



A WORLDWIDE NETWORK OF LACTATION PROFESSIONALS

UPDATED STATEMENT:

January 28, 2010

BREASTFEEDING IS THE FIRST LINE OF DEFENSE IN A DISASTER

The Human Milk Banking Association of North America (HMBANA), United States Breastfeeding Committee (USBC), International Lactation Consultant Association/United States Lactation Consultant Association (ILCA/USLCA), and La Leche League International (LLLI) strongly affirm the importance of breastfeeding in emergency situations, and call on relief workers and health care providers serving victims of disasters to protect, promote, and support mothers to breastfeed their babies. During an emergency, breastfeeding mothers provide their infants with safe food and water and disease protection that maximize their chances of survival.

This week, the International Breast Milk Project and Quick International Courier coordinated a shipment of milk from the HMBANA member banks to supplement a mother's own milk for the premature, medically fragile, and orphaned infants aboard the U.S. Navy ship *Comfort* stationed off the coast of Haiti. This milk will help this small group of infants. In this highly unusual circumstance the infrastructure associated with the *Comfort's* resources allows U.S. sourced donor milk to help fragile Haitian babies.

Donor milk, however, is not a solution for the large number of infants and young children affected by the earthquake in Haiti. Members of the public who wish to promote the survival of mothers and babies in Haiti can donate money to the following organizations: UNICEF, Save the Children Alliance, World Vision, and Action Against Hunger. These organizations are using best practice to aid both breastfed and non-breastfed infants. Members of the public can be confident that donations to these organizations will support breastfeeding and help save the lives of babies.

Interventions to protect infants include supporting mothers to initiate and continue exclusive breastfeeding, relactation for mothers who have ceased breastfeeding, and finding wet nurses for motherless or separated babies. Every effort should be made to minimize the number of infants and young children who do not have access to breastfeeding. Artificially fed infants require intensive support from aid organizations including infant formula, clean water, soap, a stove, fuel, education, and medical support. This is not an easy endeavor. Formula feeding is extremely risky in emergency conditions and artificially fed infants are vulnerable to the biggest killers of children in emergencies: diarrhea and pneumonia.

As stated by UNICEF and WHO, no donations of infant formula or powdered milk should be sent to the Haiti emergency. Such donations are difficult to manage logistically, actively detract from the aid effort, and put infant's lives at risk. Distribution of infant formula should only occur in a strictly controlled manner. Stress does not prevent women from making milk for their babies, and breastfeeding women should not be given any infant formula or powdered milk.

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There are ongoing needs in the U.S. for human milk for premature and other extremely ill infants because of the protection it provides from diseases and infections. If a mother is unable to provide her own milk to her premature or sick infant, donor human milk is often requested from a human milk bank. American mothers can help their compatriots who find themselves in need of breast milk for their sick baby by donating to a milk bank that is a member of the Human Milk Banking Association of North America.

For more information about donating milk to a milk bank, contact HMBANA at www.hmbana.org. Additional information for relief workers and health care professionals can be provided from the United States Breastfeeding Committee at www.usbreastfeeding.org, ILCA/USLCA at www.ilca.org or www.uslca.org, or La Leche League International at www.llli.org. A list of regional milk banks is available on the HMBANA Web site at www.hmbana.org/index/locations.

Sincerely,

Angela Smith, President
ILCA Board of Directors

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