

For Information
on 21 July 2014

Legislative Council Panel on Health Services

**The Draft Hong Kong Code of Marketing and Quality of
Formula Milk and Related Products, and Food Products for
Infants & Young Children:**

Results of Public Consultation and Way Forward

PURPOSE

This paper briefs Members on the results of the public consultation and the way forward for the Hong Kong Code of Marketing and Quality of Formula Milk and Related Products, and Food Products for Infants & Young Children (“the HK Code”).

BACKGROUND

2. The Administration has a long-standing commitment to protect, promote and support the optimal feeding of infants and young children. To protect breastfeeding and ensure safety and quality of food products for infants and young children, the Taskforce on Hong Kong Code of Marketing of Breastmilk Substitutes (“the Taskforce”) was set up in June 2010 under the Department of Health (“DH”) to develop and promulgate a code of marketing and quality of formula milk¹ and related products and food products for infants and young children, i.e. the HK Code. The HK Code aims to protect breastfeeding and to contribute to the provision of safe and adequate nutrition for infants and young children, based on adequate and unbiased information and through appropriate marketing.

3. Membership of the Taskforce comprises a multidisciplinary team drawn from community organizations, professional bodies, academia, and Government bureau and departments. In the course of drafting the code, the

¹ Formula milk includes infant formula and follow-up formula.

Taskforce held three meetings with representatives of six multinational formula milk companies to listen to their views. The Taskforce also made reference to the International Code of Marketing of Breastmilk Substitutes (“WHO Code”) adopted by the World Health Organization (“WHO”) in 1981, and relevant subsequent World Health Assembly (“WHA”) resolutions which clarified the WHO Code and sought to bring it up-to-date with scientific development and evolving marketing strategies. In addition, the Taskforce also considered the potential impacts of local marketing practices on parental attitudes and practices of feeding infants and young children, as well as the situation of lacking guidance on the composition and labelling of food products for children aged 36 months or below.

4. The Taskforce completed the drafting of the HK Code in October 2012. The draft HK Code comprises ten articles covering aim and scope, definitions, and specific requirements respectively on marketing, labelling and quality of designated products (i.e. formula milk, feeding bottles, teats and pacifiers, and food products) for infants and young children aged 36 months or below. Major provisions of the HK Code cover the dos and don'ts for the manufacturers and distributors of designated products in a wide range of areas including –

- (i) Promotional practices for designated products to the public;
- (ii) The production and distribution of informational and educational materials related to breastfeeding and formula milk feeding and nutrition to the general public, pregnant women and mothers;
- (iii) Promotion in health care facilities;
- (iv) The distribution of informational materials related to designated products to health workers, and the sponsorship of continuing education activities for health professionals;
- (v) Labelling for formula milk, food products for infants and young children and formula milk related products; and
- (vi) Quality standards of formula milk and food products for infants and young children.

A summary of the draft HK Code is at Annex I. To collect views from the public and stakeholders on the draft HK Code, the Taskforce had conducted a public consultation from 26 October 2012 until 31 December 2012. In order to facilitate more members of the public and interested organizations to express

their views, the consultation period was extended for two months till 28 February 2013.

FINDINGS OF THE PUBLIC CONSULTATION

5. Views and comments on the draft HK Code were received from a broad range of respondents of different sectors through various channels as summarized in the table below –

Sources of feedback	Number of responses / attendances at meetings		
Written submissions ²	Healthcare sector	55	158
	Trade ³	45	
	Public (including Consumer Council and community associations)	40	
	Non-governmental organizations (“NGOs”) on maternal and child welfare	11	
	Others ⁴	7	
Petition / standard-format letters	<ul style="list-style-type: none"> ● Three petitions organized respectively by two NGOs and a healthcare organization which collected a total of 2,012 individuals’ signatures in support of the draft HK Code ● One petition organized by the trade which collected 1,850 signatures opposing the draft HK Code ● 104 standard-format letters opposing the draft HK Code 		
Public opinion surveys	<ul style="list-style-type: none"> ● “Survey on Mothers’ Experience of Formula Milk Promotion and Information on Infant-and-Young-Child Feeding” conducted by the DH ● Six public opinion surveys conducted by academic institutions (commissioned by formula milk companies), magazine publishers and a community association 		
Public Affairs Forum	<ul style="list-style-type: none"> ● Fourteen responses collected from website of the Public Affairs Forum of the Home Affairs Bureau 		
Trade briefings, forum and meetings	<ul style="list-style-type: none"> ● Representatives of the DH attended seven sessions of trade consultations 		

² Include written comments submitted by deputations to the joint meeting of the Legislative Council Panel on Food Safety and Environmental Hygiene and the Panel on Health Services held on 20 November 2012.

³ Includes manufacturers and distributors of formula milk and related products and food products, advertising and marketing companies, media, press or magazine publishers and trade associations.

⁴ Include political parties and Consulate-Generals.

6. The following paragraphs give a brief account of the key views collected during the public consultation. A summary of comments on specific articles of the draft HK Code is at Annex II. All written submissions were uploaded to the website of the DH.

General views on the draft HK Code

7. Out of the 158 written submissions received, a total of 87 submissions indicated **support** to the draft HK Code as they considered the HK Code an important step to promote and protect breastfeeding and to ensure the quality and safety of infant and young child food products. They were mostly from the healthcare sector (53 out of 55 written submissions), NGOs and the general public. Among these supportive submissions, 58 written submissions, mainly from healthcare sector, NGOs and the Consumer Council, expressed **full support** to the draft HK Code.

