

A LEARNING AND SHARING CAFÉ: IYCF PROGRAMMING IN THE CONTEXT OF COVID-19

UN CAFÉ D'APPRENTISSAGE ET DE PARTAGE: PROGRAMMATION D'ANJE-U DANS LE CONTEXTE DE COVID-19

UN CAFÉ PARA APRENDER Y COMPARTIR : PROGRAMAR ANJE-U EN EL CONTEXTO DEL COVID-19

ندوة التعلم والمشاركة: برامج تغذية الرضع والصغار في سياق انتشار كورونا

Tuesday 27<sup>th</sup> October 2020 (2-3:30pm, Geneva time)



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**Note:** *This webinar is made possible by the generous support of all of our donors, however, the contents are the responsibility of the Tech RRT and the individual presenters and do not necessarily reflect the views of these donors.*

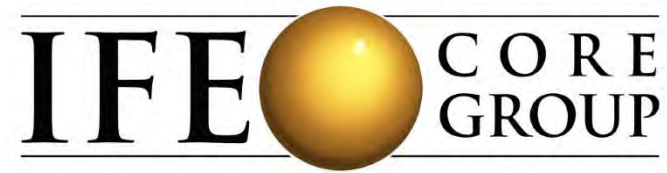
# Webinar Objectives

1. Create a platform where countries can share their experiences in adapting IYCF programmes in emergency contexts and in the context of COVID-19.
2. Reflect on how global guidance have helped and have been used in inspiring and guiding these adaptations.
3. Encourage others to submit ideas for a next world café.



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# Learning and sharing café' organizers



**Note:** *This series of webinars and café' was conceptualized, planned and organized under the umbrella of the Infant Feeding in Emergencies Core Group (IFE Core), the chair of the committee is Save the Children, with great support from IFE CG Coordinator, UNICEF, WFP, USAID Advancing Nutrition and the Tech RRT*

# Webinar Agenda

1. Objectives and introductions
2. IYCF-E response in Syria during COVID-19
3. IYCF programming during COVID-19 in Sierra Leone
4. IYCF-E interventions in Lebanon
5. Interactive game/quiz
6. Questions & Answers
7. Evaluation, recommendations and closing



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# Today's Presenters



**Deborah Joy Wilson**

Maternal, Infant and  
Young Child Nutrition  
Specialist  
WFP HQ



**Brooke Bauer**

IYCF advisor, Tech RRT



**Laila Madwar**

Health and Nutrition Officer  
UNICEF Qamishli Field Office



**Bayan Ahmad**

*Senior Field Officer - South &  
Nabatieh*  
International Orthodox  
Christian Charities (IOCC)



**Kristie Smith**

Health and Nutrition Head of  
Department  
Action Against Hunger (AAH)



**Aashima Garg**

Nutrition Specialist  
Young Children Diets  
UNICEF NY HQ



**Mohamed AU Sesay**

Deputy Director  
Community Action for the  
Welfare of Children (CAWeC)



