



PRACTICAL GUIDELINES FOR CONDUCTING INFANT AND YOUNG CHILD FEEDING (IYCF)

SUPPORT GROUP SESSIONS

IN THE CONTEXT OF COVID-19



ACKNOWLEDGEMENTS

These guidelines were developed by Save the Children with the support of the members of the Steering Advisory Group and was made possible by the generous support of the American people through funding by the United States Agency for International Development (USAID). The contents are the responsibility of the lead agency and do not necessarily reflect the views of USAID or the United States Government.

The guidelines were developed by Save the Children's technical team and led by **Alessandro Iellamo**, Global Infant and Young Child Feeding in Emergencies Advisor, **Sebsibie Teshome**, Humanitarian Nutrition Advisor, **Sarah O' Flynn**, Director, Emergency Nutrition and **Patricia Welch**, Emergency Nutrition Advisor.

Save the Children gratefully acknowledges and expresses our gratitude to the following individual and agencies that provided strategic advice and technical expertise:

1. **Armelle Sacher**, Social and Behavior Change Adviser, Action Against Hunger USA
2. **Kiersten Israel-Ballard**, DrPH, Team Lead—Maternal, Newborn, Child Health and Nutrition, PATH
3. **Kimberly Mansen**, MSPH, RDN, Senior Nutrition Officer—Maternal, Newborn, Child Health and Nutrition, PATH
4. **Linda Shaker Berbari**, PhD, Infant Feeding in Emergencies (IFE) Core Group Facilitator (ENN Consultant), IFE Core Group
5. **Lindsay Harnish**, Health Advisor, U.S. Agency for International Development / Bureau for Humanitarian Assistance
6. **Michelle Pensa Branco**, Co-Founder, Clinical Lead, SafelyFed Canada

And we are appreciative of the technical inputs from other colleagues and organizations, including members of the IFE Core Group:

1. **Andrew Beckingham**, Humanitarian Nutrition Advisor, Save the Children
2. **Aunchalee Palmquist**, PhD, MA, IBCLC, Assistant Professor, Carolina Global Breastfeeding Institute, University of North Carolina at Chapel Hill (USA)
3. **Brigitte Tonon**, Regional Health and Nutrition Advisor, Action Against Hunger-France
4. **Brooke Bauer**, Tech RRT IYCF-E Advisor, Save the Children
5. **Dr Bindi Borg**, Independent member
6. **Deborah Wilson**, Inclusive Nutrition Operations Team Lead Maternal, Infant and Young Child Nutrition Specialist Inclusive Nutrition Specialist, World Food Programme
7. **Doreen Emefa Ankamah**, MD, Carolina Global Breastfeeding Institute
8. **Emily Hirata**, Technical Advisor for Health and Nutrition
9. **Janet Okraku-Mantey**, MD, Carolina Global Breastfeeding Institute
10. **Jose Manuel Madrazo Revuelta**, International Programs-Nutrition Officer, Save the Children
11. **Karleen Gribble**, BRurSc, PhD, Adjunct Associate Professor, School of Nursing and Midwifery, Western Sydney University
12. **Maryse Arendt**, Lactation consultant IBCLC, BLL-IBFAN Luxembourg
13. **Raven Dunstan**, Carolina Global Breastfeeding Institute
14. **Sajia Mehjabeen**, Nutrition Advisor, Concern Worldwide

Cover Photo: Mustafa Saeed / Save the Children

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	II
ACRONYMS	IV
DEFINITION OF TERMS USED IN THIS GUIDANCE	V
1. INTRODUCTION	1
1.1. Infant and Young Child Feeding	1
1.2. Impacts of COVID-19 on maternal and child health and nutrition services	2
2. ABOUT THE GUIDELINES	3
2.1. Objectives of the guidelines.....	4
2.2. Target users	4
3. IYCF RECOMMENDATIONS IN THE CONTEXT OF COVID-19	5
4. IYCF SUPPORT GROUPS IN THE CONTEXT OF COVID-19	6
4.1. General considerations for facilitating IYCF support group sessions in the context of COVID-19.....	6
4.2. Specific considerations for IYCF support group sessions in the context of COVID-19.....	9

ANNEXES	16
Annex 1. General COVID-19 recommendations	16
Annex 2. IYCF recommendations in the context of COVID-19.....	18
LIST OF RESOURCES FOR IYCF/IYCF-E IN THE CONTEXT OF COVID-19	21

ACRONYMS

BMS:	Breastmilk Substitutes	SOP:	Standard Operating Procedure
COVID-19:	Coronavirus Disease 2019	Tech RRT:	Technical Rapid Response Team (now part of the <i>GNC-TA</i>)
GBV:	Gender-Based Violence	UN:	United Nations
GNC:	Global Nutrition Cluster	UNICEF:	United Nations Children’s Fund
GNC-TA:	Global Nutrition Technical Alliance	WHO:	World Health Organization
GTAM:	Global Technical Assistance Mechanism for Nutrition		
IFE:	Infant Feeding in Emergency		
IYCF:	Infant and Young Child Feeding		
IYCF-E:	Infant and Young Child Feeding during Emergency		
LMIC:	Low- and Middle-Income Countries		
NGO:	Non-Governmental Organizations		
OG-IFE:	Operational Guidance on Infant and Young Child Feeding in Emergencies		
PIF:	Powder Infant Formula		
RUIF:	Ready to Use Infant Formula		
SARS-CoV-2:	Severe Acute Respiratory Syndrome Coronavirus 2		
SBCC	Social and Behavior Change Communication		
SMART:	Standardized Monitoring and Assessment of Relief and Transitions		
SMS:	Mobile Phone Text Messages (short message service)		