8. 63 written submissions including those from the trade (43 out of 45 written submissions) on the whole **did not support** the draft HK Code and its provisions on marketing practices. The trade consistently reflected this opposing stance at the briefing sessions and meetings as well as their written submissions and petition.

Scope of products covered by the HK Code

9. The Consumer Council, UNICEF⁵ China, WHO Western Pacific Regional Office (“WHO WPRO”), two academic institutions, two health professional organizations, and seven NGOs strongly **supported** the proposed scope of the draft HK Code which covers designated products intended for infants and young children aged 36 months or below. They considered that covering designated products for such age group by the HK Code can maximize the health benefits of infants and young children in the early developmental stage by ensuring the safety and quality and the proper use of the designated products.

10. Most traders **counter-proposed a narrower scope** for the HK Code which should cover food products for infants aged six months or below on the grounds that the HK Code should align with the practices of some developed countries which only govern the marketing of breastmilk substitutes for infants up to six months of age.

⁵ UNICEF is the abbreviation of the United Nations Children’s Fund.

Restrictions over promotional practices for formula milk and related products

11. Views were **diversified** on the restrictions over the promotional practices for formula milk and related products proposed by the draft HK Code, ranging from full support (some even suggested tighter restrictions) to disagreed with any proposed restrictions. Details are summarized below –

(i) Supported the restrictions proposed by the draft HK Code

- Fourteen individuals / groups of health professionals and health professional organizations / academic institutions, five NGOs and a political party fully supported the draft HK Code's restrictions on the advertising of milk products for infants and young children aged 36 months or below. They commented that the overwhelming promotion and advertising of formula milk with exaggerated claims on health benefits would ultimately influence the consumers' choice in feeding their children. They also pointed out that a significant proportion of parents had misconceptions about formula milk being equally conducive to health as breastfeeding. They generally opined that the proposed restrictions can safeguard the health of infants and young children by enabling their parents to make fully informed choices without being influenced by misleading advertisement or promotional activities of formula milk and related products.
- As for the general public, among the 500 mothers interviewed by the "Survey on Mothers' Experience of Formula Milk Promotion and Information on Infant-and-Young-Child Feeding" conducted by the DH, about 64% accepted the proposed restrictions on advertising and promotion of formula milk provided that product information could be obtained on request. About 77% accepted that production and distribution of information materials on breastfeeding and formula feeding should be limited to non-commercial sources.

(ii) Suggested adopting a tighter approach

- Some respondents (e.g. UNICEF China, WHO WPRO, Consumer Council, an academic institution and four NGOs) proposed tighter restrictions on advertising and promotion. WHO WPRO and UNICEF China opined that company's trade mark or logo should not be displayed on the product's label as the trade mark or logo concerned may idealize the product.

- The Consumer Council, an academic institution and a NGO considered that restrictions on advertising and promotion should be extended to cover a wider scope of products, e.g. follow-up formula marketed for older children, picky-eating formula and food products for infants and young children, or even all formula milk and related products irrespective of age. In general, the idealization and promotion of these products as alternatives to a balanced diet were considered undesirable and would adversely affect the dietary patterns of children.
- UNICEF China, WHO WPRO and two NGOs commented that the draft HK Code should go further to restrict the sponsorship of research and educational activities by manufacturers and distributors of formula milk and related products.

(iii) **Suggested applying to lower age group**

- Four submissions (a health professional organization, a NGO and two political parties) proposed applying the restrictions on advertising and promotion to products for infants up to six months or 12 months old while, in parallel, regulating the claims and contents of promotional materials of products for children of older age group.

(iv) **Disagreed with restrictions proposed by the draft HK Code**

- The trade generally did not agree to the restrictions on advertising and marketing practices proposed by the draft HK Code. While supportive of the principles of regulating unethical marketing practices such as false or misleading health claims, they argued for a narrower scope that only formula milk for infants up to six months old should be subject to restriction on advertising and marketing practices. They objected to restricting the advertising and marketing practices for products for children aged six months to 36 months, claiming that no scientific evidence was available to demonstrate that advertising formula milk for children over six months old would undermine breastfeeding. They also opined that such restrictions would infringe consumers' right to access information for making informed choices on feeding their children, the trade's right to freedom of expression and the principle of free trade, in addition to the great economic burden imposed by such restrictions on the industry, especially for the small and medium companies. Some traders suggested that,

instead of developing a new marketing code, the Administration should strengthen the existing laws and / or their enforcement for the purpose of regulating the marketing of formula milk and related products. Furthermore, the trade commented that restrictions on the use of logos and trade marks might contravene international trade agreements regarding protection of intellectual property.

Control on labelling and quality standards

12. Twelve individual / groups of health professionals or organisations explicitly considered that it was appropriate for the HK Code to cover also labelling and quality standards to ensure the quality and safety of the designated products. Although the trade also considered labelling and quality standards important, they strongly requested to address these standards separately from the marketing code, and that legislation should be introduced for the former.

Implementation and monitoring

13. There was concern from all parties about the effectiveness of a voluntary HK Code. While there was a general call for legislation of the HK Code to ensure mandatory compliance, members of the trade advocated adopting a narrower scope for such legislation to cover only products for infants up to six months old. Some members of the Panel on Health Services also called for the introduction of legislation to specifically regulate the health claims made by formula milk advertisements.

Views on the promotion of breastfeeding

14. While the public consultation did not specifically solicit views on the promotion of breastfeeding, various sectors opined that a host of other actions, in addition to implementing the HK Code, should be taken to increase local breastfeeding rates. They suggested that the Government should take a leading role, secure sufficient resources and step up measures to promote and support breastfeeding.

