

Protecting infants in emergencies: Information for the Media

"There should be no general distribution of breastmilk substitutes. Any provision of breastmilk substitute should be based on careful assessment of need." **Texas Department of State Health Services**

"With appropriate support and guidance, stress does not cause milk to dry up. (in emergencies) keep children and parents together and create safe havens for pregnant breastfeeding families. These havens should provide security, counselling, water and food." **American Academy of Pediatrics**

"Cash donations enable charities to buy the most needed types of food, medicine, clothing, shelter materials and other supplies. By buying relief products locally or regionally, charities can reduce shipping costs and more rapidly deliver assistance." **Charity Watch**

Natural and human-made disasters regularly put lives at risk. Babies caught in the ensuing chaos are vulnerable to illness and even death. In an emergency, there may be no clean drinking water, no sterile environment, and it may be impossible to ensure the cleaning and sterilizing of feeding bottles and utensils.

Journalists have an important role in helping to protect infants in emergencies by reminding audiences that human milk is a reliable and sterile food that helps to prevent illness, while artificial feeding may add to health risks. Appeals for donations of infant formula should not be supported – they hamper relief efforts on the ground, people often donate the wrong kind. There will always be some infants who need breastmilk substitutes and authorities will ensure the right kind of infant formula is available in emergencies for families in need.

Why are infants vulnerable?

Babies have specific nutritional needs and are born with an undeveloped immune system. For infants who are breastfed, human milk provides both food and immune support, which protects them from the worst of emergency conditions. The situation is very different for babies who are not breastfed. In an emergency, food supplies are disrupted, there may be no clean water with which to make up infant formula or to clean feeding implements, and the health care system is stretched past breaking point. This means that babies who are not breastfed are vulnerable to infection and to developing diarrhea. Babies with diarrhea easily become dehydrated and so are at real risk of death.

Whenever there is an emergency, it is extremely important that babies who are already being breastfed continue to be, that babies who are partially breastfed be put to the breast more often, and babies who are not breastfed re-start breastfeeding or, if this is not possible, are safely given infant formula.

What about young children?

It is not only babies that are vulnerable. Young children, those under five years, and especially children under 2, are at risk of increased illness and death in emergencies. Breastfeeding still protects these children. Young children also need enough nourishing food that is safely prepared – this too can be a real challenge in an emergency.

What is the problem?

Experience has shown that when there is an emergency, massive amounts of infant formula and powdered milk are donated. Some donations are a direct result of media appeals for infant formula. These may originate with aid agencies, governments or from individual efforts to help. In the confusion that surrounds emergencies, these products are often distributed in an uncontrolled way and used by families who would otherwise breastfeed their babies. This results in unnecessary illness and increased risk of death. Powdered infant formula is not sterile and ordinary preparation methods can cause illness when water is not clean or there is no way to sterilize or properly clean feeding equipment. The risk of illness is greater when families are preparing formula in crowded conditions in shelters. Agencies on the ground can assess and purchase the safest kind of formula based on local conditions.

How can journalists help?

Members of the media can assist by including the following messages in their stories:

- Supporting mothers to continue breastfeeding protects infants in emergencies.
- Breastfeeding is not fragile and women who are physically and emotionally stressed are able to make enough milk for their babies.
- The indiscriminate use of infant formula in an emergency is dangerous to babies, causing illness and increased risk of death.
- Emergency workers do not need large amounts of infant formula when there is an emergency and any that they do need should be procured locally. There is no need for donations of infant formula, powdered milk or baby bottles to be sent to the site of an emergency.
- Members of the public who donate funds to aid agencies should be encouraged to ask the recipients of their donations if and how they are distributing infant formula or powdered milk and encourage them to act appropriately.

How can babies and young children be protected in emergencies?

There are accepted guidelines for the management of infant feeding in emergencies.

1. Those who are breastfeeding their babies and feeding human milk are to be given support and practical assistance to continue, they should never be indiscriminately given infant formula or powdered milk. Experience has found that peer support programs can help families to care for their babies and keep breastfeeding.
2. Those who have stopped breastfeeding completely, i.e. weaned their babies, should be encouraged to restart breastfeeding (relactate) and the option of another woman breastfeeds the baby) should be explored for babies without mothers.
3. If there are infants who cannot be breastfed and no donor milk is available, they should be given infant formula and the associated necessary resources to prepare it, under close supervision. Caregivers should be provided with education and support and the infant's health monitored. Bottles should not be used because of the risk of contamination due to the difficulty of effectively cleaning them – even young babies can be fed via cup or spoon.
5. Efforts to protect and support breastfeeding and ensure safe artificial feeding should extend to all young children.
6. Emergencies may be used by infant formula manufacturers as a way to enter new markets and increase sales. Unethical marketing of infant formula is a problem worldwide and an international code has been developed to protect mothers and babies from such unethical marketing.

Key message

The messages that the media present about the needs of infants in emergencies can have a far-reaching impact on the babies who are unfortunate enough to be affected by an emergency. Members of the public, NGOs and donor agencies want to assist babies and giving them good information about infant and young child feeding in emergencies will help to prevent harmful practices and help to protect the most vulnerable from malnutrition and death.

Infant feeding resources for Families

Texas WIC

- 24-7 infant feeding support 1-855-550-6667
- TexasWIC.org or 800-942-3678 to replace WIC foods

Black Breastfeeding Mothers' Association - 24 hour breastfeeding support for families 1-800-313-6141

La Leche League of Texas - find your local breastfeeding support at TexasLLL.org

Key References

WIC Nutrition Infant Feeding in Disasters

Texas Health and Human Services December 2016

<https://www.dshs.texas.gov/wichd/bf/ifdisasters.shtm>

AAP Infant Nutrition During a Disaster Fact Sheet, American Academy of Pediatrics, 2007

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Children-and-Disasters/Documents/InfantNutritionDisaster.pdf>

This document was modified for the U.S.A. context by SafelyFed USA, from "Protecting Infants in Emergency, Information for the Media," IFE Core Group, Emergency Nutrition Network (ENN)

email: ife@enonline.net web: www.enonline.net