

THE FACTS OF INFAC^T:
HOW THE INFANT FORMULA CONTROVERSY WENT FROM A PUBLIC
HEALTH CRISIS TO AN INTERNATIONAL CONSUMER
ACTIVIST ISSUE.

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Abbreviations

- **LDC** – Less Developed Country
- **INFACT** – Infant Feeding Action Coalition
- **ICCR** – Interfaith Center for Corporate Responsibility
- **NCC** – National Council of Churches
- **ACA** – Action for Corporate Accountability
- **UFW** – United Farm Workers
- **MHS** – Minnesota Historical Society
- **UN** – United Nations
- **WHO** – World Health Organization
- **UNICEF** – United Nations International Children’s Emergency Fund
- **FAO** – Food and Agricultural Organization
- **PAHO** – Pan American Health Organization
- **PAG** – Protein Advisory Committee
- **CFNI** – Caribbean Food and Nutrition Institute
- **ADW** – Arbeitsgruppe Dritte Welt
- **MISA** – Minnesota International Student Association
- **TWI** – Third World Institute

Introduction

Can a product which requires clean water, good sanitation, adequate family income, and a literate parent to follow printed indications be properly and safely used in areas where water is contaminated, sewage runs in the streets, poverty is severe and illiteracy is high?¹

- Senator Edward Kennedy, 1978
*Senate Subcommittee on
Health and Scientific Research*

The 1960s and the 1970s marked an era of great global awareness and interconnectivity for the United States. With the development of international aid organizations like the Peace Corps by President John F. Kennedy in 1961 and Doctors Without Borders in France in 1971, awareness of the plight of others in Less Developed Countries (LDCs) became more and more prominent. In the United States the 1960s and 1970s were also marked by the fear of the spread of Communism and the escalating Cold War conflict between the United States and the USSR. Concern over the economic, political, and medical circumstances of other countries became more significant to both the average American and the United States government. This new consciousness of international issues and connectivity is reflected in the 1970s Baby Bottle Controversy grassroots movement.²

¹ *United States Government Files, 1976-1994. Box 3. Action for Corporate Accountability (ACA) Records.* Minnesota Historical Society (MHS).

² The Baby Bottle Controversy has also been called the Infant Formula Controversy, the Infant Feeding Controversy, and any combination of all three names. For clarification, any of these labels used here will refer to the issue defined in the paper, namely the activism concerned around the distribution of commercial formulas in LDCs, especially between 1969 and 1981.

The Baby Bottle Controversy is the historical name given to the activism over what many viewed as the improper use of infant formula in LDCs. The distribution of such artificial, typically dry formula resulted in the severe illness and death of millions of babies in the decades following World War II. According to the highly visible and outspoken international pediatrician, Dr. Derrick Jelliffe, inadequate bottle-feeding was one of the causes for the ten million cases of marasmus³ and diarrhea that occurred annually in LCDs.⁴ Raising awareness and addressing the Baby Bottle Issue became the central focus of a social justice organization called Infant Formula Action Coalition (INFACT). It developed a complicated web of connections and spearheaded a boycott of a major producer of baby formula. The major producer of infant formula that INFACT targeted was Nestlé Corporation, S.A., and the major form of activism surrounding the Baby Bottle Controversy became the Nestlé Boycott.

INFACT was a product of its time. The 1960s and 1970s saw the United States swept into a range of political and social issues such as environmentalism, the Vietnam War, Civil Rights, Gay Rights, and Consumer Rights. Various social, racial, gender, and religious groups rallied around and advocated for their causes everywhere from Capitol Hill to local courthouses, and from political conventions

³ Marasmus was defined by international pediatrician Dr. Derrick Jelliffe as a form of severe protein-calorie deficiency and massive malnutrition that usually occurred in the first three years of life. D.B. Jelliffe, ed., *Child Health in the Tropics: A Practical Handbook for Medical and Para-Medical Personnel*, 4th Edition (London: Western Printing Services, 1974): 53.

⁴ Gabriel Veraldi, "The Charges," in *Infant Feeding: Anatomy of a Controversy 1973-1984*, John Dobbing, ed. (London: Springer-Verlag, 1988): 4.

to college campuses.⁵ The Minnesota-based Infant Formula Action Coalition succeeded in making the infant formula feeding controversy a household issue by the late 1970s as the movement borrowed tactics that were being used successfully in these other social movements.

The recent historiography and literature that address INFACT and the organization's boycott of Nestlé focus on the fact that the group succeeded in raising awareness of the infant formula controversy but not on the process of building the movement or the effectiveness of the awareness campaign. Due to the anthropological and sociological approaches most secondary sources have taken, no systematic analysis of the development, organization and effectiveness of INFACT as an institution has been done.⁶ Most authors have focused on the infant formula crisis. INFACT, when discussed, is primarily in passing as an organization that joined the debate surrounding the advertisement and use of infant formula in LDCs. This paper investigates how INFACT came into being in light of international concerns and of highly visible activism. Through the use of INFACT's documents archived at the Minnesota Historical Society in St. Paul,

⁵ For more information see: Bruce Schulman, Julian Zelizer, eds., *Rightward Bound* (Cambridge, MA: Harvard University Press, 2008). Steven Fraser, Gary Gerstle, eds., *The Rise and Fall of the New Deal Order* (Princeton, NJ: Princeton University Press, 1989); and Lizabeth Cohen, *A Consumers' Republic* (New York: Alfred A. Knopf, 2003).

⁶ The most recent sources on INFACT and the Nestlé boycott in the historiography were published in the mid-1990s. Most of the sources were written in the decade immediately following the 1981 adoption of the *International Code of Marketing Breast-milk Substitutes* by the World Health Organization and have focused on the controversy itself rather than the historical actors.

Minnesota, an oral interview with the founder of INFACT, and various published primary and secondary sources, this thesis analyses how and why INFACT was developed and its effectiveness in achieving its goals of awareness and ultimately changed unethical corporate actions. INFACT initiated the consumer boycott against Nestlé on July 4, 1977, but in order to understand and assess how effective INFACT was, the background of the controversy must first be understood. INFACT members effectively demonized Nestlé in their consumer boycott without ever fully addressing the underlying issues that caused the misuse of infant formula in LDCs.

The Infant Feeding Issue

International public health and medical professionals' outspoken criticism of infant formula use in LDCs revealed the circumstances in which breast-milk was replaced or supplemented by substitutes. Starting in the late 1950s, World Health Organization and health professionals in LDCs attempted to address the medical and business ethics of promoting and marketing infant formulas to women who were unable to use the product properly. The nutritional components and benefits of breastmilk were still being discovered and understood in the post-war period, but what was understood by these health professionals was that breastfed babies in LDCs were not experiencing the high rates of morbidity and mortality formula-fed babies experienced. As of the mid-1970s, no significant economic and medical change occurred as a result of their concerns. But issue began to garner public attention when it was identified with

social justice concerns. Activists identified four larger public health problems in many LDCs (poverty, illiteracy, sanitation, and lack of industrialized technology) that prevented women from being able to use infant formula properly.⁷

Poverty

The first major problem for infant formula companies like Nestlé who marketed and distributed breast-milk substitutes was the rampant poverty in much of Africa, Southeast Asia, and Central and South America. Nestlé often distributed free samples to the new mothers in the maternal wards of hospitals, but the supply of free formula was cut off once the mother left the hospital.⁸ There are two issues here. First, when a baby was bottle fed formula from birth, this alternative inhibited or altogether eliminated the production of breast-milk by the mother. Breast-milk was (and continues to be) the ultimate supply and demand system: the more a baby drank from the breast, the more the lactation ducts would be stimulated to increase milk production. Once a mother started to use formula, however, her own lactation decreased or stopped altogether. Second, impoverished families eagerly used samples of a free product that was guaranteed safe by the manufactures. But because those who relied on formula stopped lactation, a family needed money to purchase enough formula and bottle

⁷ Dayanath Jajasureya, Adrian Griffiths, Raymond Rigoni, *Judgement Reserved: Breast-feeding, Bottle-feeding, and the International Code* (Nawala, Sri Lanka: Asian Pathfinder Publishers, 1984): 17.

⁸ This practice is still commonly implemented in modern obstetrical wards of hospitals in developed countries. See Eugene Declercq, M. Labbock, M. O'Hara, and C. Sakala, "The Relationship of Hospital Practices and Women's Likelihood of Fulfilling Their Intention to Exclusively Breastfeed," in *American Journal of Public Health* vol 99, no 5 (May 2009): 1-7.

supplies to continue to feed a growing infant. The majority of the population in LDCs earned their country's minimal wage or less, and the cost of infant formula ran between twenty-five to eighty percent of a family's income.⁹ A common solution to counteracting the costs of the expensive infant formula was to overdilute the powdered formula (in order to "make it last"). As Fred Clarkson pointed out in his 1981 article in *Win*, "In Barbados... a study showed that 82% of mothers overdiluted the formula to make a four-day supply stretch anywhere from five days to three weeks."¹⁰

Illiteracy

The vast majority of impoverished women in LDCs lacked the ability to follow the fairly complex written instructions for formula preparation. Most mothers in LDCs were illiterate, even in their native language.¹¹ The mathematical proportions for preparing formula, and the multistep requirements of heating water to a certain temperature, sterilizing bottles and nipples for a specified amount of time, and finally mixing the right amount of powdered formula with warm water, were typically written in English on the side of formula tins. INFACT employee Doug Clement demonstrated the severity of the illiteracy problem in the proper use of infant formulas in LDCs in his 1978 article "Infant

⁹ Fred Clarkson (DC INFACT), "Growing Nestle Boycott Haunts Infant Formula Makers," *Win* March 1, 1981. Box 4. *ACA Records*. MHS.

¹⁰ Clarkson (DC INFACT), "Growing Nestle Boycott Haunts Infant Formula Makers." Box 4. *ACA Records*. MHS.

¹¹ Mike Muller, "The Baby Killer: A War on Want investigation into the promotion and sale of powdered baby milks in the Third World" (London: War on Want, March 1974): 7.

Formula Malnutrition” reprinted in multiple magazines and bulletins. Using the example of Haiti, he wrote “Barely 16% of women in Haiti are literate, and then usually in Creole and/or French. On the shelves of many Haitian grocery stores are formula cans with instructions in English and Spanish only.”¹²

Sanitation

Clean water was needed to mix with the infant formula powder, as well as to wash bottles, nipples and other equipment necessary for bottle feeding. Water sanitation was dismal in most LDCs, with excrement, toxins, soil and other elements contaminating the water. Those mothers in LDCs who lived in the urban slums developed in the wake of decolonization and rapid urbanization on average dealt with a water supply contaminated with human excrement, dirt and waste. Rural mothers in LDCs oftentimes had to transport the amount of water their families needed for the day from the nearest well or river that was miles away. To purify the water, fuel would be needed to boil the water, water would be needed to sanitize the bottle feeding equipment for the appropriate amount of sterilization time, and time would be needed to cool the water enough to make the breast milk substitute. All of this work was for one feeding – which meant that in order to prepare the baby food in a sanitized environment with a sanitized bottle, this effort and these resources would have to be repeated four to six times a day. As Doug Clement pointed out in his “Infant Formula Malnutrition” article,

¹² Douglas Clement (INFACT), "Infant Formula Malnutrition: Threat to the Third World," in *Christian Century* (March 1, 1978) and *Learning With 6:3* (March 1978). Box 4. *ACA Records*. MHS.

only ten percent of all families in Indonesia had “reasonable” access to “safe” water as defined by the United Nations.¹³ In this type of environment, sanitation and sterilization were usually overlooked, and germs and contaminants were regular companions within the confines of bottle feedings.

Industrialized technology

This last factor that contributed to the misuse of infant formula in LDCs is intricately connected with the three previous factors. As with sanitation, the lack of industrialized cooking facilities such as a sink with running water or an electric stove severely inhibited proper making and use of breast milk substitutes. With a disproportionate amount of LDC’s population living in poverty and squalor, the luxury of having access to a refrigerator for storage of unused formula mixture was unheard of in the slums of African cities and the rural and remote areas of Central and South America. Without the ability to refrigerate mixed formula, the premade formula was either thrown out or would spoil and still be fed to the baby.

The prevalence of these four factors in LDCs prevented the proper preparation, use, and storage of breast milk substitutes by mothers. The circumstances resulted in diarrhea and dehydration in infants even if the mother had adequate access to artificial formula. Many did not, and this compounded the problem of malnutrition caused by the overdiluting of formula. Marasmus,

¹³ Doug Clement (INFACT). "Infant Formula Malnutrition: Threat to the Third World," Box 4. *ACA Records*. MHS.

severe malnutrition and protein-calorie deficiency, was a leading cause of infant morbidity and mortality in the 1960s and 1970s.

The companies that manufactured formula did not seem to take these issues into consideration when mass marketing their products. The day-to-day reality of bottle feeding in industrialized European or North American countries was remarkably dissimilar in comparison to the recently decolonized and politically/economically vulnerable LDCs of Africa, Southeast Asia and South America. Parents in industrialized countries were able to afford the seemingly nominal sum of a few dollars for each tin of infant formula and lived with the luxury of modern appliances and amenities such as a stove, clean running water, and a refrigerator. When it was clear that the product had both high potential and the likelihood of misuse and abuse, many physicians, public health officials, and proponents of the World Hunger Program¹⁴ in the 1970s thought that infant formula companies, Nestlé in particular, should alter their advertising and marketing strategies.

It is important to emphasize that the 1970s's Nestlé Boycott was not directly about the superiority of breast-milk.¹⁵ Rather, as the next three chapters will demonstrate, the boycott and its historical actors were involved in a complex, multilayered web of policy, politics, medical knowledge, and cultural changes. The Nestlé Boycott is a perfect example of how public health and medical issues

¹⁴ The United Nations University's nutritional program.

¹⁵ Explicitly, it addressed the medical and business ethics of promoting and marketing infant formula to women who were unable to use the product properly.

could become politicized and commercialized in an effort to raise awareness and affect change. Chapter 1 reveals the social and cultural circumstances leading up to 1977 and the ways that INFACT fit within a reform environment in the 1960s and 1970s of increased and vocal awareness of social justice, world issues, and consumer activism. Chapter 2 discusses the neo-colonial context of international aid organizations and their actions of entitled presence in LDCs. It suggests the negative impact that imposition of Western culture and technologies could have on the people and economies of developing countries. Those working in the LDCs, especially public health and medical professionals, began to address the problems. Chapter 3 looks at the social justice activism that occurred in regard to the Baby Bottle Controversy, which involved a distinct politicization and reframing of a public health issue into a consumer activism and social justice mantra.

The 1960s and 1970s ushered in new global, national, and local perspectives on science, medicine, politics, consumerism, equality, and gender rights and responsibilities. President Johnson's "War on Poverty" and "Great Society" movements are institutional examples of increased awareness of inequality and social justice. A noticeable increase in activism occurred from the 1950s to the 1960s, often accredited to the Civil Rights movement and prominent leader Martin Luther King, Jr. in the 1950s and early 1960s. The 1960s and 1970s were decades that experienced distinct and sometimes contradictory developments: people began to distrust institutions and authority figures to make the changes and corrections to society that were morally and socially necessary,

but the mantra of better life through science manifested itself in the booming pharmaceutical industry and emphasis on scientific motherhood.¹⁶

The 1960s and 1970s saw the postwar baby boom generation come of age, and by 1970 there was a record population of forty million young Americans aged 14 to 24, an over fifty percent increase in the number of youth since 1960.¹⁷

Higher education became more readily available for greater portions of society, and this growing number of youth experienced an unprecedented prolongation of adolescence during the period between high school and their first job or marriage. This trend of longer periods of no familial and monetary responsibility allowed for greater social activism and freedom among young adults. As the next chapter demonstrates, the Baby Bottle Controversy was an international issue dating back to pre-World War II. However, it was not until that the late 1960s and 1970s that an organized movement addressing the controversy emerged due

¹⁶ Several historians have covered these developments. For changing perspectives on motherhood, see Rima Apple's *Perfect Motherhood: Science and Childrearing in America* (New Brunswick, NJ: Rutgers University Press, 2006); and the compilation edited by Rima Apple and Janet Golden in *Mothers & Motherhood: Readings in American History* (Columbus, OH: Ohio State University, 1997). For the growing reliance on science and the booming post-war pharmaceutical industry, see Alfred D. Chandler, Jr., *Shaping the Industrial Century: The Remarkable Story of the Evolution of the Modern Chemical and Pharmaceutical Industries* (Boston: Harvard University Press, 2005); Andrea Tone, Elizabeth Siegel Watkins, eds., *Medicating Modern America: Prescription Drugs in History* (New York: New York University Press, 2007); and Dominique A. Tobbell, *Pills, Power, and Policy: The Struggle for Drug Reform in Cold War America and its Consequences* (Berkeley: University of California Press, 2012). *Special thanks to Professor Tobbell for these suggestions and for allowing me to reference her book pre-publication.

