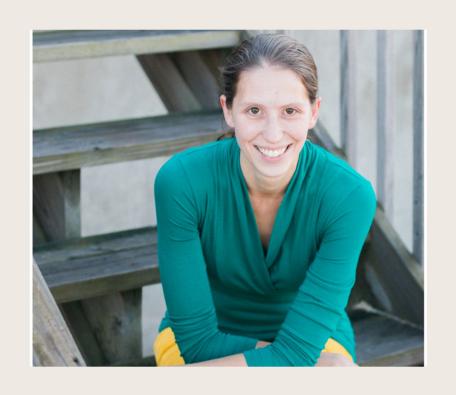


# From Response to Resilience:

The North Carolina
Breastfeeding Coalition's
Journey in SAFE Infant and
Young Child Feeding
Post-Hurricane Helene

Rachel Fann, MS, CCC-SLP, CLC Ashley Mickelson, MS, NLP, CCC-SLP, IBCLC

## Disclosures:



Rachel Fann, MS, CCC-SLP, CLC

- Previously employed by Breastfeeding Family Friendly Communities
- May receive honoraria for presenting
- Currently on the board of NCBfC SAFE Team



Ashley Mickelson, MS, NLP, CCC-SLP, IBCLC

- Previously employed by Breastfeeding Family Friendly Communities
- May receive honoraria for presenting
- Currently on the board of NCBfC SAFE Team



# Background



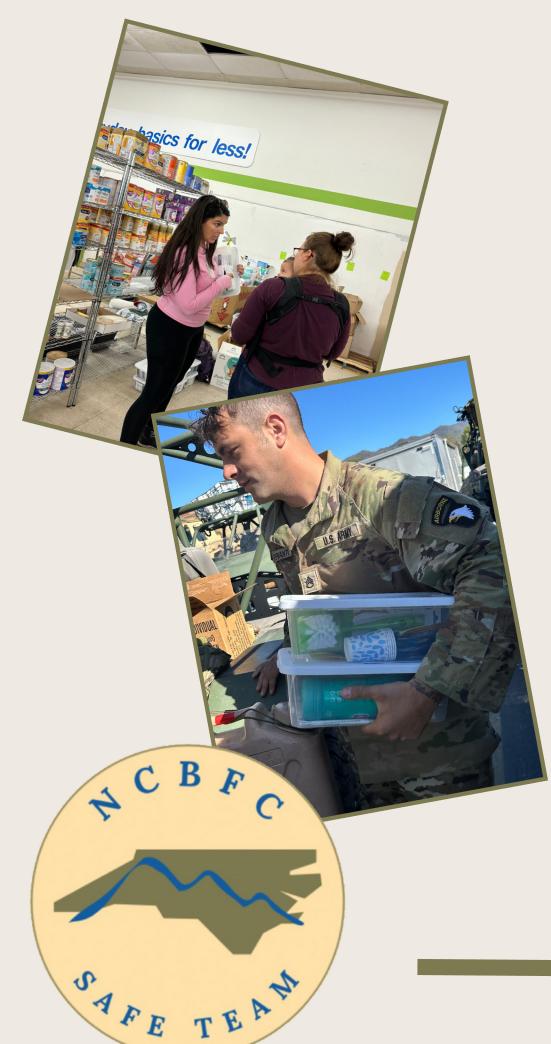
Jayne Carpenter and Brandi Harrison, the two WNC IBCLCs that put out the call for help in the immediate afternath of Hurricane Helene.

- Formed in the wake of Hurricane Helene 09/27/24
- Infants and children most vulnerable population
- Families with infants face significant and disproportionate challenges in accessing safe nutrition during disasters, heightened by infrastructure instability.
- "Nearly 95% of infant and child deaths in emergencies result from diarrhea due to contaminated water and an unsanitary environment" (USBC)



# Objectives

- Support and Advocacy for Feeding in Emergencies (SAFE)
- address critical gaps in disaster management
- evidence based assessment
- trauma-informed care
- mitigate risks
- boots on ground direct services
- building disaster-networks centered around infant feeding education and care



