

# INFANT FEEDING DURING INFECTIOUS DISEASE OUTBREAKS

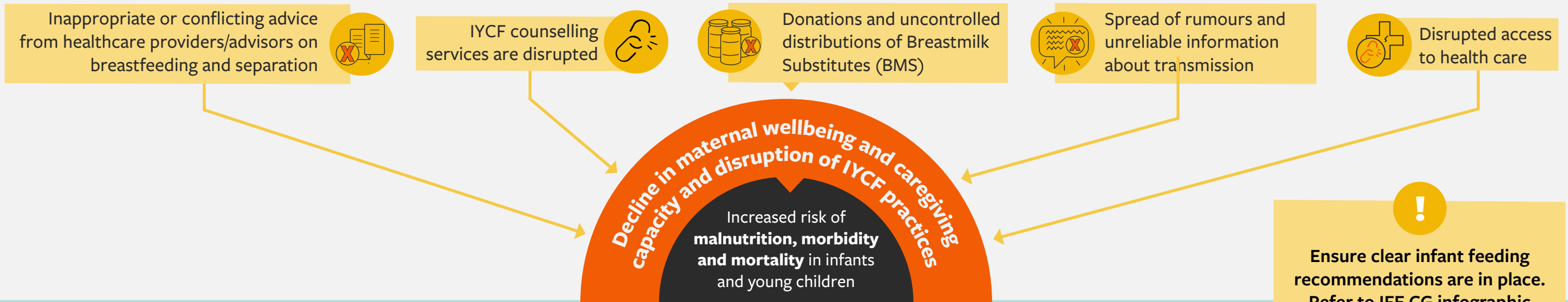
A guide for decision makers and programmers working in emergency preparedness and response

In every emergency – including infectious disease outbreaks – **assess and act** to **protect** the nutrition needs and care of both breastfed and non-breastfed infants and young children

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## Anticipate and assess the impact of the outbreak on Infant and Young Child Feeding (IYCF)

Understand the impact of the outbreak and be aware of the risks for infants and young children



**Ensure clear infant feeding recommendations are in place. Refer to IFE CG infographic on Infant Feeding during Infectious Disease Outbreaks 1: A guide for national health authorities, health and nutrition policymakers, professionals**

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## Take action to mitigate risks

To save lives, appropriate and timely support of IYCF is critical

### All outbreaks

- All actors**
  - Coordinate and collaborate on multi-sector actions
  - Actively avoid any general distributions and donations of breastmilk substitutes, other milk products, bottles and teats
  - Protect, promote and support breastfeeding in the general population
  - Identify infants who are not breastfed and/or dependent on BMS
  - Identify and act to address guidance that conflicts with safe practice
- Nutrition sector**
  - Provide guidance on appropriate IYCF practices during illness and recovery
  - Engage in development of treatment protocols and health communication tools, including messaging on vaccination (if applicable)
  - Strengthen IYCF counsellor competencies - **see box 1**
  - Determine and disseminate disease-specific Infection Prevention Control (IPC) measures for infant feeding (e.g. mask, hand hygiene)
  - Where face-to-face services are disrupted: provide remote IYCF counselling services
- Health sector**
  - Integrate IYCF into case management, vaccination and risk communication protocols
  - Train health workers on IYCF
  - Support maternal mental health and psychosocial wellbeing.
  - Ensure adequate workplace support for breastfeeding health workers (e.g. expression breaks, breastmilk storage facilities)
- Food security**
  - To support treatment and recovery: provide safe, nutritionally adequate complementary foods for children 6 months - 2 years of age and support maternal nutrition
- Child Protection**
  - Prevent sharing of feeding utensils in orphanages, where this is identified as a transmission risk.
  - Coordinate to ensure there is appropriate IYCF support in place for maternal orphans (e.g. small-scale artificial feeding programme)
- WASH**
  - Support hygiene and access to safe water and cooking equipment/facilities for caregivers of children under two years of age.
- Education**
  - Provide Early Childhood Development (ECD) interventions for families with infants and young children

### Outbreaks with guidance to continue breastfeeding

- Health sector**
  - Tackle rumours and unreliable information about breastfeeding and promote how important breastfeeding is to infants
  - Support mothers who wish to restart breastfeeding in order to protect their infant against infectious diseases
  - Make provisions for breastfed infants to stay with hospitalized mothers
  - Provide breastfeeding support to mothers who are incapacitated by severe illness
- Nutrition sector**