¹⁷ Rebecca Klatch, *A Generation Divided: The New Left, the New Right, and the 1960s* (Berkeley, CA: University of California Press, 1999): 4.

in part to the increased freedom associated with prolonged education and the liberation from traditional duties and accountability, such as marriage and employment. In this active period of social and political fervor, the issue of international exploitation and global poverty became topics of on-campus discussion. As this paper will suggest, it would be on one particular college campus that the INFACT movement, influenced by the cultural on goings of that era, took firm root and acted as the original base of operations to expanding the Nestlé Boycott.

Chapter 1: Setting the Stage for INFACT

The basic rule seemed to be that anyone could play. Behind the familiar refrain of ‘What can I do?’ lay the supposition that every individual could do something. This included not only modifying one’s personal behavior, but also implied the average citizen could participate in the formulation of public policy.

-George Bloom in *Changes*¹⁸
May 13, 1971

The purpose of this chapter is to understand the environment in which INFACT was developed and how INFACT chose to frame the Baby Bottle Crisis within the confines of corporate accountability and responsibility. Though the Nestlé Boycott developed within the span of a few short months, the ideas implemented by INFACT’s leaders were learned from previous activist campaigns that permeated the United States in the 1960s and 1970s. Social movements concerning race, gender, and sexual orientation abounded, as did economic actions concerning food prices, product production and use, and labor rights in public media. Political activism reflected Cold War fears and anti-war protests. This post-war period was marked by a noticeable increase in concern and awareness of personal rights, roles, and responsibilities.

This awareness manifested itself in anti-authority and anti-paternalistic mindsets, most notably directed toward those in medicine and in government.

¹⁸ George Bloom, “Ecology and the War,” in *Changes* (13 May 1971). Cited in Craig Cox, *Storefront Revolution: Food Co-ops and the Counterculture* (New Brunswick, NJ: Rutgers University Press, 1994): 26.

Scholars typically date the start of bioethics from 1970-1971,¹⁹ and news of the Tuskegee Syphilis Experiment became public knowledge in 1972. Women were judicially awarded the right to control their reproductive capabilities by the Supreme Court in 1973, and there was a general move away from paternalistic medicine that was easily characterized in the birth control movement that had been visibly led by feminist pioneer Margaret Sanger in the 1930s through the 1950s.²⁰ Distrust of government and government institutions was evident during these two decades as well: the Civil Rights Movement finally succeeded in ending government sanctioned racial discrimination with the Civil Rights Act of 1964 and resulted in the Voting Rights Act of 1965. Social justice activism presented itself in the 1965 Delano Grape Strike led by labor leader Cesar Chavez and in the Stonewall riots of New York City concerning gay rights during the Summer of 1969. Students and veterans took to the streets to hold the United States government accountable for its decisions and actions in the Vietnam Conflict, and nowhere was this more apparent than the 1970 Kent State University Massacre. The Watergate scandal of 1972 led to Richard Nixon's resignation as President of the United States in 1974. These counter-culture events reflect on the post dramatic evidence of the change and activism that was occurring in the 1960s and 1970s. These medical, social, and political events occurred before the

¹⁹ Albert R. Jonsen, *The Birth of Bioethics* (Oxford University Press: Oxford, 1998): 27.

²⁰ For a more in-depth analysis of the movement away from paternalistic medicine in regard to birth control development, see Elaine Tyler May, *America and the Pill: A History of Promise, Peril, and Liberation* (New York: Basic Books, 2010).

development of INFACT in 1977, and they significantly influenced the administrative leaders behind INFACT when they developed and orchestrated the Nestlé Boycott.

The Road to Boycott²¹

The working definition of a consumer boycott as used in this analysis is “an attempt by one or more parties to achieve certain objectives by urging individual consumers to refrain from making selected purchases in the marketplace.”²² While other social action tactics such as shareholder resolutions, letter-writing campaigns, and lobbying were contemporary attempts to affect change, the boycott had two qualities that gave it special status. First, business owners found the technique particularly effective, as they were the group whose organizations were most often the target of boycotts.²³ Second, the boycott in

²¹ This section is a brief attempt to explain what was going on in the United States that enabled the formation of the INFACT orchestrated Nestlé Boycott. Much more in-depth analysis on the history of the philosophy and ideals of consumer boycotts can be found in such works as S. Prakash Sethi, *Up Against the Corporate Wall: Modern Corporations and Social Issues of the Seventies* (Prentice-Hall, Inc: Eaglewood Cliffs, NJ, 1971); N. Craig Smith, *Morality and the Market: Consumer Pressure for Corporate Accountability* (London: Routledge, 1990); Monroe Friedman, *Consumer Boycotts: Effecting Change Through the Marketplace and the Media* (Routledge: New York, 1999); and Lawrence Glickman, *Buying Power: A History of Consumer Activism in America* (Chicago: University of Chicago Press, 2009).

²² Friedman, *Consumer Boycotts*, 4.

²³ This is very notable in relation to the Nestlé Boycott because, before the Boycott was initiated by INFACT in July 1977, the Interfaith Center for Corporate Responsibility (ICCR) led several religious groups to file shareholder resolutions, and eventually even a lawsuit, against American-based infant formula makers such as Abbott/Ross, Bristol-Meyer, and Borden. These stockholder resolutions succeeded in soliciting some marketing changes from those American-based

America had a long tradition in the arena of social justice. Psychologist Monroe Friedman argues that since the Revolutionary War tea parties, the boycott has been used more than any other organizational technique to promote and protect the rights of the powerless and disenfranchised segments of society.²⁴ Boycotts have been considered as a “weapon of the weak,”²⁵ and indeed consumer boycotts have often been called and implemented on behalf of such diverse causes as worker’s rights, gay rights, women’s rights, and the environment.²⁶

Feelings carried over from the 1960s greatly affected the activists of the 1970s. The 1960s demonstrated to people living through all the social and political change that every person could be meaningful – people could, if they dared, participate in the formation of social change. Nothing stood in their way except complacency. It was possible for individuals to change themselves and to affect change in the world without incurring physical pain or inflicting it on others.²⁷ This outlook and grassroots political activism reached a historic peak during the early 1970s and provided an excellent demonstration that individual action, made collective, could be an effective path to social change.²⁸ When combined with the perceived success of civil rights and antiwar movements, the

companies, but as a Swiss company Nestlé was immune to such actions. Thus the most effective way to affect change in Nestlé was to initiate a consumer boycott.

²⁴ Friedman, *Consumer Boycotts*, 3.

²⁵ Friedman, *Consumer Boycotts*, 3.

²⁶ Friedman, *Consumer Boycotts*, 225.

²⁷ Craig Cox, *Storefront Revolution: Food Co-ops and the Counterculture* (New Brunswick, NJ: Rutgers University Press, 1994): 26.

²⁸ Tina Fetner, *How the Religious Right Shaped Lesbian and Gay Activism* (Minneapolis: University of Minnesota Press, 2008): 23

“empowerment” outlook gave birth to new movements.²⁹ Previous to, and during, the 1960s leaders of large multinational corporations frequently insisted that their only concern should be profits and that their only goal should be raising the dividends of their shareholders; they channeled philanthropic activity into foundations. This mindset began to change as issues of corporate responsibility led to consumer boycotts in order to change corporate policies and actions. Thanks to experiences with transnational campaigns like the boycott of South African goods and businesses during the anti-apartheid movement and the boycott of Nestlé products during the Infant Formula Boycott, the narrow focus on profits began to widen and multinational business leaders became much more likely to accept some level of social responsibility in the communities where they did business.³⁰

Scholars point to a number of broad explanations for the activism of the 1970s. The population mix had changed so that a large segment of society was composed of people born in the post-depression era who were not haunted by the fear and memory of scarcity and were not willing to accept without question a system whose primary concerns were based on economic rationality. The increase of radio and television coverage made millions of people aware of the inequities and the vast chasm between the “haves” and the “have-nots,” and the frustration and anger caused by social and economic deprivation. Economic,

²⁹ Cox, *Storefront Revolution*, 25.

³⁰ Gay W. Seidman, *Beyond the Boycott: Labor Rights, Human Rights, and Transnational Activism* (New York: American Sociological Association, 2007): 42.

social, and political institutions seemed to some to be less responsive to the changing needs of their constituents, which led the dissatisfied members of society to conclude that their grievances could not be redressed without a restructuring of social and economic institutions.³¹

In this context, the public identified large business corporations as a main culprit for social ills – corporations assumed a place equal to, if not higher than, that of the big government as the villain.³² Public action reflected the fact that corporations maintained or modified their policies according to the preferences of consumers. Consumers realized that in a capitalist society the one way to affect change was to learn to use economic power effectively.³³ Greater sales indicated a demand for continuation and maintenance of corporate product or policy, while lesser sales constituted a demand for modification of either corporate policy or product. Organized boycotts articulated in the negative the demands of the consumers.³⁴ According to one participant, the activist mentality against “rampant, unethical consumerism” was so prevalent in the 1960s and 1970s there was a national newsletter dedicated simply to covering and updating readers on the over one hundred new and existing boycotts.³⁵

³¹ S. Prakash Sethi, *Up Against the Corporate Wall* (Prentice-Hall, Inc: Eaglewood Cliffs, NJ, 1971): vii-viii.

³² Sethi, *Up Against the Corporate Wall*, viii.

³³ Alexandra Chasin makes this argument in *Selling Out: The Gay and Lesbian Movement Goes to Market* (St. Martin's Press: New York, 2000): 167.

³⁴ Chasin, *Selling Out*, 150.

³⁵ Douglas Johnson. Oral Interview. 23 February 2011. One hour fifteen minutes. Minneapolis, Minnesota.

Non-Violent Methods to Affect Change

Two very influential activist figures in the post-war decades were Mahatma Gandhi of the India independence movement and Martin Luther King, Jr. of the Civil Rights movement. These two historical leaders became resistance icons due to their beliefs, implementation of publicity, and use of non-violence civil disobedience to affect social and political change. Utilizing forms of nonviolent direct action, Gandhi and King popularized civil disobedience such as boycotts and sit-ins as ways to disrupt profitable business practices in the service of social change. The non-violent example set by these two leaders highlighted by direct contrast the different sides of social activism: violence and non-violence, as well as the fact that citizenship was located in the marketplace.³⁶ Most boycotts and actions associated with developing and spreading a boycott were nonviolent in nature; the goal was to bring about interest/awareness and spreading information to bring about change. This method of civil disobedience and non-violent action was in direct contrast to the urban riots of the 1960s with their destruction of property, but both tools had a confrontational aspect to them that invited the possibility of a reciprocal violent reaction from the opposition. Boycotts such as the grape boycott organized by Cesar Chavez or the orange juice boycott actively endorsed by Harvey Milk, and the Nestlé boycott ran by INFACT were all economic, nonviolent means of action. Demonstrations such as anti-Vietnam protests and those against nuclear arms and animal/environment

³⁶ Chasin, *Selling Out*, 146.

cruelty protests sometimes led to violent interaction between those taking a stand and those they were standing up against.

Despite the anti-authority and counter culture movement of the 1960s and 1970s, the nonviolent civil disobedience demonstrated so adeptly by Gandhi and King inspired much of the social activism that occurred in the 1960s and 1970s to be nonviolent in nature. The most influential example for the leaders and organizational structure of INFACT was that by Cesar Chavez and the United Farm Workers (UFW) movement beginning in 1962 in the southwestern United States.

Cesar Chavez and the United Farm Workers Movement

Cesar Chavez developed a logic of nonviolent theory and practice, drawing on aspects of Mexican culture and political history that guided the struggle for social justice in the United States.³⁷ Chavez structured various campaigns of the United Farm Workers around this logic of nonviolence in hopes of being a model

³⁷ The goal of bringing up Chavez and the UFW is not to contribute to the already extensive historiography that analyzes Chavez and his successes and failures in union organization and nonviolence, but rather to give a brief synopsis of what the larger historiography has said about him and his work and relate how aspects of Chavez's theories and actions impacted INFACT. The reader can access a more detailed explanation of the actions and ideas of Chavez and UFW in other sources such as Marshall Ganz, *Why David Sometimes Wins: Leadership, Organization, and Strategy in the California Farm Worker Movement* (Oxford: Oxford University Press, 2009); Winthrop Yinger, *Cesar Chavez: The Rhetoric of Nonviolence* (Hicksville, NY: Exposition Press, 1975); José-Antonio Orosco, *Cesar Chaves and the Common Sense of Nonviolence* (Albuquerque, NM: University of New Mexico Press, 2008); J. Craig Jenkins, *The Politics of Insurgency: The Farm Worker Movement in the 1960s* (New York: Columbia University Press, 1985); and Randy Shaw, *Beyond the Fields: Cesar Chavez, the UFW, and the Struggle for Justice in the 21st Century* (Berkeley, CA: University of California Press, 2008).

for other groups,³⁸ and succeeded in breaking from labor and union tradition by recruiting young outsiders looking to make a difference in the world.³⁹ Though Chavez followed on the heels of non-activist campaigners such as Gandhi and King, Chavez was using nonviolence at a time in which many of the most deprived groups in the United States were convinced it was an ineffective tool for social change. Black power advocates in the late 1960s utilized some forms of violence in the search for racial justice, and revolutionaries throughout less developed countries (LDCs) were toppling colonial regimes and inserting military dictatorships through armed struggle.⁴⁰ Chavez's personal commitment to voluntary poverty, however, struck a chord among the young clergy and college students rebelling against rampant materialism and consumerism.⁴¹ His success in framing the farmworkers struggle in spiritual rather than simply economic terms cast Chavez in a unique light that differentiated him from any other labor leader of his time.

Two aspects of Chavez's work are particularly relevant for the story of INFACT, namely the ability to transcend demographic barriers and the focus on incorporating and training as many activists as possible to in turn train others in

³⁸ José -Antonio Orosco, *Cesar Chavez and the Common Sense of Nonviolence* (Albuquerque, NM: University of New Mexico Press, 2008): 11.

³⁹ Randy Shaw, *Beyond the Fields* (Berkeley, CA: University of California Press, 2008): 3. The result was an eclectic alliance of Latino and Filipino farmworkers, migrant ministers and progressive priests, and current and former college students of various ethnicities. Chavez and the UFW movement succeeded in appealing to a variety of economic, social, and ethnic demographics.

⁴⁰ Orosco, *Cesar Chavez and the Common Sense of Nonviolence*, 11.

⁴¹ Shaw, *Beyond the Fields*, 3.

organizing tactics. One of Chavez's greatest achievements in the development and propagation of "La Causa"⁴² was the unification of multiple groups under a single ideal. Chavez's movement succeeded in connecting the situation of farmworkers to the institutionalized oppression of other marginalized groups. The subjugation of farmworkers was not just a special historical circumstance, but rather one of systematic imbalance of power in American society created to satisfy the greed of a few elites.⁴³ The other significant characteristic of Chavez's movement was that from 1965 to 1979 the United Farm Workers of America was the nation's leading organizer training school.⁴⁴ Chavez instilled the belief in his fellow organizers who trained interested activists/volunteers that nonviolent resistance and direct action could transform the farmworkers into democratic agents who had the skills and abilities to participate, deliberate, and make American liberal democracy more responsive to the needs and interests of the public and not just wealthy corporate interests.⁴⁵

Both aspects of Chavez's activism had a great affect on the development of INFAC and the spread of the Nestlé Boycott. Founders and leaders of the Nestlé Boycott looked to La Causa for inspiration and received training in nonviolent activism.⁴⁶ The boycotting of California grapes and lettuce became a national

⁴² Spanish for "the Cause," the term came to be used as a phrase that encompassed the farmworker struggle Chavez began in 1962.