RESPONSE TO VIEWS AND CONCERNS RAISED

15. Ample scientific evidence affirms that nutrition in early life not only impacts one's health in infancy and childhood but also one's future health in adulthood. Given the importance of nutrition on a child's health and

development, the Administration has prime responsibility in protecting children's rights to adequate and safe nutrition, as well as mothers' rights to breastfeeding and informed choices on infant feeding through access to unbiased information. Against this background, the Administration's responses to the major views collected during the public consultation are summarized in the following paragraphs.

Control on labelling and quality standards

16. In response to calls for more effective protection on the health of infants and young children under the age of 36 months, the Administration decided in August 2012 to introduce legislation to ensure that the relevant food products are properly labelled to reflect the values of important nutrients; and as far as infant formula is concerned, it must be nutritionally adequate. For that purpose, the Administration tabled the Food and Drugs (Composition and Labelling) (Amendment) (No.2) Regulation 2014 ("the Amendment Regulation") at the Legislative Council on 18 June 2014. The Amendment Regulation mandates nutritional composition requirements on infant formula, as well as nutrition labelling requirements of infant formula, follow-up formula and prepackaged food for infants and young children under the age of 36 months. Taking into consideration of the legislative amendments, the draft HK Code would need to be revised to remove the relevant provisions to avoid overlap with the Amendment Regulation.

Control on health and nutrition claims

17. In the public consultation as well as in the course of discussing the Amendment Regulation, there are calls for early regulation against exaggerated / non-evidence-based health and nutrition claims by legislation. Regulation of health and nutrition claims on formula products and prepackaged food for infants and young children under the age of 36 months is a complex and controversial issue. There is a lack of international consensus on the regulation of such claims at present. The Administration is currently studying the local and international situations, with a view to conducting a public consultation around end of 2014 on the regulation of health and nutrition claims on the products concerned. Since we will be dealing with the regulation of health and nutrition claims separately, we do not intend to incorporate in the HK Code specific measures on health and nutrition claims lest such specific measures may affect the imminent consultation exercise and the future legislative exercise in this respect.

Control on marketing

18. Although follow-up formula is often not explicitly promoted as a breastmilk substitutes and it may even be declared as not a breastmilk substitute or a breastmilk supplement, the promotion of follow-up formula in fact serves as de facto infant formula promotion through marketing practices that often use packaging, branding and labeling that closely resemble those of infant formula. In fact, a statement published by the WHO entitled “Information concerning the use of marketing of follow-up formula”⁶ underscored the need to regulate the marketing of follow-up formula. While the Government will continue and strengthen its effort to promote the benefits of breastfeeding (please refer to paragraph 20 below), the implementation of the HK Code is equally important to ensure that formula milk and related products would not be marketed in a way that may cause confusion and undermine breastfeeding. As mentioned in paragraph 4 above, to prevent aggressive marketing practices, apart from restricting promotion of formula milk and formula milk related product to the public, the draft Hong Kong Code also carries restrictions on –

- (i) information and education to the general public, pregnant women and mothers;
- (ii) promotion in health care facility; and
- (iii) information and promotion to health worker.

We will continue to work on finalizing the relevant provisions of the draft Hong Kong Code, taking into account views received from the public consultation and our subsequent discussions with various stakeholders.

Implementation and monitoring

19. As mentioned above, we will regulate the nutrition labelling and nutritional composition requirements with the introduction of the Amendment Regulation and will study the regulation of health and nutrition claims by legislation and take out the relevant provision from the HK Code. That said, the HK Code remains an important means governing marketing practices. We consider that the implementation of the HK Code on a voluntary basis is the first step in raising the awareness among the trade and the public about the importance for protection of breastfeeding and infant and young child feeding from undue commercial influence. Manufacturers and distributors of the relevant food products have the social responsibility to bring their own

⁶ The document entitled “Information concerning the use and marketing of follow-up formula” was issued by the WHO on 17 July 2013 (http://www.who.int/nutrition/topics/WHO_brief_fufandcode_post_17July.pdf)

marketing practices in line with the principles and aim of the HK Code. The Administration will work with the relevant NGOs to urge the trade to take the responsibility of monitoring its own marketing practices and will review the effectiveness of the voluntary HK Code.

Support for breastfeeding

20. The Administration is fully aware that a multitude of factors may affect the prevalence and duration of breastfeeding and is taking targeted actions accordingly with a view to promoting and strengthening support to breastfeeding. In this regard, the Administration is developing a comprehensive strategy comprising key actions on different fronts to promote, protect and support breastfeeding. While the HK Code targets at regulating marketing activities of formula milk and related products, other actions include implementing Baby Friendly Initiative in healthcare facilities; enhancing breastfeeding support in workplaces and public venues; and strengthening publicity and public education on infant and young child feeding are also important in cultivating breastfeeding as a social norm. In April 2014, the Administration set up the Committee on Promotion of Breastfeeding, chaired by the Under Secretary for Food and Health, to oversee and coordinate all these breastfeeding promoting and supporting activities to ensure their effective, sustainable and coordinated implementation.

WAY FORWARD

21. Taking into account the findings from the public consultation, the latest legislative exercise on the nutrition labelling and nutritional composition requirements as well as the plan to study the regulation of health and nutrition claims, the Administration will need to refine the draft HK Code such that it would not overlap with the legislation on labelling, quality and claims. We would also need to map out how best to take forward the HK Code in the light of the latest development on the legislative proposals. The Administration will announce the modified HK Code in due course.

