition,

## Series

### Breastfeeding 3

**The political economy of infant and young child feeding: confronting corporate power, overcoming structural barriers, and accelerating progress**

*Phillip Baker, Julie P Smith, Amandine Gaud, Laurence M Grummer-Strawn, Benjamin Wood, Gita Sen, Gerard Hastings, Rafael Pérez-Escamilla, Chae Yoo Ling, Nigel Rollins, David McCoy, on behalf of the 2023 Lancet Breastfeeding Series Group\**

Despite increasing evidence about the value and importance of breastfeeding, less than half of the world's infants and young children (aged 0-36 months) are breastfed as recommended. This Series paper examines the social, political, and economic reasons for this problem. First, this paper highlights the power of the commercial milk formula (CMF) industry to commodify the feeding of infants and young children; influence policy at both national and international levels in ways that grow and sustain CMF markets; and externalise the social, environmental, and economic costs of CMF. Second, this paper examines how breastfeeding is undermined by economic policies and systems that ignore the value of care work by women, including breastfeeding, and by the inadequacy of maternity rights protection across the world, especially for poorer women. Third, this paper presents three reasons why health systems often do not provide adequate breastfeeding protection, promotion, and support. These reasons are the gendered and biomedical power systems that deny women-centred and culturally appropriate care; the economic and ideological factors that accept, and even encourage, commercial influence and conflicts of interest; and the fiscal and economic policies that leave governments with insufficient funds to adequately protect, promote, and support breastfeeding. We outline six sets of wide-ranging social, political, and economic reforms required to overcome these deeply embedded commercial and structural barriers to breastfeeding.

## SAVE THE DATE

**#MarketingA\$55bnFormulaMilkIndustry**

### SAVE THE DATE

**WEDNESDAY 8 FEBRUARY 2023**

### THE 2023 LANCET SERIES ON BREASTFEEDING INCLUDING THE INFLUENCE OF COMMERCIAL MILK FORMULA MARKETING

Join Richard Horton, Editor in Chief – The Lancet and a panel of experts as they unpack a new 3-paper Lancet Series which explores how the value of breastfeeding is wasted by government and public health and exploited by the formula milk industry.

Breastfeeding is a collective responsibility and needs to be effectively protected, promoted and supported.

**LOCATION**  
London (Russel Square Area), UK

**WATCH TO LIVE-STREAM:**  
Further details to follow

**START TIME**  
12h30 UK  
13h30 CET

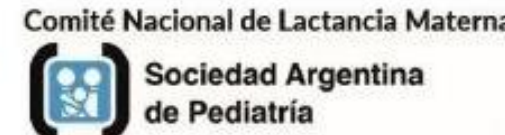
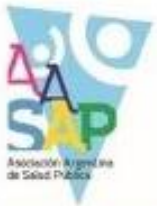
**END TIME**  
14h00 UK  
15h00 CET

# ARGENTINA

Bill based on the formation of alliances with community organizations

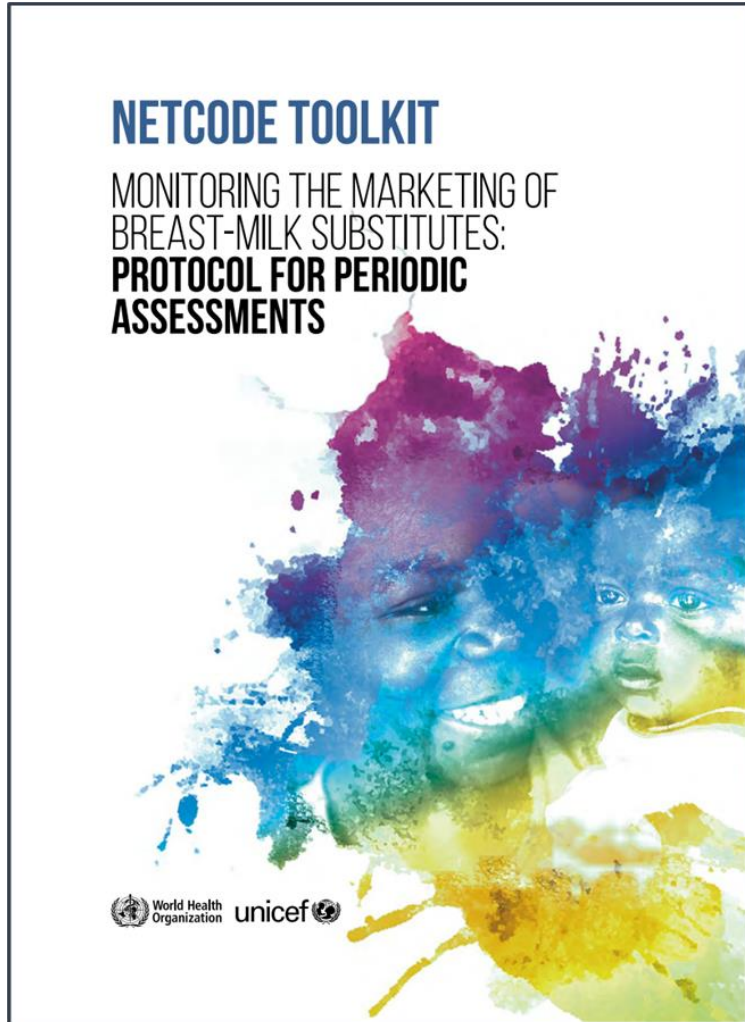
## REGULATION OF THE MARKETING OF HUMAN MILK SUBSTITUTES FOR THE PROTECTION OF BREASTFEEDING