⁴³ Orosco, *Cesar Chavez and the Common Sense of Nonviolence*, 30.

⁴⁴ Shaw, *Beyond the Fields*, 6.

⁴⁵ Orosco, *Cesar Chavez and the Common Sense of Nonviolence*, 31.

⁴⁶ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

movement and put the idea of “coercive nonviolence mechanisms”⁴⁷ at the forefront of American consciousness – it was this tool that the leaders of INFACT picked up and made the staple of their social justice activism in raising awareness of the infant formula controversy. Chavez and his establishment of the United Farm Workers had a much clearer, direct causal effect on INFACT than the example set by non-violent activist icons Mahatmas Gandhi and Martin Luther King, Jr. Both Gandhi and King, internationally renowned peace activists,⁴⁸ significantly impacted the theory of non-violent resistance but were well before the initiation of INFACT. Gandhi was assassinated in 1948, nearly thirty years before the founding of INFACT, and King was assassinated in 1965, over a decade before INFACT. When analyzing Gandhi’s affect on United State’s activism it is important to note he was a much more international figure rather than an easily accessible local or national American leader; however he left a legacy for the world. Douglas Johnson, the founder of INFACT, actually travelled abroad to India for several international conferences, so he was exposed to and influenced by Gandhi’s philosophy.⁴⁹ But Gandhi’s focus on political and social freedom

⁴⁷ Tactics meant to take away the ability of those with power to maintain the status quo by withholding labor and/or money. Orosco, *Cesar Chavez and the Common Sense of Nonviolence*, 31.

⁴⁸ Gandhi’s ideals and philosophies have been credited as influential by South African President Nelson Mandela and Civil Rights leaders James Lawson and Martin Luther King, Jr. King was awarded the Nobel Peace Prize in 1964 for his leadership in the United States Civil Rights Movement.

⁴⁹ Douglas Johnson actually first heard of the infant formula issue while in India in 1969; there it was discussed the problem of moving away from breastfeeding as an economic development issue that wasted resources and made babies ill. Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

from British Imperial rule did not resonate strongly in the United States because that cause was not directly connected to the everyday lives of the average American. King, on the other hand, was an African-American preacher from the southeastern United States who utilized the nonviolent, civil disobedience theory demonstrated by Gandhi to bring about racial, social, and political change. But even King's boycotts were localized actions to directly affect one city, or one state (usually in the South). Neither previous leader was as hands-on as Cesar Chavez was in his development of UFW nor did either leader achieve his degree of impact across social, racial, and regional populations.

The rhetoric of nonviolence was not a novel feature of Chavez's work, but it fit well with what became important to INFACT, namely the boycott. La Causa was well organized, geographically spread out, and effectively employed grassroots methods to garner support and raise awareness. INFACT founder Douglas Johnson credits Cesar Chavez and the UFW for the success of training regional leaders of INFACT and sharing institutional procedures to help INFACT become a nation-wide grassroots movement like UFW's La Causa and Delano Grape Boycott.⁵⁰

⁵⁰ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

“Squeezing Anita”: the Gay Rights Boycott Against Anita Bryant⁵¹

The oral interview with Douglas Johnson documented that Cesar Chavez and his work had a direct impact and influence on INFACT. What is less clear is the connection between two other boycotts occurring at approximately the same time, INFACT’s Nestlé Boycott and the Gay Rights Boycott against Florida oranges. Though there is no recorded evidence of how these two boycotts played off each other, the similarities in actions and ideals are strikingly parallel.

The boycott of Florida oranges started in the Spring of 1977 in response to Anita Bryant spearheading a drive to have a county anti-gay discrimination ordinance repealed.⁵² Anita Bryant was a singer, former beauty queen, and a spokesperson for the Florida Citrus Commission. One of the first celebrities to become a spokesperson for a commercial product, Bryant’s television advertisements effectively associated beauty, poise, and happiness directly to orange juice and were played prominently across the United States.⁵³ After the ordinance was passed in January 1977, Bryant established a nonprofit

⁵¹ “Squeezing Anita” was the slogan used during the boycott as a tongue-in-cheek reference to her being the spokesperson for the Florida Citrus Commission, and her nationally televised commercials advocating the purchase and consumption of Florida orange juice.

⁵² The Metro Commission of Dade County Florida approved an ordinance on January 18, 1977 that protected gay men and lesbians from discrimination in housing, employment, and public accommodations.

⁵³ Donna J. Murphy. Oral Interview. 16 March 2011. Fifty Minutes. Louisville, Kentucky. It is my mother, Donna Murphy, who first informed me of the existence of the Nestlé Boycott. Throughout my childhood Murphy regaled me with tales of how the Ursuline-ran Roman Catholic boarding school she attended from 1975-1979 in Owensboro, Kentucky supported and actively participated in the Nestlé Boycott.

organization called Save the Children in order to garner social and political support to repeal the anti-discrimination ordinance of Dade County Florida. Bryant succeeded in not only having the ordinance repealed by a voter approved majority, but also that same year prominently supported a law passed by the Florida Legislature banning gay adoption. Anita Bryant's use of her celebrity status to further a political and moral agenda enabled the gay community to develop a focused, economic-based, non-violent response and plan of action.

This well publicized homophobic rhetoric succeeded in unifying the gay and lesbian community to stand against Bryant's religious and moral stand against homosexuality. In a fitting twist of irony, countering Anita Bryant brought more fund-raising, more news media, more sophisticated political organizing methods, and more activists in contact with each other than any previous gay-liberation initiative.⁵⁴ The boycott rhetoric against Anita Bryant and Florida orange juice was very similar to that used in INFACT. Gay activist and politician Harvey Milk noted in 1977 the consumer boycott of Florida orange juice was a personally subtle, but organizationally potent way of "every gay person fighting Anita Bryant in the privacy of their own homes."⁵⁵ It allowed individual participation in a cause without any visible public action. Instead of attending meetings or going to rallies or participating in letter writing campaigns, all one had to do to show support and solidarity was to refrain from purchasing the product for which Bryant was the national spokesperson.

⁵⁴ Chasin, *Selling Out*, 160.

⁵⁵ Chasin, *Selling Out*, 162.

Though it was Anita Bryant's words and actions that were repugnant, and not the economic practices of the Florida Citrus Commission for whom she was a spokesperson, the homosexual community rallied around the ideal of an economic/consumer boycott in order to remove Bryant's influence and celebrity status on anti-gay actions and legislation. Thanks to the newly realized national gay consciousness sparked by Bryant, the homosexual community orchestrated a boycott of Bryant as a performer and of Florida citrus products (primarily orange juice). The "Mayor of Castro Street" Harvey Milk adamantly supported the need to boycott both entities, believing in the righteousness as well as the effectiveness of boycotts. Though not the original founder of the boycott, Milk became one of its leading spokespersons and advocated that the gay community should recognize and exercise its capacity to put economic pressure to work for political ends.⁵⁶ Just like with the Nestlé Boycott, there was no real statistical means to demarcate the economic impact as a success or as a failure. But it was not the level of economic success that is as important in historical analysis, as is the fact that a nationwide economic movement was organized in response to a specific "human rights" issue –this defining characteristic demonstrates how parallel in ideology the "Squeeze Anita" campaign was to the "Crunch Nestlé Quik" campaign.

Not only did reaction to Bryant and her doctrine of homophobia stimulate the development of a national gay consciousness, but it stimulated the gay press

⁵⁶ Chasin, *Selling Out*, 162.

to address itself for the first time to a national audience.⁵⁷ The politics Anita Bryant advocated for and participated in were solely within the state of Florida, yet people ranging from California to New York weighed in on and/or participated in the boycott. As will be later discussed in this paper, this development is important in how parallel the spread of this boycott was to the development and spreading of the Nestlé Boycott. Though not consciously recognized at the time in the 1970s of the similarities the two boycotts shared, historical comparison and analysis demonstrate to a striking degree just how many tactics and characteristics INFACT and the gay rights community used in near unison.

International Consciousness

So while these national boycotts of La Causa and all orange juice from Florida demonstrated the increased national connectivity in post World War II society, it was the increasing international awareness and consciousness that brought the issue of the Baby Bottle Controversy into the homes of everyday Americans. In the next chapter, the increasing awareness of global issues like world hunger and human rights get explored on a medical and transnational level. It is the world hunger movement that introduced social justice organizations like the Third World Institute. It introduced personal and public health issues to the developed world in the 1960s and 1970s, including malnutrition, starvation, high rates of infant morbidity and mortality, extremely

⁵⁷ Chasin, *Selling Out*, 161.

low standard of living, and exploitation of workers and children. Nowhere were these issues more visible than with the establishment of the Peace Corps by President John F. Kennedy in 1961, a program meant to place educated young Americans in areas all over the world to improve the lives of those less fortunate in LDCs and bring about positive educational, medical, and infrastructure change at the grassroots level. The Peace Corps was a prime channel of increasing awareness of international social justice and equality in young adults in the United States even as it attempted to produce change elsewhere. This increased global awareness seemed to come from two different areas: the ideology of selflessness and justice (“Ask not what your country can do for you, but what you can do for your country”)⁵⁸ and also in the Cold War ideology that increased political and economic tensions between the United States and the Soviet Union in the decades following the end of World War II.

The Cold War struggle between communism and capitalism gave developed countries a keen interest in the political, social, economic, and health states of LDCs. Each LDC was seen as a potential pawn in the matchup of communism against capitalism, and this added dimension significantly

⁵⁸ John F. Kennedy’s Presidential Inaugural Address. 20 January 1961. Washington, DC. Kennedy’s Inaugural Address is emblematic of both the political and social justice rhetoric prevalent in the 1960s: “Let every nation know, whether it wishes us well or ill, that we shall pay any price, bear any burden, meet any hardship, support any friend, oppose any foe to assure the survival and the success of liberty... To those people in the huts and villages of half the globe struggling to break the bonds of mass misery, we pledge our best efforts to help them help themselves, for whatever period is required — not because the communists may be doing it, not because we seek their votes, but because it is right.”

influenced what kind of aid and issues would be addressed by international activists. The attempt to create change and improve the quality of life in LDCs often meant pointing out deficiencies in the local government or the abuses of transnational corporations, and foreign social justice activists were often branded as communists and threatened with bodily harm or even death to cease attempting to alter the status quo.⁵⁹ Though the connection to INFACT is not explicitly direct, this context is immeasurably important in analyzing, understanding, and contextualizing the organization and its development and actions.

Historians have yet to analyze thoroughly the social, political, and medical influences that helped shape the nonprofit organization INFACT. This chapter, however, suggests some sources of INFACT's inspiration and tactics, which ranged from nonviolent direct action to previously occurring (like La Causa) and then-current (like the Anita Bryant/Florida Orange Juice) consumer boycotts. Not only did activist issues and ideology influence INFACT, but the unique use of communication in the activism played an important role that is noticed again in the next chapter. Increased media technology enabled international consciousness to be brought into the everyday lives of Americans – people saw on daily television the horrors of war, were able to globally communicate through means of video and printed media like the *PAG Bulletin* and *CAJANUS Newsletter*, and more easily attended international conferences to discuss global political, medical, and economic concerns. The social and political consciousness

⁵⁹ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

discussed in this chapter is intimately connected to the globalization of medicine analyzed in Chapter 2. In order to fully analyze how INFACT came into being and what it set out to accomplish, a comprehensive understanding is necessary of the social milieu, the political consciousness, and the globalization of medicine and politicization of public health in the 1960s and 1970s. This chapter has discussed the political and social issues leading up to INFACT; the next chapter will explore the recognition and development of the political health and economic crisis in LDCs relevant to the founding of INFACT.

Chapter 2: Recognition of a Nutritional Public Health Crisis

If your lives were embittered as mine is, by seeing day after day this massacre of the innocents by unsuitable feeding, then I believe you would feel as I do that misguided propaganda on infant feeding should be punished as the most criminal form of sedition, and that those deaths should be regarded as murder.⁶⁰

-Dr. Cicely Williams, M.D., MRCP
"Milk and Murder," Singapore 1939

Dr. Cicely Williams was the first physician to make the bold claim that infant formula companies were a direct cause of infant morbidity and mortality in less developed countries (LDCs). This Oxford-trained physician was a pioneer in the field of pediatrics and infant nutrition, lauded for not only discovering the cause behind a highly prominent infant illness in LDCs, kwashiorkor, but for making the connection that infant formula companies had no business advertising their wares in LDCs when women there did not need formula, nor could properly use it.⁶¹ Williams made this connection during her years stationed in then British controlled Singapore from 1936-1941 as a State Medical

⁶⁰ Ann Dally, *Cicely: The Story of a Doctor* (London: Victor Gollancz Ltd, 1968).

⁶¹ In her observations and medical work in Ghana in the 1930s, Williams noticed that a mysterious ailment was often found among young children who had recently stopped breast-feeding, because of the birth of a sibling. She came to the conclusion that the "mystery illness" was due to a severe protein deficiency, which occurred because the switch from breast-milk to infant formula drastically altered children's diets which were then made up almost entirely of carbohydrates. Dr. Williams forsook European naming conventions and called the ailment kwashiorkor, which in the Ga language of Ghana, means "displaced child." The advances in malnutrition understanding helped her identify infant formula as a main cause for this problem and illness. Jennifer Stanton "Listening to the Ga: Cicely Williams' Discovery of Kwashiorkor on the Gold Coast" in *Women and Modern Medicine*, Anne Hardy, Lawrence Conrad, eds. (New York: Editions Rodopi B. V. Amsterdam, 2001): 149-171.

Officer. It was not, however, until 1977 that direct action was taken against infant formula companies to curb their marketing and distribution practices in LDCs. This chapter will explore how Williams' claims went internationally unrecognized until a fellow British-trained physician, Dr. Derrick Jelliffe, continually referenced her and her claims in his campaign to improve and better educate medical personnel on infant feeding practices in LDCs.

While there is a distinct gendered explanation why Williams' claims went relatively unheeded,⁶² this chapter's focus centers more explicitly on when (pre-World War II) and where (a Rotary Club in Southeast Asia) she made these claims that caused them to go medically and socially overlooked. There was little public attention on Williams' understanding of infant nutrition or her suggestion that simple actions in feeding practices could drastically change the course of a life. As well, the international organizations and governing structures that aided the dissemination of Jelliffe's mirrored message were not yet in place for

⁶² Though gender discrimination is not the only reason for the dismissal of Williams' malnourishment discovery and stinging lambaste of infant formula companies in 1939, the fact that Williams was one of the first Oxford-educated female physicians is important to note. This gender claim is supported in both Dally's biography of Williams, as well as in this excerpt from Williams' 1992 obituary: "Williams studied medicine during the First World War, when women were allowed to replace male students, emerging in the first batch of Oxford women medical graduates in 1923. Jobs for women doctors were in short supply as the men returned though, and after a few years in house jobs she joined the Colonial Medical Service in 1929. It took over 20 years for Cicely Williams's new disease to be fully recognized. The opposition to her ideas arose partly from her position as a clinician practicing 'out there' in the colonies; and partly from the fact that she was a woman. Her rueful comment on this epic battle was: 'These men in Harley Street couldn't believe you unless you wore stripy trousers.'" [Jennifer Stanton, "Obituary: Dr Cicely Williams," *The Independent*, 16 July 1992.]

Williams in 1939. A public health movement had swept through the developed world in the first half of the twentieth century and focused on sanitation and disease prevention. A broader focus on public health became part of the mission and rhetoric of international assistance in the 1960s and 1970s.⁶³ Another reason for the international acceptance of Jelliffe's criticisms of infant formula and its correlation to infant morbidity and mortality was the growing consumer phenomenon of distrust of multinational corporations in the 1960s and 1970s.⁶⁴ Critics viewed multinational corporations as independent entities that were as important as, if not more so than, national governments, given their financial base and evident political influence. Critics began to argue that not only did these international corporations require policing, but they had public obligations to both the people who worked for them and those to whom they marketed products.⁶⁵

⁶³ The existence and increase of public health nurses in the 1920s and 1930s is an example of this focus on improving public health in USA and Western Europe. See *Silent Victories: the History and Practice of Public Health in Twentieth-Century America*, John Ward, Christian Warren, eds. (New York: Oxford University Press, 2007) and Philip Kalisch, *American Nursing: A History*, 4th Ed. (Philadelphia: Lippincott Williams & Wilkins, 2004) for more information on public health efforts and improvements in medical care/nursing in developed countries during the early twentieth century.

