



9 Is it advisable for a mother with confirmed/suspected COVID-19 or any other respiratory infections who is breastfeeding, to give a 'top-up' with infant formula milk?

- No. If a mother is breastfeeding, there is no need to provide a 'top-up' with an infant formula milk.
- Giving a 'top-up' will reduce the amount of breastmilk produced by a mother.
- Mothers who are worried about not having enough breastmilk should:
 - Make sure that their baby is positioned and attached effectively on the breast.
 - Seek additional practical help from a health worker or a lactation consultant to ensure that their baby is attached efficiently.

- Respond to their infants' hunger and feeding cues and breastfeed their baby as much as the baby wants.

10 Are health facilities or other organizations allowed to accept free supplies of formula milk for infants to distribute to mothers during disaster / emergency situations like in the context of the COVID-19 pandemic?

- No. Donations of infant formula should not be sought or accepted. If needed, supplies should be purchased based on assessed need through the normal procurement systems.
- Acceptance of donated formula is a violation of the Regulations Relating to Foodstuffs for Infants and Young Children (R991).
- Acceptance of donations can undermine breastfeeding.
- In the long run, mothers and their infants become dependent on breastmilk substitutes and may not be able to afford to purchase them once the donations stop. Mothers/care givers then over dilute infant formula or using inappropriate alternatives which can be dangerous and lead to malnutrition.

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What you need to know about breastfeeding and COVID -19: "For mothers, pregnant women & health workers"

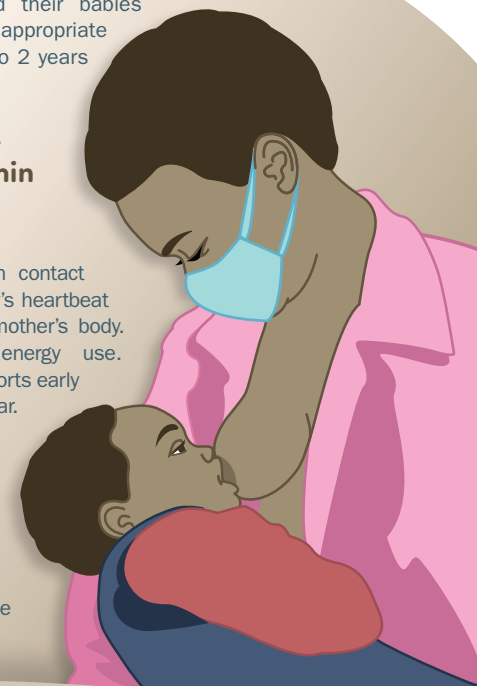
1 Why is breastfeeding important during emergencies like COVID-19 pandemic?

Breastfeeding is the best way to provide your baby with optimal nutrition, and to protect your baby from illness. Breastfeeding strengthens the baby's immune system by directly transferring antibodies from the mother. Mothers should breastfeed their babies exclusively for 6 months and thereafter provide them with appropriate complementary foods, with continued breastfeeding for up to 2 years of age or beyond.

2 Why should a baby still be placed skin-to-skin immediately and breastfed within the first hour after birth – even in emergencies?

There are many benefits of skin-to-skin contact. Skin-to-skin contact calms the mother and the baby and helps to stabilize the baby's heartbeat and breathing. It keeps the baby warm with heat from the mother's body. It reduces infant crying, thus reducing stress and energy use. It facilitates bonding between the mother and her baby and supports early initiation of breastfeeding thus normalizing the baby's blood sugar.

- Immediate and continued skin-to-skin care, including kangaroo mother care, and keeping the baby warm, is linked with fewer newborn deaths.
- Placing the newborn close to the mother also enables early initiation of breastfeeding which helps the baby receive colostrum, which is protective against illness, UNLESS if the newborn or the mother is too ill to practice skin-to-skin contact.