**Peggy Koniz-Booher**

Senior Advisor, Nutrition &  
SBCC  
USAID Advancing Nutrition



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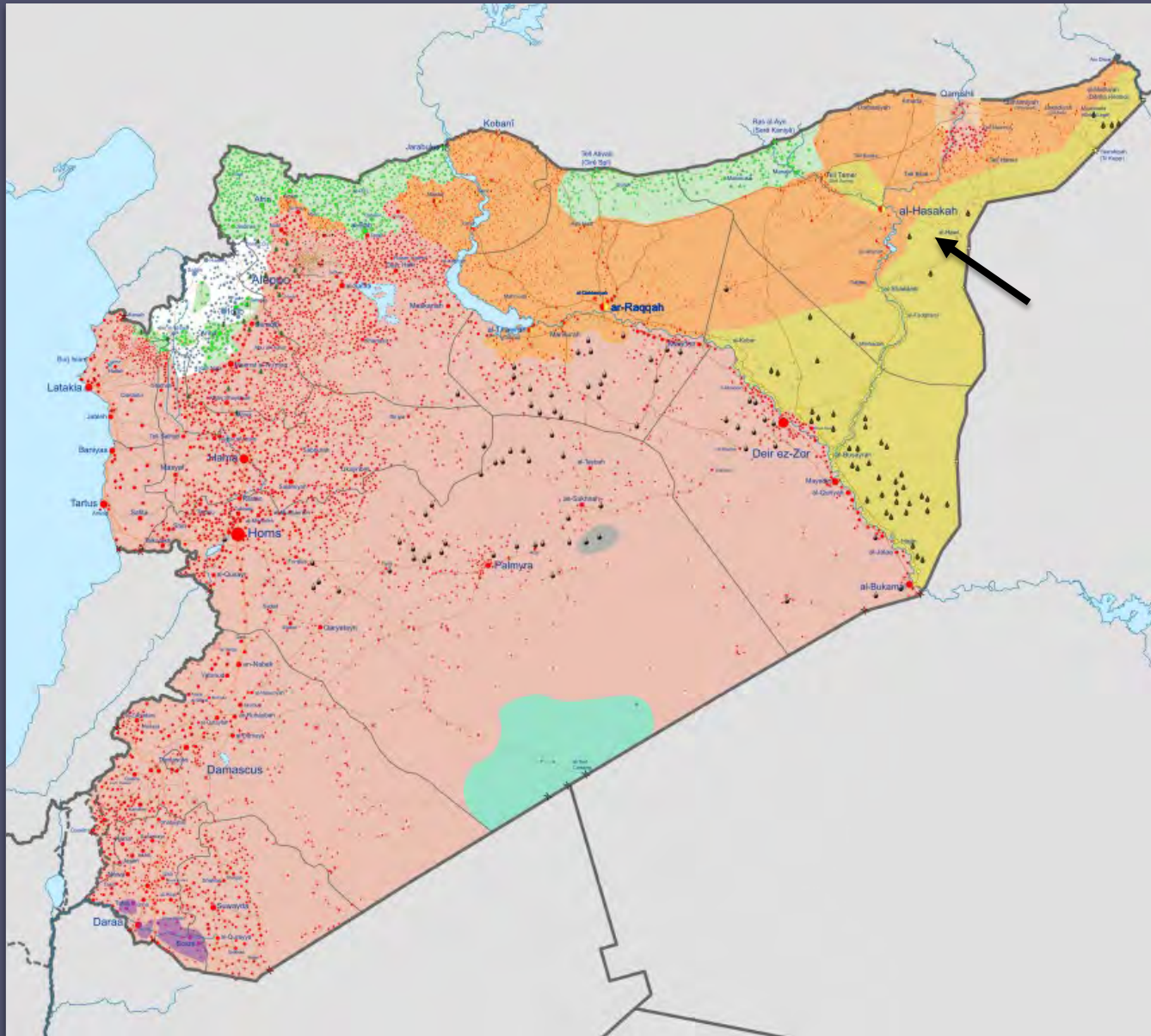
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Laila Madwar  
Qamishli field office - UNICEF  
Syria  
Oct 2020

