International Baby Food Action Network (IBFAN)

71st WHA, 2018

Agenda Item WHO’s work in health emergencies.

As a global network that protects breastfeeding, IBFAN is pleased to comment on this important topic.

Breastfeeding is a lifeline in emergencies. Babies are born with an undeveloped immune system and are at greatest risk of water-related diseases - with diarrhoeal disease the second biggest killer of under-fives.

Despite this, all too often emergency responses are characterized by unsolicited donations of all manner of baby feeding products. Public appeals for funds

IBFAN’s World Breastfeeding Trends Initiative assessment of policies and programmes on Infant feeding during emergencies show that implementation of UN recommendations on this is dismal.

WHO can play a key role in reversing this situation by promoting emergency preparedness protocols that protect breastfeeding and improve food security. The new updated Operational Guidance for Emergency Relief Staff and Programme Managers is designed to give all those working in emergencies concise, practical guidance on appropriate infant and young child feeding and ensure that when breastmilk substitutes are required they are purchased, distributed and used according to the UN’s agreed strict criteria.

Emergencies are prime opportunities for commercial exploitation and the Business of Malnutrition is thriving. While the speedy delivery of products can be essential, over- emphasis on fortified products and quick-fix treatments of malnutrition – often traded globally and containing 25% sugar – can undermine breastfeeding and sustainable, local, bio-diverse foods that are also more culturally appropriate.

We look forward to working with WHO to ensure that families in emergencies have the support and protection they need.

For more information contact:

Patti Rundall, prundall@babymilkaction.org +447786523493 Alessia Bigi alessia.bigi@gifa.org
Elisabeth Sterken: esterken@infactcanada.ca
Breastfeeding provides both food, care and immune support, and protects them from the worst of emergency conditions. Often make this worse – with starving babies shown alongside the myths used by the baby food industry - that women can’t breastfeed because of stress or malnourishment. Rarely do appeals highlight the resilience of breastfeeding or that artificially fed babies face many more risks to survival.