DEFINITION OF TERMS USED IN THIS GUIDANCE¹

1. **Breastfeeding:** The provision of breastmilk directly from the breast.
2. **Breastmilk feeding:** the provision of expressed breastmilk or donor human milk.
3. **Breastmilk Substitute (BMS):** Any food (solid or liquid) being marketed, otherwise represented, or used as a partial or total replacement for breast milk, whether suitable for that purpose. In terms of milk products, recent World Health Organization guidance has clarified that a BMS includes any milk products that are specifically marketed for infants and young children up to the age of three years.
4. **Code monitoring:** Activities including the monitoring and reporting of any violations related to the International Code of Marketing of Breastmilk Substitutes.
5. **Complementary feeding:** The use of age-appropriate, adequate, and safe solid or semi-solid food in addition to breastmilk or a breastmilk substitute in children 6–23 months old.
6. **Coronavirus disease 2019 (COVID-19):** An illness caused by a novel coronavirus now called severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2; formerly called 2019-nCoV).
7. **COVID-19 case definition:**
 - Suspected COVID-19 case: A person who meets the clinical AND epidemiological criteria or a patient with severe acute respiratory illness (SARI: acute respiratory infection with history of fever or measured fever of $\geq 38\text{ C}^\circ$; and cough; with onset within the last 10 days; and requires hospitalization).
 - Probable COVID-19 case: A patient who meets clinical criteria above AND is a contact of a probable or confirmed case, or epidemiologically linked to a cluster with at least one confirmed case.
 - Confirmed COVID-19 case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms. Refer to [WHO case definition](#)² for detailed information.
8. **Education:** In the context of IYCF, education encompasses activities designed to enhance the ability and motivation of caregivers to voluntarily adopt nutrition-related behaviors conducive to health and wellbeing.
9. **Infant:** A child aged 0–11 completed months (may be referred to as 0–<12 months or 0–<1 year). An older infant means a child from the age of 6 months up to 11 completed months.
10. **Infant formula:** A breastmilk substitute formulated industrially in accordance with applicable Codex Alimentarius standards for infants.
 - Commercial infant formula is infant formula manufactured for sale, branded by a manufacturer. Generic infant formula is unbranded.
 - Powdered Infant Formula (PIF) is an infant formula product that needs to be reconstituted with safe water before feeding. Ready-to-use infant formula (RUIF) is a type of infant formula product that is packaged as a ready-to-feed liquid and does not need to be reconstituted with water.
11. **IYCF counselling:** A two-way conversation between a counsellor and mother/caregiver, based on a three-step process that includes assessment, analysis, and action to help the caregiver decide on what is best for themselves and their child in their situation. Counselling is different from education and messaging. Counselling is a way of working with people so that the counsellor understands their feelings and helps them to develop confidence and decide what to do.
12. **International Code of Marketing of Breastmilk Substitutes and subsequent World Health Assembly Resolutions (the Code):** *The Code* intends to ensure BMS will be used as safely as possible when necessary based on impartial, accurate information. The Code does not restrict the availability of BMS, feeding bottles or teats or prohibit the use of BMS during emergencies. In context of the Code, BMS means any food being marketed or otherwise represented as a partial or total replacement for breastmilk, whether suitable for that purpose or not. The Code applies to the marketing and related practices, quality, availability, and information on use, including but not limited to: breastmilk substitutes (including infant

¹ FE Core Group (2017). **Operational Guidance on Infant Feeding in Emergencies (OG-IFE) version 3.0:** available from: <https://www.enonline.net/operationalguidance-v3-2017>

² WHO (2020). WHO COVID-19 Case definition. Available from: https://www.who.int/publications/i/item/WHO-2019-nCoV-Surveillance_Case_Definition-2020.2

formula, follow-on/follow-up milk, growing-up milk, and other milk products, including bottle-fed complementary foods) specifically marketed for feeding children up to three years of age; foods and beverages (baby teas, waters, and juices) when marketed for use as a partial or total replacement of breastmilk during the first six months of life; feeding bottles and teats. Refer to the [OG-IFE operational guidance](#)¹ for more detailed information on this.

13. **IYCF support group:**

- **Mother-to-mother support group (MtMSGs):** A meeting where pregnant women and female caregivers of young children, as well as other women including grandmothers with similar interests, come together in a safe place to exchange knowledge and ideas, share experiences, give, and receive information, and at the same time, offer and receive support in breastfeeding and complementary feeding, child caring practice, hygiene, and women's health.
- **Father-to-father support group (FtFSGS):** Similar to mother-to-mother support groups except the facilitator and participants are fathers and or other male caregivers. In addition, there are some topics like the role of men in child health and gender roles covered under father-to-father support group that are not covered under mother-to-mother support group meetings. Refer to the [FtFSG guidelines](#)³ for detailed information.

14. IYCF message dissemination: the sharing and spreading of key IYCF messages through different approaches, channels, and information.

15. Young child: A child from the age of 12 months to the age of 23 completed months (may also be referred to as 12–<24 months or 1–<2 years).

16. Monitoring: The ongoing collection and review of information on project implementation, coverage, and utilization that is reported and acted on, on an on-going basis.

17. Evaluation: A process of collection and examination of data designed to assess the effectiveness of a project in attaining its originally stated objectives and the extent to which observed changes are attributable to the project.

3 USAID (2015). Facilitator's Guide for Father-to-Father Support Groups. Available from: <https://www.spring-nutrition.org/publications/tools/facilitators-guide-father-father-support-groups>

I. INTRODUCTION

I.1. Infant and Young Child Feeding

Infant and young child nutrition focuses on the critical window of opportunity for preventing malnutrition that exists during the 1,000 days between conception and a child's second birthday. Evidence shows that receiving the recommended nutrition during this time can have a lasting positive impact on a child's growth, learning, and future productivity.⁴

Breastfeeding is the most cost-effective intervention to improve child survival. The scaling up of breastfeeding to a near universal level could prevent 823,000 annual deaths in children younger than 5 years and 20,000 annual deaths from breast cancer.⁵

At around 6 months, the growing infant has increased demand for energy and nutrients in addition to what is provided by the breastmilk. The introduction of complementary foods at this time is necessary to meet those needs. It is important that complementary feeding is timely, safe, adequate, and properly fed.



Photo Credit: Save the Children, El Salvador

- 4 USAID. Infant and Young Child Nutrition Project. Available from: <http://www.iycn.org/about/addressing-urgent-needs/#:~:text=IYCN%20focused%20on%20the%20critical,strong%2C%20healthy%2C%20productive%20future>
- 5 Victora CG, Bahl R, Barros AJ, França GV, Horton S, Krasevec J, Murch S, Sankar MJ, Walker N, Rollins NC; Lancet Breastfeeding Series Group. Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect. *Lancet*. 2016 Jan 30;387(10017):475-90. PMID: 26869575.

1.2. Impacts of COVID-19 on maternal and child health and nutrition services

The COVID-19 pandemic is an unprecedented global emergency affecting almost every country in the world with millions of confirmed cases and deaths.⁶ The United Nations has declared the pandemic a health and human crisis that is threatening the food and nutrition security of millions of people living across the world – more so for those that were already living in humanitarian and fragile environments.⁷

Research findings showed there have been disruptions/and or reductions in key maternal and child health services in many countries due to COVID-19. In Nepal a sharp increase was seen in maternal mortality during the 2-month lockdown period between March and May 2020 due to lack of access to health services for birthing.⁸ A recent study shows that, if mothers with confirmed SARS-CoV-2 infection are recommended to separate from their newborn babies and avoid or stop breastfeeding, additional deaths

among infants would range between 188,000 and 273,000.⁹ Research findings showed IYCF support groups can improve knowledge and IYCF practices.^{10,11} However, the COVID-19 pandemic has raised concerns about how IYCF support groups can be safely continued.

