

MINUTES

INTERNATIONAL NESTLE BOYCOTT COMMITTEE

November 20, 1979

Interchurch Center

475 Riverside Drive

New York

Tim Smith, director of the Interfaith Center on Corporate Responsibility, chaired the meeting. After brief introductions, Doug Johnson, national chair of INFAC, outlined events of the WHO/UNICEF meeting on Infant and Young Child Feeding held October 9-12 in Geneva. An informal summary of his statement is attached.

After Doug's summary, the implications of the WHO meeting were discussed by others who attended the meeting. 1) The credibility of ICCR/INFAC group was high as a result of thorough homework. For the first time, consumer-activist groups were accepted as equals in a high level international meeting. 2) There emerged a strong consensus by non-industry delegates supporting effective measures to curb formula promotion. Dr. Halfdan Mahler referred to this "spirit of the meeting" in his press conference following the meeting. 3) Industry, through press releases and subsequent statements, has assumed a deliberately ambiguous position regarding specific recommendations from the WHO meeting. They wish to avoid making specific commitments at this time, hoping to negatively impact the process of code development. Their strategy is to re-interpret, re-define and qualify WHO statements in whatever way possible in order to maintain and justify their present practices. 4) The burden of proof has shifted from the critics to industry among the international health community. 5) A new working partnership developed between consumers and scientists at this meeting. 6) The development of the new International Baby Food Action Coalition was energizing and encouraging. Joint strategies will be planned in the future and communication processes between groups were improved.

Responding to the report, a request was made to find an "unimpeachable assessment" of the WHO meeting from an independent source to be used for constituency education. Because Nestle, especially, has been quick to distribute their interpretation of WHO events and results, decisions are being made on that basis. It is our responsibility to circulate counter-interpretations as soon as possible. There was also a brief discussion on the implications of the WHO recommendations for U.S. health policy.

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In Canada, it has not been difficult to refute the Nestle position by contrasting "agreement" to practice, by citing the need for monitoring and enforcement procedures, and disclosing Nestle's failure to agree to negotiate.

Research Report

Doug Clement, staff member of INFACT clearinghouse, presented a well-documented report on his recent research done in Tanzania, Kenya, South Africa and Botswana. The text of his report is available from national INFACT.

Negotiation Team Report

After the September meeting of this group, several people gathered to develop a proposal concerning a unified negotiating team to represent all participants in the International Nestle Boycott Committee. They proposed a nine member team of the following composition: INFACT-2, ICCR-1, National Council of Churches Coordinating Council for Hunger Concerns-2, National Catholic Coalition for Responsible Investment-1, labor-2, and women's organizations-1. Dou Johnson, Lois Happe, Colleen Shannon-Thornberry, Neill Richards, Regina Murphy, Horace Sheffield and George Robinson have been asked to serve on the team. The representative from the women's groups is not yet determined.

→ will be Gene Corea, for NWHN (Exec. Comm. app'd Dec '79)

A representative from Canada, who will be named by the Canadian caucus shortly, was added to the team at the request of the Canadian organizations. It is their preference to co-operate with this group rather than initiate separate negotiations with Nestle.

The letter that was sent to Nestle September 22 described the composition of the International Nestle Boycott Committee and requested a negotiation session with them after the WHO meeting. The letter was co-signed by Doug Johnson and Lou Knowles.

Nestle's response, written by Earnest Saunders, was to hide behind the WHO process and to discuss specifics. It appears Nestle's strategy is to avoid specific commitments now so that if the Code is weaker than the WHO recommendations they will not have to change policies. They are avoiding discussion with groups who are in a position to know what occurred at Geneva. In selective situations and in private meetings, Nestle is approaching individuals and groups for discussion.

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An example is the planned reunion of the church group invited to Vevey in April. Invitees who did not accept the invitation will be given the opportunity to join the group again. It may be Nestle's attempt to circumvent appointed negotiators and to claim they are in dialogue with American Church leaders.

A discussion of the status of the boycott and the necessity for its continuation was the first item on the agenda after a brief break. Lou Knowles chaired the meeting.

Status of the boycott

The importance of communication, interpretation and education of constituencies was emphasized. Requests for concise interpretive material were made.

There is no evidence to warrant consideration of a change of status for the boycott. The difference between company statements and behavior is still great. Getting a signed agreement that reflects the verbal implications being made is a long way off. Without a monitoring system to measure actual change in behavior, dismantling the boycott would be fool-hardy.

Boycott Affirmation

The group affirmed the following summary statement: The Nestle boycott must continue until the specific demands are met through negotiation. An effective monitoring system is a necessary component to an agreement.

In answer to a question about the content of the negotiations, it was reiterated that the INFAC demands are the basis of discussion. Clarification of the Nestle response to the WHO meeting would be a by-product of the sessions since the substance of the recommendations is compatible with the demands.

Negotiation Strategies

The following strategies were discussed and agreed upon by the group.

1. A letter to Nestle would be written, stating that our differences were not resolved at Geneva. The status of the negotiation team would be clarified.

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2. After Nestle responds, if again negative, a letter from each of the heads of endorsing organizations would be sent to Nestle to affirm the responsibilities of the negotiating team.
3. Explore with WHO the possibility of having a WHO observer at a negotiation session. This could be used as a point of information to Nestle and a way of taking the initiative.
4. Attempt to impact the Vevey reunion.
 - a. Try to have meeting cancelled by having participants recognize the negotiating team as the proper point of contact.
 - b. If meeting is held, try to get statement from participants affirming the role of the negotiating team.
 - c. Try to get a representative of the negotiating team there.

General Campaign Strategies

To make the campaign stronger and more visible, several strategies were proposed.

1. Publicity to interpret the continuation of the boycott.
 - a. Internal communication networks should be utilized for increased level of education.
 - b. A press conference, held in Washington, D.C. or New York, should be held soon to publicize Nestle's refusal to negotiate. The team plus a public figure should be present.
 - c. To publish a full page ad in the New York Times about the refusal to negotiate, we should begin looking for appropriate funding sources.
 - d. A loan of a press person to do media follow-up on WHO is needed.
 - e. All press and media contacts should be exploited for coverage.
 - f. A suggestion was made to get the issue into the political campaigns in the next year.
2. Specific campaign activities
 - a. Support for public hearings is needed. The House Subcommittees should schedule hearings early 1980 on Dellums-Miller bill.
 - b. Stouffers' offering: cancellations have a measurable impact.
 - c. Pursue the possibility of ministers' lawsuit.
 - d. Help with the continuous need for information from Third World.

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- e. Update materials like filmstrips for constituency use.
- f. Need for contacts in other organizations.
- g. Free funds for internal promotion of the boycott or contribute to INFACT's budget.

It was agreed to call the group the International Nestle Boycott Committee. Participation could be expanded to include representatives from professional associations and regional groups. We will reconvene on February 14 at 475 Riverside Drive to report on the status of the negotiations and the legislative hearings.

National INFACT Conference will be March 7-9 in Washington, D.C.



INFACT

INFANT FORMULA ACTION COALITION

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INFANT FORMULA MARKETING IN AFRICA, 1979

(Excerpts from a talk to the International Nestle Boycott Committee by Douglas Clement, November 21, 1979.)

The Nestle Boycott and the overall infant formula campaign have always depended on current and accurate information on company practices overseas. Communication with missionaries, health professionals and others in the Third World have helped to provide this information, but at critical points in the campaign it has been necessary to send investigators to different areas of the Third World to carry out short research programs. One such critical point was the WHO/UNICEF Meeting on Infant and Young Child Feeding, and it was with this meeting in mind that INFACT and ICCR, with very generous support from the Board of Global Ministries of the United Methodist Church, funded my four months of research in Tanzania, Kenya, South Africa and Botswana in mid-1979.

Although aspects of infant formula marketing in all four countries deserve special attention, I will confine my remarks to just two, in the interests of time. A longer report will soon be available from the INFACT Clearinghouse.

Kenya

One visits Kenya in 1979 with the hope that the scenes of Bottle Babies, filmed in 1975, are no longer a reality. One is quickly disappointed. "This problem is an old one and a very serious one in that it has caused many many deaths," I was told by one of Nairobi's eminent paediatricians, "The problem persists. Indeed, I would estimate that it is getting worse. Deaths continue to rise from gastro-enteritis related to bottle-feeding." Diarrhea and vomiting due to unsafe bottle-feeding are so common now that doctors have coined the word "chupaitis" to describe it. In Swahili, "chupa" means bottle.

And there can be little wonder that artificial feeding problems are serious in Kenya. In Mathare Valley, Nairobi's largest squatter area, a National Council of Churches of Kenya nutritionist recently surveyed 150 homes. 148 of them had

at least one baby bottle. If the residents of the Valley were rich, such widespread bottle-feeding might be excusable, but the common denominator of families here is extreme poverty. Homes are made of mud, cardboard, sticks and plastic. Garbage fills the streets. Clean water is sold once a day but most people prefer to use the river because it is free. The river is one of the main sewage outlets for metropolitan Nairobi.

Despite this abject poverty, shops in and around Mathare Valley do a steady trade in infant formula. Lactogen sells best, according to shopkeepers. Of the eight young mothers I spoke with, six of them formula fed their babies, five of them used Lactogen. As one proud mother who began bottle-feeding at 3 weeks told me "Lactogen gives my baby strength!"

I had heard similar words from a government nutritionist who explained, "Mothers think these formulas give their babies power and strength. The concept of strength comes from the advertising. Big, bouncy babies. They just have to look at the pictures on the tins. They all think its the best." The reality, of course, is quite different. One recent study in Thika, Kenya, found that diarrhea among bottle-fed infants was four times more frequent than among the breastfed. Over half the bottle-fed infants were fed Lactogen.

And undernutrition from over-dilution of formulas is inevitable in Kenya where proper formula feeding would take at least 40% of the minimum wage. In contrast, Kenya's Breastfeeding Information Group estimates that good nutrition for a lactating woman would cost just 5% of minimum wage.

But bottle-feeding is on the rise. The employment of women outside the home is an undeniable reason for the popularity of bottle-feeding, but doctors and nutritionists with whom I spoke felt that commercial promotion was at least as crucial a factor. Every mother discharged from the maternity unit of a Nairobi private hospital receives a free sample of Nestle, Abbott/Ross, Wyeth or Cow & Gate formula. With its cans of formula, Nestle supplies a glass feeding bottle labeled "Nestle's Nan." Wyeth distributes its Swahili promotional booklets through Nairobi baby shops - the slogan: "SMA, the nearest approach to mothers milk." Maternity wards, nurses offices and antenatal clinics of every Nairobi hospital display company posters and calendars. And nurses at one Nairobi hospital admitted that Wyeth gave them 100 shilling gift certificates each Christmas and donated medical equipment as well.

Even rural hospitals receive free samples and posters. A health worker from Kakamega Provincial Hospital writes "There is a great deal of Nestle advertising throughout the hospital under the guise of posters and calendars, etc. Also, the weight record charts in the MCH clinics are free, courtesy of Nestle, and that

gets in more advertising." A nutritionist who visits rural health centres reported "The companies go around and give free samples to health centres en masse, store-fuls of tins of Lactogen. It takes a very enterprising and committed nurse to say no to this. But we must say no!"

In 1979, Nestle and Abbott both provided financial support to the Kenyan Paediatric Association for conferences and dinners at which the companies exhibit their formulas. And free supplies of formula to doctors and nurses who have babies is very common. The matron of Kenyatta National Hospital told me she believed it was this kind of pressure from formula salespeople that persuaded nurses to put up Nestle posters even though they were prohibited in the hospital.

In all fairness to Nestle, they have stopped the radio advertising of Lactogen that used to be so prevalent. But they've substituted ads for Cerelac and Nestum, which together accounted for 5% of all radio advertising in the first half of 1979. Almost two-thirds of this was on Swahili radio. A marketing consultant explained this change to me:

These foods are all tied together by the Nestle name - that's how they're promoted. Therefore, if Cerelac is promoted by the media so is Lactogen even if its not mentionned by name. By advertising on Swahili radio, they're aiming at the mass market, not just the high income.

What of the other changes made by Nestle, Wyeth and other members of ICIFI? A Nairobi paediatrician commented, "The ICIFI code is rubbish. It's weak and it hasn't been followed....The Code has had no impact on the health of our babies." The tragedy of Bottle Babies will not soon leave Kenya.

South Africa

"The greatest cause of disease in the first year of life is artificial feeding."

Dr. Walter Loening, a paediatrician at the University of Natal thus summarized the magnitude of the bottle-feeding problem in South Africa. Many would consider South Africa to be a "developed" country and therefore discount the hazards of infant formula promotion. But among the black population that comprises 70% of the total, the infant mortality rate is about 130 deaths per 1000 live births, a rate about six times higher than the white IMR and comparable to rates found in many African nations. Poverty, lack of clean water and low levels of education are the norm for most South Africans and an unfortunate swing towards bottle-feeding has exacerbated the health problems associated with such conditions.

A 1977 survey in Soweto, South Africa's largest black township, showed that 28% of mothers never started breastfeeding and 81% of them had at least two feeding

bottles, but only 23% of them cleaned bottles properly. A full third of the families existed below the government defined poverty line.

Dr. A.R. Watson studied the infant feeding practices of Black mothers visiting King Edward Hospital two years ago to find that 42% of babies under one month were bottle-fed solely or partially. Between 2 and 3 months, 51% were solely bottlefed. And of 4 month olds, only 11% were exclusively breastfed. Surprisingly, he found that only 7% of these mothers bottlefed because they were working. Dr. Watson concluded:

"Why is bottlefeeding so popular, especially when the products used are prohibitively expensive for a largely poverty-stricken community and instructions for use are in foreign languages (Afrikaans and English)? I would suggest that its popularity is largely due to advertising, particularly over that powerful medium, the radio. However much the promoters over artificial fees may precede their sales talks with statements that breastfeeding should be the first choice, the damage is easily done in a population which particularly equates obesity in children with health."

But radio advertising is only one method of promoting infant formula use. Nestle and Wyeth, with 70% and 20% of the total market, have advertised in "You and Your Baby" booklets, distributed throughout the country in 1979, printed in 7 different languages of South Africa. The ads show fat black babies and cans of Lactogen, SMA and S-26.

As recently as Fall, 1979, both companies continued to support "Beautiful Baby Shows" in both black and white areas. One Soweto nurse who entered her baby in a Nestle baby show in 1979 said judges showed little interest in her baby because it wasn't formula fed. Formula promotion at these events "is not subtle at all. They really push it," she reported. Wyeth spends \$25,000 annually advertising S-26 in women's magazines, as recently as October 1979, and Nestle spends \$150,000 on mass media advertising of Nespray, considered a "baby feed" by Nestle. Both Wyeth and Nestle claimed to have stopped all these sorts of promotion in 1978.

Equally effective has been company promotion to retailers. A Wyeth ad reads "SMA and S-26; Good for Babies. Good for Profits. So Its Good for You!" An April 1979 Nestle ad describes "What the biggest name in infant feeding can mean to your profits" and explains that a full range of promotional methods is used by Nestle to ensure that Lactogen will remain "your number 1 profit generator." Both ads ran in magazines for black businessmen throughout nations of Southern Africa, aimed at the mass market.

