

Policy on the use and distribution of powdered infant formula milk

The conflict in Syria has seen children suffer greatly. One Nation recognises that mothers in Syria find it very difficult for provide for their children. Keeping this in mind One Nation regularly distributes baby milk powder to families that need them.

One Nation realises the significant importance of breastfeeding in the health and wellbeing of infants and is cautious of the need to ensure that supplying infant formula does not undermine the health benefits of breastfeeding. One Nation is also mindful of the position of the United Nations and the World Health Organisation on infant feeding in refugee settings, the international conventions on breastfeeding, and the International Code of Marketing of Breast-milk Substitutes (Geneva, WHO, 1981).

Due to the current crisis in Syria breastfeeding is no longer a viable option. There is now a growing need for outside agencies to help in the supply of formula milk in Syria, predominantly because of a shortage of available formula milk and because of the absence of external aid agencies with experience in supplying infant feeds.

One Nation acknowledges that breastfeeding is an unequalled way of providing complete hygienic food for the healthy growth and development of infants, and forms a unique biological and emotional basis for the health of both mother and child.

This document aims to guide aid workers and their partner agencies about how to source, distribute and handle infant formula milk in Syria. The aim is to ensure this is done in line with international standards whilst maintaining a flexible and pragmatic approach in accordance with the developing security situation in Syria.

Summary of the health hazards associated with the use of powdered infant formula milk products in refugee settings

Adapted from: UNHCR policy related to the acceptance, distribution, and use of milk products in refugee setting. UNHCR 2006 http://www.ibfan.org/art/367-1.pdf

Powdered infant formula has been associated with illness and death in infants due to infections. This is because it is not feasible to produce sterile infant formula using current manufacturing technology. Incorrect preparation and handling of infant formula can exacerbate the problem.

Although infant formula can cause illness in all age groups, infants (children <1 year) are at most risk with pre-term babies and infants under two months at greatest risk. Other groups of infants are also at risk including low-birth-weight (<2.5 kg) infants and immunocompromised infants.



Insufficient water means that containers and utensils used for mixing milk are often dirty, thus making secondary contamination highly probable. Infant formula milk reconstituted with contaminated water is an ideal medium for breeding harmful bacteria.

Feeding children over-diluted milk as their main source of food will lead to inadequate dietary intake and contribute to malnutrition. On the other hand, children who are fed under-diluted or concentrated milk can become seriously ill due to dangerously high concentrations of sodium and protein; renal failure and death can result.

Different brands and types of infant formula carry different mixing instructions, which are rarely included on packaging in a language that is appropriate to refugee settings. In addition to this, feeding requires bottles and teats which are difficult to keep clean and their use significantly increases the risk of diarrhoea, dehydration and malnutrition.

The need for powdered infant formula in Syria

The Syrian conflict is leading to a widespread shortage of animal milk and powdered infant formula milk. This is leading to a rising incidence of nutrition-related developmental problems in infants. This is particularly a problem faced by internally displaced people who are living in besieged areas within Syria beyond the reach of international aid agencies.

There is a growing need for outside agencies like One Nation to help in the supply of formula milk in Syria.

Some of the circumstances giving rise to the increased demand for formula milk include,

- A significant shortage or complete absence of commercially available powdered infant formula in many parts of Syria, particularly in opposition-held areas.
 Furthermore, the high cost of any available infant formula is making it prohibitively expensive for many people
- Mothers who have already made an informed choice not to breastfeed now have babies dependant on formula milk but are no longer able to access the milk to feed them
- Non-milk substitutes, including herbal drinks, tea and sugar-water, are being used to feed babies and infants exacerbating the problems of malnutrition
- Many babies and infants who have lost their mothers in the conflict are being cared for by relatives and friends where breast-feeding is impossible
- The ongoing physical and psychological trauma experienced by some mothers is adversely affecting their ability to lactate. The absence of skilled breastfeeding support workers in Syria, due to the ongoing security situation, means there is no support to help them breastfeed
- The general shortages in nutritious food are causing some mothers to delay ageappropriate weaning thus prolonging the reliance on animal and powdered infant formula milk



 Shortages of electricity and access to cold storage facilities are making it hard for families to purchase and safely store animal milk

One Nations Statement

- One Nation will encourage breastfeeding in the refugee camps inside Syria, and to other internally displaced people in safer and more accessible parts of Syria
- One Nation will only support the provision of infant formula suitable for children up to the age of six months and will ensure that written instructions on its proper reconstitution are available for caregivers in Arabic
- One Nation will accept, source and distribute milk products only when received in a dry form
- One Nation will provide healthcare staff with guidance explaining when breast-milk substitutes may be appropriate and how to ensure safe preparation
- One Nation will provide partner agencies with guidelines to ensure the targeted distribution of infant formula
- One Nation will discourage the use of infant feeding bottles and teats. In any instance where an infant or young child is not breastfed, cup feeding will be encouraged.
- Infant formula will be selected based on the needs of the infant.

Guidelines for use of powdered infant formula in hospital settings and Guidelines for partner agencies

- Infant formula should be selected based on the medical needs of the infant
- Where available, use commercially sterile liquid infant formula for infants at greatest risk.
- One Nation advises that the distribution of powdered infant formula be monitored.
- One Nation advises all hospital settings and partners that the personnel preparing powdered formula should be fully trained per the guidelines and be told about hygiene requirements for food preparation.
- There should be a clean dedicated area for preparation and storage of PIF
- It is very important that all equipment used for feeding infants and for preparing feeds has been thoroughly cleaned and sterilized before use.
- Hands should always be washed thoroughly with soap and water before cleaning and sterilizing feeding and preparation equipment. In care settings, a dedicated handwashing sink is recommended.
- Cleaning: wash feeding and preparation equipment (e.g. cups, bottles, teats and spoons) thoroughly in hot soapy water. Where feeding bottles are used, clean bottle



- and teat brushes should be used to scrub inside and outside of bottles and teats to ensure that all remaining feed is removed
- After washing feeding and preparation equipment, rinse thoroughly in safe water
- Sterilizing: if using a commercial sterilizer, follow manufacturer's instructions. Feeding and preparation equipment can also be sterilized by boiling
- Hands should be washed thoroughly with soap and water before removing feeding and preparation equipment from a sterilizer or pan. The use of sterilized forceps for handling sterilized feeding and preparation equipment is recommended
- Clean and disinfect a surface on which to prepare the feed.
- Wash hands with soap and water, and dry using a clean cloth or a single-use napkin
- Cool feeds quickly to feeding temperature by holding under a running tap, or placing
 in a container of cold water or iced water. Ensure that the level of the cooling water
 is below the top of the feeding cup or the lid of the bottle.
- Because very hot water has been used to prepare the feed, it is essential that the feeding temperature is checked before feeding to avoid scalding the infant's mouth.
- Discard any feed that has not been consumed within two hours from preparation (unless refrigerated).
- Prepared feeds can be held in the refrigerator (≤5 °C) for up to 24 hours.