6 WHO (2020). COVID-19 updates. Available from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

7 United Nations (2020). Policy Brief: The Impact of COVID-19 on Food Security and Nutrition. Available from: https://namibia.un.org/sites/default/files/2020-06/sg_policy_brief_on_covid_impact_on_food_security.pdf

8 Karkee, R., & Morgan, A. (2020). Providing maternal health services during the COVID-19 pandemic in Nepal. *The Lancet. Global health*, 8(10), e1243–e1244. [https://doi.org/10.1016/S2214-109X\(20\)30350-8](https://doi.org/10.1016/S2214-109X(20)30350-8)

9 Rollins et al. A public health approach for deciding policy on infant feeding and mother-infant contact in the context of COVID-19. *Lancet Glob Health* 2021. Published online February 22, 2021 [https://doi.org/10.1016/S2214-109X\(20\)30538-6](https://doi.org/10.1016/S2214-109X(20)30538-6)

10 Kushwaha, K. P., Sankar, J., Sankar, M. J., Gupta, A., Dadhich, J. P., Gupta, Y. P., Bhatt, G. C., Ansari, D. A., & Sharma, B. (2014). Effect of peer counselling by mother support groups on infant and young child feeding practices: the Lalitpur experience. *PloS one*, 9(11), e109181. <https://doi.org/10.1371/journal.pone.0109181>

11 Save the Children (2019). Effectiveness of a community-based infant and young child feeding support group programme among ethnic minorities in Vietnam. Available from: <https://resourcecentre.savethechildren.net/library/effectiveness-community-based-infant-and-young-child-feeding-support-group-programme-among>

2. ABOUT THE GUIDELINES

These guidelines were developed to support frontline health and nutrition workers, lead mothers and fathers, and community health workers (facilitators) to conduct IYCF support group sessions during the COVID-19 pandemic. These guidelines for IYCF support group sessions will need to be adapted based on the context and should be used in line with the relevant guidance developed for COVID-19. This document is one of a series developed by Save the Children with partners and the technical inputs from the members of the IFE Core Group (Table I).

Table I. Relevant guidelines on IYCF-E and COVID-19

1. **[Infant and Young Child Feeding in Emergencies \(IYCF-E\) Standard Operating Procedure \(SOP\) for Emergency Response Teams \(2020\)](#)**: The IYCF-E SOP was developed due to the identified need for an internal operational guidance document that can illustrate what steps to take and when to take them during the first year of an IYCF-E response.
2. **[Infant and Young Child Feeding in Emergencies \(IYCF-E\) Programming in the Context of COVID-19: Considerations for Adaptations \(2020\)](#)**: This IYCF-E program adaptation tool in the context of COVID-19 is developed to assist program implementers in determining the scale up/scale down of IYCF/IYCF-E activities in response to COVID-19.
3. **[Practical Guidelines for conducting IYCF-home visits in the context of COVID-19 \(2021\)](#)**¹²: Intended to illustrate key considerations to conduct IYCF home visit during the COVID-19 pandemic.
4. **[Practical Guidelines for conducting and Supporting Infant and Young Child Feeding - e-Counselling via telephone with considerations for planning and implementation \(2021\)](#)**¹³: The guidelines aims to support IYCF counsellors to conduct E-counselling/online counselling in the context of COVID-19.

12 Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Practical Guidelines Considerations for conducting IYCF-home visits in the context of COVID-19. Available from: www.iycfehub.org/document/practical-guidelines-for-conducting-infant-and-young-child-feeding-iycf-home-visits-in-the-context-of-covid-19.

13 Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Practical Guidelines for conducting and Supporting Infant and Young Child Feeding - e-Counselling via telephone with considerations for planning and implementation. Available from: www.iycfehub.org/document/practical-guidelines-for-conducting-and-supporting-infant-and-young-child-feeding-e-counselling-via-telephone-with-considerations-for-planning-and-implementation.

2. 2.1. Objectives of the guidelines

These guidelines were developed to help IYCF group session facilitators to continue IYCF support sessions safely during the COVID-19 pandemic.

The specific objectives include:

- Describe the key considerations for facilitating/supporting IYCF support group sessions in the context of the COVID-19 pandemic.
- Provide recommendations when facilitating/supporting IYCF support group sessions in the context of the COVID-19 pandemic.
- Provide tools/resources for adaptation of IYCF programs in the context of COVID-19.

2.2. Target users

These guidelines are primarily intended to be used by IYCF support group facilitators including, but not limited to, frontline health and nutrition workers, lead mothers and fathers, and other relevant community agents.



Photo Credit: Save the Children, Somalia/Somaliiland

3. IYCF RECOMMENDATIONS IN THE CONTEXT OF COVID-19

The general recommendations on how to prevent the spread of COVID-19 ([Annex 1](#)) need to be implemented by everyone in all contexts. Infant and young child feeding (IYCF) support in the context of COVID-19 remains a critical nutrition intervention for the protection and support of pregnant women, caregivers, and their young children. WHO and UNICEF advise caregivers and families with suspected or confirmed COVID-19 to continue the recommended IYCF practices with the necessary hygiene precautions ([Annex 2](#)).



Photo Credit: Save the Children-Somalia/SomaliLand

4. IYCF SUPPORT GROUPS IN THE CONTEXT OF COVID-19

To ensure that support groups will continue during the COVID-19 pandemic, the following tool provides suggestions and recommendations that will need adaptation in line with the national guidance and protocol, and to the context where the groups and support should be facilitated.¹⁴

Please note that the following recommendations are complementary to the protocols being used in relation to the management and support of IYCF support groups.

4.1. General considerations for facilitating IYCF support group sessions in the context of COVID-19

The following are general recommendations to be considered when planning and conducting IYCF support group sessions. Some of the recommendations apply to the facilitators only (e.g., Use of national protocol) but other recommendations apply for both facilitators and the members, mothers/caregivers.



Photo Credit: Save the Children, Somalia/Somaliiland

¹⁴ Global Nutrition Cluster (GNC) Technical Alliance (2020). Guidance and Tools for programmatic adaptations during the COVID 19 pandemic. Available: <https://gtam.nutritioncluster.net/node/34>

Table 2. General considerations when facilitating an IYCF support group

4.