But promotion to and through the health services with milk nurses and free samples, etc., is the critical part of the sales effort. Nestle has 50 milk nurses in South Africa, 25 white and 25 black. Wyeth has 10. Dressed in uniforms they

teach mothers about infant care and their company's products. They also hand out promotional literature and free sample cards to each mother. The latter, which can be redeemed at pharmacies or by mailing them in, are an excellent way of subverting the South African code of ethics which prohibits free sample distribution directly to mothers. Last year, Nestle spent \$200,000 on free samples alone.

Doctors and nurses are also promotional targets of the companies. Nestle regularly pays for flights of doctors and health educators to domestic and overseas conferences, as recently as September 1979. Both Nestle and Wyeth donate medical equipment and help underwrite medical congresses for doctors, medical students and nurses. Wyeth paid for the paediatrics textbooks for students at the University of Natal in 1979 and Nestle provides annual awards for the best paediatrics students in South Africa.

Such efforts buy good will for the companies and minimize criticism -- they also enlist doctors as unwitting salespeople. As Dr. H.W. Kanis, medical superintendent of Madwaleni Hospital in the Transkei observed "There is an intense and sustained campaign especially by Nestle to promote artificial feeding wherever possible....it is quite sad to see how the companies like Nestle have had such an easy job to use doctors for their promotional activities.

But as the formula feeding problem increases, more protest of promotion is being heard. Dr. Adikhari, a neo-natologist at King Edward Hospital in Durban told me:

The milk companies will sponsor a tea party or a buffet or supper. Its all part of the blackmail. Its not charitable; its the dirtiest piece of work that goes on with these companies. I feel very strongly that the medical people should say "get lost!" to the companies....This promotion must be stopped. There is no other way we can start to encourage breastfeeding.

Concerned health professionals and womens organizations in South Africa have begun serious efforts to encourage breastfeeding and curb promotion working with INFAC. But the South African infant formula market is extremely large (estimates vary from \$58 to 77 million per year and some industry sources suggest a growth rate as high as 15%) and it will not be renounced easily by the industry.

The African Experience: A New Nestle

Research in these African nations reveals an increasingly serious bottle-feeding problem and widespread concern among health professionals. It also confirms the continued existence of aggressive infant formula promotion and frequent violations of company codes. But analysis of Nestle's promotion reveals that the

formula industry is changing. The heavy-handed sales campaigns of the past are giving way under the impact of public criticism and the need for a more sophisticated marketing approach.

Today, in Africa, a new Nestle image is emerging: that of Nestle as the trustworthy infant care specialists. The image is part of an altered formula marketing strategy through which Nestle seeks to protect both its reputation and sales:

1) The first part of the strategy is to aggressively push the Nestle company to mothers and health professionals with advice on infant care, "educational" posters and ads, health equipment and medical conferences. Years of intense promotion in the Third World have equated the Nestle name with infant formulas like Lactogen, just as Nestle and chocolate are linked in the minds of U.S. consumers. So, when Nestle is advertised in the context of infant care, the young mother will quickly make the link to Nestle infant formula, even without the mention of a formula brand name. Nestle formula is pushed by promoting the Nestle infant care image.

2) Secondly, Nestle will sustain promotion to shopowners to ensure that Nestle formulas fill the shelves of the most remote village shops (eg. Nestle's 1979 South African ad, "What the biggest name in infant feeding can mean to your profits.")

3) Step up mass media advertising of Nestle weaning foods to maintain Nestle's high-profile media image and to provide a fall-back market.

In otherwords, Nestle now markets the company: Nestle, more than the specific product: Lactogen. It is a far-sighted strategy. Not only does it deflect public criticism without endangering formula sales, but it also expands future market possibilities. When a mother buys the Nestle name, an entire product line will follow, from Nan and Lactogen to Nestum #1 and #2, then Cerelac and the newly-acquired Beechnut Baby Foods through to Ideal Condensed Milk, Nesquick and Nescafe. Nestle from the cradle to the grave.

Thus, the new slogans and the smoother style: "Nestle - We Help Babies Grow Into People." Company people talk about "educational advertising" rather than "promotional (or sales) advertising," but as in Botswana, they don't allow their "educational" posters to be used without the prominent Nestle logo. And Nestle's phone-in Mothercraft Service in South Africa advises on all aspects of infant care.

To associate themselves with infant care education, with the picture of healthy babies and the quality of breastfeeding ("Nan - Scientifically formulated to resemble breast milk") -- this is critical to Nestle's good image and future sales. A wholesome Nestle is the medium. Lactogen is still the message.

Jan 1980



INTERFAITH CENTER ON CORPORATE RESPONSIBILITY

A Sponsored Related Movement of the National Council of Churches
475 Riverside Drive • Room 566 • New York, NY 10027 (212) 870-2293

WHY THE NESTLE BOYCOTT MUST CONTINUE

The Nestle Company is mounting a massive public relations campaign aimed at stopping the increasingly successful Nestle boycott. They are attempting to convert into a public relations victory the actual setback they suffered at the recent WHO/UNICEF meeting on Infant and Young Child Feeding in Geneva. Nestle contends that their marketing practices are in agreement with the recommendations issued by the WHO/UNICEF meeting, thus making the boycott unnecessary. The truth is, however, their marketing practices remain inconsistent with the letter and spirit of the WHO/UNICEF recommendations. The boycott must not only continue, but it must intensify in order to preserve the important gains made at the meeting. Only sustained pressure can prevent Nestle and the other infant formula companies from making "interpretations of convenience" that distort the spirit of the meeting, ie. the overwhelming consensus among non-industry participants on the need for strict controls on industry activities.

