

Supporting Infant and Young Child Feeding as a Cornerstone for Sustainable Humanitarian Relief



**IYCF-E EXPERIENCES IN A SYRIAN
REFUGEE POPULATION IN GREECE
AND POST-HURRICANE PUERTO RICO
BY MARY UNANGST, BS, IBCLC**

Safe and Supported Motherhood as a Human Right



- “Children are the products of an environment over which they have no real control-passengers through narrow pathways in a world they never made.”

✧ Bryan Stevenson

IYCF-E in Greece and Puerto Rico



"There can be no keener revelation of a society's soul than the way in which it treats its children."

— Nelson Mandela, Former President of South Africa



About Me



- Mother of two
- USAF veteran
 - Cryptologic Linguist-not Spanish or Arabic!
- IBCLC
 - WIC/TGH
 - BS in Maternal and Child Health
 - Private Practice at Sweet Songs
Breastfeeding at the Tampa Breastfeeding Center
 - Telehealth for Milk on Tap
 - Lactation Consultant at Florida Craniofacial Institute



** I have no financial interests to declare**

Objectives



- Understand Optimal IYCF, IYCF-E and Why they are Important
- Identify Past IYCF-E Efforts and Current Needs for IYCF-E Worldwide
- Learn more about my IYCF-E Experiences in Greece and Puerto Rico
- Discover ways Lactation Professionals can get Involved
- Apply IYCF/IYCF-E Principles to your Community Practice

The Importance of IYCF

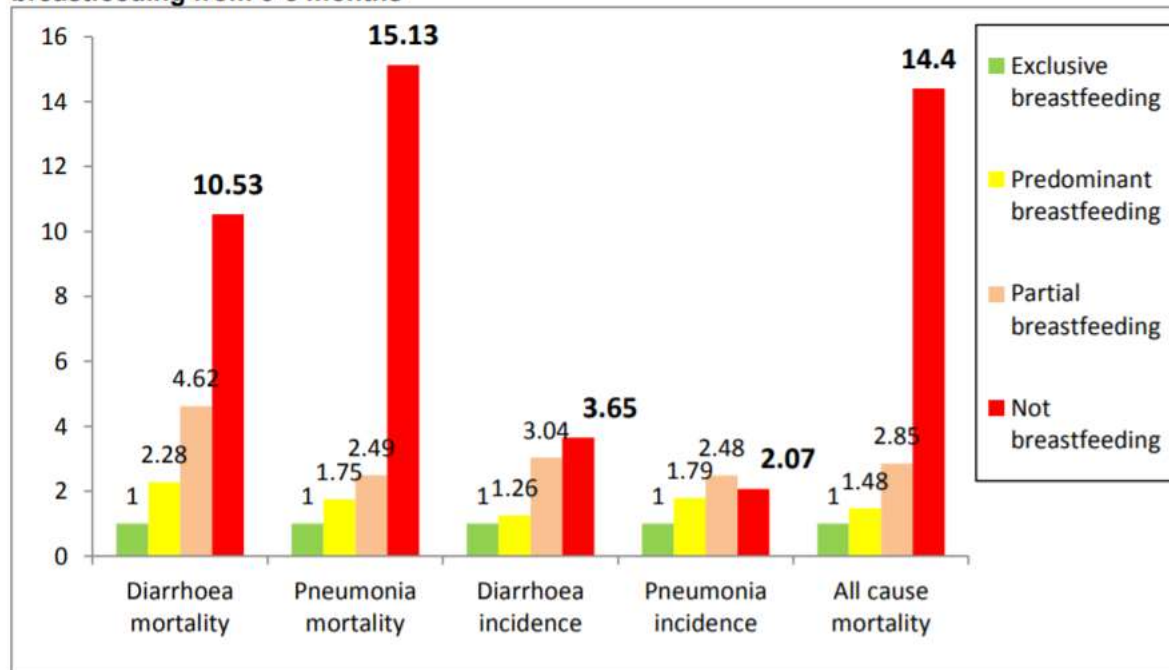


- Infants should be exclusively breastfed for the first six months of life to achieve optimal growth, development and health. Then receive complementary foods while breastfeeding continues for up to two years of age or beyond.
- Breastfeeding is a health imperative
- Nutritional support as a foundation of health

