

Appropriate Infant and Young Child Feeding and Caution on the use of Breast Milk Substitutes and Other Milk Products for children under 2 years old after Cyclone Mocha struck on May 2023

The Nutrition Cluster disseminates this message for the response to Cyclone Mocha to protect, promote, and support the feeding and care of infants and young children, their caregivers, especially pregnant, postpartum, and breastfeeding women in Myanmar.

Category 5 Cyclone Mocha made landfall in Rakhine on 14th May at 12:30 pm bringing heavy rainfall, high winds and a strong storm surge. There were significant damage and people affected. The level of damage is quite large, and this increases the humanitarian needs. The rough weather conditions continue in Rakhine, and it has moved to North-West crossing to Magway, Chin and Sagaing regions with a low depression recorded on 15th May 2023 at the Chin-China border. During these known emergencies, the importance of breastfeeding, the increase in morbidity and mortality are more pronounced due to poor access to safe water, poor hygiene practices and access to diverse food.

Exclusive Breastfeeding from birth to 6 months of age:

As per UNICEF and WHO recommendations, mothers should start breastfeeding their infants within one hour of birth and continue breastfeeding exclusively (with no food or liquid other than breast milk, not even water) until six months of age (180 days). Even in normal circumstances, infants who are not breastfed are five times more likely to die from pneumonia and 14 times more likely to die from diarrhoea, than infants who are exclusively breastfed for the first six months. They are also more prone to diarrhoea, pneumonia, malnutrition that may result in death.

Caution on Breast Milk Substitutes' use and donations:

We note that use of infant formula and other powdered milk products without proper assessment of needs, an excessive and inappropriate quantity of milk products for feeding infants and young children can endanger children lives. As per the international Code of Marketing of breastmilk substitute (BMS), the subsequent related WHA resolutions, to breastfeeding infants and Myanmar Order on Marketing of Formulated Food for Infant and Young Children, as well as humanitarian agencies' policies and guidelines, **there should be no donations or general distribution of**

- **The BMS, such as infant formula,**
- **Other milk products such as milk powder**
- **Bottle-fed complementary foods or use in children up to 2 years of age,**
- **Juices, teas represented for use in infants under six months,**
- **Bottles and teats.**

Any unsolicited donations should be directed to the designated coordinating body, Nutrition Cluster. Provision of multiple-micronutrient supplements is a much more appropriate form of assistance than distribution of milk products or unhealthy snacks, foods and drinks that are high in sugar, fat, and salt. Food rations under general food distribution should include protein sources (pulses, meat, fish, eggs) and fresh fruits and vegetables as much as possible and **avoid powdered milk products or packaged, processed foods.**

Management of non-breastfed children:

Breastfeeding is the safest way to feed an infant, especially during an emergency. However, a small proportion of emergency-affected infants will not be breastfed. In this situation, management of non-breastfed children is very important. The best available feeding options for these children are re-lactation or wet nursing or donor human milk. If these safer options are not available, as a last resort, infant formula accompanied by an essential package of support will be provided as lifesaving. The

targeted and eligible children will be decided by the assessment done by qualified health/nutrition staff trained on IYCF-E as a case-by-case basis and the intervention must be managed by these staff. When each child to use BMS must inform the UNICEF focal in the state for quality monitoring purpose and UNICEF will provide these supplies.

We strongly urge authorities, partners, and community leaders to avoid unnecessary illness and possibly death, following uncontrolled distribution of BMS and to prioritize protection of exclusive breastfeeding as part of emergency preparedness and response. We call on authorities and partners to commit the necessary financial and human resources for proper and timely implementation of safe IYCF during this critical time.