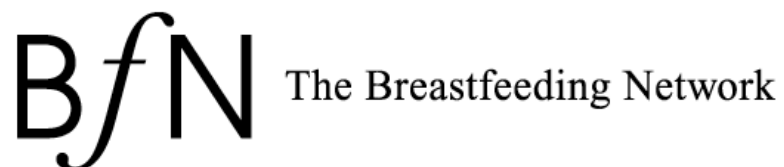


To find your nearest Breastfeeding Supporter call the **Supporterline 0844 412 4664**



The Breastfeeding Network Guidance Document 2003

£2

March 2003

The Breastfeeding Network, PO Box 11126, Paisley PA2 8YB
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www.breastfeedingnetwork.org.uk

*Calls provided by BT will be charged at 5 pence per minute.
A call set-up fee of 3 pence per call applies to calls from BT residential lines. Mobile and other providers' charges may vary.*

The Breastfeeding Network is a recognised Scottish Charity No SC027007

The Breastfeeding Network (BfN) Guidance Document

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Guidance for Breastfeeding Supporters

This document is intended to give guidance to Breastfeeding Network Breastfeeding Supporters, Probationary Supporters and Registered Trainees in their work in promoting breastfeeding and promoting the services the Breastfeeding Network offers. It is divided into two sections. The first section provides the underlying principles and the second section gives guidelines for the work of The Breastfeeding Network Breastfeeding Supporters and Registered Trainees.

These guidelines are intended for *your* protection, as a Breastfeeding Network Breastfeeding Supporter or Registered Trainee. They are also intended for the protection of the organisation. They are intended to *GUIDE* our actions. In many cases you will see that there is no hard and fast 'rule' on how to proceed. In every case where questions arise, these should be discussed with trustees, tutors or supervisors, as indicated. This is for our protection and also so that these guidelines can continue to change to meet the needs of Breastfeeding Supporters and Registered Trainees.

The Guidance applies to all ordinary members of The Breastfeeding Network – members change from Associates to Ordinary membership when they apply to do the long Breastfeeding Matters More course. We recognise that these provisions do not apply to associate members. We welcome people to do the short (6 week) Breastfeeding Matters course even if they do not feel they can comply with all of the provisions of this Guidance.

Introduction

Background

There are 3 main documents which both constrain and protect us when we represent the Breastfeeding Network. They are our Trust Deed¹, our Code of Conduct² and our insurance policy³ (see appendix for an explanation). In addition the Breastfeeding Network is a member of the British Association for Counselling and Psychotherapy, committing Supporters to following the Ethical Framework for Good Practice in Counselling and Psychotherapy (BACP)⁴ and also an associate member of the Telephone Helplines Association committing Supporters to work within their Guidelines for Good Practice⁵. The Guidance Document takes the principles contained in these documents and applies them to our work.

We hope that this Guidance Document, as well as governing the way Breastfeeding Supporters and Registered Trainees work, will serve as a wider model.

Principles:

From the Trust deed⁶

1. Our Trust Deed states that the beneficiaries of The Breastfeeding Network are the **public**. This means our actions need to be judged as to whether they are in the interests of the public at large. The purposes of our trust are: ***to advance the education and further the health of the public, and in particular mothers and children.***

¹ All available from the Breastfeeding Network. PO Box 11126, Paisley PA2 8YB.

² Breastfeeding Network as above.

³ Breastfeeding Network as above.

⁴ *Ethical Framework for Good Practice in Counselling and Psychotherapy. (2002)* British Association for Counselling and Psychotherapy.

⁵ Butcher, A. (1999) *Guidelines for Good Practice*. 3rd Edition. Telephone Helplines Association

⁶ The **Trust Deed** is the legal document which defines the Network, states what our purposes are, and how we may achieve them. We may only act within the Trust Deed. If it's not covered there, we can't do it. If the Trust Deed says we can't do it, then that is that. This covers taking money from manufacturers or distributors of breastmilk substitutes (this includes waters and teas and weaning foods), feeding bottles, teats or dummies - it's prohibited in the Trust Deed, so we must not do it.

2. Our Trust Deed acknowledges that our practice should be in line with the provisions of the 1981 WHO⁷/UNICEF⁸ Code of Marketing of Breastmilk Substitutes and subsequent WHA⁹ Resolutions¹⁰. See page 4 for an explanation.

From the Ethical Framework

3. The Ethical Framework for Good Practice in Counselling and Psychotherapy covers all aspects of work which involves using counselling skills, such as our own. The framework encourages us to consider the ethical basis of our work and to include ethics as an essential and important part of our everyday work. One of the ethical principles which should underpin our work is '*non-maleficence* – a commitment to avoiding harm to the client', including financial harm. In the view of the trustees of The Breastfeeding Network, this obligates us to consider carefully any ethical implications of any suggestions we might make to parents.

The Code and resolutions

The Code was intended as a **minimum** requirement for the protection of pregnant women, mothers and members of their families and infants. The Resolutions clarify and update the provisions of the Code. The Code discusses the responsibilities of manufacturers and distributors of these products. It sets limits to any relationship between these companies and health workers, women's groups and breastfeeding women. It also gives responsibilities to health workers and 'civil society' to check that companies are abiding by the Code. The Resolutions and The Global Strategy for Infant and Young Child Feeding¹¹ make it clear that babies above the age of 6 months also require protection from irresponsible marketing of breastmilk substitutes and complementary foods.

It should be noted that not all provisions of the Code and Resolutions are law in the UK¹². Breastfeeding Network policy is to work toward full national implementation of the Code and Resolutions.