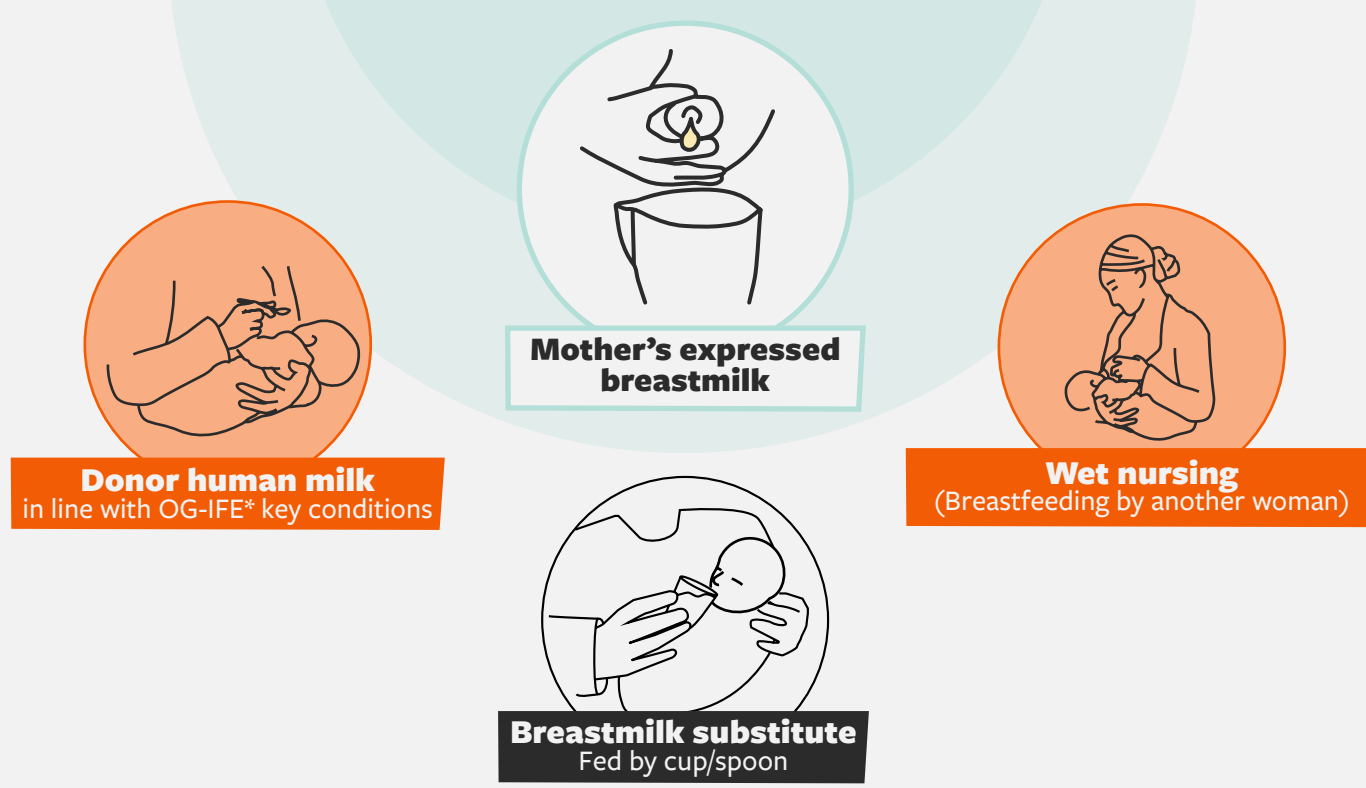
#### BOX 1: IYCF counselling competencies

The following may be especially relevant, in addition to general breastfeeding support:

- Breastmilk expression
- Increasing milk supply
- Relactation
- Rapid cessation of breastfeeding
- Hygienic handling and storage of breastmilk and BMS
- Safe handling and disposal of infectious breastmilk (e.g. Ebola)
- Responsive cup/spoon feeding
- Feeding during illness and recovery

### Outbreaks with guidance to resort to temporary alternatives

- Health sector**
- Nutrition sector**
  - Ensure that counsellors are trained on needed competencies - **see box 1.**
  - Provide practical/logistical support for breastmilk expression (both to provide infant with breastmilk and/or to sustain milk production during separation), storage and transportation
  - Provide emotional support and trauma informed care for caregivers who are feeding during illness, separated (if necessary) or temporarily stopping breastfeeding (if required)
  - Identify at risk mothers and infants for referral to nutrition and health services



- Child Protection**
- Education**
  - Give priority ECD support to separated infants and young children
  - Support sensitive caregiving and attachment upon reunification

Invest in adequate capacity to provide artificial feeding support at scale (e.g. procurement, caregiver counselling and education, monitoring and follow-up, access to health services, etc). For further guidance on BMS management in emergencies, refer to the IFE Core Group infographic on BMS support