



Infant Formula and Follow-on Formula Market Study- Invitation to Comment Response from the Committee of the Paediatric Specialist Group, the Association of UK Dietitians

Background

The British Dietetic Association (BDA) is the largest association of food and nutrition professionals in the UK, and the only organisation representing the entire dietetic workforce. The BDA is both a professional body and trade union, representing the professional, educational, public and workplace interests of its 11,000+ members.

The Paediatric Specialist Group is a sub-group within the BDA, consisting of dietitians specialising in paediatric nutrition. Members of the committee work across the UK including in the NHS, private practice, industry and research. The committee serves as a resource for consultation on topical issues related to paediatric nutrition.

General Questions

Do you agree with our proposed scope (both the product and geographic scope) and themes for this market study, as set out in paragraphs 40 to 54.

The Paediatric Specialist Group committee welcomes the Competition and Market Authority (CMA) market study into infant formula and follow-on formula in the UK.

What, if any, are the key differences in the infant formula market in each of England, Scotland, Wales and Northern Ireland that should be reflected in our analysis?

The infant formula market in England, Scotland, Wales and Northern Ireland has notable differences that should be reflected in the analysis, including variations in regional healthcare policy, socioeconomic conditions and cultural attitudes.

Please explain any such differences and how each may affect the analysis.

Healthcare Policies: Scotland and Northern Ireland have region-specific initiatives to promote breastfeeding. These regions also report higher levels of breastfeeding uptake and continuation, which may affect infant formula consumption.

Economic Factors: Child poverty may drive demand for affordable formulas while higher disposable incomes in certain areas could drive demand for premium products perceived as superior.



Cultural Attitudes: cultural attitudes toward infant feeding will impact demand for infant formula across different regions.

How does price influence which infant formula consumers choose?

In our experience, more expensive infant formulas are often perceived by parents to offer greater benefits for their babies. However, we have observed some low-income families resorting to measures such as using less infant formula, diluting the formula or introducing solids early due to the high costs. These practices can result in infants receiving inadequate nutrients necessary for healthy growth and development, potentially affecting their longer-term health.

Where do consumers get information about infant formula from, and which of these sources are most influential and trusted?

Healthcare professionals should serve as reliable and well-informed sources of information and guidance for new parents. However, the Baby Friendly Initiative (BFI) has contributed to a perceived reluctance from healthcare professionals to advise and support parents in making informed decisions about alternatives to breastfeeding. Exploring the experiences, knowledge and confidence of midwives, health visitors and dietitians who work with new parents would provide valuable insights into how best to support families in these circumstances.

How do consumers evaluate the quality of different infant formulas? Are they able to accurately observe their quality and make meaningful comparisons?

In our experience, new parents often make decisions about infant formula based on the experiences of family, friends, or peers. Increasingly, parents are also turning to online forums for advice and support. However, the information shared by family, friends, or online communities can often be inaccurate or misleading. While manufacturers provide information online, it is challenging for parents to make comparisons due to the differing ways information is presented across various company websites. Additionally, new parents may struggle to fully understand the health benefits and claims made by manufacturers, adding to their confusion.



To what extent are consumers aware of the different infant formulas? What do consumers perceive to be the differences between them to be?

Brand loyalty plays a significant role in infant formula choice for new parents. Many parents perceive one formula to offer greater benefits than others, often without fully understanding the claims made by manufacturers.

Are consumers aware that all infant formulas provide all of the nutrients a healthy baby needs?

New parents are not always aware that all infant formulas are required to meet specific nutritional standards, ensuring they are nutritionally equivalent across brands. However, some brands may include premium ingredients, such as probiotics, prebiotics, and symbiotics, which can increase the cost.

Are there any ways in which consumers could be provided with more or better information on infant formula and follow-on formula?

Healthcare professionals, including midwives, health visitors, doctors, and paediatric dietitians, are ideally positioned to provide independent information to support new parents who decide not to breastfeed. However, these professionals may not always feel confident in offering such guidance, as they are often discouraged from discussing alternatives to breastfeeding. Additionally, pressure on community health services can make it challenging for families to access this advice when they need it.

Do manufacturers indirectly promote infant formula, and/or cross-market it via other products? If yes, how do they achieve this and what is the impact on consumers?

Follow-on infant formulas are frequently advertised by companies, despite parents being able to continue using first infant formulas. Sales of follow-on milk suggest that parents are significantly influenced by these promotional efforts.

Are there any ways in which the entry and expansion of brands or own-label products could be encouraged and supported? If so, what do you consider could be done and why?

There is a wider variety of infant formula available in Europe compared to the UK. Some formulas are unavailable in the UK due to differences in raw ingredient



availability, manufacturing processes, and regulatory requirements. Reviewing these factors could help encourage the expansion of both established brands and own-label products in the UK market.

Why is there a lack of price differentiation for infant formula at a retail level?

The lack of price differentiation for infant formula at the retail level is influenced by regulatory frameworks and consumer behaviour. The UK's strict Infant Formula and Follow-on Formula Regulations 2007, aligned with EU and WHO guidelines, tightly govern the composition, labelling, and marketing of infant formula to ensure nutritional consistency and public health compliance. These regulations prohibit price promotions, discounts, or advertising of infant formula for babies under six months, thereby limiting price variation. Additionally, parents tend to be risk-averse, often choosing familiar and trusted brands, which reduces the importance of price as a key decision-making factor.