The Code covers breastmilk substitutes (milks, drinks, and foods sold for babies under the age of 6 months), and bottles and teats (this is sometimes called the 'scope of the code'.)

Since 1981 the scope has been clarified to include 'follow-on' milks¹³, and it has been made explicit that all complementary foods should not be "marketed or used in ways that undermine exclusive and sustained breastfeeding".¹⁴ The Global Strategy for Infant and Young Child Feeding¹⁵ highlights the vulnerability of children "during the transition period when complimentary feeding begins...inadequate knowledge about appropriate foods and feeding practices is often a greater determinate of malnutrition than the lack of food."

To support this, we consider that The Breastfeeding Network should not form any association with companies producing foods or feeding products for babies and children – e.g. commercial foods, drinks or feeding utensils marketed for children under the age of 3.

We understand that the spirit of these resolutions means that such products are within the scope of the Code.

The measures of the Code and Resolutions were important, but were found not to be enough on their own to ensure that breastfeeding would flourish. So, the World Health Organisation (in partnership with other agencies, such as UNICEF) brought in the following measures as broader policy approaches to promote and support breastfeeding as well as to protect against inappropriate marketing practices:¹⁶

⁷ WHO = World Health Organisation

⁸ UNICEF = United Nations Children's Fund

⁹ WHA = World Health Assembly. WHA Resolutions have the same status as the Code.

¹⁰ These will be referred to in this Guidance as 'Code and Resolutions'

¹¹ The Global Strategy on infant and young child feeding.

¹² The Infant Formula and Follow-on Formula Regulations 1995

¹³ WHA Resolution 39.28 (1986)

¹⁴ WHA Resolution 49.15 (1996)

¹⁵ WHA Resolution 55.15 (2002)

¹⁶ See Richter, J, (2001) Holding Corporations Accountable: Corporate Conduct, International Codes and Citizen Action, Zed Books, London, page 83.

- 'Ten Steps to Successful Breastfeeding 1989
- The *Innocenti Declaration* 1990
- A new citizen alliance for breastfeeding action (WABA)¹⁷ 1991
- The UNICEF/WHO Baby Friendly Hospital Initiative 1991
- UN Convention of the Rights of the Child 1989¹⁸
- Support for the ILO Convention on the rights of working women 2000¹⁹
- The Global Strategy for Infant and Young Child Feeding 2002

These are important initiatives and we support them in the course of our work directly with mothers and families. It is useful to remember that they are linked in with the provisions of the Code and Resolutions at all levels.

Being Independent

The aims of The Breastfeeding Network, in the Code of Conduct, state that **we are an independent source of information**. This means we have to be **seen to be independent**, and avoid any appearance of conflict of interest. The Breastfeeding Network will not enter into any relationship with any person, company or association with a commercial interest in infant feeding, even if they are not covered in the Code and Resolutions. This might include (but is not limited to) companies which manufacture, market, or hire:

- dummies (covered in our Trust Deed),
- pumps,
- sterilisers,
- feeding bras, and special breastfeeding clothing
- medications and other remedies commonly used by babies or new mothers (eg 'colic' or teething remedies)
- nipple creams, breast shells, nipple shields, breast pads, breast soothers
- breast milk storage containers,
- pillows, slings, feeding chairs
- products such as 'womb sound tapes' or teddies intended to soothe colicky or sleepless babies,
- products associated with particular parenting styles.

Some of these items may be of great help to individual women in establishing or sustaining breastfeeding. However we feel we can best offer **independent support and information** to women and families if we **are not affiliated with such products in any way**²⁰ - and are seen to have no such affiliation – with any product on which they may seek our advice.

Research²¹ has demonstrated that breastfeeding 'style' (frequency of feeds, whether they are by routine or 'baby-led', and avoidance of night feeds) may impact on some women's ability to achieve exclusive and sustained breastfeeding.

The WHO European Office published Breastfeeding: how to support success – a practical guide for health workers²². Its authors remind us:

Implement the Code in letter and spirit in your daily work. (p60)

¹⁷ WABA = World Alliance for Breastfeeding Action

¹⁸ UN Convention of the Rights of the Child

¹⁹ ILO = International Labour Organization. See Maternity Protection Convention 2000, C183

²⁰ A case study of Infant Feeding in the UK identified the growing trend of charities and other Non-Governmental Organisations 'turning to the corporations for funding'. Eastwood, M. *The Charity Trustee's Handbook*, DSC, p 51 and Baby Milk Action Update, December 2002, page 4

²¹ Hörnell A, Aarts C, Kylberg E, et al, Breastfeeding Patterns in exclusively breastfed infants: a longitudinal prospective study in Uppsala, Sweden, 1999, *Acta Paediatrica* 88: 203-11.

²² Vinther, T and Helsing, E (1997) WHO Regional Office for Europe, Copenhagen, available as pdf download from WHO website.

Guidelines for the Work of Breastfeeding Supporters and Registered Trainees of The Breastfeeding Network

We hope the introduction helps explain the background to this section which applies the principles to our work. If you are uncertain about any situation ask yourself two questions:

- will the public doubt the Breastfeeding Network's independence?
- will it lead to endorsement by association?

Situations in which you may find yourself:

This section considers the ways in which Breastfeeding Supporters and Registered Trainees may be asked to act, over and above their work answering calls from women, their families and health professionals who seek support and information. (The Code of Conduct covers the issues involved in this work). It also covers ways in which other roles individuals may have (through work or other voluntary activities) may interact with their BfN role.

We have included traffic lights in each section to help make the decisions clearer.