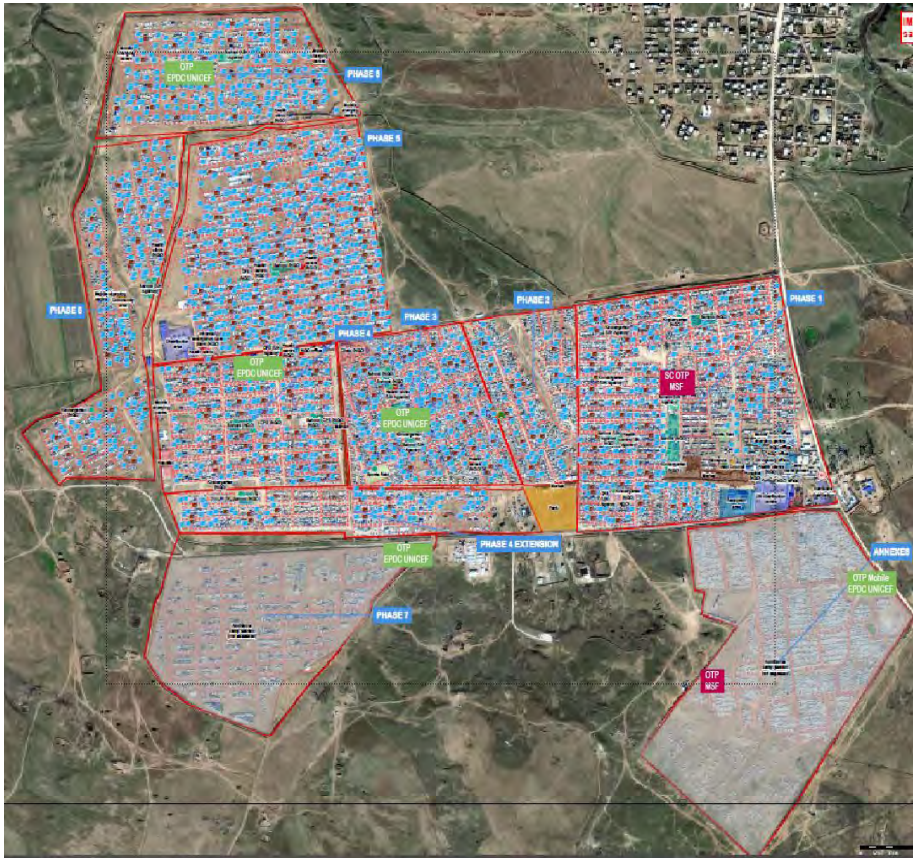


AL Hole Camp:  
Establishing re-lactation following  
separation of mother and child



Background  
of emergency:  
Syria Map  
Al-Hole camp

# Background of emergency



- ✓ Syria/Al-Hole camp
- ✓ **Type of emergency:** humanitarian conflict, displacement.
- ✓ **No. people affected:** Al-Hole camp is a home to 64,723 people.
- ✓ **Separation of Mother and Child:** There is restriction of movement of mothers outside the camp.

# Pre-emergency available data

- UNICEF and Save the Children rapid IYCF-E assessment:
  - Initiation rates within 1 hour
    - 34%
  - Never initiated breastfeeding
    - 12%
  - Exclusive breastfeeding
    - 65%
  - Not breastfeeding
    - 0%
  - Infant formula dependent infants
    - 8%

## Pre-COVID/emergency Programming

- Group counselling on breastfeeding and complementary feeding.
- Individual counselling; however, it wasn't very technical, leaning more towards key messages.



# The disruptions brought by emergency to the IYCF-E programme

- Sudden displacement.
- Lack of information: lack of preparedness plan.
- High GAM.
- High mortality rate for children under 5.
- **Donation of infant formula; part of assistance. Pushback on re-lactation**
- Psychological status of mothers.
- Security situation; separation between mothers and children.



## Programme adaptations

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- IYCF-E operational guidance: as baseline for our intervention, contextualization through the sector.
- Capacity building activities: counsellors inside the camp, referral pathway.
- Integrating child protection and IYCF-E services: referral pathway, identification of cases.



# Programme adaptations

## **During separation of mother and child**

- Context & reasons of separation: children's referral outside the camp for health related reasons, lack of secondary health services inside the camp, restricted movement outside the camp.
- UNICEF counsellors are notified.
- BF mother is counselled on expressing milk to avoid discomfort.

## **After reunification of mother and child**

- Child is reunited with mothers.
- UNICEF counsellors are notified & tent visit.
- Upon mother's consent, re-lactation commences:
  - Tube feeding attached to mother's breast (full re-lactation needed).
  - Assistance in position, psychosocial support (partial re-lactation needed).
- On Average, the process took 14 days-34 days.
- Majority of children were under 6 months old.