⁶⁴ "The idea of corporate responsibility, and the leverage, the tactic of shareholder resolutions... was an idea just coming around in the late 1960s...[one of the first groups in the country was started in Minneapolis by Charlie Pillsbury of the Pillsbury family]." Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

⁶⁵ Two books on economics and capitalism that demonstrate and discuss this trend are Leonard Silk and David Vogel, *Ethics and Profits: the Crisis of Confidence in American Business* (New York: Simon and Schuster, 1976) and

Historians who study the baby bottle controversy cast Derrick Jelliffe as the medical hero who succeeded in connecting infant morbidity and mortality with misuse of infant formula in LDCs. It was not until after Jelliffe's speech in 1970 at an international nutrition conference in Bogotá, Columbia when he echoed the lessons of Williams' 1939 Singapore speech that the crisis surrounding infant feeding practices became internationally recognized and activism possible. The intellectual shift in the 1960s and 1970s away from favoring the unchallenged dominance of Western culture was integral in the spreading of awareness of how Western medical practices were often ineffective and, in the case of infant formula, dangerous in LDCs. This chapter explores what changes occurred in international medicine and public health between 1939 and 1970 that enabled international medical personnel to acknowledge the existence of a nutritional public health crisis that eventually led to an international consumer boycott.

World Hunger

Charles Weitz, then head of the United Nations Food and Agriculture Organization's Freedom from Hunger Campaign, succinctly stated what became increasingly obvious to Americans after World War II: world hunger was a problem and an endemic one at that.

“More than 60 percent of the people in the low-income lands are chronically undernourished. Their diets contain about one-third of the protein and two-thirds of the calories considered necessary to maintain health and productivity in an industrialized country. It is the children who suffer the most. In many developing nations half will die from malnutrition during infancy, while more than half

Craig Smith, *Morality and the Market: Consumer Pressure for Corporate Responsibility* (London: Routledge, 1990).

*the survivors will be physically and mentally stunted for the remainder of their lives.*⁶⁶

Politicians running for Congress following World War II made feeding hungry people a standard aspect of their campaign platforms, echoing greater world awareness and concern over the issues facing fellow industrialized countries attempting to rebuild. When politicians in the United States spoke of the hungry, they were speaking about helping Germany, Italy, Great Britain, and other West European nations, recognizing they were campaigning to an audience who were second, third, and fourth generation Americans with close familial and emotional ties to those countries.⁶⁷ Having just come out of the economically and agriculturally devastating Great Depression, this awareness of starvation and malnourishment in post-war Europe played off of the goodwill emotions of Americans who finally found themselves again in better economic, political, agricultural, and structural situations than most of the world with the ability to help those less fortunate than themselves. Through the use of people culturally and phenotypically similar to Americans, politicians succeeded in bringing the complex issue of world hunger into the American consciousness for the first time.

There was political and economic motivation behind this concern about hunger and lack of proper nutrition in the United States. The struggle between capitalism and communism made each vulnerable population across the world a potential battleground for the hearts and minds of the people. Hungry people

⁶⁶ Paul Simon and Arthur Simon, *The Politics of World Hunger* (New York: Harpers Magazine Publishing, 1973): 8.

⁶⁷ Simon and Simon, *The Politics of World Hunger*, 15.

meant economic stagnation, which worried developed capitalist countries during the Cold War. The potential toll of the wreckage of human lives despite the presence of advanced technology and high food production was an issue that should be, it seemed, easily addressed.⁶⁸ Economically and politically, the United States had a vested interest in the lives of those living outside its borders. After Europe succeeded in rebuilding itself in the years following World War II, focus was shifted to those areas of the world that had recently gone through the process of decolonization, and faced a multitude of problems such as poverty, inequitable distribution of resources, and hunger. Infant formula misuse in LDCs was seen as a classic example of preventable starvation and nutrition deprivation that developed countries should address.⁶⁹

American activists concerned for equality and social justice whittled down world hunger to the grassroots level. If macro policy transformation in LDCs seemed overwhelming, micro level actions were seen and utilized as reasonable techniques. Children collected loose change at Halloween instead of candy to donate to UNICEF's work on childhood hunger,⁷⁰ organizations on college campuses, like the Third World Institute based in the Newman Center at the University of Minnesota, collected nonperishable food and made trips to LDCs to help address hunger at a local level.⁷¹ The world hunger movement helped set the

⁶⁸ Simon and Simon, *The Politics of World Hunger*, 25.

⁶⁹ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

⁷⁰ Donna J. Murphy. Oral Interview. 16 March 2011. Louisville, Kentucky.

⁷¹ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

stage for INFACT, because it was at a world hunger conference in Texas that Leah Margulies first convinced Doug Johnson to take over the infant formula campaign from the Interfaith Center for Corporate Responsibility (ICCR).⁷²

International Attention to Infant Feeding

In the 1920s decolonization disconnected many parts of the world from direct European control. The newly independent countries nonetheless found themselves under the auspices of, and dependent on, European and American medical, political, and economic aid organizations. The methods and system of aid employed tended to impose westernized models of medicine, politics, and economics on differing indigenous cultures in LDCs. No longer explicitly in control of these former countries, developed countries established this neo-colonial method of intervention by forming international organizations such as the United Nations (UN), World Health Organization (WHO), United Nations International Children's Emergency Fund (UNICEF), and World Bank.

These post-colonial organizations were formally developed in the years immediately following World War II. UNICEF was developed in 1946 as a means to “proclaim a new ethic of protection and care of children... to respond to the millions of displaced and refugee children deprived of shelter, fuel and food in the aftermath of World War II.”⁷³ The United Nations (UN) and UNICEF embodied the emphasis on global awareness and global aid after World War II. It

⁷² Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

⁷³ UNICEF, *1946-2006 Sixty Years for Children* (New York: UNICEF, November 2006).

was the involvement of UN agencies such as UNICEF, WHO, and the Food and Agricultural Organization (FAO), that underscored greater coherence to infant nutrition. Under the direction and support of these groups the UN developed the Protein Advisory Group (PAG),⁷⁴ whose job was to assure coordination of research projects and aid programs concerning nutrition.⁷⁵ The PAG included professionals from “all the different disciplines required to tackle the protein problem,” which included human nutritionists, agronomists, economists, pediatricians, food technologists, sociologists, and marketing specialists.⁷⁶ The PAG established four areas of emphasis: feeding pre-school children, marketing, single cell protein, and encouraging amino acid fortification of cereals.⁷⁷

In order to assist intercommunication among the specialists engaged in the goals of the Protein Advisory Group in different parts of the world, the PAG distributed an informational and news bulletin starting in October 1957. The *Protein Advisory Group News Bulletin* was issued/printed four times between March 1964 and April 1966.⁷⁸ Developments in the *PAG Bulletin* highlight the increasing focus on international malnutrition during the 1960s and 1970s.

⁷⁴ It was later renamed the Protein-Calorie Advisory Group.

⁷⁵ John Dobbing, ed., *Anatomy of a Controversy* (London: Verlag-Springer, 1988): 30.

⁷⁶ Food and Agriculture Organization. “F. The Protein Problem in Relation to the World Food Supply, #151” in *Report of the Conference of FAO – Fifteenth Session*. FAO Conference in Italy, November 1969. Online Source.

⁷⁷ Food and Agriculture Organization. “F. The Protein Problem in Relation to the World Food Supply, #151” in *Report of the Conference of FAO – Fifteenth Session*. FAO Conference in Italy, November 1969. Online Source.

⁷⁸ The newsletter was renamed to *PAG Bulletin* starting at issue number seven in October of 1967.

Starting in 1969 *PAG Bulletin* was distributed annually and the rate of publication increased again in 1972 when the *PAG Bulletin* became a quarterly publication. In 1974 the editors realized it had become necessary to publish the *PAG Bulletin* in Spanish and French, in addition to the traditional language of English in order to broaden its impact.⁷⁹

The *PAG Bulletin* worked to unite the efforts to equalize access to nutritional health worldwide.⁸⁰ It was a forum that promoted exchange of information about protein-rich food mixtures, protein-food production, nutrition evaluation, food safety, acceptability, dietary tolerance, food marketing, the world malnutrition problems, socio-economic considerations, trends in food supply and consumption, and national and international initiatives and priorities in dealing with these problems such as news of relevant activities of agencies including the FAO, WHO, and UNICEF.⁸¹ The *PAG Bulletin* connected different personnel from different professions via printed media for over a decade before international conferences and meetings began to occur on the issue. The *PAG*

⁷⁹ “Food and Nutrition Bulletin (Incorporating and Continuing the PAG Bulletin)” in *The Collection on Critical Global Issues 2.0* (United Nations University Press, 1999). Online Source. <http://www.greenstone.org/greenstone3/nzdl;jsessionid=D21FBABE434F961BoCC262BooDoC177C?a=p&sa=about&c=ccgi>

⁸⁰ The purpose of the *PAG Bulletin* as stated inside the cover page of every issue was “to give information on the world protein problem to those individuals, academic institutions and industrial organizations who are interested in helping solve the protein problem and to promote the exchange of information in this field.”

⁸¹ “Food and Nutrition Bulletin (Incorporating and Continuing the PAG Bulletin)” in *The Collection on Critical Global Issues 2.0* (United Nations University Press, 1999).

Bulletin demonstrated the increasing focus on how infant feeding and nutritional requirements significantly differed from the types and requirements of adult nutrition, and it was instrumental in connecting health professionals and international aid workers across LDCs who began to draw connections between malnutrition and hunger and infant morbidity and mortality.⁸² Guidelines began to appear on how international medical personnel and caretakers of infants could increase overall childhood health and decrease infant morbidity and mortality, with special emphasis placed on improved infant feeding and nutrition.⁸³ These guidelines painted a very clear picture of the public health and educational issues underlying high infant morbidity and mortality, and established as early as 1955 the negative effect of artificial feeding in LDCs.⁸⁴ Long before the baby bottle controversy was framed by activists as a social justice issue, with an emphasis on human rights and corporate responsibility, issues surrounding infant feeding

⁸² As of Spring 1972, the *PAG Bulletin* was sent without charge to persons, organizations, and companies with an active interest in proteins. The mailing list at that time comprised of over 3000 names, approximately forty per cent in the USA and the rest distributed through the rest of the world. (*PAG Bulletin* vol 2, no. 2, 1972).

⁸³ These guidelines were pamphlets, articles, and reference books written or edited by international physicians that were published and distributed by international aid organizations like WHO and UNICEF. An example of this trend would be the volume *Child Health in the Tropics: A Practical Handbook for Medical and Para-Medical Personnel*, Derrick Jelliffe, ed.; first published in 1962, three more editions of the work were published between 1964 and 1974.

⁸⁴ Evidenced by D.B. Jelliffe, *Infant Nutrition in the Subtropics and Tropics* (World Health Organization: Geneva, 1955).

were a well defined and internationally medically recognized public health problem.⁸⁵

Science and Food: Growing Understanding of Nutrition

International focus on nutrition and hunger increased significantly after World War II. By 1950 vitamins had been identified, but little was known of their functions. Nutritional diseases such as beriberi, pellagra, and ariboflavinosis were disappearing, but kwashiorkor and marasmus were still common in most LDCs. Established requirements for protein intake were still uncertain, as were those for essential amino acids and essential fatty acids.⁸⁶ Ancel Keys' work on the influence of diet on health during and after the war brought the issue of food, and what constituted an adequate proper and healthy diet, into the forefront of the scientific and medical communities' attention.⁸⁷ Rampant malnutrition

⁸⁵ The public health crisis of infant feedings was a continual topic in the *PAG Bulletin*. Examples of this can be found in nearly all issues of the bulletin, and a few early examples include: "Malnutrition and Development" *PAG Bulletin* vol. 2, no 1 (1972): 38-40; "PAG Recommendations for the Promotion of Processed Foods for Vulnerable Groups" *PAG Bulletin* vol. 2, no. 3 (1972): 10-14; "Breast Feeding and Weaning Practices in Developing Countries and Factors Influencing Them" *PAG Bulletin* vol. 3, no 4 (1973): 24-29.

⁸⁶ Nevin S. Scrimshaw, "Fifty-Five-Year Personal Experience with Human Nutrition Worldwide," *Annual Review of Nutrition* 27 (2007): 1.

⁸⁷ Ancel Keys is famous for his development of the "K-Ration" in the years leading up to World War II, and his "Minnesota Starvation Study" which he performed during World War II. The K-Ration was a portable, non-perishable food ration that would provide enough calories to keep soldiers properly nourished and energized in the battlefield for up to two weeks. K-Rations provided up to 3200 calories in a container that only weighed 28 ounces. The K-Ration was the precursor to the current military MREs (Meal Ready-to-Eat) used in combat zones. The Minnesota Starvation Study was a nutrition based experiment Keys ran, where he used men who were conscientious objectors to the war and

throughout the world, thanks in large part to the destruction and disruption of food production and distribution during the war, increased the prominence of the issue in industrialized countries.⁸⁸ As industrialized countries began to recover and rebuild in the post-war period, equality of availability and quality of resources became something younger citizens of industrialized countries began to rally around. Greater understanding of the effects of nutrition on the quality and duration of life led people, many with the counterculture mentality of the 1960s, to join the “natural foods” co-operative movement in the 1960s and 1970s.⁸⁹ This focus on availability of fresh, healthy food brought to the attention of consumers those less fortunate who did not have access to the same healthy food choices.⁹⁰ This idea is directly related to the concept of breastmilk and artificial infant

systematically starved them to observe how nutrition affected physical and mental functions, and how effective certain “refeeding” plans were. The findings of this study were used throughout Europe after the war to address the widespread problem of starvation caused by the six year world war. This understanding of how nutrition affected physical and mental development was instrumental in demonstrating that even children who survived infancy but suffered from kwashiorkor or marasmus were seriously handicapped for the rest of their lives due to decreased physical and mental capacity and function. Detailed information on Keys’ accomplishments and studies can be found at *Ansel B. Keys Papers (1938-1967)*. University Archives. University of Minnesota, Twin Cities, Minnesota.

⁸⁸ This is evidenced by the development of such widely respected professional journals as *American Journal of Clinical Nutrition* in 1952, and *Nutrition Today* in 1966.

⁸⁹ Craig Cox, *Storefront Revolution: Food Co-ops and the Counterculture* (New Brunswick, NJ: Rutgers University Press, 1994).

⁹⁰ A history, and analysis, of industrial, political, and agricultural cooperatives in the 1960s and 1970s can be found in John Curl, “The Cycle Turns Again (1960-1980)” in *History of Work Cooperation in America* (Berkeley: Homeward Press, 1980): 45-56. Curl specifically addresses “Food Systems” from pages 52-53.

formula. Especially by the 1960s and 1970s, breastmilk was known to be the most natural and nutritionally sufficient form of sustenance for infants, and when available it should be utilized. This marketing manipulation of artificial infant food went directly against this idea of fresh, natural, non-manufactured food that defined the co-operative movement.

This focus on cheap and healthy food options is now considered part of the “counter-culture” of the late 1960s and early 1970s, typically associated with home gardens and food co-operatives. In this context, skepticism about artificial formulas was also common. Breastfeeding became an example of rebelling against capitalistic formula companies and reveling in the naturalness of utilizing nature to provide basic needs. Thus an anti-corporation and alternative lifestyle made activists aware of public health and hunger and nutrition crises in other parts of the world that seemed a result of the spread of commercial, technological, and westernized culture. As reports of the astonishingly high, albeit preventable, infant morbidity and mortality rates in LDCs started to become common knowledge to medical professionals, these statistics and problems began to trickle down to average industrialized citizens who might not have understood the medicine behind the issue but were eager to help with the problem in any manner possible.