Publicising the Breastfeeding Network

Putting up Supporterline and Breastfeeding Support Centre posters:



A poster may be displayed on public notice boards of any supermarket/high street chemist/baby store.²³ While some of these may be distributors (or manufacturers) under the scope of the Code, we consider that the public areas of the shop do not create the impression of an association between the business and BfN. A poster in a baby changing/feeding room is also appropriate. NB It may be useful to check the appearance of the area where the BfN poster is displayed and to monitor whether it continues to be clear that BfN is an independent service.



Any offer of a special display from a business which has a commercial interest in infant feeding is not appropriate. We do not wish to accept space, facilities or goods from any group who might benefit from breastfeeding failure²⁴.



We welcome use of our Supporterline cards, posters, Breastfeeding Group posters, etc. in health authority premises. For your own protection as well as the public's we ask that you display Supporterline number and avoid displaying your own phone number

Publicising the Breastfeeding Network in Magazines and Newsletters



We welcome having Supporterline listed in mother-and-baby magazines which are for sale in the high street, as this is similar to the 'public display boards' in shops. We are also happy to have listings in local directories of voluntary groups and newsletters of other charities. In these cases it would be up to the local Breastfeeding Supporter to make sure that these listings clearly show that the BfN is a separate organisation, the local Breastfeeding Supporter is with the BfN and that the Supporterline number is the number of the Breastfeeding Network.

Writing or Contributing to leaflets, websites and other publications

Contributing to leaflets



You may also wish to include the Breastfeeding Network in **locally-produced leaflets**, which give information of interest to breastfeeding women (e.g. local venues welcoming breastfeeding mothers, or leaflets of local breastfeeding support venues and volunteers).



Please ensure that these leaflets do not include sponsorship from any company with an interest in infant feeding. (The sponsor might be a local supermarket or a baby goods' shop which also sells baby foods, bottles or sterilising equipment, or any products listed above).

²³ This was covered in the paper from the trustees in 1999 *What a Supporter can or can't do*, with particular reference to Breastfeeding Awareness Week.

²⁴ Breastfeeding failure may also include failure of exclusive and sustained breastfeeding - Aarts C, Kylberg E, Hörnell A, et al, *How Exclusive is Exclusive Breastfeeding?: A comparison of data since birth with current status data*, 2000, International Journal of Epidemiology, 29(6): 1041-6.



If a Breastfeeding Supporter or Registered Trainee writes an **article for publication** (a journal, a magazine (local or national) or for the newsletter of another charity or organisation) using her credentials as a Breastfeeding Supporter or Registered Trainee with BfN, she should consider what kind of advertising is in the publication. She should also consider how much control she may have over how the article is used – e.g. if it is placed alongside an advertisement for an infant feeding product it may look like endorsement of that product. Will the placement of the article reflect poorly on the organisation, through association with the advertisers?

Using Leaflets and Websites



In the course of your work for The Breastfeeding Network you may wish to give leaflets or website links on aspects of breastfeeding to women and their families, or to health professionals. Where BfN does not have a leaflet on the relevant topic please use leaflets or links from the BfN reading list for Trainees.



You may like to make it clear that, if these come from a different organisation, they are not BfN leaflets (This is especially important when giving to health professionals but may also be useful to mention to mothers). If you come across a leaflet or website **not** on the book list, which you would like to use, can you please show it to your supervisor or tutor.

Writing for leaflets, websites etc.



Writing for commercial companies free from involvement in infant feeding – a Breastfeeding Supporter or Registered Trainee may contribute to a leaflet, video, website or other materials and be acknowledged for her contribution.



She should ensure that the leaflet (etc.) is not sponsored wholly or in part by any company with an interest in infant feeding, and that the information is evidence-based. A Registered Trainee should ensure that her tutor has checked any contribution.



Writing for commercial companies involved in infant feeding – a Breastfeeding Supporter or Registered Trainee should not use her qualification as a Supporter to receive money from any company which has an interest in infant feeding to write leaflets or materials for that company, even if her qualification is not stated on the leaflet

A Breastfeeding Supporter or Registered Trainee who contributes to any materials (written, visual, video, internet) on infant feeding for any commercial company should inform the trustees in writing of this.

Websites



Setting up a website – if a Breastfeeding Supporter or Registered Trainee sets up a website with content related to babies or breastfeeding, they should inform the trustees. All cautions as stated for leaflet would apply, and issues which might be addressed in the Code of Conduct should be considered carefully.

Note: WHA Resolution 54.2 singles out the use of electronic communication (the internet) as a worrying source of numerous violations of the Code and Resolutions.



Writing for a website – if a Breastfeeding Supporter or Registered Trainee is writing for a website or describing the breastfeeding support BfN offers when she is writing on internet boards or for a website, the same considerations apply as in print – is it clear that she is with the BfN?

- Is there any association that might create an appearance of endorsement?
- Is the site wholly or partially sponsored by any company with an interest in infant feeding?
- Are there advertisements or promotions for any products related to infant feeding?
- Could there be 'endorsement by association'?
- If the Supporterline service is described or the Supporterline number is displayed, it should be clear that it is a service from BfN, not from the website.



Chat lists – Breastfeeding Supporters and Registered Trainees are free to join in chat lists on the areas of breastfeeding and parenting. In the course of discussion some other members may ask the Supporter (perhaps by private email) about personal breastfeeding situations. This is similar to situations in person where a Breastfeeding Supporter/ Registered Trainee

may judge that a 'chat' is turning into a supporting query. In these cases, the Breastfeeding Supporter or Registered Trainee should follow our Code of Conduct. The Breastfeeding Supporter or Registered Trainee should take her supporting work on the internet to supervision, just as much as her telephone work and her other BfN activities.

