



World Breastfeeding Trends Initiative (WBTi)

# Assessment Tool



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## **WBTi UK Working Group**

<http://www.lcgb.org/wbti/>

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## Indicator 9: Infant and Young Child Feeding during Emergencies

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***Key question:*** *Are appropriate policies and programmes in place to ensure that mothers, infants and young children will be provided adequate protection and support for appropriate feeding during emergencies? (See Annex 9)*

### **Background**

Infants and young children are among the most vulnerable groups in emergencies. Absence of or inadequate breastfeeding and inappropriate complementary feeding increase the risks of undernutrition, illness and mortality. In emergency and humanitarian relief situations the emergency-affected host country and responding agencies share the responsibility for protecting, promoting and supporting optimal infant and young child feeding practices and minimizing harmful practices. Concise Operational guidance on how to ensure appropriate feeding in emergency situations and comply with international emergency standards has been developed by an interagency Infant Feeding in Emergencies Core Group and was adopted at WHA 63.23 in 2010 (Infant and Young Child Feeding in Emergencies. Operational Guidance for emergency and relief staff and program managers, version 2.1, 2007, IFE Core group <http://www.enonline.net/resources/6>). Practical details on how to implement the guidance summarized in the Operational Guidance are included in companion training materials, also developed through interagency collaboration as well as part of the UN Nutrition Cluster capacity building materials. All these resources are available at [www.enonline.net/IFE](http://www.enonline.net/IFE)

### **Possible Sources of Information:**

The national authorities (or equivalent) responsible for emergency preparedness and response and designated staff in national health and nutrition and other relevant programmes should be contacted for information on policy and guideline development and implementation of preparedness and response activities. They should be in a position to provide a detailed list of the criteria necessary to protect, promote and provide support for appropriate infant and young child feeding practices during emergencies. This list provides useful references and information to assist in scoring the criteria presented below.

<i>Guidelines for scoring</i>			
<b>Criteria</b>	<b>Scoring</b>		
	√ <b>Check that apply</b>		
	Yes	To some degree	No
9.1) The country has a comprehensive policy on infant and young child feeding that includes infant feeding in emergencies and contains all basic elements included in the IFE Operational Guidance	2	1	0
9.2) Person(s) tasked with responsibility for national coordination with all relevant partners such as the UN, donors, military and NGOs regarding infant and young child feeding in emergency situations have been appointed	2	1	0
9.3) An emergency preparedness and response plan based on the practical steps listed in the Operational Guidance has been developed and put into effect in most recent emergency situations, and covers:			
a) basic and technical interventions to create an enabling environment for breastfeeding, including counseling by appropriately trained counselors, support for relactation and wet-nursing, and protected spaces for breastfeeding	1	0.5	0
b) measures to minimize the risks of artificial feeding, including an endorsed statement on avoidance of donations of breastmilk substitutes, bottles and teats, and standard procedures for handling unsolicited donations, and procurement management and use of any infant formula and BMS, in accordance with strict criteria, the IFE Operational Guidance, and the International Code and subsequent relevant WHA resolutions	1	0.5	0
9.4) Resources have been allocated for implementation of the emergency preparedness and response plan	2	1	0
9.5)			
a) Appropriate orientation and training material on infant and young child feeding in emergencies has been integrated into pre-service and in-service training for emergency	1	0.5	0

management and relevant health care personnel. b) Orientation and training is taking place as per the national emergency preparedness and response plan	1	0.5	0
<b>Total Score:</b>	<b>-----/10</b>		

**Information Sources Used (please list):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Conclusions** (*Summarize which aspects of emergency preparedness and response are appropriate and which need improvement and why. Identify areas needing further analysis*):

**Gaps** (*List gaps identified in the implementation of this indicator*):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Recommendations** (*List actions recommended to bridge the gaps*):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## Infant and young child feeding in emergencies

### Criteria for appropriate emergency preparedness policies and programmatic measures at the national level

#### 1) The country has a comprehensive policy on infant and young child feeding that includes infant feeding in emergencies and contains all basic elements included in the IFE Operational Guidance

Essential items to address in a national policy are included in:

*Infant and young child feeding in emergencies: operational guidance for emergency relief staff and programme managers. Interagency Working Group on Infant and Young Child Feeding in Emergencies, version 2.1, February 2007 (adopted WHA 63.23) – <http://www.enonline.net/resources/6> (available in 13 languages)*

Key points from the Operational Guidance (see full text for listed practical steps)

1. Appropriate and timely support of infant and young child feeding in emergencies (IFE) saves lives.
2. Every agency should endorse or develop a policy on IFE. The policy should be widely disseminated to all staff, agency procedures adapted accordingly and policy implementation enforced (Section 1).
3. Agencies should ensure the training and orientation of their technical and non-technical staff in IFE, using available training materials (Section 2).
4. Within the United Nations (UN) Inter-agency Standing Committee (IASC) cluster approach to humanitarian response, UNICEF is likely the UN agency responsible for co-ordination of IFE in the field. Also, other UN agencies and NGOs have key roles to play in close collaboration with the government (Section 3).
5. Key information on infant and young child feeding needs to be integrated into routine rapid assessment procedures. If necessary, more systematic assessment using recommended methodologies could be conducted (Section 4).
6. Simple measures should be put in place to ensure the needs of mothers, infants and young children are addressed in the early stages of an emergency.
  1. Support for other caregivers and those with special needs, e.g. orphans and unaccompanied children, must also be established at the outset (Section 5).
7. Breastfeeding and infant and young child feeding support should be integrated into other services for mothers, infants and young children (Section 5).
8. Foods suitable to meet the nutrient needs of older infants and young children must be included in the general ration for food aid dependent populations (Section 5).
9. Donated (free) or subsidised supplies of breastmilk substitutes (e.g. infant formula) should be avoided. Donations of bottles and teats should be refused in emergency situations. Any well-meant but ill-advised donations of breastmilk substitutes, bottles and teats should be placed under the control of a single designated agency (Section 6).
10. The decision to accept, procure, use or distribute infant formula in an emergency must be made by informed, technical personnel in consultation with the co-ordinating agency, lead technical agencies

and governed by strict criteria (Section 6).