The WHO/UNICEF recommendations clearly call for far-reaching restrictions of marketing and promotion of infant formula. WHO Director General, Dr. Halfdan Mahler said that the industry was "morally obliged" to change these practices and added, "There is no way industry can get away with what they've been doing in the past and say they have our blessing." Yet Nestle Managing Director, Arthur Furer disagreed that changes were required in a newspaper interview. "We do not feel restricted in any way in our commercial activities by the WHO recommendations. On the contrary, the gradual changes Nestle has introduced in the past five years are completely in line with the recommendations." (Interview with Arthur Furer, Tages Anzeiger, an important Swiss-German newspaper, October 19, 1979.)

Nestles is using their distorted interpretations of the recommendations to justify precisely the activities that the meeting sought to ban. The following comparisons of the WHO/UNICEF Recommendations with the Nestle interpretation reveal Nestles' strategy to disguise promotion as education or

charity.

On Advertising

WHO Recommendation: "There should be no sales promotion, including promotional advertising to the public of products to be used as breastmilk substitutes or bottled supplements and feeding bottles." (emphasis added).

Nestle Interpretation: "Advertising of an educational nature, which is regarded as beneficial by the state, is allowed. This would include educational and informative posters." (Furer, Ibid.)

On Free Samples

WHO Recommendation: "Advertising or promotional distribution of free samples of breastmilk substitutes through health service channels should not be allowed. Artificial feeding should not be openly demonstrated in health facilities." (emphasis added)

Nestle Interpretation: "Furthermore, we would agree to a more selective delivery of samples to the clinics and hope that WHO and UNICEF would instigate precise sets of rules about this within the relevant international code. Indeed it must not be overlooked that the samples are in many cases a help to clinics in developing countries who do not have extra funds at their disposal." (Furer, Ibid.)

On Company Personnel

WHO Recommendation: "No personnel paid by companies producing or selling breastmilk substitutes should be allowed to work in the health care system, even if they are assigned more general responsibilities that do not directly include the promotion of formulas, in order to avoid the risk of conflict of interest." (emphasis added)

Nestle Interpretation: "Each individual state must decide if it wants to call on people who are employed by the baby food industry and at the same time have a diploma in child care, to help impart information which will benefit mothers... It is simply unjust to condemn being involved in this instructive action...because the state doesn't have at its disposal the necessary personnel and they have previously been pleased to have been able to draw on the producers of baby foods to

work with them." (Furer, Ibid.)

Nestle's interpretations do not accurately reflect the position of WHO/UNICEF which made their official position clear in their Background Paper released before the meeting. The Background Paper was prepared by independent scientists on the basis of recent research and extensive field experience. Their recommendations reflect an objective assessment of what is needed to protect babies. The meeting's recommendations, on the other hand, represent the result of a tough negotiation-bargaining process where industry stymied the desire of most of the meeting's participants to enact more forceful steps. In other words, the final recommendations, rather than representing a consensus of the meeting, actually represent the most that concerned national governments, UN agencies, experts, and the nongovernmental organizations could successfully advocate over the vigorous opposition of the industry.

If the Background Paper's explicit recommendations had been adopted and enforced, the industry would have been compelled to make major changes in its practices. So industry lobbied intensely against them before and during the meeting. Ian Barter, President of ICIFI (the industry trade association of which Nestle is a member) attacked the Background Paper in the press as "unscientific and unworthy of that name." ICIFI placed a full page ad in the International Herald Tribune on the first day of the meeting to advertise its "public relations concept" of "shared responsibility" -- which means that industry wants as much right to determine infant feeding practices as governments and health workers. ICIFI hired its own scientists to prepare an industry critique of the Background Paper, attacking WHO/UNICEF's conclusions.

During the meeting, industry refused to follow the official agenda and repeatedly sought to substitute their own versions. At one point they tried to "blackmail" the meeting by threatening to walk out. Industry set up a lavish "hospitality suite" and wined and dined delegates.

The area of medical promotion provides an example of how industry distorted what WHO/UNICEF wanted to accomplish. The WHO/UNICEF Background Paper confined the industry information to ethical and factual information only for "consideration of product composition." The final recommendations lack this specificity -- the result of industry lobbying against such precision. Now Nestle's Managing Director Arthur Furer claims that "Manufacturers must retain the right to inform doctors and paramedical personnel about the preparation and use of such products." This difference is substantial. "Product composition" restricts information to

that which helps health workers choose the right formula for a particular patient, while Furer's definition justifies the extensive medical promotion that Nestle has been doing for decades.

The Chairperson of the meeting, Dr. Fred Sai (Ghana), made it clear that "what took place was a first step for WHO/UNICEF to go ahead with a machinery for working out, based on these considerations, an appropriate code (of conduct for the baby foods industry) and machinery of enforcement." (emphasis added). The real work of the coming months will be to translate these general principles into concrete codes and models of national legislation.