Breastfeeding Supporters should remember that we are a UK charity and that enquiries from overseas will usually be best dealt with by organisations local to the inquirer.

Working as a Breastfeeding Supporter

Working in Breastfeeding Support Centres



Some Supporters may be active in support groups set up and run in the name of The Breastfeeding Network. Others may attend other types of support groups. We are happy to work in partnership, but Breastfeeding Supporters should consider the following:

- Is it clear to those involved that you are attending the group as a Breastfeeding Network Breastfeeding Supporter or Registered Trainee? Please wear your badge when working in support groups.
- If any payment or voucher is offered, including for expenses or refreshments, where has the money come from? Payments and expenses met by the NHS may be accepted.



However if a local supermarket offered to pay for refreshment, this should be refused. Accepting goods is accepting financial support from a company which is either a manufacturer or distributor of products (formula milk, baby drinks, including water advertised or represented for use of babies, commercial infant foods, bottles and teats, follow-on milks) covered by the Code Resolutions²⁵. Remember, too, that companies who may not have sold such products when you began accepting donations, can change their product lines. It is important, not only to **be independent** of any influence which might be created by financial donations from companies with an interest in infant feeding, but to **be seen to be independent**.

Breastfeeding Supporters and Registered Trainees should take care to avoid using their position at support groups for personal gain. For example this includes enhancing or promoting their business by advertising or trading.

Antenatal Classes



If a Breastfeeding Supporter provides input to antenatal classes run by the NHS, or by another charity collected from group members by another charity (e.g. NCT), payment and expenses may be accepted. Registered Trainees should only work in an antenatal class under the supervision of their tutor.

Membership of other organisations, unions and professional bodies



Any Breastfeeding Supporter or Registered Trainee can be a member of another organisation in the area of baby care or parenting.



Representing other organisations – if a Breastfeeding Supporter or Registered Trainee acts as a volunteer or a paid worker for any other organisation in the area of baby care or parenting (e.g. Serene, TAMBA, NCT, LLL, ABM, Child Bereavement Trust, BLISS) she should tell her tutor or supervisor who may need to discuss this with the trustees. The possibility of difficulties arising from any differing ethos between another organisation and The Breastfeeding Network needs to be considered. If the other organisation receives financial support from, or has an association with a company with an interest in infant feeding, there will need to be careful attention to possible competing interests, and the appearance of competing interests. (Ideally this would be addressed before a Trainee begins the Breastfeeding Matters More course.) There might also be implications for insurance cover.

Membership of Unions, Royal Colleges, and Professional Associations



The Trustees recognise that midwives, health visitors, nursery nurses, child minders, etc, will wish to remain members of their professional associations even if these accept money in the form of sponsorship or advertisement in journals by companies with which manufacture or distribute products under the scope of the Code and Resolutions. We are grateful when our

²⁵ In particular, WHA resolution 49.15 (1996) states that "complementary foods are not [to be] marketed for or used in ways that **undermine exclusive and sustained breastfeeding**."

Breastfeeding Supporters or Registered Trainees draw the attention of these organisations to their responsibilities under the Code and Resolutions, and to the dangers of conflict of interest, and support them in this.

Individuals' paid work outside the Breastfeeding Network



Breastfeeding Supporters and Registered Trainees who are also health professionals – we would hope that employment as a health professional in the UK would not create conflicts of interest. However, some employers may provide **training or services which are wholly or partly funded by companies who have a financial interest in infant feeding**. This can create what IBFAN²⁶ calls 'endorsement by association' (IBFAN Statement on Company Sponsorship of conferences). The Breastfeeding Network recognises the dilemmas inherent in this – see the section on attendance at training events financed by companies, in the section on Meetings / Conferences, below.



In a case where a Breastfeeding Supporter or Registered Trainee finds herself in a work situation where she is expected to use **equipment or leaflets with company logo** – e.g. head circumference tapes, diary covers, or pens, she may be able to find alternatives. This may involve asking managers to provide suitable equipment.



Attending company funded events, etc. – this should be discussed with her Breastfeeding Network supervisor. Any concerns about specific situations should be taken to the trustees. We recognise that midwives will be directly involved in supplying women in their care in hospital with breastmilk substitutes and health visitors, nursery nurses or receptionists may be called upon to sell breastmilk substitutes at health authority clinics.

Breastfeeding Supporters or Registered Trainees who work in a hospital or clinic may find themselves **distributing commercial gift packs**, e.g. Bounty or Baby Welcome. Such packs have been shown to have a negative impact on breastfeeding.^{27 28} Any concerns about specific situations should be taken to the trustees.



Employees of companies which are manufacturers or distributors of breastmilk substitutes, teats or bottles – generally anyone who is an employee of any company which manufactures or distributes products under the scope of the Code and Resolutions may become a member of The Breastfeeding Network, and may apply to train as a Breastfeeding Supporter. Discussion with the tutor should take place before training, and the trustees should be informed. If her job is directly related to promotion of those products, it is likely that the individual would not be allowed to train as a Breastfeeding Supporter, as she might experience conflicts of interest. It is important to recognise that a Breastfeeding Supporter in such employment could be seen by others to be at risk of such conflicts.

If a potential trainee is in such a position, or an existing Supporter's or Trainee's job changes so that these conditions apply, the matter should be taken to the trustees for consideration.



Employees of companies who manufacture or distribute products for infant feeding which are not in the scope of the Code, (see page 3) – we need to be seen to be independent of any company with an interest in infant feeding methods or outcomes, and avoid 'endorsement by association'. Anyone who is interested in training who is employed by a company as described above should discuss this with a tutor and the trustees should be informed.



