

Feeding Babies During Emergencies: What should you do?

どうする?! 災害時の 赤ちゃんの栄養



① Milk flow is controlled by hormones, and can be affected by threats of danger - but it resumes again in a safe environment.
Grrr (Imagine if drops of milk helped a predator track down their prey!)

② In times of danger, it is not the time to sit and breastfeed, it is time to escape!

③ In stressful times, milk may not flow easily, but it is still produced by mothers.

④ Worried Mom "I've heard that in emergency situations, stress can make my milk dry up." "And I've seen infant formula being distributed during emergencies..."

⑤ Helpful RISU (squirrel) "That's a common misunderstanding!" "We know that milk will flow again when a mother feels safe."



① RISU "Therefore, it is very important to prepare a safe place for mothers during emergencies." Screen, separate room, tent, private room. A safe environment!

② Mom "But we probably tend to breastfeed our babies less in emergencies or disasters..."

③ FIL: Mechanism to suppress and control milk production "We aren't using milk very much right now. Shall we reduce production?" Prolactin: Hormone to produce milk "I have already made some milk, but should we reduce it for now?" Oxytocin: Hormone to eject milk (Sensitive to stress) "Let's take a break for now..."

④ "If the frequency of breastfeeding decreases or infant formula is added in this situation, the amount of milk produced might decrease."

⑤ "This creates the misconception on that stress stops breastmilk production."

⑥ "Breastmilk contains immune factors that protect babies from infections, especially in the event of emergencies."

⑦ Protection from Norovirus, Salmonella, E. coli, Campylobacter, Rotavirus, Influenza virus



① RISU "Some mothers report that they produce more breastmilk than usual when they breastfeed more frequently."

② One teaspoon of breastmilk contains 3 million germ killing cells! (Infant formula vs breastmilk) Mom "Then I guess I could try to breastfeed more..."

③ (RISU's note: "We are talking about protecting the mother's right to breastfeed, not saying that all mothers must breastfeed.")

④ "Therefore, it is especially important for breastfeeding mothers to have a safe environment that allows them to focus on breastfeeding."

⑤ "Of course, a safe environment is also important for formula feeding babies."

⑥ "Breastmilk can be made even if mom doesn't eat much. But we want moms to get plenty of food for their own health." Mom "I eat and make milk for my baby!"

⑦ "Because breastfeeding can calm babies, and moms need to breastfeed during the night, it's good to have family-friendly spaces."



⑦
“Afterwards, always throw away any leftover milk! Dispose of leftover milk immediately as bacteria will grow!”

⑥
Sit the baby upright on your lap. Choose a quiet place, not too bright! Hold the small cup of milk to the baby's lips. The cup rests lightly on the baby's lower lip, and the edges of the cup touch the baby's upper lip. Tilt the cup so that the milk just reaches the baby's lips. The baby then starts licking the milk. Try practicing at home in case of an emergency.

⑤
RISU “If you don't have a sterilized baby bottle, you can use a cup.”
(A pile of paper cups can easily be stored!)

④
〔Ready-to-feed liquid formula〕 should be stored at room temperature, which falls from 15°C to 25°C. (Refer to manufacturer's instructions.) **Shake well.**

③
〔Powdered formula〕 Mix with hot water above 70°C. (Necessary to kill any bacteria in the powder!!) Cool it to feeding temperature (body temperature). Note – Hypo-allergenic formula is only available in powdered form.

②
Wash hands.
Use a sterilized container.

①
RISU “For those who are feeding infant formula, thorough hygiene management is important!”



⑤
Mom “That will protect both breastfed and formula-fed babies.”

④
RISU “Listen to parents first before giving advice, so that they can continue looking after their children in their own way.”

③
〔International standards〕 WHO's International Code or Operational Guidance on Infant Feeding in Emergencies **ASSESS** the individual needs and distribute infant formula only to those who need it. Do **NOT** distribute infant formula without assessment during disasters. Do **NOT** give samples of infant formula in non-emergency settings.

②
“Everyone should be sympathetic to mothers with babies. Supporters should think of how to help moms look after their children in the same way they did before the emergency.”

①
RISU “Whether you are formula feeding or breastfeeding, you are working hard looking after your children. Even during emergencies, you deserve people's respect for your own feeding methods!”

本資料は、災害時の乳児栄養の国際基準に基づく内容です。詳しくは [IFE 災害時乳幼児栄養](https://jal-net.jp/dl/OpsG_Japanese_Screen.pdf) 検索

comic by エムラナスコ

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This is based on the IFE's Operational Guidelines on Infant Feeding in Emergencies. <https://www.enonline.net/operationalguidance-v3-2017>
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References
American Academy of Pediatrics. Infant Feeding in Disaster and Emergencies, 2015.
American Academy of Pediatrics, American College of Obstetricians and Gynecologists. Breastfeeding Issues During Disasters (AAP/ACOG) in Breast-feeding Handbook for Physicians 2nd ed. p.239-244, 2014.
Gribble KD, Berry NJ. Emergency preparedness for those who care for infants in developed country contexts. Int Breastfeed. J. 6(1):16, 2011.
Gribble K, Fernandes C. Considerations regarding the use of infant formula products in infant and young child feeding in emergencies (IYCF-E) programs. World Nutrition 2018;9(3):261-283.
IFE Core Group. Infant and Young Child Feeding in Emergencies: Operational Guidance for Emergency Relief Staff and Programme Managers, version 3.0, 2017.
Sphere Association. The Sphere Handbook, 2018.
UNHCR, ENN. Infant and Young Child Feeding Practices: Standard Operating Procedures for the Handling of Breastmilk Substitutes (BMS) in Refugee Situations for Children 0 - 23 months, 2015.
WHO. International Code of Marketing of Breast-milk Substitutes, 1981.
WHO, UNICEF. Infant Young Child Feeding Counselling: An Integrated Course, 2006.
Other references are listed at <https://andorisu.jimdo.com/>