Continued pressure on the industry is absolutely crucial in this phase of code making. WHO/UNICEF need our help to strengthen their hand in dealing with the industry so that the WHO/UNICEF official position -- so strongly expressed in the Background Paper -- will prevail.

Nestle counter-strategy is to remain as vague as possible for as long as possible. For example, after protesting self-righteously that they will always sit down with their critics, Nestle just turned down (October 19, 1979) a formal request by INFANT and 40 national organizations endorsing the boycott to identify the differences that remain between them. Nestle refused to meet with the boycotters because they know that they would have to explain precisely what changes they will be making. This would thwart their public relations strategy of pretending to follow the WHO/UNICEF recommendations, while making "interpretations of convenience."

Nestle, in fact, has not met any of the boycott's four specific demands. While they have suspended mass media advertising, other forms of direct consumer promotion continue, as do free samples, "milk nurses", and intense medical promotion. Experience demonstrates that Nestle has not followed even its own weak self-regulatory codes.

Only sustained pressure can prevent backsliding, which will result in weak codes and more sick babies. We have come so far and accomplished so much; to stop the boycott at this critical moment would jeopardize the progress we have made to date. As WHO Deputy Director General Dr. T.A. Lambo asked on the opening session of the meeting: "Are we really ready to give up something to help satisfy the unmet needs of hundreds of millions of infants, young children, mothers, and families in the world?" Responsible boycotting is needed to finally eliminate irresponsible promotion.

THE NESTLÉ BOYCOTT

The Newman Center

INFANT FORMULA ACTION COALITION (INFAC)

1701 University Avenue S.E. Minneapolis, Minnesota 55414

*File
Baby Formula*

Ten million Third World babies are starving. Their eyes are sunken. Their bellies are swollen. Their arms and legs are like sticks. They have diarrhea. They hurt!

Ten million Third World babies are starving. Some will be unhealthy the rest of their lives. Others will be mentally retarded. The "lucky" ones will die.

Ten million Third World babies are starving because of the heartless, money-hungry actions of powerful multinational corporations. Only you can stop the scandal!

Dear Friend,

Throughout the Third World, from Haiti to Venezuela, from Nigeria to the Philippines, new mothers are leaving maternity wards with tins of powdered infant formula -- free samples supplied by companies based in the U.S., Japan, and Switzerland.

They go home. They open the tins. They try to reconstitute the formula. Without clean water. Without a suitable pot for sterilizing. Without enough fuel to boil their one bottle and nipple before each feeding. Without a refrigerator to store even a single day's supply of formula.

Their free tin runs out. Their breast milk by now has dried up. Now they must use the formula. But when they discover that it costs nearly half of all the money their families earn, they try to stretch it. They thin it down with water, tea, cocoa, to make a three-day supply last a week, two weeks, even three.

Soon, their babies burn with fever. They suffer from dehydration and acute diarrhea. They are weakened by lack of nourishment, infected by poisonous bacteria, susceptible to disease.

And when they die?

Their mothers proudly place the formula cans on their graves, believing to the end that the product that killed them was their most precious possession!

The power of advertising -- to kill!

The baby bottle problem really began in the late 1960's. By then it had become clear that the U.S. birth rate was heading for an all-time low. Baby product companies throughout the developed world knew they had to find new markets.

Companies like Abbott Laboratories, Bristol Myers, American Home Products and --

largest of all -- the Swiss-based Nestle Company expanded rapidly in Asia, Africa and Latin America. Airwaves and billboards were filled with advertising slogans:

"IT'S THE VERY BEST MILK FOR YOUR BABY!"

"THE TROUBLE-FREE FORMULA THAT BREAST FEEDS!"

"NOURISHES THE BABY LIKE MOTHER'S MILK!"

Their pamphlets spoke vaguely about times when breast feeding is "unsuccessful" or "insufficient," even though breast feeding is successful nearly all the time. Uneducated young women were persuaded to believe that breast feeding was "primitive," "unscientific," "inconvenient."

It wasn't that the formula products were bad, but that high-pressure promotion of them created a false "need" in areas where living conditions and poverty made their misuse inevitable.

As part of this unethical promotion, the companies gave away free samples, pamphlets, posters, and contributions of equipment and supplies to hospitals. They gave special services to doctors. They sponsored medical conventions.

Finally, some promotion genius dreamed up the idea of "milk nurses."

Dressed in nurse-like uniforms, these women travel around countries like the Philippines and Malaysia visiting new mothers, providing gifts and advice, weighing the babies -- and leaving samples of powdered baby formula.

But the "milk nurses" weren't hired just to work as nurses. They were hired to look like nurses and to promote formula -- to exploit every mother's desire to do what's best for her baby -- regardless of what the cost in babies' lives might be.

The cost is staggering. For in places where pure water and knowledge of sterilizing procedures are scarce, artificial milk formula (which, incidentally, lacks natural antibodies found in mother's milk) is like a loaded gun. Improperly prepared, the bottle is a breeding ground for bacteria that cause acute diarrhea, malnutrition ... and death.