Any Supporter or Trainee who is intending to set up in private practice as a Lactation Consultant - please take this to supervision and inform the trustees in writing, so that the overlap of the roles can be considered. We recognise that health professionals may find an IBCLC qualification useful in their NHS roles and distinguish this from private practice, which may set up potential conflicts of interest, or the appearance of such conflicts (e.g. in the area of referrals).

²⁶ The International Baby Food Action Network

²⁷ Howard C et al. *Office Prenatal Formula Advertising and Its Effect on Breastfeeding Patterns* Obstetrics and Gynaecology Vol 5, No 2, Feb 2000 p296-303

²⁸ Donnelly A, Snowden HM, Renfrew MJ, Woolridge MW. *Commercial hospital discharge packs for breastfeeding women* (Cochrane Review). In: *The Cochrane Library*, Issue 1, 2003. Oxford: Update Software.



Infant feeding advice lines – a Breastfeeding Supporter or Registered Trainee should not accept work on an infant feeding advice line or website which is sponsored, supported or in any way associated with a company with an interest in infant feeding.



Health Professionals who lend or hire breast pumps – some health professionals may have breast pumps in their hospital / clinic which are loaned or hired to mothers. As a general principle BfN welcomes having breast pumps available to women through the NHS, especially in cases of medical need. Be aware of the following points:

- It should be clear that the loan or hire is done through the NHS and that NHS insurance covers this.
- Best practice is that each user has a new collection kit (for an electric pump) or a new hand pump, or that kits/pumps are *autoclaved* between users. (This is due to risks of cross-infection with thrush, HIV, etc.) It would be appropriate for a Breastfeeding Supporter or Registered Trainee to raise this matter with her manager / NHS Trust.
- Breast relievers, which are currently still prescribable are not suitable for expressing and storing milk.

If a health professional hires pumps as a volunteer agent, not through her professional role, as covered by her employer, please see section of the *Guidance* below.

Acting as an agent



Pump hire agents – the Breastfeeding Network has **no agreements** with any pump hire company. So no Breastfeeding Supporter may be an agent for a pump hire company. This will also apply to all new Registered Trainees, from the publication of this document.



Agents – some individuals may do paid work as agents for products listed on page 5. Any Breastfeeding Supporter or Registered Trainee in this position should discuss this with her tutor or supervisor. It is important that no one use her position within The Breastfeeding Network to enhance the status of a business or work as an agent.



Agent for other companies – no Breastfeeding Supporter or Registered Trainee should enter into any arrangement to act as an agent for any company where the arrangement depends on her qualification as a Breastfeeding Supporter/Registered Trainee, or her services for the company are advertised using her status as a Breastfeeding Supporter/Registered Trainee for the BfN.



If a prospective trainee is already a volunteer or paid agent for a company which has an interest in infant feeding within the scope of the code she must inform her tutor and the trustees before she begins training. **It will not usually be possible to combine this type of role with training as Breastfeeding Supporter.**



If a Breastfeeding Supporter or Registered Trainee **becomes** employed or self-employed by a business or in a business concerned with infant feeding (e.g. Pumps for rent or sale, infant feeding advisor in a chemist shop) this should be discussed with her tutor/supervisor and with the trustees. It will be decided whether she can continue her training/registration as a Breastfeeding Supporter alongside the enterprise. **In some cases this may mean that she may no longer continue as a Breastfeeding Supporter or Registered Trainee. It is important to avoid conflicts of interest and any appearance of conflicts of interest.**

Use of our name or logo – non-commercial and commercial

Non-commercial

for example as joint organisers of conferences

WHO code and subsequent WHA resolution standards should be observed



When it is proposed that the name/logo of BfN is used on anything published in association with another organisation, the trustees should always be consulted. The trustees, in consultation with the member involved will check that the Code & Resolutions standards are being upheld and appropriate **written consultation** about the contribution of the BfN has been undertaken. If anyone sees the name of the BfN in a publication, it is helpful to let the trustees know so that we can monitor our public recognition.

Related products not covered by the code (see page 5) are also included in the statement above.



Use of our name or logo on local breastfeeding policies – we would not normally specifically endorse a local breastfeeding policy, e.g. by having ‘Approved or Supported by the BfN’ on it. This is in case it is interpreted as approval of every detail of the policy, and of the practice, over which we have no control. We might endorse a model policy, as we did, for example, with The Baby Friendly Initiative’s document *Toward National, Regional and Local Strategies for Breastfeeding*.



In directories, books, magazines and websites – we are delighted for the name of The Breastfeeding Network to be publicised in directories of voluntary help, books, magazines and web-sites for parents, etc. However, if there is any question that a link between the organisation producing the directory and The Breastfeeding Network could be detrimental to The Breastfeeding Network, the trustees should be consulted.

Commercial



Sponsorship links with commercial companies for sponsorship should only be made after very careful consideration, thought and examination of the issues by the trustees²⁹. On any occasion on which it is proposed that the name of the BfN is used alongside that of a sponsor, this must come to the trustees for approval.

Raising Funds



Fund-raising events- local companies sponsoring fund-raising events – we would usually welcome local companies who have no commercial interest in infant feeding sponsoring, or contributing to local events. Please check that the funding will not raise any issues of competing or conflicting interest. However, all such offers should be brought to the trustees to ensure that there are no implications for the BfN.

The spirit of this Guidance should be kept in mind.