ADVICE SOUGHT

22. Members are invited to note the content of this paper.

**Food and Health Bureau
July 2014**

The Hong Kong Code of Marketing and Quality of Formula Milk and Related Products, and Food Products for Infants & Young Children:

A summary

Full text available from www.fhs.gov.hk

Article	Major Provisions
1. Aim	The Code aims to contribute to the protection of breastfeeding and provision of safe and adequate nutrition for infants and young children.
2. Scope	<p>The Code applies to the following designated products for infants and young children aged between 0-36 months:-</p> <ul style="list-style-type: none"> ▪ Infant formula ▪ Formula milk related products: Feeding bottles, teats and pacifiers ▪ Follow-up formula ▪ Food products for infants and young children
3. Definitions	Terms used in the Code are defined.
4. Information and Education (to the general public, pregnant women and mothers)	<p>Manufacturers and distributors (M&Ds) of designated products should not:-</p> <ul style="list-style-type: none"> ▪ perform or sponsor educational functions ▪ produce, distribute or sponsor the production and distribution of informational and educational materials on breastfeeding and formula milk feeding and nutrition. <p>Informational and educational materials on infant-and-young-child feeding and nutrition (produced or distributed by parties other than M&Ds of designated products) should not refer to brand names of products or names of M&Ds and should explain the relevant points about breastfeeding, complementary feeding, formula feeding and bottle feeding as specified.</p> <p>Product Information about formula milk, feeding bottles, teats and pacifiers could be obtained from websites of M&Ds, retailers or health care facilities on request.</p>
5. Promotion to the Public	<p><u>For formula milk, feeding bottles, teats and pacifiers:-</u></p> <ul style="list-style-type: none"> ▪ No promotional practices should be allowed <p><u>For food products for infants and young children:-</u></p> <ul style="list-style-type: none"> ▪ Advertising is allowed but not in health care facilities ▪ Free samples are allowed but not in health care facilities <p><u>For all designated products:-</u></p> <ul style="list-style-type: none"> ▪ No activities involving infants, young children, pregnant women and mothers of children aged 36 months or below, e.g. baby crawling competition, mothers' clubs; nor the seeking of personal information of such persons
6. Promotion in Health care facilities	<p>M&Ds of designated products should not:-</p> <ul style="list-style-type: none"> ▪ offer free or low-cost supplies of designated products ▪ provide equipment, gifts or samples ▪ promote or distribute products to any person via health workers / health care

Article

Major Provisions

facilities.

7. Information and Promotion to Health Workers

Informational materials about products provided by M&Ds should be limited to scientific and factual matters.

M&Ds may provide products to health workers only for the purpose of professional evaluation or research at the institutional level.

Sponsorship of Continuing Medical Education Activities

- M&Ds should exert no influence on the choice of speakers, topics to be discussed and sponsorship recipients.
- Any interest in relation to M&Ds should be disclosed.
- Promotional activities should be avoided within the conference venue.

8. Labelling

For formula milk and food products for infants and young children:-

The label should not create an impression that the product is equivalent to, comparable with or superior to breastmilk or breastfeeding.

Product labels should meet relevant requirements of existing regulations (in Cap 132W) and satisfy an additional list of conditions to ensure clear information to and safe use of the product by the public.

Five representations as specified in Article 8.5.3 are permitted, provided that they have not placed any special emphasis on the high content, low content, presence or absence of energy or a nutrient contained in the product.

Nutrition claims and health claims should not appear except:-

- for food product for infants and young children (but not infant formula or follow-up formula), nutrition claims in relation to sodium, sugars, vitamins and minerals, which are permitted by a recognized international/ national authority and the relevant claim condition(s) are complied with
- for follow-up formula and food products for infants and young children (but not infant formula), health claims which are permitted by a recognized international/ national authority and based on current relevant scientific substantiation, and that the claim condition(s) and the exact claim statement set by the concerned authority are complied with

For formula milk and related products (feeding bottles, teats and pacifiers):-

The container or label should not contain photograph, drawing or graphic representation other than for illustrating methods of preparation.

Product labels of formula milk, feeding bottles and teats must clearly state breastfeeding as the norm of infant feeding, the need for the advice of a health professional before the use of formula milk and the health hazards of its use.

Article	Major Provisions
9. Quality Standards	All products should be of a high quality and comply with relevant Codex standards. For nutritional composition of follow-up formula and food products for infants and young children, the requirements by recognised international or national authorities should be complied with if Codex standards are not followed, provided that following such standard(s) will not pose public health risk to the local population.
10. Implementation and Monitoring	<p>A combination of active and passive approach is adopted to monitor the compliance with the HK Code by M&Ds.</p> <p>The active approach consists of surveillance and regular surveys to look for non-compliance. The passive approach relies on receiving complaints from members of the public. In the case of a substantiated complaint, an advisory letter to the M&D involved and its parent company will be issued. Statistics on compliance with the HK Code by M&Ds will be published periodically.</p> <p>M&Ds themselves are also responsible for monitoring their marketing practices according to the principles and aim of the HK Code.</p>

[Although every effort has been made to ensure that the contents of this sheet are an accurate summary of the Code, no express or implied warranty is given as to the accuracy of the information set out in this sheet.]

