

FAQ SHEET: BREASTFEEDING IS DISASTER READINESS



How does breastfeeding save lives and prevent illness during an emergency?

Breastfeeding protects babies from the risks of a contaminated water supply. Breastfeeding provides protection against respiratory illness and diarrhea -- diseases that can be fatal during a disaster. Breast milk is readily available and provides all the necessary nutrition for babies and young children.

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Do mothers continue to lactate when they are under stress and in difficult circumstances? Yes, mothers continue to lactate in times of physical and emotional stress and breastfeeding releases oxytocin, which is a hormone that can help to produce a calming effect on the mother and baby. Frequent and exclusive breastfeeding helps to ensure that a mother maintains her milk supply and the baby receives adequate nutrition.



Can malnourished women breastfeed?

Yes, malnourished women and women with medical illnesses can breastfeed. It is safer, easier, and less expensive to give the mother more food than to expose the baby to the risks of infant formula.



What do mothers need to breastfeed successfully during an emergency?

Mothers need a safe, clean space to breastfeed. No other supplies are needed to breastfeed.



How can breastfeeding be supported during an emergency?

Responders can provide evidence-based breastfeeding support, encouraging mothers to breastfeed often and exclusively in order to maintain milk supply and provide optimal nutrition to baby during an emergency.



Is infant formula necessary during an emergency?

No, infant formula is not needed in an emergency and undermines breastfeeding success, putting babies and children at severe risk for disease, malnutrition, and death. Donations of infant formula pose a direct health risk as the safety of infant formula cannot be guaranteed during an emergency based on contaminated water supplies and disruptions in the food supply. Breastfeeding mothers need support and education not infant formula during an emergency.





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