

TWENTIETH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

HOUSE OF REPRESENTATIVES

House Bill No. 4140



Introduced by REPRESENTATIVES LANI MERCADO-REVILLA,
BRYAN B. REVILLA AND RAMON JOLO REVILLA III

AN ACT
STRENGTHENING BREASTFEEDING SUPPORT AND SAFE DONOR HUMAN MILK
ACCESS IN DISASTERS, CALAMITIES, AND OTHER EMERGENCY SITUATIONS,
AND FOR OTHER PURPOSES

EXPLANATORY NOTE

In December 2021, when Typhoon Odette struck the town of San Jose in Dinagat Islands, first-time mother Gilla faced one of her toughest challenges as a parent. After the storm, resources were scarce and basic needs were hard to come by. For Gilla, breastfeeding became her lifeline.

“I didn’t have to spend on or search for formula milk,” she said. “Breastmilk is more nutritious. Even though everyone was getting sick, my baby never got severely ill.” Breastfeeding not only sustained her child’s health, it also helped her cope from the emotional strain of surviving a disaster.

Good nutrition is crucial during crises. Babies and young children are among the most vulnerable, as unsafe living conditions, dirty water, and poor sanitation can quickly cause illness, infection, or even death. Disasters and public health emergencies make infant feeding even more difficult, especially when formula milk, clean water, and sterilization facilities are unavailable. Yet, with the right support, most mothers can still breastfeed even under extreme conditions.

At present, the only explicit reference to breastfeeding in emergencies in national law is found in Republic Act No. 11148, or the *First 1,000 Days Act*, which mandates “women-friendly and child-friendly spaces where mothers and their infants will be able to continue breastfeeding during calamities, disasters, or other emergencies.” While this is a positive step, it is limited to providing safe spaces and does not set out the broader measures needed to fully integrate breastfeeding support into all phases of disaster preparedness, response, and recovery.

This bill seeks to close that gap. It recognizes breastfeeding mothers, infants, and young children as a special group with unique needs during emergencies, and mandates concrete support across three phases: Pre-Disaster Preparedness, Disaster Response, and Post-Disaster Recovery. It also establishes a *Breastfeeding in Emergencies Fund* to make sure help is timely, focused, and well-coordinated.

Filing this measure during Breastfeeding Awareness Month underscores the importance of protecting and promoting breastfeeding not only in ordinary times, but also in the most challenging situations. It affirms the State's duty to safeguard the health and welfare of mothers and children, while strengthening the country's ability to respond to disasters with resilience and compassion.

In view of the foregoing, the immediate passage of this bill is earnestly sought.

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*Be it enacted by the Senate and House of Representatives of the Philippines in
Congress assembled:*

SECTION 1. *Short Title.* – This Act shall be known as the “Breastfeeding in
Emergencies Act.”

SEC. 2. *Declaration of Policy.* – It is the policy of the State to uphold the right to
health of mothers and children, consistent with the Constitution and international
commitments, to ensure proper care, nutrition, and health for all.

The State recognizes that breastfeeding mothers and their infants are a
vulnerable population with unique nutritional, medical, and psychosocial needs during
disasters, calamities, and other emergency situations. Disruptions to breastfeeding in
such contexts heighten the risk of malnutrition, illness, and mortality among infants and
young children.

Towards this end, the State shall:

- (a) Integrate breastfeeding support and safe donor human milk access into
disaster risk reduction and management (DRRM) systems at all levels;
- (b) Ensure preparedness, immediate response, and sustained post-disaster
recovery measures to protect, promote, and support breastfeeding; and
- (c) Safeguard against practices that undermine breastfeeding.

SEC. 3. *Definition of Terms.* – For purposes of this Act, the following terms are
defined as follows:

- (a) *Breastfeeding* refers to the act of feeding an infant or young child with breastmilk, either directly from the breast or expressed, regardless of whether the child receives other food or liquids.
- (b) *Breastfeeding Corner* refers to a safe, clean, and private space in an evacuation center, hospital, or community facility where mothers can breastfeed or express milk in comfort and dignity.
- (c) *Donor Human Milk* refers to breastmilk voluntarily expressed and donated by a healthy lactating woman, which has been screened, tested, pasteurized, and stored according to Department of Health (DOH) standards.
- (d) *Emergency Donor Milk Hub* refers to a DOH-accredited public hospital with a milk bank, or a designated facility equipped to collect, store, and distribute donor human milk during emergencies.
- (e) *Lactation Kit* refers to a portable set of supplies for breastfeeding mothers during emergencies, which may include, but is not limited to: a breastfeeding cover/scarf, reusable water bottle, feeding cup, nutritious snacks, sanitary supplies, and educational materials on breastfeeding.
- (f) *Infant and Young Child Feeding (IYCF)* refers to the appropriate feeding practices for children under two years old, as defined in DOH and World Health Organization guidelines.
- (g) *Safe Cross-Nursing* refers to the practice of a healthy lactating woman breastfeeding another child, with both parties screened for health and consent given, in accordance with DOH guidelines.

