

Interventions to Reduce Formula Marketing in Medical Offices

Increasing evidence has shown that exposure to formula advertising can negatively impact a woman's decision to initiate and continue breastfeeding.^{1,2,3} A primary component of formula advertising includes pamphlets, posters, and free formula packs in hospitals and the offices of pediatricians, obstetricians, and family practitioners. As such, primary care providers may be inadvertently advertising the use of infant formula and are thereby implicitly discouraging breastfeeding during the recommended minimum of the first year of life.⁴ Each primary care visit before and after birth presents an opportunity to support and encourage breastfeeding. Interventions to eliminate formula marketing from medical offices are a potentially beneficial strategy to ensure that these opportunities are not undermined. Though such programs are limited, certain case studies provide potential model practices and reveal facilitators and barriers that should be considered in planning future interventions.

Introduction

The American Academy of Pediatrics (AAP) recommends breastfeeding an infant exclusively for the first 6 months of life, and then introducing complementary foods in conjunction with breastfeeding for at least the first year of life, continuing for as long as is mutually desired by the mother and child.⁵ Breastfeeding is associated with numerous health benefits, including reduced risk of respiratory infections, asthma, obesity, type 2 diabetes, and sudden infant death syndrome (SIDS) for the child. For the mother, breastfeeding has been associated with reduced risk of breast and ovarian cancers, and lower risks of type-2 diabetes and postpartum depression.⁶

In 2008, New York State (NYS) had a breastfeeding initiation rate of 78%, on par with the national average, and achieving the Healthy People 2010 goal of a 75% initiation rate.^{7,8} However, the rate of mothers exclusively breastfeeding in NYS at 3 months is 33% and only 14% of mothers exclusively breastfeeding at 6 months.⁹ Thus, when looking to increase the rate of breastfeeding, it is important to consider both initiation and duration.

Although there are many factors determining whether and for how long a woman breastfeeds, formula advertising can have an impact on these decisions. A large sample intervention study found that women exposed to formula company produced breastfeeding materials in prenatal visits to physician offices were as likely to initiate breastfeeding than those who saw non-commercial breastfeeding materials, but more likely to cease before hospital discharge, and before 2 weeks post discharge.¹⁰ The distribution of free formula has a similar effect. A review found that women who received formula or formula coupons upon hospital discharge had lower breastfeeding duration rates than those who received either non-commercial discharge packs or no packs at all.¹¹