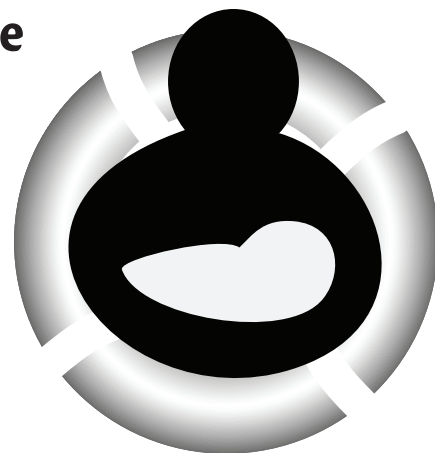


Breastfeeding: A Vital Emergency Response

Are You Ready?

Facts About Breastfeeding in an Emergency

Especially for Relief Workers



FACT: Breastfeeding is Life-Saving Protection in an Emergency

In an emergency situation, breastfeeding saves lives. This is because human milk is not only the perfect nutrition for infants, it also contains antibodies that fight infection and disease. Contaminated water, poor sanitation, and the spread of germs and bacteria are common in emergencies, and infants and young children are at special risk. The safest, most sanitary food is always the mother's own milk. Breastfeeding also helps keep infants warm, and lowers stress levels to calm traumatized infants and mothers.

ACTION

Encourage mothers to continue breastfeeding, or to restart breastfeeding if they have stopped (see below). Include International Board Certified Lactation Consultants (IBCLCs) from your community as part of your emergency relief team to provide the special assistance and support to help mothers continue breastfeeding.

FACT: Mothers Can Make Plenty of Milk...Even if They Are Stressed

Many health and relief workers assume that a mother who is stressed during an emergency cannot make milk. This is not true. In fact, stressed women can make plenty of milk. With support to help mother relax, her milk can flow well to her baby.

ACTION

Help mothers relax in stressful situations. Holding her baby "skin-to-skin" helps lower stress (cortisol) levels in both the mother and the baby. This can calm them both, and help mother's milk easily flow. A "sling" or "wrap" can help give mothers and babies a little privacy for skin-to-skin contact and breastfeeding.

FACT: Hungry Mothers Can Breastfeed

Hungry mothers CAN breastfeed and still make plenty of nutritious milk for their babies, even if they aren't getting enough food for themselves. Mothers make milk from their own body stores, so even in an emergency, the quantity and quality of a mother's milk will be unaffected. However, a hungry mother will lack strength and may find breastfeeding more difficult.

ACTION

Feed the mother so she can feed her baby!



FACT: Babies Should Continue to Breastfeed...Even if They Are Sick

Infants and young children are five times more likely to die in an emergency, usually due to diarrhea. Breastfeeding dramatically decreases the risk of diarrhea. Human milk is quickly absorbed, and the many immune factors help fight illness and infection. Human milk also has important nutrients, minerals, and water to help keep the baby hydrated.

ACTION

If an infant is ill, encourage the mother to breastfeed often, at least 8 times every 24 hours. Refer her to an IBCLC for follow-up care.

FACT: Avoid Routine Acceptance and Distribution of Infant Formula

Infant formula should never be routinely distributed in an emergency. This is especially true of powdered formulas since they are not sterile, as well as concentrated formulas that require clean water for safe preparation. In an emergency, infant formula distribution can actually do more harm than good.

ACTION

Do not accept donations of infant formula by well-meaning contributors or formula companies. Any formula used should be purchased by the relief agency and used only in the strictest conditions, including situations where water can be properly boiled, where breastfeeding or giving human milk is not an option (e.g.: an infant who is orphaned or a mother who has already weaned and relactation is not possible), and where formula contributions can continue for as long as the infant needs it.

FACT: Breastfeeding Can Begin Again...Even if the Mother Stopped

Mothers can begin producing milk again, even if they have already discontinued breastfeeding. This is called relactation, and it can be a life-saving solution in an emergency.

ACTION

Give mothers who have discontinued breastfeeding the option of restarting again, and refer them to an IBCLC on your emergency relief team or in the community. Provide a quiet, sheltered area for breastfeeding mothers who want some privacy as they encourage their baby to nurse often to get their milk flowing again well.

ACTION: Protect Breastfeeding in an Emergency

In an emergency, pregnant and breastfeeding mothers need support to continue breastfeeding. Provide mothers with privacy, if desired, and encourage them to breastfeed often, around 8-12 times every 24 hours. Babies should be breastfed exclusively (giving baby nothing but human milk) for their first 6 months of age; thereafter breastfeeding continues for at least a year or two (or for as long as the mother and baby wish), as the baby also begins to eat complementary foods.

FACT: What Is an IBCLC?

International Board Certified Lactation Consultants (IBCLCs) are healthcare professionals with specialized knowledge and experience helping breastfeeding families from pregnancy through weaning, and are an important part of the response team. In an emergency, they assist mothers with milk production questions, help mothers who need to express their milk, and help mothers relactate. They also assist when babies refuse to latch and provide expert assistance in numerous other situations that can occur with breastfeeding. Check the "Find a Lactation Consultant" directory at the website of the International Lactation Consultant Association to learn more at: www.ilca.org.