Red por la Ley del Código



# Monitoring the International Code of Marketing of Breastmilk Substitutes

## Municipality of Malvinas Argentinas, Buenos Aires Province, Argentina



# Hands on

What do we know? (A Latin American perspective)

What do we do?

**What can be done at the community level?  
(discussion)**



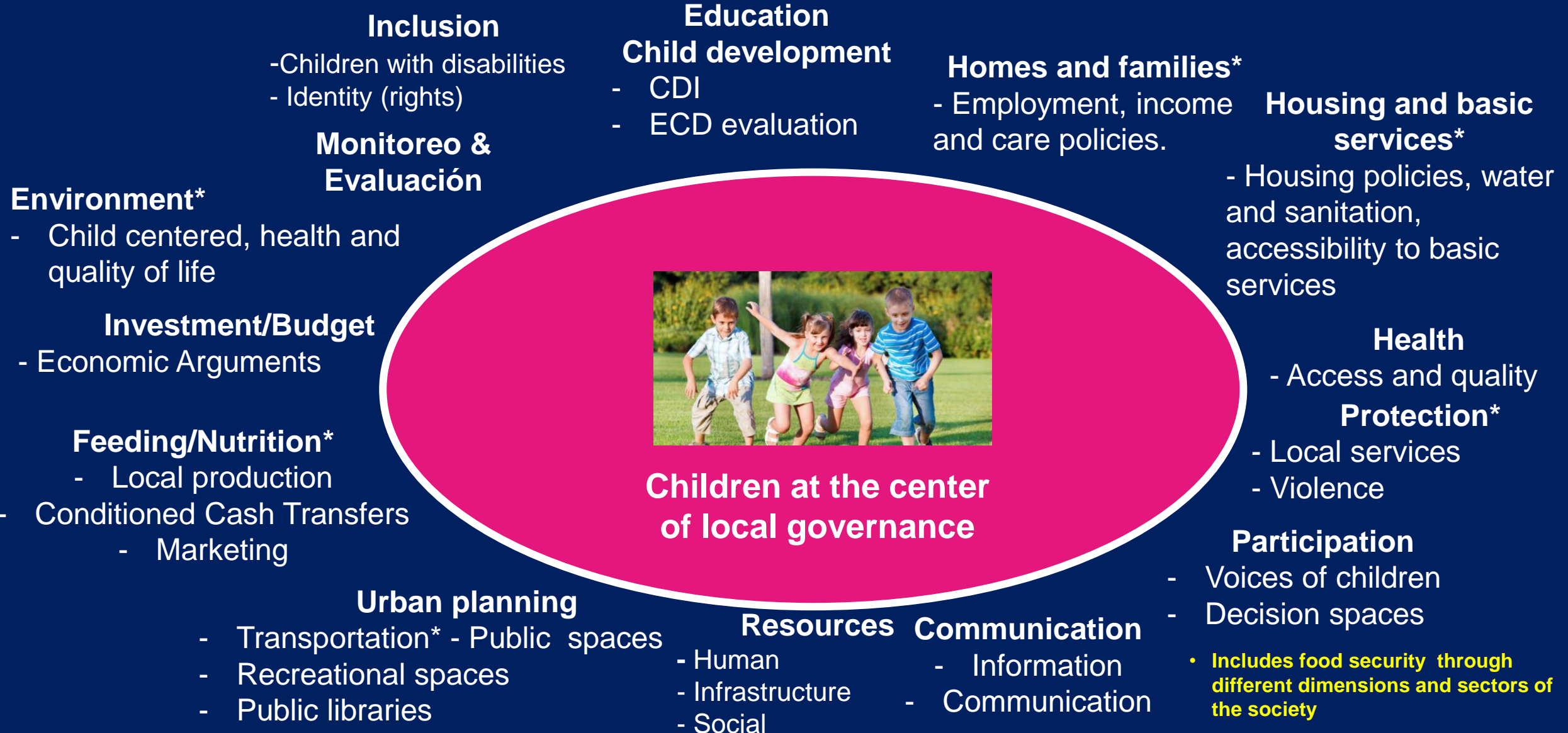
# What can be done at the community level?