IYCF: Risks to not Breastfeeding



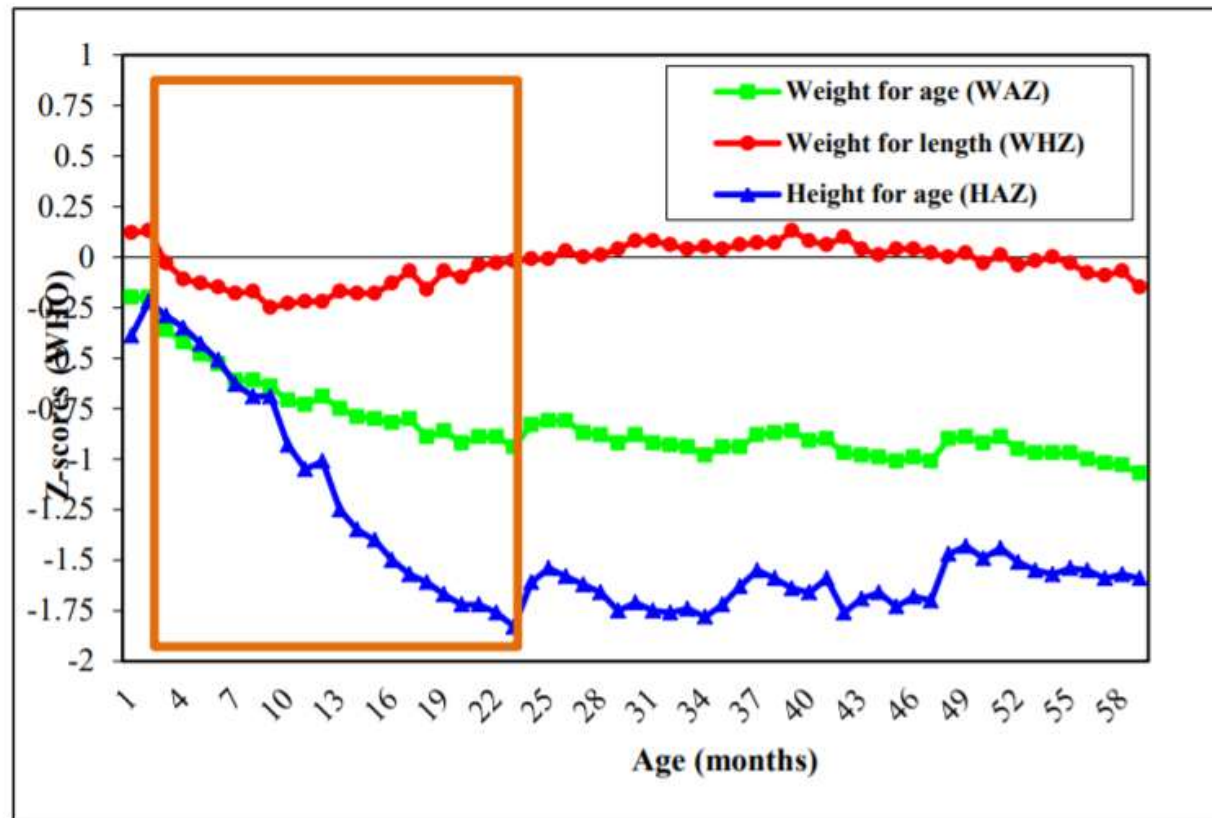
Figure 2: Relative risk of not breastfeeding for infections and mortality compared to exclusive breastfeeding from 0-5 months



Source: Lancet 2008 [3].