Public Health and the Infant Formula Crisis

Physicians, nurses, public health clinicians, and other medical professionals in LDCs recognized that the issues they faced in regard to infant

morbidity and mortality were significantly different than those health professionals in developed areas of the world faced. Infants, defined as humans in the first year of life, in LDCs had significantly higher rates of mortality (deaths per 1000 babies born alive) than their counterparts in developed countries. As of 1974, the infant mortality rate in Europe and North America was below 40/1000; in tropical regions it was often between 75/1000 and 500/1000.⁹¹ There were many varied causes of infant deaths in the tropics and other economically depressed areas of the world, but respiratory tract infection (especially pneumonia), diarrhea/gastro-enteritis, and nutritional marasmus overwhelmingly dominated the epidemiological percentage.⁹²

The pattern of infants who were not breastfed comprised the vast majority of those getting sick and seeking medical attention slowly became obvious. A 1945 study of 216 cases in LDCs found a death rate of 61% when infants had been breastfed for less than a month and only 28% when this had been sustained beyond that length of time.⁹³ Similarly, a study performed in 1949 and cited in *Health Education Journal* found that of 165 infants admitted to a hospital suffering from gastro-enteritis (intestinal infection), only 2 (1.2%) were fully

⁹¹ *Child Health in the Tropics: A Practical Handbook for Medical and Para-Medical Personnel*, 4 ed. Derrick B. Jelliffe, ed. (London: Edward Arnold LTD, 1974): 1.

⁹² *Child Health in the Tropics*, 4 ed. Derrick B. Jelliffe, ed., 1.

⁹³ Derrick Jelliffe, *Infant Nutrition in the Subtropics and Tropics* (World Health Organization: Geneva, 1955): 19.

breastfed.⁹⁴ Diarrheal disease in early childhood became increasingly evident in many LDCs in the 1960s and 1970s, especially in overcrowded town slums, where infants were being bottle-fed with disastrous results.⁹⁵ A public health problem of many interweaving issues became evident to health practitioners in LDCs: diarrhea was usually due to gastro-enteritis, which was the primary killing disease of infants in LDCs, and very frequently diarrhea occurred as a final medical episode in a child that was severely malnourished.⁹⁶

The World Health Organization explicitly endorsed breastfeeding as the best method of prevention for gastro-enteritis.⁹⁷ Breastfeeding supplied clean milk of balanced nutrition that was loaded with maternal antibodies that helped boost infants' immune systems against diarrheal diseases. However, to also best prevent gastro-enteritis, the WHO stated utilization of clean feeding utensils was a requirement (especially if artificial feeding was used as a necessity); so was boiled water. Jelliffe continually argued that diarrheal disease would become less prevalent in communities if there was a plentiful water supply (in order for the mother to keep her family and all eating utensils clean), if garbage was disposed

⁹⁴ A. Burgess, et al., "Lactation and Education: Two Related Failures," in *Health Education Journal* 10 (1952): 10.

⁹⁵ *Child Health in the Tropics*, 4 ed. Derrick B. Jelliffe, ed., 58.

⁹⁶ Jelliffe, *Infant Nutrition in the Subtropics and Tropics*, 114.

⁹⁷ The advantages of breastfeeding are varied, but the main benefits the WHO espoused included how its nutritional components were particularly suited to human babies, how it safeguarded against infections (thanks to the presence of maternal antibodies), how exclusive breastfeeding succeeded in spacing children due to the anti-ovulation hormones released during lactation, and lastly how it was always conveniently located and accessible for the mother as well as economical. *Child Health in the Tropics*, 4 ed. Derrick B. Jelliffe, ed., 37-38.

of properly (so that disease causing flies could not excessively breed), and if parents were educated to realize the dangers of this type of disease for their children and techniques for its prevention.⁹⁸ Level of education was important, as illiterate parents with little knowledge of the needs of children were likely to feed them the wrong foods and unknowingly give them dirty water and food, causing the occurrence of malnutrition and diarrhea.⁹⁹

These public health workers and medical personnel recognized the complexity of the problem.¹⁰⁰ Jelliffe and other medical personnel in LDCs were avid advocates for breastfeeding, recommending that it be supported and encouraged by other medical professionals in nutritional pamphlets and books published in the early 1970s. Medical personnel explicitly recommended that “*the establishment of adequate breast-feeding is the most important aspect of care of the newborn child and of the young infant.*”¹⁰¹

Conditions causing malnutrition and infant morbidity and mortality remained persistent despite the focus and increased awareness of PAG members throughout the 1960s. Activists recognized that more effective campaigns were needed because disseminating information through the *PAG Bulletin* had not produced measurable change. Collective concern was manifested in 1970 in

⁹⁸ Jelliffe, ed., *Child Health in the Tropics*, 4 ed., 62.

⁹⁹ Jelliffe, ed., *Child Health in the Tropics*, 4 ed., 2.

¹⁰⁰ Jelliffe, ed., *Child Health in the Tropics*, 4 ed., 2.

¹⁰¹ Jelliffe, ed., *Child Health in the Tropics*, 4 ed., 17.

Columbia at the first formal joint meeting between UN member governments, health care professionals, and representatives of the infant formula industry.

Derrick Jelliffe and Bogotá, Columbia

Changing patterns in infant feeding, particularly in LDCs, and the role of industry in those changes might have continued to be merely the object of the occasional academic study or survey had not the entry of UN agencies into the discussion given it some new life and greater coherence. The catalytic agent in the infant formula controversy proved to be the UN's Protein Advisory Group, whose job was to coordinate research projects and aid programs concerning nutrition.¹⁰² Throughout the 1960s a PAG working group conducted an evaluation of nutrition among young children, specifically the preschool age group, and in 1969 the PAG working group drew up a preliminary action program addressed to UN member governments, health professionals, and the infant formula industry.¹⁰³ The PAG call for a joint meeting between all groups associated with, and interested in, infant feeding nutrition resulted in the first formal joint meeting in November 1970 in Bogotá, Columbia. Participants from academia, government health services, and Industry were selected for their considerable body of knowledge and experience in dealing with nutrition problems of particular relevance to Latin America and the Caribbean. Four

¹⁰² Dobbing, ed., *Anatomy of a Controversy*, 30.

¹⁰³ Dobbing, ed., *Anatomy of a Controversy*, 31.

general objectives were set in advance and distributed to conference participants:¹⁰⁴

1. Emphasize the importance of prolonged breast feeding
2. Create guidelines for the promotion of infant foods
3. Provide information on low-cost protein-rich weaning foods
4. Pursue possibilities for public health and industrial “joint action”

It was against this background that Dr. Derrick Jelliffe became a prominent figure in the infant formula crisis affecting LDCs. Born in 1921, Jelliffe was educated at the University of London and was renowned in the international health community as both a practitioner and professor of pediatric nutrition. The founding editor of the *Journal of Tropical Pediatrics* and *Advances in International Maternal and Child Health*, Jelliffe and his wife Patrice had lived and worked in developing countries for over twenty-four years, spending time in Sudan, Nigeria, Jamaica, India, and Uganda. Together, Jelliffe and his wife wrote or edited twenty-two books directed at nurses and public health officials, and Jelliffe first-authored 340 papers throughout the span of his career.¹⁰⁵ Jelliffe established East Africa’s first pediatrics and child health

¹⁰⁴ Dobbing, ed., *Anatomy of a Controversy*, 31.

¹⁰⁵ G. J. Ebrahim, “In Memoriam: Derrick B. Jelliffe,” *Journal of Tropical Pediatrics*, vol 38 (August 1992): 145. Some of these works are included as sources in this paper. Jelliffe, *Infant Nutrition in the Subtropics and Tropics* (World Health Organization: Geneva, 1955); Jelliffe, *The Assessment of the Nutritional Status of the Community* (World Health Organization: Geneva, 1966); and Jelliffe, ed. *Child Health in the Tropics: A Practical Handbook for Medical and Para-Medical Personnel*, 4th Edition (Edward Arnold: London, 1974).

department at Makerere University in Uganda in 1959, was the first director of the Caribbean Food and Nutrition Institute after its inception in 1967, became a professor of public health at the University of California in Los Angeles in 1972, was the founding director of UCLA's international health program, and served as a consultant to UNICEF, WHO, and the National Academy of Science throughout his medical career.¹⁰⁶

At the time of the PAG conference in 1970, Jelliffe was the acting director of the Caribbean Food and Nutrition Institute (CFNI). As director of the Institute, Jelliffe was in excellent position to see the effects infant formula use and abuse was having on infant morbidity and mortality in less developed countries. Established in 1967, CFNI was a specialized Centre of the Pan American Health Organization/World Health Organization (PAHO/WHO) intended to forge a regional approach to solving the nutrition problems of the Caribbean.¹⁰⁷ As of 1970, the Institute served fifteen countries in the English-speaking Caribbean. The Institute was established to assist, support, and catalyze interdisciplinary, collaborative activities and programs aimed at practical, economical, and realistic solutions to food and nutrition problems in

¹⁰⁶ Myrna, Oliver, "Derrick Jelliffe; UCLA Public Health Expert," *Los Angeles Times*, 21 March 1992. Online Source.

¹⁰⁷ The Pan American Health Organization (PAHO) is an international public health agency with more than 100 years of experience in working to improve health and living standards of the countries of the Americas. It has served as the specialized organization for health of the Inter-American System. It also has served as the Regional Office for the Americas of the World Health Organization and has international recognition as part of the United Nations system. ("About PAHO" at <http://new.paho.org/hq/index.php?lang=en>)

the Caribbean community.¹⁰⁸ Jelliffe and the CFNI staff decided special attention would be paid to the nutritional problems of young children in the Caribbean.

After having previously worked in Rwanda, Uganda, and Sudan focusing on public health and pediatrics, Jelliffe had exposure to several different LDCs and the overall (and infant) nutritional problems they faced. Thanks in large part to his and his wife's international work before 1967, Jelliffe was able to compile and transfer tactics to the CFNI to optimally decreased malnutrition and increased quality of life. Structural tactics such as information dissemination, field investigations, and training, were utilized by the CFNI to achieve optimal nutritional health for all peoples of the Caribbean.¹⁰⁹ CFNI had a bi-monthly newsletter called CAJANUS and by November 1970 two thousand free copies were distributed to persons working in the food and nutrition field in the Caribbean.¹¹⁰ CAJANUS contained news and opinions from the area, such as CFNI activities, articles on world and local nutrition problems, book reviews, questions, and letters and comments from readers.¹¹¹ The similarities between CAJANUS and the *PAG Bulletin*, distributed by the Protein Advisory Group starting in 1957, are noticeable. With Jelliffe as the first director of the CFNI it

¹⁰⁸ Derrick Jelliffe, "The Caribbean Food and Nutrition Institute," *The American Journal of Clinical Nutrition*, vol. 23, no. 11 (November 1970): 1409.

¹⁰⁹ Jelliffe, "The Caribbean Food and Nutrition Institute," 1409-1411.

¹¹⁰ The Cajanus Cajan (commonly known as pigeon pea) was the official symbol of the CFNI because it could be readily cultivated and was a commonly used source of local home grown protein-rich food in the Caribbean. (Jelliffe, "The Caribbean Food and Nutrition Institute," 1410).

¹¹¹ Jelliffe, "The Caribbean Food and Nutrition Institute," 1410.

seems likely that he took the idea of the *PAG Bulletin* and implemented it at a much more localized, grassroots level in the Caribbean.

Especially as the Director of the CFNI, Jelliffe had access to scores of field investigations done in the Caribbean on malnutrition in infants. Collaborative investigations on then-current methods of young child feeding in the Caribbean had been executed by CFNI staff and students and by other national and international staff in the area. Results that came from Antigua, Barbados, Dominica, Grenada, Jamaica, St. Lucia, and half a dozen other countries in the area led to the publication of “Guidelines to Young Child Feeding in the Contemporary Caribbean” published by CFNI in 1970.¹¹² With this plethora of raw and published information in front of him at the CFNI, Jelliffe had the necessary documentation to be the first health care professional in over thirty years to emphasize at an international conference the connection between infant mortality trends and the promotion and use of infant formula.¹¹³ Jelliffe argued that the misuse of infant formula was responsible for high rates of infant

¹¹² Jelliffe, “The Caribbean Food and Nutrition Institute,” 1411.

¹¹³ In 1939 Dr. Cicely Williams gave what is considered to be the first international presentation on the infant formula controversy in Singapore. Entitled “Milk and Murder” Williams argued that the increase in morbidity and mortality in Singapore infants was directly attributable to the increase in bottle feeding with inappropriate breastmilk substitutes and the decline of breastfeeding. (Van Esterik (1989): 6). This talk was widely unheeded until the 1970s when advocates turned authors, such as Jelliffe, brought up her contributions to the understanding of infant nutrition and the infant formula movement. (Derrick Jelliffe, “Delivering the Services” in *Journal of Tropical Pediatrics and Environmental Child Health*, vol. 20 no. 3 (June 1974): 130-134). Also, Maggie McComas, et al., *The Dilemma of Third World Nutrition: Nestlé and the Role of Infant Formula* (Printed in U.S.A: Nestlé S.A., 1983): 4.

morbidity and mortality in the Caribbean and other less developed areas. Based on his experience in hospitals and nutrition clinics in LDCs, such abuse and misuse of infant formula was inevitable, Jelliffe argued, because of poor sanitation and unreliable water supplies, inadequate facilities for cleaning bottles and nipples, combined with illiteracy and poverty, resulting in bacterial contamination and over-dilution of formula.¹¹⁴ Jelliffe stated quite clearly at the PAG conference that commercial formula products had a disruptive effect on the pattern of breast-feeding, that the purchase of infant formula posed an economic hardship on consumers in LDCs, and that these infants in LDCs were suffering from ‘commerciogenic malnutrition’ caused by the ‘thoughtless promotion’ of infant milk.¹¹⁵ Jelliffe accused the formula companies of entrapping mothers into using formula through the use of mass advertising, free samples in hospitals, and the use of “mothercraft”¹¹⁶ or “milk” nurses.

With these statements, Jelliffe effectively linked the infant formula industry’s promotional practices to infant disease and death. His strong condemnation cast him in the role of “the medical guru of those fighting the milk formula companies.”¹¹⁷ Jelliffe’s public accusations finally sparked interest in the

¹¹⁴ Fred Miller, *Out of the Mouths of Babes: The Infant Formula Controversy* (Bowling Green State University: Social Philosophy and Policy Center, 1983): 5.

¹¹⁵ D.B. Jelliffe, “Commerciogenic Malnutrition? Time for a Dialogue,” *Food Technology*, vol. 25 (February 1971): 56. Also, Dobbing, ed., *Anatomy of a Controversy*, 31-33.

¹¹⁶ “Mothercraft” and “Milk nurses” were the terms used to describe employees of infant formula companies dressed in nurse uniforms, who handed out samples and promoted breastmilk substitutes to mothers and medical personnel.

¹¹⁷ Miller, *Out of the Mouths of Babes*, 5.

international media on the issue of infant formula feeding practices in less developed countries and the role multinational infant formula corporations played in the problem. This connection and the declaration in Bogotá, Columbia on the intimate link infant formula had on infant nutrition, morbidity, and mortality, sparked investigative journalists in Europe to pick up and explore that thread. Articles and informational pamphlets began to be published in the months following the conference, and Jelliffe was frequently repeated and quoted throughout the following decades as the movement on restricting marketing of breastmilk substitutes in less developed countries went international.

Dr. Jelliffe opened the door to social justice activism when in July 1973 he spoke in despairing terms of the PAG's efforts to address infant morbidity and mortality in relation to nutrition and breastfeeding over the three years since his international declaration in Columbia. He told an audience of health professionals "I don't think we shall get far with this, and some other group may have to take a more aggressive, Nader-like stance in this regard."¹¹⁸ Consumer advocacy and Third World social justice organizations took up this "Nader-like" stance, even though they had little to no experience in infant nutrition and were primarily composed of laymen and not health professionals.¹¹⁹ A mere month after Jelliffe's lament of the lack of progress by PAG, a British periodical

¹¹⁸ McComas, et al., *The Dilemma of Third World Nutrition*, 5. Ralph Nader was an American politician, lawyer, and activist who was known for his fierce support of consumer rights and activism, and increased citizen awareness of illegal and profit-driven actions taken by the government, lobbyists, and multinational corporations.

