

INTERNATIONAL GUIDELINES

Sphere Handbook

Best practice guidelines for charities regarding the feeding of infants and young children
Includes why charities should not solicit or accept donations of formula milk and how formula supplies should be controlled

Operational Guidance on Infant and Young Child Feeding in Emergencies (IYCF-E)

Provides practical advice for charities on the ground on supporting breastfeeding and managing formula milk

Emergency Nutrition Network (ENN)

Has many useful resources and articles, including updated guidelines regarding the current refugee and migrant crisis.

Useful Links

The Sphere Project Handbook (Available at <http://www.spherehandbook.org/>)

Operational Guidance on Infant and Young Child Feeding in Emergencies (IYCF-E) (<http://www.ennonline.net/ourwork/guidance/opguidanceiycfe>)

UNHCR: Standard Operating Procedures for the Handling of Breast Milk Substitutes (<http://www.unhcr.org/55c474859.pdf>)

Guidance for workers supporting refugees and migrants in transit (http://files.ennonline.net/attachments/2403/Infant-and-Young-Child-Feeding-in-Transit-011015_FINAL.pdf)

Emergency Nutrition Network (<http://www.ennonline.net/>)

Infant Feeding Support For Refugee Children <https://www.facebook.com/safelyfed/>



MAMMAS

How Can We Help Mothers and Babies Fleeing War and Natural Disasters?

For more information

Contact MAMMAS

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Breastfeeding Support

In a crisis situation, breastfeeding saves lives. Breastfeeding is the most effective way to reduce infant deaths in an emergency. Enabling mothers to breastfeed is an essential part of any aid response.

Why is breastfeeding so important?

- Protects from infection/diarrhoea/malnutrition
- Food security
- Better long-term health
- Contraceptive (98% effective)
- Faster postnatal recovery of mother
- Stress-relieving



A mother and baby caravan:
Zaatari camp
© Save the Children, 2013

How can we support breastfeeding?

- Provide women with access to trained breastfeeding supporters, or if none are available, with other mothers who have breastfed successfully.
- Provide mothers and pregnant women with a private space (sometimes known as 'Baby Tents' or 'Mother and Baby Caravans') where they can go for professional and mother-to-mother support. See www.ennonline.net for case studies.
- Strictly control the availability of formula milk (see the next page to understand why). Ensure formula is only given to babies who really need it. Mothers and babies should be assessed by someone with infant feeding training, and a baby should only be formula fed if no other alternative is found. Formula milk should always be distributed with enough feeding equipment to make it safe (see list), and the supply should be guaranteed for as long as the baby needs it.
- Other practical ways to support mothers include distributing breastfeeding shawls and baby carriers, and providing enough nutritious food to eat to keep themselves and their baby healthy.

Resources required to care for a formula-fed 5 month old for 1 Week¹

1. Ready to use Infant formula (approx 56 packs)

2. Clean water (3L/feed, 170L/week)

3. Storage container

4. Large cooking pot with lid

5. Kettle

6. Gas stove

7. Sufficient matches/lighter

8. Liquid petroleum gas

9. Measuring container

10. Metal knife

11. Metal spoon

12. Metal tongs

13. Feeding cup

14. Paper towels

15. Detergent

16. Nappies

17. Wipes

APPROX COST: £125

Strictly Control Formula Milk

Formula milk is a very risky way of feeding babies in emergency situations. When it is not used correctly it is deadly for a number of reasons:

Formula can be deadly when basic facilities aren't available

- A constant supply of clean water and a way to heat it is essential; when these facilities are not available, formula including Ready to Feed, is often deadly.
- Formula itself is not sterile, and infection can easily be passed on from feeding cups or bottles that are not properly sterilised

Formula milk is seen as better for babies

- Breastfeeding mothers mistakenly put their babies at great risk, believing they are doing their best for their babies by formula feeding, which is otherwise expensive.
- There is a lack of knowledge about the vital protection breastfeeding offers.

They undermine the confidence of breastfeeding mothers

- Untargeted distributions of formula reinforce the belief that the milk supply of breastfeeding mothers in stressful situations is affected.
- A slightly malnourished woman is able to produce nutritional breastmilk and feeding a severely malnourished woman will enable her to produce sufficient milk

Donated formula is often inappropriate for the people it's meant for

- Formula donations may not be labelled in the right language resulting in wrongly made up feeds causing harm.
- Not all formula are suitable for all babies, or for vegetarians and those avoiding pork or beef products.

Continuity of supply

- A formula-fed baby relying on donations does not have food security. When the supply runs out the choice for mothers is stark
- Families dilute feeds to make the supply go further, putting the baby at further risk of malnutrition