The infant formula peddlars are protecting a billion dollars a year in sales to Third World countries; there are no laws preventing them from doing irreparable harm to millions of babies.

What chance to illiterate, impoverished, unsophisticated young women have against the vast resources and subtle advertising techniques of the Nestle Company and others?

Their only chance rests with you, and the Infant Formula Action Coalition.

Help now -- we CAN save lives!

The Infant Formula Action Coalition (INFAC), a project of The Newman Center, is an assembly of nutritionists, educators, church representatives and many other individuals and groups throughout America.

Our purpose is to stop the unethical and dangerous promotion of infant milk formula in Third World countries, through widespread public education and generation

of grass-roots pressure against the offending corporations.

Our most urgent project right now is a nationwide boycott of the products of the Nestle Company. Nestle, producer of more than half of all infant formula sold in the Third World, is by far the biggest offender in the infant formula scandal.

Public pressure has already succeeded in forcing the Bristol Myers Company, Abbott Laboratories and others to change their marketing practices... although INFACT believes all of them still have a long way to go. But the giant Nestle Company has resisted worst of all.

Although the Boycott's strength has moved Nestle to claim they've suspended mass consumer advertising (a claim they've made before), evidence that this "new" policy is violated continues to reach INFACT. Nestle refuses to explain how they will monitor their subsidiaries and enforce compliance. Self-regulation seems hopeless.

At the same time, Nestle has intensified efforts to recruit doctors and hospitals to push formula, by providing generous gifts to doctors and their families, and flooding hospitals and clinics with free samples, equipment and supplies.

The Infant Formula Action Coalition demands that Nestle:

1. STOP the use of "milk nurse" sales personnel, in or out of starched uniforms;
2. STOP distributing free samples of formula to hospitals, clinics, and the families of newborn babies;
3. STOP promoting formula to the health professions and through health care institutions;
4. STOP promotion and advertising of artificial milk formula aimed at Third World mothers who can't use it safely, as recommended by the World Health Organization.

The Nestle Company, with its international headquarters in Switzerland, is beyond the influence of the U.S. Government. But not beyond yours and mine.

I'm convinced that the only way to get Nestle's attention is to hit them in the pocketbook with the most effective boycott ever organized -- against the sale of all Nestle products in America. With your help, we can stop the tragedy of unnecessary infant deaths in Third World countries!

Many groups and individuals have already joined INFACT and the Nestle Boycott -- the National Council of Churches, Dr. Derrick Jelliffe of UCLA's School of Public Health, Cesar Chavez and the United Farm Workers of America, Gloria Steinem, Ralph Nader, several U.S. Congressmen and other government officials, the Presbyterian Church of the U.S., the American Medical Students Association, American Lutheran Church Women, Oxfam-America, many national religious organizations, political associations and local civic groups. (A more complete listing of endorsers of the Boycott is enclosed. There's probably a group near where you live.)

Dr. Benjamin Spock, one of the world's most respected authorities on infant care, has written a strong endorsement which I'm enclosing with this letter.

But our greatest hope for success rests with you and millions of concerned Americans whose commitment to INFACT and the Boycott will force Nestle to listen and act at last!

You can do three things today:

1. BOYCOTT NESTLE! Don't buy Taster's Choice, Nescafe, Nestea, QUIK, CRUNCH, Souptime, any Libby's, Stouffer's, Crosse & Blackwell, Maggi or Deer Park product. Don't buy Swiss Knight cheese or L'oreal cosmetics. Tell your friends why. Tell your grocer why! (More Nestle trade names are listed on the enclosed reply card, and more are sure to be added in coming months as Nestle continues to take advantage of dollar inflation by buying more and more American companies.)
2. MAKE NOISE WHERE IT MATTERS! Write to Mr. David Guerrant, President, The Nestle Company, Inc., 100 Bloomingdale Road, White Plains, N.Y. 10605, to let him know you've joined the Boycott. It will cost only 31¢ postage to write to Mr. Arthur Furrer, Managing Director, Nestle S.A., Vevey, Switzerland, to let him know you won't buy Nestle products until the exploitation of Third World babies is halted.

(Nestle has expanded its public relations department to handle such correspondence, so you can expect to receive an elaborate reply. Read it carefully, keeping in mind the information in my letter and all those who have joined the Boycott. As Nestle develops new public relations materials, INFACT will respond to them in our Newsletter, sent free to all our supporters.)

Write to your Congressman and your Senators, asking for further investigation of baby formula sales practices that might lead to new regulations.

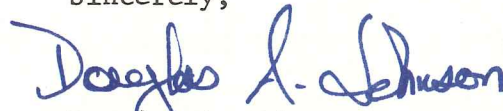
3. JOIN THE INFANT FORMULA ACTION COALITION! Contribute generously and become an active participant! If you have \$10 or \$15 to spare, please sacrifice a little and send \$25. If you can spare \$50, try to give \$100. Every dollar contributed will help INFACT reach more people, monitor developments in Third World countries, and collect and present evidence and testimony where it can help.

A whole generation of Third World mothers is virtually giving up breast feeding and turning to powdered milk formula because of the power of advertising and the crass marketing practices of profit-hungry companies like Nestle. A whole generation of their children will, if they live, grow up physically weak and mentally retarded.