**Taskforce on Hong Kong Code of Marketing of Breastmilk Substitutes
October 2012**

**The Draft Hong Kong Code of Marketing and Quality of
Formula Milk and Related Products, and Food Products for Infants & Young Children (the HK Code)**

Summary of Key Concerns and Suggestions on Specific Articles

Article 2: Aim and Scope

Concern and / or suggestion	Respondent ^{a, b, c}
<p>View:</p> <ul style="list-style-type: none"> ▪ <i>Supported the proposed scope covering products intended for infants and young children 0 – 36 months because coverage of products for such age group can maximize the health benefits of the infant and child in the early developmental stage by ensuring the safety and quality and the proper use of these food products.</i> 	<p><u>Healthcare sector</u> Organisation: HKCCM, HKSPaedR, UNICEF & WHO, CU Paed, HKU Paed</p> <p><u>Public</u> Organisation: CC Individual: 2</p> <p><u>NGOs</u> LLLHK, Save the Children, HKCBF, BFHIHK, HKSPC, ACA, ACC</p>
<p>More stringent requirement:</p> <ul style="list-style-type: none"> ▪ <i>Suggested HK Code to cover a wider scope of products, e.g. follow-up formula marketed for older children, picky-eating formula, maternal formula and food products for infants and young children, or even all formulas and related products irrespective of age, because the idealization and promotion of these products as alternatives to a balanced</i> 	<p><u>Healthcare sector</u> Organisation: CU Paed</p> <p><u>Public</u> Organisation: CC Individual: 1</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Concern and / or suggestion	Respondent ^{a, b, c}
<i>diet were considered undesirable and adversely affecting the dietary patterns of children.</i>	<u>NGOs</u> BFHIHK
Less stringent requirement: <ul style="list-style-type: none"> ▪ <i>Suggested to narrow down the scope of the products to mainly cover 0 – 6m or 0 – 12m products because:</i> <ul style="list-style-type: none"> i) <i>Regulating products up to 3 years old is controversial, and it is not in line with that of WHO code or international practice</i> ii) <i>Follow-up formula is recognized as a complementary food</i> 	<u>Healthcare sector</u> Organisation: HKMA, HKSPaedC <u>Public</u> Individual: 6 <u>Trade</u> OMHK , HKGCC , Friseland, Celki, Hutchsion, Heinz, LikeLike, Idworks, Amcham, Data, Publicis , Nestle, Abbott, Snow, HKSA, APIYCNA, Wyeth, Foodmate, HKIYCNA, MJ, Trade, Danone, Carat, Tung Chit Hong, Mayborn, HKGCPL

Article 4: Information and Education (to the general public, pregnant women and mothers)

Concern and / or suggestion	Respondent ^{a, b, c}
Concern: <ul style="list-style-type: none"> a) <i>Suggested more channels to I&E materials or organise activities on infant and young child feeding by the Government.</i> 	<u>Healthcare sector</u> Organisation: HA Individual: 2 <u>Public</u> Organisation: CC

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Concern and / or suggestion	Respondent ^{a, b, c}
<p>More stringent requirement:</p> <p>a) <i>extend the ban on I&E materials or activities to include father;</i></p> <p>b) <i>extend the ban to any I&E function in relation to pregnant women and mothers of infants and young children;</i></p> <p>c) <i>extend the ban to any I&E function related to infant and young child feeding.</i></p> <p>d) <i>product information should be provided to healthcare professionals only</i></p>	<p><u>Healthcare sector</u> Organisation: UNICEF_WHO</p> <p><u>NGOs</u> BFHIHK, World Vision</p>
<p>Less stringent requirement:</p> <p>a) <i>Scientific substantiated “Health claims” should be allowed in the product information</i></p> <p>b) <i>M&D’s company name, logo or trademark should be allowed in the I&E materials and product information.</i></p>	<p><u>Trade</u> amcham, Gordon, Nestle, Abbott, HKIYCNA, MJ</p>

Article 5: Promotion to the Public

Concern and / or suggestion	Respondent ^{a, b, c}
<p>More stringent requirements:</p> <p>a) <i>Prohibit M&Ds to conduct all activities irrespective of the purpose.</i></p> <p>b) <i>Extending the restriction on collecting personal details or inviting participation of activity to include “father”.</i></p>	<p><u>Healthcare sector</u> Organisation: UNICEF_WHO</p> <p><u>NGOs</u> World Vision</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Concern and / or suggestion	Respondent ^{a, b, c}
<p>Less stringent requirement:</p> <p>a) <i>Allow advertising of 6 – 36 months products with regulation of content, e.g. develop guideline on advertising and marketing, include compulsory statement on breastfeeding, censorship mechanism to evaluate and authorize claims.</i></p> <p>b) <i>Strengthen existing relevant laws to regulate marketing of formula milk and related products</i></p> <p>c) <i>Allow M&Ds to organise mother’s club activities, invite participation of these activities with consent and distribute free samples.</i></p> <p>d) <i>The use of sales inducement devices, e.g. sales discount, special sales, in-store consumer offers and displays, coupons, etc. should be allowed.</i></p>	<p><u>Healthcare sector</u> Organisation: HKCOG, HKMA Individual: 1</p> <p><u>Public</u> Individual: 19</p> <p><u>NGOs</u> AAF</p> <p><u>Political Parties</u> DAB, DP</p> <p><u>Trade</u> OMHK, Comerife, Manning, Wellcome, Friseland, Hutchsion, LikeLike, Idworks, BOM, amcham, cPRt, NSHK, i-Cable, BB care, Nestle, Abbott, HKSA, Wyeth, TVB, HKIYCNA, Eugene, MJ, Trade, Danone , Carat, HKAA, Tung Chit Hong, Kodomo, Mayborn, HKRMA</p>
<p>e) <i>Suggest restricting the promotion of bottles and teats the same as food products, but free samples are not allowed. Bottles and teats are ordinary baby products and breastfeeding mothers also need them to feed baby with expressed breastmilk.</i></p>	<p><u>Healthcare sector</u> Organisation: HA , HKU O&G</p> <p><u>Trade</u> Mayborn</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Article 6: Promotion in Health Care Facilities