UNICEF, 2012

IYCF Crucial to Child Survival



Source: Victora *et al*, *Pediatrics* 2010: showing mean anthropometric Z-scores for weight for age, weight for length and height for age for 54 low and middle income countries, 1994-2007, using WHO standards [56].

Critical Window of Opportunity to Prevent Undernutrition UNICEF, 2012

IYCF-E:

Infant and Young Child Feeding in Emergencies



- Breastfeeding Saves Lives
- “Around the world, infants who are not exclusively breastfed in the first 6 months of life are 14 times more likely to die than exclusively breastfed infants. In complex humanitarian crises the risks of not being breastfed are exacerbated.” (UNICEF)
- Risk of Diarrheal illness increases 5x for infants during crises.
- Emergency conditions increase mortality rates across populations and infants have heightened vulnerability

IYCF-E Guiding Principles



World Health Organization and IFE Core Group

- **Breastfeeding**
 - Factors affecting successful breastfeeding
 - Other breastmilk feeding options
 - Create and sustain environment for breastfeeding to 2 years and beyond
- **Breastmilk Substitutes (BMS)**
 - Control distribution
 - Safe feeding (no bottles and teats)
 - No interference with optimal breastfeeding
- **Complimentary Feeding**
 - Foods for older infants and young children
 - General Food Aid
- **Caring for Caregivers**
 - Increase coping capacity
- **Protecting Children**
 - Allow for optimal health and frequent feeding
- **Malnutrition**
 - Address and prevent malnutrition
 - Special therapeutic feeding for rehabilitation
- **The Acute Phase of Emergencies**
 - Interventions should begin immediately
 - Support caregivers and channel resources appropriately
- **Assessment, Intervention and Monitoring**
 - Flexibility, and continued careful monitoring

International Code of Marketing of Breastmilk Substitutes



- The Code aims to contribute "to the provision of safe and adequate nutrition for infants, by the protection and promotion of breastfeeding, and by ensuring the proper use of breast-milk substitutes, when these are necessary, on the basis of adequate information and through appropriate marketing and distribution"
- NO false/unethical advertising or promotion to the public
- NO free samples to mothers or families
- NO donation of free supplies to the health care system
- Health care system obtains breast milk substitutes through normal procurement channels, not through free or subsidized supplies
- Labels in appropriate language, with specified information and warnings

IYCF-E and Infant Formula Donations



- In accordance with internationally and nationally accepted guidelines and legislation **there should be no donations of breastmilk substitutes (BMS), such as infant formula, powdered or liquid milk or other milk products, and bottles and teats.**

Challenges to IYCF-E



- Non-optimal IYCF: High rates of formula feeding in a population prior to an emergency increase the risk to infants.
- Breastfeeding is often undermined in crisis situations
- Bottles and teats
- Special Circumstances: HIV
- Blanket Formula Distribution
- Lack of training for aid workers
- Lack of communication among aid organizations
- Centralized IYCF-E capabilities
- Compassion Fatigue



Fact vs. Fiction



Misconceptions

- “Stress makes the milk dry up”
- “Malnourished mothers cannot breastfeed”
- “Once breastfeeding has stopped, it cannot be resumed”

Fact

- Stress **may** temporarily affect the milk let down reflex, but usually does not affect milk production. Support and reassurance is most helpful.
- Feed the mother and let her feed her infant.
- Re-lactation is possible in many cases. Hand expression, skin to skin and baby at the breast can help a woman to relactate.



The Dangers of BMS in Emergencies

feeding babies in emergencies what are the dangers?



infant formula

Lack of access to safe and clean water to prepare the infant formula and wash the feeding bottles.

Infant formula itself is not sterile and may be contaminated.

Feeding bottles are hard to sterilize with limited or no available cleaning utensils, water, fuel and other equipments.

Insufficient knowledge on proper use and preparation risks over or under diluting infant formula.

Infant formula does not contain protective properties such as antibodies found in breastmilk.

Poor sanitation increases risk of contamination of infant formula during preparation.

