For three decades now Nestlé has been a target of an international consumer boycott because of its unethical marketing of infant formula. Concerned individuals and organizations refuse to do business with Nestlé or buy the company’s products because its predatory marketing tactics undermine breastfeeding and damage infant health.

Nestlé is the largest baby food manufacturer in the world and operates in every country on earth. The company has shown itself to be shameless in its search for profits, and deliberately and systematically violates the International Code of Marketing of Breastmilk Substitutes. Nestlé has even attempted to exploit humanitarian crises to make money.

**Greed in times of crisis: Nestlé and HIV**

Currently, many parts of the globe are in the grips of a monumental health crisis caused by HIV and AIDS. One of the most tragic aspects of the crisis is the risk posed to infants born to HIV-positive mothers. In 2005 alone, 700,000 children were infected with HIV.

Babies can become infected during pregnancy, labour, or through breastfeeding. Health experts have been promoting the benefits of breastfeeding in Africa’s impoverished countries for decades, but the advent of HIV/AIDS led to fears of transmission through breastmilk. By the early 2000s experts who had been urging mothers to breastfeed to protect their children began recommending HIV positive mothers to use formula instead to avoid transmission.

This new scenario gave Nestlé a foothold in markets with high HIV prevalence rates. While traditionally the company had been vilified for undermining infant health in the region, it could now position itself as the protector of infants against the scourge of HIV. Nestlé effectively publicized this self-serving image, even as agencies like UNICEF warned that the unchecked flow of formula into HIV-affected regions could have negative consequences for the larger population. New research shows that infants who are exclusively breastfed for six months and then weaned have similar rates of HIV transmission as their formula-fed counterparts. This indicates that the rate of HIV transmission through breastmilk is extremely small or non-existent if exclusive breastfeeding is practiced for only six months. Despite these findings, as well as the increased risk of mortality due to gastroenteritis and acute respiratory disease associated with infant formula, Nestlé continued to market its formula as a means to reduce HIV transmission.

Despite its successful public relations campaign, Nestlé still faced a problem: formula exposed infants to pathogens in Sub-Saharan Africa. Nestlé responded as they always do, with a slick marketing campaign. The company began promoting a brand called Pelargon, which it claimed was acidified to kill harmful germs in dirty water. A pamphlet for Pelargon distributed in Botswana claimed “diarrhoea and its side-effects are counteracted,” implying that formula could be used to treat diarrhoea. In reality, diarrhoea is a condition that is often caused by infant formula, and is frequently deadly in countries like Botswana. Infants fed on Pelargon are at much greater risk for diarrhoea than breastfed babies. Nestlé’s “new and improved” formula was never tested outside the lab, and there was no evidence that in a real world setting it reduced the incidence of deadly infections in bottle-fed infants. Nestlé kept promoting it nonetheless, presenting it as the perfect formula for the HIV era.

**Replacing one risk with another**

Governments in Sub-Saharan Africa instituted HIV-prevention policies that centred around infant formula use, while researchers continued to study the relationship between HIV and breastfeeding. What they found was that in many regions, HIV-positive mothers who used formula were only replacing one risk with another. Exclusively
formula-fed babies had no chance of being infected with HIV through breastmilk, but were at much higher risk from other deadly infections normally associated with artificial feeding and lacked the immunological protection conferred by breastmilk. In some parts of Sub-Saharan Africa, exclusively breastfed and formula-fed children showed similar rates of HIV transmission, and exclusively breastfed babies born to HIV-positive mothers had as much chance of surviving to one year of age as did formula-fed children. Using formula exposed them to other fatal risks.

Current recommendations from UNAIDS and the WHO are that formula should only be used if it is Acceptable, Feasible, Affordable, Sustainable, and Safe (AFASS).3

Research exposed a simple and dangerous truth: that a mother who needs free supplies of formula is likely living in conditions that would make it dangerous to use. Nestlé is exploiting the vulnerability of these desperate women, using unverified health claims to convince mothers that their Pelargon formula prevents deadly infections.

Formula feeding also presents other problems. Formula is expensive and not always available, especially in rural and impoverished settings where supply chains are often disrupted. There is also the problem of spillover: there is no guarantee that the formula provided by government programs would not find its way into the hands of HIV-negative mothers, leading to unnecessary and dangerous formula use.

A Nestlé-made disaster

In May of 2009, Nestlé suspended delivery of its formula to several government-run formula distribution programs in the Gauteng, KwaZulu Natal, and Limpopo provinces of South Africa because the company had not been paid by the department of health for six months. While the International Code states that formula should not be donated for free, it also states that formula used during an emergency must be supplied for the duration of the emergency. The HIV crisis is still ongoing, yet Nestlé decided to cut off its supply to several facilities. While there is no data about the impact that the ten-day long stoppage had on infants, the Times of South Africa reported that mothers were feeding their babies diluted maize meal and black tea.4

There were also fears that some mothers would begin breastfeeding after having fed their children on formula. Mixed feeding carries the highest risk of HIV transmission because formula damages the infant gut, and leaves it more vulnerable to infection from HIV in breastmilk.

Nestlé is in gross violation of the Code for cutting off formula supplies in the midst of a crisis, and bears responsibility for the resulting negative health impact on South African infants. The company is intent on grabbing a share of the South African market, but refuses to accept responsibility for the wellbeing of South African families when the money dries up. Is this the “shared value” that Nestlé brags about in its advertising? That they benefit from the full value of $10 billion in annual profits, and only share their formula with those in need when they get paid on time?

References

Boycott Nestle!
- Don’t buy Nestle products! Write to the company and tell them why not.
- Don’t get involved in professional conferences sponsored by Nestlé.
- Visit www.infactcanada.ca, Nestle_Boycott.htm and www.babymilkaction.org to learn more.