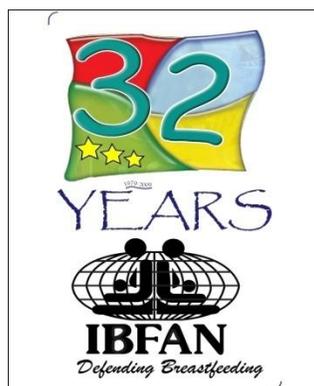


# THE CONVENTION ON THE RIGHTS OF THE CHILD

Session 65 - January 2014

---

## REPORT ON THE SITUATION OF INFANT AND YOUNG CHILD FEEDING IN PORTUGAL



December 2013

**Prepared by:**

IBFAN Portugal

Email: [info@ibfanportugal.org](mailto:info@ibfanportugal.org)

Website: [www.ibfanportugal.org](http://www.ibfanportugal.org)

## Summary

---

The following **obstacles/problems** have been identified:

- 1 – There is a widespread, systematic and aggressive marketing culture used to promote, sell and distribute follow on formula and toddler milks which plays a significant role in the consistent decline of breastfeeding beyond 6 months.
- 2 - Compliance with state legislations on marketing of breastmilk substitutes (Decreto-Lei n.º 217/2008, de 11 de Novembro) is not monitored, therefore, violations of this law are commonplace and widespread.
- 3 – The constant influence of the infant-child nutrition industry in national guidelines and on health professionals linked to infant nutrition, paediatrics and child health continually undermine breastfeeding, especially after 6 months. (This can be seen in how the '*Estudo do Padrão Alimentar e de Crescimento na Infância*' better known as the EPACI study, which was funded by Milupa Nutrition, has been used to promote and justify the use of toddler milks).<sup>1</sup>
- 4 – Breastfeeding beyond 6 months and for a further 2 years as stated by the World Health Organisation is not incorporated in any national guidelines related to infant nutrition or breastfeeding. The national programme for child and youth health (Programa Nacional de Saúde Infantil e Juvenil) does not encourage or advise on breastfeeding beyond 6 months of age and the Portuguese Society of Paediatricians (*Sociedade Portuguesa de Pediatria*) recommendations on infant nutrition (Recomendações – 2012)<sup>2</sup> do not mention the WHO guidelines either and encourage the use of toddler milks up to the age of 36 months. As a result, health professionals in Portugal continue to advise on the introduction of complimentary foods before 6 months and rarely mention that breastfeeding is beneficial after that.

---

<sup>1</sup> Milupa, Aptababy. <http://www.aptababy.com.pt/Paginas/miniadulto.aspx>

<sup>2</sup> Sociedade Portuguesa de Pediatria, Nutrição: Alimentação e Nutrição do Lactente: Recomendações – 2012

**Our recommendations** include:

- 1 – **Fully implement the International Code of Marketing of Breastmilk Substitutes as a minimal national standard.** The International Code should be used in its entirety to replace the *Código de Ética de Substitutos de Leite Materno, biberões e tetinas* and strengthen the Decreto-Lei n.º 217/2008, which does not incorporate all points in the Code or relevant World Health Assembly resolutions.
- 2– We recommend that **a governing body (not connected to the infant-child nutrition industry) be created to monitor the compliance of the infant-child food industry with the state legislation:** Decreto-Lei n.º 217/2008.
- 3 – We recommend that **a comprehensive national programme/guideline be put in place for breastfeeding** by the ministry of health (*Ministério da Saúde*). We ask that this guideline follow the World Health Organisation’s recommendations which are the following; *‘The World Health Organization recommends that infants be exclusively breastfed for the first six months of life to achieve optimal growth, development and health. Mothers should continue to breastfeed their children beyond the age of six months, until they are two years of age or older, at the same time providing them with safe and appropriate complementary foods to meet their evolving nutritional requirements’.*<sup>3</sup>
- 4 – **Remove the Portuguese Society of Paediatricians recommendations on follow on formula** being advised up to 36 months through their infant nutrition recommendations from 2012. We also ask that the Portuguese Society of Paediatrics alter their guidelines on breastfeeding in their infant nutrition recommendations to **follow those of the World Health Organisation stated in point 2.**

---

<sup>3</sup>WHO, UNICEF. Global Strategy for Infant and Young Child Feeding, Geneva, World Health Organization, 2003

## 1) General points concerning reporting to the CRC

---

In 2014, the CRC Committee will review Portugal's combined 3<sup>rd</sup> and 4<sup>th</sup> periodic report.