Supplies of infant formula are often not sustainable.

Powdered milk is often used for feeding infants under 6 months, which increases risks for diarrhoea.



breastmilk

No dangers, really.

**Babies aged up to 6 months need only breastmilk.
Exclusively breastfed babies are the healthiest.**

This infographic is supported by World Health Organization
Source: WHO, National Nutrition Council

Past IYCF-E Efforts



Save the Children,
Croatia/Serbia border
(Spring 2015)

Cristchurch, New
Zealand Earthquake
(2011)

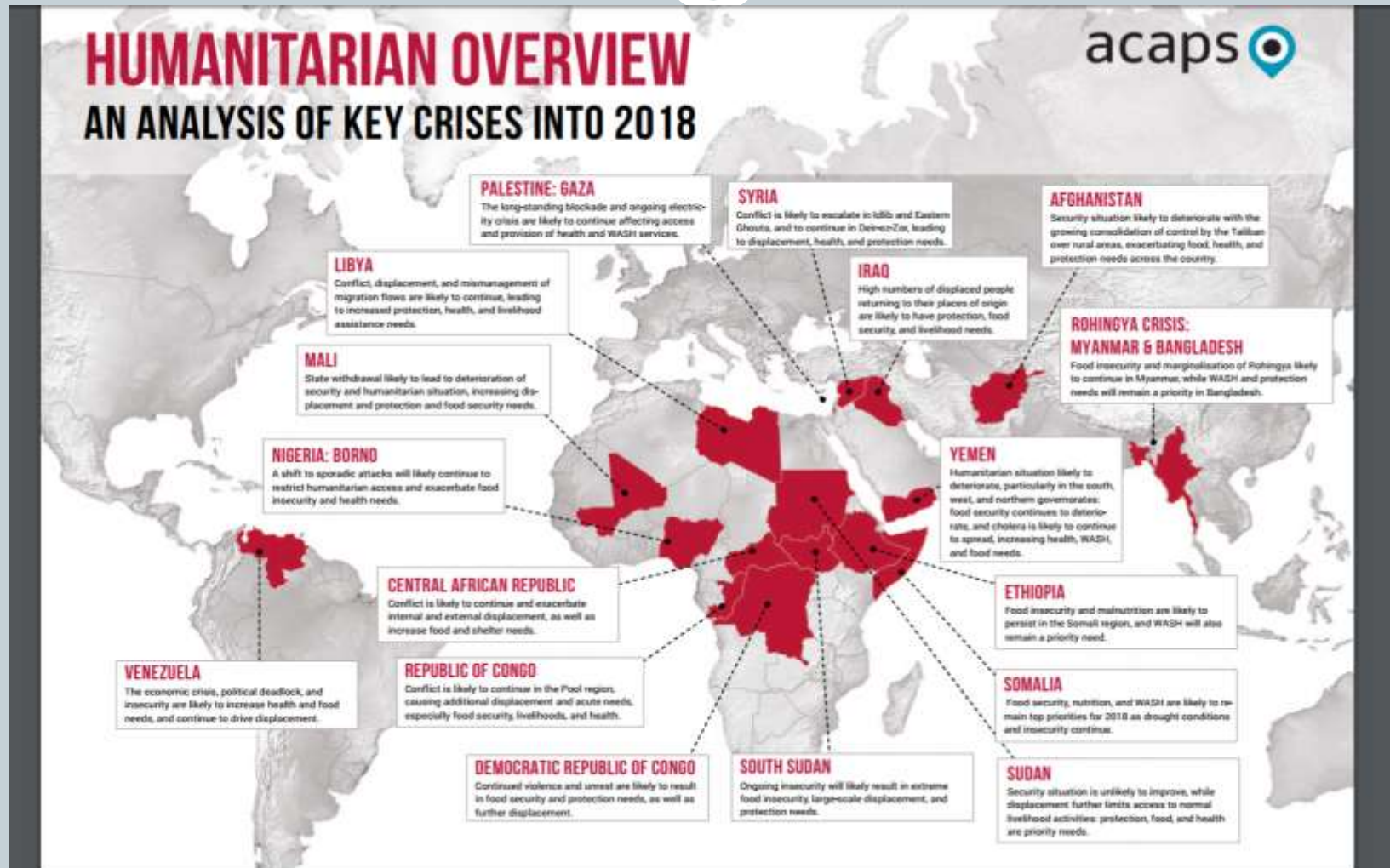
Kurdish Refugee Crisis
Turkey-Iraq Border
(1991)