- What are the most significant lessons learned from this activity?
- How important are commercial determinants of health (CDoCAH) for your practice in promoting child and adolescent health?
- What are the fields of intervention that you identify at the community level to mitigate the harmful effects of CDoCAH?

# CAP-2030 Argentina

Children in all Municipal Policies

**Gates of entrance at the community level to protect children from the impact of CDoCAH**



# Integration of theoretical approaches

## Life Course-Child Rights–Commercial Determinants of Health- Early Food Insecurity

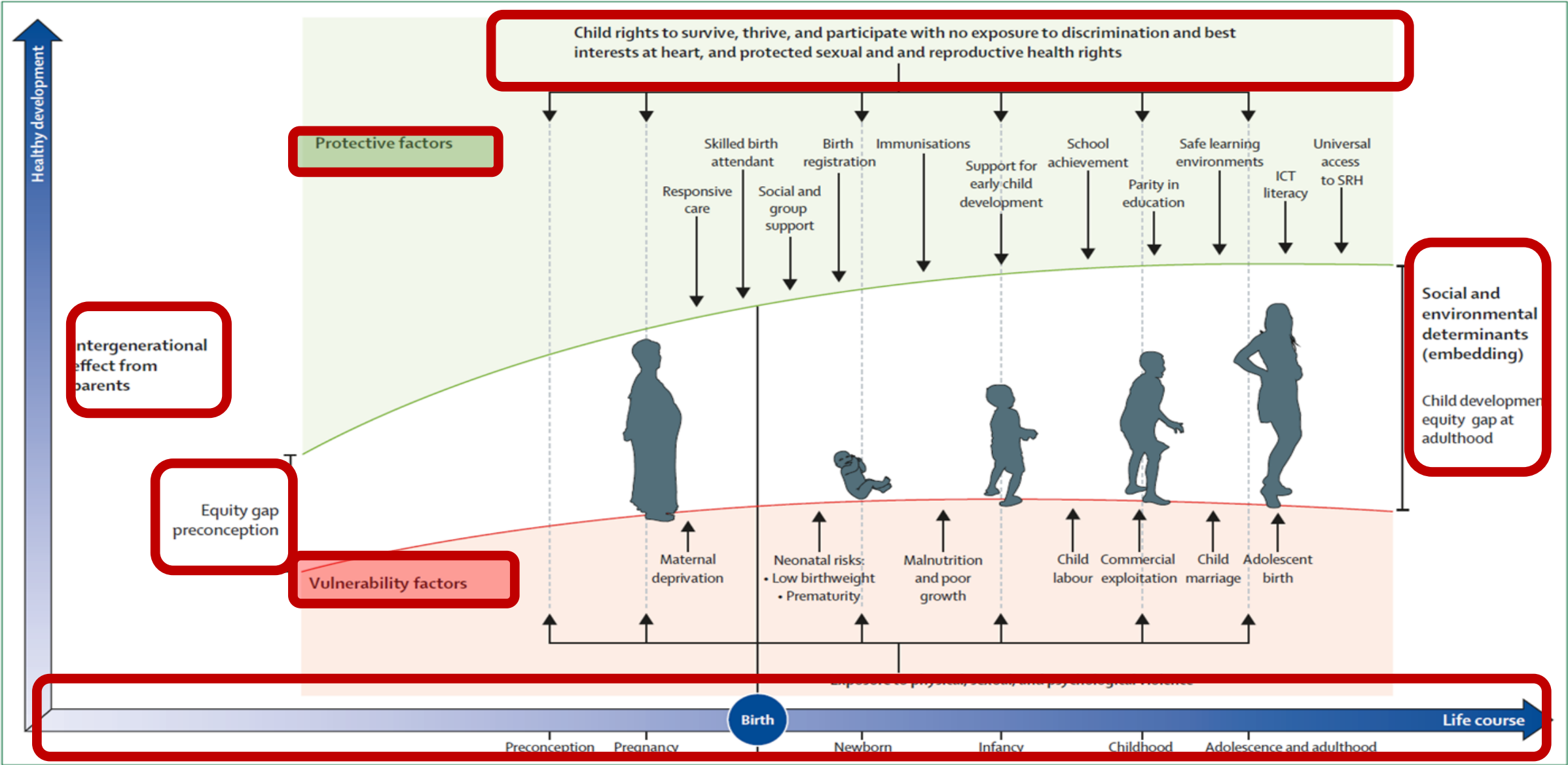


Figure 1: Sustainable Development Goals measuring protective and risk factors for child wellbeing across the life course  
 ICT=information communication technology. SRH=sexual and reproductive rights.

# *The* Commercial Determinants *of* Health

*Edited by*

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**Thank you**