At the last review in 2006 (session 28), IBFAN did not present a report on the state of breastfeeding in Portugal. In its last [Concluding Observations](#), in para 35, the CRC Committee recommended to Portugal to: “(a) Increase investment in public health care facilities, including investments by civil society; (b) Ensure the equal access of all children to the highest attainable standard of health care in all areas of the country.”

*We have noticed an improvement since 2006 but nothing significant in health care for children:*

### **Further human rights programmes in Portugal include the following:**

1 – The *IV National plan against domestic violence, 2011-2013* (IV Plano Nacional contra a Violência Doméstica) was launched by Resolution of the Council of Ministers n.º100/2010. D.R. n.º 243, Série I de 2010-12-17.

2 – The *IV Plan for Equality – gender, citizenship and non-discrimination, 2011-2013* (IV Plano Nacional para a Igualdade - Género, Cidadania e Não Discriminação) and the *II Programme for action to eliminate female genital mutilation* was launched (II Programa de Ação para a Eliminação da Mutilação Genital Feminina) were launched by Resolution of the Council of Ministers n.º 5/2011. D.R. n.º 12, Série I de 2011-01-18.

3 – The *II National plan against human trafficking, 2011-2013* (II Plano Nacional contra o Tráfico de Seres Humanos) was launched by Resolution of the Council of Ministers n.º 94/2010. D.R. n.º 231, series I of 2010-11-29.<sup>4</sup>

Due to the fact that IBFAN Portugal is one of the newer members of IBFAN, we have not yet reported to our treaty bodies.

## 2) General situation concerning breastfeeding in Portugal

---

Data on breastfeeding is based on yearly reports, which only began in January 2011. These reports are compiled by the *Observatório do Aleitamento Materno*, which is part of *Associação Mama Mater* (NGO).

---

<sup>4</sup> Igualdade, government programme: [www.igualdade.gov.pt](http://www.igualdade.gov.pt)

**General data**

Number of children <1 = 96761, <2 = 96527, <5 = 103616<sup>5</sup>

Year	Maternal mortality rate per hundred thousand	Infant mortality rate %
1990	10,3	10,9
2000	2,5	5,5
2005	2,7	3,5
2006	5,7	3,3
2007	4,9	3,4
2008	3,8	3,3
2009	7,0	3,6
2010	7,9	2,5
2011	5,2	3,1

Base de dados Contemporânea, [www.pordata.pt](http://www.pordata.pt)

The main causes of death in children under 5 in Portugal are related to endocrine diseases, genetic and cromossomatic deformities and perinatal related problems<sup>6</sup>.

Breastfeeding data	Jan-Dec 2011	Jan-Dec 2012
Initiation to breastfeeding, 1st hour:	77,60%	78,90 %
Exclusive breastfeeding at 5/6 weeks:	63,30%	65,10%
Exclusive breastfeeding at 2/3 months:	52,90%	54,50%
Exclusive breastfeeding at 3/4 months:	44,80%	50,20%
Exclusive breastfeeding at 4/5 months:	31,70%	35,30%
Exclusive breastfeeding at 5/6 months:	17,30%	22,40%
Continued breastfeeding at 6-7 months:	40,00%	41,60%
Continued breastfeeding at 12-15 months:	15,10%	N/A
Continued breastfeeding at 15-16 months:	15,10%	22,90%
Continued breastfeeding at 18-19 months:	12,60%	16,20%
Mean duration of breastfeeding; 6 months	> 6 months	> 6 months

The data for the table above was introduced through the state health systems data base on a voluntarily basis. There is no data available for the south of the country in any of the reports.

There were 96.856 live births in 2011 and the RAM (Registo do Aleitamento Materno) study from Jan-Dec 2011 is based on only 39.130 of these births, in 2012 there were 89.841 live births but the RAM data is based on only 41.269 of these<sup>7</sup>.

There is a significant drop in exclusive breastfeeding rates between 4 and 6 months as the recommendations to start complementary foods at this time, by health professionals, is still

<sup>5</sup> Instituto Nacional de Estatística, 2011 census, [www.censos.ine.pt](http://www.censos.ine.pt)

<sup>6</sup> Direcção Geral de Saúde

<sup>7</sup> Registo do Aleitamento Materno, RAM, 2011, 2012 reports

commonplace regardless of the World Health Organisation recommendation of exclusive breastfeeding for the first 6 months.