Botswana Flood (2005-
2006)



Breastfeeding for the Apocalypse
~Illustration by Melanie Lambrick

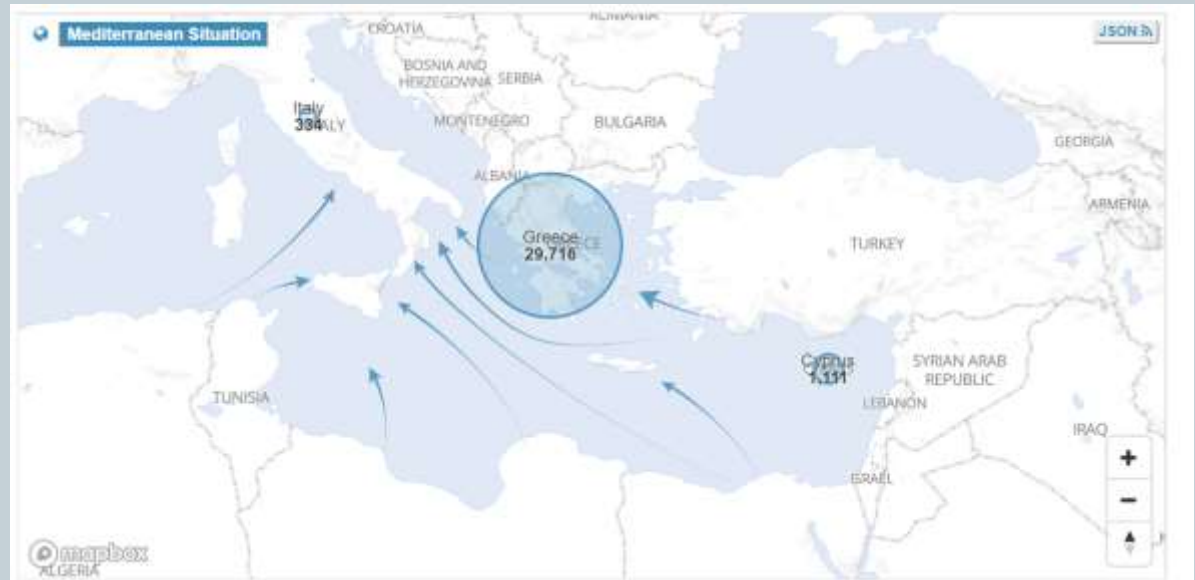
Current IYCF-E Needs



The Syrian Refugee Crisis

IYCF-E in Greece

“The people inside Syria and those displaced may find themselves often in very difficult and unsanitary conditions thus can be at major risk of serious water-borne diseases. Breastfeeding confers critical protection from infection especially where safe water is unavailable and there is poor sanitation. Breastfeeding saves lives.” SafelyFed.org, 2018



Mediterranean Situation, 2017 (UNHCR, unhcr.org)

IYCF-E

Nurture Project International in Greece



- **Brooke Bauer, Founder and CEO**
 - Safe and Supported Motherhood is a Human Right
- **Greece 2016-2017**
- **Current efforts: Bangladesh and Iraq**

“I want everyone to remember these mothers, the ones who are making impossible choices every day and despite horrific situations they continue to strive for the best care for their children...Remember these mothers. Know these mothers. They are not weak. They are strong beyond measure. The time is now to hold space for our fellow woman. To take a step back and say ‘I might not fully understand what is going on here but I will stand back and give you the platform.’ In our work, we are not the saviors that go in with all of the answers. The mothers have the answers. We just hold space for their voice.”