Preparation of the Support Group Sessions

- Laminate relevant social and behavior change communication (SBCC) materials (e.g., counselling cards, job aids, others) used to facilitate the IYCF group sessions. They can be regularly cleaned by the facilitators.
 - Consider allocating resources for the facilitators and members to buy credits for phone and internet, as remote communication and support may increase depending on the context.
 - Provide each facilitator with their own copy of the various SBCC materials being used during the IYCF support group.
 - Provide all members with their own copy of any materials that you may distribute during the IYCF sessions.
 - **Train the IYCF group session facilitators** on COVID-19 (e.g., what is COVID-19, mode of transmission, signs, symptoms, and how to prevent the spread of COVID-19). Provide regular updates to the facilitators on new guidance and health and nutrition messages related to the COVID-19 pandemic.
 - Ensure availability of supplies, including home disinfectants, masks, and water with soap for members of the IYCF support groups and facilitators.
You may also consider providing facilitators and members of the IYCF support groups with their own supply of hand sanitizer (with at least 60% alcohol).
 - Ensure that the locations where the sessions will be conducted have a hand washing facility (with water and soap) or have supplies of hand sanitizer (with at least 60% alcohol) for the sessions.
- Try to conduct activities in well-ventilated places/outdoors if feasible.
- Depending on the situation, you may need to set up a hand washing facility (with running water and soap). If this is the case, you may consider providing the materials to set up a tippy tap for each location¹⁵ with water supply or other similar solutions.
- The facilitator should inform all members (before the session) to bring their own a) mat or b) stool/chair for sitting (this can be done verbally through home visits and/or phone, mobile phone text messages (SMS), or social media messages, as available).
 - The facilitator/s should inform the supervisor/health facility staff if they are not feeling well (using the phone, SMS, or other social media, as available).
 - All members should be asked to inform the facilitator if they are not feeling well (using phone, SMS, or social media messages, as available).
 - Consider the protection of high-risk groups (the elderly and people with illness like heart disease, hypertension, chronic lung disease, etc.) during group sessions. It is not recommended for high-risk groups to participate during the support group session.
If there are members belonging to a high-risk group, ensure that the member receives the updates from the group, key messages, and any support the member may need during this difficult time (this can be done verbally through home visits, but preferably by phone, SMS, or social media messages, as available).

15 WaterAid: How to build a tippy tap <https://www.wateraid.org/uk/sites/g/files/jkxooof211/files/schools-challenge-ks1-tippy-tap-instructions.pdf>

4.

Table 2. Continued (General considerations when facilitating an IYCF support group)

During the Support Group Sessions

- Facilitators and members should clean all hard surfaces (such as chairs and tables) before the start of the session with household disinfectants.
- Social distancing (maintain **at least 1-meter distance** from other people). Support the seating arrangement of the group to ensure the 1 meter (at least) between members.

Suggestions:

- If using mats/stools/chairs, ensure that the 1 meter is maintained, while facilitator and members are sitting *in circle*, maintaining visual contact to ensure open participation.

- Ensure you have the attendance of the group session, record the cell phone numbers (if available) and other relevant details that may help locate the person if and when needed.
- Hand washing: ensure facilitators and members wash their hands with water and soap for 20 seconds, or clean hands with hand sanitizer (with at least 60% of alcohol) at arrival.
- Covering nose and mouth for all facilitators and members based on the national protocol.
- Mothers/caretakers to inform facilitators if they are not feeling well, if possible. This will help the facilitators to reschedule the group session to ensure the safety of all persons.
- Members must not swap or share mats, chairs, and personal items like pens, paper, SBCC materials, others.
- **Do not offer drinks or snacks for the time being (or pack it to be consumed at home)**

After the Support Group Sessions

- Hand washing: facilitators and members to wash hands with water and soap for 20 seconds or clean hands with hand sanitizer (with at least 60% of alcohol) upon departure.
- The facilitators to clean any materials that were used during the IYCF session.
- Facilitators and members to wipe surfaces (such as mats, chairs, and tables) after each session with household disinfectants.
- Properly dispose used materials like face masks and other disposables.

4. 4.2. Specific considerations for IYCF support group sessions in the context of COVID-19

The following table provides specific recommendations on how to safely continue IYCF support groups for the facilitators and the members, according to three specific scenarios and using various modalities, as feasible for the specific context.

The following color-coding scheme will be used:

Red: No in-person IYCF support group sessions or only remote support

Orange: Some in-person IYCF support group sessions with precautions and/or remote support

Purple: Regular in-person IYCF support group sessions with precautions and remote, as needed

The general considerations/recommendations presented in [Table 2](#) apply to IYCF group support sessions regardless of the scenarios presented below, hence they must always be followed.



Table 3. Specific recommendations for IYCF support group sessions (based on different scenarios)

4.

No movement/no access/no gatherings or meetings allowed

Limited movement/limited access

No restrictions in place regarding access and movement

Session(s)

- Consider facilitating remote exchanges between the facilitator and the members.
 - Depending on the local capacity and the capacity of the facilitators and the members, consider orienting the facilitator on how to create groups on the phone (e.g., via WhatsApp) and share relevant messages and SBCC materials, etc., to the members of the IYCF support group.
 - Verify with the members if they can communicate using their a) phones and b) what is the most suitable mode, SMS vs. other social media platforms (e.g., WhatsApp).
 - It is important that the facilitators of IYCF support groups are provided with relevant resources that can be shared using SMS (messages, notices, etc.) or internet with low bandwidth capacity (SBCC materials, link to videos, others).
 - The facilitator may share regular messages and raised questions following the session plan and using the locally available messages.
 - The following are some tips for facilitators when using groups on platforms like WhatsApp or Facebook:
 - Never use offensive language or language that can offend any member of the group.
 - Never use offensive images, posts, pictures that can offend/hurt any member of the group.
 - Never send messages that are judgmental or can be perceived as judgmental by any of the members.
 - For personal issues and concerns, invite the members to contact the facilitator directly (the facilitator will maintain the utmost privacy of the various conversations).
 - Write in a language that the members can understand.
 - Share materials that are respectful of the local culture.
 - Encourage members to respond and contribute, whenever possible.
- The facilitator should encourage the members to use the remote group for:
- Asking advice on infant feeding practices.
 - Raising questions.
 - Accessing resources that the facilitator will share.

- Limited/some in-person sessions can be considered and/or remote (if remote, follow the recommendations under the “no movement” column).
- Comply with the general recommendations in [Table 2](#).
- Follow your session plan.
- Consider adding topics related to:
 - Routine/standard IYCF messages, information on breastfeeding and COVID-19,
 - Information on COVID-19 (symptoms, transmission, provide accurate information to fight rumors, how to prevent the spread of the infection, and what to do in case of infection) and other topics based on the need.
 - Hygiene practices for food preparations, feeding, etc. in line with recommended practices.¹⁶
 - Use your standard approach when facilitating the sessions.