¹¹⁹ Dobbing, ed., *Anatomy of a Controversy*, 35.

concerned with “Third World” issues called the *New Internationalist* published in August 1973 the first of many social justice articles on the infant formula issue, entitled “The Baby Food Tragedy.”

The groups which picked up the public health issue that Jelliffe had spent years attempting to address were “quintessential advocates,” determined to defend the interests of others, even if those “others” were continents away.¹²⁰ Their frustration at the lack of change that occurred in the wake of public health conferences, academic and professional journal articles, and international organizations’ declarative statements ushered in an era of advocacy and activism that had previously been absent from discussions of infant health, nutrition, and feeding practices. After July 1973, social justice publications and organizations took on the infant formula crisis as a cause warranting activism. Chapter 3 discusses the new approach taken to this decades-old issue that effectively raised awareness of the problem to a degree that health professionals had unsuccessfully attempted to attain. Activist orientated publications and organizations like *New Internationalist*, War on Want, Interfaith Center for Corporate Responsibility, and Infant Formula Action Coalition succeeded in ushering the baby bottle concerns from a public health crisis to a moral, economic, and human rights project.

¹²⁰ McComas, et al., *The Dilemma of Third World Nutrition*, 5.

Chapter 3: The Politicization of Public Health

“Breast milk is the original convenience food. No mixing, warming or sterilizing needed; no dirty pots and bottles to wash up afterwards; always on tap from its specially designed unbreakable containers. And it is genuinely the most nutritious wholesome product on the market. A copy-writer’s dream.”¹²¹

-Mike Müller “The Baby Killer”
War on Want, 1974

Opponents of baby formula enumerated four reasons why breast-milk substitutes in less developed countries (LDCs) caused malnutrition, dehydration and death. They pointed to poverty, illiteracy, lack of sanitation, and lack of industrialized conveniences. These factors are important in understanding the motivation for the Nestlé Boycott. The infant formulas themselves were not the direct cause of infant morbidity and mortality; rather it was the poor implementation and lack of convenience of formula usage.

Infant formula producers agreed with breastfeeding advocates that breast-milk was the optimal form of nourishment a baby could receive. Alternative infant formula food was meant only to supplement breastfeeding, follow-up successful breastfeeding, or replace breast-milk when the mother could not or chose not to breastfeed. Most experts have explained that less than five percent of all mothers are physiologically unable to breastfeed.¹²² While this statistic did not change, the percent of mothers unable or unwilling to breastfeed due to

¹²¹ Mike Müller, “The Baby Killer: A War on Want investigation into the promotion and sale of powdered baby milks in the Third World” (London: War on Want, March 1974): 3.

¹²² Dobbing, ed., *Anatomy of a Controversy* (London: Spring-Verlag, 1988): 3.

extra-familial responsibilities (such as work) grew exponentially in the United States during and after the Women's Suffragist movement in the early twentieth century.¹²³ This shift was extended in LDCs due to disrupted healthcare systems and massive societal and economic restructuring after decolonization in the mid twentieth century.

As biology, chemistry, and nutrition became more sophisticated in the twentieth century, infant formula was able to incorporate and mimic many natural components of breast-milk. Women became more activist on issues of equal rights and self-determination by the 1960s (evidenced by the formation of National Organization for Women in 1966) around the same time the post World War II "baby boom" ended which caused birth rates in industrialized countries to decrease;¹²⁴ these two factors allowed attention surrounding breastfeeding in industrialized countries to begin to increase again and it was heralded as the safest and most effective form of infant feeding. Advocates emphasized such benefits as maternal-infant bonding and rapport, birth control and child spacing (exclusive breastfeeding stimulates the release of the hormones oxytocin and

¹²³ This trend is noted in several works; of particular help was Dayanath Jayasuriya, Adrian Griffiths, Raymond Rigoni, *Judgement Reserved* (Sri Lanka: Asian Pathfinder Publishers, 1984): 17-19; and Jacqueline Wolf, *Don't Kill Your Baby: Public Health and the Decline of Breastfeeding in the Nineteenth and Twentieth Centuries* (Columbus, OH: Ohio State University Press, 2001).

¹²⁴ Decreased birth rates in developed countries affected feeding patterns because it meant there was a decreased need for infant formula; the basic economic principle of supply and demand dictated that less infants in an economy demanded less amounts of infant formula. As the potential and demand in developed countries decreased due to fewer and fewer infants being born, infant formula companies turned to a different population that was experiencing high rates of infant births: less developed countries.

prolactin in the mother, effectively inhibiting ovulation), and infant immune system development (antibodies to pathogens and toxins in the environment develop in the mother and are transmitted through breast-milk to the infant).¹²⁵

Although scientists were unable to imitate the hormone and immune benefits of breastmilk, artificial formula, while not ideal, was considered a safe and tolerable alternative to mothers' breast-milk. The need for such a substitute was sometimes essential, thus it is important to realize that the Nestlé Boycott was not directly about the superiority of breast-milk. Rather, as the next four sections will demonstrate, the boycott revealed the circumstances in which breast-milk was replaced or supplemented by substitutes in LDCs and it raised important questions about the medical and business ethics of promoting and marketing infant formulas to women who were unable to use the product properly.¹²⁶

Six key events and actions are crucial to understanding and analyzing how effective INFACT was in procuring change. The history and events that led to INFACT's inception clarifies how the Nestlé Boycott came into being. INFACT's strategies and organization grew from the backdrop of activism outlines in previous chapters and the specific issues of the 1970s. Many of the journalistic

¹²⁵ "Breast-feeding is an unequalled way of providing ideal food for the healthy growth and development of infants; it forms a unique biological and emotional basis for the health of both mother and child; the anti-infective properties of breast milk help to protect infants against disease; and there is an important relationship between breast-feeding and child-spacing." World Health Organization, International Code of Marketing of Breast Milk Substitutes. Geneva, Switzerland, WHO, 1981.

¹²⁶ Dayanath, et al., *Judgement Reserved*, 17.

tactics that created international awareness of the Baby Bottle Controversy were later used by the American-based INFACT as tools to spread understanding, information, and moral outrage as well as build the international outreach of the boycott.

An Anatomy of a Controversy¹²⁷

The history of the formula feeding controversy is important in order to understand the role, tactics and outcomes attributed to the Infant Formula Action Coalition. Several key events led to the formation of INFACT in 1977: the role of world renowned pediatrician Dr. Derrick Jelliffe emphasizing at international medical conferences the connection between infant mortality and the promotion and use of formula in LDCs; the 1973 publication of “The Baby Food Tragedy” in *New Internationalist* which subsequently led to a two year libel trial instigated by Nestlé SA; Mike Müller’s 1974 *War on Want* article “The Baby Killer;” the production and release of the documentary *Bottle Babies* in 1975; and finally the transplant of the bottle baby controversy to the United States through the workings of the Interfaith Center on Corporate Responsibility (ICCR) and the

¹²⁷ Book title of volume edited by John Dobbing, *Infant Feeding: Anatomy of a Controversy 1973-1984* (London: Springer-Verlag, 1988). This section will give a brief overview of the events that led up to the formation of INFACT and the Nestlé Boycott, however for a more nuanced and thorough account see this book. John Dobbing edited chapter contributions by American business writer, public affairs analyst, and former *Fortune* magazine associate editor Maggie McComas; French novelist and investigative journalist Gabriel Veraldi; and Professor and Program Head of Maternal and Child Health Program at the University of California, Berkeley, Dr. Frank Falkner.

lawsuit brought against Bristol-Myers by the Roman Catholic order, Sisters of the Precious Blood.

As previously discussed, Derrick Jelliffe was a prominent figure in the international health community and an integral component for raising awareness of the infant formula feeding controversy in LDCs. At the November 1970 international conference held in Bogotá, Columbia he made explicit the connection between infant mortality trends and the promotion and use of infant formula. Based on his experience in hospitals and nutrition clinics in LDCs, Jelliffe quite clearly stated that commercial formula products had a disruptive effect on the pattern of breast-feeding, that the purchase of infant formula posed an economic hardship on consumers in LDCs, and that these infants in LDCs were suffering from ‘commerciogenic malnutrition’ caused by the ‘thoughtless promotion’ of infant milk.¹²⁸ In 1970 and 1971, Dr. Jelliffe effectively linked the infant formula industry’s promotional practices to infant disease and death. His outspoken opinion led him to act as a key witness for the defense in the 1974-1976 Bern libel trial¹²⁹ and to write hundreds of articles and books on the intimate link between infant formula and infant nutrition, morbidity, and mortality.¹³⁰

Dr. Jelliffe’s outspoken criticism of the infant formula industry’s advertisement practices in LDCs did not take long to manifest itself within

¹²⁸ Dobbing, ed., *Anatomy of a Controversy*, 31-33.

¹²⁹ Dobbing, ed., *Anatomy of a Controversy*, 52-53.

¹³⁰ G J Ebrahim, “Obituary: D B Jelliffe,” *British Medical Journal*, 305 (18 July 1992): 177-178.

advocacy organizations. This new phase in the infant formula controversy moved away from the issue of infant nutrition as addressed by health professionals like Jelliffe and instead was composed of laymen, centering the debate of proper infant nutrition around the role of corporations and changing the tone of discussion to confrontation rather than negotiation.¹³¹ The move to confrontation by investigative journalists was first seen in the article “The Baby Food Tragedy” published in the British social justice periodical the *New Internationalist*. This article interviewed two child health specialists who not only had extensive LDC experience, but were professional colleagues of Jelliffe’s as well, Dr. David Morley and Dr. Ralph Hendrickse.¹³² Though the physicians attempted to stay neutral and detail their experiences in nutrition and maternal health clinics in LDCs,¹³³ both condemned the infant formula industry’s advertisement practices. Both physicians specifically criticized Nestlé’s advertising techniques in LDCs, particularly the mass distribution of free samples

¹³¹ Dobbing, ed., *Anatomy of a Controversy*, 35.

¹³² Jelliffe gave credit to Morley (a member of the Department of Nutrition, London School of Tropical Medicine and Hygiene) as a contributor to his 1966 monograph *The Assessment of the Nutritional Status of the Community* (World Health Organization, 1966). In the “Acknowledgements” section of his book, Jelliffe thanked Morley as one of several colleagues who was working in different parts of the world that generously gave their time and advice to Jelliffe during his preparation of that particular monograph.

¹³³ In the interview, Dr. Hendrickse was quoted as saying “[I]n fairness to [Nestlé] under pressure from the Nigerian Society of Health and Nutrition, Nestlé did in fact modify its advertising policies [in Nigeria] and you’ll find that... an advert for... Nestlé’s milk over the Nigerian radio will start with the quote ‘You should always breast feed your baby, but if you cannot then use... such and such.’ I think this is a very reasonable approach.” Hugh Geach, “The Baby Food Tragedy,” *New Internationalist* 006 (August 1973).

to mothers in maternity wards, and the use of company employed “milk nurses” dressed in nurses’ uniforms to sell baby-milk in government clinics.¹³⁴ This is the first instance in which Nestlé was specifically identified as causing infant health issues in LDCs. Dr. Hendrickse was several years ahead of his time, and the Nestlé boycott, when he stated in this interview:

“I feel there is a need for an international organization or international consensus to agree on advertising policy which will give full emphasis to the vital importance of breast-feeding in developing countries... But it would be a mistake if we believed that the drift away from breast-feeding is entirely due to the seduction of advertising. It is not. There are a number of other factors which go along with this... [the] changing role of women in developing countries [in greater employment outside the home and university careers]... the changing concept of motherhood as against shared parenthood...”¹³⁵

“The Baby Food Tragedy” article in *New Internationalist* was compelling enough to encourage another British social justice organization, War on Want, to investigate the growing infant malnutrition crisis in LDCs. Mike Müller, another investigative, free-lance journalist published a pamphlet for War on Want titled “The Baby Killer.” This informational pamphlet was published with the aim to “make known to a wider public the dangers that follow from the promotion of powdered baby-milks in communities that cannot use them properly.”¹³⁶ War on Want made “The Baby Killer” widely available for translation into other

¹³⁴ Geach, “The Baby Food Tragedy,” *New Internationalist* 006 (August 1973).

¹³⁵ Geach, “The Baby Food Tragedy,” *New Internationalist* 006 (August 1973).

¹³⁶ Müller, “The Baby Killer” (London: War on Want, March 1974), 24 pgs.

languages and dissemination by similar groups elsewhere.¹³⁷ With the use of accessible language, pictures, copies of advertisements in LDCs, statistics gleaned from the World Health Organization, and quotes taken directly from interviews with the management at Nestlé and Cow & Gate infant formula companies, Müller's pamphlet became a staple product of distribution by INFACT and other proponents of the Nestlé Boycott.

"The Baby Killer" was so influential that a Switzerland-based social justice organization, Arbeitsgruppe Dritte Welt (ADW), took advantage of War on Want's offer and translated the article from its original English into German for mass distribution in Europe. Müller's essay, and the translated versions, sparked considerable public interest and attention in the media.¹³⁸ The editorial changes ADW made to the article, including a more direct attack on Nestlé and altering the title of the article to "Nestlé tötet Babys,"¹³⁹ made it so Nestlé could not ignore this potentially slanderous attack to their company or their business practices. In June 1974 Nestlé filed a libel suit against ADW in the Switzerland court system, naming the seventeen ADW staff personnel as defendants in the case.¹⁴⁰ This trial dragged on for two years in Bern, Switzerland, with Nestlé unable to counteract the emotional and fervent accounts and opinions of the ADW staff,

¹³⁷ Dobbing, ed., *Anatomy of a Controversy*, 41.

¹³⁸ Dobbing, ed., *Anatomy of a Controversy*, 41.

¹³⁹ Directly translated into "Nestlé kills Babies."

¹⁴⁰ A trend that fits into the greater time period is represented here as well as with INFACT: most of ADW's personnel were university students, and were responsible for translating, publishing and propagating their version of Mike Müller's pamphlet.

nor their string of infant nutritional experts – including the testimony of Dr. Derrick Jelliffe.

The trial succeeded in raising international awareness and brought Nestlé’s business practices in LDCs under close public scrutiny. At the end of the two year trial in 1976 the judge did rule in favor of Nestlé, saying the title “Nestlé tötet Babys” was libelous, because it implied a deliberate intention to kill or culpable negligence, as opposed to a general moral responsibility. The evidence of product misuse as a direct cause of disease was accepted by the judge, but he noted that the Company could not be held legally responsible for it.¹⁴¹

“It follows that the Nestlé Company must fundamentally rethink its methods of promotion for infant milks in the developing countries, since its practices can transform a life-saving product into a dangerous, life-threatening product. If the Company wishes to avoid the charge of immoral and unethical behavior in the future it must change its promotional practices.”¹⁴²

The guilty verdict, although it found the ADW guilty, was considered a moral victory for the ADW activists. And while it was clear the judge was agreeing with Nestlé’s legal complaint, his ruling clearly underscored the relevant charge of Nestlé’s moral responsibility. The judge sternly admonished Nestlé for their business and marketing practices at the end of his ruling and the defendants were only fined 300 Swiss Francs each.

With the Bern, Switzerland trial garnering international interest and media attention, the infant formula controversy began to take shape

¹⁴¹ Dobbing, ed., *Anatomy of a Controversy*, 54-55.