IYCF-E Coordinator In Greece



- Current estimates put the Syrian refugee population in Greece at 60,000.
- More than half are women and children.
- Nurture Project International Spring 2016-Nov 2017
- Home well visits for 25-35 families each week



IYCF-E in Greece



- **Challenges**

- Language barrier
- Cultural barrier
- Urban setting
- Medical care coordination for acute cases of mastitis, thrush, etc.
- Coordination of efforts with other NGOs
- Funding
- Getting Volunteers and training to one standard

- **Triumphs**

- Every mom and baby we helped

IYCF-E in Puerto Rico



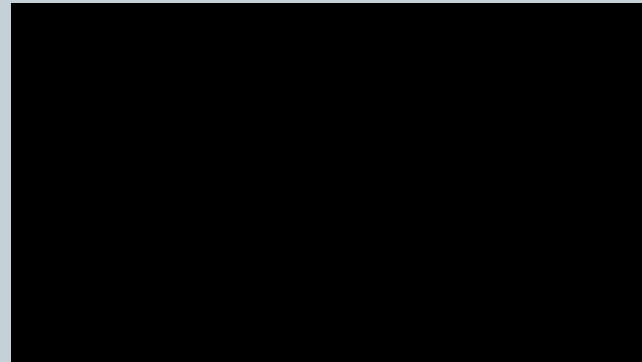
- Emergency Declared Sept 20, 2017: Public Health Infrastructure is severely compromised
- Mutual Aid Disaster Relief
- ARNP, medical technologist, street medic, health educator and lactation counselor, and an International Board Certified Lactation Consultant (IBCLC).





Conditions on the Ground When we arrived in November 2017

- 47.80% have power
- 89.61% have running water (95% in Metro, 79% in North, 84% in West, 92% in South 92% in East)
- 58.18% cell towers are operational



IYCF-E in Puerto Rico



- 400 families served
 - Los Naranjos
 - Sabana
 - El Ojo de Agua
 - Sandin
 - Silo Mision Cristiana Treatment Center
- HIV/AIDS prevention
 - 2000 condoms distributed
- Safe water education
- Mosquito control
- Supply distribution
- General health screening
- IYCF-E



IYCF-E in Puerto Rico



- **Challenges**

- Reaching max families
- Formula expenses for families
- Language barrier
- Not coordinating with ASI

- **Triumphs**

- Those we did reach received prenatal education
- Information to keep breastfeeding was given

“He who was poor before the storm is 1000 times more poor now. And if he wasn’t poor before the storm, he is becoming poorer each day.” Dr. Diana Negron, director of SILO Treatment Center

Current IYCF-E Efforts in Puerto Rico



- Lourdes Santaballa Birth and Postpartum Doula, Holistic Health Coach and IBCLC
- Alimentacion Segura Infantil: Saving Lives through Compassion
 - Founded in October, 2017
 - NGO in Dorado, Puerto Rico
 - Mission: Establish and continue efforts for the safe feeding of infants and small children and train community leaders as specialists in breastfeeding and safe feeding.
 - Trainings are free of charge

“ I want everyone...to remember that what we are currently experiencing in Puerto Rico is occurring in other communities around the world and could someday happen in your own.”