Follow on formulas and toddler milks are still recommended over breastmilk after 6 months by health professionals regardless of the World Health Organisation's statement from the 17th of July 2013 titled, *Information concerning the use and marketing of follow-up formula* which clearly states '**The Organization (WHO) further maintains that as well as being unnecessary, follow-up formula is unsuitable when used as a breast-milk replacement from six months of age onwards**'. This statement is also backed up by the European Food safety Authority, EFSA, which states the following: '**The use of milk-based "growing-up" formula does not bring additional value to a balanced diet in meeting the nutritional requirements of young children in the European Union**'.<sup>8</sup>

The data points to a steep decline in breastfeeding rates beyond six months of an infant's age.

### **3) Government efforts to encourage breastfeeding**

---

**National measures:** There has never been a specific comprehensive programme put in place in Portugal for breastfeeding.

There is a national incentive to support breastfeeding called *Breastfeeding corners* (Cantinhos de Amamentação) which are designated areas in state run health centres and hospitals where breastfeeding mothers have access to a trained breastfeeding support person. This initiative was founded by *Associação Mama Mater* (NGO) in 2005. The trained breastfeeding support persons that give trained support to breastfeeding mothers through this initiative do this in their normal work hours, which are paid by the state health system (*Direção Geral de Saúde*). However, due to a lack of funding, it has not been possible to monitor and maintain all of the original designated areas and many have stopped providing this service. It has not been possible to monitor the remaining areas for Code violations (these areas are used to promote infant formula brands), which have become common throughout the 'Cantinhos de Amamentação'; this is also due to a lack of funding.<sup>9</sup>

#### **Specific information concerning the International Code of Marketing of Breastmilk Substitutes:**

The International Code of Marketing of Breastmilk Substitutes or the *Código de Ética de Substitutos de Leite Materno, Biberões e Tetinas* which is Portugal's version of the Code which does not incorporate the whole Code, have not been enforced, encouraged or implemented at any level since its adoption in 1981.

In 2008, Portugal adopted the *Decreto-Lei 217*<sup>10</sup>, based on the European Commission Directive 2006/141/EC of 22 December 2006 on Infant Formulae and Follow on Formulae. The EU Directive which

---

<sup>8</sup> World Health Organisations statement, 17th of July 2013, Information concerning the use and marketing of follow-up formula

<sup>9</sup> Associação Mama Mater

<sup>10</sup> Direção-Geral de Alimentação e Veterinária, [www.dgv.min-agricultura.pt](http://www.dgv.min-agricultura.pt)

is weaker than the International Code; this means for example that complementary food is labelled as suitable from 4 months onwards which undermines exclusive breastfeeding up to 6 months as recommended by WHO..

**Therefore the Portuguese law does not meet the standards of the International Code and should be strengthened.**

There is no monitoring mechanism in place beyond IBFAN Portugal, which began in June 2013.<sup>11</sup>

There is widespread advertisement of breastmilk substitutes in Portugal, and thus violations of the International Code of Marketing of Breastmilk Substitutes. We have included examples of violations identified through the monitoring activity of IBFAN Portugal in the Annex to this report. The violations include:

- Distribution of free samples of infant formula and follow on formula through the health care system.
- Promotion of infant formula to the public in shops and pharmacies.
- Advertisement to the public and idealisation of artificial milks.
- Free gifts and promotional materials are promoted directly to the mothers and in the health care facilities.
- Mothers and pregnant women are targeted directly through publicity campaigns and social media by formula companies and given misleading advice on breastfeeding and formula use through talks and free information hand-outs.

**Monitoring of the law:**

There is no monitoring of this law at a national level, although we do have government bodies to whom we can report violations of this law to.

Violations of the different sections of Decreto-Lei 217 should be reported to the following authorities; *Autoridade de Segurança Alimentar e Económica* (ASAE – Economical and Food Safety Authority), *Direção Geral Alimentação e Veterinária* (DGAV – Food and Veterinary General Agency) and the *Direção Geral do Consumidor* (Consumers Agency).<sup>12</sup>

There is a coordination programme, which covers infant and child nutrition and health (*Programa Nacional de Saúde Infantil e Juvenil*) but a specific programme for infant and child nutrition does not exist in Portugal. *Programa Nacional de Saúde Infantil e Juvenil* covers global health from 0-18 years including nutrition. This programme is run by the ministry of health (*Ministério da Saúde*) and was

---

<sup>11</sup> IBFAN Portugal, <http://www.ibfanportugal.org/#!cdigo-de-tica/cn3j>

<sup>12</sup> Direção-Geral de Alimentação e Veterinária, [www.dgv.min-agricultura.pt](http://www.dgv.min-agricultura.pt), Autoridade de Segurança Alimentar e Económica, [www.asae.pt](http://www.asae.pt), Direção Geral do Consumidor, [www.consumidor.pt](http://www.consumidor.pt)

founded in June 2013. In this programme breastfeeding is barely mentioned and only recommended for 6 months.<sup>13</sup>

There are no NGO's working in this field.