¹⁴² Dobbing, ed., *Anatomy of a Controversy*, 55.

as a recognized international health crisis. West German filmmaker Peter Krieg in 1976 developed a twenty minute documentary on the use of infant formula in Nigeria and the disastrous results use of formula had for poor families. *Bottle Babies*, Krieg's documentary, deliberately looked to play off the emotions and consciences of potential audience viewers by incorporating heart wrenching images such as infants with severe marasmus continuing to be bottle fed by their mothers, and panning views of a cemetery riddled with baby graves. The imagery of a baby bottle and tin of formula as a grave marker was a chilling image that Krieg used to reinforce the message and picture that had initially appeared on the *New Internationalist* article in 1974. Krieg's documentary was effective in putting what the *New Internationalist* article and War on Want pamphlet said into a morally outraging audiovisual. *Bottle Babies* was so compelling in its portrayal of the obstacles mothers in LDCs faced in adequately feeding their children infant formula that the distribution of this documentary became the cornerstone of INFACT's informational packets sent to interested new groups and individuals well into the 1980s.¹⁴³

With the propagation of "The Baby Killer" pamphlet, the continual increase in international interest and media coverage of the Nestlé versus ADW trial in Bern, and the premier and distribution of Peter Krieg's *Bottle Babies*

¹⁴³ As seen in INFACT's archival records in the Minnesota Historical Society collection. *Infant Formula Action (INFACT) records (1966-1994)*. Boxes 1-18, 39. *Action for Corporate Accountability (ACA) Records*. Minnesota Historical Society (MHS). Saint Paul, Minnesota.

documentary, the infant formula issue successfully transitioned from a European-based issue into an American cause. The organization that started the United States awareness campaign was the New York City-based Interfaith Center for Corporate Responsibility (ICCR), a corporate watchdog group affiliated with the National Council of Churches.¹⁴⁴ Inspired by the Bern trial to try and change corporate actions through legal means, religious groups in the United States turned to ICCR for guidance to initiate shareholder resolutions and lawsuits with American infant formula makers. The main sponsors behind a shareholders resolution against Bristol-Myers marketing practices of infant formula in LDCs was a Roman Catholic order, the Sisters of the Precious Blood. Their attempt to fight the resolution led Bristol-Myers to “put out some highly erroneous lies as a report to the shareholders. So ICCR... decided they should sue Bristol-Myers for lying to their shareholders. And the Sisters agreed to be the sponsor of that lawsuit.”¹⁴⁵ In an attempt to imitate the trial in Switzerland, in 1976 the Sisters of the Precious Blood sued Bristol-Myers for lying to its shareholders about its marketing practices and business ethics in the infant formula market.

Though the federal court dismissed the case as invalid, since the shareholders had failed to show that their financial interests were damaged, the Bristol-Myers lawsuit brought greater media attention in the United States to

¹⁴⁴ Dobbing, ed., *Anatomy of a Controversy*, 58.

¹⁴⁵ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

infant formula marketing practices in LDCs.¹⁴⁶ Guided by the ICCR, other American based formula companies such as Borden, Ross-Abbott, American Home Products, and Wyeth Laboratories came under shareholder resolutions similar to that lodged with Bristol-Myers.¹⁴⁷ The leverage and tactic of shareholder resolutions was relatively new in the 1970s, and although they did not succeed in securing very much, such actions provided an opportunity for critics to meet with management and corporate executives and ask them uncomfortable questions and try and get them to act more responsibly.¹⁴⁸ Shareholder resolutions and lawsuits were creating publicity and forced some change within American based companies, but the company with the largest market share in LDCs was not susceptible to these actions.¹⁴⁹ Dr. Hendrickse's words in "The Baby Food Tragedy" finally came to fruition: an "international organization" was developed to raise awareness of the infant formula controversy.¹⁵⁰ This American-based organization's goals were to help develop an international consensus on advertising policy implemented by multinational infant formula manufacturers.

¹⁴⁶ Dobbing, ed., *Anatomy of a Controversy*, 59-60.

¹⁴⁷ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

¹⁴⁸ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

¹⁴⁹ "Boycott Nestlé." INFACCT flyer. CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS. And Dobbing, ed., *Anatomy of a Controversy* (1988): 60.

¹⁵⁰ Geach, "The Baby Food Tragedy," *New Internationalist* 006 (August 1973).

Infant Formula Action Coalition (INFACT)

The Infant Formula Action Coalition and ICCR were very close allies in the years between 1977 and 1981. Leah Margulies, the organization leader of ICCR, was instrumental in convincing Doug Johnson to start INFACT.¹⁵¹ Since ICCR was a collective affiliated with the National Council of Churches, it lacked the autonomy and resources to solely focus on the infant formula issue.¹⁵² INFACT would be an organization that could focus all of its time, effort, and resources to addressing the baby bottle controversy especially in LDCs.¹⁵³

Leah Margulies and Doug Johnson became the orchestrators of the United States activists' response to the infant formula controversy. Johnson had been an active participant in the anti-Vietnam movement when he attended college at Macalester College and later while attending graduate school at University of Minnesota in Minneapolis, Minnesota where he studied political philosophy.¹⁵⁴ Johnson became the director of the Third World Institute located at the Catholic Newman Center adjoining the University of Minnesota campus in Minneapolis in 1973.¹⁵⁵ After several informal meetings with Leah Margulies in Texas and then New York on the activism that was slowly growing around the infant formula

¹⁵¹ S. Prakash Sethi, *Multinational Corporations and the Impact of Public Advocacy on Corporate Strategy* (Boston: Kluwer Academic Publishers, 1994): 159-160. And Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

¹⁵² Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

¹⁵³ Dobbing, ed., *Anatomy of a Controversy*, 61.

¹⁵⁴ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

¹⁵⁵ Sethi, *Multinational Corporations*, 160.

industry's business and marketing practices in LDCs, INFACT was officially established in January 1977. Margulies succeeded in connecting the two separate issues, namely the economic waste of resources by using infant formula and the commercialization of infant formula in LDCs. Johnson recalled, "She laid it out as a whole concept in a way that was very striking [to him]... [as] she was a very persuasive person... She gave us a really good handle [on the issue]."¹⁵⁶ Given his history as an anti-war activist, his influence as an activist leader in the University community, his connection to a large population of university students (both at the University of Minnesota and the half dozen other colleges located in the Twin Cities), and the progressive politics of the state in the 1970s, Johnson became the president and director of INFACT. The national headquarters of INFACT was thus established in the basement of the Third World Institute affiliated with the Newman Center, immediately adjoining the University of Minnesota's campus.¹⁵⁷

¹⁵⁶ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

¹⁵⁷ Third World Institute (TWI) was a project of the Newman Center. TWI was originally founded by a professor of Social Work at the University of Minnesota, Thomas Walls. Walls had been the first Peace Corps director in Honduras, and the Third World Institute began by taking students into Guatemala and Honduras as a kind of introduction to the issues of third world development. When Johnson took over TWI in 1973, TWI did a series of seminars on development issues, and started a political collective of students who had been on the trip and wanted to get involved in some social justice program when they got back. Initially TWI decided to focus on issues of global hunger and the causes of global hunger, but over time as a group TWI decided they were less interested in learning about issues and more interested learning about the process of social change. All information from Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, MN.

Johnson enrolled the help of graduate students in the University of Minnesota's International Student Association (MISA) to help coordinate debates, film showings, and information distribution on college campuses in Minneapolis and St. Paul.¹⁵⁸ INFACT grew into a genuine, if underfunded, international headquarters of a coalition of over 300 different national groups plus those in forty other countries. The use of debates, leaflets, and film showings of the *Bottle Babies* documentary helped raise awareness of the public health crisis occurring in LDCs. Nonetheless, INFACT leaders realized that a different activist tactic was needed to bring about change in Nestlé's business practices. Publicizing Nestlé's unethical advertising to mothers in LDCs and its free distribution to health care professionals of infant formula was not enough to make Nestlé stop those practices. INFACT decided it needed a campaign to force Nestlé to end its indiscriminate promotion and distribution of infant formula in the one language the multinational corporation understood and respected: profits.¹⁵⁹

Starting on July 4, 1977 INFACT coordinated a boycott against all Nestlé consumer products. Though INFACT used other organizational tactics to raise awareness of, and moral outrage over, the infant formula controversy such as leafleting, information distribution, organized documentary viewings of Krieg's

¹⁵⁸ CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

¹⁵⁹ CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

Bottle Babies, and demonstrations at religious and government locations,¹⁶⁰ the boycott came to be the most efficient tactic INFACT used. Partially because the boycott incorporated all the other activist tactics INFACT employed, but also for the same reasons that *La Causa* and the anti-Anita Bryant boycotts were effective. Boycotts are a way for community members to easily act on an issue, rather than the passive alternative of learning about and acknowledging the problem but remaining observatory. Though distributing information was important, boycotts have been considered as a “weapon of the weak,” as historically business owners found the technique particularly effective. Moral outrage is an unpleasant prospect, but negative effect on a corporation’s net profits demands attention and action by the corporation’s leaders. Boycotts are often used to promote and protect the rights of the powerless and disenfranchised.¹⁶¹

The initial boycott of Nestlé lasted for eight years, from 1977 to 1984; this chapter focuses only on the development, growth and activities of INFACT from its inception in 1977 until the World Health Organization (WHO) passed the International Code for the Marketing of Breast-milk Substitutes in 1981. This end date was chosen because the WHO Code was a tangible result stemming from the pressure INFACT generated. Because no public examination of the boycott’s effect could comprehensively be conducted on Nestlé’s revenue, this WHO code

¹⁶⁰ *INFACT records (1966-1994)*. Boxes 1-18, 39. *ACA Records*. MHS. Saint Paul, Minnesota.

¹⁶¹ Friedman, *Consumer Boycotts*, 3.

was, in effect, a culminating statement on infant formula companies' responsibilities in LDCs.

INFACT's grassroots campaign was unique in both its single-minded focus on infant formula feeding issues and its international breadth and scope. Most historians have credited INFACT with the campaign but have failed to analyze the details of the boycott. It is important to examine the reasons INFACT chose Nestlé as the focus of the boycott, the goals of INFACT in boycotting Nestlé, the personnel who made up the boycott on an individual and organizational level, and the activities and media used to spread information and awareness and increase fundraising.

Why Nestlé?

Why Nestlé was chosen as the target of the consumer boycott is unequivocally linked with why ICCR initially chose the infant formula issue as an awareness campaign. ICCR worked on several social justice campaigns that interrogated business ethics. An interview of three ICCR employees in 1984 demonstrated that the emotional appeal of a topic was often crucial in choosing an issue, often choosing one that had a capable and realistic possibility to bring about tangible change and widespread impact. Accomplishing results did not seem possible if there was not an emotional or personal appeal intimately connected to the problem. A sensational topic helped generate support from average American citizens for grassroots social justice causes. Some observers reflected,

ICCR needed strong issues to generate funding and mobilize volunteer time from constituents. These constituents would provide such support only when ICCR's issues had high public visibility and emotional appeal, and were well-documented... [ICCR] could become committed to issues only if its constituents became convinced of their merits... ICCR's 'selection of issues appears to be based more on the intensity of moral offense than on an issue's widespread social impact.' Like other professional social movement organizations, ICCR had a paid staff whose mandate was to develop social issues. This staff had much latitude in issue selection. It was constrained, however, by the need to gain constituent financial and moral support.¹⁶²

The infant formula issue fit all the criteria for public visibility and emotional appeal – pictures of severely malnourished and dying babies were a horrendous visual image. The ICCR was able to translate this vivid issue into action against American based companies. As previously mentioned, the response in the United States to the 1974-1976 Bern Trial were shareholders' resolutions and at least one lawsuit against American based infant formula makers. The approach of stockholder resolution would not work against Nestlé because Nestlé was a Swiss-based company; the company was not listed on any stock exchange in the United States and its private ownership represented a certain amount of corporate impenetrability. This situation led the ICCR to encourage and help initiate INFACT. The ICCR and INFACT firmly believed that Nestlé policies were particularly irresponsible because they had been the slowest

¹⁶² M. David Erman and William H. Clements II, "The Interfaith Center on Corporate Responsibility and Its Campaign Against Marketing Infant Formula in the Third World," in *Social Problems* 32:2 (December 1984). Box 4. INFACT. ACA Records. MHS.

corporation to change marketing and advertising practices.¹⁶³ American companies began to respond by force to the shareholder resolutions ICCR helped orchestrate, and so activists challenged Nestlé as the last major infant formula manufacturer.

Two further reasons INFACT focused on Nestlé were due to its size and its tactics. The company was seen as the market leader. It sold more than a third of all the infant formula in the world,¹⁶⁴ and its continued sales in poor, underdeveloped countries was more than all the American producers combined.¹⁶⁵ Nestlé Corporation prided itself on being the world's leading nutrition, health, and wellness company, dating its interest in infant nutrition back to founder Henri Nestlé. Henri Nestlé, a trained pharmacist, launched one of the world's first prepared infant dietary supplements, "Farine lactée," in 1867.¹⁶⁶ Besides the history and market cornering, Nestlé had the highest rate of penetration into the medical profession. If the physicians and nurses were in Nestlé's pocket and knowingly or unwittingly pushing their products, then preventing mothers from using infant formula unnecessarily would be near impossible. INFACT activists wanted to distance industry from both the

¹⁶³ "Infant Formula: An Activist Campaign," in *Business International*, undated. Box 4. INFACT. ACA Records. MHS.

¹⁶⁴ "Baby Bottle Disease ~ There's Big Money In It." INFACT Boycott flyer. INFACT. Consumer Action Boycott (CAB) plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

¹⁶⁵ "Boycott Nestlé." INFACT flyer. CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

¹⁶⁶ Nestlé Corporation, S.A. Online Source. <http://www.nestle.com>. (Accessed March 2011).

consumer and health professionals, to establish clear ethical lines governing how industries could influence both.¹⁶⁷

Goals of Boycott

In a letter from INFACT to the Nestlé Corporation dated June 29, 1977, INFACT first publicly laid out its list of demands for Nestlé to fulfill. This letter was sent to Nestlé as a warning of an impending nationwide boycott of Nestlé products set to begin on July 4, 1977 in order to pressure the company to cease its intense advertising of infant formula in developing nations.¹⁶⁸ INFACT was aware that more and more mothers in poor countries had been encouraged by advertising to switch from breastfeeding to bottle-feeding their infants.¹⁶⁹ INFACT told Nestlé it was appalled by the intensive advertising and promotional practices of the infant food producers.¹⁷⁰ In this public letter, INFACT enumerated its six goals for corporate policy change that became the basis for the nonprofit's negotiations throughout the entirety of the boycott:

¹⁶⁷ "Infant Formula: An Activist Campaign," in *Business International*, undated. Box 4. INFACT. ACA Records. MHS.

¹⁶⁸ INFACT. Letter to Nestlé. CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

¹⁶⁹ For more information see: S. Prakash Sethi, "Health, Medical and Scientific Aspects of the Controversy," in *Multinational Corporations and the Impact of Public Advocacy on Corporate Strategy* (Boston: Kluwer Academic Publishers, 1994): 111-123.

¹⁷⁰ INFACT went on to describe how corporations misled mothers and fathers who wanted to do what was best for their babies by arranging give-aways, radio jingles, billboards and "mothercraft" nurses selling the message: "The modern, caring mother bottle-feeds her baby." INFACT. Letter to Nestlé. CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

- A. Immediate stop of all promotion of Nestlé artificial formula
- B. Stop mass media advertising of formula
- C. Stop distribution of free samples to hospitals, clinics and homes of newborns
- D. Discontinue the use of Nestlé milk-nurses
- E. Stop promotion of products through the medical profession
- F. Prevent artificial formula from getting into the hands of people who did not have the means or facilities to use it safely.¹⁷¹

The goals of the boycott resonated with many religious organizations, community groups, students at American universities, and prominent charity foundations. As the next section shows, INFACT was as successful in portraying organization participation as it was in restructuring personal accounts from physicians and health workers in LDCs. INFACT was careful to show statistics and broadcast group participation that would enhance the successful illusion that INFACT was larger, farther reaching than it really was. Its moral stance also gave the façade of being more virtuous and just than any explanation Nestlé could proffer.

Participants in Boycott

INFACT focused its information dissemination on church organizations, high school students, college students, as well as women and mothers groups.¹⁷²

¹⁷¹INFACT. Letter to Nestlé. CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

These targets were chosen for their probable interest in the infant formula controversy. The idea of social justice and helping those less fortunate was a common religious agenda in churches and church groups in the 1970s and 1980s while activism in justice issues and corporate responsibility was a prominent rally tool for high school and college students and student-ran organizations.¹⁷³ The emotional appeal and anguish of seriously ill and dying babies was clearly used in a manner to resonate with mothers and women's groups as well as the general population.

