

**LABELING OF BREAST-MILK SUBSTITUTES
PRODUCTS: COMPLIANCE, PERCEPTION AND
USAGE AMONG MOTHERS/CARETAKERS IN
PATHEIN CITY, AYEYARWADDY REGION**

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ABSTRACT

The Asia Pacific region is the biggest market for formula companies. Breast-milk substitutes products constitute one third of the market in this region. Developing countries like Myanmar have been also faced a condition of vulnerability to aggressive marketing of formula and baby food companies. To restrict these conditions, the Ministry of Health and Sports, Myanmar enacted the Order of Marketing of Formulated Food for Infant and Young Child (OMFFIYC) since 2014. However, there were limited studies that assess labeling compliance on this Order and caregivers' perception and usage on labeling of breast-milk substitutes products. To fulfill these requirements, this study was carried out using parallel mixed-methods design in Patheingyi city, Ayeyarwaddy Region. Labeling compliance was observed among all breast-milk substitutes products that sold in supermarkets, minimarts, stores and bazaars by using standardized checklist and expressed as frequency and percentage. And the qualitative study was conducted among nine mothers and caretakers to explore their perception and usage on labeling of breast-milk substitutes products by using IDI guidelines. In total collected 117 products, only 74 were illegible products with the description of Myanmar language on label. Among 74 products, over half of products were formulated complementary food and almost all the products were imported. None of the BMS products complied with all criteria that mentioned in Order. Most of the products complied with only two-third of criteria in Order. Nine in Ten products contained health and nutritional claims and pictures of infant and young child. Only one third of the products complied with the Order regarding easily visible font size of one millimeter height. Although most of the products mentioned important notice, only small portion complied on font size. Nearly two third of products described their products was the best food for the baby. Qualitative findings revealed that all mothers read the facts on label only in their first time they bought on appropriate age for the product, expired date, ingredients, health claims, preparation guidelines and instructions to use. All participants approved that Myanmar language on label is better for understanding and more convenience in reading. Some mothers had misperception that they can feed their children without following the instructions. Most mothers did not still practice the preparation for right temperature and ratio of milk powder and water mentioned in feeding table. Almost

all mothers used formulated food for their children due to their beliefs of containing higher nutritional contents than breastmilk and self-made weaning diet. These beliefs might be originated from health and nutritional claims which was illegally mentioned in labels. Therefore, this study pointed out to enhance law enforcement on existing Order by taking actions such as giving warnings to producers and distributors and health education to retailers. So that they can aware their responsibilities and totally comply with the Order. Moreover, health education about the importance of labeling of breast-milk substitutes products should be needed disseminate to mothers, caretakers and household decision makers to correct misbeliefs of containing higher nutritional contents in those products and to aware consequences of not following the instructions on labels.