Meetings/conferences/study events

With funding from a company with an interest in infant feeding



Before attending an event it is essential to enquire about the funding of the event. Events (study days, training sessions, pump days, etc) may be wholly or partially funded by companies covered by the Code & Resolutions. They may also be funded by companies not covered by the Code but which have an interest in infant feeding as listed on page 5.

Three ways of attending an event which might include company sponsorship are:

- Having a stall
- Attending
- Speaking



Having a stall (this may be offered free of charge or a fee may be charged) at an event attended by a mix of commercial and charity/non-commercial stalls is least likely to be seen as Breastfeeding Network endorsement of the sponsoring company/ies. A Breastfeeding Network presence at such an event may provide the chance to learn what information is given out when companies are involved in events, and may also be of value because of opportunities to meet local health professionals, etc. The pros and cons of attendance should be weighed up. This is a matter which may benefit from discussion with your supervisor or tutor. **Sometimes it is best to say ‘no’.**



At times a stall may be offered where a table is to be shared with another organisation. Care should be taken that it is clear which portion of the stall is from The Breastfeeding Network, and every effort made to avoid sharing with someone with a very different ethical stance.



Attending events partially or wholly sponsored by companies with an interest in infant feeding may be of value at times. This should be balanced by two considerations.

- 1) The information from such a day may be biased – possibly subtly – which may affect the Supporter’s or Registered Trainee’s future work

²⁹ Buchanan, P. *Sponsorship is just another form of advertising*, BfN newsletter issue 5, Dec 1998

- 2) The attendance of workers from reputable charities may be of benefit to the companies involved.

In any case, Breastfeeding Supporters and Registered Trainees should speak to their supervisors about such attendance. The Breastfeeding Supporter/ Registered Trainee may also wish to consider minimising the receipt of benefit from the company by taking her own lunch. (Indeed, sometimes the sponsorship a company offers consists of paying for the food at a study event).

Speaking at an event:

Wholly sponsored



If a Breastfeeding Supporter or Registered Trainee is invited to speak at an event **wholly sponsored by** a company or companies with an interest in infant feeding this may result in not only being paid by company money, but the loss of the appearance of independence. As such, **we do not support accepting such speaking engagements**. This holds where the Breastfeeding Supporter or Registered Trainee might appear without payment or for a favour in kind.

Partially sponsored



Where an event is **partially sponsored by** company money, the costs of appearing and being seen to be endorsing the event should be balanced by the opportunity to reach the audience. As above, you may consider providing your own food. You could also refuse a fee, or donate it to a cause unrelated to infant feeding, and/or make a statement at the start of your talk on your position.

A Breastfeeding Supporter or Registered Trainee who agrees to speak at such a day should inform the trustees before final acceptance of the invitation.

Before accepting an invitation to speak



It is highly recommended that Breastfeeding Supporters and Registered Trainees **enquire about the sources of funding** for events at the time they are booking / accepting an invitation to have a stall / speak. We realise that asking detailed questions about the funding of an event may be uncomfortable. However bringing our concerns about this to the attention of the organisers provides an opportunity to discuss what we find acceptable and why funding from companies with an interest in infant feeding, and particularly those who may benefit from breastfeeding difficulties or failure, is a difficulty for Breastfeeding Supporters and Registered Trainees. We would suggest, too, that the Breastfeeding Supporter or Registered Trainee asks for confirmation of the funding arrangements in writing and ask the organisers to advise her if these change between the time the Breastfeeding Supporter or Registered Trainee is booked to speak and the event itself (as has been known to happen).

Organising an Event



Breastfeeding Network events – when an event is organised in the name of The Breastfeeding Network (a study day, the AGM, etc) stalls may be welcome. Care should be taken to make sure these stalls do not reflect badly on the organisation or undermine our reputation. We would also not allow companies which manufacture or distribute products under the scope of the Code and Resolutions to have a stall. (See page 5)



Bookstalls – these are often a valuable addition to an event. If the selection of books is left to a bookseller who is invited to attend, this does not imply endorsement of the books by The Breastfeeding Network, but some care may be taken over which titles appear.



Other stalls – selling breastfeeding images or slogans on cards, t-shirts, etc. could be seen to provide an opportunity for attendees to buy products which enhance breastfeeding in the wider community. We would welcome this, which is in line with our aims. Such products are different from products such as bras or pumps which might be used during breastfeeding – having them at a day could therefore imply that such products are necessary for all breastfeeding women, or imply endorsement of that particular product brand.



Care should be taken that the sellers of the products are not affiliated with an organisation within the scope of the Code and Resolutions.



Breastfeeding aids – stalls selling pumps, or other 'breastfeeding aids', or other products listed above in this document (page 5) would not be acceptable.



Baby Milk Action stalls – we welcome stalls from Baby Milk Action at all of our events.



Nescafé – if a Breastfeeding Supporter or Registered Trainee is organising a study day or event in the name of The Breastfeeding Network she should find out if the venue serves Nescafé coffee. This may be unacceptable to many members. In some instances (e.g. College campuses) a Nescafé-sponsored café may be located near or on the premises to be used for the study day. It is suggested that such venues should be avoided. Please discuss any issues like this with the trustees.

These Guidelines for Breastfeeding Supporters and Registered Trainees are intended to help ensure that they are working ethically and also safely – for themselves and for the people they are in contact with in the course of their work for The Breastfeeding Network.

As things change and new ways of working are constantly coming up, these Guidelines cannot hope to be exhaustive. If a situation arises which is not covered here, please bring it to the attention of the trustees, as well as discussing it in supervision. This document will be reviewed annually by the trustees and will be altered as required.