# Programme adaptations

- IYCF simplified measures under the context of COVID-19.
- Group counselling sessions Vs individual counselling
- Criteria for individual counselling (use of cup feeding, tube feeding integration with breastfeeding...etc).



## Challenges

- Inflation of population.
- Lack of preparedness.
- Push to use Breastmilk substitutes
- Cultural and religious context.
- WASH-related issues.



## Enablers during adaptation

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- Strong C4D element in IYCF programs.
- Inter-sectoral approach.





## What is working well?

- Community leaders as advocacy tool.
- Mother support groups.



## Lessons Learned

- The top 3 lessons learned:
  1. Re-lactation can be established successfully with appropriate IYCF counselling support to the mother.
  2. Close coordination with health & child protection sectors.
  3. Closed camps need a comprehensive intervention.
  4. The importance of C4D element in IYCF.
- The top 2 ideas on how the intervention you supported will be continued and could be adapted by other partners in countries and other countries
  1. Advocacy for application of international code of BMS marketing and donations.
  2. Integration of child protection and nutrition activities.



Thank You

# IYCF Programming during COVID-19 in Sierra Leone

Kristie Smith

*Action Against Hunger*

Mohamed AU Sesay

CAWeC

October 27, 2020





# Humanitarian Context

- Sierra Leone is recovering from conflict, disease outbreaks and environmental shocks
  - Decade long civil war ending in 2002
    - 70,000 casualties
    - 2.6 million people displaced
  - The Ebola Virus epidemic in 2014
    - 3,955 casualties
    - Major toll on the economy, food security, and use of basic social services
  - Mudslide in 2017
    - 1,145 casualties
  - Flooding in 2019
    - Substantial destruction of roads and infrastructure
    - 5,000 people lost shelter
- Substantial economic growth in recent years but post-conflict attributes still felt
  - High youth unemployment
  - Corruption
  - Weak governance
  - Poor infrastructure
  - Fragile health system
  - High rates of food insecurity
- Index COVID-19 case in March 2020



# ICYF practice prior to the onset of COVID-19

Key Statistics	
Percentage of children ever breastfed:	98.7%
<i>Within 1 hour of birth:</i>	54.5%
<i>Within 1 day of birth:</i>	92.6%
Exclusive breastfeeding 0-5 months:	52.2%
<i>Continued breastfeeding at 1 year:</i>	85%
<i>Continued breastfeeding at 2 years:</i>	38.3%
Minimum Dietary Diversity 6-23 months:	24.2%
<i>Minimum Meal Frequency:</i>	42.7%
<i>Minimum Acceptable Diet:</i>	10.2%
Percentage of Children 0-23 months who were fed with a bottle with a nipple:	17.8%



Sierra Leone Multiple Indicator Cluster Survey 2017

# Programming Prior to COVID-19

- PROSSAN: Health Systems and Services Strengthening Program
  - Three year program reaching over 170,000 beneficiaries
- Engage community structures on IYCF and care practices
  - Training and support to 320 mother support groups and 22 father support groups
- Lead mothers and fathers counsel on IYCF and care practices
  - Individual counseling
  - Regular MSG/FSG meetings
  - Education and awareness raising activities with broader stakeholders



# COVID-19 Disruptions to the Program

- Individual counseling sessions stopped
  - Both lead mothers and community members feared transmission
- Mother and father support group meetings suspended
  - AAH suspended community engagement activities
  - Group members feared transmission
- Education and awareness raising sessions for community members stopped
  - Limit on group gatherings during COVID-19
- Confusion over COVID-19 precautionary measures

# Program Adaptations

- Conducted a rapid behavior assessment in communities
  - Assessed COVID-19 perceptions and trusted sources of information
  - Used data to inform program adaptations
- Adapted USAID pictorial IYCF counseling cards to the Sierra Leone context
  - Trained lead mothers to counsel using new cards
- Trained Lead Mothers and Fathers to be peer educators
  - Continue individual counseling on IYCF and care practices
  - Encourage health seeking behaviors