Thousanddays.org, Dec. 2017

How YOU can get involved



- Nurture Project International
- SafelyFed
- Mutual Aid Disaster Relief
- ASI-Alimentacion Segura Infantil
- Save the Children
- Help Refugees



Supporting IYCF in the Community

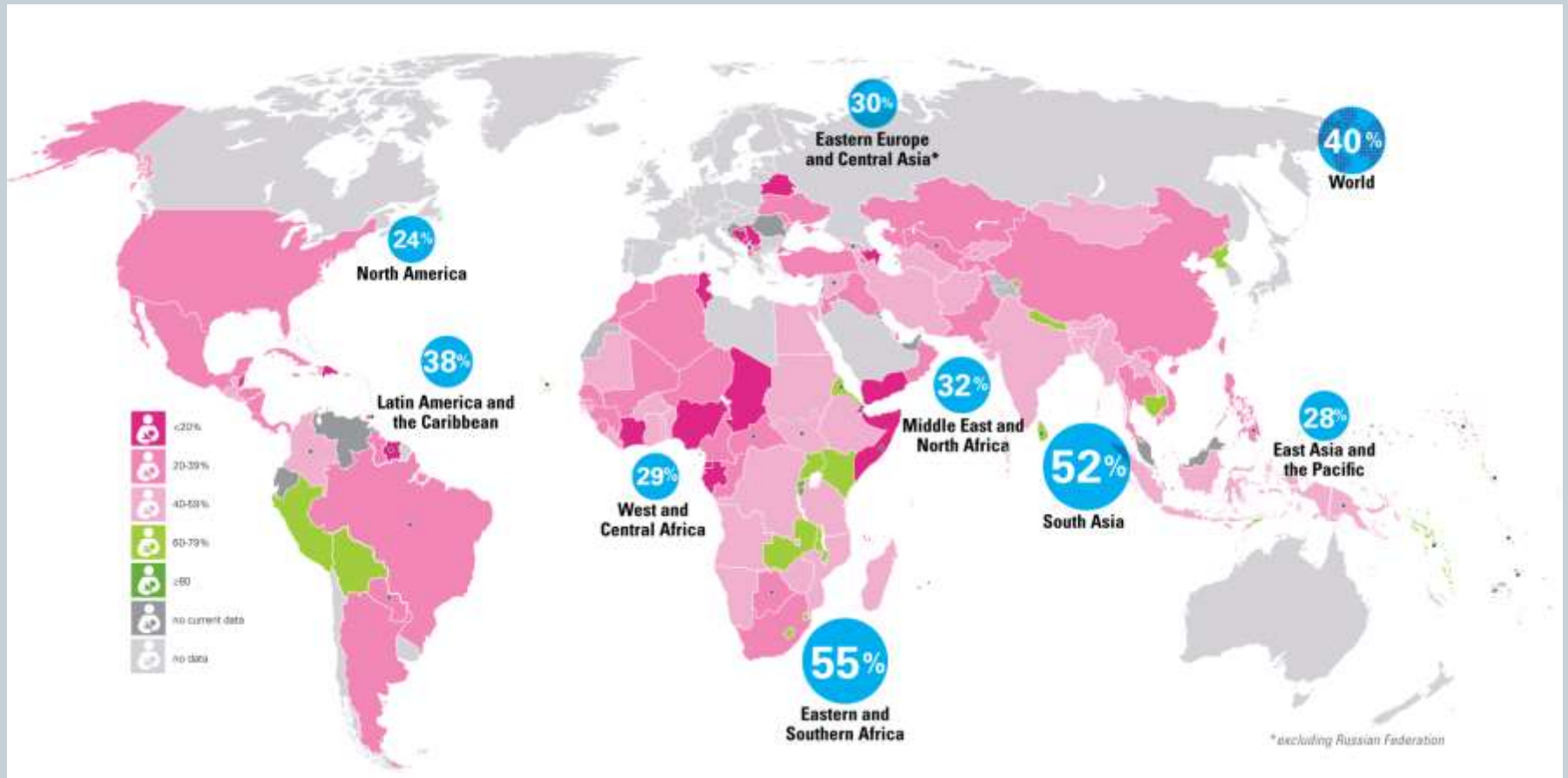
Global



Per cent of children: put to the breast within one hour of birth; exclusively breastfed (0-5 months); introduced to solids (6-8 months), with a minimum meal frequency, minimum diet diversity and minimum acceptable diet (6-23 months) and continued breastfeeding at 1 year (12-15 months) and 2 years (20-23 months), 2017*.