11. Breastmilk substitutes, other milk products, bottles and teats must never be included in a general ration distribution. Breastmilk substitutes and other milk products must only be distributed according to recognised strict criteria and only provided to mothers or caregivers for those infants who need them. The use of bottles and teats in emergency contexts should be actively avoided (Section 6).

**2) A person or team responsible for national response and coordination with all relevant partners such as the United Nations, donors, the military and nongovernmental organizations (NGOs) on issues related to infant and young child feeding in emergencies has been appointed.**

Responsibilities will include:

- Development of a national contingency plan based on the existing national policy and the IFE Operational Guidance.
- Representation of the national government during an emergency response in the following coordination activities: policy development; intersectoral coordination; development of an action plan that identifies agency responsibilities and mechanisms for accountability; dissemination of the policy and action plan to operational and non-operational agencies, including donors; monitoring of the implementation of the action plan
- Involvement of affected communities in the planning process.

**3) An emergency preparedness and response plan based on the practical steps listed in the Operational Guidance has been developed and put into effect in most recent emergency situations , that covers:**

- basic and technical interventions to create an enabling environment for breastfeeding, including counseling by appropriately trained counselors, support for relactation and wet-nursing, and protected spaces for breastfeeding
- measures to minimize the risks of artificial feeding, including an endorsed statement on avoidance of donations of breastmilk substitutes, bottles and teats, and standard procedures for handling unsolicited donations, and procurement management and use of any infant formula and BMS, in accordance with strict criteria, the Operational Guidance, and the International Code and subsequent relevant WHA resolutions

The plan should include the following requirements in an emergency:

- f* Assessment and ongoing monitoring activities will include demographic data disaggregated by age, and data on infant and young child feeding practices and support to determine priorities for action and response.
- f* Conditions will be created to support early exclusive and continued breastfeeding and appropriate complementary feeding (including general conditions and supportive care for all mothers and caregivers, basic aid, and skilled help for mothers/caregivers experiencing problems with feeding, relactation, and wetnursing).
- f* Guidelines that comply with the International Code of Marketing on Breast-milk Substitutes and subsequent World Health Assembly resolutions will be provided on the appropriate procurement, management, distribution, targeting and use of breast-milk substitutes and other milks, bottles and teats; adherence to these guidelines will be monitored and enforced.

- f Current contact information on national infant feeding expert groups that can be consulted in an emergency situation will be available.

Useful Resources include:

- f Media guide on Infant and young child feeding in emergencies. English, French, German, Spanish, Italian, Arabic. <http://www.enonline.net/resources/126>
- f Model joint statement on IFE <http://www.enonline.net/resources/237>
- f Key messages on IFE - for mothers and caregivers. English and French <http://www.enonline.net/resources/735>
- f World Breastfeeding Week, 2009. 'Breastfeeding, a vital emergency response: are you ready?' <http://www.worldbreastfeedingweek.net/wbw2009/index.htm>
- f Many more resources can be found at: <http://www.enonline.net/resources/tag/121>

#### **4) Resources have been allocated for implementation of the emergency preparedness and response plan**

Check if any preparedness activities are/have been carried out (development of policy, identification of coordination person or team, orientation and training) and with what funds; check if any funds have been set aside for an eventual emergency, and if any emergencies have taken place, if any funds/what funds were allocated to infant and young child feeding

#### **5) Appropriate orientation and training material on infant and young child feeding in emergencies has been integrated into pre-service and in-service training for emergency management and relevant health care personnel.**

Materials include:

- f Policies and guidelines relevant to infant and young child feeding in emergencies.
- f Appropriate knowledge and skills to support caregivers in feeding infants and young children in the special circumstances of emergencies.

Note: Basic information on infant and young child feeding in emergencies should be provided to all who may be involved in humanitarian assistance work, including policy-makers and decision-makers who will act in an emergency, agency staff (headquarters, regional, desk and field staff) and national breastfeeding specialists.

Useful training materials include:

##### For orientation:

Core group in Infant feeding in Emergencies, Module 1, Orientation Package on IFE, v2.1, 2010. English. <http://www.enonline.net/ife/orientation>

- This is a package of resources to help in orientation on infant and young child feeding in emergencies (IFE). These resources are targeted at emergency relief staff, programme managers, and technical staff involved in planning and responding to emergencies, at national and international level.
- The IFE Orientation Package, an update of Module 1 on IFE (essential orientation), a print content first produced in 2001, uses the Operational Guidance on IFE as a guiding framework to support its implementation. This package supports the content of HTP Module 17 on Infant and Young Child Feeding, v2.0, 2010.

- The IFE orientation package comprises e-learning lessons, training resources, technical notes, key resources, and an evaluation guide.

For technical training:

- Module 2. Infant and young child feeding. For health and nutrition staff, v1.1, 2007. English, French, Bahasa (Indonesia) and Arabic <http://www.enonline.net/resources/722>.
- Integration of Infant and Young Child Feeding into Community based Management of Acute Malnutrition. October 2009. English and French <http://www.enonline.net/resources/722>
- IASC Nutrition. Harmonized Training Package, Cluster Module 17 on Infant and young child feeding in emergencies. <http://www.enonline.net/resources/761>

Other key useful orientation and training materials developed by the IFE core group see

**<http://www.enonline.net/resources/tag/128>**