- Full -in-person sessions with remote sessions as needed (if remote, follow the recommendations under the “no movement” column).
- Comply with the general recommendations in [Table 2](#).
- Follow your session plan.
- Consider adding topics related to:
 - Routine/standard IYCF messages, information on breastfeeding and COVID-19,
 - Information on COVID-19 (symptoms, transmission, provide accurate information to fight rumors, how to prevent the spread of the infection, and what to do in case of infection) and other topics based on the need.
 - Hygiene practices for food preparations, feeding, etc., in line with recommended practices.¹⁶
 - Use your standard approach when facilitating the sessions.

4.

No movement/no access/no gatherings or meetings allowed

Limited movement/limited access

No restrictions in place regarding access and movement

Location for the session(s)

- No in person meeting allowed.
- If you were able, set up SMS groups, or groups using social media platforms.
- Other platforms can be used to share relevant messages when SMS or social media platforms cannot be used. Consider using radio, TV, megaphone, or community leaders disseminating messages.

- The health facility (can be considered) or community, and/or remote.
Please note if in the health facility:
 - Verify with the health facility in-charge if the IYCF group sessions can be conducted on site.
 - Ask the members if they are comfortable attending the session in the health facility.
 - » Ensure is not in the vicinity of testing facilities, waiting areas of patients, etc.
 - » Ensure ventilation.
- Facilitating support group sessions inside individual houses or compounds is **discouraged**.
- Recommended to conduct meeting outdoors/in an open place (refer to [Table 2](#)).

- Health facility and/or community and or remote.
Please note if in the health facility:
 - Verify with the health facility in-charge if the IYCF group sessions can be conducted on site.
 - Ask the members if they are comfortable attending the session in the health facility.
 - » Ensure is not in the vicinity of testing facilities, waiting areas of patients, etc.
 - » Ensure ventilation.
- Facilitating support group sessions inside individual houses or compounds is **discouraged**.
- Recommended to conduct meeting outdoors/in an open place (refer to [Table 2](#)).

Facilitator

- Facilitators should be provided with the resources to support the IYCF groups remotely.
- It is important that the facilitators receive relevant resources to be shared with the members from the supervisors, health facility staff, and others.
- The facilitator should consider the general recommendations in [Table 2](#).
- Supervisors and other relevant staff to regularly contact the facilitator for updates, progress reports, and any new information that will be helpful for the person and the IYCF support group.

- Limited movement for facilitators, avoid crowded places and transportations, whenever possible.
- If possible, ensure that the facilitator and participants are from the same local area, if possible.
- Comply with the general recommendations in [Table 2](#).
- Supervisors and other relevant staff to regularly contact the facilitator for updates, progress reports, and any new information that will be helpful for the person and the IYCF support group.

- No restriction of movement for facilitators, but avoid crowded places and transportations, whenever possible.
- Facilitator and participants are from the same local area, if possible.
- Comply with the general recommendations in [Table 2](#).
- Supervisors and other relevant staff to regularly contact the facilitator for updates, progress reports, and any new information that will be helpful for the person and the IYCF support group.

4.

No movement/no access/no gatherings or meetings allowed

Limited movement/limited access

No restrictions in place regarding access and movement

Members of the IYCF support group

- If remote support is feasible, it is important to consider providing financial support to the members when using their personal cellphones.
- If possible, will be important that the facilitators and or other staff conduct home visits in line with the home visit guidelines at least once a month.¹⁴

- Limited movement for participants, avoid crowded places and transportation, whenever possible.
- Comply with the general recommendations in [Table 2](#).
- Ask participants to bring along only the baby/infant that she is carrying and not older children (as much as possible and based on local conditions).
- Ensure that if there are any older children, they are also able to access the hand washing facility.

- Ask participants to bring along only the baby/infant that she is carrying and not older children (as much as possible and based on local conditions).
- Ensure that if there are any older children, they are also able to access the hand washing facility.

Infection Prevention and Control (IPC)

- The facilitator can use SMS and/or social media messages to remind members of the importance of following basic IPC measures.
- Key messages can be shared weekly to the members.
- Links to videos, and other SBCC materials, can be shared weekly to the members.
- The facilitator can use the USAID-UNICEF IYCF COVID-19¹⁶ counselling cards as a source for the messages.

- For general recommendations, please refer to [Table 2](#) and always remind the members of the IYCF support group to follow the rules, not only during the session but always, at home and wherever they are.
- The facilitator should stress the importance of following hygiene practices when preparing food at home.
- Depending on if in person or remote, the facilitator can use the USAID-UNICEF IYCF COVID-19¹⁶ counselling cards as a source for the messages.

- For general recommendations, please refer to [Table 2](#) and always remind the members of the IYCF support group to follow the rules, not only during the session but always, at home and wherever they are.
- The facilitator should stress the importance of following hygiene practices when preparing food at home.
- Use counselling card no.6 of the USAID-UNICEF IYCF COVID-19 counselling cards¹⁶, for key messages and recommendations on food safety in the context of COVID-19.

4.

No movement/no access/no gatherings or meetings allowed

Limited movement/limited access

No restrictions in place regarding access and movement

How to contact/follow up with members

- Remote/online via phone, WhatsApp, Facebook, etc. The facilitator may use SMS or group messages to follow up with members of the group (as a group or individually).
 - The facilitator may want to send individual messages asking members to share how they are, how their babies are, how breastfeeding and complementary feeding are going, and if the member is facing any challenges.
 - All the members should be encouraged to message and/or call the facilitator when they want to talk and share.

- Remote and or in person:
 - Ensure that the members of the IYCF support group are followed up, if possible, through home visits.
 - The follow-up visit is helpful to verify how the member is coping with the situation, and how she is applying the learnings from the group.
 - At the same time, the follow-up will be helpful to share any new information on group sessions, locations, schedules, and others.
 - If possible, follow-ups and communication can be shared using SMS or social media platforms (e.g., WhatsApp), refer to the “no movement” column.

- Remote and or face-to-face (using community leader and agents).

Number of participants

- If groups are created using social media platforms when feasible (via WhatsApp, Facebook etc.), maintain the same number of members as the original group, as they are already familiar with one another.
- Ensure if any member is added to the group, to introduce the person to the group before adding the person to the group.

- Reduce number of participants based on national protocol.
- In general, an IYCF support group should never exceed 15 members.
- If requested to reduce, you may want to break the original group in sub-groups by:
 - Pregnant women
 - Caregivers of children <2 years
 - Other caregivers
 - Adolescent only
 - Etc.
- Support groups are normally open to new members, but in the context of COVID-19, numbers should be limited, and people over 60 years of age or with illness should not be included. Refer to [Table 2](#) for recommendations on high-risk persons.

