

**Join La Leche League International (LLL) and
the World Alliance for Breastfeeding Action
(WABA)
In Celebration of –**

**World Health Day, April 7, 2009:
Save Lives—Make Hospitals Safe
in Emergencies**

This year's World Health Day theme fits well with the WABA World Breastfeeding Week 2009 theme: "Breastfeeding—A Vital Emergency Response. Are You Ready?" Both celebrations acknowledge the ever-present need to be ready for the unexpected: the emergencies that challenge both individual and community. While the connection to breastfeeding in the World Health Day (WHD) theme may not be obvious to everyone, breastfeeding plays a significant role in making hospitals safer in emergencies.

The Problem

According to the World Health Organization (WHO), sponsors of the annual WHD:

World Health Day 2009 focuses on the safety of health facilities and the readiness of health workers who treat those affected by emergencies. Health centers and staff are critical life-lines for vulnerable people in disasters—treating injuries, preventing illnesses and caring for people's health needs.

They are cornerstones for primary health care in communities—meeting everyday needs, such as safe childbirth services, immunizations, and chronic disease care that must continue in emergencies. Often, already fragile health systems are unable to keep functioning through a disaster, with immediate and future public health consequences.¹

The most susceptible to the short- and long-term effects of emergencies, whether natural or man-made, are the children—especially infants totally dependent on adult care. Hospitals must prepare for the special needs of this vulnerable population.

Preparation—Long Before Emergency Strikes

During an emergency situation, hospitals become the central location for dealing with those directly affected by the emergency. However, this role is in addition to their usual role of providing needed health care to the sick and injured, as well as



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providing safe birth centers. Hospitals must stand ready to add to their patient population those critically needing their services. How might breastfeeding be incorporated into emergency planning; to be ready for emergencies?

- *By creating a healthy, resilient population.* Imagine a community in which breastfeeding is the norm. The healthy consequences would reverberate throughout the community, and offer general protection from disease that often accompanies emergency situations. A healthy population spends less time in hospitals, regardless of whether an emergency has occurred.
- *By creating a community network of support.* A community with strong support for breastfeeding has a network of those who are knowledgeable and willing to help: La Leche League Leaders, lactation consultants, non-hospital health workers, workplace lactation centers, and breastfeeding mothers themselves. Breastfeeding success breeds breastfeeding success!
- *By ensuring that all hospital staff are adequately trained in breastfeeding management.* When all hospital staff are adequately trained in the normal course of breastfeeding—its establishment at birth, and its continued support throughout a mother and infant's hospital stay—they are better prepared to handle breastfeeding support in emergency situations. Hospitals also need to ensure that there are those on staff who are specifically trained in helping mothers breastfeed through challenges.

When Emergency Strikes: Breastfeeding as a Means of Promoting Healing in the Hospital Setting

Most emergencies cannot be anticipated or adequately prepared for. Many must be dealt with *in the moment*. What role might breastfeeding support play in the midst of an emergency to ensure hospital safety?

- *Creating a sense of normalcy in the midst of chaos.* Emergencies are chaotic and scary. For the mother who is determined to keep her young child safe from harm, the simple act of breastfeeding can create an oasis of calm—for both mother and child.
- *Providing an always-ready nutritious food source and immunological boost for infants. Breastfeeding is a shield that protects infants in an emergency.* Not only is human milk a convenient food source, it requires no clean water, refrigeration for storage, or water for cleaning containers.
- *Cutting down on extra staff and nursery facilities.* Because breastfed babies need to be with their mothers, the number of staff required to run a hospital nursery are reduced. These staff can then tend to others in critical condition.

Calling on Outside Help

Adding to the internal support that a hospital provides during times of emergency, the community network of breastfeeding support can be called into play. This network, if established *before* the emergency strikes, can provide additional aid in the hospital setting.

La Leche League Leaders, lactation consultants and other community breastfeeding support volunteers can help:

- *By providing emotional and “normal” breastfeeding support.* A new mother in a hospital in the midst of an emergency often needs little more than mother-to-mother support from someone who understands breastfeeding on a personal level.
- *By helping to sort out normal breastfeeding issues from issues arising out of the emergency.* Emergency-driven issues are more likely to

need additional help and support, and a well-trained breastfeeding support volunteer can help triage these issues.

- *By offering breastfeeding as a choice to mothers.* The mother who hadn’t planned to breastfeed before the emergency happened, may—out of choice or necessity—want help to establish lactation.
- *By providing continued support after the emergency or crisis is over.* Mothers who live through crises may require help and encouragement as they re-establish new routines.

Careful attention to infant and young child feeding and support for good practice can save lives. Preserving breastfeeding, in particular, is important not just for the duration of any emergency, but may have lifelong impacts on child health and on women’s future feeding decisions. Every group of people has customs and traditions about feeding infants and young children. It is important to understand these and work with them sensitively while promoting best practice.

--Operational Guidance on Infant and Young Child Feeding in Emergencies²

Author: Melissa Clark Vickers

References:

1. <http://www.who.int/world-health-day/2009/en/index.html>
2. <http://www.ennonline.net/pool/files/ife/ops-guidance-2-1-english-010307.pdf>

Additional Resources: For more information on breastfeeding during emergencies, see:

- <http://worldbreastfeedingweek.org/>
- <http://www.llli.org/emergency.html>
- http://www.ilca.org/files/resources/ilca_publications/InfantFeeding-EmergPP.pdf

For more information, contact:



LLLI at <http://www.llli.org>

WABA at <http://www.waba.org.my/>