



December 13, 2015

Ms. Hannah Ransom
Senior Project Officer, Adjudication
Australian Competition and Consumer Commission

Submitted via email: adjudication@accc.gov.au

Re: A91506 & A91507 – Infant Nutrition Council – submission

*Submission on the Application for the revocation of A90539 and A90540 and the substitution with authorizations A91506 and A91507 lodged by the Infant Nutrition Council for the Marketing in Australia of Infant Formula (MAIF Agreement): Manufacturers and Importers Agreement Date

Dear Ms. Ransom:

As you are aware, the International Board of Lactation Consultant Examiners® (IBLCE®) tendered a submission on November 10, 2015 in response to the draft authorization of A91506 and A91507. IBLCE advocated for additional consideration by the Australian Competition and Consumer Commission (ACCC) on this matter of importance to the health and nutrition of Australian children and mothers. We are most appreciative that the ACCC is entertaining additional testimony and submissions on this significant public health matter. IBLCE is providing this additional submission in support of the major points made by the Australian Breastfeeding Association as well as many other influential and well-recognized nonprofit organizations and individuals throughout Australia.

As previously shared, the International Board of Lactation Consultant Examiners® (IBLCE®) is an international certification board which certifies lactation consultants, including over 28,000 worldwide in over 100 countries, including approximately 2,200 certified lactation consultants located throughout Australia.

The Australian Breastfeeding Association (ABA) has objected to the reauthorization of the MAIF Agreement as proposed by the Infant Nutrition Council Limited for a number of compelling reasons. IBLCE respectfully and emphatically urges the ACCC to follow the recommendations of the ABA including specifically:

1. Refraining from committing to the MAIF Agreement for a full decade;

2. Including distributors and retailers such as supermarkets and pharmacies in the MAIF Agreement, as well as including pricing information for breast-milk substitutes so that Australian consumers can make more fully informed decisions;
3. Affording far greater effect to the WHO Code and subsequent WHA decisions.

Thank you for the opportunity for further comment as well as your careful consideration of this matter of great importance to the health and well-being of Australia's youngest residents.

Very Truly Yours,

Andreja Tekauc Golob, M.D., IBCLC
Chair