

3.7 Preventing and handling donations in emergencies

Key Point 9: Donated (free) or subsidised supplies of breastmilk substitutes (e.g. infant formula) should be avoided. Donations of bottles and teats should be refused in emergency situations. Any well-meant but ill-advised donations of breastmilk substitutes, bottles and teats should be placed under the control of a single designated agency (Section 6).

Donations of BMS and infant feeding items are an identified challenge/constraint in emergencies (see Section 2). There are two important elements to consider: acting to prevent donations, and handling those that do arrive.

3.7.1 Prevention

Preventing donations from arriving means that substantial resources are not needed to manage their arrival. An important element of prevention is emergency preparedness – donations often happen very early in an emergency and there is little time to formulate a new position or policy when a crisis strikes. Development of organisational and governmental positions on donations will encourage clarity to help prevent donations when an emergency occurs. It is important that such positions are communicated within agencies to all sectors (including media, communications, logistics) as well as externally, e.g. to donors and partner agencies.

An example of how policy development has been used to prepare for future emergencies – specifically to try and prevent the arrival of donations of breastmilk substitutes – comes from the Philippines (see Case Study).

Case Study: Example of the Philippine’s National Policy on acceptance and handling donations in emergencies

The Philippines experiences about 20 typhoons annually, a quarter of which cause major damage, as well as floods, landslides, mudslides, earthquakes and volcanoes. These emergencies are usually characterised by large donations and distributions of BMS with little monitoring or control and a lack of breastfeeding support services. This situation has not been helped by a lack of guidelines and clear-cut strategies for managing the flood of donations.

These issues led to the development of a national policy for managing humanitarian aid and strengthening of local capacities to prepare for and manage relief supplies (see details below). This initiative was primarily aimed at increasing public awareness, sustaining public support, promoting breastfeeding practices especially in the evacuation centres/camps, establishing a better relationship with donors, setting standards and procedures on management of donations, and enhancing local capacities in handling donations.

The administrative order (Administrative Order 2007 – 0017 “Guidelines on the Acceptance and Processing of Foreign and Local Donations During Emergency and Disaster Situations) has been disseminated through the media, within the health emergency management system in the Philippines, at donor conferences, IYCF trainings etc and in addition the policy has been sent to the foreign embassies based in the Philippines in order to prevent receipt of foreign donations. It is stated clearly in

the administrative order that "Guidelines for Acceptance: Infant formula, breast-milk substitute, feeding bottles, artificial nipples, and teats shall not be items for donation. No acceptance of donations shall be issued for any of the enumerated items."

Source: Ms. Florinda Panlilio (2008). Philippine Nutrition Cluster's battle for the best: the breast. Field Exchange, Issue No 34, October 2008. p38.
<http://fex.enonline.net/34/philippine.aspx>

Coordinated development of an interagency joint statement that includes agreed positions on donations and its timely dissemination has been found to be especially useful (see earlier) in helping to prevent the arrival of donations. Advocacy with potential donors pre-emergency can be similarly helpful.

Media release by the Logistics Cluster in Myanmar after Cyclone Nargis describing their milk storage and distribution policy

"The Logistics Cluster will not accept milk powder of infant formula into its warehouses or deliver it as cargo with its assets (trucks, boats, planes and helicopters) if it is not part of Nutrition Cluster approved supplementary feeding programmes. This is in line with international policy as agreed among WHO, UNICEF, UNHCR and major NGOs."

Having plans in place to handle any donations that cannot be prevented is needed to protect mothers of both breastfed and non-breastfed infants from the inappropriate distribution and use of these products.

3.7.2 What to do with donations that arrive

If donations arrive they should be collected by a designated agency, preferably from point of entry into the emergency area, under the guidance of the IFE co-ordinating body (as specified in Operational Guidance 6.1.3). This allows any supplies that arrive to be controlled and a plan devised for their use.

Examples of strategies to handle unwanted donations of infant formula and milk products:

- Prepare a fortified blended food for use as complementary food for infants over 6 months.
- In institutional nutrition support, e.g. for the elderly, orphans
- Used in animal feed.
- Use in preparation of biscuits and cakes that can be distributed.
- Destruction.

Although donations may be 'free', handling unwanted donations has a considerable cost - in terms of time, resources, storage and monitoring. Before embarking on using products received, it is important to cost whether the intervention can be justified and funded.

Monitor and report on violations of the International Code amongst donations to the emergency.

3.7.3 Checklist

Some examples of ‘do’s and don’ts’ on donations in emergencies: you can add your own.....

Do’s	Don’ts
Develop and communicate a clear position on donations	Do not solicit or accept donations of BMS, milk products, bottles or teats in emergencies
Monitor and report on International Code violations	Do not ignore violations of the International Code
Have a plan to handle donations that do arrive.	Do not call for donations in the media or press.

3.7.4 Exercises

Quick decision-making in an emergency

You are a government agency and an NGO has submitted a proposal for distribution of baby parcels containing infant formula. **Fund or not to fund?**

Not fund: In accordance with the Operational Guidance on IFE and the International Code, there should be no untargeted distribution of infant formula in an emergency. Infants that do need support for artificial feeding should be identified and given targeted support by skilled agencies.

You are an NGO specialising in shelter and a local or multinational baby food company has offered you 3 tonnes of milk powder. **Accept or not accept?**

Do not accept. Managing milk powder is beyond your remit as a shelter organisation and it is unlikely you will have the skills and capacity to manage it’s use appropriately. You should report the offer of the donation to the IFE coordinating agency so that they are alerted.

You see reports in the paper saying babies are starving in an international emergency affected country/region. Your local community is gathering items to send in convoy, targeting children. Are there any items that you should exclude?

Exclude any foods or fluids marketed for infants and young children or that may be used to feed them. For example, infant formula, milk powder, any canned or tinned milk products, baby foods and teas, bottles and teats.

