

Infant feeding in emergencies

"In refugee camps and other crisis-affected areas, the health risks associated with bottle feeding and breastmilk substitutes are dramatically increased, due to poor hygiene, crowding and limited water and fuel. These conditions contribute to diarrhoea and, at worst, to higher infant mortality."

BFHI News, UNICEF, September/October 1999

In the globalized world of the 21st century, emergency situations will become even more commonplace. Flooding and desertification due to climate change, poverty and war will increase the number of disenfranchised mothers and children. In these emergency and relief situations breastfeeding is of critical importance - IT SAVES BABIES' LIVES. Breastmilk provides the perfect nutrition for babies while its anti-infective properties protect against diarrhoea and respiratory infections that are often epidemic in emergencies. By contrast, artificial feeding in these situations is dangerous and increases the risk of malnutrition, disease and infant death - making adherence to the International Code of Marketing of Breastmilk Substitute a critical issue for survival.

Rather than adding stress to mother and child in emergency situations, breastfeeding can provide nurturing and support for both and should be encouraged. It's also important to de-bunk certain myths about breastfeeding in less than ideal situations:

Myth 1 - *Stress makes milk dry up.*

While extreme stress or fear may cause milk to momentarily stop flowing, this response is usually temporary. There is growing evidence that breastfeeding produces hormones that actually reduce tension, calming both mother and child.

"The moment she had laid the child to the breast, both become perfectly calm."

Isak Dinesen, "Ehregard"

Myth 2 - *Malnourished mothers cannot breastfeed*

In emergency situations, extra food should be given to the lactating mothers so that they can feed their babies and maintain their strength to care for older children and other family members. In the case of severe malnutrition, the use of a breastfeeding supplementer can ensure increased breastmilk production.



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Myth 3 - *Babies with diarrhoea need water or tea*

Since breastmilk is 90% water, breastfed babies with diarrhoea rarely need supplementation with water or tea. In addition, water is often contaminated in emergency situations.

Myth 4 - *Once breastfeeding has stopped, it cannot be resumed*

With an adequate relactation technique, is it possible for mothers to resume breastfeeding. This can provide life-saving nutrition and immunological benefits in an emergency. Source: *BFHI News, UNICEF, September/October 1999.*