CIF-RIG Meeting Questions & Answers from Panelists
2/5/21

On behalf of the panelists, collated answers from the Zoom chat and participants’ questions follow.

- **Q1**: What is the impact of COVID on milk donations in low and middle income countries?
  - Sadly not ubiquitous across the world - Brazil for example had a huge decrease in donations and needed a governmentally supported recruitment media campaign.
  - There have clearly been difficulties in maintaining donor milk stock levels in India as highlighted by Dr Sushma in her presentation. We can also ask further with a question posed to the GAMBA group that would elicit information from LMICs on this - please reach out to Kimberly Mansen kamundson@path.org if this would be helpful.

- **Q2**: Given the inequities and barriers related to access to donor human milk in the US experienced by Black, Indigenous, People of Color (BIPOC) communities; are there demographic data available on the milk donors and recipients? (okay to expand this beyond US and to any equity issues in the countries that you come from):
  - HMBANA has just concluded an internal survey of our 30 member milk banks about data of donors. This report will eventually be ready for public review. Bottom line is: it varies widely. As for recipients, we have almost zero information from hospitals, but we’re working on that as well. We anticipate that this information (babies who receive milk) will be challenging to obtain from hospitals for various reasons. Speaking specifically about BIPOC communities, we’re teaming up with America’s Essential Hospitals to learn more about PDHM use (or lack thereof) in safety net hospitals. That info is expected later in 2021.
  - The Hearts Milk Bank collects demographic data on donors. National data for the UK isn’t available but the UK Association for Milk Banking is once again collecting and collating data on all aspects of milk donation with a view to publishing this going forwards. Recipient data is more challenging as the information is collected and maintained by individual hospitals. The main issue of equity of access to DHM in the UK is as a result of individual clinician’s attitudes towards its use. There has been an increase in availability and provision of DHM in recent years and all NICUs should have access if they choose to use it.

- **Q3**: With all the challenges that have emerged for milk banks over the past year, which countries have tackled problems in ways other countries can learn from? I.e. the example that Brazil had a huge decrease in donations and responded with a media campaign. What other examples exist? I’m sure many lessons being shared through the Global Alliance of Milk Banks and Associations.
  - Many examples exist in the following publication: Maintaining human milk bank services throughout the COVID-19 pandemic: A global response (Shenker, Maternal Child Nutrition) [https://onlinelibrary.wiley.com/doi/10.1111/mcn.13131](https://onlinelibrary.wiley.com/doi/10.1111/mcn.13131) (section 3.2) and specifically country examples are found in the supplemental
Q4: What are the impacts from COVID on demand for DHM?
   ○ South Africa: demand for donor milk rose and spiked along with the spikes in infection rates, but the difference in second wave compared to the first wave was in a demand for mothers on ventilators or dying (due to COVID-19) rather than mothers just isolating at home due to not being able to be in the neonatal unit with other mothers and babies, as was mostly the case in the first wave.
   ○ Interestingly, the HMBANA members (US and Canada) saw a decrease in demand early on. That has leveled out.

Q5: What are needed next steps for future pandemic preparation?
   https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30134-6/fulltext

   “We therefore collectively call on global policy leaders and funding agencies to recognise and prioritise the need to address four high-impact areas: (1) ensuring neonatal nutrition is an essential focus during emergencies; (2) funding research to optimise human milk bank systems in response to new infectious threats; (3) investing in innovation across all aspects of milk banking processes to improve the responsivity, access, and quality of donor milk provision; and (4) supporting the integration of learnings and innovations by the global milk bank community during COVID-19 into newborn, nutrition, and emergency response planning for future emergencies.”