# Program Adaptations

- Community Q&A sessions
  - Key stakeholders and community members encouraged to attend
  - Discuss perceptions, myths, and current preventative recommendations
  - Sessions led by Social Mobilization Officers from the District Health Management Teams (DHMT)
- Mass media campaigns on IYFC and care practices
  - Developed & aired informative jingles
  - Held panel discussions on radio with DHMT representatives
  - Used Public Address (PA) system for community sensitization



# Testimonial from the community



# Challenges

- Evolving COVID-19 messages from many sources, often contradictory
  - Confusion and mistrust of information
  - High levels of misinformation circulating
- General mistrust of the health care system
  - Initial drop in health seeking behaviors
- Reduction in adherence to precautionary measures over time
  - Difficult to observe social distancing
- Limited testing, low case load and perceived politicization of the pandemic
  - People do not believe the virus is real
  - People do not follow precautionary measures
- Difficult for community members to procure IPC materials (facemasks; hand hygiene)
  - Challenge for lead mothers and fathers



# Enablers during adaptation

- COVID-19 adapted IYCF counselling cards
  - Key in educating caregivers
- Lead mothers and fathers conducting individual counselling
  - Trusted voices in their communities
- AAH and CAWeC field staff provide technical support and coaching for lead mothers and fathers
  - Monitoring and supervision ensures quality
- Community sensitization using multiple mediums
  - Important during the absence of usual programming
  - Consistent messaging reaching many people
  - Opportunity for community engagement on IYCF
- Community Q&A sessions engages stakeholders
  - Opportunity to address individual perceptions
- Government support at national & district level
  - Directorate of Food and Nutrition adapted national IYCF protocols and messaging for COVID-19
  - DHMT Social Mobilization and Nutrition Unit led community Q&A sessions and radio panel discussions





# What is working well?

- Training lead mothers and fathers on IYCF during COVID-19
  - Background knowledge on IYCF and care practices
  - Motivated to be part of the response
- Individual counselling in the community
  - Keeps MSG/FSG members engaged
  - Peer education increases willingness to practice precautionary measures
- Turn out at health facilities is improving
  - ANC days and growth monitoring visits
- Radio panel discussions are reaching a wide audience
  - Listeners call in with questions
  - Radio is a trusted source of information
- Community Q&A sessions are addressing misinformation surrounding IYCF and COVID-19
  - Improved understanding of the pandemic



# Perspectives from a Lead Mother



*This Lead Mother was initially trained with Action Against Hunger in 2014. She received training on IYCF during COVID-19 and now does individual counseling in her community. She has direct experience with the pandemic as her daughter tested positive for COVID-19 and her family was quarantined in their home.*

Thank You  
*Tenki*



**ACTION  
AGAINST  
HUNGER**





# IYCF-E Interventions in Lebanon



**International Orthodox Christian Charities (IOCC), Lebanon**  
**Bayan Ahmad, Senior Field Officer**  
**Oct 27<sup>th</sup>, 2020**



# Current Situation in Lebanon



- **879,598 Registered Syrian Refugees dispersed across Lebanon**
- **57,246 COVID cases since Feb 21<sup>st</sup> 2020**
- **Lebanon's economy in crisis**
- **More than 200 fatalities and 6,500 injuries from Beirut explosion**



Beirut Port Explosion – August 4<sup>th</sup>, 2020



Map of Lebanon



# IYCF practices in Lebanon: Pre-COVID



Exclusive breastfeeding rate for infants less than 6 months: 14.8%  
(MICS, 2009)



More than 72% of children do not breastfeed anymore after their first year of age (MICS, 2009)

Only 41.6% of infants introduced to complementary foods at 6 months (MICS, 2009)



Less than 2% of Syrian refugee children in Lebanon from 6 to 23 months consume a diet that is appropriate for their age (frequency, quantity, and diversity) (VASyR, 2017)