Jane Britten, Mary Broadfoot, Phyll Buchanan, Anabel Hands, Carolanne Lamont, Magda Sachs

Trustees, November 2000

Updated by trustees – March 2003

Phyll Buchanan, Barbara Farmer, Carolanne Lamont, Jane Putsey, Angela Veysey

"The trustees acknowledge the help of Magda Sachs in preparing this revision of the Guidance"

Glossary

The 3 main documents which both constrain and protect us when we represent the BfN are : -

The **Trust Deed**^{30 31}, this is the legal document which defines the Network, states what our purposes are, and how we may achieve them. We may only act within the Trust Deed. If it's not covered there, we can't do it. If the Trust Deed says we can't do it, then that is that. This covers taking money from manufacturers or distributors of breastmilk substitutes, feeding bottles, teats or dummies – it's prohibited in the Trust Deed, so we must not do it.

Our **insurance**. For our own sake as individuals, we should do nothing in the name of the Network which we are not insured to do. The cover provided is wide and applies anywhere in the UK, for example whether you are holding classes in your home, supporting a mother in her home, or in health service premises or other public areas.

Our **Code of Conduct**. All Supporters (and Registered Trainees) will have read this before signing to say they can work within it.

Ethical framework

In addition to The Breastfeeding Network Code of Conduct, we are committed to following the Ethical Framework for Good Practice in Counselling and Psychotherapy³². This framework covers all aspects of work which involves using counselling skills, such as our own. The framework aims to encourage "practitioners to consider the ethical basis of their routine work...and to embrace ethics as an essential and integral part". One of the ethical principles which should underpin our work is 'non-maleficence – a commitment to avoiding harm to the client', including financial harm.

The framework also includes the following conclusion: "The challenge of working ethically means that practitioners will inevitably encounter situations where there are competing obligations. In such situations it is tempting to retreat from all ethical analysis in order to escape a sense of what may appear to be unresolvable ethical tension...by accepting this statement of ethics, members of the British Association for Counselling and Psychotherapy are committing themselves to engaging with the challenge of striving to be ethical, even when doing so involves making difficult decisions or acting courageously." The Breastfeeding Network supports this.

Voluntary organisations in the UK	
Association of Breastfeeding Mothers 08444 122 949	http://www.abm.me.uk/
The Breastfeeding Network 0844 412 4664	www.breastfeedingnetwork.org.uk
La Leche League 0845 120 2918	http://www.laleche.org.uk
National Childbirth Trust 0870 444 8708	http://www.nctpregnancyandbabycare.com/

Other organisations in the UK and Internationally	
The Ethical Framework of the British Association for Counselling and Psychotherapy can be found at -	http://www.bacp.co.uk/
Baby Milk Action 01223 464 420	www.babymilkaction.org
UNICEF UK Baby Friendly Initiative	http://www.babyfriendly.org.uk
Maternity Alliance	http://www.maternityalliance.org.uk
IBFAN	http://www.ibfan.org
World Health Organisation	http://www.who.int
Telephone Helplines Association	http://www.helplines.org.uk/publications_ggp.htm

³⁰ What Breastfeeding Supporters Can and Can't do, see footnote 23, p8.

³¹ For copies see footnotes 1-3, p3

³² The BACP Ethical framework can be found at <http://www.bacp.co.uk/>

Legal and other documents	
The UK Law Statutory Instrument 1995 No. 77	The Infant Formula and Follow-on Formula Regulations 1995 http://www.hms0.gov.uk/si/si1995/tcon
The International Code of Marketing of Breastmilk Substitutes	http://www.ibfan.org/english/resource/who/fullcode.htm and subsequent relevant resolutions, in particular WHA RESOLUTION 49.15 * to ensure that the financial support for professionals working in infant and young child health does not create conflicts of interest, especially with regard to the WHO/UNICEF Baby Friendly Hospital Initiative
The Global Strategy on infant and young child feeding.	World Health Organization, 55 th World Health Assembly. April 2002 http://www.babyfriendly.org.uk/pdfs/globalstrategy.pdf
UN Convention of the Rights of the Child	http://www.ibfan.org/english/resource/related/related01.html#1
ILO International Labour Organization. See Maternity Protection Convention 2000, C183, especially article 10	http://ilolex.ilo.ch:1567/english/convdisp1.htm

From our Trust Deed – the purposes of the BfN are:

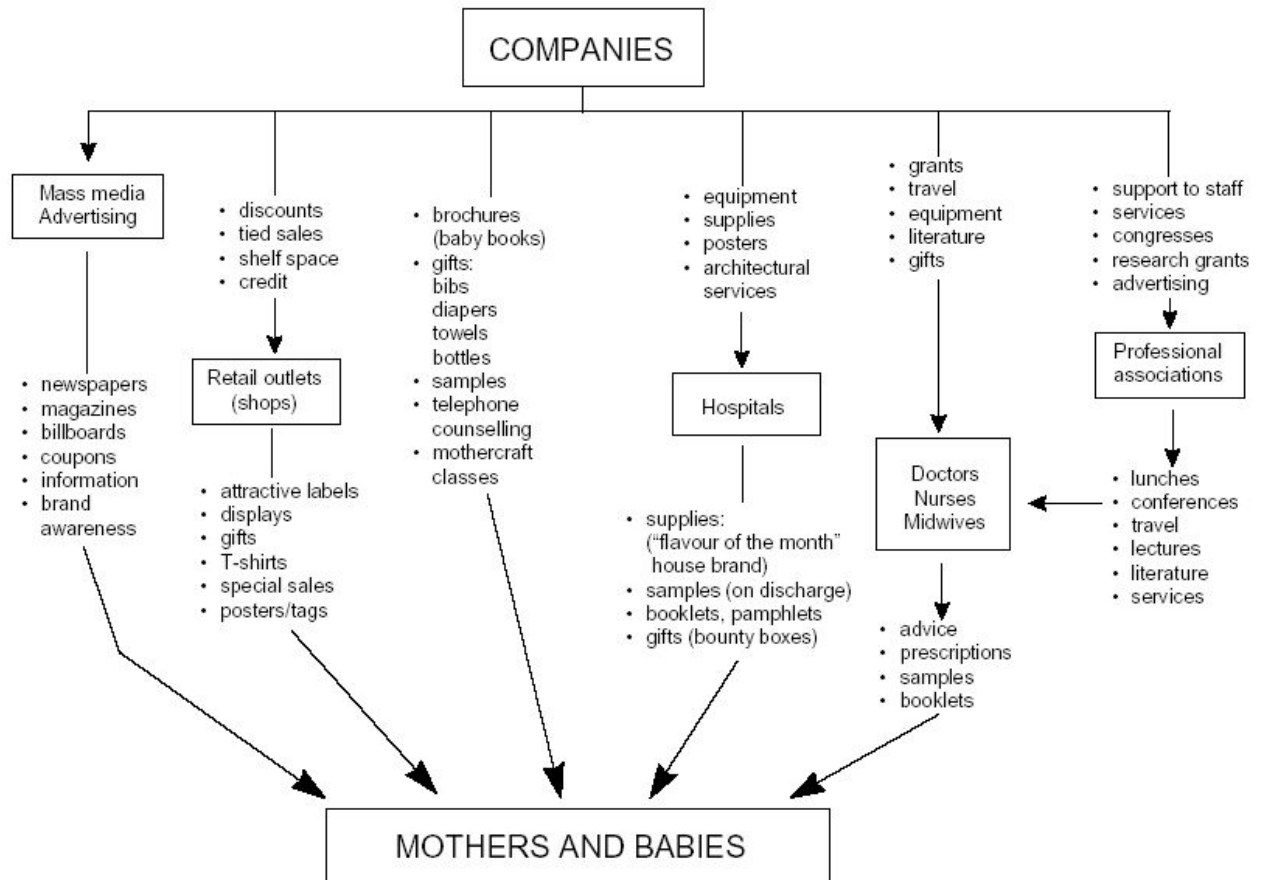
To advance the education of and further the health of the public, and in particular mothers and children by:-

- (1) promoting breastfeeding and a greater understanding thereof in the United Kingdom;
 - (2) collecting and disseminating information on breastfeeding and baby and infant nutrition;
 - (3) providing information and support to parents on the feeding of babies and infants; and
 - (4) setting, and encouraging the acceptance of, quality standards for breastfeeding support and establishing and publishing codes of practice for such support;
- 5.2 In seeking to give effect to the purposes of the Network, but not otherwise, the Trustees may:-
- (i) initiate, support and organise, maintain, equip, manage or assist in, any work or project calculated to further the purposes of the Network;
 - (ii) train, educate and maintain during training, persons intending to engage in work carried out in pursuance of the purposes of the Network;
 - (iii) award grants and scholarships for study, travel, research and for the provision of materials in furtherance of the purposes of the Network;
 - (iv) form or acquire and exercise the control of any companies, societies, associations and bodies in the United Kingdom or elsewhere whose objects are wholly charitable, the trading activities of which are exempt trading activities, and which have purposes similar to the purposes of the Network;
 - (v) create or undertake and execute any charitable trusts which may lawfully be undertaken by the Network and may be necessary or desirable for furtherance of the purposes of the Network;
 - (vi) establish and support or aid in so doing, any charitable association or institution, and subscribe or guarantee money for charitable purposes in any way connected with the purposes of the Network or calculated to further those purposes;
 - (vii) employ and pay proper and reasonable remuneration to any person or persons (not being a Trustee) to supervise, organise and carry on such work in furtherance of the purposes of the Network as is authorised by the Trustees and, as employers of staff, to make all reasonable and necessary provision for the payment of pensions and superannuation to or on behalf of employees and their widows or widowers and other dependants;
 - (viii) raise funds and invite and receive contributions from any person or persons whatsoever by way of loan, subscription, covenant, grant, sponsorship, legacy, endowment, donation and otherwise, and either absolutely or conditionally or in trust for any of the purposes of the Network, and may take such steps as they consider appropriate to procure such funds and encourage such contributions, in accordance with such guidelines as shall be approved by the members in General Meeting from time to time.

The Network shall not however accept (whether subject to any special trust or not) loans, subscriptions, covenants, grants, legacies, endowments, donations or contributions from, nor enter into any financial or other arrangement by way of sponsorship or otherwise, and whether or not contractual, with, any person, company or member of a group of companies or other entity engaged in the business or function in the United Kingdom or elsewhere, whether directly or through an agent or through any person, company or other entity controlled by or associated or under contract with it, of (i) manufacturing and/or distributing breastmilk substitutes; and/or (ii) wholesaling or retailing breastmilk substitutes marketed under names, labels or logos exclusive to that wholesaler or retailer. Breastmilk substitutes means any food being marketed or otherwise represented as a partial or total replacement for breastmilk, whether or not suitable for that purpose:

Understanding marketing

How do companies get to mothers and babies?



Source: Workshops on lactation management and BFHI, St Petersburg, 1993 (EUR/ICP/NUT 150).

The chart above is reprinted from Vinther, T and Helsing, E (1997) WHO Regional Office for Europe, Copenhagen, available as pdf download from the WHO website