Source: UNICEF global databases, 2017 based on WHO DHS and other nationally representative surveys. Note: Data included in these global packages are the most recent for each country between 2011-2017. *Aggregates for these publications use China, 2006.

IYCF




Optimal Feeding Practices Worldwide UNICEF, 2017

Taking it back to your Community




- **IYCF matters**
 - Preconception education
 - Current C/S rate has negative impact on breastfeeding
 - Minorities face higher infant death rate and have disproportionately higher formula feeding rates and associated health issues
- **IYCF policies**
 - Support, promote and protect breastfeeding
 - Support the mother/caregiver
 - Encourage exclusivity, solids at 6 months and 2 years and beyond
 - Get community key players to adhere to IYCF best practice
 - Support key legislation. US Breastfeeding Committee
 - Support the WHO Code
- **Get involved and stay involved!**

Local Guidance for IYCF-E




Infant Feeding DURING DISASTERS




BREASTFEEDING matters because...

- It can be impacted if stopped for even a short period of time. Breastfeeding cannot be put on hold until the disaster is over.
- It protects infants from the risks of using contaminated water supplies during a disaster.
- It can help protect against respiratory illnesses & diarrhea, which can be fatal to displaced families.
- Breast milk is available at the time without needing other supplies.




Barriers to BREASTFEEDING during a DISASTER




- Lack of lactation support, whether it is a new mother or a mother with a newly-weaned baby.
- Being away from home - displaced or having to relocate.
- Being separated from people who usually support the mother.
- Lack of privacy, security, comfort, dim lights & quiet in emergency shelters.

BREASTFEEDING benefits




Breastfeeding Mothers

- Reduce their risk for:
 - Diarrheal cancer
 - Breast cancer
 - Type 2 Diabetes




Breastfed Infants

- Have a reduced risk of:
 - SIDS
 - Lower respiratory infections
 - Type 2 diabetes
 - Asthma
 - Obesity



Workforce & environmental


- Infants have less illness so mothers miss less work
- Less trash & plastic waste compared to formula & bottle supplies




Communities who promote breastfeeding*

- Could save \$15 billion annually
- Prevent 1,000 deaths per year
- For 60% of women for their babies first 6 months of life

How RESPONDERS can help



- Ensure access to healthcare providers with lactation experience.
- Create safe locations for pregnant & breastfeeding women.
- Assure mothers that breastfeeding can provide sufficient nutrition for babies when other foods aren't available.
- Keep families together.
- Provide water & food for breastfeeding mothers.
- As a last resort, ready to use infant formula in a disposable cup should be the alternative.



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of Human Services Emergency Preparedness & Response

For more information visit
<http://www.acf.hhs.gov/ohsepr>

References:
1. 2011 Surgeon General's Call to Action to Support Breastfeeding. <http://www.surgeongeneral.gov/library/calls/breastfeeding/index.html>
2. American Academy of Pediatrics Infant Feeding During a Disaster. <http://www2.aap.org/breastfeeding/files/pdfs/InfantFeedingDisaster.pdf>
3. La Leche League International. <http://www.llli.org/preparedness.html>

IYCF and IYCF-E as a Cornerstone



- “Accelerating interventions aimed at improving infant and young child feeding (IYCF) at community level is a key priority in the effort to improve survival, growth, and development of children with equity.” UNICEF

Final Thoughts and Resources



- UNHCR-The UN Refugee Agency
- <https://data2.unhcr.org/en/documents/download/60865>
- <https://iycf.spring-nutrition.org/>
- Karleen Gribble
- UNICEF-Global Breastfeeding Advocacy Initiative
 - Capacity building for health workers
 - Global Legislation
 - Stop unethical formula marketing
- WHO



"Children are one third of our population and all of our future."

— Select Panel for the Promotion of Child Health, 1981



Questions?