SEC. 4. Pre-Disaster Preparedness. – To ensure that breastfeeding support is fully integrated into disaster risk reduction and management plans, the DOH, in coordination with the Department of Social Welfare and Development (DSWD), Department of the Interior and Local Government (DILG), Office of Civil Defense (OCD), National Disaster Risk Reduction and Management Council (NDRRMC), Philippine Commission on Women (PCW), local government units (LGUs), and other relevant agencies, shall undertake, but not be limited to, the following measures:

- (a) Strictly enforce existing breastfeeding laws, including Republic Act No. 10028, or the *Expanded Breastfeeding Promotion Act of 2009*, before disasters strike;
- (b) Designate and prepare Emergency Donor Milk Hubs in strategic regions;
- (c) Conduct regular donor human milk drives;
- (d) Develop and disseminate culturally appropriate public education campaigns on breastfeeding in emergencies;
- (e) Pre-position portable lactation kits for rapid deployment;

- (f) Training responders, healthcare providers, and community volunteers on breastfeeding support and IYCF support during emergencies; and
- (g) Promote safe cross-nursing as an alternative in medically justified situations.

SEC. 5. *Disaster Response.* – During disasters, calamities, and other emergencies, concerned agencies, in coordination with humanitarian partners and local stakeholders, shall immediately implement, but not be limited to, the following measures to protect, promote, and support breastfeeding:

- (a) All evacuation centers, temporary shelters, and hospitals shall establish breastfeeding corners staffed by trained personnel;
- (b) Breastfeeding mothers shall be provided with additional food rations and clean water;
- (c) Lactation counsellors and IYCF support teams shall be deployed to affected areas;
- (d) Psychological first aid and counselling shall be provided to address stress-related lactation issues;
- (e) Donor human milk shall be distributed only under DOH protocols, and only when medically indicated; and
- (f) Distribution of breastmilk substitutes shall be prohibited unless cleared by the DOH as a last resort, consistent with Executive Order No. 51, or The Milk Code of the Philippines, to prevent risks from unsafe preparation.

SEC. 6. *Post-Disaster Recovery* – Beyond the immediate emergency phase, concerned agencies shall carry out, but not be limited to, the following measures to restore, sustain, and further strengthen breastfeeding practices and maternal-child nutrition:

- (a) Mother-baby reunification shall be prioritized in evacuation centers and hospitals;
- (b) Post-disaster shelters shall maintain safe breastfeeding spaces and nutrition support;
- (c) The DOH shall submit an IYCF After-Action Reports to Congress, the NDRRMC, and relevant LGUs within ninety (90) days after each declared disaster; and
- (d) Continuous monitoring shall be conducted to ensure breastfeeding rates return to or improve beyond pre-disaster levels.

SEC. 7. *Funding.* – A *Breastfeeding in Emergencies Fund* is hereby created under the DOH, to be used exclusively for preparedness, response, and recovery activities under this Act.

LGUs may allocate a portion of their Local Disaster Risk Reduction and Management Fund (LDRRMF) for the procurement of lactation kits, donor milk logistics, and breastfeeding facilities.

SEC. 8. *Implementing Rules and Regulations.* – Within sixty (60) days from the effectivity of this Act, the DOH, in coordination with the DSWD, DILG, OCD, NDRRMC, PCW, and other relevant agencies and stakeholders, shall promulgate the necessary rules and regulations for the effective implementation of this Act.

SEC. 9. *Separability Clause.* – If any provision of this Act is declared invalid or unconstitutional, the other provisions not affected shall remain in full force and effect.

SEC. 10. *Repealing Clause.* – All laws, presidential decrees, executive orders, proclamations, rules and regulations, or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SEC. 11. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication in the *Official Gazette* or in at least two (2) newspapers of general circulation.

Approved,