Concern and / or suggestion	Respondent ^{a, b, c}
<p>Concern:</p> <p>a) <i>Affect the autonomy of private practices on decision making.</i></p> <p>b) <i>Healthcare professionals are able to judge the content and quality of information obtained.</i></p> <p>c) <i>It is difficult to implement the requirement of not providing products below “80 percent of the retail price”.</i></p>	<p><u>Public</u> Individual: 1</p> <p><u>Trade</u> LikeLike, Idworks, BOM, Nestle, HKIYCNA</p>
<p>More stringent requirement:</p> <p>b) <i>Public hospitals should charge parents for supply of formula milk and no brand name (of the formula milk) should be printed on the milk bottle.</i></p>	<p><u>Trade</u> HSH</p>
<p>Less stringent requirement:</p> <p>a) <i>Allow samples of special formula.</i></p> <p>b) <i>Allow free or low-cost supply of milk product to charitable organisations for orphans and the poor.</i></p>	<p><u>Healthcare sector</u> Organisation: PolyU Nursing, HKMA</p>

Article 7: Information and Promotion to Health Worker

Concern and / or suggestion	Respondent ^{a, b, c}
<p>Concern:</p> <p>a) <i>Suggest more training and resources to support health care professionals to promote and support breastfeeding.</i></p>	<p><u>Healthcare sector</u> Organisation: HKCPaed, HKPF & HKPS, CSHK, HKPNA, HKMA, HKNA Individual: 2</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Concern and / or suggestion	Respondent ^{a, b, c}
	<p><u>Public</u> Individual: 2</p> <p><u>NGOs</u> LLLHK, BFHIHK</p>
<p>Concern:</p> <p>b) <i>The new code will affect sponsorship for CME activities.</i></p> <p>c) <i>Have reservation about the prohibition of commercial exhibits of designated products.</i></p>	<p><u>Healthcare sector</u> Organisation: HKSPaedR Individual: 1</p>
<p>More stringent requirement:</p> <p>a) <i>Do not allow M&Ds to give any sponsorship or financial benefits to health workers.</i></p> <p>b) <i>Any obvious or vague images of product names, brand names or trademarks should not be used in the printed materials or backdrop.</i></p>	<p><u>Healthcare sector</u> Organisation: UNICEF & WHO</p> <p><u>Public</u> Individual: 1</p> <p><u>NGOs</u> LLLHK, BFHIHK, World Vision</p>
<p>Less stringent requirement:</p> <p>a) <i>As the sponsor, M&Ds should be allowed to recommend the topics and speakers.</i></p> <p>b) <i>The disclosure requirements or process are rather complicated. Suggest streamline.</i></p> <p>c) <i>Company names and/or brand names in printed materials and in backdrops should be allowed to acknowledge the sponsors.</i></p>	<p><u>Trade</u> Hutchison, Nestle, MJ</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Article 8: Labelling

Concern and / or suggestion	Respondent ^{a, b, c}
<p>Concern:</p> <ul style="list-style-type: none"> ▪ <i>The regulation of marketing, and labeling & composition should be addressed separately.</i> 	<p><u>Political parties</u> DAB</p> <p><u>Trade</u> Friseland, Amcham, Nestle, Abbott, Snow, HKSA, APIYCNA, Wyeth, HKIYCNA, MJ, Trade , Danone, HKGCPL</p>
<p>More stringent requirement:</p> <ul style="list-style-type: none"> a) <i>Should not allow the display of company logo or trademark.</i> b) <i>Health warnings and important notice should be conspicuous and readable.</i> 	<p><u>Healthcare sector</u> Organisation: UNICEF & WHO</p> <p><u>NGOs</u> Save the Children</p>
<p>Less stringent requirement:</p> <ul style="list-style-type: none"> a) <i>The restriction on use of graphics, company logo or trademark was too stringent & contravened international conventions and treaties regarding the protection of intellectual property.</i> b) <i>Concerns about the content, use and presentation of “important notice” & “warning statement”.</i> c) <i>Nutrition claim authorized by international regulatory authorities should be allowed for infant formula.</i> d) <i>Declaration of satisfying Codex standards is not necessary and may not be useful to the consumer.</i> e) <i>Concern about the recommendation of using water not less than 70°C for preparing feeds</i> f) <i>Packaging with smaller surface areas and products with small volume of sales should be exempted.</i> 	<p><u>Healthcare sector</u> Organisation: HA</p> <p><u>Trade</u> Manning, Fonterra, Wellcome, LikeLike, Idworks, amcham, Nestle, Abbott, Snow, HKSA, Easy, Wyeth, HKIYCNA, MJ, Natural, Danone</p> <p><u>Consulate-General</u> NZ</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Article 9: Quality Standards

Concern and / or suggestion	Respondent ^{a, b, c}
<p>Concern:</p> <p>a) <i>Apart from Codex standards, other internationally recognized standards should be allowed for infant formula.</i></p> <p>b) <i>The requirement of “recognized national or international authority” is unclear.</i></p> <p>c) <i>The details of the requirement for composition and safety for each specific product should be elaborated by taking reference from international regulations and the Codex standard.</i></p>	<p><u>Healthcare sector</u> HA</p> <p><u>Trade</u> Nestle, HKIYCNA, MJ</p> <p><u>Consulate-General</u> NZ</p>