It may be too late for them, but it's not too late for babies yet unborn.

You can help. Please help. Please, please join us today and send a check for as much as you possibly can spare... and more.

Sincerely,



Douglas A. Johnson
National Chairperson,
INFANT FORMULA ACTION COALITION

DAJ:fe

Benjamin Spock, M.D.
Rogers, Arkansas

BEFORE YOU DECIDE WHETHER TO JOIN US, I HOPE YOU'LL
READ THIS PERSONAL MESSAGE FROM DR. BENJAMIN SPOCK.
REMEMBER, THE FATE OF MILLIONS OF INFANTS IS IN YOUR HANDS.
Doug Johnson

Dear Friend,

In asking for your help in the boycott of Nestle products, I speak for myself and for the Infant Formula Action Coalition.

Nestle, the largest food processor in the world, is actively encouraging mothers in the developing countries in Africa, Asia and South America to give up breast feeding and turn to powdered milk formula instead.

But in such countries water is contaminated, sterilization procedures are unknown, illiteracy makes proper preparation impossible, and poor people try to stretch the powdered milk supply by overdiluting their baby's formula.

The tragic results are widespread malnutrition and severe infant diarrhea that often ends in death.

Despite worldwide protest, Nestle continues to put profits first and refuses to halt this traffic with death.

So we are trying, by boycott, to compel Nestle to do what they won't do out of decency.

INFACT and I ask you to do two things: Boycott all Nestle products, and send a generous contribution to help us spread the word.

Most sincerely,

Benjamin Spock
Benjamin Spock, M.D.



THE NESTLÉ BOYCOTT

Don't buy any of these products:

Nestle Chocolate
Nescafe
Taster's Choice
DeCaf
Sunrise Coffee
Nestea
QUIK
Souptime
Maggi
Libby's
Crosse & Blackwell
Stouffer foods
Swiss Knight cheese
Wispride cheese
L'oreal cosmetics
Lancome cosmetics
Deer Park Spring Water
Beringer Bros. wines
(more on other side)

INFACT

1701 UNIVERSITY AV. SE
MINNEAPOLIS, MN 55414

DO YOU KNOW OTHERS WHO WILL JOIN THE NESTLÉ BOYCOTT?

We need to reach all the friends we can — with information, and with an appeal for support. Please send us the names and addresses of everyone you know who should learn more about the infant formula scandal. Use additional paper to list more names.

Name _____ Name _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Name _____ Name _____

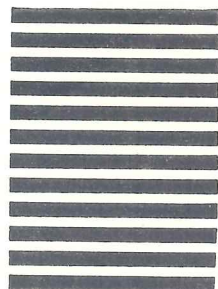
Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

INFANT FORMULA ACTION COALITION (INFACT) 1701 University Av. SE / Minneapolis, MN 55414

SEE BACK FOR PARTIAL LIST OF BOYCOTT ENDORSERS

INC-1



THE NESTLÉ BOYCOTT
INFANT FORMULA ACTION COALITION
1701 UNIVERSITY AVENUE S.E.
MINNEAPOLIS, MN 55414

POSTAGE WILL BE PAID BY:

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO. 1774 MINNEAPOLIS, MN

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



your first class stamp
on this envelope saves us postage
and makes your contribution go even further.
Thank you.



THE NESTLÉ BOYCOTT

Don't buy any of these products:

Nestle Chocolate
Nescafe
Taster's Choice
DeCaf
Sunrise Coffee
Nestea
QUIK
Souptime
Maggi
Libby's
Crosse & Blackwell
Stouffer foods
Swiss Knight cheese
Wispride cheese
L'oreal cosmetics
Lancome cosmetics
Deer Park Spring Water
Beringer Bros. wines
(more on other side)

INFAC
1701 UNIVERSITY AV. SE
MINNEAPOLIS, MN 55414

The Newman Center

INFANT FORMULA ACTION COALITION (INFAC) 1701 University Av. SE / Minneapolis, MN 55414

I AGREE WITH YOU . . . Third World babies should not die or suffer permanent brain damage just so a few multinational corporations can rake in big profits. To help the INFANT FORMULA ACTION COALITION in its efforts to present this horror story to the American public, I enclose my contribution of:

☐ \$15 ☐ \$20 ☐ \$25 ☐ \$30
☐ \$35 ☐ \$50 ☐ \$100 ☐ \$ _____

(Please make check payable to INFANT FORMULA ACTION COALITION)

WOM. HLTH CONCNS. PROG.
of PA. Dept. of Health
112 S. 16th St.
PHILA, PA 19102

(Are your name
and address
correct as shown?)

WLFZ

It's not always possible to avoid duplication of names, so if you receive more than one of these letters, please accept our apologies and pass the extra copy on to a friend.

West Indian baby, bottle fed from early weeks of life with overdiluted, contaminated infant formula. The result — marasmus, diarrhea and death.

(Source: Dr. Derrick Jelliffe, M.D., Professor of Pediatrics, and head of the Division of Population, Family and International Health, School of Public Health, UCLA)

Place
Stamp
Here

THE HENRIE BOACOLL

IFAC-02