# Nutrition Situation - during COVID

**Mothers using infant formula and other products not optimal to feed their infants  
(IOCC, 2020)**

**Reduction of meals and the consumption of meat, dairy, fresh vegetables, and fruits  
(IOCC, 2020)**

**45% of PLWs need support, including nutrition and breastfeeding counseling  
(UNFPA, 2020)**

**50% of Lebanese, 63% of Palestinians and 75% of Syrians felt worried they would not have enough food to eat over the past month  
(WFP, Sep 2020)**

**11% of the Syrian refugees going a whole day and night without eating and 21% skipping meals  
(WFP, 2020)**



# Pre - COVID IYCF Activities

- Provision of **IYCF counseling sessions and support** to 10,000 Pregnant and Lactating Women all over Lebanon
- **Raising awareness on IYCF** to reach 9,000 caregivers across Lebanon and **referral** of mothers in need to the Lactation specialists
- Monitor and support the hospitals enrolled in the **Baby Friendly Hospital Initiative Program (BFHI)**
- Development of a **complementary feeding material** and **building the capacity** of the healthcare providers working in nurseries on the developed material
- Adaptation and contextualization of **IYCF counseling cards** with COVID-19







# Challenges brought by the Emergencies



**Adjusting modalities to ensure appropriate IPC measures are being followed**

**Need to procure PPEs and print IEC materials on COVID-19**




**Inability to conduct group sessions for a big number of beneficiaries**

**Need to obtain approvals for awareness sessions and home visits**

**Additional trainings on IPC and COVID-19 for the staff were needed**

**The random distribution of BMS and the fact that this assistance is considered as a benefit (challenge brought by the blast and the economic crisis)**

**Separating mothers with COVID-19 from their newborns**

Challenges brought by COVID-19	Adaptation
<p>Inability to conduct group sessions for a big number of beneficiaries</p> <p>Additional trainings on IPC and COVID-19 for the staff were needed</p>	<p>Increase in the frequency of awareness sessions due to the reduction of the # of attendees/group =&gt; Increased workload on staff</p> <p>Mobilization of volunteers to support in the awareness raising and coordination with municipalities</p> <p>All IOCC staff received necessary trainings on COVID-19 and IPC guidelines</p> <p>Procurement of PPEs to protect staff working on field and reduce the risk of contracting COVID-19</p>
<p>Adjusting modalities to ensure appropriate IPC measures are being followed</p> <p>Need to obtain approvals for awareness sessions and home visits</p>	<ul style="list-style-type: none"> <li>• Use of alternative modalities to deliver key messages (open areas with social distancing, remote work over the phone, social media, Zoom and Whatsapp..., reduction of number of attendees..)</li> <li>• Development and printing of IEC materials to be distributed in supermarkets, shops..</li> </ul> <div style="text-align: right;">  </div> <div style="text-align: center;">  </div> <div style="text-align: right;">  </div>

# Pre and Post COVID pictures



Group session - Before



IYCF Counseling - Before



Group session - After



IYCF Counseling - After

## Challenges brought by the blast and the economic crisis

- Random distribution of BMS and the fact that this assistance is considered as a benefit
- Solicitation of donations



## Adaptation

- Identification of formula milk providers to build their capacity on IYCF and inform them of the national and international guidelines on IYCF-E
- Contribution in the development of an infographic and the IYCF SOP to guide and inform agencies on how to ensure appropriate, timely, and safe IYCF-E support.
- Set up the national IYCF hotline: to report on the BMS violations and refer mothers in need to the lactation specialists.



## STANDARD OPERATING PROCEDURES FOR INFANT AND YOUNG CHILD FEEDING IN EMERGENCY IN LEBANON<sup>1</sup>

Version 1 – September 7, 2020

### CONTEXT

Protecting and supporting breastfeeding in normal situations and particularly in emergencies is key, as breastfeeding protects against the increased risks of illness among infants, ensures safe and optimal nutrition for the baby and provides a comforting environment for both the mother and baby. Exclusive breastfeeding of infants during the first six months, with no introduction of other food or drinks, not even water, is the recommended nutrition, as it meets the nutritional requirements of the infant and provides valuable protection from disease and infection. After 6 months, the infants' requirements increase beyond what is provided by breast milk alone, and therefore infants should receive complementary foods in addition to breastfeeding up to two years and beyond.

Infant and young child feeding practices in Lebanon fall short of recommendations with only 14.7% of infants less 6 months exclusively breastfed<sup>2</sup> and not more than 13% of infants 6-23 months meeting the minimum acceptable diet<sup>1</sup> for complementary feeding. Despite the presence of a National Infant and Young Child Feeding Policy<sup>3</sup> and a national law (Law 47/2008)<sup>3</sup> that legislates the International Code of Marketing of Breast-milk Substitutes and subsequent resolutions (the Code), field reports are still showing

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# Achievements

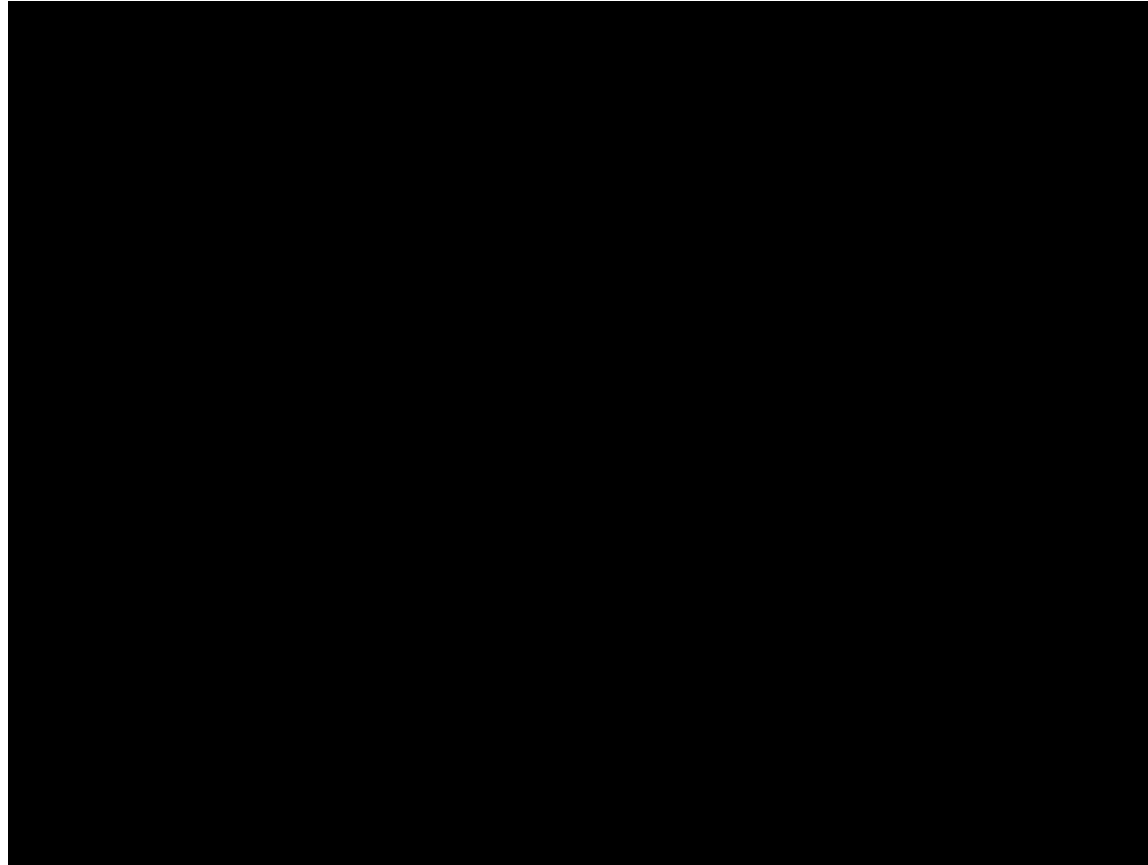
Since the start of the pandemic (on Feb 21<sup>st</sup>) till mid October 2020:

- The lactation specialists were able to reach 9,000 women and provided them with the needed IYCF counseling and support
- The CHEs were able to reach 15,900 caregivers and provided them with education on IYCF and COVID-19





# Testimonial from a mother





# Enablers during adaptation

Active involvement in the HWGs, Nutrition platform and national IYCF committee

Management support by implementing appropriate actions and interventions to promote, support and protect IYCF

Quality of services/ Staff commitment and dedication

Strong relationship with stakeholders (municipalities, community influencers...)

Trust from the community/Long history and presence at community level

People already had phones and there was internet connection





# Way Forward!

**Continuation of  
community based  
IYCF activities**

**Advocacy with  
stakeholders to  
engage them in  
the awareness  
raising**

**Advocacy so that the  
Law 47/2008 and the  
code are taken into  
consideration in all  
responses during and  
after COVID**

**Collaboration  
with authorities  
to obtain  
approvals for  
awareness  
sessions and  
home visits..**



**Republic of Lebanon  
Parliament**

Law No. 47 of 11/12/2008  
Official Gazette No. 55 of 13/12/2008

**Organizing the Marketing of Infant and Young  
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**Organizing the Marketing of Infant and Young  
Child Feeding Products and Tools**

# THANK YOU AND STAY SAFE!

## الأمهات المرضعات وفيروس كورونا المستجد

إذا كنت مصابة بفيروس كورونا المستجد أو تعتقد  
إنك مصابة فيه، فيكي ترضعي طفلك، من المهمّ تتبعي  
الخطوات التالية خلال الرضاعة الطبيعيّة:



نُصّفي وطهّري  
دائماً أي سطح  
بتلمسيه.

غسّلي إيديك منيح  
بالصابون أو بمطهر  
قبل وبعد لمس  
أو حمل طفلك.

لبسي كمامة طبيّة  
بس تكوني حدّ  
طفلك.

منظمة  
الصحة العالميّة  
لبنان

يونيسف  
لكل طفل

الجمهورية اللبنانيّة  
وزارة الصحة العامّة

## الرضاعة الطبيعيّة وفيروس كورونا المستجد

اعتمدي الرضاعة الطبيعيّة  
لحماية أطفالك من الأمراض  
لينموا بطريقة صحيّة.

الرضاعة الطبيعيّة بتلعب دور  
فخّال لوقاية الطفل من الأمراض  
المعدية، لأنّ بتقوّي جهاز المناعة  
عن طريق نقل أجسامه مضادة  
من الأم للطفل.



منظمة  
الصحة العالميّة  
لبنان

يونيسف  
لكل طفل

الجمهورية اللبنانيّة  
وزارة الصحة العامّة

## الأمهات المرضعات وفيروس كورونا المستجد

إذا كنت بتعاني من عوارض حادة  
من فيروس كورونا المستجد أو  
من مضاعفات تانية بتمنعك من  
رعاية طفلك أو رضاعه مباشرة  
من الثدي، اسحبي حبيب الثدي  
لتغذي طفلك بأمان.



منظمة  
الصحة العالميّة  
لبنان

يونيسف  
لكل طفل

الجمهورية اللبنانيّة  
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# Quiz



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Q&A



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UNICEF / Frank Dejongh

## How can I get support?

	Type of supported needed	Provider	Contact
1	I want remote or in-country technical support	Tech RRT or others through the GNC Technical Alliance	GNC Technical Alliance
2	I want to hire a consultant directly	GNC Technical Alliance Consultant Rosters	
3	I want quick technical advice	GNC HelpDesk	

In all cases please go to:

<https://gtam.nutritioncluster.net/>

and click “Request Support”



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**Thank you!**

Please fill out the webinar evaluation  
(it will direct you when you close the webinar),  
it will take less than 5 minutes

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And we will point you in the right direction  
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