Article 10: Implementation and Monitoring

Concern and / or suggestion	Respondent ^{a, b, c}
<p>Suggestion on monitoring:</p> <p>a) <i>Ensure the monitoring mechanism is independent and free from commercial influence.</i></p> <p>b) <i>More appropriate sanction (e.g. disclose name of non-compliance) should be imposed.</i></p> <p>c) <i>Complaint procedure should be convenient, user-friendly and ensure the complainant’s confidentiality.</i></p> <p>d) <i>Suggest testing nutrient content of formula milk and examining the health claims periodically.</i></p>	<p><u>Healthcare sector</u> Organisation: HKCPaed, HKPF & HKPS, CSHK, PolyU Nursing, HKSPaedR, DCP_HKPS, HKSNE, HKPNA, FMSHK, UNICEF & WHO, PPBHK, HKNA, HKU Paed Individual: 1</p> <p><u>Public</u> Organisation: CC Individual: 4</p> <p><u>NGOs</u> LLLHK, Save the Children, BFHIHK, AAF, ACA</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Concern and / or suggestion	Respondent ^{a, b, c}
	<p><u>Political Parties</u> DP</p> <p><u>Trade</u> Amcham, BOM, Snow, Wyeth</p>
<p>Suggestion on implementation: a) <i>Should have a plan of legislate the HK Code.</i> b) <i>There should be publicity and training programmes on the HK code.</i></p>	<p><u>Healthcare sector</u> Organisation: HKCPaed, HKSPaedR, UNICEF & WHO, CU Nursing, HKSNE, CNHK, HKSPaedC, HKNA, OU Nursing, HKU Paed Individual: 2</p> <p><u>Public</u> Organisation: CC Individual: 5</p> <p><u>NGOs</u> LLLHK, Save the Children, HKCBF, BFHIHK, AAF, HKSPC, ACA, ACC, HKBFMA, HKCCR</p> <p><u>Political Parties</u> DAB, CP, DP</p> <p><u>Trade</u> Manning, Wellcome, Friseland, Amcham, i-Cable, Publicis, Nestle, Abbott, HKSA, APIYCNA, Easy, Wyeth, HKIYCNA, MJ, Trade, Danone, Carat, HKGCPL</p> <p><u>Consulate-General</u></p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

Concern and / or suggestion	Respondent ^{a, b, c}
c) <i>Implement the code in phases and allow adequate grace period.</i>	<p>Netherlands</p> <p><u>Healthcare sector</u> Organisation: HA</p> <p><u>Public</u> Organisation: CC Individual: 5</p> <p><u>Trade</u> Fonterra, Wellcome, HSH, Hutchison, Abbott, Snow, Easy, Natural</p> <p><u>Consulate-General</u> NZ</p>

Note:

^a No. of written submission comprised of 147 written submissions received by the Taskforce Secretariat and submissions of 11 deputations attending 20 Nov 2012 Legco Joint Meeting, without further submission to the Taskforce Secretariat.

^b No. of written submission by sectors: Health = 55 (include 45 organisations); Public = 40 (include 3 organisations); NGOs = 11; Political Parties = 3; Trade = 45; Consulate-General = 4.

^c Abbreviations of the organisations and no. of individuals giving the responses are listed in the table. Each respondent may give one or more than one of the views listed under each theme.

A List of Written Submissions with Abbreviations

I) Written Submissions received by the Taskforce Secretariat

	Abbreviations	No. of Submissions
The Health Sector (Health)		
A. Individuals		12
B. Organizations		40
1. Association of Hong Kong Nursing Staff	AHKNS	
2. College of Nursing, Hong Kong	CNHK	
3. Division of Clinical Psychology, Hong Kong Psychological Society	DCP_HKPS	
4. Hong Kong College of Community Medicine	HKCCM	
5. Hong Kong College of Paediatricians	HKCPaed	
6. Hong Kong College of Radiologists	HKCR	
7. Hong Kong Dietitians Association Ltd	HKDA	
8. Hong Kong Midwives Association	Midwives	
9. Hong Kong Nutrition Association	HKNA	
10. Hong Kong Paediatric Foundation and the Hong Kong Paediatric Society	HKPF_HKPS	
11. Hong Kong Paediatric Nurses Association	HKPNA	
12. Hong Kong Society for Nursing Education	HKSNE	
13. Hong Kong Society of Paediatric Cardiology	HKSPaedC	
14. Hong Kong Society of Paediatric Respiriology	HKSPaedR	
15. Hospital Authority	HA	
16. Matilda Hospital	MIH	
17. Midwives Council of Hong Kong	MWCHK	
18. Nursing Council of Hong Kong	NCHK	

19. Occupational Therapists Board	OT Board	
20. Pharmacy and Poisons Board Hong Kong	PPBHK	
21. Physiotherapists Board	PT Board	
22. School of Nursing, The Hong Kong Polytechnic University	PolyU Nursing	
23. School of Nursing, University of Hong Kong	HKU Nursing	
24. The College of Surgeons of Hong Kong	CSHK	
25. The Dental Council of Hong Kong	DCHK	
26. The Federation of Medical Societies of Hong Kong	FMSHK	
27. The Hong Kong College of Community and Public Health Nursing	HKCCPHN	
28. The Hong Kong College of Family Physicians	HKCFP	
29. The Hong Kong College of Obstetricians and Gynaecologists	HKCOG	
30. The Hong Kong College of Orthopaedic Surgeons	HKCOS	
31. The Hong Kong Medical Association	HKMA	
32. The Hong Kong Society for Public Health Nursing	HKSPNH	
33. The Hong Kong Society of Diagnostic Radiologists	HKSDR	
34. The Medical Council of Hong Kong	MCHK	
35. The Nethersole of Nursing, The Chinese University of Hong Kong	CU Nursing	
36. The Open University of Hong Kong, the Nursing Team	OU Nursing	
37. The Pharmaceutical Society of Hong Kong	PSHK	
38. The Provisional Hong Kong Academy of Nursing	HKAN	
39. Dept of Obsetrics & Gynaecology, University of Hong Kong	HKU O&G	
40. UNICEF and WHO	UNICEF_WHO	
Subtotal (1)		52
The Public, the Consumer Council and Community Associations (Public)		
A. Individuals		37
B. Organizations		2