INFACT was very focused on getting their message out about public health disparity and corporate irresponsibility. It also allowed much of the credit to go to other organizations. As an undated article in *Business International* commented about ICCR and INFACT stated,

¹⁷² List of Boycott Endorsers as advertised by INFACT on an informational flier (CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.): Dr. Doris Calloway, University California, Berkeley Dept. of Nutrition Chairwoman; Cesar Chavez; Dick Clark, former U.S. Senator from Iowa; Dr. Derrick Jelliffe; Ralph Nader; Dr. Benjamin Spock; American Lutheran Church; Roman Catholic Archdioceses San Francisco, Minneapolis and St. Paul; Clergy and Laity Concerned; Church Women United; Maryknoll Fathers and Brothers; National Council of Churches; Presbyterian Church in the US; United Church of Christ; United Methodist Church; Peace Corps; United Farm Workers of America; National Organization for Women (five chapters); Democratic Parties of Washington and Minnesota; College & Student Governments: University California Berkeley, Harvard, University of Pennsylvania, Radcliffe, San Jose State, and Wellesley College.

¹⁷³ Two prominent activist campaigns involving high school and college students during the 1970s and 1980s included protests of the Dow Chemical Company's production and use of Agent Orange during the Vietnam War and the protest of the United Fruit Company's land owning policy and business practices in Latin and South American countries in the late 1970s and 1980s.

In the US, solicitation of formal support from a wide range of groups has been an activist goal. An ICCR leader points out that the US Southern Presbyterian Church has endorsed its position, with these sympathies in part confirmed by reports from the church's own missionaries on infant health problems and mortality. He also cites support of various medical groups, women's rights groups and trade unions. "The range of opinion that had led people to come together on this issue is impressive... It has concerned people from all walks of life, with all sorts of political associations."¹⁷⁴

This is an example of effective distributive grassroots strategy of empowering locals. It did not matter who got the credit, as long as change was occurring. By appealing to multiple facets of society, across gender, political, and economic lines, the issue became larger and potentially more accessible to the entire population. Empowering locals to feel like they were making a difference in such a far off place was a key component to INFACT and ICCR's success.

“Crunch Nestlé Quik:” Distributing Information, Raising Awareness

INFACT's intensive campaign to disseminate information and hold protest-themed events was critical to the growth of the boycott and awareness of the baby bottle controversy. INFACT developed a sophisticated campaign incorporating debates, movie presentations, lectures, small group talks and activities, petitions, posters, leaflets/fliers, informational booklets, demonstrations, protests, buttons, t-shirts, bumper stickers, and newsletters in order to persuade consumers to boycott.¹⁷⁵

¹⁷⁴ "Infant Formula: An Activist Campaign," in *Business International*, undated. INFACT. Box 4. ACA Records. MHS.

¹⁷⁵ These materials are found in INFACT's records in the Minnesota Historical Society archives. ACA Records. Boxes 4-11. MHS.

The *New Internationalist* article, the War on Want pamphlet, and the *Bottle Babies* documentary have been previously discussed, but the importance of the *INFACT Update* and the activism of participants across the country were important to the campaign in an integral way. The newsletter became an important vehicle to provide communication among various groups involved in INFACT activities, to proselytize and bring in new volunteers, to raise funds, and to provide material and information to other grassroots organizations in the campaign against Nestlé and other infant formula companies.¹⁷⁶ Once the consumer boycott of Nestlé was implemented in 1977, INFACT used their bi-monthly newsletter to spread information on what new items and brands were added to the boycott list.¹⁷⁷ The slogan of “Crunch Nestlé Quik”¹⁷⁸ was initiated as a means to both spread the boycott and to remind participants of two of Nestlé’s most popular consumer products: Nestlé Crunch chocolate bar and Nestlé Quik milk-chocolate additive. The slogan and emblem became staples of the INFACT boycott in demonstrations, rally chants, informational leaflets, and boycott updates.

It was through the *INFACT Update* that information on the “Crunch Nestlé Quik” campaign was most widely and effectively disseminated. Although leafleting and articles explaining the boycott slogan were widely distributed and

¹⁷⁶ Sethi, *Multinational Corporations*, 163.

¹⁷⁷ CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

¹⁷⁸ “Clip Nestlé Quik Packet,” undated. Campaign Packets. Box 5. ACA Records. MHS.

published respectively, the *INFACT Update* was the most efficient means of mass distributing updates and changes to the campaign for those doing the promotion. It was this organized and “well oiled fighting machine”¹⁷⁹ approach to the boycott that made INFACT so effective in raising awareness.

Although INFACT’s tactics were commendable, not everyone agreed with the negative approach INFACT took to attacking Nestlé’s business practices in LDCs. INFACT was highly successful at presenting facts and statistics offered by physicians and health workers in LDCs in a favorable manner, as statistics can be easily manipulated. Not surprisingly, considering the archives are filled with INFACT’s files and organizational records, detractors to INFACT’s message were not in great supply in the archives at the Minnesota Historical Society. Occasionally hostile reactions were included. In INFACT’s correspondence was an article from nationally syndicated journal *Business Weekly* denouncing INFACT’s anti-capitalism, anti-business, alleged manipulation and exaggeration of statistics and statements. *Business Weekly* claimed that INFACT manipulated statistics and statements by health care workers in LDCs to fit their activist goals. Thus, when Dr. Jelliffe stated that “some ten million babies would be saved from diarrhea disease and marasmus each year,”¹⁸⁰ INFACT publicized in its information leaflets that “ten million babies die each year from infant formula

¹⁷⁹ Sethi, *Multinational Corporations*, 161.

¹⁸⁰ Dobbing, ed., *Anatomy of a Controversy*, 4.

use in Third World countries.”¹⁸¹ This deliberate distortion of facts suited INFACT's goals of awareness and sensationalism, but as the business magazine noted, at the cost of complete truthfulness and honest representation of actual circumstances in LDCs.

Conclusion:

INFACT succeeded in raising international awareness of the infant formula crisis. The World Health Organization's 1981 *International Code of Marketing of Breast-milk Substitutes* suggests one outcome of the scope of INFACT's activism and boycotting, but few of the most ambitious social and health goals of INFACT were realized. No means of effectively enforcing the WHO Code were put in place, and there was no statistical method or study developed to measure the direct effectiveness of either the Code or INFACT's public campaign and boycott of Nestlé.

The problem was complex. Despite the growing movement in the 1960s and 1970s surrounding the positive qualities of breastfeeding, INFACT did not really comment on breastfeeding. Quality of milk was a medical and public health issue that had been evident for over a century at that point, especially concerning the importance of cleanliness and the nutritional value of milk for infant and children.¹⁸² Given that infant formula tried to duplicate the values of

¹⁸¹ CAB plan. Events and Announcements, 1977-1980 Folder. Box 5. ACA Records. MHS.

¹⁸² Multiple historians have done work on milk quality, adulteration, and distribution in the 19th century and early 20th century, notably Jennifer Moore

milk, advocacy groups, especially INFACT, had no reason to question the value of the produce but did attack the ways in which infant formula products were marketed and used throughout the developing world.¹⁸³ Ultimately, INFACT claimed it had succeeded in affecting the giant international company Nestlé noting that the company created a massive coupon campaign to boost sales after the boycott started to gain national and international traction in 1978. INFACT responded with slogans such as “Clip Nestlé” and “Crunch Nestlé Quik” as a call to arms to continue to pressure the multinational corporation.

In retrospect, INFACT was only relatively successful in the boycott for several reasons. The organization’s ambition exceeded practical possibility of accomplishing desired change of eliminating the distribution of formula in sites where the local population could not properly use it. While INFACT’s intentions had a social justice base and recognized issues of poverty and political inequity, the issue of infant formula use and abuse in less developed countries was too complicated to be vanquished with a concentrated boycott of the leading infant

and Jacob Steere Williams. However the apparent scope of the problem was noted in the *American Journal of Nursing* in 1904 which demonstrates the medical and public health attitudes: “Between 1881 and 1896 [in Rochester, NY with an average population of 112,000] 11,538 children under five years of age died of various infantile diseases... numerous infantile deaths in other cities prove that... babies died quite as numerously. The main reason for all these deaths is not difficult to find... the main cause [is] the dirty milk supply of our cities... If instead of the duties to her child, the duties of society are allowed to come before the maternal duties, then the child must be exposed to dirty milk, the greatest danger of its early life period.” [George Goler, “Nurses’ Work in Milk Stations,” *The American Journal of Nursing* vol. 4 no. 6 (March 1904): 417-418.]

¹⁸³ Maggie McComas, Geoffrey Fookes, George Taucher, *The Dilemma of Third World Nutrition: Nestle and the Role of Infant Formula* (Printed in U.S.A: Nestle S.A., 1983): 3.

formula distributor. ICCR and INFACT identified infant formula as an emotional issue that would raise and keep public interest, and Nestlé was a rational target to choose due to its high visibility in economic markets of both industrialized and less developed countries.¹⁸⁴ The campaign by INFACT was described by Penny Van Esterik as one with a “convergent manner.”¹⁸⁵ The fact of the matter was that the baby bottle campaign tried to tackle a divergent issue: there were multiple, complex reasons that millions of babies in LDCs became sick, malnourished, and died each year.

INFACT found a campaign issue that caught public attention but in the process failed to address the underlying issues in LDC’s of poverty, illiteracy, sanitation, and industrialization. They also ignored considerable research that would have encouraged women to breastfeed. Advocacy instead focused on politicizing public health by demonizing Nestlé and its corporate business practices.

Writing at mid-century, physician Derrick Jelliffe did not point to any particular infant formula manufacturer as the culprit behind infant marasmus and malnutrition. The public health minded physician focused on the public health issues of promoting breastfeeding over bottle feeding and the need for clean water, health education, and improved medical care. Jelliffe exemplified the changing status of public health in the post-war era; public health had evolved from a chronic disease controller to a focus on social medicine and

¹⁸⁴ McComas, et al., *Nestlé and the Role of Infant Formula*, 3.

¹⁸⁵ See Van Esterik, *Beyond the Breast-Bottle Controversy*, 1-27.

overall community health.¹⁸⁶ Jelliffe's own career moved from practicing public health, especially infant nutrition, to becoming a faculty member and research publisher at Tulane University and University of California, Los Angeles Schools of Public Health, and thus reflected the changing role and site of public health played in the United States. Even though Jelliffe was British by birth, his joining of two different accredited schools of public health demonstrated the growing interest in public health abroad. By 1965, the American Association of Schools of Public Health was becoming increasingly concerned about international nutrition and population control, and public health students were increasingly attracted to international health and population control.¹⁸⁷ When Jelliffe's observations as a public health practitioner and calls to action did not garner widespread international attention or inspire direct action, other activists found new tactics. Although public health was a growing field in the United States, public health concerns were not sufficient to attract the necessary public attention; a quite different contingent brought politics and emotions into the public health issue of infant formula misuse in LDCs.¹⁸⁸

Though INFACT failed to accomplish the main goals it laid out at inception in 1977, the ability to translate the infant formula controversy into an

¹⁸⁶ Elizabeth Fee and Roy M. Acheson, eds., *A History of Education in Public Health: Health that Mocks the Doctors' Rules* (New York: Oxford University Press, 1991): 242-243, 270-271.

¹⁸⁷ Fee and Acheson, eds., *A History of Education in Public Health*, 263, 267.

¹⁸⁸ An indicator of this growth of interest in public health is the over 50% increase in accredited schools of public health in the US between 1965 and 1972. [Fee and Acheson, eds., *A History of Education in Public Health*, 240-241, 261, 267.]

international activist campaign was an impressive feat in the context of the 1970s and 1980s before the internet and world wide media connection. Just like the United Farm Workers Movement and the Florida Orange Juice boycott, Minneapolis based INFACT succeeded in developing a nonviolent campaign and appealing to a national audience which garnered support and geographically spread awareness of the issue through the strategic use of newspapers, magazines, and televised news. The parallel with contemporary movements is clear by the utilization of non-violent methods, in the use of slogans such as “Squeeze Anita” or “Clip Nestlé Quik,”¹⁸⁹ and their appeal to the idea of equality and human rights for all people.

The inability to measure the effectiveness and impact on a multinational corporation’s profits proved a weakness of past consumer boycotts, not just the Nestlé Boycott. What the pre-INFACT activism associated with the infant formula issue towards American-based companies and INFACT’s boycott was able to demonstrate were the changes in overt marketing and distribution practices of large corporations (American companies Bristol-Meyers, Borden, and Ross-Abbott and internationally based Nestlé) in LDCs. Even though INFACT was not successful in curbing all unethical infant formula marketing practices in LDCs, it did raise awareness of the infant formula issue, demonstrated by the Senate Subcommittee hearings presided over by Senator Edward Kennedy in 1978, and the development of the 1981 WHO Code.

¹⁸⁹ *Infant Formula Action (INFACT) records (1966-1994). Action for Corporate Accountability (ACA) Records.* Minnesota Historical Society (MHS). Saint Paul, Minnesota.

As my account of Cesar Chavez, Mahatmas Gandhi, and Martin Luther King suggest, INFACT sought to address a social justice concern, and its organization was shaped by contemporary social movements and articulate individuals whose activities preceded its formation. INFACT successfully drew ideas and organizational structure from the era of activism and social justice that started in the 1960s. The leaders expanded their goal, realizing that an international problem could only be addressed on an international scale,¹⁹⁰ INFACT was unique as a social justice organization because for the first time a nongovernmental organization had a direct role in deliberations at WHO and UNICEF. INFACT managed to accomplish something that decades of clinical observations had failed to achieve: developing public awareness and concern about infant formula abuse in LDCs.¹⁹¹ INFACT was intimately connected to and endorsed by organized Christian groups, as well as other organizations with strong local constituencies. These enabled it to attract additional resources and attention from nationally prominent politicians and public figures who were in position to mobilize even broader public opinion. These connections were crucial to drawing in the grass-roots support of the atypical law-abiding, church-going middle class Americans who until then were typically not found even on the

¹⁹⁰ Simon Wiesenthal, *The Murderers Among Us* (New York: McGraw-Hill Book Co., 1967): 187.

¹⁹¹ Van Esterik, *Beyond the Breast-Bottle Controversy*, 11.

fringe of fervent social activism.¹⁹² Their support made it possible to push the movement beyond the nation's borders.

INFACT relied in many ways on much earlier concerns and research on the infant formula problem in LDCs. While the target was the marketing of formula by Nestlé and other companies, already at midcentury health professionals had tried to draw attention to the intersecting issues of dire poverty and the promotion of this highly westernized mothers' milk substitute. Although the target was specific in challenging the companies that marketed baby formula in less developed countries, it made clear the way in which poverty was deeply implicated in the problem by asking companies to cease marketing and pushing formula where poor water and no capacity for sterilization meant the product could actually be dangerous. When they could be afforded and properly prepared, modern infant foods were convenient, easily prepared, packaged in suitably small quantities, and nutritious – but they were far from essential.¹⁹³

It took changing social norms, more attention to global problems by Americans, and the energy of the social activism of the 1960s to draw public attention and attract organized response. INFACT's organizer, Douglas Johnson, later observed that INFACT, while initially supported by NCC and ICCR, alienated some when it moved from an informational campaign to the boycott.¹⁹⁴ Though the phrase “social justice” was not commonly found in the primary

¹⁹² McComas, et al., *Nestlé and the Role of Infant Formula*, 10 & 12.

¹⁹³ Jelliffe, *Infant Nutrition in the Subtropics and Tropics* (Geneva: World Health Organization, 1955): 20-21.

¹⁹⁴ Douglas Johnson. Oral Interview. 23 February 2011. Minneapolis, Minnesota.

literature regarding the formation and support of INFACT, it is an underlying pillar for both the counterculture of the post-war era briefly discussed in this thesis and the stance INFACT took on the Baby Bottle Controversy. By the 1990s, transnational consumer-based campaigns became the new basis for global regulation; corporate self-regulation, independent monitoring by civil society groups, and international consumer pressure were all linked as means of economic influence. Proponents of this new form of business regulation laid a new stress on corporate social accountability and responsibility as business leaders and ethicists began to argue that corporations do best when they incorporated ethical concerns into their business practices.¹⁹⁵ INFACT succeeded in taking an international public health problem that appeared quite enormous and intractable to the average person and turned it into a quite focused project where the will to help was given a means to tangibly “do” something specific.¹⁹⁶ As a result, what had been brought to public attention as a specific public health concern in the end became identified as a social justice issue.

¹⁹⁵ Seidman, *Beyond the Boycott* (New York: American Sociological Association, 2007): 42.

¹⁹⁶ Simon, *The Politics of World Hunger* (New York: Harper’s Magazine Press, 1973): 15-16.

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