For Immediate Release  
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The National Association of Professional and Peer Lactation Supporters of Color  
Statement on Infant Feeding During Disasters

The National Association of Professional and Peer Lactation Supporters of Color (NAPPLSC) asserts the importance of promoting, protecting and supporting breastfeeding/chestfeeding, access to human milk, and safe formula feeding during emergencies. Emergencies – whether caused by conflict or natural disasters – are extraordinary events that can jeopardize the health and survival of large populations. Children are among the most vulnerable groups during emergencies, and small children are the most vulnerable of all, as they face a triple risk of death from diarrhoeal disease, pneumonia and undernutrition (Chan, 2009). Supporting all individuals, families and communities to continue to exclusively breastfeed/chestfeed or gain access to human donor milk is essential. Especially, for our most vulnerable and oppressed populations: communities of color. When human milk is not available, single use, ready-to-feed formula is the next best option.

Research shows that disasters have been known to disproportionately affect communities of color. Coupled with their baseline factors of social determinants of health, the aftermath of a natural disaster cause subsequent short and long term health outcomes in these communities including death. For example, when Hurricane Katrina, hit the gulf coast of Louisiana, Alabama and Mississippi in August 2005; the city of New Orleans, Louisiana’s population was 67% Black with 30% already living in poverty- took the hardest hit. 51% of deaths resulting from Hurricane Katrina were the lives of blacks. Likewise, the mortality rate among Blacks was 1.7 to 4 times higher than among Whites for those 18 years of age and older (Brunkard, Namulanda & Ratard, 2008). Katrina, to date, is one of the top 10 costliest Atlantic hurricanes, leaving many communities homeless, as more than 800,000 housing units were destroyed or damaged in the storm; and more than one million individuals displaced from their homes and communities. (FEMA, 2017). The continued structural and institutional barriers causes communities of color to be more vulnerable during disasters as they may not be able to evacuate or seek shelter due the lack of resources. For example, of the 500,000 New Orleans’ residents, 112,000 did not have access to personal transportation to evacuate their homes and communities (Brunkard, Namulanda and Ratard, 2008). This includes those communities with undocumented immigrants (and families of mixed status) who are often faced with the choice to seek help and shelter or stay in their homes to avoid the risk of being detained or deported. Because of the lack of resources from the federal and local government these communities live in neighborhoods that are often times without the infrastructure to withstand environmental hardships such as flooding.
Adequate response of food and clean water provisions, healthcare, etc. are often delayed and or unorganized further decreasing the positive impact that these necessary interventions could have on the communities. These already vulnerable areas are more susceptible to risk of exposure to toxic pollutants and unsanitary conditions and more. The harsh reality of the barriers faced in communities of color are indeed profound. To this end, as we disseminate resources, supplies and support, it is vital that organizations and volunteers give culturally relevant care and support to all families. Because of this, NAPPLSC reinforces the importance of quality support, education and practice around providing human milk to all infants when available either directly from the mother or donated. In the event that human milk is not available the next best source of nutrition in a disaster is to provide ready-made formula to an infant in the event that clean water is not available. With the danger of separation between mother and infant, lack of resources such as clean water and lack of knowledge of the community about how to safely feed an infant at this time it will take all supporters across the field and health and community sectors to help provide quality care and guidance.

Research has revealed that during emergencies the most vulnerable populations impacted are communities of color. In addition, communities of color face unique systemic barriers set up which implicitly renders our communities susceptible. Moreover, the negative long term effect on communities of color ultimately recycles systematic forms of oppression. We stand in solidarity with our communities being impacted by disasters, such as Hurricane Harvey and Irma. It is imperative that all lactation support providers come together to support families during this vital time. Furthermore, NAPPLSC believes any and all resources to breastfeeding/chestfeeding families should provide an equity lens and center culturally-relevant and culturally-sensitive lactation care. NAPPLSC will continue to encourage, protect and support safe infant feeding and cultivate healthy communities of color!

As an additional resource on how to support families during a natural disaster please read the International Lactation Consultant Association’s Position Paper on “Infant and Young Child Feeding in Emergencies”.

_This Statement has been endorsed by:_

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References:


