

Simplified Guidelines for the delivery of Infant Young Child Feeding (IYCF) services in the context of COVID-19

The first COVID-19 case in Pakistan was reported on 26th February 2020 and within a month the pandemic had affected almost all the country. To slowdown the spread of the virus, the country adopted a set of non- pharmaceutical measures including movement restriction and closure of non-essential business and services. This has significant impact on availability and uptake of health and nutrition service at facility level and significantly limit organization of outreach and community-based interventions including promotion of adequate Infant and Young Child Feeding (IYCF) practices.

Evidence shows that an estimated 22% of newborn deaths could be prevented if breastfeeding is started within the 1st hour after birth; 16% if it's started in first 24 hours. Also, important to note is that Infants who are not breastfed are 15 times more likely to die from pneumonia and 11 times more likely to die of diarrhea than those who are exclusively breastfed for the first 06 months of life. Breastfeeding reduces infection related mortality considerably among infants. There is a dire need to continue efforts for improving breastfeeding in the country and saving newborns and children from preventable causes of mortality.

The National Nutrition Survey 2018 showed that Infant and Young child feeding (IYCF) practices are suboptimal with early initiation of breastfeeding observed in only 45.8 per cent% of cases and less than one in two newborns exclusively breastfed. Various indicators of complementary feeding are also very low, leading to an unacceptably low proportion of children receiving a quality meal in line with the minimum acceptable diet.

Selected Infant and young child feeding indicators	
Percentage who were breastfed in first hour of birth	45.8%
Exclusive breastfeeding (0–5 months):	48.4%
Initiation of solid, semi-solid and soft foods (all infants aged 6-8 months):	35.9%
Minimum meal frequency (6–23 months):	12.8%
Minimum dietary diversity	13.2%
Minimum acceptable diet	3.1%

In light of the current situation and the need to social distancing and to follow the Infection Prevention Control (IPC) measures along with the need of the continuity of IYCF services to reduce the morbidity and mortality associated with severe malnutrition a simplified way of ensuring the continuity of IYCF is the need of time.

The simplified IYCF guidelines in COVID-19 context are developed to help service providers to continue promoting IYCF messages at community and facility levels in an environment safe for the service provider, the child and the caregiver.

Infection Prevention Control (IPC) measures to be observed at the nutrition service delivery site.

Organization of IYCF Corner/ Breastfeeding Corner

- 1- Avoid crowding inside the IYCF corner. 01 mother with baby can sit in IYCF corner for counselling.
- 2- Clean IYCF corner with recommended disinfectant (e.g 0.05% sodium hypochlorite (that is, 1-part bleach to 99 parts water) before it is used by another caregiver.
- 3- Make necessary arrangement to ensure that mothers keep at least two-meter distance while waiting for their turn to get inside the IYCF corner.

- 4- Provision of face mask and gloves for IYCF counsellor are essential at IYCF Corner to deliver IYCF services.
- 5- Recommended disinfectants and hygiene measures (soap and water or hand sanitizers) are made available for breast examination.
- 6- Availability of face masks for mothers.
- 7- Key IYCF messages in the context of COVID should be displayed in the form of posters/ wall charts inside the IYCF corner or within the facility.
- 8- Use IYCF counselling cards, developed in the context of COVID to counsel caregivers.
- 9- It is mandatory that IYCF counsellor should wash hands with soap and water for minimum of 20 seconds/ use hand sanitizer before and after handling the case.

Safety measures for IYCF counsellors/service providers at facility

1. Hand washing for minimum of 20 seconds/use sanitizers before and after dealing with mothers/ caregivers.
2. Wear gloves, if need to handle mothers for breastfeeding support or examination of breast, in case of any complication reported by mother.
3. Use of surgical/medical mask while in the facility.
4. Follow IPC protocol for lactation management procedures.
5. Avoid touching eyes, nose and mouth.
6. Keeping a minimum of two -meter distance between the beneficiaries while waiting for their turn to be seen.
7. Keeping safe distance of two- meter between mothers/ caregiver and IYCF counsellors
8. Avoid crowding or group IYCF session inside the facility.
9. If you, or others, have to cough or sneeze, cover your mouth and nose with your bent elbow or use a tissue to prevent droplets from spraying. Safely dispose of used tissues after use and wash your hands with soap and clean running water.

Organization of IYCF community outreach services

1. In case of no mobility restriction, community outreach worker (LHWS/CHWs) can visit to mother individually for counselling, while practicing social distance of two-meters.
2. Community outreach workers will follow all IPC measures (Face mask, handwashing/ sanitizers & Gloves).
3. Avoid crowding and no community group sessions will be organized.
4. Instead of daily visit, community outreach will be planned on weekly basis.
5. Use IYCF counselling cards, developed in the context of COVID to counsel caregivers.
6. In case of mobility restriction, community outreach for IYCF services will be linked to mobile nutrition services only.

Safety measures for IYCF counsellors/service providers at community level

1. Hand washing for minimum of 20 seconds/ use sanitizers before and after dealing with mothers/ caregivers.
2. Wear disposable gloves, if supporting mother in breastfeeding at home.
3. Use of face mask while in the community.
4. Avoid touching eyes, nose and mouth.
5. Keeping a minimum of two-meters distance between the beneficiaries and itself during IYCF counselling.

6. Avoid crowding or group IYCF session in the community.
7. If you, or others, have to cough or sneeze, cover your mouth and nose with your bent elbow or use a tissue to prevent droplets from spraying. Safely dispose of used tissues after use and wash your hands with soap and clean running water.

Alternative modality for IYCF counselling/awareness (In case of complete lockdown)

The lockdown situation might lead to the limited availability of and access to nutritious food choices at household level, due to which the caregivers could feel overwhelmed with childcare and feeding responsibilities. Provision of specific guidance on age appropriate and safe complementary foods and feeding practices, using digital, broadcast and social media platforms, will support parental decision making.

1. Use of **multisectoral platforms** for wider IYCF messages dissemination, like SUN CSO, SUN networks etc...
2. **Online Training of IYCF counsellors**, Lady Health workers (LHWs) and Community Health Workers (CHWs) on IYCF counseling during COVID situation – **use of electronic & mobile telecommunication**.
3. The lock down situation may lead to the limited access to mothers/caregivers, due to which **use of social and mass media (Radio, TV, print media)** is highly recommended.
4. **Alternative community engagement** choices, like **use of mosque announcement**, are also recommended for use.
5. IYCF awareness messages dissemination to the beneficiaries through **food/cash distribution points set up by Govt (e.g. PDMA), NGOs, CBOs etc....**
6. **Linking IYCF with mobile CMAM services**, wherever present.

Key Messages for IYCF counsellors/service providers to be used during IYCF counselling in COVID context

A. Mothers with suspected or confirmed COVID-19 and isolated at home¹

1. Mothers should always wash hands with soap and water for minimum of 20 seconds at critical times, including before and after contact with the infant.
2. Routinely clean the surfaces around the home that the mother has been in contact with, using soap and water.
3. If the mother has respiratory symptoms, use of a face mask when feeding or caring for the infant is recommended, if available. Locally available / adaptive face mask can be used as an alternative.
4. IYCF counsellors/LHWs/CHWs should use “Infant and Young Child Feeding (IYCF) When COVID-19 is Suspected or Confirmed” counselling cards.

B. Breastfeeding mothers:

1. Mothers should be counselled/advised to continue breastfeeding should the infant or young child become sick with suspected, probable, or confirmed COVID-19 or any other illness.
2. Mothers should always wash hands with soap and water for minimum of 20 seconds at critical times, including before and after contact with the infant.
3. Routinely clean the surfaces around the home that the mother has been in contact with, using soap and water.

¹ INFANT & YOUNG CHILD FEEDING IN THE CONTEXT OF COVID-19 Brief No. 2 (v1) (March 30th, 2020)

C. If mother is facing difficulty in breast feeding:

1. Mothers should be counselled/advised to feed the baby with a clean spoon and cup after expressing her milk. It is mandatory that she should wash hands with soap and water for minimum of 20 seconds before expressing milk, handling cups

D. Complementary Feeding in the context of COVID-19:

1. Caregivers should be counselled/advised/receive practical, feasible and context specific information on the importance of healthy diets and solutions to enable families in maintaining a healthy diet together with intake of safe and palatable drinking water for their young children.
2. If access to fresh produce is difficult, identify healthy food options to replace fresh produce.
3. Limit highly processed foods (like chips, pappar etc..) that are of low nutritional value being typically high in saturated fat, free sugars and salt.
4. Avoid sugary drinks, tea and follow-on milks.
5. It is important for young children to consume enough fruits and vegetables, wholegrains and protein sources.
6. Use safe water for drinking and cooking. If you are not sure about the safety of the water, boil it.
7. Feed your baby with care. Be patient and actively encourage your baby to eat. Do not force your baby to eat.

E. IPC measures should be used by the all mothers/caregivers also while practicing safe food preparation/ handling to reduce risk of transmission of COVID-19.

1. Before preparing or eating food, caregivers should ensure they practice the recommended hygiene behaviors such as handwashing with soap for a minimum of 20 seconds.
2. Regular cleaning and disinfecting of food preparation areas with 0.05% sodium hypochlorite (that is, 1-part bleach to 99 parts water).
3. In communities where eating at a common bowl or feeding children by hand is common, it is preferable to use the child's own plate and spoon to avoid transmission.
4. Refer child immediately to a health center / hospital child if he /she develop fever, dry cough, and difficulty in breathing.

Reporting and monitoring of IYCF services in COVID context

1. Use of communication matrix for reporting on # of population reached through multiple channels on IYCF messaging
2. Short simple one pager monthly SitRep based on prioritized IYCF indicators in COVID context
 - ✓ # IYCF corners operational with trained staff on IYCF counselling in COVID situation
 - ✓ # Health Care Providers (HCPs) working at facility and community outreach workers (LHWs) who are trained on IYCF in COVID context
 - ✓ # of key SBCC materials on IYCF in COVID context produced.
 - ✓ # of people reached with IYCF awareness and communication efforts.

Breast milk feeding options for feeding non-breastfed children in COVID 19

1. Re-lactation: If breastfeeding is interrupted – for example due to temporary separation – mothers with children under age 12 months should be encouraged and supported to re-establish breastfeeding while practicing IPC measures.

- Breast pump “supplementer” devices, that allow supplementation during suckling, should be hygienically safe before use.



DECISION TREE

for breastfeeding in context of COVID-19:
Guidance for health care and community settings