1. Consumer Council	CC	
2. New Century Forum	ncforum	
Subtotal (2)		39
Non-governmental Organisations (NGOs)		
1. Baby Friendly Hospital Initiative Hong Kong Association	BFHIHK	
2. Hong Kong Catholic Breastfeeding Association	HKCBF	
3. La Leche League Hong Kong	LLLHK	
4. The Association for the Advancement of Feminism	AAF	
5. Save the Children UK	Save the Children	
6. World Vision Hong Kong	World Vision	
Subtotal (3)		6
Political parties (PP)		
1. Democratic Alliance for the Betterment and Progress of Hong Kong	DAB	
2. The Civic Party	CP	
3. The Democratic Party	DP	
Subtotal (4)		3
Trade & Trade representatives (Trade)		
1. Abbott Laboratories Limited	Abbott	
2. Asia Pacific Infant & Young Child Nutrition Association	APIYCNA	
3. Baby Planner	Baby	
4. BB Care	BB care	
5. BOM CITY LIMITED	BOM	
6. Carat Media Services Hong Kong Ltd	Carat	
7. Celki Medical Hong Kong	Celki	
8. Comerife International Limited	Comerife	
9. Council of Public Relations Firms of Hong Kong	cPRt	

10. Danone Baby Nutrition	Danone	
11. Datatrade Limited	Data	
12. Easy Win & Co	Easy	
13. Eugene Group	Eugene	
14. Fonterra Brands (Hong Kong) Limited	Fonterra	
15. Foodmate Limited	Foodmate	
16. FrieslandCampina (Hong Kong) Limited	Friseland	
17. Gordon (A distributor of milk Power brand)	Gordon	
18. Heinz Hong Kong Limited	Heinz	
19. Hin Sang Hong Company Limited	HSH	
20. HK Suppliers Association	HKSA	
21. Hong Kong Cable Enterprises Ltd	i-Cable	
22. Hong Kong General Chamber of Commerce	HKGCC	
23. Hutchison China Meditech Limited	Hutchsion	
24. Idworks Design Limited	Idworks	
25. Kodomo Communication Limited	Kodomo	
26. Likelike Communications	LikeLike	
27. Manning	Mannings	
28. Mead Johnson Nutrition (Hong Kong) Limited	MJ	
29. Natural Alliance Co., Ltd.	Natural	
30. Nestle Hong Kong Limited	Nestle	
31. Ogilvy and Mather HK	OMHK	
32. Product Marketing Mayborn Ltd	Mayborn	
33. Publicis Hong Kong	Publicis	
34. Snow Brand Hong Kong Co Ltd	Snow	
35. Television Broadcasts Limited	TVB	

36. The American Chamber of Commerce in Hong Kong	amcham	
37. The Dairy Farm Company Ltd - Wellcome	Wellcome	
38. The Hong Kong Advertisers Association	HKAA	
39. The Hong Kong Infant and Young Child Nutrition Association	HKIYCNA	
40. The Newspaper Society of Hong Kong	NSHK	
41. Tung Chi Hong (HK) Ltd	Tung Chit Hong	
42. Wyeth Nutrition / Pfizer Corporation (Hong Kong) Limited	Wyeth	
43. 嬰幼兒奶粉、食品等及相關業界成員聯署信	Trade	
Subtotal (5)		43
Consulates-General		
1. Agriculture Trade Office, American Consulate General Hong Kong	US	
2. Consulate General of the Kingdom of the Netherlands	Netherlands	
3. European Union	EU	
4. New Zealand Consulate-General	NZ	
Subtotal (6)		4
Grand total		147

II) A List of 11 Deputations with written submissions to the LegCo Health Panel and without further submission to the Taskforce Secretariat*:

	Abbreviations
The Health Sector (Health)	
1. Department of Paediatrics, Faculty of Medicine, The Chinese University of Hong Kong	CU Paed
2. Department of Paediatrics and Adolescent Medicine, Li Ka Shing Faculty of Medicine, University of Hong Kong	HKU Paed

3. The Society of Hospital Pharmacists of Hong Kong	SHPHK
The Public, Consumer Council & Community Associations (Public)	
4. The Lion Rock Institute	Lion
Non-governmental Organisations (NGOs)	
5. Against Child Abuse	ACA
6. Hong Kong Breastfeeding Mothers' Association	HKBFMA
7. Hong Kong Committee on Children's Rights	HKCCR
8. Hong Kong Society for the Protection of Children	HKSPC
9. The Alliance for Children's Commission	ACC
Trade & Trade representatives (Trade)	
10. Hong Kong General Chamber of Pharmacy Limited	HKGCPL
11. Hong Kong Retail Management Association	HKRMA

*Written submissions from these 11 organisations were analysed together with the 147 received by the Taskforce Secretariat.