3 Should a mother breastfeed if she is confirmed or suspected to have COVID-19?

- Yes, the immune protection for the baby is important and this means if the mother is well she should be encouraged and supported to breastfeed, while practicing appropriate infection prevention measures. There is no evidence that COVID-19 is transmitted through breastfeeding, or in breastmilk expressed by the baby's own mother and given to her baby.
- If the mother is confirmed to have COVID-19, she should still continue to breastfeed. If she is unwell and unable to breastfeed, then she should be encouraged to express breastmilk and ask a caregiver who is well to feed her express milk to the baby.

4 What if the mother is ill?

- If the mother is confirmed/suspected to have COVID-19 and is very ill and unable to directly breastfeed, she should be supported to express breastmilk if possible. Expressing breastmilk is also important to sustain breastmilk production so that mothers can breastfeed when they recover.

Hand expressing is the safest option. The expressed breastmilk should be fed to the baby preferably using a clean cup by a caregiver who are healthy and practicing appropriate hygiene measures.

5 Can COVID-19 be passed through breastfeeding?

- Given the current scientific evidence, the COVID-19 virus has not been found in breastmilk. Therefore, it appears unlikely, that COVID-19 would be transmitted through breastfeeding or by giving breastmilk that has been expressed from a mother who is confirmed/ suspected to have COVID-19.
- Breastfeeding is recommended for all mothers including mothers suspected/ confirmed to have COVID-19.

6 What are the hygiene recommendations for a breastfeeding mother confirmed or suspected of having COVID-19 or any other infectious respiratory diseases that may be transmitted through coughing or sneezing?

A mother should:

- Regularly clean and disinfect surfaces.
- Wash hands frequently with soap and running water for 20 seconds or use alcohol-based hand sanitizer, especially before touching the baby. Always wash hands before and after breastfeeding your baby.
- Wear a cloth mask or scarf that covers your mouth and nose while feeding. It is important to:
 - Avoid touching the mask while the baby is breastfeeding or when spending time with your baby
 - Ensure that you do not touch the inner side of the mask.

- After each use, cloth masks should be washed with soap and water and ironed when dry
- Replace masks as soon as they become damp from breathing.
- Do not touch the front of the mask but untie it from behind.

- Follow good respiratory hygiene: cough or sneeze into your bent elbow covering your mouth and nose, or into a tissue which you must then straight away, throw into a closed container and wash your hands again with soap for 20 seconds or use alcohol-based hand rub.
- Regularly clean and disinfect surfaces within your home.
- For women expressing breastmilk, wash hands before expressing. Breast pumps or cups if used should not be shared between mothers. Follow recommendations for breast pump cleaning after each use. Consider asking someone who is well to feed expressed milk to the baby (mother can decant milk from her container into a clean container held by a healthy person to prevent transmission via the containers surface).

7 Is it necessary for a mother with confirmed or suspected COVID-19 or any other respiratory infections to wash her breast before she breastfeeds or before expressing milk?

- It is not necessary to wash the breast before every breastfeed or prior to expressing milk.



8 If a mother confirmed or suspected to have COVID-19 is not able to breastfeed due to other reasons, what is the best alternative way to feed her infant?

- The best alternatives to breastfeeding for a newborn or young infant are expressed breastmilk or donated human milk.
- The risks associated with giving infant formula milk apply to situations where:
 - There is poor or limited access to health services if a baby becomes unwell.
 - There is poor access to clean water.
 - Access to supplies of infant formula are difficult or not guaranteed, not affordable and not sustainable.
- If expressing breastmilk, the extra basic measures that can be followed includes:
 - Hand washing for at least 20 seconds beforehand expression.
 - Wear a mask while expressing breastmilk directly into a clean feeding cup or clean storage container.
 - Ensuring that milk storage containers, feeding utensils and breastmilk pumps if used are appropriately washed after each use with dish washing liquid and warm water. Rinse after with hot water for 10-15 seconds. Breast pumps should not be shared between mothers.

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