- Up to a maximum of 15 participants (in line with the standard recommendation).
- Support groups are normally open to new members, but in the context of COVID-19, numbers should be limited, and people over 60 years of age or with illness should not be included. Refer to [Table 2](#) for recommendations on high-risk persons.

4.

No movement/no access/no gatherings or meetings allowed

Limited movement/limited access

No restrictions in place regarding access and movement

Duration of the session

- If groups are created using social media platforms, consider the possibility (in agreement with the members) to have some groups calls.
 - Remember WhatsApp may allow only up to 8 persons at a time to have a call/video call (same limitation with messenger).
 - If this limitation persists, organize two calls.
 - Help each member participate during the call, but always be respectful of each member's situation.
 - Remind the members that if they are not able to join the group calls, the group will be open for sharing anytime.

- Reduce meeting time as per the national guidance/protocol.
- The duration of the meeting in normal situations is around 1 hour.
- If you are considering some remote group sessions, refer to the "no movement" column.

- The duration of the meeting in normal situations is around 1 hour.
- If you are considering some remote group sessions, refer to the "no movement" column.

Frequency of meeting

- If groups were created using social media platforms, will be good to agree with the members to have regular calls (once every 2 weeks or as feasible for the members) on a time of the day that is generally acceptable to the facilitator and the members.

- Decrease frequency of in person meetings.
- Consider alternating in person with remote group calls (e.g., 1 monthly in person, and 1 monthly group call).

- A session every 2 weeks is recommended.

Referral

- Refer cases that need skilled support for individual counselling.
- Refer other cases like medical cases, people suffering from gender-based violence (GBV), etc. to health facilities.

- Refer cases that need skilled support for individual counselling.
- Refer other cases like medical cases, people suffering from gender-based violence (GBV), etc. to health facilities.

- Refer cases that need skilled support for individual counselling.
- Refer other cases like medical cases, people suffering from gender-based violence (GBV), etc. to health facilities.

4.

Resources to be used

No movement/no access/no gatherings or meetings allowed

- The facilitator should be provided with messages and resources that can be shared using SMS and social media platforms.
 - For SMS messages, use available messages developed to be share using the phone.
 - Have messages in the local language so that all members can appreciate.
 - For social media, share short video clips^{17,18} messages, and images that promote recommended IYCF practices.^{17,19,20} Other resources can be found in the IYCFHub.²¹

Limited movement/limited access

- Counselling cards when COVID-19 is Suspected or Confirmed developed by UNICEF and USAID Advancing Nutrition.¹⁶
- UNICEF IYCF key message booklet.²²
- UNICEF counselling cards for community health workers.²²
- IYCF materials developed by the Ministry of Health, etc.
- Dolls, dummy breasts, or other utensils needed for demonstrations (always clean them and do not share with the participants).
- Other resources can be found in the IYCFHub.²¹

No restrictions in place regarding access and movement

- Counselling cards when COVID-19 is Suspected or Confirmed.¹⁶
- UNICEF IYCF key message booklet.²⁴
- UNICEF counselling cards for community health workers.²⁴
- IYCF materials developed by the Ministry of Health, etc.
- Dolls, dummy breasts, or other utensils needed for demonstrations (always clean them and do not share with the participants).
- Other resources can be found in the IYCFHub.²¹

16 UNICEF, USAID (2020). Infant and Young Child Feeding Counselling Cards When COVID-19 is Suspected or Confirmed. Available from: <https://www.advancingnutrition.org/what-we-do/social-and-behavior-change/iycf-recommendations-covid-19>

17 Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Video 1: Key messages to help strengthen infant and young child feeding during the COVID-19 pandemic. Available from: <https://resourcecentre.savethechildren.net/library/key-messages-help-strengthen-infant-and-young-child-feeding-during-covid-19-pandemic>

18 Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Video 2: Counselling Tips for Supporting Pregnant Women and Mothers and Caregivers of Young Children in IYCF during the COVID-19 Pandemic . Available from: <https://resourcecentre.savethechildren.net/library/counseling-tips-supporting-pregnant-women-and-mothers-and-caregivers-young-children-iycf>

19 IFE Core Group (2021). Infographics: Early initiation of breastfeeding during emergencies. Available from: <https://www.enonline.net/initiationofbreastfeedingduringemergencies>

20 IFE Core Group (2021). Infographics: Preventing and managing donations of BMS. Available from: <https://www.enonline.net/breastmilksubstitutesinappropriatedonations>

21 Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). IYCF Platform of resources. Available from: www.iycfhub.org

22 UNICEF (2013). Counselling cards for community health workers. Available from: https://www.unicef.org/nutrition/files/counseling_cards_Oct._2012small.pdf

5. ANNEXES

Annex I. General COVID-19 recommendations²³

The general recommendations applied to both service providers and beneficiaries/caregivers should be followed in addition to the specific recommendations during support group sessions, which will be discussed in detail later in this guidance.

- Hand washing:
 - » Wash hands frequently with water and soap for 20 seconds. Alternatively, clean hands with an alcohol-based hand sanitizer (with at least 60% alcohol).
 - » If hands are visibly dirty, it is recommended to wash with soap and water before using hand sanitizer.
 - » Wash hands after using a tissue and or touching any surface (like coins, door handles, faucets, etc.) that might be contaminated.
 - » Shaking hands is not recommended during the COVID-19 pandemic.
- Covering nose and mouth:
 - » Cover your mouth and nose with your bent elbow or tissue when coughing or sneezing to prevent the spread of infection. Dispose of the used tissue immediately in an appropriate waste basket and wash hands with soap and water.
- » Wear masks or face coverings in enclosed spaces or when physical distancing cannot be achieved (follow national guidelines).
- » Masks/face coverings should always be used during support group sessions and consultations with clients.
- Physical distancing:
 - » Maintain at least 1 meter from other people. An exception to this rule is mothers and infants/young children (close contact and early, exclusive breastfeeding helps a baby to thrive, and the unparalleled benefits of breastfeeding outweigh any potential risk of transmission.)
- Use ventilated space/open space for meetings as much as possible.
- Avoid places that are crowded, closed, or involve close contact.
- No touching: Avoid touching eyes, nose, or mouth with unwashed hands.
- Cleaning and disinfecting: Always clean and disinfect frequently touched surfaces.

23 WHO (2020). Coronavirus disease (COVID-19) advice for the public. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

5.

- Daily health monitoring: Watch for symptoms of COVID-19, including (among others): fever, cough, shortness of breath, and headaches. Check your temperature if symptoms develop and seek medical care immediately. First, call your health facility by telephone and follow the directions given.
- Avoid close contact with people who are sick.



Photo Credit: Save the Children, Philippines

5. Annex 2. IYCF recommendations in the context of COVID-19

During the COVID-19 pandemic, the WHO/UNICEF IYCF recommendations remain the following:

- Breastfeeding initiation immediately after birth (within 1 hour).²⁴
- Exclusive breastfeeding up to 6 months of age.
- Continued breastfeeding up to 2 years and beyond.
- Complementary feeding: Timely introduction of age-appropriate, adequate, safe, and properly fed complementary foods starting from 6 months. Proper hygiene during food preparation and feeding is also important to prevent infections, including COVID-19.

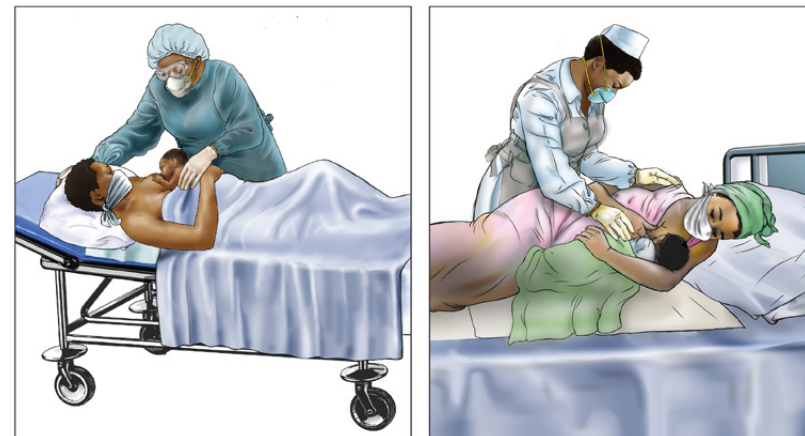
Infant and young child feeding (IYCF) support in the context of COVID-19 remains a critical nutrition intervention for the protection and support of pregnant women, caregivers, and their young children. WHO and UNICEF advise caregivers and families with suspected or confirmed COVID-19 to continue the recommended IYCF practices with the necessary hygiene precautions.

Breastfeeding

- Mothers suspected or confirmed as having COVID-19 should not be separated from their newborns and should be supported and encouraged to breastfeed.

- There is no evidence that SARS-CoV-2 can be transmitted through breastmilk. It is more important than ever that infants be breastfed during the COVID-19 pandemic.
- Breastmilk is the best source of nutrients for babies and it helps protect babies from infectious diseases including COVID-19. COVID-19 poses little risk to infants, but infants not breastfed are at risk of serious illness due to other respiratory infections and diarrhea. The benefits of breastfeeding outweigh any potential risk of COVID-19 transmission.

Take precautions during delivery and rooming-in



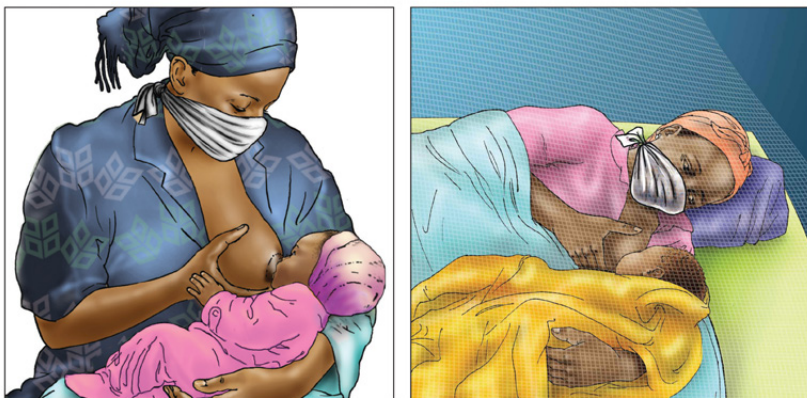
Taken from UNICEF and USAID IYCF Counselling Cards in the Context of COVID-19¹⁶

²⁴ Practicing immediate skin-to-skin placement after birth is important for early initiation of breastfeeding, mothers should room-in with their infants and keep in close contact with them.

5.

- Mothers with respiratory symptoms (e.g., cough, difficulty breathing) or mothers tested positive for COVID-19 and who are well enough to breastfeed should wear a mask or face covering if available and should continue breastfeeding.
- If the mother is too sick to directly breastfeed, her expressed breastmilk can be fed to the baby. Mothers should wash hands before expressing milk.

Take precautions when breastfeeding, day and night



Taken from UNICEF and USAID IYCF Counselling Cards in the Context of COVID-19¹⁶

Alternatives to breastfeeding

- If the mother is not able to breastfeed or express breast milk, look for other safe alternatives for the newborn/infant that are in line with national policies, culturally and socially accepted by the mother and family.
- Wet-nursing (where another woman breastfeeds the child), or donor human milk, if available) are the preferred options, where culturally and socially acceptable (see the WHO decision tree for breastfeeding in context of COVID-19).²⁵ If wet-nursing and donor human milk are not feasible in your context, BMS should be used.
- BMS is the option of last resort when the former options have been exhausted. Measures should be taken to ensure that use of BMS it is feasible, correctly prepared, safe, and sustainable.
- Donations of infant formula milks should not be sought or accepted, in accordance with 'The International Code of the Marketing of Breastmilk Substitutes'.

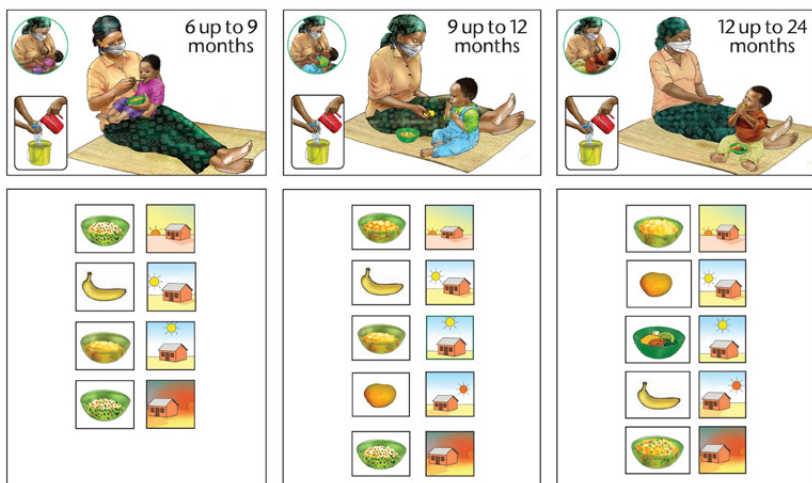
Complementary feeding

- Mothers/caregivers should continue complementary feeding like the general recommendation:
 - » Timely introduction of age-appropriate, adequate, safe, and properly fed complementary foods starting from 6 months of age, combined with continued breastfeeding up to age 2-years of age or beyond.