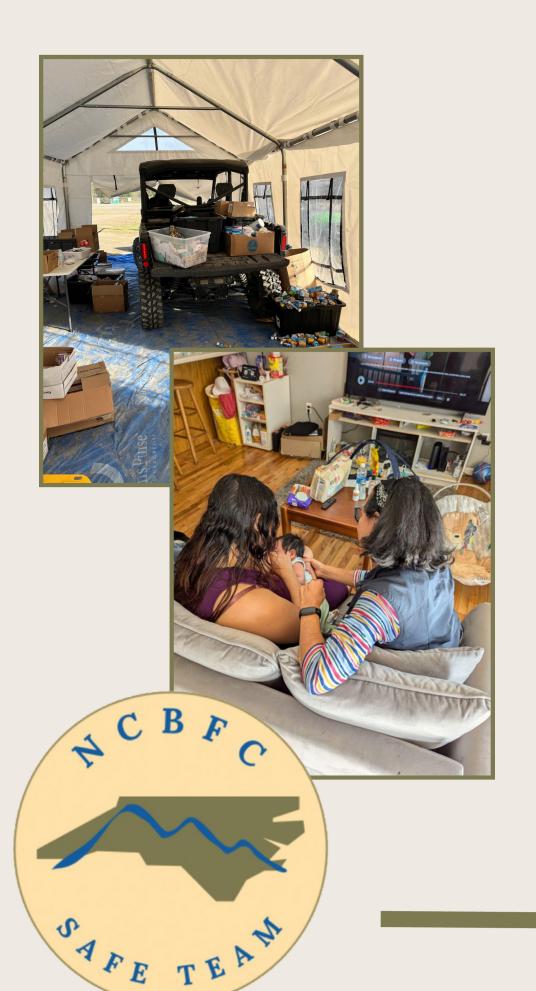
## Methods

- SAFE formed through NCBfC; address unmet, critical infant and young child feeding needs
- SAFE responded by mobilizing trained infant feeding specialists
- Mitigated risks by incorporating real-time, evidencebased training and feeding protocols:
  - CDC Infant and Young Child Feeding in Emergencies (IYCF-E) Toolkit
  - CDC Rapid Needs Assessments (RNA)
- Created and distributed infant feeding sanitation kit
- Mitigated risks by facilitating informed milk sharing

# Results

Results were very two-fold: There was the immediate impact in the WNC area as well as the ongoing ripple effects across the nation.



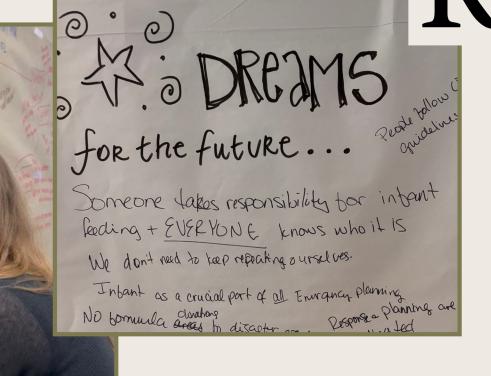


#### Results

#### In WNC over 6 months of operation:

- Provided services to over 300 organizations across seven NC counties and the Eastern Band of Cherokee Indians
- Distributed 7000+ sanitation kits for feeding supplies
- Conducted 5000+ rapid needs assessments
- Trained 500+ emergency and perinatal personnel
- Directly supported approximately 260 individual feeding visits
- Shared countless infant carriers, ensuring that families remain close and warm

Results



#### Ongoing across the US:

- Countless Presentations to Professional organizations
- 11-month, 16.5 hour IYCF-E training
- Meetings to support disaster response planning or preparedness with specific organizations in:
  - Florida

Virginia

California

Central NC

- Texas
- SAFE Support and Strategic Core (S3C)



## Conclusions

- IYCF-E remains a vital, yet often overlooked segment of emergency preparedness and response.
- When no one is in charge, EVERYONE is.
- Infant feeding specialists and perinatal health professionals are optimally suited to ensure implementation of IYCF-E best practices.
- The SAFE Team continues actively working to elevate IYCF-E through local, state, and national policy

