



Consultation on "Hong Kong Code of Marketing and Quality of Formula Milk and Related Products, and Food Products for Infants & Young Children"

to: hkcode@dh.gov.hk,

31/12/2012 09:48

From:

To:

To: Dr. Shirley Leung
The Secretariat Office
Taskforce on Hong Kong Code of Marketing of Breastmilk Substitutes
Family Health Services, Department of Health
Room 1308, 13 Guardian House, 32 Oi Kwan Road
Wan Chai, HONG KONG

From: Sammy CHENG, Ph.D.
Chairperson, Division of Clinical Psychology
Hong Kong Psychological Society
Room 705, United Building, 17-19 Jubilee Street, Central, Hong Kong

31 December 2012

Dear Dr. Leung,

Thank you for your letter dated 26 October 2012 on the above-captioned. Our Division has invited the major stakeholders and colleagues in our field for comment, but received no objection on the draft HK Code.

Happy New Year!

Best regards,

Sammy Cheng, Ph.D.



DIVISION OF CLINICAL PSYCHOLOGY

The Hong Kong Psychological Society

香港心理學會臨床心理學組

<http://dcp.hkps.org.hk>



The Secretariat Office

Taskforce on Hong Kong Code of Marketing of Breastmilk Substitutes

Family Health Services, Department of Health

Room 1308, 13 Guardian House, 32 Oi Kwan Road

Wan Chai, Hong Kong

The Division Committee

Division of Clinical Psychology

Hong Kong Psychological Society

Room 705, United Building, 17-19 Jubilee Street, Central, Hong Kong

27 February 2013

Dear Sir/ Madam,

Re: A Response to “The HK Code”

We write in response to your invitation to comment on the consultation paper, “The Hong Kong Code of Marketing and Quality of Formula Milk and Related Products, and Food Products for Infants & Young Children” (The HK Code), dated 26 October 2012.

2. In recent decades, there have been considerable amount of evidence pointing to the significant role of breastfeeding to play in public health, particularly the salutary health outcomes in term of the physical and psychological aspects for babies and mothers in the short and long runs. In this response, from our professional perspective and concern, we would like to (a) summarize some of these outcomes, (b) highlight the challenges of practicing breastfeeding in Hong Kong, and finally (c) offer our specific views in the measures pertinent to the promotion of breastfeeding and the use of formula milk.

3. Breastfeeding presents clear short-term benefits for child health, mainly protection against morbidity and mortality from infectious diseases. Level I evidence such as meta-analyses suggest that breastfeeding could have long-term benefits. Subjects who were breastfed experienced lower mean blood pressure and total cholesterol, as well as lower prevalence of overweight/obesity and type-2 diabetes. Furthermore, breastfed subjects tended to have better cognitive and motor development as shown with better performance in intelligence and motor tests. Besides, with the close attachment in breastfeeding between mothers and infants, subsequent better social and emotional developments were observed as compared to the counterpart. On the other hand, mothers, who do not practice breastfeeding or wean prematurely, appear to have higher health risks in various diseases including breast cancer, ovarian cancer, obesity, type-2 diabetes, metabolic syndrome, and cardiovascular diseases.

4. Nevertheless, mothers in Hong Kong face challenges in initiating and sustaining breastfeeding practice owing to various reasons including maladaptive belief, potentially misleading commercial advertisement related to breastfed substitutes, socio-environmental constraints, low self-efficacy in breast-feeding, individual's mental health, and other factors. We agree with the assertion that promotion of breastfeeding should focus on reducing the unfavorable socio-environmental hurdles rather than individual blames. We believe more education on the positive outcomes of breastfeeding to the general public, health professionals, and mothers as well should be continued. Easily accessible support should also be given to mothers with mental distress, biological factors, or skill deficits that pose difficulties in initiating and sustaining breastfeeding.

5. To promote breast-feeding practice in Hong Kong, some specific measures are listed as follows: a) multiple ways that target to various age strata to *normalize* breastfeeding as the sole choice for feeding healthy newborn babies should be systematically publicized; b) develop an acceptable monitoring and sanction mechanism to ensure compliance of the Breastfeeding Code; c) promote and launch the Global Strategy for Infant and Young Child Feeding advocated by WHO; d) liaise with employers to facilitate a supportive environment and norm for breastfeeding mothers; e) incorporate breastfeeding education in secondary school curriculum; f) increase

accessibility to service and support mothers with mental health distress, biological limitation, and skills deficits directly or indirectly related to breastfeeding.

6. Besides, the consultation paper has aptly highlighted the potential conflict of interest of health professionals including clinical psychologists in providing expert opinions on formula milk product, while they might be receiving financial and non-financial incentives at the same time from the concerned manufacturers and distributors. We opine it is important for the professional groups to draw members' attention to the HK Code. As psychologists, we are aware of the powerful influence of repeated appearance of commercials on consumer decision. As such distorted health messages in the advertisement can affect one's health belief and practice, we fully endorse the specific measures in controlling the commercial promotion of formula milk proposed in the paper.

7. In sum, we acknowledge that the HK Code is one of the first and important steps in promoting breastfeeding practice in Hong Kong. Both the long-term policies and short-term measures should be strategically developed and put into practice with concerted efforts under the leading influence of the Government and the persistent participation of the stakeholders, should we intend to realize a successful breastfeeding promotion and cultural practice in Hong Kong.



Dr. Sammy Cheng
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