25 WHO (2020). FREQUENTLY ASKED QUESTIONS: Breastfeeding and COVID-19 For health care workers. Available from: https://www.who.int/docs/default-source/reproductive-health/maternal-health/faqs-breastfeeding-and-covid-19.pdf?sfvrsn=d839e6c0_5

5.

Practice safe complementary feeding



Taken from UNICEF and USAID IYCF Counselling Cards in the Context of COVID-19⁶

Hygiene

- Mothers and caregivers should be encouraged to frequently wash their hands with soap and clean running water for 20 seconds. Frequent hand washing helps to fight the spread of COVID-19, and is important for the health of their baby, and their entire family.
- Mothers/caretakers should always wash their hands during these critical times:
 - » Before preparing and eating foods
 - » Before feeding infants and young children
 - » After using the toilet or latrine
 - » After cleaning the baby's bottom

- Mother/caregivers should frequently clean/disinfect surfaces in the home: clean frequently touched surfaces (such as tables, chairs, doorknobs, light switches, phones, remote controls, door handles, toilets, sinks, etc.) regularly with soap and water or household disinfectant.
- Mother/caregivers should cover their nose and mouth with their bent elbow or tissue when coughing or sneezing and when in contact with the child. They should dispose of the used tissue immediately in an appropriate waste basket. Then wash their hands with soap and water or use an alcohol-based hand sanitizer (with at least 60% alcohol).
- Mother/caregivers should avoid touching their own and the baby's eyes, nose, and mouth.

Wash hands for 20 seconds following these steps



Taken from UNICEF and USAID IYCF Counselling Cards in the Context of COVID-19⁶

LIST OF RESOURCES FOR IYCF/IYCF-E IN THE CONTEXT OF COVID-19

The list below suggests resources that can be used for program implementation and adaptations of programs during the COVID-19 pandemic.

1. Caramerica's Care Group Lessons for COVID-19: <https://www.fsnnetwork.org/resource/caramerica-care-group-lessons-covid-19>
2. WHO (2020). Community-based health care, including outreach and campaigns, in the context of the COVID-19 pandemic. Available from: https://www.who.int/publications/i/item/WHO-2019-nCoV-Comm_health_care-2020.1
3. WHO (2020). Coronavirus disease (COVID-19) advice for the public. Available from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>
4. WHO (2020). Frequently asked questions: Breastfeeding and COVID-19. Available from: <https://www.who.int/publications/m/item/frequently-asked-questions-breastfeeding-and-covid-19>
5. Global Nutrition Cluster Technical Alliance (2020). Guidance and Tools for programmatic adaptations. Available from: <https://gtam.nutritioncluster.net/node/34>
6. IFE Core Group (2021). Infographics: Early initiation of breastfeeding during emergencies. Available from: <https://www.enonline.net/initiationofbreastfeedingduringemergencies>
7. IFE Core Group (2021). Infographics: Preventing and managing donations of BMS. Available from: <https://www.enonline.net/breastmilksubstitutesinappropriatedonations>
8. UNICEF, GNC and GTAM (2020). Infant and Young Child Feeding in the Context of COVID-19 Brief No. 2. Available from: <https://www.unicef.org/documents/infant-and-young-child-feeding-context-covid-19>
9. UNICEF and USAID Advancing Nutrition (2020). Infant and Young Child Feeding Counselling Cards When COVID-19 is Suspected or Confirmed. Available from <https://www.advancingnutrition.org/what-we-do/social-and-behavior-change/iycf-recommendations-covid-19>
10. Save the Children & SafelyFed Canada (2020). Infant Feeding in the Context of COVID-19: FAQ for the front-line health and nutrition workers. Available from: <https://resourcecentre.savethechildren.net/library/infant-feeding-context-covid-19-faq-front-line-health-and-nutrition-workers>
11. Global Breastfeeding Collective (2020). Key advocacy messages on breastfeeding and COVID-19. Available from: <https://www.globalbreastfeedingcollective.org/reports/key-advocacy-messages-breastfeeding-and-covid-19>
12. Save the Children (2020). Community nutrition supervision checklist in the context of COVID-19. Available from: https://www.nutritioncluster.net/Resources_Guideline_remote_support_nutrition_COVID-19
13. Save the Children & Tech RRT (2020). Infant and Young Child Feeding in Emergencies (IYCF-E). Standard Operating Procedure (SOP) For Emergency Response Teams. Available from: <https://www.enonline.net/iycfesopforemergencyteams>
14. Save the Children & Tech RRT (2020). Infant and Young Child Feeding in Emergencies (IYCF-E). Programming in The Context Of COVID-19: Considerations for Adaptations. Available from: <https://www.enonline.net/iycfesopforemergencyteams>
15. Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). IYCFE Platform of resources. Available from: www.iycfehub.org
16. Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Practical Guidelines Considerations for conducting IYCF-home visits in the context of COVID-19. Available from: www.iycfehub.org/document/practical-guidelines-for-conducting-infant-and-young-child-feeding-iycf-home-visits-in-the-context-of-covid-19
17. Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH,

- SafelyFed Canada (2021). Practical Guidelines for conducting and Supporting Infant and Young Child Feeding - e-Counselling via telephone with considerations for planning and implementation. Available from: www.iycfehub.org/document/practical-guidelines-for-conducting-and-supporting-infant-and-young-child-feeding-e-counselling-via-telephone-with-considerations-for-planning-and-implementation.
18. Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Video 1: Key messages to help strengthen infant and young child feeding during the COVID-19 pandemic. Available from: <https://resourcecentre.savethechildren.net/library/key-messages-help-strengthen-infant-and-young-child-feeding-during-covid-19-pandemic>
 19. Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Video 2: Counselling Tips for Supporting Pregnant Women and Mothers and Caregivers of Young Children in IYCF during the COVID-19 Pandemic . Available from: <https://resourcecentre.savethechildren.net/library/counseling-tips-supporting-pregnant-women-and-mothers-and-caregivers-young-children-iycf>
 20. The Partnerships for Maternal, Newborn and Child Health Breastfeeding and COVID-19 video social media toolkit <https://www.who.int/pmnch/media/videos/breastfeeding-covid19-video-socialmedia-toolkit.pdf?ua=1&ua=1>
 21. UNICEF counselling cards for community health workers: https://www.unicef.org/nutrition/files/counseling_cards_Oct_2012small.pdf
 22. UNICEF IYCF key message booklet https://www.unicef.org/nutrition/files/Key_Messages_Booklet_for_counselling_cards.pdf

For more information and resources visit the
Infant and Young Child Feeding in Emergencies Hub

WWW.IYCFEHUB.ORG