**Training on infant and young child feeding:**

The World Health Organisation (WHO) and UNICEF's 40-hour breastfeeding course is provided in Portugal to the general public and health professionals. This is provided mainly by NGOs.

We were unable to obtain an accurate number of certified WHO/UNICEF breastfeeding counsellors in Portugal. Portugal has 13 International Board Certified Lactation Consultants, IBCLC's as of Oct 2013. International Board Certified Consultants (IBCLC's) are yet to be validated or recognised at any significant level in Portugal.<sup>14</sup>

The courses available to train the public and health professionals on breastfeeding support are provided by *Mama Mater / IBFAN Portugal, SOS Amamentação* and *Comité Português para a Unicef/Comissão Nacional Iniciativa Hospitais Amigos dos Bebés*, as well as a few other trainers in private practise.

#### **4) Baby Friendly Hospital Initiative (BFHI)**

---

Portugal has a Baby Friendly Hospital Initiative – *Comité Português para a Unicef/Comissão Nacional Iniciativa Hospitais Amigos dos Bebés*. 10 hospitals have been certified through this initiative, the first being in 2005.<sup>15</sup>

Portugal has 40 maternity wards in the entire country, 36 in general hospitals and 4 maternity hospitals.<sup>16</sup>

#### **5) Maternity protection for working women**

---

47, 3% of the female population is currently working.

Every woman who has paid a social security tax for 6 months previous to becoming pregnant, unemployed and disabled woman who receive a social security pension are entitled to paid maternity leave. Women who have not paid social security tax (unemployed, students), can apply to the state paid maternity leave and it will be granted according to an IRS statement and additional family member earnings per capita.

---

<sup>13</sup> Direção-Geral da Saúde, Programa Nacional de Saúde Infantil e Juvenil

<sup>14</sup> [www.ibclc.org](http://www.ibclc.org)

<sup>15</sup> <http://www.unicef.pt/docs/lista-dos-Hospitais-Amigos-dos-Bebes.pdf>

<sup>16</sup> Direção Geral da Saúde

The mother is entitled to a minimum 72 days paid leave (10.3 weeks), 30 days before delivery if desired and a mandatory 42 days after delivery. A mother's options on how she may take her maternity leave are listed in the table below.

<i>Period of time</i>	<i>Payment % of the Reference income</i>
<ul style="list-style-type: none"> <li>• 120 days of leave</li> <li>• 150 days of shared leave with father (120+30)</li> <li>• 30 day extra for each twin besides the first baby</li> </ul>	100%
<ul style="list-style-type: none"> <li>• 180 days of shared leave with father (150+30)</li> </ul>	83%
<ul style="list-style-type: none"> <li>• 150 days leave only mother</li> </ul>	80%

There is a 2-hour daily breastfeeding break from work until the end of the babies 1<sup>st</sup> year, paid for by the employer. It is possible to extend this beyond 12 months with medical confirmation that a mother is still breastfeeding. For every twin after the first born, 1 hour is added to the initial time.<sup>17</sup>

## 6) HIV and infant feeding

---

Between 38 000 - 62 000 people are infected with HIV in Portugal, 11 000-19 000 of which are women. Portugal has the highest infection rate of HIV in Europe.<sup>18</sup>

Breastfeeding is discouraged amongst HIV positive mothers. The national health system (*Direção Geral da Saúde*) provides 12 months' worth of free infant formula through public hospitals via prescription for HIV+ mothers to minimize transmission of HIV to the infant through breastfeeding.<sup>19</sup>

Portugal has developed a national multisectoral strategy to respond to HIV, 2011-2015.<sup>20</sup>

There are no specific courses where infant feeding is addressed in regards to HIV + mothers and breastfeeding although it is generally mentioned through breastfeeding counselor courses.

---

<sup>17</sup> Social security services (<http://www4.seg-social.pt/subsidio-parental>). Relevant legislation: Decreto-Lei n.º 91/2009, de 9 de abril na redação dada pelo Decreto-Lei n.º 70/2010, de 16 de junho e pelo Decreto-Lei n.º 133/2012, de 27 de junho

<sup>18</sup> [www.unaids.org/Portugal](http://www.unaids.org/Portugal)

<sup>19</sup> Programa Nacional de Saúde Reprodutiva, Circular Normativa n.º. 23/DSR de 29/12/09 – Fornecimento de fórmula para lactentes em mães infectadas pelo vírus VIH

<sup>20</sup> Direção Geral da Saúde (HIV- N.º23/DSR,29-12-09)